

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

Location of Construction: 547 Congress Street		1st Floor		Owner: Hega Realty Trust	Phone: 871-1080	Permit No: 971217
Owner Address: One City Center		Lessee/Buyer's Name: Hair Cuts Plus Tim O'Brien		Phone: N/A	Business Name: Hair Cuts Plus	
Contractor Name: George Maria		Address: George Street, Ptld, ME		Phone: Not Given		Permit Issued: NOV - 4
Past Use: Vacant		Proposed Use: Hair-Tanning-Retail/Store		COST OF WORK: \$ 10,000	PERMIT FEE: \$ 84.00	
Proposed Project Description: Interior renovations, build partitions for tanning rooms.		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 3B		Zone: 15-3 CBL: 037-C-017
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		Zoning Approval: <i>[Signature]</i> - separate permit Special Zone or Review <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"/> <i>required for new signage</i> <i>1/4/99</i>
		Signature: _____		Date: _____		
Permit Taken By: UB		Date Applied For: 10-28-99				

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..

Mail To: Tim Obrien
Frank Cooper Inc.
1475 Shelburne Rd
South Burlington, Vermont 05403

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: 10-28-99 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: *Any exterior work needs a sep. review*

Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED 2
WITH REQUIREMENTS
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