

CITY OF PORTLAND, MAINE Department of Building Inspection						
	Certificat	te of Occ	upancy			
STITATIS PO	LOCATION	978 Forest Avi	CBL 143 A065001			
Issued to Pickus Owen B/Sherid	an Corporation	Date of	Issue 09/01/2005			
This is the certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 05-0754 , has had firal inspection, has been found to conform ;						
cccupancy or use, limited or oth PORTION OF BUILDIN	nerwise, as indicated bel	low.	e City, and is hereby approved <i>for</i> OVED OCCUPANCY_ Group B Type 5B			
This certificate supersedes certificate issued Approved: 911/60 (Date) 9-12-05 (Note: The supersedes Modes of the supersedes Modes of the supersedes Modes of the supersedes (Date) 9-12-05	ate applies to permit #05-	Iding or premises, and ought to be tra	a A A A A A A A A A A A A A A A A A A A			

7/5/05 - for fired (ma structured work) Francis & Perish ok -Med Elec & Jere B-4 March P

7/13/05 Jinal WI gay Keller O.K. to issue do gr

569 Congress Succe, C	4101 101. (207) 874-870.	3, Fax: (207) 874-87	16 05-0754		143 A00	5001
Location of Construction:	Owner Name:		Owner Address	JUNED	200 Phone:	
978 Forest Ave Pickus Owen I			2 Chabot St			
Business Name:		ContractorName:		Contractor Address: PO Box 359 FairfiggTY OF PORT		
Sheridan		poration	PO Box 359 Fair Permit Type:	11 4 26745393	1 1	
Lessee/Buyer's Name	Phone:	Phone:				Zone
		<u></u>		mmercial	T	
Past Use:	Proposed Use:		Permit Fee: \$156.00	Cost of Work:	CEO District:	
commercial		Commercial/relocation of interior		\$15,000.00		
		walls, Reconfigure existing		Appioved	PECTION:	
		restroom, Tenant fit-up "A Bout of Health"] Denied	Group: 5 Type: 5.5	
	() ()				ila	1
Proposed Project Descriptio	D rotes	sunder the	Twith Con	d.t.us	0KX	PH
	". Ills, Reconfigure existing rest		Signature	C Signa		-1
renocation of interior we	ans, reconfigure existing rest	room, renant in up	Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.I			,
						Daniad
			Action Approved Approved		w/Conditions Denied	
			Signature		Date	
Permit Taken By:	Date Applied For:		Zoning Approval			
ldobson	06/10/2005					
		Special Zone or Rev		ng Appeal	Historic Prese	rvation
		Shoreland As D	Variance		Not in District or Landmark	
		Separat T	A GOT Missoull		Door Not Poo	uira Paviau
		Shoreland for form S Variance Separte form Miscellaneous Are Fegure 4, 607 Miscellaneous Flood Zone Conditional Use		aneous	Does Not Require Review	
1		Flood Zone Conditional Use		onal Use	Requires Review	
		my New		onar Ose		
		Subdivision	Interpre	tation	Approved	
		Site Plan	[] Approved		Approved w/Conditions	
					Denied	
		Maj 🗍 Minor 🗌 MM	Denied		Denied	\supset

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	