

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-1156	Issue Date:	CBL: 039 D013001
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Location of Construction: 132 Spring St	Owner Name: Cox Sara W		
Business Name: n/a	Contractor Name: n/a	Phone	
Lessee/Buyer's Name n/a	Phone: n/a	Zone: B3	

Past Use: Residential / Prior use was pottery retail.	Proposed Use: Change of Use / From Pottery Retail to Behavioral Consultants for dogs and sales of dog equipment.	Permit Fee: \$105.00	Cost of Work: \$0.00	CEO District: 2
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>44/103</i> Type: <i>NA</i>
Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>

**Proposed Project Description:**  
Change of Use / From Pottery Retail to Behavioral Consultant for dogs and sales of dog equipment.

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: gg	Date Applied For: 09/18/2003	<b>Zoning Approval</b>	
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Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input checked="" type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input checked="" type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>9/24/03</i>	Date: _____	Date: <i>9/29/03</i>

*Any sign or exterior to D.A. 9/24/03*

*alterations subject to review*

**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 PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 132 Spring St

CBL 039 D013001

Issued to Cox Sara W /n/a

Date of Issue 10/09/2003

**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. 03-1 156 , 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

1st floor front

Commercial, Use Group M, Canine Supplies and Training

Limiting Conditions:

No Kennels or Dog **Runs** on site

This certificate supersedes  
certificate issued

Approved:

10/9/03

(Date)

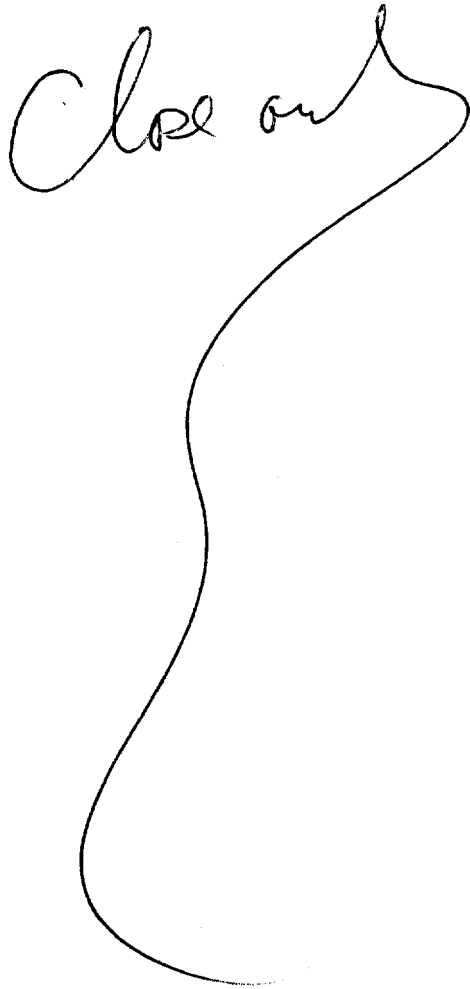
Inspector

Inspector of Buildings

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.

10/9/03 - check I for change of use Coy 0 -  
no problems seen - LT Kelly to be there PM.  
OK to issue G/O (if F.D. not issues)  
TAMM

Close out



CBL # 39-D-03  
permit # 03-1156