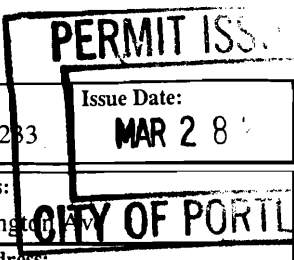


City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-0283	Issue Date: MAR 28	CBL: 408 D002001
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Location of Construction: 1187 Washington Ave	Owner Name: Keef Michelle L & L Paul Jts	Owner Address: 1187 Washington Ave	Phone: 207-997-4557
Business Name: Michelle Keef Studio	Contractor Name: South Portland Sign Studio	Contractor Address: 253 Gray Road Falmouth	Phone: 2078780678
Lessee/Buyer's Name: Michelle Keef	Phone: 207-797-4457	Permit Type: Signs - Permanent	Zone:



Past Use: single family home/home occupation, hair salon	Proposed Use: single family home/home occupation, hair salon	Permit Fee: 3000 \$0.00	Cost of Work: \$668.85	Area 2
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Use Group: A-3 Type: 53 3000 PERMIT ISSUED WITH REQUIREMENTS Signature: [Signature]				

Proposed Project Description:
erect ~~4~~ ft. sign for salon
2nd revised by plans 3/27/01

Signature: [Signature]
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: jodinea	Date Applied For: 03/23/2001	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"/> Date: <i>OK per revised plans 3/27/01</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 Date: _____
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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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

3/26/01 - Sec. 14-410 (1) d of The Home Occupation Ordinance only
allows 2 # of Signage - They are proposing 4# twice the size
allowed - I left A voice mail for Michelle, ' permit can not be
issued unless A reduction in Signage is shown - waiting for revised plans.
If not received, permit is denied. S

2/2/07

~~Michelle~~
New owner
JMB

ELECTRICAL PERMIT

City of Portland, Me.



SIF DE

Ⓟ

To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 9/14/00
 Permit # 809
 CBL# 408-D-002

LOCATION: 1187 Washington Ave. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER PAUL & MICHELLE KEF
 TENANT _____ PHONE # 797-4557

TOTAL EACH FEE

OUTLETS	Receptacles	2	Switches	2	Smoke Detector	1	.20
	Fan + Light comb						
FIXTURES	Incandescent	2	Fluorescent		Strips		.20
SERVICES	Overhead		Underground		TTL AMPS <800		15.00
	Overhead		Underground		TTL AMPS >800		25.00
Temporary Service	Overhead		Underground		TTL AMPS		25.00
							25.00
METERS	(number of)						1.00
MOTORS	(number of)						2.00
RESID/COM	Electric units						1.00
HEATING	oil/gas units		Interior		Exterior		5.00
APPLIANCES	Ranges		Cook Tops		Wall Ovens		2.00
	Insta-Hot		Water heaters		Fans		2.00
	Dryers		Disposals		Dishwasher		2.00
	Compactors		Spa		Washing Machine		2.00
	Others (denote)						2.00
MISC. (number of)	Air Cond/win						3.00
	Air Cond/cent				Pools		10.00
	HVAC		EMS		Thermostat		5.00
	Signs						10.00
	Alarms/res						5.00
	Alarms/com						15.00
	Heavy Duty(CRKT)						2.00
	Circus/Carnv						25.00
	Alterations						5.00
	Fire Repairs						15.00
	E Lights						1.00
	E Generators						20.00
PANELS	Service		Remote		Main		4.00
TRANSFORMER	0-25 Kva						5.00
	25-200 Kva						8.00
	Over 200 Kva						10.00
					TOTAL AMOUNT DUE		
					MINIMUM FEE	35.00	

35.00

INSPECTION: Will be ready _____ or will call L

CONTRACTORS NAME David Brownie MASTER LIC. # 04901
 ADDRESS 10 Royal Gateway LIMITED LIC. # _____
 TELEPHONE 856-2856

SIGNATURE OF CONTRACTOR David Brownie