

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 061732

PERMIT ISSUED	
DEC 18 2006	
CITY OF PORTLAND	

This is to certify that SHAHNAZ PROPERTIES INC / Anthony Beasley

has permission to Restaurant - Acropolis - Change of use extending restaurant in attached salon

AT 799 FOREST AVE 137 C003001

provided that the person or persons firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this 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 procured before this building or part thereof is loaded or service closed-in. 24 HOUR NOTICE REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. Greg Cass
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

Thomas M. Marable 12/19/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

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: 06-1732	Issue Date: DEC 18 2006	EBL: 137 C003001
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Location of Construction: 799 FOREST AVE	Owner Name: SHAHNAZ PROPERTIES LLC	Owner Address: 256 BANCROFT ST	Phone:
Business Name:	Contractor Name: Anthony Beasley	Contractor Address: 259 Woodford St Portland	Phone: 2077733729
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Commercial	Zone: S2

Past Use: Commercial Restaurant- Acropolis	Proposed Use: Restaurant- Acropolis - Change of use expanding restaurant into attached salon.	Permit Fee: \$125.00	Cost of Work: \$3,000.00	CEO District: 4
Proposed Project Description: Restaurant- Acropolis - Change of use expanding restaurant into attached salon.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>Commercial</i> Type: <i>SB</i> <i>IBC 2003</i>
		Signature: <i>Greg Casper</i>		Signature: <i>Jm 12/19/06</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: Idobson	Date Applied For: 11/30/2006	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"/> <i>OK w/condition</i> Date: <i>12/06/06</i> <i>APM</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 <i>APM</i> Date: _____
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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



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 799 FOREST AVE

CBL 137 C003001

Issued to SHAHNAZ PROPERTIES LLC /Anthony Beasley

Date of Issue 01/11/2008

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. 06-1732, 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

1st Floor

APPROVED OCCUPANCY

Restaurant Expansion
Use Group A2
Type 5B
IBC 2003

Limiting Conditions: none

This certificate supersedes
certificate issued

Approved:

[Signature]
.....
(Date) Inspector

[Signature]
.....
Inspector of Buildings

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.