Form # P 04

Health Dept. \_\_ Appeal Board \_ Other \_\_\_\_\_

Department Name

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read	ITY OF PORTLA	ND
Application And Notes, If Any, Attached	PERMIT	Permit Number: 060805
This is to certify that BACK BAY PROPER		PERMIT ISSUED
has permission to Change of use from 2		JUL 2 5 2006
AT _165 GRANT ST		053 B03100
of the provisions of the Statutes the construction, maintenance a this department.	s of leane and of the familiances	ng this permitishate comply with all sof the City of Portland regulating res, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	n and we en permit on procult be re this eding or at there is ed or a second of the JR NOTHEL TO REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.		1/25/04
Health Dept.		

PENALTY FOR REMOVING THIS CARD

Director - Building & Inspection Services

City of Portland, N 389 Congress Street,		0			I	it No: 66-080	PER		SSUEDB	B031	<b>3</b> 01	
Location of Construction:	<u> </u>	Owner Name:			Owner A	ddress:			Phone:		<del>                                      </del>	
165 GRANT ST	1	BACK BAY PROPERTIES LLC				ORTH RD	. 1 ,,,	1 2 -		1	İ	
Business Name:		Contractor Name:			Contractor Address:				2 5 2006 Phone			
Lessee/Buyer's Name	Lessee/Buyer's Name Phone:				Permit Type: CITY OF Change of Use - Condo Conve			F PO	PORTLAND Pone:			
Past Use:	<del></del>	Proposed Use:		<u> </u>	Permit I	<del></del> Fee:	Cost of Wor		CEO Distri	ct:		
2 unit residential	nit residential  2 unit condominium/ from 2 unit residentia			•	FIRE DEPT:			50.00 INSPE	NSPECTION:			
149	dun: 2du	Condominium Wig wit		init 05-081	41)	1//	Penied	Use Gi	roup: R- TRC	5 T	ype:50 UZ	
Proposed Project Description					1 /	$\sim$ //				1		
Change of use from 2 u		o 2 unit Condo	minium		Signature:				ignature:			
					PEDESTRIÁN ACTIVITIES DISTRI							
					Action:	Appro	oved Ap	proved w	/Conditions	D	en ed	
					Signatur	re:			Date:		_	
Permit Taken By:		olied For:		<del></del>		Zoning	g Approva	al				
ldobson	05/30/	2006	<u> </u>									
1. This permit applic	1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews			Zoning Appeal			Historic Preservation			
			Shoreland			☐ Variance			Not in District or Landmar			
2. Building permits do not include plumbing, septic or electrical work.			Wetland			Miscellaneous			Does Not Require Review			
3. 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		Flood Zone			Conditional Use			Requires Review				
		Subdivision			Interpretation			Approved				
			☐ Si	te Plan	Approved				Approved w/Conditions			
			Maj [	☐ Minor ☐ MM					Denied			
			Orwlanditais for Date: 6/20/06			Date:			Date:			
I hereby certify that I ar I have been authorized jurisdiction. In addition shall have the authority such permit.	by the owner to n, if a permit for to enter all area	make this appl work describe	med projection of the contraction of the contractio	as his authorize application is i nit at any reaso	he proposed agent a ssued, I conable hou	nd I agree certify that	to conform the code of ce the prov	to all a ficial's a ision of	pplicable lauthorized the code(s	aws of repres ) appli	Ethis sentative icable to	
SIGNATURE OF APPLICA	NT			ADDRES	SS		DATE	E		PHONE	3	
RESPONSIBLE PERSON II	N CHARGE OF WO	ORK, TITLE		<del></del>			DATE			PHONE	3	