

**DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK**

Please Read  
Application And  
Notes, if Any,  
Attached

# CITY OF PORTLAND

BUILDING DEPARTMENT

**PERMIT**

PERMIT ISSUED

Permit Number: 060581 9 2006

CITY OF PORTLAND

This is to certify that Coffin Craig G Trustee /Current Drafting of Design  
has permission to Demo interior partitions and install new walls and floor.

AT 222 St John St 064 A002001

provided that the person or persons who apply for and obtain this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is started or resumed-in-  
**FOUR HOURS NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

## OTHER REQUIRED APPROVALS

Fire Dept. Jeff Kelley / F.D. 5/16/06

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

*Chris Lopez* 5/17/06  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

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

<b>Location of Construction:</b> 222 St John St		<b>Owner Name:</b> Coffin Craig G Trustee	<b>Owner Address:</b> 222 St John St Ste 134	<b>Permit No:</b> 06-0581	<b>Spec Date:</b> MAY 1 2006	<b>Permit Issued:</b> MAY 1 2006	<b>Permit Fee:</b> \$66.00	<b>Cost of Work:</b> \$5,000.00	<b>CEO District:</b> 2
<b>Business Name:</b>		<b>Contractor Name:</b> Curran Drafting & Design	<b>Contractor Address:</b> P.O. Box 4512 Portland	<b>Phone:</b> 207-831-1844		<b>Permit Type:</b> Change of Use - Commercial	<b>Zone:</b> B2		
<b>Lessee/Buyer's Name</b>		<b>Phone:</b>	<b>Permit Fee:</b> \$66.00			<b>Cost of Work:</b> \$5,000.00	<b>CEO District:</b> 2		
<b>Past Use:</b> Chiropractic Office (Suite 125)		<b>Proposed Use:</b> Beauty Salon		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: B Type: 3B 5/17/06 Signature: <i>[Signature]</i>			
<b>Proposed Project Description:</b> Demo interior partitions and install new walls and floor.				<b>Signature:</b> <i>[Signature]</i>		<b>Signature:</b> <i>[Signature]</i>			
<b>Permit Taken By:</b> gad				<b>Date Applied For:</b> 04/26/2006		<b>Zoning Approval</b>			
1. This permit application does not preclude the Applicant(s) from meeting applicable 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 information may invalidate a building permit and stop all work..				<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: 5/17/06 <i>[Signature]</i>		<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 checked="" type="checkbox"/> Not in District of Landmark <input type="checkbox"/> Docs Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>	

## 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

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

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

Permit No:	Date Applied For:	CBL:
06-0581	04/26/2006	064 A002001

Location of Construction: 222 St John St	Owner Name: Coffin Craig G Trustee	Owner Address: 222 St John St Ste 134	Phone:
Business Name:	Contractor Name: Curran Drafting & Design	Contractor Address: P.O. Box 45 12 Portland	Phone (207) 831-1844
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	

Proposed Use: Beauty Salon	Proposed Project Description: Demo interior partitions and install new walls and floor.
-------------------------------	--

Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 05/15/2006
Note: Plenty of parking behind building.			Ok to Issue: <input checked="" type="checkbox"/>
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
2) Separate permits shall be required for any new signage.			
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 05/17/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Fire	Status: Approved	Reviewer: Jay Kelley	Approval Date: 05/16/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Maintain all life safety devices and assure proper coverage after construction			



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 222 St John St

CBL 064 A002001

Issued to Coffin Craig G Trustee /Curran Drafting & Design

Date of Issue 08/28/2006

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. 06-0581, 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

Change of Use

APPROVED OCCUPANCY

Beauty Salon  
Use Group b  
Type 3B  
IBC 2003

Limiting Conditions:

none

This certificate supersedes  
certificate issued

Approved:

*[Signature]*

*[Signature]*

Inspector of Buildings

8-28-06