Form # P 04 DISPLAY THIS CA	ARD ON PRINCIPAL	FRONTAGE OF WORK
Please Read Application And Notes, If Any,		
Attached	PERMA	Permit Number: 080911
This is to certify thatANGIE'S SERVICE IN(c	PERMITISSUED
has permission to Change of use from Nail	Sal to Video pre	AUG 2 9 2000
AT <u>804 WASHINGTON AVE</u> provided that the person or perso of the provisions of the Statutes of the construction, maintenance an this department.	of line and or the P	epting this permit shall comply with all ances of the City of Portland regulating octures, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	fication of inspection mut on and ween permit opn pro- bore this I ding or art the lated or provide osed- H JR NOT HEQUIRED	A certificate of occupancy must be reads procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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City of Portland, Ma	ine - Building or Use	Permit Applicatio	n Pe	rmit No:	Issue Date:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207)		~ ~		08-0911		163 A0	08001	
Location of Construction:	Owner Name:	Owner Name:		Owner Address:		Phone:	Phone:	
804 WASHINGTON AV	E ANGIE'S SER	ANGIE'S SERVICE INC		10 E BRIDGE ST				
Business Name:	Contractor Name	Contractor Name:		Contractor Address:		Phone	Phone	
Lessee/Buyer's Name	Phone:		Permit Type: Change of Use - Commercial			zone: BI-RS		
Past Use: Proposed Use:			Permit Fee: Cost of Work: CEO District:				7	
Commercial - Nail Salon	1	Video Store - Change ail Salon to Video		\$105.00 \$105.00 4 FIRE DEPT: Approved INSPECTION: Denied See Conditions		PECTION:	Type	
Proposed Project Description:						$\bigcap a$	1 (
Change of use from Nail S		Signa	Signature Chasse Signature Mb 8/2 PEDESTRIAN ACTIVITIES DISTRICT (P[A,D.)			5/26/08		
			Action: 🗌 Approved 📄 Approve		d Approved	d w/Conditions 📋 Denied		
			Signa	ature:		Date:		
Permit Taken By: Idobson	Date Applied For: 07/21/2008	Zoning Approval						
		Special Zone or Reviews		Zoning Appeal		Historic Preservation		
	eeting applicable State and	Shoreland		Variance		Not in Distri	ct or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous		Does Not Require Review		
 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 		Flood Zone		Conditional Use		Requires Review		
		Subdivision		Interpretation		Approved		
		Site Plan		Approved		Approved w/	Conditions	
PERMIT ISSUED		Maj 🗌 Minor 🗌 MM		Denied		Denied		
AUG 2 9		Urwlcooth Date: 8 8 Dr A	Ru _	Date:		ABN Date:		
CITY OF PO	KILAND 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