

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No:	04-0223	Issue Date:	MAF - 6-20-05	CBL:	112 F004001
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Location of Construction: 309 FOREST AVE	Owner Name: WILLIAM C ROWELL FAMILY L	Owner Address: 122 CODMAN ST	Phone:
Business Name:	Contractor Name: Reagan & Company	Contractor Address: 106 Merrill Rd. (City)	Phone: 207-655-6353
Lessee/Buyer's Name:	Phone:	Permit Type: Change of Use - Commercial	Zone: B2

Fast Use: Commercial	Proposed Use: Commercial Change of Use retail to office w/Tenant fit-up	Permit Fee: \$249.00	Cost of Work: \$16,965.00	CEO District: 1
Proposed Project Description: Change of Use retail to office w/Tenant fit-up		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied NCPA 101 Chapter 38 Signature: Greg C... PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	INSPECTION: Use Group: B Type: 3/6/06 Signature: [Signature] ACTION: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____	

Permit Taken By: dmartin	Date Applied For: 02/10/2006	Zoning Approval		
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"/> OK w/conditions Date: 3/24/06 [Signature]	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: [Signature]	

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
			PHONE

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
 Application And
 Notes, if Any,
 Attached

BUILDING INSPECTION

PERMIT

Permit Number

PERMIT ISSUED

MAR - 6 2006

This is to certify that WILLIAM C ROWELL FAMILY LIMITED PARTNERSHIP is

has permission to Change of Use, retail to office use/Temporary

AT 309 FOREST AVE

112 P004001

provided that the person or persons who apply for and 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.

Classification of inspection must be given and when permission is procured before this building or part thereof is occupied or occupied as a closed-in area. YOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. Arcoy Class 3-2-06

Health Dept.

Appeal Board

Other

Department Name

[Signature]
 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD