Form # P 04 DIS	PLAY T	HIS C/	ARD (ON	PRINCIP	AL FR	ONTA	GE	OF W	ORK		
Please Read Application And Notes, If Any, Attached		CI	TY (CTIO	N		Number: 0	T ISSUE		
This is to certify that	CITY CEN	TER PROPI	ERTI	<u>C/ne</u>	il mongulis				NOV	1 4 2000		ŀ
has permission to	Remove do	or and returr	n to or na	l flooi	m		032 P00	4001 (CITY OF	PORTLA	ND	5
provided that the of the provision the construction this department	ns of the son, mainte	Statutes	of N ir		nd of the hildings and	anc	es of th	e Cit	y of Po	II comply rtland re plication	gulatir	۱g
Apply to Public W and grade if natur such information.			gina bire la ec	cation and wi this I or c NOT	n permis ding or	n must n procu t therec sed-in. IRED.		procure	ed by owr	occupancy ner before t of is occupi	his build	
Fire Dept Health Dept Appeal Board Other		F.D. 10/28					Ú	Director	Building & Insp	A 1/4 ection Servibes	2/05	
		PE	ENALTY	FOF	R REMOVIN	GTHIS	CARD ^c					

			-					
			Permit No:	Issue Bakel	ISSULCHL:			
389 Congress Street, 04	101 Tel: (207) 874-870	3, Fax: (207) 874-871	16 05-14	95	032 P004001			
Location of Construction:	Owner Name:		Owner Address:	Apply 2	Phone			
6 CITY CTR	CITY CENT	ER PROPERTIES LLC	6 CITY CEN	TER STE 201				
Business Name: Contractor Name:		e:	Contractor Addr		Phone			
	neil margulis		3 Spring St Po	rtland TY (F	PORT 2078280822			
Lessee/Buyer's Name Phone:			Permit Type: Zone:					
				Alterations - Commercial				
Past Use:	Proposed Use:	Permit Fee: Cost of Work: CEO District:						
Commercial	Commercial	remove door and	\$30.0)0 , \$500.	.00 1			
	return to origi	nal floor plan	FIRE DEPT: Approved INSPECTION: Denied Use Group: \mathcal{A} 2 Type: \mathcal{F}					
				Denied	119/05			
			- Ut malos					
Remove door and return	to original floor plan			ignature				
			PEDESTRIAN A	PEDESTRIAÑ ACTIVITIES DISTRICT (P.A.D.)				
			Action: Ar	pproved Approv	ved w/Conditions Denied			
			Signature:		Date:			
Permit Taken By:	Date Applied For:		Zoni	ing Approval				
dmartin	10/ 17/2005			8 II				
1. This permit application	on does not preclude the	Special Zone or Revi	ews Z	Zoning Appeal	Historic Preservation			
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	Uar	iance	Not in District or Landmar			
2. Building permits do not include plumbing, septic or electrical work.		Wetland	Mis	scellaneous	Does Not Require Review			
 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 		Flood Zone	Conditional Use		Requires Review			
		Subdivision	[] Interpretation		Approved			
		Site Plan	App	proved	Approved w/Conditions			
		Maj Minor MN		nied	Denied point own Disk			
		Date: 10/27/0	late:		Date A du T			
					10/20/05			

CERTIFICATION

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Po	rtland. Maine - Bı	uilding or Use Permit		Permit No:	Date Applied For:	CBL:	
·	,	: (207) 874-8703, Fax: (2		6 05-1495	10/13/2005	032 P004001	
Location of Construction: Owner Name:				Owner Address:		Phone:	
6 CITY CTF	ł	CITY CENTER PROP	ERTIES LLC	6 CITY CENTER	STE 201		
Business Name	:	Contractor Name:		Contractor Address:		Phone	
		neil margulis		3 Spring St Portlan	nd	(207) 828-0822	
Lessee/Buyer's	Name	Phone:		Permit Type:			
				Alterations - Com	mercial		
Commercial	remove door and retu	ırn to original floor plan	Remo	we door and return t	o original floor plan		
Dept: His Note:	torical Status:	Approved	Reviewer	: Deborah Andrew	11	te: 10/28/2005 Ok to Issue: ☑	
Dept: Zon Note:	ing Status:	Approved	Reviewer	: Marge Schmucka		te: 10/27/2005 Ok to Issue: □	
Dept: Bui Note: 1) Must obs	-	Approved with Conditions prescribed by the State and		Mike Nugent	Approval Da	te: 11/09/2005 Ok to Issue: ☑	
Dept: Fire Note: 1) Maintain	Status: all NFPA standards.	Approved	Reviewer	Jay Kelley	Approval Da	te: 10/28/2005 Ok to Issue: ☑	

Comments:

11/7/2005-mjn: need actual allowable occupant load and the actual widths of both means of egress and is the building sprinkled?? Left voicemail w/ applicant Received!!

General Building Permit Application



If 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.

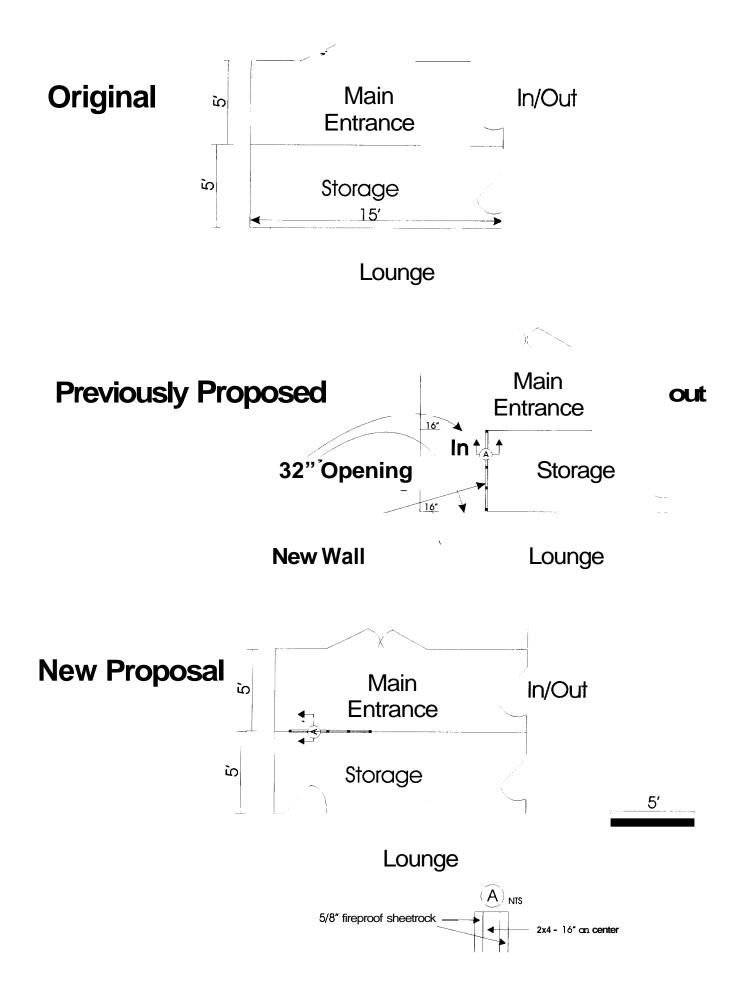
		(B.	ASEM	ENT)	
Total Square Footage of Proposed Structure		Square Footage of Lot			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 732 7 004	Owner: N M	MARGULIS		Telephone: 207– 828-0822	
Lessee/Buyer's Name (If Applicable) STYXX NGAL MARCULS	Applicant name, address & telephone: MARGULIS 3 SPRING ST,		W	cost Of 500, Work \$ 500, Fee: \$ 20	
Current Specific use: Proposed Specific use:	PORTO	CAWD 04101	C	of O Fee: \$	
Project description: APPROX. / YEAR DOOK AT OUT THE EXTRA '- TO I YEAR AGO	ACC S KANCE, DOOK. AND PRE	TYXX ADED . WE WOULD L THIS WILL MA YOUT CUSTOMERS	AN IKE KE I	EXTRA TO REMOVE T SIMILAR	
Contractor's name, address & telephone: Who should we contact when the permit is read Mailing address: $\int \partial_{1} \int \partial_{2} k / 53.53$ $\int \partial_{1} \int \partial_{2} k / 53.53$ $\int \partial_{1} \int \partial_{2} k / 53.53$	ly: NE	17005E ML MARGUL(<u>)</u> 207-828-082:			

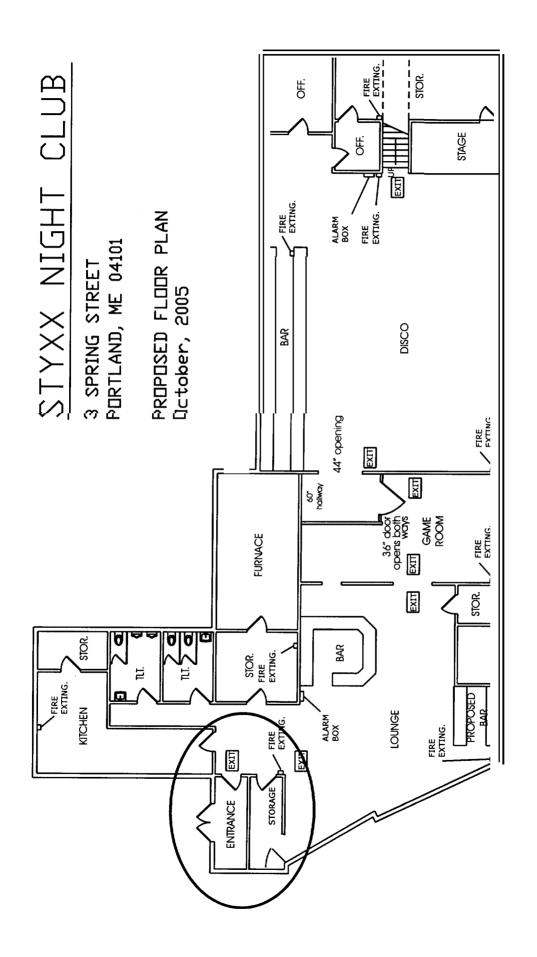
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do *so* will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

l 1	
Signature of applicant:	- STYXX Date: 10-4-05
	DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME
This is not a permit; you may not com	aence ANY work until the permit is issued.
	OCT - 4 2005
	RECEIVED





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