

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND**

Please Read  
 Application And  
 Notes, If Any,  
 Attached

BU **PERMIT** ICTION

Permit Number: 081321

This is to certify that CHADBALLS HOLDING LLC Class Act ment /Bill S

has permission to Install new replacement window portion of building

AT 219 ANDERSON ST CE 010 A008001

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 be given and written permission procured before this building or part thereof is lath or other work is red-in. 24 HOU 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. \_\_\_\_\_  
 Health Dept. \_\_\_\_\_  
 Appeal Board \_\_\_\_\_  
 Other \_\_\_\_\_  
 Department Name **CITY OF PORTLAND**

PERMIT ISSUED

OCT 28 2008

CITY OF PORTLAND

*Thomas A. Murphy* 10/27/08  
 Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

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

|                       |             |                     |
|-----------------------|-------------|---------------------|
| Permit No:<br>08-1321 | Issue Date: | CBL:<br>010 A008001 |
|-----------------------|-------------|---------------------|

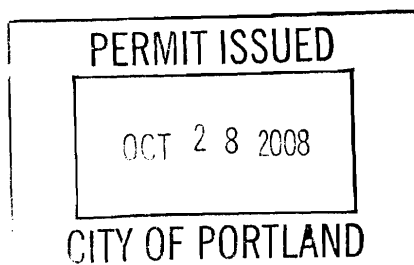
|  |   |  |                     |
|--|---|--|---------------------|
| Location of Construction:<br>219 ANDERSON ST | Owner Name:<br>CHADBALLS HOLDING LLC                  | Owner Address:<br>PO BOX 641                   | Phone:              |
| Business Name:                               | Contractor Name:<br>Class Act Management /Bill Simpso | Contractor Address:<br>P.O. Box 10250 Portland | Phone<br>2078740700 |
| Lessee/Buyer's Name                          | Phone:  | Permit Type:<br>Replacement windows            | Zone:<br>I-16       |

|  |  |   |  |                    |
|--|--|---|--|--------------------|
| Past Use:<br><del>Commercial / warehouse</del><br>Light Industrial | Proposed Use:<br><del>Commercial / warehouse</del><br>Light Industrial - Install new replacement windows portion of building | Permit Fee:<br>\$220.00   | Cost of Work:<br>\$20,000.00                             | CEO District:<br>1 |
|  |  | FIRE DEPT:<br>N/A<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied | INSPECTION:<br>Use Group: B<br>IBC 2003<br>Type: Windows |                    |

|  |                               |  |
|--|-------------------------------|--|
| Proposed Project Description:<br>Install new replacement windows portion of building                                     | Signature: <i>[Signature]</i> | Signature: <i>[Signature]</i> 10/27/08 |
| 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:<br>ldobson | Date Applied For:<br>10/17/2008 | <b>Zoning Approval</b> |  |
|-----------------------------|---------------------------------|------------------------|--|

|   |   |   |  |
|---|---|---|--|
| <p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p> | <p><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br><br>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/><br><i>OK w/condition</i><br>Date: 10/20/08 | <p><b>Zoning Appeal</b></p> <input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br><br>Date: | <p><b>Historic Preservation</b></p> <input checked="" type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input type="checkbox"/> Requires Review<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Conditions<br><input type="checkbox"/> Denied<br><i>ABU</i><br>Date: |
|---|---|---|--|



**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 |



# 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: <u>219 Anderson St.</u>   |   |  |
| Total Square Footage of Proposed Structure/Area   |   | Square Footage of Lot  |
| Tax Assessor's Chart, Block & Lot<br>Chart#      Block#      Lot#                                     | Applicant * <u>must</u> be owner, Lessee or Buyer*<br>Name <u>CHAD BAUS HOLDINGS LLC</u><br>Address <u>P.O. Box 10250</u><br>City, State & Zip <u>Portland, 04104</u> | Telephone:<br><u>874-0700</u>  |
| <u>10</u> <u>A</u> <u>8/11-13</u>   |   |  |
| Lessee/DBA (If Applicable)  | Owner (if different from Applicant)<br>Name<br>Address<br>City, State & Zip   | Cost Of Work: \$ <u>20,000 w/m</u><br>C of O Fee: \$ _____<br>Total Fee: \$ <u>220</u> |
| Current legal use (i.e. single family) <u>WAREHOUSE / work</u>  | If vacant, what was the previous use? _____   |  |
| Proposed Specific use: <u>WINDOW INSTALLATION</u>   | Is property part of a subdivision? <u>NO</u> If yes, please name _____  |  |
| Project description:<br><u>INSTALL WINDOWS, <del>ON THE EAST SIDE</del><br/>Portion of Building -</u> |   |  |
| Contractor's name: <u>CLASS ACTS MANAGEMENT</u>   |   |  |
| Address: <u>P.O. Box 10250</u>  |   |  |
| City, State & Zip: <u>Portland, ME 04104</u>  | Telephone: _____  |  |
| Who should we contact when the permit is ready: <u>Bill Simpson</u>                                   | Telephone: <u>874-0700</u>  |  |
| Mailing address: <u>same</u>  |   |  |

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the 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 <sup>OCT 17 2008</sup> 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](http://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.

Signature: Walter Simpson

Date: 9/07/08

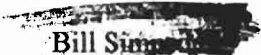
This is not a permit; you may not commence ANY work until the permit is issued.

# Transmittal Letter

**Project:** 219 Anderson St

**Project No.:** 0707

**Date:** 10/14/08

**To:**   
**Chadballs Inc.**  
 P.O. Box 641  
 Freeport, ME 04032

**Phone No.:**

**Fax No.:**

If enclosures are not as noted, please  
 inform us immediately.

**We transmit:**

Herewith  Under separate cover via \_\_\_\_\_  
 In accordance with your request \_\_\_\_\_

**For your:**

Approval  Distribution to Parties  Information  
 Record  Review and Comment  
 Use  \_\_\_\_\_

**The following:**

Drawings  Shop Drawing Prints  Samples  
 Specifications  Shop Drawing Reproducibles  Product Literature  
 Change Order  Other:

| Copies | Date     | Rev. No. | Description                    | Action |
|--------|----------|----------|--------------------------------|--------|
| 2      | 10/14/08 |          | 11x17 reductions - New Windows |        |
|        |          |          |                                |        |
|        |          |          |                                |        |
|        |          |          |                                |        |
|        |          |          |                                |        |
|        |          |          |                                |        |
|        |          |          |                                |        |

**Action Code:**

A. Action indicated on item transmitted  
 B. No action required  
 C. For signature and return to this office  
 D. For signature and forwarding as noted below under Remarks  
 E. See Remarks below

**Remarks:**

**Bill,**

***Attached are 2 sets of 11x17s of the permit drawings for the new windows  
 at 219 Anderson St.***

***If you have any questions please call.***

**Thanks**

**Copies to:**

File

X **TFH Architects, P. A.**  
 O 100 Commercial Street  
 O Portland Maine 04101  
 X Telephone 207-775-6141  
 O Fax No.: 207-773-0194  
 O By: Ryan Senatore

007 17

**City of Portland, Maine - Building or Use Permit**

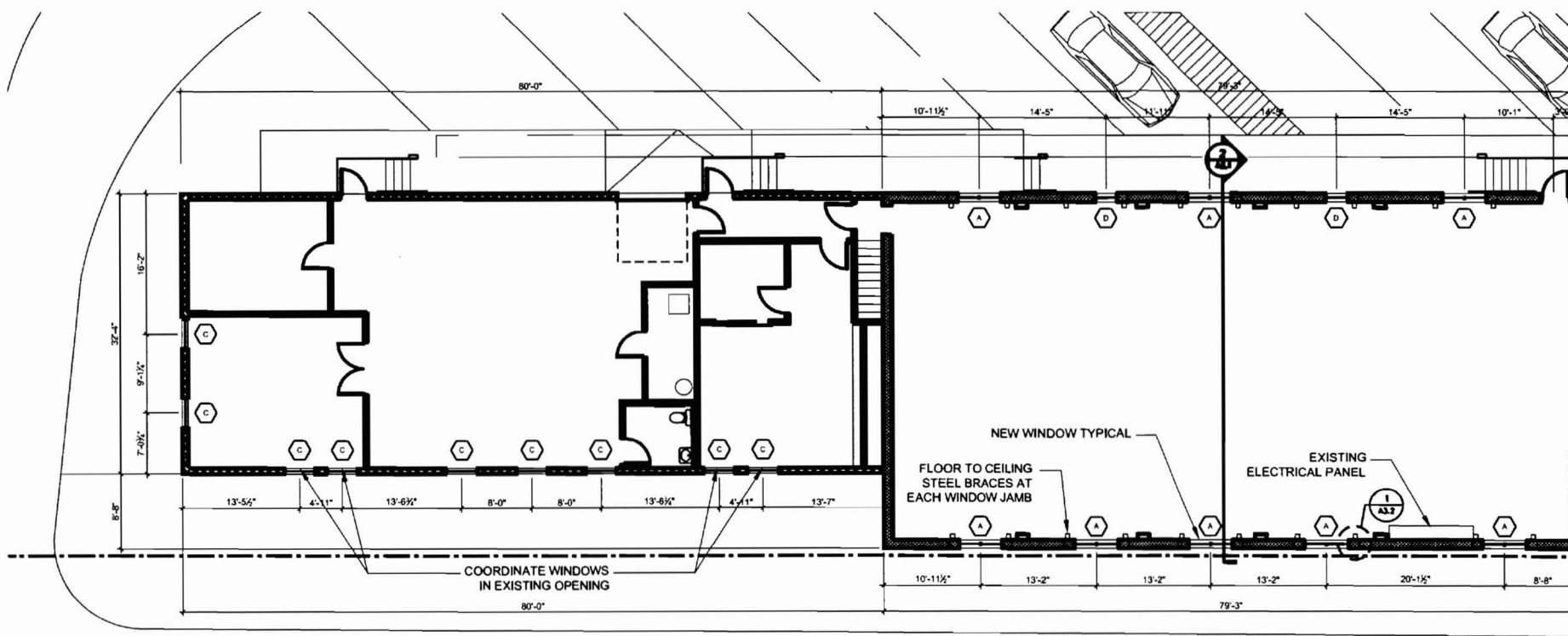
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

|                              |  |                            |
|------------------------------|--|----------------------------|
| <b>Permit No:</b><br>08-1321 | <b>Date Applied For:</b><br>10/17/2008 | <b>CBL:</b><br>010 A008001 |
|------------------------------|--|----------------------------|

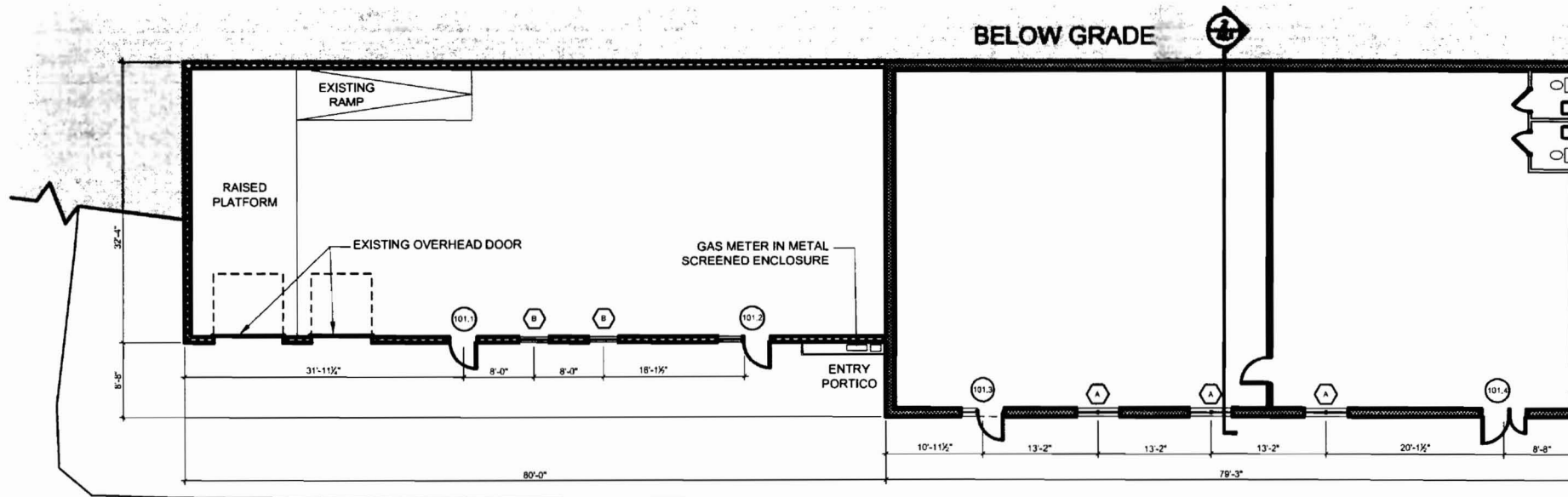
|   |  |   |                                |
|---|--|---|--------------------------------|
| <b>Location of Construction:</b><br>219 ANDERSON ST | <b>Owner Name:</b><br>CHADBALLS HOLDING LLC                  | <b>Owner Address:</b><br>PO BOX 641                   | <b>Phone:</b>                  |
| <b>Business Name:</b>                               | <b>Contractor Name:</b><br>Class Act Management /Bill Simpso | <b>Contractor Address:</b><br>P.O. Box 10250 Portland | <b>Phone</b><br>(207) 874-0700 |
| <b>Lessee/Buyer's Name</b>                          | <b>Phone:</b>  | <b>Permit Type:</b><br>Replacement windows            |                                |

|  |   |
|--|---|
| <b>Proposed Use:</b><br>Light industrial - Install new replacement windows portion of building | <b>Proposed Project Description:</b><br>Install new replacement windows portion of building |
|--|---|

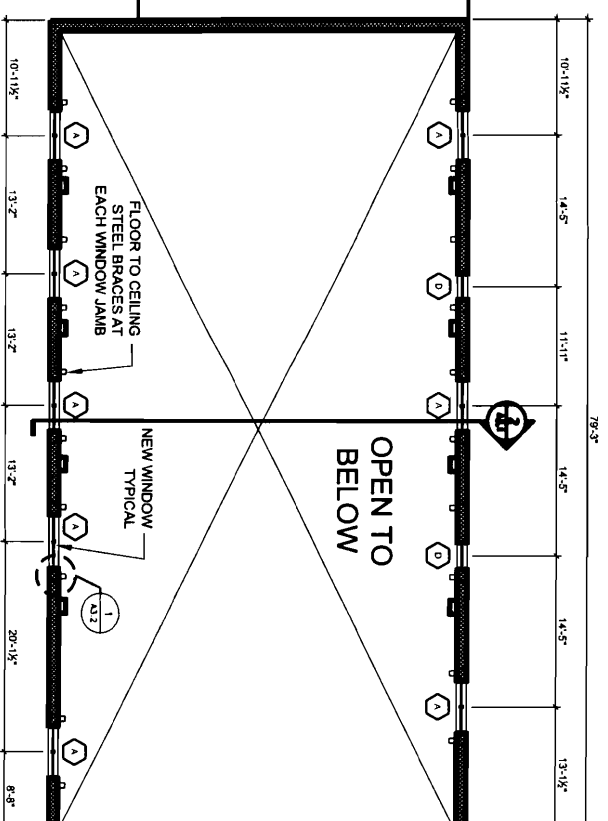
|  |   |                                 |   |
|--|---|---------------------------------|---|
| <b>Dept:</b> Zoning  | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Ann Machado    | <b>Approval Date:</b> 10/20/2008                        |
| <b>Note:</b>   |   |                                 | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.                |   |                                 |   |
| <b>Dept:</b> Building  | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Tom Markley    | <b>Approval Date:</b> 10/27/2008                        |
| <b>Note:</b>   |   |                                 | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) This permit DOES NOT certify the use of the property or building. It only authorizes the construction activities.   |   |                                 |   |
| 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work. |   |                                 |   |
| <b>Dept:</b> Fire  | <b>Status:</b> Not Applicable           | <b>Reviewer:</b> Capt Greg Cass | <b>Approval Date:</b>                                   |
| <b>Note:</b> Windows only  |   |                                 | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |



2 SECOND FLOOR PLAN (REAR PARKING LEVEL)  
1/8" = 1'-0"

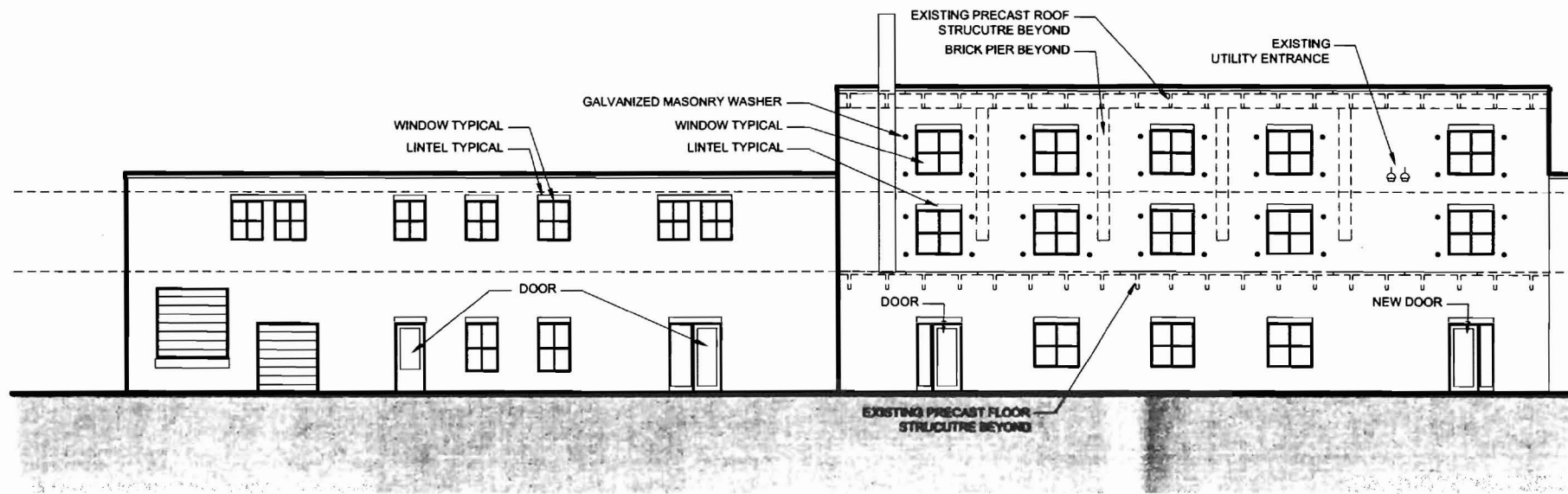


1 FIRST FLOOR PLAN (ANDERSON STREET)  
1/8" = 1'-0"

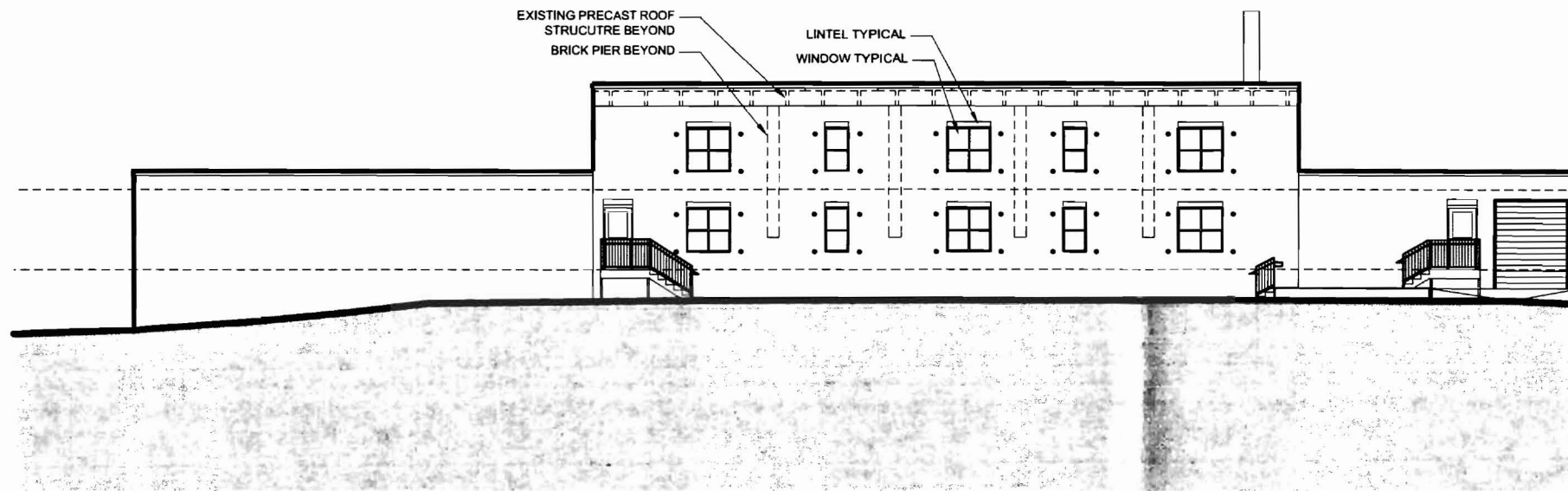


ROOF  
BELOW

1 PLAN AT UPPER HALF OF DOUBLE HEIGHT SPACE  
1/2" = 1'-0"

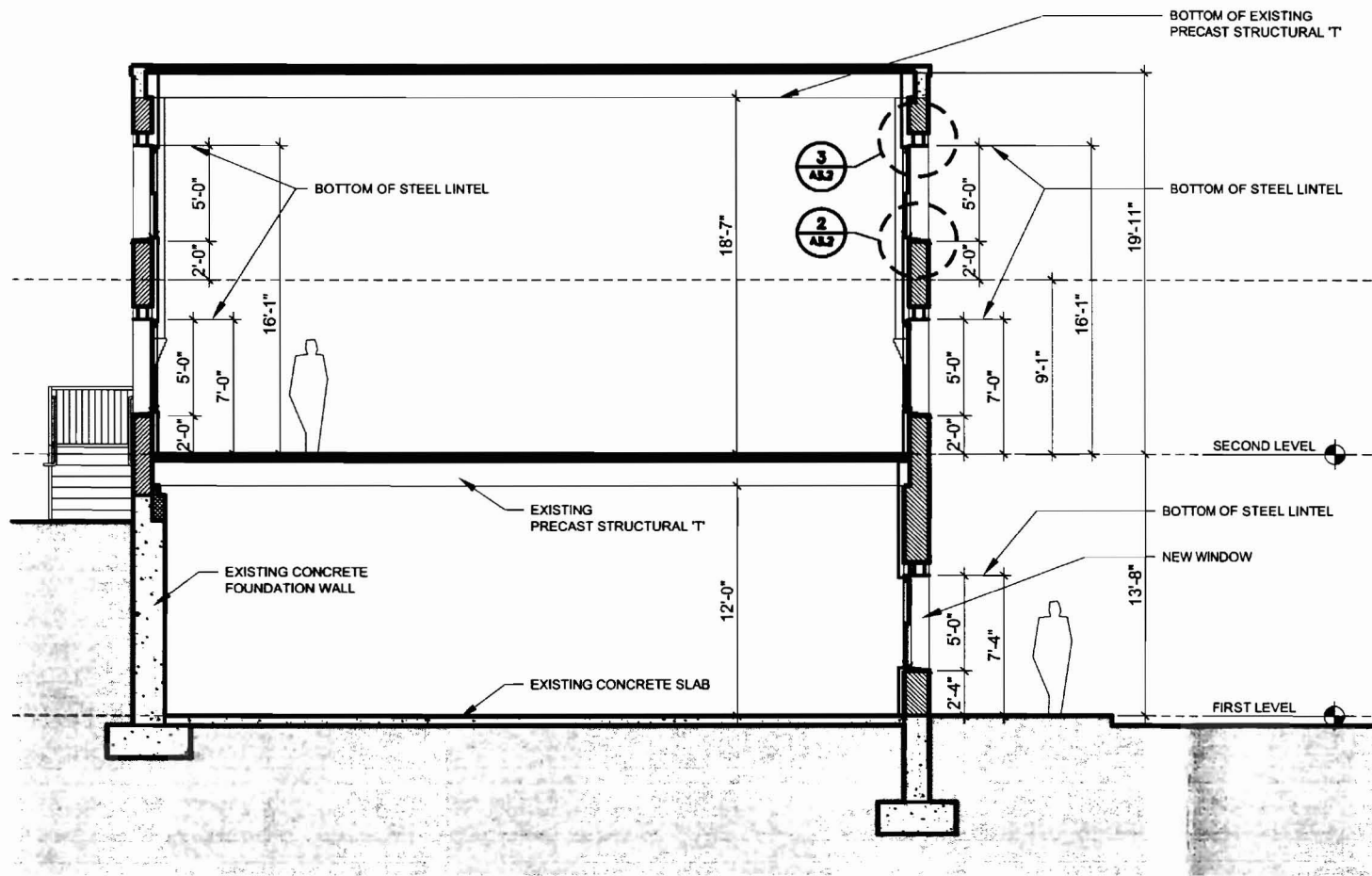


2 WEST ELEVATION (FROM ANDERSON ST)  
 A2.1 1/8" = 1'-0"



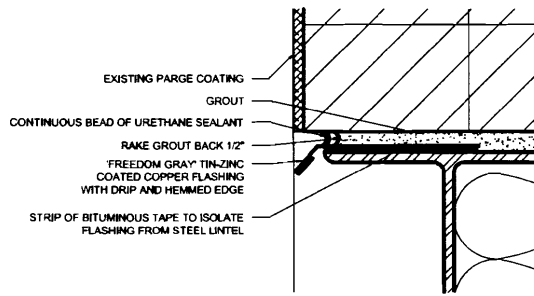
1 EAST ELEVATION (FROM REAR PARKING LEVEL)  
 A2.1 1/8" = 1'-0"



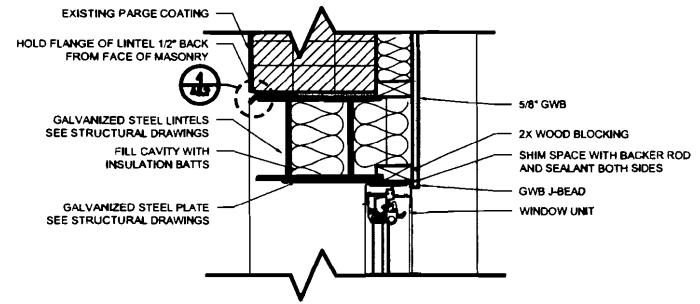


2 BUILDING SECTION  
1/4" = 1'-0"

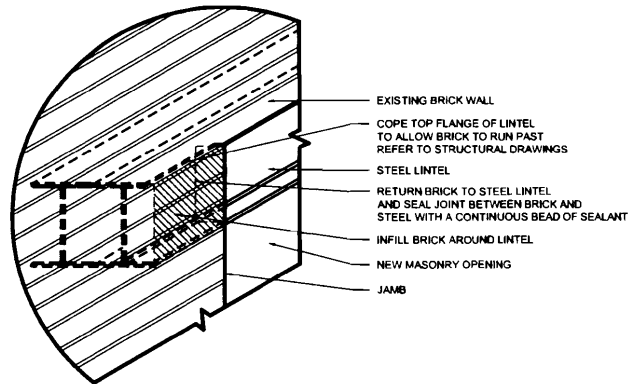
1 NORTH E  
1/8" = 1'-0"



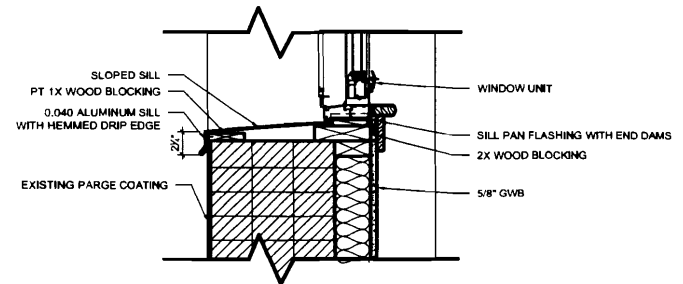
**4** WINDOW HEAD FLASHING DETAIL  
 A3.2 6" = 1'-0"



**3** WINDOW HEAD DETAIL  
 A3.2 1-1/2" = 1'-0"



**5** MASONRY OPENING LINTEL AXONOMETRIC  
 A3.2 NOT TO SCALE

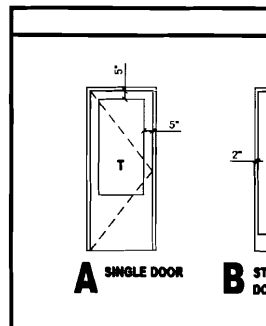
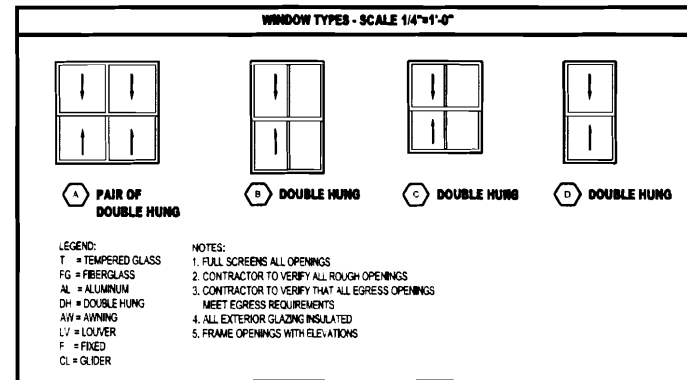


**2** WINDOW SILL DETAIL  
 A3.2 1-1/2" = 1'-0"

5/8" GWB WITH MTL C  
 INS

2  
 3/8" SHIM SPACE WITH  
 AND SEALANT

**1** WIND  
 A3.2 1-1/2" = 1'-0"



**WINDOW SCHEDULE**

| KEY | ACTION | ROUGH OPENING (Width x Height) | DETAILS                       |          |      |      | MATERIAL | FINISH | REMARKS |
|-----|--------|--------------------------------|-------------------------------|----------|------|------|----------|--------|---------|
|     |        |                                | R/O HEAD HEIGHT FROM SUBFLOOR | R/O HEAD | JAMB | SILL |          |        |         |
| A   | JH     | 3'-0-1/2" X 5'-0-1/2"          | -                             | -        | -    | -    | MTL      | -      |         |
| B   | JH     | 3'-7-1/2" X 5'-6-1/2"          | -                             | -        | -    | -    | MTL      | -      |         |
| C   | JH     | 3'-7-1/2" X 4'-8-1/2"          | -                             | -        | -    | -    | MTL      | -      |         |
| D   | JH     | 2'-6-1/2" X 5'-0-1/2"          | -                             | -        | -    | -    | MTL      | -      |         |

FOR TEMPERED GLASS LOCATIONS SEE WINDOW ELEVATION TYPES

**DOOR**

| DOORING | TYPE | SIZE  |        |           | MATERIAL | FINISH | INSULATED | TYPE |
|---------|------|-------|--------|-----------|----------|--------|-----------|------|
|         |      | WIDTH | HEIGHT | THICKNESS |          |        |           |      |
| 001.1   | A    | 3'-0" | 8'-0"  | -         | MTL      | CLR    | -         | 1"   |
| 001.2   | B    | 5'-0" | 8'-0"  | -         | MTL      | CLR    | -         | 1"   |
| 001.3   | C    | 5'-0" | 8'-0"  | -         | MTL      | CLR    | -         | 1"   |
| 001.4   | D    | 5'-0" | 8'-0"  | -         | MTL      | CLR    | -         | 1"   |

