Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

**CITY OF PORTLAND** 

Please Read Application And Notes, If Any, Attached

## PERMIT

Permit Number: 080612

This is to certify thatPORTL	AND BAY! DPERTIES	THC .				
	of use from mmercia	Come ial on fir		residential unit on	Second floor	-
AT415 FOREST AVE			CBLL1	1 G005001		$\vdash$
provided that the person or of the provisions of the Stat	utes of leaine and	of the canana	ces of the	e City of Por	Lcomply with tland regula	ting
the construction, maintenar this department.	ce and the of buil	dings and second	tures, an	d o <u>f the appl</u> ርፕሃ ቦና P		e ir
Apply to Public Works for street ling and grade if nature of work require such information.	b re this larged or	f insper in mustern permit on proculding or art there is sed-in the procured of the procure of t	\$   p		eccupancy must er before this bu f is occupied.	
OTHER REQUIRED APPROVALS Fire Dept.  Health Dept.					/	
Appeal Board				$\mathcal{L}$	1 -1	i
OtherDepartment Name			700n	Director - Building & Inspec	tion Services //8/	108

PENALTY FOR REMOVING THIS CARD



City of Portland, Main	e - Buil	ding or Use	Permi	t Application	Per	rmit No:	Issue Date:		CBL:		
389 Congress Street, 0410		•				08-0612			111 C0	05001	
Location of Construction: Owner Name:				Owner Address:				Phone:			
415 FOREST AVE PORTLAND			BAY PROPERTIES L		67 P	HIPPS ST					
Business Name: Cor		Contractor Name	Contractor Name:			Contractor Address:			Phone		
Lessee/Buyer's Name Phone:		Phone:	hone:		Permit Type: Change of Use - Commercial			<u></u>	Zone:		
	_			J						10 ZD	
2nd floor retail (Dancing Elephant) of use from Commercia		I -	Proposed Use:  Commercial/Residential - Change of use from all commercial to		Permit Fee: Cost of Work:			.	CEO District:		
						\$40.00	\$2,000		Dir courses		
		Commercial Nail Salon on first floor with one residential unit on			FIRE	DEPT:	Approved	INSPECTION	Group: G. Jo Tuno: S. S.		
					Denied				Oloup. DIKZ 19pc. 30		
		second floor			Verily.			12	FECTION: Group: B/R2 Type: SB  TBC - 2003		
					Verily Seperation Signature Corea GASS Sig			15	1005		
Proposed Project Description:			(1		٠.	/	(400		MAR	1/14/18	
Change of use from Commercial to Commercial on first floor and one residential unit on second floor					Signature:						
					Action: Approved Approved w/Conditions Denied						
						Constraint			Date:		
Permit Taken By: Date Applied For:				Signature:				Date.			
Idobson	1	2/2008				Zoning	Approval	L			
			Spe	cial Zone or Revie		Zonin	g Appeal	i	Historic Pres	ervation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		0	Not in District or Landmarl				
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>			L) w	etland	Miscellaneous Conditional Use Interpretation				Does Not Require Review  Requires Review  Approved		
			∭ FI	ood Zone				[.]			
			Su	ıbdivision							
PERMIT ISSUED				te Plan	Approved		[]	Approved w/Conditions  Denied  Date:			
				Minor MM	Denied  Date:						
				Chalition							Date:
002 10	2000	1 -		6/12/	08				/		
CITY OF PO	RTLA	NB	·								
			(	CERTIFICATIO	)N						
I hereby certify that I am the	owner of	record of the na				nosed work is	authorized l	ov the ow	ner of reco	rd and that	
I have been authorized by the											
jurisdiction. In addition, if a shall have the authority to ent such permit.	permit fo	r work describe	d in the	application is is	sued,	I certify that t	he code offi	cial's auth	orized repr	esentative	
CICNATUDE OF ADDITIONAL				ADDRESS			DATE.		nuo	ME	
SIGNATURE OF APPLICANT				ADDRESS			DATE		PHO	TAE	

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE

1-1-3/05 - Inston Unteren CobinETS July singles along MATM of-glos nit nonly July 10/27 Beilling Full, spinked Smaked in ter connected hamonal correct @ 34" Att on Fleor 3 /sminked SARBER Supposed turn offon one Sink our men (person) Monst construction installed of therench Freshold This work was amplified to sever the safe 11/03/08 Electore win for cide. ok to close



## CITY OF PORTLAND, MAINE

Department of Building Inspection

## Certificate of Occupancy

LOCATION

415 FOREST AVE

CBL 111 C005001

Issued to

Portland Bay Properties Llc

Date of Issue

11/03/2008

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. 08-0612, 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

APPROVED OCCUPANCY

**Entire** 

Commercial Floor 1 1 Residential Unit Floor 2 Use Group B/R2

**Limiting Conditions:** 

Type 5B

This does not certify building code compliance, only a change in the use of the property.

This certificate supersedes certificate issued

Approved:

Inspector

Inspector of Buildings

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Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar