

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

Permit No: 04-0159	PERMIT ISSUED Issue Date: MAR 12 2004	CBL: 125 L003001
-----------------------	--	---------------------

Location of Construction: 12 Revere St / <i>523 Deering Ave</i>	Owner Name: Scott Barry E	Owner Address: 28 Byfield Rd	Phone: 207-415-7325
Business Name: n/a	Contractor Name:	Contractor Address: PO Box 473 Westbrook	Phone: 2078579488
Lessee/Buyer's Name: <i>Michael Flehinger</i>	Phone: n/a	Permit Type: Change of Use From Occupation	Zone: <i>B26</i>

Past Use: Commercial / Retail	Proposed Use: Change of Use; from retail to massage therapist office.	Permit Fee: \$105.00	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: Change of Use from retail to message therapist office.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>B</i> Type: <i>55</i> <i>3/10/04</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: 02/26/2004	Zoning Approval		
<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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"/> Mif <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>3/9/04</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:

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

City of Portland, Maine - Building or Use Permit

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

Permit No: 04-0159	Date Applied For: 02/26/2004	CBL: 125 L003001
------------------------------	--	----------------------------

Location of Construction: 12 Revere St/ 523 Deering Ave.	Owner Name: Scott Barry E	Owner Address: 28 Byfield Rd	Phone: 207-415-7325
Business Name: n/a	Contractor Name:	Contractor Address: PO Box 473 Westbrook	Phone: (207) 857-9488
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Change of Use - Commercial	

Proposed Use: Change of Use; from retail to massage therapist office.	Proposed Project Description: Change of Use from retail to massage therapist office.
---	--

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 03/09/2004
Note: 3/8/04 need to see one parking space for this change of use - talked to Michael Flehinger who is the leasee - **Ok to Issue:**
he will get me a site plan showing parking
3/9/04 received a plan showing one parking space
1) Separate permits shall be required for any new signage.
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 03/11/2004
Note: **Ok to Issue:**
1) NO construction approved..a change in occupancy only

Dept: Fire **Status:** Approved **Reviewer:** Lt. MacDougal **Approval Date:** 03/10/2004
Note: **Ok to Issue:**

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: <u>No Construction 523 Decoras Ave</u>		
Total Square Footage of Proposed Structure <u># 291</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>105</u> Block# <u>2</u> Lot# <u>003</u>	Owner: <u>Barry Scott</u>	Telephone: <u>45-7325</u>
Lessee/Buyer's Name (If Applicable) <u>Michael Flehinger #115</u>	Applicant name, address & telephone: <u>Michael Flehinger 1 cresfield 418-7325</u>	Cost Of Work: \$ <u>30</u> 150.00 Fee: \$ <u>75.00</u>
Current use: <u>Message Therapist office / was retail</u> \$205.00		
If the location is currently vacant, what was prior use: <u>Sale</u> \$105.00		
Approximately how long has it been vacant: <u>Unknown to me</u>		
Proposed use: <u>Message Therapist office</u> Project description: <u>Change of use</u>		
Contractor's name, address & telephone: <u>No construction being done</u>		
Who should we contact when the permit is ready: _____		
Mailing address: _____		
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.

Signature of applicant: <u>[Signature]</u>	Date: <u>2/25/04</u>
--	----------------------

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



SCOTT ASSOCIATES
CERTIFIED PUBLIC ACCOUNTANTS

BARRY E. SCOTT, CPA
STEVEN D. SCOTT, CPA

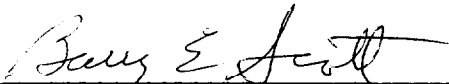
12 REVERE STREET
PORTLAND, MAINE 04103
TEL: (207) 772-0441
FAX: (207) 772-2636

February 9, 2004

TO WHOM IT MAY CONCERN:

This is to advise that Michael Flehinger has rented space comprising 291 square feet of space on the first floor of the building owned by Barry & Mary Scott.

Mr. Flehinger will operate as a Massage Therapist. The space occupied by him will have the address of 523 Deering Avenue in a building with an address of 12 Revere Street, Portland, Maine



Barry E. Scott

To The Attention of
Marge

Please Call Upon Receiving

Both sheets

Michael Flehinger BA, LMT
415-7325

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND
MAR - 8 2004
RECEIVED

