City of Portland,		_		u Application	Permit No:	Issue Date:	C)=	CBL:		
389 Congress Street  Location of Construction:	•		3, <b>Fax:</b>			DLO - O		027 B00	)4001	
439 Congress St		Owner Name:  Metropolitan Apartments Llc			Owner Add es: Phone: 429 Elmvoll RY OF PORTLAND 07-761-0832					
Business Name:		Contractor Name:			Contractor Address: Phone					
n/a			n/a			n/a Portland				
Lessee/Buyer's Name		Phone:			Permit Type: Zone:					
n/a		n/a		1 1		Commonsial			Zone:	
Past Use:					Change of Use - Commercial  Permit Fee: Cost of Work:				بكتا	
Commercial / Storage			Proposed Use: Change of Use/ Storage to studio			Cost of Work		District:		
		Apartment		·	\$203.00				Type:30	
Proposed Project Descript Change of Use / Stora		Apartment (5†	Flor	Bedy		CTIVITIES DIST	roved w/Con	ditions J	Denied 2/02	
Permit Taken By: Date Applied For:			Zoming Approval						7	
l J gg	12/16/2002			Zoning Approvai						
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Special Zone or Reviews  Shoreland		Zo	ning Appeal		Historic Preservation  Not in District or Landma		
2. Building permits do not include plumbing, septic or electrical work.			□w	etland	Misce	ellaneous		Does Not Require Review		
3. Building permits art: void if work is not start within six (6) months of the date of issuance.			│ □ FI	ood Zone	Cond	itional Use		Requires Review		
False information permit and stop a	te a building	Subdivision		Interp	Interpretation					
			∏ Si	te Plan	Appro	oved		Approved w/C	Conditions	
			Maj Minor MM		] Denie	Denied		Denied		
			Date:	12/17/20	late:		Date:		<u> </u>	
1 hereby certify that I a I have been authorized jurisdiction. In additionshall have the authority such permit.	by the owner on, if a permit to	to make this appli for work described	med procation and in the	as his authorized a application is issu	proposed work gent and I agre ed, I certify tha	ee to conform to at the code office	o all applic cial's autho	able laws orized repre	of this esentative	
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHONE		
RESPONSIBLE PERSON	IN CHARGE OF	FORK, TITLE				DATE		PHON	NE	



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## CITY OF PORTLAND, MAINE **Department of Building Inspection**

## Certificate of Occupancy

LOCATION 439 Congress St

CBL 027 B

Issued to Metropolitan Apartments Llc/n/a

Date of Issue 05/06/2003

This is to certify that the building, premises, or part thereof, at the above location, built -

- changed as to use under Building Permit No.02-1376 , has had final inspection, has been found to substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby appro occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

spector of Buildings

Rear First Floor

the them. R/B

Limiting Conditions:

Type: 3B

BOCA: 199

None ne

This certificate supersedes certificate issued

Approved

(Date)

Inspector

when property changes hands. Copy will be furnished to owner or lessee for one dollar.

2/13/03 - for Close In- ok Expert
Combustible Cirling - ? MIN & St. Man
Combustible Cirling - ? MIN & St. Man
Couppe

3/402 - checked point + Depoleculor Ok - CArilland ag
Opening with frenchalt cirling. Point OK.

The M

5/2/03 OK for COO. A. More

5/2/03 OK for COO. A. More

5/24/03 OK for Added selectory on apt Door Why