

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

Permit No: 051033	Issue Date: AUG - 9 2005	CBL: 429 1007001
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Location of Construction: 500 Washington Ave	Owner Name: Scarks Michael	Owner Address: 120 Exchange St	Phone: 2074506128
Business Name:	Contractor Name: Lou Wood	Contractor Address: 120 Exchange St Portland	Phone: 2074506128
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use Commercial	Zone: B-2

Past Use: Commercial/ Retail	Proposed Use: Personel service/ Nail Salon add sink	Permit Fee: \$105.00	Cost of Work: \$105.00	CEO District: 4
Proposed Project Description: Nail Salon add sink		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>with conditions</i>	INSPECTION: Use Group: B Type: 2B 8/8/05 Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 07/29/2005	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 checked="" type="checkbox"/> <i>Separate permits are required for</i> <input type="checkbox"/> Flood Zone <input checked="" type="checkbox"/> <i>my new sewage</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>OK 8/3/05</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: <i>[Signature]</i>
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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

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Permit No: 05-1033	Date Applied For: 07/29/2005	CBL: 429 1007001
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Location of Construction: 500 Washington Ave	Owner Name: Scarks Michael	Owner Address: 120 Exchange St	Phone:
Business Name:	Contractor Name: Lou Wood	Contractor Address: 120 Exchange St Portland	Phone (207) 450-6128
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	

Proposed Use: Personel service/ Nail Salon add sink	Proposed Project Description: Nail Salon add sink
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 08/03/2005

Note: **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 2) Separate permits shall be required for any new signage.

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 08/08/2005

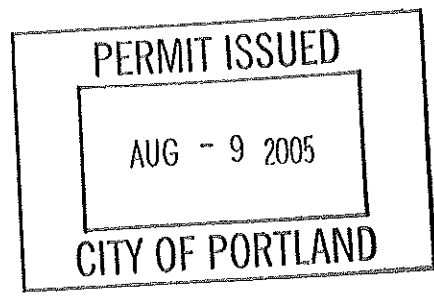
Note: **Ok to Issue:**

- 1) This is a Change of Use ONLY permit. It does NOT authorize any construction activities.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 08/04/2005

Note: **Ok to Issue:**

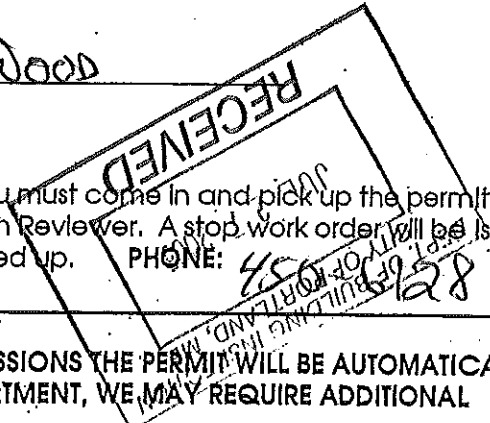
- 1) Buyilding to be in compliance with NFPA 101



All Purpose Building Permit Application

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: <u>500 Washington AVE.</u>		
Total Square Footage of Proposed Structure <u>20,000 SF</u>	Square Footage of let Leased Space <u>900 SF</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>429</u> Block# <u>I</u> Lot# <u>7</u>	Owner: <u>Nature Properties</u> <u>120 Exchange St</u> <u>Portland 04101</u>	Telephone: <u>874-6959</u> <u>450-6128</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Lou Wood</u> <u>450-6128</u>	Cost Of Work: \$ <u>—</u> Fee: \$ <u>105⁰⁰ / 100</u>
Current use: <u>Nail Salon</u> retail		
If the location is currently vacant, what was prior use: <u>Retail</u>		
Approximately how long has it been vacant: <u>6 months</u>		
Proposed use: <u>Nail Salon</u>		
Project description: <u>No change of space (no construction) Add 1- Sink</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>Lou Wood</u>		
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: <u>450-6128</u>		



IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE 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 the 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.

Signature of applicant: Lou Wood Date: 7/28/05

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

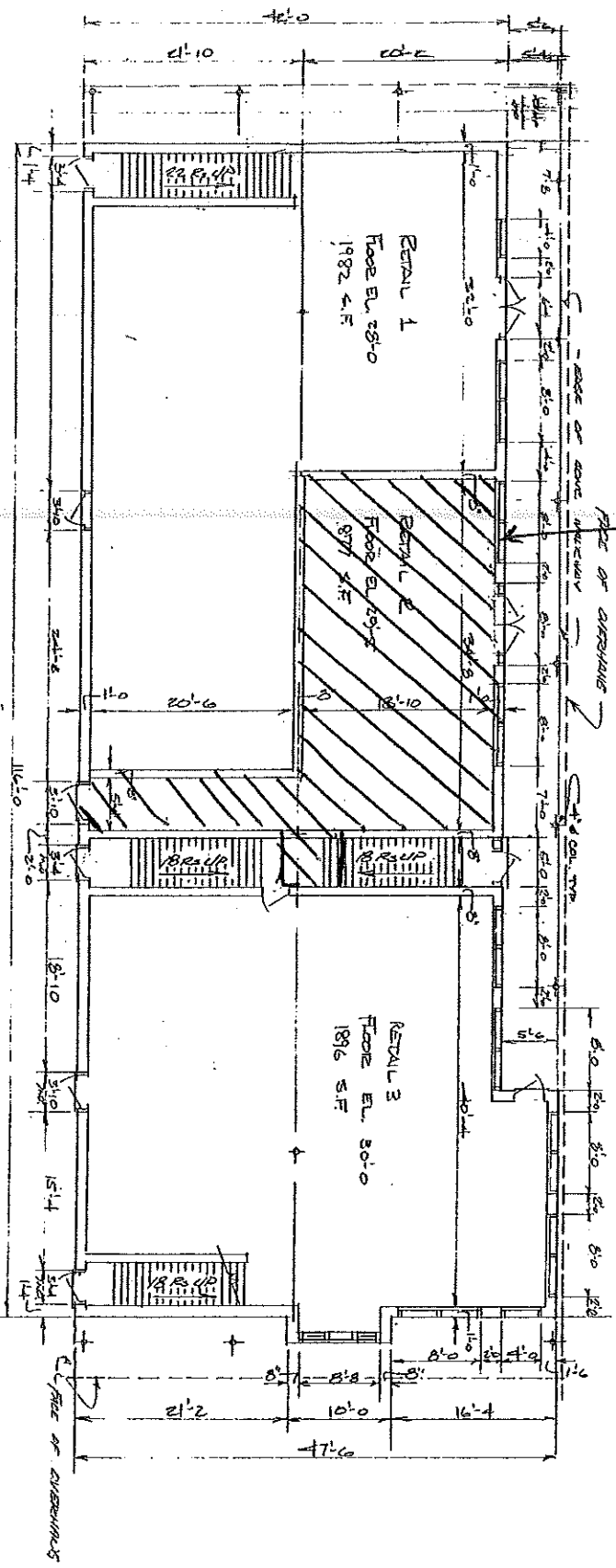


EXHIBIT "A" TO LEASE BETWEEN
PRINCESS NAIRS AND NEPTUNE PROPERTIES, LLC

VIN 2287	FLOOR PLAN DIMENSIONS (SEE SHEETS) 2/2
500 WASHINGTON RD 2A	DATE: JUL 15 87
NEPTUNE PROPERTIES INC.	DRAWN BY: ECF
400 RIVINGTON ST. PORTLAND, ME	REVISION
FIRST FLOOR PLAN	DRAWING NUMBER
	5 OF 8

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, if Any,
Attached

BUILDING INSPECTION PERMIT

Permit Number: 051033

This is to certify that Scarks Michael/Lou Wood

has permission to Nail Salon add sink

At 500 Washington Ave

City 429 I007001

PERMIT ISSUED	
AUG - 9 2005	

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances 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.

Notification of inspection must given and written permission procured before this building or part thereof laid out or occupied closed-in. **HEAR NOTICE IS REQUIRED.**

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

OTHER REQUIRED APPROVALS

Fire Dept. Capt. Greg Cass 8-4

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

11/12/05

(Date)

Approved: 8/16/05

This certificate supersedes certificate issued

Inspector

Jim Reed

Inspector of Buildings

Michael Lou Wood

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Limiting Conditions:

This applies to permit #05-1033

Nail Salon-No Change of Use

PORTION OF BUILDING OR PREMISES

Use Group B Type 2B

APPROVED OCCUPANCY

Issued to Scarks Michael/Lou Wood
This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 05-1033, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

Issued to Scarks Michael/Lou Wood

LOCATION 500 Washington Ave

Certificate of Occupancy

CITY OF PORTLAND, MAINE
Department of Building Inspection

Date of Issue 08/09/2005

CBL 429 1007001





CITY OF PORTLAND, MAINE
 Department of Building Inspections

7-27-05

Received from

Location of Work

Cost of Construction \$

Permit Fee \$

Building (11) ___ Plumbing (15) ___ Electrical (12) ___ Site Plan (U2) ___

CBL: _____

Check #: 9482

Total Collected \$ 105.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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