

950549
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

1204-A-002

Please Read
Application And
Notes, If Any,
Attached

**BUILDING INSPECTION
PERMIT**

PERMIT ISSUED
No. **MAY 31 1995**
CITY OF PORTLAND

This is to certify that Karen D. Schilling
has permission to Change Use
AT 222 St John St (Suite 215)

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 for inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in.

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

OTHER REQUIRED APPROVALS

Fire Dept. *[Signature]*
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature]
Director - Building & Inspection Services
3
A. Simpson

PENALTY FOR REMOVING THIS CARD



Permit No: **950549**

Owner: First Atlantic Corp.		Phone:	
Leasee/Buyer's Name: Karen D. Schilling 222 St John St (Ste		Business Name: 215) Ptlld, ME 04102	
Address:		Phone:	
Proposed Use: Message Therapy	COST OF WORK: \$	PERMIT FEE: \$ 25.00	
	FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
	Signature:	Signature:	
	PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		
	Action:	Approved <input type="checkbox"/>	
		Approved with Conditions: <input type="checkbox"/>	
		Denied <input type="checkbox"/>	
	Signature:	Date:	
Mary Gresik	Date Applied For: 30 May 1995		

PERMIT ISSUED
Permit Issued:
MAY 31 1995
CITY OF PORTLAND

Zone: CBL:

Zoning Approval:

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

Application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
Permits do not include plumbing, septic or electrical work.
Permits are void if work is not started within six (6) months of the date of issuance. False information will invalidate a building permit and stop all work..

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, I certify that the code official's authorized representative shall have the authority to enter all premises covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

Karen D. Schilling
SIGNATURE OF APPLICANT Karen D. Schilling ADDRESS: _____ DATE: 30 May 1995 PHONE: 781-2693 hm
774-2154 office

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

CEO DISTRICT