City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	Owner:		Phone:	
36 Market St 36 Market S				Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	99 0356
42 P Market St. 04101	Bessee/Buyer s runne.	i none.	Businessi vaine.	PERMIT ISSUED
Contractor Name:	Address:	Phone		Permit Issued:
	89 Montrose Ave		831 – 8245	
Tim Myers Past Use:	Proposed Use:	COST OF WORK		2 1 1999
	Troposed Osc.	\$10,000	70.00	
XXX %XXMKXXXXX XX			Ψ (This is the state of the st	The second secon
	Des Control III	FIRE DEPT. T		32 ICITY OF PORTLAND
Commercial	Day Spa / Wine Bar		Denied Use Group: Type:	2/2
		a. 1	14m7 BOCA96	Zone: CBL: 032-F-002
Proposed Project Description:				7
TESESTRICT (175.D.)				411.199
Interior Renovations for Day spa/wine bar Action: Approved $\mathcal W$				Special Zone or Reviews:
		1 -1 -	Approved with Conditions:	□ Shoreland Shoreland.
		1 (100)	Denied	U U wetland ** * * Co *** * *
		4 1/3	_	☐ Flood Zone
		Signature:	Date:	☐ Subdivision
Permit Taken By: SP	Date Applied For:	4-13-99		☐ Site Plan maj ☐minor ☐mm ☐
				Zoning Appeal
1. This permit application does not preclude	de the Applicant(s) from meeting applicable	State and Federal rules.		□ Variance
 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 informa- 				☐ Miscellaneous
				☐ Conditional Use
				□ Interpretation
tion may invalidate a building permit a	ind stop all work			☐ Approved☐ Denied
			•	Demed
			WITH REQUIREMENTS	Historic Preservation
			MREON SSILE	☐ Not-in District or Landmark
			OREMEN	☑Does Not Require Review
			**ATS	☐ Requires Review
				Antion. / t
				Action:
	CERTIFICATION			□Appoved (nly)
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,				1 ''
				,
	ation is issued, I certify that the code official'			rall A A.A.
	able hour to enforce the provisions of the co			Date: 12 Jeb 1 1716/99
• •	•		•	see nota
		/ 12 00		Det voge
SIGNATURE OF APPLICANT	ADDRESS:	4-13-99 DATE:	PHONE:	4 1 i 1 a
SIGNATURE OF AFFLICANT	ADDRESS.	DAIE.	FHONE:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
				, , , , , , , , , , , , , , , , , , , ,
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	CEO DISTRICT
	the Board Boards On the Control of t	b but by t = :		
Wh	nite-Permit Desk Green-Assessor's Ca	inary-D.P.W. Pink-Pul	DIIC FIIE IVORY Card-Inspector	<u> </u>