

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

Location of Construction: 500 Woodford Street 04103		Owner: BJFC, LLC		Phone: 207-761-2503	
Owner Address: 502 Woodford Street 04103		Lessee/Buyer's Name: Caravan Beads		Phone: BusinessName: Caravan Beads	
*** Contractor Name: Ed Morgan Benchmark		Address: 650 Main St. So. Portland 04106		Phone: 874-2963	
Past Use: Vacant		Proposed Use: Retail (mailorder)		COST OF WORK: \$ 70,000	
				PERMIT FEE: \$ 370.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: M Type: 3B BOCA 96 Signature: <i>[Signature]</i>	
Proposed Project Description: Interior renovations for new workroom and warehouse. Approx. 2000S.F.		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: _____ Date: _____	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied					
Permit Taken By: ub		Date Applied For: 5-11-99			

Permit No: **990516**

PERMIT ISSUED

Permit Issued: **MAY 21 1999**

CITY OF PORTLAND

Zone: **B-1** CBL: 184-D-015

Zoning Approval: *[Signature]* 5/20/99

Special Zoning or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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..

**PERMIT ISSUED
WITH REQUIREMENTS**

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 provisions of the code(s) applicable to such permit

5-11-99

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

CEO DISTRICT **2**