

Location of Construction: * 222 St. John St. Suite 242		Owner: Daniel Horihan		Phone: 761-7900		Permit No: 000918 PERMIT ISSUED Permit Issued: AUG 23 1999 CITY OF PORTLAND Zone: CBL: 064-A-002
Owner Address: 222 St. John St. Suite 103		Lessee/Buyer's Name: *Alex Tatseos		Phone: 774-6310		
Contractor Name:		Address:		Phone:		
Past Use: Office		Proposed Use: Theraputic Massage Office		COST OF WORK: \$		PERMIT FEE: \$ 30.00
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group B Type 3B Signature: <i>[Signature]</i>
Proposed Project Description: Change of Use from office to Massage Office				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: <i>[Signature]</i> Date:
Permit Taken By: UB/GD		Date Applied For: 8/20/1999				Zoning Approval: Special Zone or Reviews: <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"/>

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..

**PERMIT ISSUED
WITH REQUIREMENTS**

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 provisions of the code(s) applicable to such permit

August 20, 1999

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

CEO DISTRICT 3