City of Portland, Ma	ine - Building or Use	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04	101 Tel: (207) 874-8703	Fax: (207) 874-8	8716	2014-01390		444 A001001
Location of Construction:		Owner Address:		-	Phone:	
54 COMMERCIAL ST CITY OF		ORTLAND		389 CONGRESS ST PORTLAND, ME 04101		o, ME
Business Name:						
Casco Bay Lines						
Lessee/Buyer's Name	Phone:			it Type:	Zone:	
				e Alarm System	EWPZ WCZ	
Past Use:	Proposed Use:			it Fee: Cost of Work:		CEO District:
Casco Bay Lines - Ferry	Same: Casco I	Same: Casco Bay lines - Ferry		\$120.00 \$9,800.00 CTION:		00.00 2
Proposed Project Description:						
	System (Casco Bay Lines)					
•		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		(P.A.D.)		
		A	Action: Approved Approved w/C		red w/Conditions Denied	
			Si	ignature:		Date:
Permit Taken By: Date Applied For: 06/25/2014			Zoning Approval			
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ing Appeal	Historic Preservation
		☐ Shoreland		☐ Variano	ce	Not in District or Landmar
2. Building permits do septic or electrical w	Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are within six (6) months	Flood Zone		☐ Conditi	onal Use	Requires Review	
False information mapermit and stop all w	Subdivision		Interpre	etation	Approved	
	Site Plan		Approv	red	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
		CERTIFICA	A TION	J.		
I have been authorized by jurisdiction. In addition, i	the owner to make this apple f a permit for work describe	amed property, or the lication as his authored in the application	nat the orized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	y the owner of record and tha all applicable laws of this ial's authorized representative on of the code(s) applicable to
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN C	HARGE OF WORK, TITLE				DATE	PHONE