•		•	Permit Applicatio , Fax: (207) 874-87		03-0405	0 0 90m	045 A0	003001
Location of Constructi	cation of Construction: Owner Name:			Owner	Owner Address:		Phone:	
638 Congress St	ongress St LAFAYETT		E SQUARE LIMITED	130 1	130 Park St		409-6828	
Business Name:		Contractor Name	:	Contra	Contractor Address.		RN() Phone	
Lessee/Buyer's Name		Phone:			Permit Type: Change of Use - Commercial		Zone: B3	
Past Use:	ast Use: Proposed Use:			Permit Fee: Cost of Work: CEO District:			1	
Antique shop		Ice cream parlor		\$30.00 2				
Proposed Project Description: Change of use to ice cream parlor					Signature			
change of use to le				Signat PEDE	uic ~ u	TTIPS DISTRICT		
			Action: Approved Appr		d Approved v	oved w/Conditions Denied		
<u></u>			Signature:			Date:		
Permit Taken By:Date Applied For:kwd04/25/2003					Zoning A	Approval		
1. This permit ap	plication does not	preclude the	Special Zone or Rev	iews	Zoning	Appeal	Historic Pres	servation
	Applicant(s) from meeting applicable State and		Vew Signt Se Wetland Fegures		2 🗌 Variance		Not in District or Landmark	
 Building permits do not include plumbing, septic or electrical work. 		Wetland requires		Miscellaneous		Does Not Re	Does Not Require Review	
		6,	COr	ste				
septic or electr 3. Building permi		x is not started	Flood Zone PW	M	Condition	al Use	Requires Re	view
septic or electrBuilding permi within six (6) r	ical work. ts are void if worl nonths of the date on may invalidate	t is not started of issuance.	- Ser.	~ J	_		Requires Ret Approved	view
septic or electr 3. Building permi within six (6) r False informati	ical work. ts are void if worl nonths of the date on may invalidate	t is not started of issuance.	Flood Zone	~ J	Condition		_	
 septic or electr Building permi within six (6) r False informati permit and stop 	ical work. ts are void if worl nonths of the date on may invalidate	t is not started of issuance.	Flood Zone Subdivision	NY	Condition	ion	Approved	Conditions

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

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Department of Building Inspection

CITY OF PORTLAND, MAINE

LOCATION 638 Congress St

CBL 045 A003001

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Issued to LAFAYETTE SQUARE LIMITED PART

Date of Issue 05/23/2003

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.03-0405 **,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

First Floor

Limiting Conditions:

-10

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None

Ice Cream Parlor (FSE) Use Group: M Type: **NA**

This certificate supersedes certificate issued Approved: Inspector of Buildings (Date) Inspector 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.