	ty of Portland, Maine -	Permit No: 05-0206		Issue Dat	Issue Date:		CBL: 064 A001001			
389 Congress Street, 04101 Tel: (207) 874-8703, Location of Construction: Owner Name:						Owner Address:			Phone:	
966 Congress St Union S			n Station Lmt Partnership		12 Brook St					
Bus	iness Name:		Contractor Name: Kevin Campbell			Contractor Address: 1130 Westbrook St Portland			Phone	
		Kevin Campbe							2074151437	
Lessee/Buyer's Name		Phone:	Phone:		Permit Type: Change of Use - Commercial				Zone:	
Pas	t Use:	Proposed Use:	Proposed Use:		Perm	Permit Fee: Cost of Wor		ork: CEO District:		
Co	mmercial / Rental Zone	Commercial / C	Commercial / Change of use /I Shop build 3 new 10'x8'x8'prac rooms & 1 new 8'x8'x8' office		\$141.00		\$4,50	4,500.00 2		
					FIRE DEPT:		Approved	INSPE	CTION:	
		rooms & 1 new						Use G	Use Group: Type	
Pro	posed Project Description:									
-	ange of use /Drum Shop bui	ld 3 new 10'x8'x8'practic	ce rooms & 1 new		Signature:		Signature:			
	8'x8' office				PEDESTRIAN ACTIVITIES DISTRIC Action Approved Approve			<u> </u>		
					Signat	ure:			Date:	
	mit Taken By: obson	Date Applied For: 02/22/2005	Zoning Approval					l		
1.	This permit application de	oes not preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation	
	Applicant(s) from meeting Federal Rules.	-	Shoreland			Variance			Not in District or Landm	
2.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			☐ Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon			Conditional Us			Requires Review	
	False information may inv permit and stop all work		Subdivision			☐ Interpretatio			Approved	
			Site Plan			Approved			Approved w/Condition	
			Мај [Mino MM	Denied			☐ Denied		
			Date:			Date:		D	Pate:	
I ha juri: shal	ereby certify that I am the overee been authorized by the constitution. In addition, if a pell have the authority to ente	owner to make this appliermit for work described	med procession and the angle of the second s	as his authorized application is is:	ne prop d agent sued, I	and I agree t certify that th	o conform t se code offic	o all ap cial's au	oplicable laws othorized repre	of this sentative
SIC	GNATURE OF APPLICAN			ADDRES	S		DATE		P	НО

Location of Construction: 966 Congress St		Owner Name: Union Station Lmt Partnership		Owner Address: 12 Brook St		Phone:	
Business Name:		Contractor Name: Kevin Campbell		Contractor Address: 1130 Westbrook St Po	Phone 2074151437		
Permit Type: Change of Use - Commercial				mercial	Zone		
Dept: Zoning Note:	Status:	Approved	Reviewer:	Marge Schmuckal	Approval Dat	Ok to Issue	03/2005 e: 🔽
Dept: Building Note:	Status:	Approved	Reviewer:	Mike Nugent	Approval Dat	te: 03/ Ok to Issue	07/2005 e: 🔽
Dept: Fire Note:	Status:	Approved with Conditions	Reviewer:	Lt. MacDougal	Approval Dat	te: 03/	07/2005 :: V
1) the sprinkler syste	em shall be ma	intained to NFPA 13 standar	rds				

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	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO