RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	SIGNATURE OF APPLICANT	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.					False information may invalidate a building permit and stop all work.	 Building permits are void if work is not started within six (6) months of the date of issuance. 	 Building permits do not include plumbing septic or electrical work. 	 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 	28 07/23/2004	Permit Taken Ru		Change of Use from first floor unit to therapy	Proposed Project Description:	TIOOL	Multi Family / 3 Unit Proposed Use: Change of U	N. T. A. VANALAN.	n/a n/a	28 St George St Stanfe Business Name: Control	Location of Construction: Owner Name:	City of Portland, Maine - Building or Use Permit Application 389 Congress Street 04101 Tel: (207) 874-8703 Fav: (207) 874-8716
T.B.	ADDRESS	f the named property, or that the pais application as his authorized agescribed in the application is issued by such permit at any reasonab	CERTIFICATION	Date:	Maj 🗌 Minor 🦳 MM 🔲	Site Plan	ng Subdivision	tarted	g, Wetland	tte and Shoreland			0	practice.		merapy practice of the continues of the	Sectional unit to first			Stanford Tracy M &	Name: (207) 07+0710	or Use Permit Application
DATE	DATE	proposed work is authorized by a gent and I agree to conform to all ed. I certify that the code official le hour to enforce the provision	Denne	Date:	Denied	Approved	Interpretation	Conditional Use	Miscellaneous	Zoning Appeal Variance	Zor	Signature:	Action: Approved Approv	Signature: Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		FIRE DEPT: Approved IN Denied U	Cost of Worl	Change of Use - Commercial	n/a Portland	94 Webb St	Wner A	Permit No: Issue Date-
PHONE	PHONE	the owner of record and that II applicable laws of this I's authorized representative of the code(s) applicable to		Date:	☐ Denied	Approved w/Conditions	Approved	Requires Review	Does Not Require Review	Historic Preservation Not in District or Landman		Date:	Approved w/Conditions Denied	gnature: CT (P.A.D.)		INSPECTION: Use Group: Type:	CEO District:	Zone: R-S	rnone	207-939-5627	Phone:	CBL: E17

All Purpose 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: 28 SI SEDIGE ST FORTIONS 1/MINE 04/03
Total Square Footage of Proposed Structure Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# Chart# Chart# Chart# Col Owner: \[\int Acyc \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Lessee/Buyer's Name (If Applicable) Applicant name, address & Cost Of 6 Work: \$ 6 $107-994-542794$ webb 5 $107-994-542794$ webb 5 Fee: \$ 30
If the location is currently vacant, what was prior use: residental
Approximately how long has it been vacant: 2000/1965
Proposed use: () LC NO, colony to change the use of the 19
Contractor's name, address & telephone: 10 Construction necessing
Who should we contact when the permit is ready: Tracy StanFaRO Mailing address:
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: $207-93555$
THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE BEDINT WILL BE ALTOMATION OF

DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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

•	Manuel of applicant	Signature of annual and
, , , , ,	1 Total)
	Ly.	/ /
, ,	Date: 7/4/64	

If you are in a Historic District you may be subject to additional permitting and fees with the This is NOT a permit, you may not commence ANY work until the permit is issued Planning Department on the 4th floor of City Hall

DL4 1019

32.23 2004

Planning Department City of Portland 4th Floor, City Hall Portland Maine 04101

July 14, 2004

To whom it may concern;

currently a 3 unit residential dwelling. a therapy practice by me to commence September 1, 2004 if approved. This is I am requesting a change of purpose and certificate of occupancy for the first floor apartment unit of 28 St. George Street Portland Maine. This will be used for

adequate for this purpose. I have provided a floor plan for your review. There will be no changes to the physical plant of the property. The space is

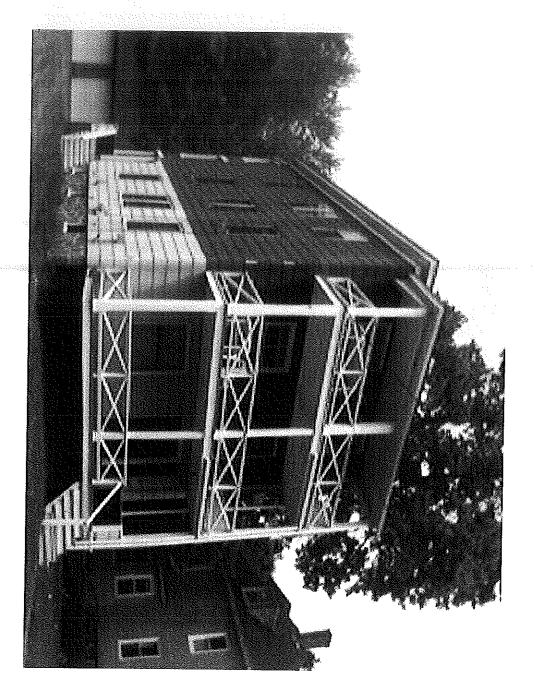
Please contact me as soon as possible as to the feasibility of this request.

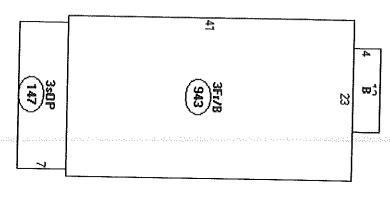
Sincerely

Tracy Morton Stanford

Owner, 28 St. George St. Portland Maine 04103

Before & After Proposed
Proposed
Merapy
Rem Derapy L .T. Waiting 300th





Descriptor/Area
A:3Fr/8
943 sqft
B:3s0P
48 sqft
C:3s0P