City of Portland, Maine - Buil	lding or Use I	Permit Applicat	tion	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703	Fax: (207) 874-8	3716	2014-01401		034 K004001	
Location of Construction: 101 HANOVER ST/ 137 Kennebec St Owner Name: KENNEBEC				r Address: OWN FARM R 93	RD BUXTON,	ME Phone:	
Business Name: Parlour LLC			<u> </u>				
Lessee/Buyer's Name	Phone:		Permi	t Type:		Zone:	
Olof Smith (207) 712-				inge of Use - Co	ommercial	В7	
Past Use:	Proposed Use:		Perm	Permit Fee: Cost of Work:		CEO District:	
personal services services from re		ame: retail & personal rvices - to change the uses om retail (dance shop) at 137 ennebec St to a Hair salon ersonal service)		\$245.00 \$15,000.00 4 INSPECTION:			
Proposed Project Description:							
Change of use from Commercial/reta with minor construction.	rvices (hair salon)	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			(7.1.7.)		
with fillior construction.							
<u> </u>					Date:		
Permit Taken By: Date Applied For: 06/26/2014			Zoning Approval				
This permit application does not preclude the		Special Zone or R	eviews	Zoni	ng Appeal	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Varianc	re	Not in District or Landmar	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are void if work within six (6) months of the date	Flood Zone		Condition	onal Use	Requires Review		
False information may invalidate permit and stop all work			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 t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work gent and I agree ed, I certify that	e to conform to t the code offic	all applicable laws of this ial's authorized representative	
	ADDRESS D.						

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE