

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Permit Number: 040081

Please Read
Application And
Notes, If Any,
Attached

This is to certify that Forest Avenue Plaza Llc/n/a
has permission to Change of Use from retail to personal services retail.
AT 449 Forest Ave Portland, OR 97202 111 A016002

provided that the person or persons who apply for or accept 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 occupied or otherwise closed-in. FOUR NOTICES REQUIRED.

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] 2/3/84
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

PERMIT ISSUED

Permit No: 04-0081	Issue Date: FEB 06 2004	CBL: 111 A016002
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Location of Construction: 449 Forest Ave	Owner Name: Forest Avenue Plaza Llc	Owner Address: 715 Boylston St CITY OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Change of Use - Commercial	Zone: B2b

Past Use: Commercial / Retail	Proposed Use: Change of Use; from retail to personal services and retail.	Permit Fee: \$105.00	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: Change of Use from retail to personal services and retail.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 2 <i>2/3/04</i>	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: gg	Date Applied For: 01/27/2004	Zoning Approval		
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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..	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"/> Date: <i>01/30/04</i>	Zoning Appeal <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: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does 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>
	<i>Separate permits are required for any new signage</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

All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 449 449 Forest Ave.		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 111 A 016002	Owner: Forest Ave Plaza	Telephone:
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: Leapin Lizards	Cost Of Work: \$ _____ Fee: \$ 30.00
Current use: <u>holistic center & gift shop</u>		75.00 <u>105.00</u>
If the location is currently vacant, what was prior use: <u>Caravan Beads</u>		
Approximately how long has it been vacant: _____		
Proposed use: <u>holistic center, gift shop, readings, Reiki, massage therapy</u>		
Project description: <u>change of use from retail only to personal svcs + retail</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>Joyce Clapin</u>		221-2363
Mailing address:		730-1082 cell
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE:		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

JAN 27 2004

Signature of applicant: <u>Joyce M. Clapin</u>	Date: <u>1/27/04</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

BATH

office
utilities

personal
services
in this
space

STEP UP 8 1/2"



LEAPIN'

LIZARDS

retail
here

1964

WATER
SHUT
OFF



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

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Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 01/30/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Separate permits shall be required for any new signage.			
Dept: Building	Status: Approved with Conditions	Reviewer: Mike Nugent	Approval Date: 02/03/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Fire	Status: Approved with Conditions	Reviewer: Lt. MacDougal	Approval Date: 02/02/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) the sprinklers system shall be maintained to NFPA 13 standards			
2) fire extinguishers shall be provided in accordance with NFPA 10 standards			

Comments:
2/3/2004-mjn: holding for egress question

SPACE is only 80 feet deep