

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

Location of Construction: 230 Commercial St		Owner Address: Proprietors of Union Wharf		Phone:	Permit No: 951239
Contractor Name: Leavitt & Farris, Inc.		Lease/Buyer's Name: Sapporo Restaurant		Phone:	Business Name:
Past Use: Restaurant		Address: 256 Read St Portland, ME 04103		Phone: 797-0100	<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED NOV 27 1995 CITY OF PORTLAND </div>
Proposed Project Description: Erect Awning		Proposed Use: Same w/awning		COST OF WORK: \$ 2,000.00 PERMIT FEE: \$ 30.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: 4. Use Group: 2 Type: 5A Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zoning: CBL Zoning Approval: <i>[Signature]</i> 11/2/95 Special Zones or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan (major) <input type="checkbox"/> minor <input type="checkbox"/> minor		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within 6 months of the date of issuance. False information may invalidate a building permit and stop all work.

CERTIFICATION

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 issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT <i>[Signature]</i>	NAME Neal Patrick	ADDRESS: 21 November 1995	DATE: 21 November 1995	PHONE: 261-797-0100
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE LEAVITT & FARRIS INC.		PHONE: 261-797-0100		

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

GEO DISTRICT **2**
[Signature]