

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

Permit No: 07-0246	Issue Date:	CBL: 013 G010001
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Location of Construction: 223 CONGRESS ST	Owner Name: MAJE IN MAINE LLC	Owner Address: APT H 605 8617 PINE ST	Phone:
Business Name:	Contractor Name: Atlantic Restaurant Services	Contractor Address: 34 Albion Road Windham	Phone 2076530645
Lessee/Buyer's Name	Phone:	Permit Type: Hood Systems, Commerical	Zone:

Past Use: Mixed Use	Proposed Use: Mixed Use - North Star Cafe, install a 48" exhaust hood & vent duct	Permit Fee:	Cost of Work: \$6,000.00	CEO District: 1
Proposed Project Description: Install a 48" exhaust hood & vent duct		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
		Signature:	Date:	

Permit Taken By: dmartin	Date Applied For: 03/09/2007	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 type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

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Business Name:	Contractor Name: Atlantic Restaurant Services	Contractor Address: 34 Albion Road Windham	Phone 2076530645
Lessee/Buyer's Name	Phone:	Permit Type: Hood Systems, Commerical	Zone:

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 03/13/2007
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 with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 04/03/2007
Note: **Ok to Issue:**

- 1) Equipment must be installed in compliance with the manufacturer's specifications
- 2) The Hood shall be installed per IMC 2003 and NFPA 96
This permit is approved based on the plans submitted and updated for reductions in the clearances based on the application of a UL approved fire wrap or equivalent assembly per code.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 03/13/2007
Note: **Ok to Issue:**

- 1) Hood fire extinguishing equipment shall comply with Chapter 10
- 2) Install shall comply with NFPA 96.
A compliance letter is required.

Comments:

3/12/2007-amachado: Left message for Anna Maria Tocci. Need right, title and interest to show that she is leasing space.
3/22/2007-amachado: Gave back to Ann in zoning to determine the full use of the property as there are 2 buildings and a 1 story connector.
Left a msg with contractor to call, need a design for clearances to combustibles
3/30/2007-jmb: Mike submitted the wall detail for behind the hood, ok to issue
3/26/2007-jmb: Mark the contractor came in to discuss the clearances and will resubmit a plan for the wall. He will put 3m wrap on the duct and above the hood.

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