

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

Permit Number: 101417

This is to certify that85 MARKET STREE	FLLC	
has permission to Change of use from pe	rsonal se rvic e to Art Gallery	
AT _77 MARKET ST	CBL /028-I	
provided that the person or pers	ons, firm or corporation accepting t	this permit shall comply with a
of the provisions of the Statutes	of Maine and of the Ordinances of	the City of Portland regulating
the construction, maintenance a	nd use of buildings and structures,	and of the application on file in
this department.		
Apply to Public Works for street line and grade if nature of work requires such information.	Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept		
Appeal Board	— Jan	11 Ky Ko 12/1/2
Other Department Name		Director - Building & Inspection Services
	ENALTY FOR REMOVING THIS CARD)



Original Receipt

		10	12	20 🕗
Received from	S. Senterare Co.	The state of the s		
Location of Work	7			
Cost of Construction	\$	Buil	lding Fee:_	30
Permit Fee	\$		Site Fee:	
	Certific	ate of Occupan	ncy Fee:	75
			Total:	122
Building (IL) Plum	bing (I5)	Electrical (I2)	Site F	Plan (U2)
Other		·		
CBL:				
Check #:		Total Col	lected	s //2 5

No work is to be started until permit issued. Please keep original receipt for your records.

Taken by:		James and the second
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WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

City of Portland, Maine - Bui	lding or Use l	Permit	t Application	ı '	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871					1			028 K001001	
Location of Construction:			Owner Address:			Phone:			
77 MARKET ST CALLOS SMM	785 MARKET STREET LLC			PC	O BOX 7225				
Business Name:	Contractor Name:		Cor	itractor Address:			Phone		
Lessee/Buyer's Name	Phone:			Permit Type:					Zone: 3
				C	hange of Use - C	Commercia	<u> </u>		17/
Past Use:	Proposed Use:			Permit Fee: Cost of Work:				CEO District:] /
Commercial Personal Service - Nail Salon & Skin Care	Commercial Retail - Art Gallery - Change of use from personal service to Art Gallery ()		ersonal	Approved			INSPE	CTION:	Туре:
Proposed Project Description:				4.6.	,			0 0 .	01
Change of use from personal service	to Art Gallery (Called	183 mm/ed	Sig PE	nature: KG	VITIES DIST	Signatu	1 1	41/10
								d w/Conditions Denied	
				Sig	gnature:			Date:	
i i i i i i i i i i i i i i i i i i i	applied For:			J	Zoning	Approva	ıl		
	2/2010	Sne	cial Zone or Revie	we	Zonin	ıg Appeal		Historic Prés	ervation
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 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 		Special Zone or Reviews Shoreland Wetland		☐ Variance			Historic Preservation W		
				☐ Miscella	☐ Miscellaneous [Does Not Require Review		
		☐ Fl	Flood Zone Condi		☐ Conditio	onal Use Requires R		Requires Rev	view .
		Subdivision		☐ Interpretation			Approved		
PERMIT ISSU	FD	☐ Si	te Plan		Approve	ed		Approved w/	Conditions (
	Revenued Applica-	Maj [Minor MM		Denied			Denied (a
DEC - 1 2010	1	901	withcor	t	2			myerta	~orwor
DEC - 1 2010		Date:			Date:		Ĺ	Date: Qu	es A
City of Portland			01/19	> 1	10			selvet mol APF	reve
							ı	, , , ,	
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit I shall have the authority to enter all arouch permit.	to make this appl for work describe	amed pr lication ed in the	as his authorize application is i	he p d ag	proposed work is gent and I agree ed, I certify that	to conform the code of	to all a	pplicable laws authorized rep	of this resentative
SIGNATURE OF APPLICANT			ADDRES	S		DATI	<u> </u>	PHO	ONE

	- Building or Use Permit	10 1417 11/10	pplied For: CBL: 028 K001001
Location of Construction:	Tel: (207) 874-8703, Fax: (207)	8/4-8/10	028 K001001
77 MARKET ST		Owner Address: PO BOX 7225	Phone:
Business Name:			Phone
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commer	cial
Proposed Use: Commercial Retail - Art Galle service to Art Gallery	ery - Change of use from personal	Proposed Project Description: Change of use from personal serv	rice to Art Gallery
Note:		Reviewer: Marge Schmuckal change of use shall require a separate	Approval Date: 11/15/2010 Ok to Issue: permit application for review
2) ANY exterior work required District.	es a separate review and approval the	u Historic Preservation. This property	is located within an Historic
3) Separate permits shall be	required for any new signage.		
4) This permit is being approwork.	oved on the basis of plans submitted.	Any deviations shall require a separat	e approval before starting that
Dept: Building St. Note:	atus: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 12/01/2010 Ok to Issue:
1) This is a Change of Use C	NLY permit. It does NOT authorize	any construction activities.	
		nkler, fire alarm HVAC systems, heat and fuel tanks. Separate plans may nee	
Dept: Fire St.	atus: Approved with Conditions	Reviewer: Capt Keith Gautreau	Approval Date: 11/16/2010 Ok to Issue:
1) This permit is being approal.	oved on the basis of the plans submitt	ed. Any deviation from the plans wou	ld require ammendments and
2) This permit is for change requirements upon inspec		quire additional permits. The occupan	cy shall meet NFPA 101 code

Comments:

11/15/2010-mes: This use is considered to be 83 Market Street - now a retail use (art gallery)

PERMIT ISSUED

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.

X Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

PERMIT ISSUED

DEC -1 2010

City of Portland

CBL: 028 K001001 **Building Permit #:** 10-1417

General Building Permit Application

you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 83	Market	54		
Total Square Footage of Proposed Structure/		Square Footage of Lot		Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# Description:	Name Sha Address 5 S City, State &	ust be owner, Lessee or Bu na Stilphen weetfern Ln. Zip Brunswick, ME		Telephone: 207 712 4467
Lessee/DBA (If Applicable) Guven Gallery	Name Saw Address 39.	yer Realty Fore St. Zip Portland, ME	Co Wo Co	ost Of ork: \$
Proposed Specific use: retail Is property part of a subdivision? no Project description: Per Smel Security Contractor's name: NA	ice- Ify	Number of Residen ves, please name Sallery		nits
Address:City, State & Zip				
Who should we contact when the permit is read	- Shara		Teleph	
Mailing address: 5 Sweet Fern Ln.	Branswic	K. ME 04011	l eleph	none: 112-7467
Please submit all of the information do so will result in the	outlined on automatic d	the applicable Check lenial of your permit.	(S).	\$ ^o
n order to be sure the City fully understands the nay request additional information prior to the iss his form and other applications visit the Inspection Division office, room 315 City Hall or call 874-8703.	suance of a pern	nit. For further information	Develo S	opment Department
hereby certify that I am the Owner of record of the n nat I have been authorized by the owner to make this aws of this jurisdiction. In addition, if a permit for wor authorized representative shall have the authority to enrovisions of the codes applicable to this permit.	application as his, k described in thi	her authorized ageAt. I agrees	to con	nform to all applicable
ignature:	Date:	11/5/2010		225"
This is not a permit you may t	not commence		mit is i	



