City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						rmit No: 09-0803	Issue Date:		CBL: 058 COC	CBL: 058 C001001	
Location of Construction: Owner			wner Name:		Owner Address:			Phone:			
	WEST COMMERCIAL ST		BROWN J B & SONS		PO BOX 207						
Bus	iness Name:		Contractor Name: Jon Moore/Leesee			Contractor Address: Portland			Phone		
Lessee/Buyer's Name Phone:					Permit Type: Change of Use - Commercial				Zone:		
Past Use: Commercial - photography studio (first floor)			(first floor) Change of ruction"Affordable res" Retail Office Sowroom					\$0.00	60.00 2		
					Approved		INSPECTION: Use Group: Type				
Proposed Project Description: Change of Use no Construction"Affordable Office Res				sources" Retail Office		Signature: PEDESTRIAN ACTIVITIES DIST		Signature:			
					Action Approved Approve						
					Signa	ture:			Date:		
Permit Taken By: Date Applied For: 07/27/2009			Zoning Approval								
1.	This permit application does not preclude the Applicant(s) from meeting applicable State a Federal Rules.		Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
			Shoreland			☐ Variance			Not in District or Landn		
2.	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Revie			
3.	•		☐ Flood Zon		Conditional Us			Requires Review			
False information may invalidate a permit and stop all work		idate a building	☐ Subdivision ☐ Site Plan		☐ Interpretatio			Approved			
						Approved			Approved w/Condition		
			Maj Mino MM			Denied		☐ Denied			
			Date:			Date:		D	ate:		
I ha juri: shal	reby certify that I am the own ve been authorized by the ow sdiction. In addition, if a pern Il have the authority to enter a uch permit.	ner to make this appli nit for work described	med procession and the second	as his authorized application is iss	ne prop d agent sued, I	t and I agree to certify that th	o conform t e code offic	to all ap cial's au	pplicable laws athorized repre	of this sentative	
SIC	NATURE OF APPLICAN			ADDRES:	S		DATE	<u> </u>	P	НО	

65 WEST COMMERCIAL ST	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Pho	Phone:	
usiness Name:	Contractor Name:	Contractor Address:	Phor	Phone	
	Jon Moore/Leesee	Portland			
essee/Buyer's Name	Phone:	Permit Type:	·	Zone:	
		Change of Use - Comm	nercial		
Dept: Zoning St	tatus: Approved with Condition	s Reviewer: Ann Machado	Approval Date:	07/31/2009	
Note: Space is 1750 sf so n	o parking is required since the first	st 2,000 sf or retail does not require parl	king. Ok t	o Issue: 🔽	
1) Separate permits shall be	required for any new signage.				
Don't Doi'lding Co	hat-a- A	s Reviewer: Chris Hanson	Ammorol Dotor	09/12/2000	
_	tatus: Approved with Condition	s Reviewer: Chris Hanson	Approval Date:	08/12/2009	
Note:			Ok t	o Issue: 🔽	
1) This is a Change of Use C	ONLY permit. It does NOT author	rize any construction activities.			
2) Separate Permits shall be	required for any new signage.				
	tatus: Approved	Reviewer: Capt Keith Gautreau	Approval Date:		
Dept: Fire St				08/07/2009	
Dept: Fire St Note:			Ok t	08/07/2009 o Issue: ☑	

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 APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO