Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU DING ASPECTION

PERMIT ISSUED

This is to certify that Samba Llc

has permission to Change of use from business service to permission to CAN - 7 2010

AT 899 Brighton Ave

provided that the person or persons, find or competition according this permit shall comply with all of the provisions of the Statutes of Maine and of the Organizes 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.

Noting ation of aspection must be given and written permission procured before this building or part hereof is lather or otherwise selection. 24 HOLENOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. A. Jaulian

Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Bui	ilding or Use	Permi	t Application	n Pern	nit No:	Issue Date	:	CBL:	
389 Congress Street, 04101 Tel:	•				09-1380			284 C0	01001
Location of Construction:	Owner Name:			Owner Address:			Phone:		
899 Brighton Ave	Samba Llc			P.o.box 10110					
Business Name:	Contractor Name:			Contractor Address:			Phone		
Maine Tigers Martial Arts LLC									
Lessee/Buyer's Name	Phone:			Permit '	Type:				Zone:
				1	ge of Use -	Commercia	.1		B-17
Past Use:	Proposed Use:		<u> </u>	Permit		Cost of Wor		CEO District:	Primar
Commercial / Business Service	Change of Use; From business		\$105.00 \$30.00			3	R-3 SA		
1 9		vice to personal service.					SPECTION: LOOUL e Group: A LOOU Type:		
			- sté Studio			Approved	Use Gr	oup: B L500	Type:
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F •	- 1-		L	Denied	ļ		
				*	See Cov	ditions	I	BC-2003 111e: SMB	
Proposed Project Description:					a			2.0	ع اما د
Change of use from business service	to personal servi	ice.	erate Studio		Signature: (C) Sign			ature: 500 1 7 09	
1	st floor F	2131	E)(PEDES	TRIAN ACTI	VITIES DIST	TRICT ((P.A.10))	
				Action:	Approv	ved 🗌 App	proved w	/Conditions	Denied
				Signatu	ıre:			Date:	
	Applied For: 03/2009		Zoning Approval						
		Spe	Special Zone or Reviews		vs Zoning Appeal		$\overline{}$	Historic Pres	ervation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		_	Shoreland		☐ Variance			Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland ☐ Miscell		aneous	☐ Does Not Require Rev		quire Review		
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		☐ Flood Zone ☐ Subdivision			Conditional Use			☐ Requires Review ☐ Approved	
PERMIT ISSUE	D	☐ Si	te Plan		Approve	ed		Approved w/	Conditions
		Maj [☐ Minor ☐ MM		Denied			Denied	√ ⊃
7 2010		5/	iii) the con	ut	ھے				
JAN - 7 2010	-	Date:	-17/10/10	7/2	Date:			ate:	
City of Portland				701					
		C	CERTIFICATI	ON					
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit full shall have the authority to enter all art such permit.	to make this appl for work describe	ication d in the	as his authorized application is is	d agent ssued, I	and I agree certify that	to conform the code of	to all a	pplicable laws authorized repr	of this esentative
SIGNATURE OF APPLICANT			ADDRES	<u> </u>		DATE		PHO	ONE .

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, Maine 389 Congress Street, 04101	- Building or Use Perr Tel: (207) 874-8703, Fax		Permit No: 09-1380	Date Applied For: 12/03/2009	CBL: 284 C001001	
Location of Construction:	Owner Name:		Owner Address:	Phone:		
899 Brighton Ave	Samba Llc	Samba Llc		P.o.box 10110		
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:		
Maine Tigers Martial Arts LL	С					
essee/Buyer's Name	Phone:	J	Permit Type:			
		[Change of Use - Commercial			
roposed Use:		Propose	d Project Description:			
Change of Use; From busines:	s service to personal service.	Chang	e of use from busin	ess service to person	iai service.	
Note: 1) Separate permits shall be 2) This permit is being appropriate work.		: .	Marge Schmucka		Ok to Issue:	
Dept: Building St	atus: Approved	Reviewer:	Jeanine Bourke	Approval D	Pate: 01/07/2009	
					vale: 01/01/2009	
Note:					Ok to Issue:	
Note: 1) This is a Change of Use C	NLY permit. It does NOT a	uthorize any constru	ection activities.			
 This is a Change of Use C Separate permits are required. 	•	oing, sprinkler, fire a		exhaust systems. Sep	Ok to Issue:	

Total:

Electrical (I2)

Plumbing (I5)_

Building (IL)

Other

CBL:

Building Fee:_

S

Cost of Construction

Permit Fee

Location of Work

Received from

Site Fee:

Certificate of Occupancy Fee: _

CITY OF PORTLAND, MAIN Department of Building Inspections

Original Receipt



Please keep original receipt for your recc No work is to be started until permit issu

Total Collected s_

Check #:

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

Taken by:

TT 09 1380

General 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: 89	9 11 11				
	1 1/16/4/100				
Total Square Footage of Proposed Structure/	Area Square Footage of Lot				
941.5 Saft.					
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant *must be owner, Lessee or Buyer* Telephone:				
	Name MAINA TIGARS MARTIAL ARTS 207-415-33.				
284 000 1001	Address 12 BLACK POINT MOWS				
	City, State & Zip Scare 1. Mh. 04074				
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Cost Of				
MAINE TIGGES MANTIBEATS	Name S'AMBA LLC Work: \$				
LLC DIBLA VILLARI'S	Address 891 Baic 4 Ton Auc Cof O Fee: \$ 5.00				
SALE DEFENSE CHURAS					
Current legal use (i.e. single family)	Mult, Units				
If vacant, what was the previous use?	T MAIL COPY CENTER 1ST FLOOR				
D 10 'C 1/4	The Dean Control				
Is property part of a subdivision?	If yes, please name				
Project description: NEW BUSINESS MOVIN	a la To Existing Space.				
No Building Meditic	ATTIMS BRING DONE				
Contractor's name:					
Address:					
City, State & Zip	Telephone:				
	dy: GRIGORY TAIT Telephone: 207-415-3327				
Mailing address: 12 BLACK Por	AT MAWS SCARBOROUGH ME. 207-883-05-21				
Please submit all of the information	outlined on the applicable Checklist. Failure to				
do so will result in the	e automatic denial of your permit.				

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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.

		YECEI	V = D
Signature: Date:	Vec 3, 2009	ILOLI	VLD
This is not a permit; you may not commence A	NY work until the permit is issue	DEC - 3	2000

BEFORE 32 Parkeing PARKING

3 3 STAXING THE SAME //: //: //: · · 9415#+ 400 = 2 pky Spaces tog - 248pky on PARKING Forking

Google maps Address



PRESENT PARKING LAYOUT

