

bin Blue

Zin. Red

ALL white BAC

34 Preassure Treated Phywood

Mounted on Frame and Brick of Building



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137

The 114 177 , 1500

City of Portland, Maine - Building	g or Use Permit Application	389 Congress	Street, 04101. Tel: (207	7) \$74-8703 FAY: 874 8716
	C WILLI.		Phone:	The state of the s
Owner Address:	Kostepoulos, An		799-1500	Parmit No: 9 4133
28 Broadcove Cape Elizabeth, ME O	4107 Free Street Tavern	Phone:	BusinessName:	PERMIT ISSUED
	Address:	Phone		Pernit Issued:
Past Use:	Proposed Use:	COST OF WORK: PERMIT FEE:		DEC ! 3 !994
Restaurant		\$ 34.69		
Restaurant	Same	FIRE DEPT. [] A	pproved INSPECTION:	CITY OF PORTLAND
-	w/sign	a C.	Denied Use Group: U Type:	
roposed Project Description:		Signature;	COCA 43 Signature:	Zone: CBL: 039-B-007
·		TI. TIES DISTRICT (P.U.D.	Zoning Approval:	
Erect Sign as per plans			Special Zone or Reviews:	
On the Keemin		Donied		☐ ☐ Shoreland ☐ ☐ Wetland
		Signatur	<u>.</u>	☐ Flood Zone
Permit Taken By. Mary Gresik	Date Applied For:	Signature.	Date:	☐ Subdivision☐ Site Plan maj ☐ minor ☐ mm ☐
This permit application doesn't preclude the Applicana(s) from meeting applicable State and Federal rules. Building permits do not include the Applicana(s) from meeting applicable State and Federal rules.				Zoning Appeal
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				☐ Conditional Use ☐ interpretation ☐ Approved ☐ Denied Historic Preservation ☐ Not in District or Landman.
				Does Not Require Review Requires Review Action:
I hereby certify that I am the owner or 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 anything the owner of record and that I have been				□ Appaved
if a permit for work desc 'bed in the application issue areas cuvered by such permit at any reasonable hour	ed, I certify that the code off. s author to enforce the provisions of the reste(s) a	orized representative s applicable to such per	ws of this jurisdiction. In addition	- Donied /
SIGNATURE OF APPLICANT Anthony Kostop	oulos ADDRESS:	7 Nov 94 DATE:		17:17
V		DAIE:	PHONL:	TUCINL
RESPONSIBLE PERSON IN CHARGE OF WORK, 1	TITLE		DUONE	
	t Desk Green–Assessor's Canary–I	D.P.W. Pink-Public	PHONE: File Ivory Card-Inspector	MS MILASON
The state of the s	CORT STORY CONTRACTOR CONTRACTOR			113 1100000