

COMMENTS

- 8/9/00 Spoke w/ Joe Delaney revising plans For lower capacity, test center adding, door changing, wiring, Fire alarm system adding additional Strobes + pull stations. With capacity increased pump panel hardware required ~~WJMS~~
- 9-13-2K MET @ SITE w/ JOE D., CHECKED SIDE SET BACK FROM MADISON ST. KW
- 11-29-2K Inspected & Passed Main bldg drain line prior to back fill & floor pour w/ some.
- 12-8-2K: Inspected & Passed Drain line from lower level Bathroom 5 FBI SKW, KW.
- 7/6/01 - on-site w/ Lt. Mac. + A. Rowe. I. Informed MR. JOE Kozlowski that we MUST HAVE a letter of compliance from their design PRO stating that the entire structure has been built in accordance w/ the APPROVED plans. They ARE WORKING toward a c/o For 7/6/01 JR
- 7/6/01 on site w/ Jay Reynolds. Site issues prohibit issuance of Final c/o. Also Final electrical By (S. Wentworth) on 7/6/01 Revealed some minor issues. Beca 99 SEC. 1525.5 States that guards ARE REQ'd. Beca Section is attached JR
- 7/26/01 Memo from Jay Reynolds stating compliance w/ site issues. Final has been done READY FOR c/o JR
- 9/10/01 outside stairs - waiting for an answer from the State Fire Marshall. ~~they~~ I secured the outside stairs w/ barrier tape so that they could not be used ~~they~~

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 94 Washington Ave

CBL 012 000900101

Issued to The Root Cellar/Property Development services

Date of Issue 08/03/2001

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. 00-0971, 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.

PORTION OF BUILDING OR PREMISES
Entire Structure (Commercial / Mixed)

APPROVED OCCUPANCY
Use Group B/A3
Type 3B
Boca 1999

Limiting Conditions:
None

This certificate supersedes
certificate issued

Approved:
8-6-01
(Date)

Jon Reel
Inspector

[Signature]
Inspector of Buildings

09/11/01
[Handwritten initials]

[Handwritten initials]

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.

CITY OF PORTLAND, MAINE
Department of Building Inspection



Certificate of Occupancy

LOCATION 94 Washington Ave.

Issued to THE Root Cellar

Date of Issue

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. 000971, 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.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

ENTIRE STRUCTURE (COMMERCIAL/MIXED)

USE Group B/A3 TYPE 3B
BOCA 99

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from
to the new owner. A fee of \$1.00 will be furnished to owner or lessee for one dollar.

TO: Sam Hoffses, Chief Building Inspector
Inspections

FROM: Jay Reynolds, Development Review Coordinator

DATE: July 20, 2001

RE: C. of O. for The Root Cellar, #94 Washington Avenue
lead cbl (012-O-009); (Id# 2000-0017)

After re-visiting The Root Cellar, I found all the work to be completed. The guard rails have been installed along the retainer walls where the drop is in excess of 48 inches.

At this time, I recommend issuing a permanent Certificate of Occupancy.

Please contact me if you have any questions or comments.
Thank You.

Cc: Sarah Hopkins, Development Review Services Manager
Mike Nugent, Inspection Services Manager
File: O:\drc\rootcellar1.doc

TO: Sam Hoffses, Chief Building Inspector
Inspections

FROM: Jay Reynolds, Development Review Coordinator

DATE: July 20, 2001

RE: C. of O. for The Root Cellar, #94 Washington Avenue
lead cbl (012-O-009); (Id# 2000-0017)

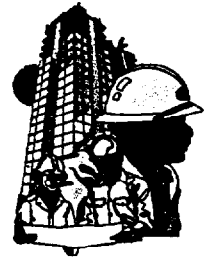
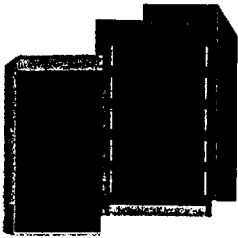
Do

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Cc: Sarah Hopkins, Development Review Services Manager
Mike Nugent, Inspection Services Manager
File: O:\drc\rootcellar1.doc



**CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Rm 315
Portland, ME 04101**

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Service

FROM: Joseph Delaney

RE: Certificate of Design

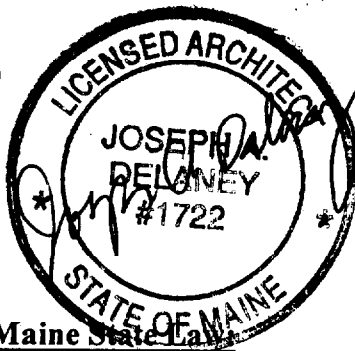
DATE: 8/1/00

These plans and/or specifications covering construction work on:

The Root Cellar, Washington Ave, Portland, Me

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code/1999 Fourteenth Edition, and local amendments.

(SEAL)



Signature Joseph Delaney

Title Architect

Firm Whipple / Callender Architects

Address 551 Congress St., Portland, Me

As per Maine State Law

\$50,000.00 or more in new construction, repair, expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.



City of Portland, Maine

389 Congress St., Rm 315
Portland, ME 04101

ACCESSIBILITY CERTIFICATE

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Services

FROM: Joseph Delaney

RE: Certificate of Design, HANDICAP ACCESSIBILITY

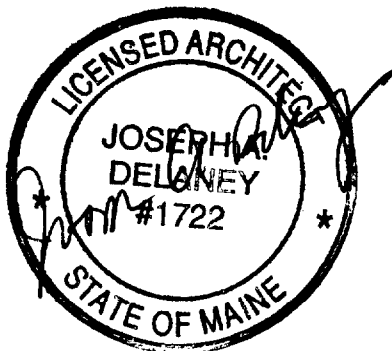
DATE: 8/1/00

These plans and/or specifications covering construction work on:

The Root Cellar, Washington Ave, Portland Me.

Have been designed and drawn up by the undersigned, a Maine registered engineer/architect according to State Regulations as adopted by the State of Maine on Handicapped Accessibility.

(SEAL)



Signature Joseph Delaney

Title Architect

Firm Whipple-Collender Architects

Address 551 Congress St. Portland, Me.
04101

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

#15W
012-0-009

PROPERTY ADDRESS

Town or Plantation: Portland ME
Street Subdivision Lot #: 94 Washington Portland
THE ROOT CELLAR

PROPERTY OWNERS NAME

Last: _____ First: _____
Applicant Name: Czeslaw Skowron
Mailing Address of Owner/Applicant (if Different): 22 DRAKE ST. Portland ME 04103

PORTLAND Date Permit Issued: 11 28 00 PERMIT # 7532 STATE COPY \$ 13.8 Double Fee Charged
202 Local Plumbing Inspector Signature L.P.I. # 0124

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Czeslaw Skowron 11/28/00
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER/MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
	1	Floor Drain		Shower (Separate)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	8	Sink
	1	Drinking Fountain		Wash Basin
		Indirect Waste	10	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
OR TRANSFER FEE [\$6.00]		Bidet	1	Laundry Tub
		Other: _____	1	Water Heater
		Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 1
			21	Fixtures (Subtotal) Column 2
			23	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE