City of Portland, Maine - Build	_			2013-01243	Issue Date:	032 E009001
389 Congress Street, 04101 Tel: (2	-	, Fax: (207) 874-8				
Location of Construction: 31 EXCHANGE ST	Owner Name: B & C LIMITED C/O Andrew Juris		Owner Address: 31 EXCHANGE ST PORTLAND, ME 04101			ME (207) 774-8300
Business Name: andrewprudential@aol.com	Contractor Name:		Contractor Address: ME			Phone
Lessee/Buyer's Name	Phone:		Permit Type: Change of Use - Commercial			Zone:
Past Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:	
1st floor retail & restaurant with offices on the 2nd floor and 1 dwelling unit on 3rd floor	Change of use: 1st floor retail & restaurant with offices on the 2nd floor and 2 dwelling unit on 3rd floor		\$285.00 \$19,000.00 2 INSPECTION:			
Proposed Project Description:						
Change of use to add 1 additional dwe	e 3rd floor & Life					
Safety remediation per Portland Fire I		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
		Action: Approved Approved w/Con Signature: Da			d w/Conditions Denied Date:	
Permit Taken By: Date Ap	plied For: Zoning Approval					
bjs 06/14/2013				I make book		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews Shoreland		■ Variance	ng Appeal e	Historic Preservation Not in District or Landmar
 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 		☐ Wetland		Miscell	aneous	Does Not Require Review
		Flood Zone		Condition Condition	onal Use	Requires Review
		Subdivision		Interpre	etation	Approved
		Site Plan		Approv	ed	Approved w/Conditions
	Maj Minor MM		_ Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	make this appl r work describe	ication as his author d in the application	at the ized a	proposed work agent and I agree aed, I certify that	e to conform to a t the code officia	ll applicable laws of this il's authorized representative
SIGNATURE OF APPLICANT		ADDR	ESS		DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE