DISPLAY THIS C	ARD ON PRINCIPAL FRO	NIAGE OF WORK
Please Read Application And Notes, If Any,	TY OF PORTLAI	PERMIT ISSUED
Attached This is to certify that Granite Face Limited/S	PERMITS Scott L Say & American	Permit Number: 041869 JAN – 6 2005
has permission to Divide large space to a	dd AD athroor Retain ace	CITY OF PORTLAND
AT 211 Commercial St	Q 03	32 V004001
provided that the person or person the provisions of the Statutes the construction, maintenance a this department.	s of Name and of the ances	ng this permit shall comply with a of the City of Portland regulatin es, and of the application on file i
Apply to Public Works for street line and grade if nature of work requires such information.	N fication inspect in must go and with a permission procuble rething and with a permission procuble rething ding or any to the recult of the permission of t	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

Department Name

OTHER REQUIRED APPROVALS
Fire Dept. 14 11 m 9 Health Dept. _ Appeal Board_ Other ___

PENALTY FOR REMOVINGTHIS CARD'

City of Portland, I	Maine - Buil	ding or Use	Permi	t Applicatio	n Per	rmit ^{NO:}	Issue Date	WHI ISS	CBL:	
389 Congress Street,	04101 Tel: (207) 874-8703	3, Fax:	(207) 874-871	6	04-1869			032 V	004001
Location of Construction:		Owner Name:			Owne	r Address:	۵۱.	N - 6 •	Phone:	
2 11 Commercial St		Granite Face Limited				ox 7626 Dts	1			
3usiness Name:		Contractor Name				actor Address:			Phone	!
		Scott Lindsay	& Asso	ciates		xchange Stre	et Pontland	F PORT	20 77/7/38	
Lessee/Buyer's Name		Phone:		! 	Permi	t Type:		n er Application while are all constraints about the	and the contract of the second of the contract	B 3
Past Use:		Proposed Use:			Perm	it Fee:	Cost of Wor	·k: CI	EO District:	
Commerical		Commercial /	Divide !	large space to		\$201.00	\$20,0	00.00	1	
		add ADA bath	room &	Retail space	FIRE	DEPT:	Approved Denied	Use Group	ON	Туре:
									1/5	10%
Proposed Project Descripti Divide large space to a		oom & Retail sp	ace		Signat		homes	Signature:	All	Xil
					PEDE	STRIAN ACT	IVI V IES DIS	TRICT (P.A	.D.)	/
					Action		ved Ap	proved w/Co	nditions [Denied
					Signat	ture:		D	ate:	
'ermit Taken By:	_	oplied For:	Zoning Approval				al			
ldobson	12/29	9/2004							*** * * *	
1. This permit applic			Spe	cial Zone or Revie	ews	Zoni	ng Appeal		Historic Pre	servation
Applicant(s) from Federal Rules.	meeting applic	eable State and	Sh	noreland		☐ Varianc	e		Not in Distri	ict or Landma
	Building permits do not include plumbing, septic or electrical work.		Wetland Misc		Miscella	Miscellaneous		Does Not Require Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Fid	Flood Zone Conditional Use		onal Use		Requires Review			
	False information may invalidate a building permit and stop all work		Subdivision			☐ Interpretation			Approved	
			Sit	te Plan	٥	Approve	ed		Approved w	/Conditions
			Maj [Minon MM	Jt	Denied		An	Denied Y	ferior
			Date:	S 11/30)/W	Date:		Date:	work (eg uri
					7			A	Sepa	prova
			ſ	ERTIFICATI	ON					
I hereby certify that I and I have been authorized jurisdiction. In additionshall have the authority such permit.	by the owner to n, if a permit fo	make this appli work describe	med pro cation a d in the	operty, or that that his authorized application is is	ne prop l agent ssued, l	t and I agree I certify that	to conform the code of	to all appl ficial's autl	icable laws norized rep	of this resentative
SIGNATURE OF APPLICA	NT			ADDRESS	S		DATE	l	РНО	ONE
RESPONSIBLE PERSON II	N CHARGE OF W	ORK, TITLE					DATE	<u> </u>	PHO	ONE

AND THE RESIDENCE OF THE PROPERTY OF THE PROPE

City of Portland, M	Permit No:	Date Applied For:	CBL:			
389 Congress Street, 0	04101 Tel: (207) 874-8703, Fax:	(207) 874-8716	04-1869	12/29/2004	032 V004001	
Location of Construction:	Owner Name:	(0	Owner Address:	Phone:		
211 Commercial St	Granite Face Limited		Po Box 7626 Dts			
Business Name:	Contractor Name:	Contractor Name: Co		Contractor Address:		
	Scott Lindsay & Asso	ciates	92 Exchange Stree	et Portland	(207) 773-8422	
Lessee/Buyer's Name	Phone:	I	Permit Type:			
Proposed Use:		Proposed	l Project Description:			
Commercial I Divide la space	rge space to add ADA bathroom & Ro	etail Divide	large space to add	ADA bathroom &	Retail space	
	Status: Approved with Condition atted within a Pedestrian Activities Dissidewalk shall not be removed or pern	strict (PAD) whic		floor uses to retail 1	Okto Issue:	
2) ANY exterior work District.	requires a separate review and approv	val thru Historic F	Preservation. This	property is located v	vithin a Historic	
3) Separate permits sha	all be required for any new signage.					
4) This permit is being work.	approved on the basis of plans submi	itted. Any deviati	ons shall require a	a separate approval t	pefore starting that	
Dept: Building Note:	Status: Approved	Reviewer:	Mike Nugent	Approval D	Oate: 01/05/2005 Okto Issue:	
Dept: Fire Note:	Status: Approved with Condition		Lt. MacDougal	Approval D	Pate: 01/05/2005 Ok to Issue: ✓	
•	n shall be maintained to NFPA 72 star					
2) the sprinker system	shall be maintained to NFPA 13 stand	dards				

All Purpose 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 **d** any kind are accepted.

	•	c n st	reet			
Total Square Footage of Proposed Structu	ıre	Square Footage of Lot				
Tax Assessor's Chart, Block & Lot	Owner:		Telephone:			
<u> </u>	ß.					
Lessee/Buyer's Name (If Applicable)	telephone:	A. Lindsa.7 04112	Cost Of Work: \$ 20,000.00			
Current use: retail / Food store	4 ~		34			
Approximately how long has it been vacant: Proposed use: Project description: Contractor's name, address & telephone: Project description: A Line of the location is currently vacant, what was prior use: Approximately how long has it been vacant: A DA Batter Contractor's name, address & telephone: A Line of the location is currently vacant, what was prior use: A DA Batter A Line of the location is currently vacant, what was prior use: A DA Batter Contractor's name, address & telephone:						
Who should we contact when the permit is ready: Mailing address: P.O. B.X 7434 Mailing address: P.O. B.X 7434 Me will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00fee if any work starts before the permit is picked up. PHONE: 773-8422						

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner **d** record authorizes the proposed work and that I have been authorized by the owner to make this application **a** 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 ail areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant:	Date: 12)20)04	

This is NOT a permit, you may not commence ANY work until the permit is issued.

If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall