City of Portland,	, Maine - E	Building or Use	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389 Congress Stree	t, 04101 Te	el: (207) 874-8703	, Fax: (207) 874-8	8716	2014-01837		429 I001001
Location of Construction:		Owner Name:	Owner Name:		r Address:	-	Phone:
970 BAXTER BLVD		SCARKS MIC	SCARKS MICHAEL K		38 PINERIDGE RD SACO, ME 04072		
Business Name:				ı			
Lessee/Buyer's Name		Phone:	Phone:		it Type:	Zone:	
Greater Portland Council of Govern					ns - Permanent	B2	
Past Use:		Proposed Use:	-		ermit Fee: Cost of Work:		CEO District:
Offices		Same: Offices	Same: Offices (GPCOG)		\$147.00 ECTION:		\$0.00 5
				21 (02 2	20110111		
Proposed Project Descrip For the installation of		8" x 36" (39 sa ft e	ach) attached				
building wall sign (C	5 x 50 (5) sq 1t c	PEDESTRIAN ACTIVITIES DISTR		TIES DISTRICT	CT (P.A.D.)		
		Action: Approved Approved			ved w/Conditions Denied		
				Q:	ianature:		Date:
Permit Taken By:	1	ι.					
dmc		te Applied For: 8/15/2014	Zoning Approval				
1. This permit app	lication does	not preclude the	Special Zone or F	Reviews	Zoni	ing Appeal	Historic Preservation
		oplicable State and	Shoreland		☐ Variano	ce	Not in District or Landmar
 Building permits do not include plumbing, septic or electrical work. 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 			☐ Wetland		Miscell	aneous	Does Not Require Review
			Flood Zone		Conditi	onal Use	Requires Review
			☐ Subdivision ☐ Site Plan		Interpre	etation	Approved
					Approv	red	Approved w/Conditions
	Maj Minor MM		Denied		Denied		
			Date:		Date:		Date:
Thomas and Contract			CERTIFICA			4 1.	4
							by the owner of record and that all applicable laws of this
jurisdiction. In additi	ion, if a perm	it for work describe	ed in the application	is issu	ied, I certify tha	t the code offic	cial's authorized representative
shall have the authori such permit.	ty to enter al	l areas covered by s	uch permit at any re	easonal	ble hour to enfo	rce the provisi	on of the code(s) applicable to
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE	PHONE