

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

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

<b>Permit No:</b> 10-1396	<b>Issue Date:</b>	<b>CBL:</b> 046 D031001
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<b>Location of Construction:</b> 142 HIGH ST suite 325	<b>Owner Name:</b> STONE COAST PROPERTIES LL	<b>Owner Address:</b> 142 HIGH ST STE 320	<b>Phone:</b>
<b>Business Name:</b> Room Organic Spa	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b> Erin Campbell	<b>Phone:</b> 207-318-6374	<b>Permit Type:</b> Change of Use - Commercial	<b>Zone:</b>

<b>Past Use:</b> Commercial Artist Studio	<b>Proposed Use:</b> Commercial - Skin Care Spa - Change of use from artist studio to Skin Care Spa "Room Organic Spa"	<b>Permit Fee:</b> \$105.00	<b>Cost of Work:</b> \$105.00	<b>CEO District:</b> 2
<b>Proposed Project Description:</b> Change of use from artist studio to Skin Care Spa "Room Organic Spa"		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type:	
		Signature:	Signature:	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
		Signature:	Date:	

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 11/08/2010	<b>Zoning Approval</b>		
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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"/> Date:	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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 Date:
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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

<b>Location of Construction:</b> 142 HIGH ST suite 325	<b>Owner Name:</b> STONE COAST PROPERTIES LL	<b>Owner Address:</b> 142 HIGH ST STE 320	<b>Phone:</b>
<b>Business Name:</b> Room Organic Spa	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b> Erin Campbell	<b>Phone:</b> 207-318-6374	<b>Permit Type:</b> Change of Use - Commercial	<b>Zone:</b>

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 11/08/2010

**Note:** **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) Separate permits shall be required for any new signage.
- 3) 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:** Jeanine Bourke      **Approval Date:** 11/24/2010

**Note:** **Ok to Issue:**

- 1) This is a Change of Use ONLY permit. It does NOT authorize any construction activities.
- 2) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, including pellet/wood stoves, commercial kitchen exhaust hood systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
- 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Capt Keith Gautreau      **Approval Date:** 11/16/2010

**Note:** **Ok to Issue:**

- 1) This permit is being approved on the basis of the plans submitted. Any deviation from the plans would require ammendments and approval.
- 2) This permit is for change of use only, any construction shall require additional permits. The occupancy shall meet NFPA 101 code requirements upon inspection.

**Comments:**

11/24/2010-jmb: Spoke with Erin C. To verify no construction, plumbing, bathrooms. There is an existing sink and she had a plumber and electrician inspect for state licensing. The bathrooms are public on the 3rd floor.

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SIGNATURE OF APPLICANT ADDRESS DATE PHONE

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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE