

Location of Construction: 225 Commercial Street/4th St		Owner: SUNSHINE CORPORATION		Phone:		Permit No. 970237 PERMIT ISSUED Permit Issued: MAR 24 1997 CITY OF PORTLAND Zone: CBL: 1-2-3-4-5-6	
Owner Address:		Lessee/Buyer's Name: THE 12 APARTMENTS		Phone:			PERMIT ISSUED Permit Issued: MAR 24 1997 CITY OF PORTLAND Zone: CBL:
Contractor Name:		Address:		Phone:			
Past Use: Retail Space		Proposed Use: Retail Space		COST OF WORK: \$ PERMIT FEE: \$ 15.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type: Signature: _____ Signature: _____			
Proposed Project Description: Change use from Retail Space to Residential 2nd and 3rd floor				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: [Signature]		Date Applied For: 12-15-1997					Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Historic Preservation <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

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





CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION *1000 Commercial Street, Portland, ME 04101*

Issued to *Portland Building Department*

Date of Issue *3/9/11*

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. *1000-00000*, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

3/9/11

(Date) Inspector

[Signature]

Inspector of Buildings

[Handwritten initials]

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

COMMENTS

3/24/97 GO for Dry Cleaner OK. A. C. ...

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____