			20/2		<b>4</b> 8	50		
City of Portland, M 389 Congress Street, (	Peri	<b>on</b> re 716	mit No: 02-1407	Issue Date:	<b>CBL</b> : 065 D014001			
ocation of Construction: Owner Name:			Owner Address:			Phone:		
931 Congress St		Kargar Mohammed I &		14 Muirfield Rd			207-878-4633	
Business Name:		Contractor Name:		Contractor Address:			M b Bhone	
n/a		Nay LUZ (A	penten n/a P		Portland R H W (Ummmyrall)		(ACH ) 278 - 6828	
Lessee/Buyer's Name Phone:			Permi	Туре:	VISCHO	Zone:		
n/a				Cha	Change of Use - Commercial		B-7	
Past Use:	Proposed Use:			Permi	t Fee:	Cost of Work:	CEO District:	
Commercial / Appliance	e Store	- Change of Use	from Appliance		\$105.00 \$0.00		) 3	
Store to Beaut		y Salon	FIRE	_	Approved	e Group: Type A		
Change of Use from Appliance Store to Beauty Salon				nature: VUL CULLY T (P.A.D.) d w/Conditions Denied Date:				
Permit Taken By: Date Applied For:		Zoning Approval						
gg	12/30/2	2002						
	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Rev	views	Zoning Appeal		Historic Preservation	
	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous		Does Not Require Review	
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone		Conditional Use		Requires Review	
		f issuance.						
	hs of the date of nay invalidate a		Subdivision		🔲 Interpreta	tio <b>a</b>	Approved	
within six (6) mont False information n	hs of the date of nay invalidate a		Subdivision		hinterpreta		Approved Approved w/Conditions	
within six (6) mont False information n	hs of the date of nay invalidate a							

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## 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