Portland, Maine



Yes. Life's good here.

Permitting and Inspections Department Michael A. Russell, MS, Director

Commercial Interior Alteration Checklist

(Including change of use, tenant fit-up*, amendment and/or interior demolition)

Fo ar with schedule, hood location and interior finish materials. Accessible seating and counter details shall be included, please refer to this site: http://www.alphaonenow.org/userfiles/resto_access_sheet.pdf

Separate permits are required for internal and external plumbing, electrical installations, heating, ventilating and air conditioning (HVAC) systems, appliances and commercial kitchen hoods.

^{*}Tenant fit-up: construction necessary within the demising walls of a leased space, including partitions, finishes, fixtures, lighting, power, equipment, etc. making the interior space suitable for the intended occupation.

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Certificate of Accessible Building Compliance

All facilities for the use of a public entity shall be readily accessible by individuals with disabilities.

Project Name:	Root Wild	Project Address: 135	Washington Ave.
Classification:	Title II (State/Local Government)	Title III (Public Ac	commodation/Commercial Facility)
O New Building American Maine He State Alteration/A Existing E Orig Addi American Path Maine He Barr State Occupancy C New Ow	g ns with Disabilities Act (ADA) uman Rights Act (MHRA) ier Free Certification (\$75,000+ scope of wor e Fire Marshal Plan Review Approval	k)	(New tenant)
☐ Cove	uman Rights Act (MHRA) ered Multifamily Dwelling (4+ units) lic Housing (20+ units) Federal Accessibility Standards (UFAS) eplain:		
	and your electronic signature is considered a legal		our electronic signature is considered a legal
Name: An Address: Port Newbyry St. Phone: 201-	chrew Hyland City Architecture 65 ., Portland, ME 04101 -761-9000	Name: Reid Address: 14 Ho South Por Phone: reidem	Emmerich milton St rtand, ME 04106 merich@hotmail.com

Portland, Maine



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Permitting and Inspections Department Michael A. Russell, MS, Director

General Building Permit Application

Project Address: 35	Washington Ave. Po	ortland, ME 04101	
Tax Assessor's CBL: 012		Work: \$ 30,000	
Chart # Proposed use (e.g., single-family,	retail, restaurant, etc.):	tasting of Kombucha tea	
Current use: Vacant			
O Commercial O M		One/Two Family Residential	
Type of work (check all that ap	oply):		
☐ New Structure	☐ Foundation Only	☐ Change of Ownership - Condo Conversion	
Addition	Fence	☐ Change of Use	
Alteration	Pool - Above Ground	☐ Change of Use - Home Occupation	
☐ Amendment	Pool - In Ground	☐ Radio/Telecommunications Equipment	
☐ Shed	☐ Retaining Wall	☐ Radio/Telecommunications Tower	
☐ Demolition - Structure	☐ Replacement Windows	☐ Tent/Stage	
☐ Demolition - Interior	☐ Commercial Hood System	☐ Wind Tower	
☐ Garage - Attached	☐ Tank Installation/Replacement	☐ Solar Energy Installation	
☐ Garage - Detatched	☐ Tank Removal	☐ Site Alteration	
Project description/scope of w	vork (attach additional pages if r	needed):	
Processor Control Cont			
distribution e ex	isting overhead door	•	
Applicant Name: Reid E	mmerich	Phone: (207) 303 - 9043	
Address: 14 Hamilton S	t. South Portland, ME	Fmail: reidemmeriche hotmail.co	
		Lindin Total Million 10476 Million 100	
Lessee/Owner Name (if differen		Phone: ()	
Address:		Email	
Address.		EIIIdii.	
Contractor Name (if different): _	NOT YET CHOSEN	Phone: ()	
Address:		Email:	
I hereby certify that I am the owner of rec	cord of the named property, or that the owr	ner of record authorizes the proposed work and that I have	
dutionly to enter an areas covered by th	One/Two Family Residential of work (check all that apply): lew Structure		
Signature:		Date: 2/23/18	
	ent and your electronic signature is consider	red a legal signature per Maine state law.	

Review of this application will not begin until the permit payment is received. This is not a permit. Work may not commence until the permit is issued.



Permitting and Inspections Department Michael A. Russell, MS, Director

Electronic Signature and Fee Payment Confirmation

This is a legal document and your electronic signature is considered a legal signature per Maine state law. You will receive an e-mailed invoice from our office which signifies that your electronic permit application has been received and is ready for payment. Please pay by one of the following:

- > Electronic check or credit card: portlandmaine.gov/payyourpermit
- Over the phone at (207) 874-8703
- > Drop off to Room 315, City Hall
- Mail to:

City of Portland
Permitting and Inspections Department
389 Congress Street, Room 315
Portland, Maine 04101

By signing below, I understand the review process starts once my payment has been received. After all approvals have been completed, my permit will be issued via e-mail. Work may not commence until permit is issued.

Applicant Signature Date: $\frac{2}{23/18}$

I have provided electronic copies and sent themon:

Date: 2 /23/18

NOTE: All electronic paperwork must be delivered to <u>permitting@portlandmaine.gov</u> or with a thumb drive to the office.

If you or the property owner owes taxes or user charges on property within the City, payment arrangements must be made before a permit application is accepted.

MD RS

CONSTRUCTION PERMIT APPLICATION

Project Information

Department of Public Safety Office of State Fire Marshal 45 Commerce Dr, Suite 1 Augusta, Maine 04333-0052

Project Name: Root Wild	Augusta, Maine 04333-0052						
Street Location: 135 Washington Ave	Town: Portland						
A 1 1 1 1							
County: Umberland Zip Code: 0410							
Project Type: New Building/Addition Renovation Building Occupancy Use Single use Separated Use	Layout: Sprinkler System: No Yes Supervised Fire Alarm:						
Occupancy Change Mixed Use	No Yes Monitored						
Project Information: Projected Start Date: 3/20/8 Projected End Date: 4/20/8 Total Project Cost: Total # of Stories: Total Project Cost: Total # of Stories:							
	X 0.0015 = Construction Permit Fee:						
*see attached fee schedule for more information	Approval Letter Only (\$50 fee):						
Occupancy Classification: Apartments Ambulatory Health Care Assembly Assembly 300 >300 <1000 >1000 Business Detention/Correctional Educational Daycare >12 12 12 Health Care Hotel/Dormitory Industrial Residential Board & Care Large Small Other Rooming & Lodging Storage Mercantile Class A Class B Class C							
Construction Type							
Fire Resistive: Type I Protected Non-Combustible: Type II Unprotected Non-Combustible: Type II Protected Ordinary: Type III Brief description of work to be performed: Storage mezzanine above.	Unprotected Ordinary: Type III (200) Heavy Timber: Type IV (2HH) Protected Wood Frame: Type V (111) Unprotected Wood Frame: Type V (000) restroom, fermentatim room w/						
Poi / Francis / Contact 1	Information						
	ne: <u>207-303-9043</u> Fax:						
Mailing Address: 14 Hamilton St.	1 AZIAC B II maid amana ami da alama il						
	de: <u>04106</u> E-mail: <u>reidemmeriche hotmail</u> .com Phone: <u>207-761-9000</u> Fax:						
Mailing Address: 65 Newbury St.	Prione: 20 1 1000 Pax:						
	e: ME Zip Code: 04/0/						
Maine Registration #: 20-37	e: <u>ME</u> Zip Code: <u>04101</u> E-mail: <u>Mark@portcityarch.com</u>						
Signature of Applicant:							
↓ DEPARTMENT OF PUBI	LIC SAFETY USE ONLY ↓						
Permit Approval Letter (when a permit is not required)	Approved By:						
Check # Plan Reviewer	Date Permit Issued Permit #						



Paul LePage Governor

John E. Morris Commissioner

STATE OF MAINE

Department of Public Safety State Fire Marshal's Office Building Codes and Standards Unit

45 Commerce Drive 52 State House Station Augusta, Maine 04333-0052 207-624-7007



Joseph Thomas State Fire Marshal

Richard McCarthy Assistant State Fire Marshal

BUILDING CODE SURCHARGE

Project Information

Project Name: Root Wild				
Street Location: 135 Washington Ave. Town: Portland Project Total Square Footage*: 2,400 Building Code Surcharge: 9600				
Project Total Square Footage*: 2,400 Building Code Surcharge: * 9600000000000000000000000000000000000				
Sec. 13.25 MRSA §2450-A is enacted to read:				
§2450-A. Surcharge on plan review fee for the Uniform Building Codes and Standards Fund				
In addition to the fees established in section 2450, a surcharge of 4¢ per *square foot of occupied space must be levied on the existing fee schedule for new construction, reconstruction, repairs, renovations or new use for the sole purpose of funding the activities of the Technical Building codes and Standards Board with respect to the Maine Uniform Building and Energy Code, established pursuant to the Title 10, chapter 1103, the activities of the Bureau of Building Codes and Standards under chapter 314 and the activities of the Executive Department, State Planning Office under Title 30-A, section 4451, subsection 3-A,				
The fee for review of a plan for the renovation of a public school, including the fee established under section 2450, may not exceed \$450.				
Revenue collected from this surcharge must be deposited into the Uniform Building codes and Standards Fund established by section 2374. Please mail your Surcharge in the amount shown above to the address at the top of this letter. Thank you in advance for your attention to this matter.				
Date Fee received:				
Paid by:				
Check #:				
Payment for all fees, Construction Fee, Building Code Surcharge & Barrier-Free Fee, may be submitted on one check, payable to Treasurer , State of Maine .				



BARRIER-FREE PERMIT APPLICATION

Department of Public Safety Office of State Fire Marshal 45 Commerce Dr., Suite 1 Augusta, Maine 04333-0052

Project Information

Department of Public Safety				
Check # Plan Reviewer	Date Per	mit Issued	Permit #	!
Permit Approval Letter (when a permit is not rec	uired) Approved By:			
↓ DEPARTMENT	OF PUBLIC SAFETY US	SE ONLY ↓		
Signature of Applicant:		Production and the second	/	
Maine Registration #: 2037	E-mail:	nark@portci	ityarch.c	om
rown: Portland, 10	State: ME	Z	Zip Code: 04	101
Mailing Address: 65 Newbury Street				21 55
Design Professional: Andrew Hyland		-761-9000	Fax:	
Town: South Portland State: ME	Zip Code: 04106	E-mail: reider	nmeriche	hotmail.
Mailing Address: 4 Hamilton St.				900
Owner's Name: Reid Emmerich	Contact Information Phone: 207-30	3-9043 F	ax:	
Brief description of work to be performed:				
Protected Ordinary: Type III (211)		Unprotected Wood Fra		(000)
Unprotected Non-Combustible: Type II (000)		Protected Wood Frame	0.7	(111)
Protected Non-Combustible: Type II (222)		Heavy Timber: Type I		(2HH)
Fire Resistive: Type I (443)	(332)	Unprotected Ordinary:	: Type III	(200)
Construction Type				
Other Rooming & Lodging S	orage Mer	cantile Class A	Class B	Class C
		idential Board & Care		Small
			<12	
Apartments Ambulatory Health Care	Asse	embly <300	>300 <1000	>1000
Occupancy Classification:		ed fee schedule for more inf	formation	
	Barrier-l	Free Permit Fee:	2500	
Total Project Cost: 30,000 Total # of St	ories:	Total s.f.:	2,4	100
Projected End Date: 4/2018 Affected # o		New Constr		
Project Information: Number of Projected Start Date: 3/2018 Original # o		Square Foo Renovated s		00
Occupancy Change Mixed Use		No Yes	Monitored	
Renovation Separated Use		Fire Alarm:	٦	
New Building/Addition Single use		No Yes _	_ Supervised _	
Project Type: Building Occupa	icy Use Layout:	Sprinkler System:	7	
County: CV Wher and Zip Code: _	04101	*		
treet Location: 135 Washington A	ve	Town: Por	-tland	