City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: 828-5385 Location of Construction: Owner: Ron & Brenda Nicholas Permit No: 320 Fore St. 04101 000920 Lessee/Buyer's Name: Phone: Owner Address: BusinessName: 42 Chamberlain Ave. Steve Watson Phone: ** 883-0306 Permit Issued: Contractor Name: Address: P.O. Box 2353 Scarborough 04074 S.F. Flynn-Z Co. Inc. **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: Hair Salon Flower Shop \$ 180.00 \$ 25,624.67 FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: CBL: 029-C-006 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Change of Use from Flower Shop to Hair Salon with Approved with Conditions: Interior Renovations. Denied □ Wetland □ Subdivision N/ Signature: Date: ☐ Site Plan mai ☐minor ☐mn Date Applied For: GD Permit Taken By: August 11,2000 GD **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Please Call Stev Flynn For PickUP 883-0306 **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: **CERTIFICATION** □ Appoved 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 is 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 August 11,2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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

1