

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

PERMIT ISSUED
Permit Number: 060686
JUN - 7 2006
CITY OF PORTLAND

This is to certify that STONE COAST PROPERTY LLC
has permission to Change of use retail to personal service/rental set-up
AT 603 CONGRESS ST 046 D081001

provided that the person or persons who perform or supervise the construction accepting this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Verification of inspection must be given and when permission procedure is complete this building or part thereof shall be closed or service closed-in. 4 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept _____
Appeal Board _____
Other _____
Department Name _____

[Signature]
6/6/06
Director - Building & Inspection Services

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0686	Issue Date: PERMIT ISSUED JUN 7 2006	CBL: 046 D031001
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Location of Construction: 603 CONGRESS ST	Owner Name: STONE COAST PROPERTIES LL	Owner Address: PO BOX 4152	Phone:
Business Name:	Contractor Name: Phillip Snyder Portland, Me 42-3528	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B-3

Past Use: Commercial	Proposed Use: Commercial Change of Use retail to personal service and tenant fit-up <i>The Makeup Shop Inc</i>	Permit Fee: \$105.00	Cost of Work: \$1,000.00	CEO District: 2
Proposed Project Description: Change of use retail to personal service and tenant fit-up		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>B</i> Type <i>2B</i> <i>6/6/06</i>	

Signature: *Cora Cross* Signature: *[Handwritten]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: dmartin	Date Applied For: 05/09/2006	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	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"/> <i>OK with conditions 3</i> Date: <i>5/23/06</i>	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 Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>Any exterior work requires a separate approval</i> Date: <i>6/6/06</i>
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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 - Building or Use Permit

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

Permit No: 06-0686 06-0686	Date Applied For: 05/09/2006	CBL: 046 D031001
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Location of Construction: 603 CONGRESS ST	Owner Name: STONE COAST PROPERTIES LL	Owner Address: PO BOX 4152	Phone:
Business Name:	Contractor Name: Phillip Snyder	Contractor Address: P O Box 484 Standish	Phone (207) 642-3528
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	

Commercial Change of Use retail to personal service and tenant fit-up	Change of use retail to personal service and tenant fit-up
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/23/2006
Note: **Ok to Issue:**
 1) Separate permits shall be required for any new signage.
 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 06/06/2006
Note: **Ok to Issue:**
 1) IMPORTANT AT YELLOW SHEET TIME!!!!!!Partitions must be built with metal studs as this is a type "2B" constructed building

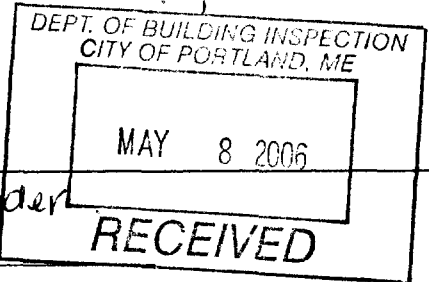
Dept: Fire **Status:** Approved **Reviewer:** Cptn Greg Cass **Approval Date:** 05/31/2006
Note: **Ok to Issue:**



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

605	
Total Square Footage of Proposed Structure	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Lot# 46 D 031	Owner: STONE Coast Properties Telephone: 776-8157
Lessee/Buyer's Name (If Applicable) Alise Snyder PBA! The Make up Shop Inc	Applicant name, address & telephone: Alise Snyder P.O. Box 1424 04084 776-8157 (cell) 642-352874
<p style="text-align: center;"><u>Commercial</u></p> <p>Project description: Chg use retail ^{and} personal Service & kennel fit-up</p>	
<p>Contractor's name, address & telephone: Debbie Phillip Snyder</p> <p>Who should we contact when the permit is ready: Alise Snyder</p> <p>Mailing address: Phone: <u>See Above</u></p>	



Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>Alise M Snyder</u>	Date: <u>5/4/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

✓ # CC

the **M**akeup Shop inc.

May 4,2006

Re: Change of use and permit application for partition walls and interior employee bath

To Whom It May Concern:

Enclosed is a copy of the General Building Permit Application, a general floor plan of the space before and proposed changes. I am hoping to be open by the end of June. You can reach me by cell phone at 776-8157 or hm at 642-3528.

Masterpiece graphics was in this location prior to my business, I do not know what they did besides copy, printing and retail paper sales and service for clients. My business will be a retail cosmetics business and also be doing limited day spa services of only facial care and massage, both by state licensed techs.

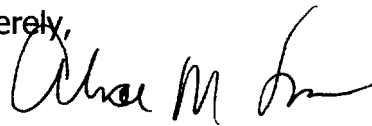
605 Congress Street
Portland, Maine 04101

Mailing Address:
PO Box 484
Standish, Maine 04084

There will be a small room for each tech built and the remaining floor space is designated total retail.

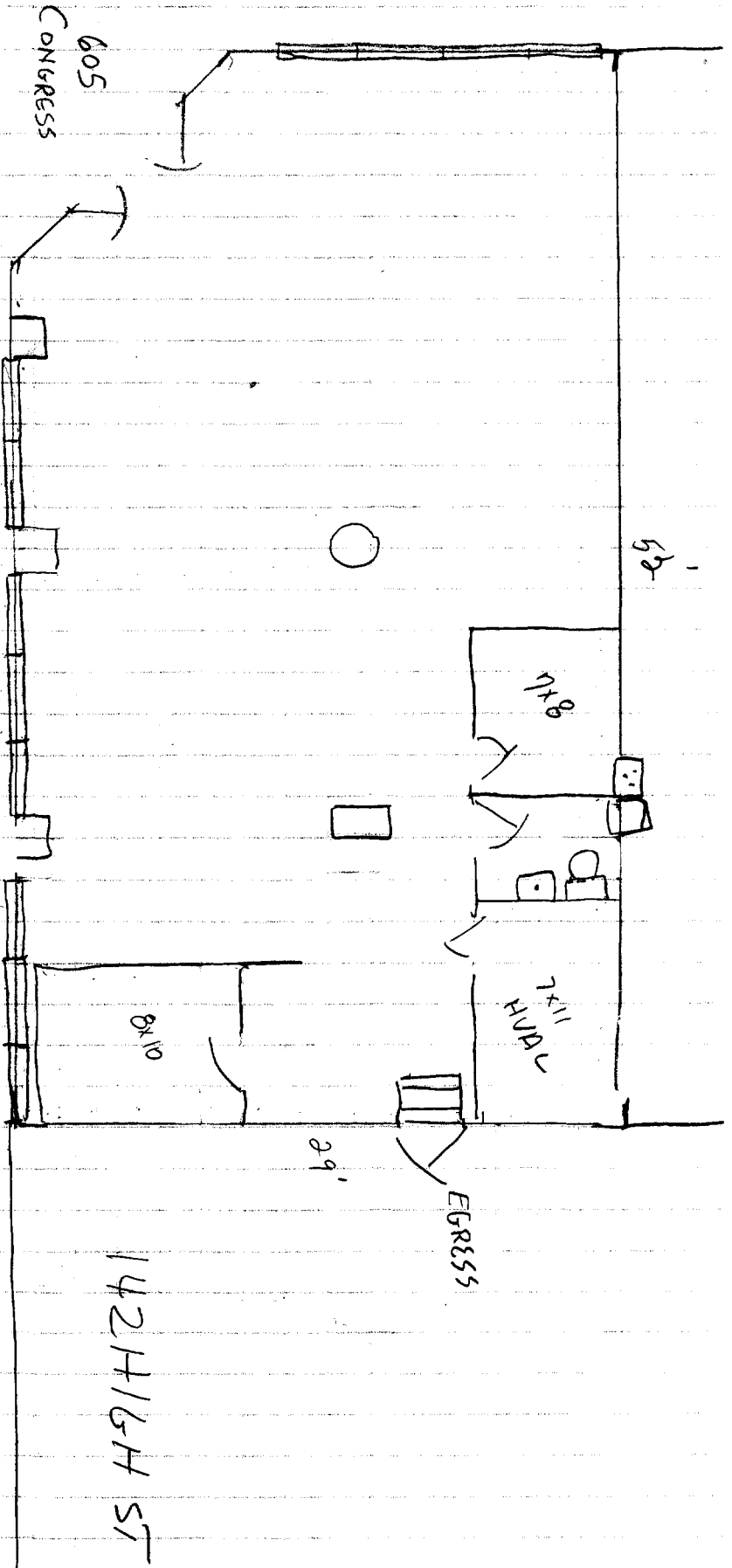
Please contact me if you have questions.

Sincerely,



Alise Snyder-Owner The Makeup Shop Inc

Phone: 207-642-3528
Fax : 207-642-3812
apsnyder@adelphia.net
Owner: Alise Snyder



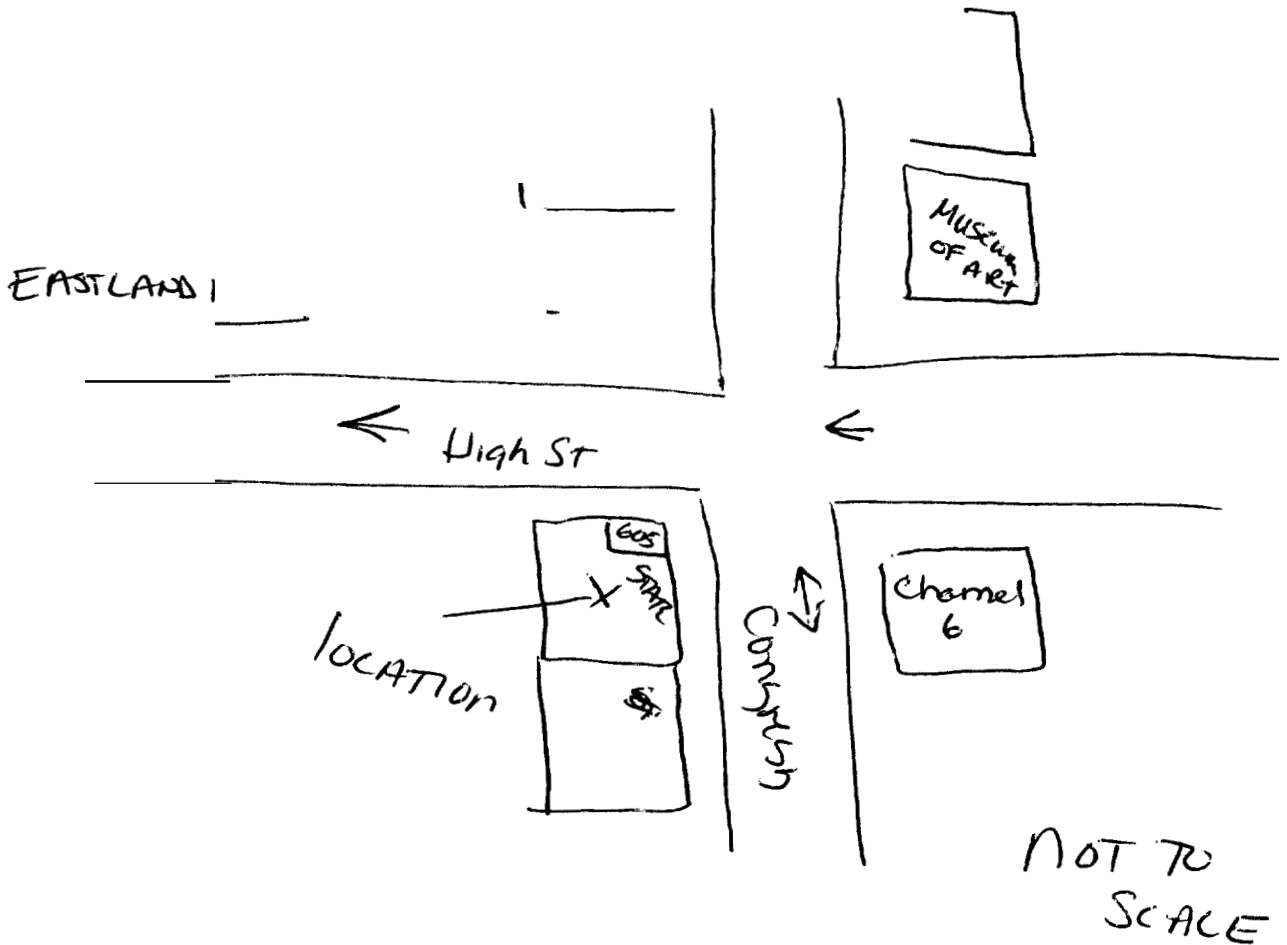
SCALE - 1 Square = 2 FEET

The Makeup Shop
Ailise Snyder 776-8157

Location:

605 Congress Street

Directions - on the corner of Congress and High Street next to the State theatre. located on the first floor. Retail Store is approx. 1529 square feet with 9 - (9x4) glass windows, 3 that span the entire Shop wall on the Congress Street side and 6 that span the entire wall space on the High St side. All parking is on street only or in public garages.



2x4 Top Plate
WOOD

Double 2x4
HANGER WOOD

1/2 Gypsum
SHEETROCK

2x4 Stud wood
16" on center

All Walls Pre Partition

Walls and Fire WBT

Load Bearing Walls

6 PANEL
MASONITE DOORS

2x4
Both on
Plate
WOOD

