City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 31/-- 70-0949 Cale 1 Chi S. Har Struct 4533 Service in the service strate $c_{2,m}$ 990997 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 16. (it. Sc. 153) とうえい もとうせい しき 名称され · · · · Permit BEAGET ISSUED Phone: Contractor Name: Address: $(\mathbf{h}_{1}, \mathbf{h}_{2})$ COST OF WORK: PERMIT FEE: Past Use: Proposed Use: SFP | 4 1999 30.05 ÷ \$ \$ Section of the states 14112.C FIRE DEPT. Approved **INSPECTION:** Denied Use Group: 13 Type: 21 Zono BOCA96-Signature: Signature

Action:

Signature:

Perr	nit Taken By:	Date Applied For:	gan gan dag
1.	This permit application does not preclude the Applica	unt(s) from meeting application	able 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 informa-		

tion may invalidate a building permit and stop all work. sarrenge per ver Sbae

5th floor

240 Hath Street Suits 530 书·注于于13-13。 22 - 日本目 1

PEDESTRIAN ACTIVITIES DISTRICT

Approved

Denied

Approved with Conditions:

Date:

PERMIT ISSUED WITH REQUIREMENTS

PHONE:

CERTIFICATION Devoga □ Approved with Conditions 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 Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 2-2-5 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Proposed Project Description:

Willing a we then there attack to Panauge statest ...

CEO DISTRICT

Zoning Approval:

□ Shoreland +

□ Variance □ Miscellaneous Conditional Use □ Interpretation □ Approved

Denied

Action:

UWetland Flood Zone □ Subdivision

Special Zone or Reviews:

Site Plan mai Dminor Dmm D

Zoning Appeal

Historic Preservation

□ Not in District or Landmark Does Not Require Review

□ Requires Review

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

• COMMENTS 7/3/03 Finkel WI awner Lesser OK. Faz do An **Inspection Record** Type Date Foundation: _____ Framing: _____ Plumbing: _____ Final: _____ Other: _____



CITY OF PORTLAND, MAINE Department of Building Inspection

Certificate of Occupancy

LOCATION 142 High St. #535

CBL 046 D031001

Issued to Gateway Holdings Llc /Chinese Healing Arts Center

Date of Issue 07/31/2003

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. 99-0997 , 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

5th Floor Suite 535 142 High Street

APPROVED OCCUPANCY

Change of Use from Office To massage Therapy Use Group B-3 Type b3 (Boca 1999)

Limiting Conditions:

None

This certificate supersedes certificate issued Approved: (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.