City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

				
Location of Construction: * 12 Veranda St. Portland 04103	Owner: VJD Enterprises	Phone:	207) 874–2909	Permit No: 9 9 051 8
Owner Address: 201 Harvard st. Portland 04103	Lessee/Buyer's Name:	1	ssName:	I SIEN I
Contractor Name:	Paul Thompson * Address:	874-2909 *Davan Phone:	ti Inc.*	Permit Issued:
The Signery			MAY 2 4 1999	
Past Use:	Proposed Use: Hair Salon	COST OF WORK:	PERMIT FEE:	MAX 2 4 1999
Vacant	naii Saion	\$	\$28.00	OTY OF BODT! AND
		FIRE DEPT. □ Approved □ Denied	1 7 7/3	CITY OF PORTLAND
		Deffied	Use Group: Type:	Zone: CBL: 429- C-006
		Signature:	Signature:	
Proposed Project Description:	PEDESTRIAN ACTIVITIES DISTRICT (1.1.1.D.)		Zoning Approver	
Erect Signage	Action: Approved		Special Zulle of Reviewse	
		Approved with Conditions: Denied		= 0.10.0.4114
				□ Flood Zone
		Signature:	Date:	☐ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By: S.P.	Date Applied For: May	17th,1999		
				Zoning Appeal ☐ Variance
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.				☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work				☐ Interpretation ☐ Approved
tion may invalidate a building permit and stop	an work			□Denied
				Historic Preservation
PERMIT ISSUED WITH RECULIFEMENTS				Not in District or Landmark
				□ Does Not Require Review
		W	MARIA ME	□ Requires Review
				Action:
CERTIFICATION				☐ Appoved
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition,				
if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all				Date:
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				
SIGNATURE OF APPLICANT	ADDRESS:	<u>May 17th,1999</u> DATE:	PHONE:	-
RESPONSIBLE PERSON IN CHARGE OF WORK	(TITLE		PHONE:	-
REST STORBERT ERRORT IT CHARGE OF WORK	n, n n n n n n		110110,	CEO DISTRICT 2