

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

PERMITS  
DEC 15 2003

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

## PERMIT

Permit Number: 031415

This is to certify that Bartlett Island LLC  
has permission to Coffee Shop/ retail and office renovation interior to include partition walls, small retail counter in front of building  
AT 43 Washington Ave 013 I020001

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 work on permit must be completed before this building or part thereof is closed-in. **48 HOUR 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. CHM  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*[Signature]*  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**PERMIT ISSUED**

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

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

Permit No: 03-1415	Issue Date: <b>DEC 14 2003</b>	CBL: 013 I020001
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<b>Location of Construction:</b> 43 Washington Ave	<b>Owner Name:</b> Bartlett Island LLC	<b>Owner Address:</b> 67 India St	<b>Phone:</b> 879-2233
<b>Business Name:</b>	<b>Contractor Name:</b>	<b>Contractor Address:</b> PO Box 473 Westbrook	<b>Phone:</b> 2078579488
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit type:</b> Alterations - Commercial	<b>Zone:</b> B2b

<b>Past Use:</b> Commercial Bakery	<b>Proposed Use:</b> Coffee Shop/ retail and office- Renovate interior to include partition walls, small retail counter in front of building	<b>Permit Fee:</b> \$291.00	<b>Cost of Work:</b> \$30,000.00	<b>CEO District:</b> 1
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<b>Proposed Project Description:</b> Coffee Shop/ retail and office- Renovate interior to include partition walls, small retail counter in front of building	<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: 6 Type: SB 12/14/03
<i>not a changed use - dd bakery had retail in front also</i>	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 11/13/2003	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan  Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>11/20/03</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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>
	<i>Separate permits are required for any new signage</i>		

**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

5-26-04

Did close in inspection  
of framing & plumbing  
MC OK'd Electrical

AW

10/15/04

OK for CGO. FSE punch list  
done. A Now

No actual CGO needed. See  
notes on print as per Marge Schamikal.

A Now



# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town Of Plantation	Portland
Street Subdivision Lot #	54 Washington Ave

## PROPERTY OWNERS NAME

Last: Coffee	First: Design
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Applicant Name:	Mike Cassano
Mailing Address of Owner/Applicant (If Different)	175... Scarborough

2003 8408

Date Permit Issued: 12/9/03

Local Plumbing Inspector Signature: Jeanie Bourke

L.P.I. # 017312

\$ 178.00  If Double Fee FEE Charged

013 I 020001

## 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.

Signature of Owner/Applicant: [Signature] Date: 12/13/03

## 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: [Signature] Date Approved: [Signature]

<p><b>This Application is for</b></p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Commercial</u></p>	<p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="font-size: 2em; text-align: center;">OR</p> <p>PIPING RELOCATION: of sanitary</p>		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
	1	Urinal	4	Sink
			3	Wash Basin
			1	Water Closet (Toilet)
				Clothes Washer
	1	Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<p style="font-size: 2em; text-align: center;">OR</p> <p>TRANSFER FEE [\$6.00]</p>		Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
			3	Fixtures (Subtotal) Column 2
			12	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

*Handwritten notes:* 1262

178  
TOWN COPY

# ELECTRICAL PERMIT

## City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 12-4-03  
 Permit # 013-5150  
 CBL# 1020

LOCATION: 43 Washington Ave METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER Bartlett Island LLC  
 TENANT Coffee Bu Desman PHONE # \_\_\_\_\_

							TOTAL	EACH FEE	
OUTLETS	<u>60</u> Receptacles	<u>15</u> Switches	<u>1</u> Smoke Detector				.20	<u>12.00</u>	
FIXTURES	<u>12</u> Incandescent	<u>40</u> Fluorescent	Strips				.20	<u>10.40</u>	
SERVICES	Overhead	Underground	TTL AMPS	<800			15.00		
	Overhead	Underground		>800			25.00		
Temporary Service	Overhead	Underground	TTL AMPS				25.00		
							25.00		
METERS	(number of)						1.00		
MOTORS	(number of)						2.00		
RESID/COM	Electric units						1.00		
HEATING	oil/gas units	Interior	Exterior				5.00		
APPLIANCES	Ranges	Cook Tops	Wall Ovens				2.00		
	Insta-Hot	Water heaters	Fans				2.00		
	Dryers	Disposals	<u>1</u> Dishwasher				2.00	<u>2.00</u>	
	Compactors	Spa	Washing Machine				2.00		
	Others (denote)						2.00		
MISC. (number of)	Air Cond/win						3.00		
	Air Cond/cent						10.00		
	<u>4</u> HVAC	EMS	<u>*</u> Thermostat				5.00	<u>10.00</u>	
	<u>*</u> Signs						10.00	<u>10.00</u>	
	Alarms/res						5.00		
	<u>1</u> Alarms/com						15.00	<u>15.00</u>	
	Heavy Duty(CRKT)						2.00		
	Circus/Carnv						25.00		
	Alterations						5.00		
	Fire Repairs						15.00		
	E Lights						1.00		
	E Generators						20.00		
PANELS	Service	Remote	Main				4.00		
TRANSFORMER	0-25 Kva						5.00		
	25-200 Kva						8.00		
	Over 200 Kva						10.00		
TOTAL AMOUNT DUE									
MINIMUM FEE/COMMERCIAL 45.00							MINIMUM FEE	35.00	<u>2.00</u>

CONTRACTORS NAME Darren L Spa MASTER LIC. # MS60016525  
 ADDRESS 76 Middle Rd Cumberland ME 04021 LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 207 829 4618

SIGNATURE OF CONTRACTOR Darren L Spa



SEND TO STATE

CITY OF PORTLAND, MAINE
FOOD SERVICE HEALTH
INSPECTION REPORT

013-IT-020

10

Owner Name: Vito's ITALIAN BAKERY
Establishment Name: Vito's ITALIAN BAKERY
Address: 41 WASHINGTON AVE
Location: PORTLAND
MCD #: 05170
ESTAB #:
SANI #: 5/1
ROOMS: 1
SITES: 1
SEATS: 1
DATE: 01/12/12
PURPOSE: REGULAR 1, FOLLOW-UP 2, COMPLAINT 3, INVESTIGATION 4, NEW/OTHER 5
ESTAB. TYPE: 80
Reinspection to be conducted within 30 days
DEMERITS: 5 PT, 4 PT, 2 PT, 1 PT

FOOD SUPPLY AND SOURCE

- 1. Spoiled and/or adulterated foods are being used and/or served Rule 2 1 A.1 5 DEMERITS.
2. Unpasteurized milk, milk products, cracked eggs, unpasteurized egg products being used and/or served Rules 2 1 B 4 5 DEMERITS.
3. Canned foods from an unapproved source on premises, being used and/or served Rule 2 1 A 3 5 DEMERITS.
4. Unlabeled, improperly labeled containers of food are being used and/or served Rule 2 1 A 2 1 DEMERIT.
5. Canned goods found leaking, with severe dents in rusty condition, and/or swollen Rule 2 1 A 1 5 DEMERITS.
6. Shellfish not being kept in original container, seafood products misrepresented Rule 2 1 B 2 and 2 1 B 3 1 DEMERITS.
7. Meat and/or meat products not USDA approved Rule 2 1 A 2 5 DEMERITS.

FOOD PREPARATION AND PROTECTION

- 8. Cooked and/or prepared foods are subjected to cross contamination, from raw foods of other sources of contamination Rules 2 2 A 1 and 2 3 B 5 2 DEMERITS.
9. Employees handle raw and cooked or prepared food products without thorough hand-washing in between. Rules 2.2.A.1. and 2.3.B.5. 5 DEMERITS.
10. Raw fruits and/or vegetables are not washed before being used and/or served. Rule 2.4.B.1. 2 DEMERITS.
11. Food contact surfaces not washed, rinsed, and/or sanitized after each use and following any kind of operation when contamination may have occurred. Rule 5.1.A.3. 2 DEMERITS.
12. Food (ice) contact surfaces are improperly designed, constructed, installed, maintained and/or located. Rules 4.2.A., 4.2.B., 4.3.A., 4.3.B. 2 DEMERITS.
13. Food not protected during storage/display, food left uncovered, food improperly stored on floor, food containers in cold storage double stacked or nested, sneeze guards absent. Rules 2.2.A.1., 2.4.F.7. 2 DEMERITS.
14. Institutions: Ghost tray(s) not kept, not dated, Rule 10.2 1/2 pint milk not retained, schools: milk not kept at 40°F or below. Rule 2.1.B.1. 2 DEMERITS.
15. Storage of food and/or beverages in ice or water is prohibited. Rule 2.4.I.2. 2 DEMERITS.
16. Liner wrapper and/or potentially hazardous food products previously served to the public were being reused. Rule 2.4.J.1. 5 DEMERITS.
17. Cans were being used improperly to hold food Rule 2.3.B.7. 1 DEMERIT

FOOD TEMPERATURES

- 18. Potentially hazardous food(s) not being reheated, cooked long enough to be adequately heated to all parts Rule 2.4.G.3. 5 DEMERITS.
19. Prepared potentially hazardous foods requiring refrigeration are not being rapidly cooled to 45° or below. The measured temperature was °F. Rule 2.3.C.3. 5 DEMERITS.
20. Frozen food not being kept at 0°F or below, improper thawing. The measured temperature was °F. Rule 2.3.C.4. 5 DEMERITS.
21. Potentially hazardous hot food(s) not being stored at 140°F or above. The measured temperature was °F. Rules 2.4.G.1., 2.4.H.1.a. 5 DEMERITS.
22. Potentially hazardous cold food(s) not being stored at 45°F or below. The measured temperature was °F. Rules 2.4.G.1., and 2.4.H.1.b. 5 DEMERITS.
23. Crowded refrigeration: There is less than 1/4 cubic foot of refrigeration per meal. Rule 10.1. 2 DEMERITS.
24. The containers used transporting food are inadequate. Rules 2.4.L.1., and 9.1.A. 1 DEMERIT
25. Accurate thermometers not available or used to evaluate hot holding, cooking, reheating, and refrigerated storage temperatures. Rules 2.3.C.1. and 2.3.D.2. 1 DEMERIT.

PERSONNEL

- 26. No certified food handler/manager. Rules 3.5.
27. Personnel with communicable disease(s), boils, infected wound(s), respiratory or gastrointestinal infection, are preparing and serving food. Rule 3.1.A. 5 DEMERITS.
28. Personnel: with dirty hands and/or smoking when preparing and serving food, with poor hygienic practice, eating, drinking, in food preparation and/or dish-washing areas. Rules 3.2.A., 3.2.B., and 3.4.A. 5 DEMERITS.
29. Hair restraints not worn by food handlers. Rule 3.3.B. 1 DEMERITS.

FOOD EQUIPMENT AND UTENSILS

- 30. Food/non food contact surfaces of equipment: in disrepair (cracks, chips, pits, open seams), not easily cleanable. Rules 4.1.A., 4.2.A., and 4.2.B. 2 DEMERITS.
31. Single service articles improperly stored, dispensed, handled, reused. Rules 4.4.A. and 5.2.C. 2 DEMERITS.
32. Wiping cloths: dirty, not stored properly in sanitizing solutions Rule 5.1.B. 1 DEMERIT.

DISHWASHING

- 33. Dishes/utensils not being scraped, soaked, preflushed. Rule 5.1.C.4. 1 DEMERIT.
34. Dishes/utensils are not being washed in a detergent solution having a temperature of at least 120°F. The measured temperature was °F. Rule 5.1.C.5. 2 DEMERITS.
35. Dishes/utensils are not being sanitized by immersion for 30 seconds in clean hot water with a temperature of at least 170°F. The measured temperature was °F.

TOXIC MATERIALS

- 47. Toxic materials, personal medications and/or first-aid supplies were: improperly stored, labeled, used in food. Rule 7.12. 5 DEMERITS.

WATER SUPPLY

- 48. A copy of the current water analysis was not available at the facility. Further testing may be required. Rule 6.1.E.3. 2 DEMERITS.
49. Water tested and found to be unsatisfactory. Rule 6.1.A.1. 5 DEMERITS.
50. The free chlorine was less than 0.25 ppm. The measured chlorine residual was ppm. Rule 6.1.A.2. 5 DEMERITS.
51. Hot and cold water (under pressure) was not provided to the: sinks, dishwashers, or lavatories. Rule 6.1.D.1. 5 DEMERITS.
52. (Mobile food units) The water storage tank: does not have adequate storage, is not being properly cleaned and sanitized after each day's use Rule 8.1.C.1. 2 DEMERITS.

WASTEWATER DISPOSAL

- 53. The subsurface disposal system was found to be surfacing. Rule 6.2.A. 4 DEMERITS.
54. Wastewater was being improperly discharged onto the ground. Rule 6.2.A. 4 DEMERITS.
55. (Mobile food units): waste water storage tank does not have adequate storage. Rule 8.1.C.2. 4 DEMERITS.

PLUMBING

- 56. Kitchen sink, utility sink, grease trap, drain, plumbing: is improperly sized, installed and/or maintained. Rules 6.4.F. and 7.8. 2 DEMERITS.
57. A cross-connection, without backflow device, exists between the drinking and the wastewater systems at the: faucet hose, hot water heater, water closets, other: Rule 6.4.C. 5 DEMERITS.

TOILET AND HANDWASH FACILITIES

- 58. Toilets rooms: Completely enclosed, Equipped with self-closing, tight fitting doors, properly vented, tissue provided, covered waste receptacle (ladies). Rules 6.5, 6.6, and 6.7. 2 DEMERITS.
59. Inadequate number of male and/or female toilets. The number of toilets are: male and female. Rule 6.5 1 DEMERIT.
60. Handwash lavatories: clean, adequate number, accessible, fixtures maintained, hand cleansing soap, sanitary towel/hand drying devices not provided common towel. Rules 6.3. and 6.8 4 DEMERITS.

RUBBISH

- 61. Inadequate, uncovered containers were being used. Rule 6.9. 2 DEMERITS.
62. Storage areas were not clean, free of litter, Rule 6.9.B.4. 2 DEMERITS.
63. Storage areas are not constructed to be: inaccessible to vermin, easily cleaned, refuse bin of questionable safety. Rules 6.9 and 6.10. 2 DEMERITS.

INSECT, RODENT & ANIMAL CONTROL

- 64. Flies, rodents, roaches, live animals (other than security or guide dogs) were found on the premises. Rule 6.10. and 7.12.G. 4 DEMERITS.
65. Food service facilities: The outer doors, windows, skylights, transoms were not adequately screened. Rule 6.10.D. 4 DEMERITS.

CONSTRUCTION OR MAINTENANCE OF PHYSICAL FACILITIES

- 66. Floors, walls, ceilings, not smooth, properly constructed, in disrepair, dirty surfaces. Rules 7.1-7.6. 1 DEMERIT.
67. Lighting ventilation inadequate, fixture(s) not shielded, dirty ventilation hoods, ductwork, filters, exhaust fans. Rules 7.6, 7.9, 7.10. 1 DEMERIT.
68. Premises littered, unnecessary equipment and articles present. Rule 7.11.A.1. 1 DEMERIT.
69. Improper storage of cleaning equipment, linens. Rule 7.11.B. 1 DEMERIT.

LODGING

- 70. The sleeping room(s) are: inadequately ventilated, unclean, in disrepair, undersized, improper bed spacing. Rules 12.9 and 12.11. 1 DEMERIT.
71. The Toilets, lavatories, showers, were not: clean, in good repair. Rules 12.3 and 12.9.D. 2 DEMERITS.
72. Hand cleansers, towels, were: not found, inadequate. Rule 12.4 2 DEMERITS.
73. The carpeting is not: clean, in good repair. Rule 12.9.C. 1 DEMERIT.
74. Drinking glasses not suitably sanitized and packaged. Rule 12.6. 2 DEMERITS.
75. Gas Appliances: hot water heaters, refrigerators, clothes dryers, floor furnaces found in sleeping rooms were not: adequately vented, equipped with automatic pilots, equipped with an automatic control valve. Rule 12.10. 4 DEMERITS

**i Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 03-1415	<b>Date Applied For:</b> 11/13/2003	<b>CBL:</b> 013 I020001
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<b>Location of Construction:</b> 43 Washington Ave	<b>Owner Name:</b> Bartlett Island LLC	<b>Owner Address:</b> 67 India St	<b>Phone:</b> ( ) 879-2233
<b>Business Name:</b>	<b>Contractor Name:</b>	<b>Contractor Address:</b> PO Box 473 Westbrook	<b>Phone:</b> (207) 857-9488
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Coffee Shop/ retail and office- Renovate interior to include partition walls, small retail counter in front of building	<b>Proposed Project Description:</b> Coffee Shop/ retail and office- Renovate interior to include partition walls, small retail counter in front of building
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 11/20/2003
<b>Note:</b>	<b>Ok to Issue:</b> <input type="checkbox"/>		

<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Mike Nugent	<b>Approval Date:</b> 12/03/2003
<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		
1) Separate permits are required for HVAC, Local exhaust, plumbing and electrical.			

<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Lt. MacDougal	<b>Approval Date:</b> 11/24/2003
<b>Note:</b>	<b>Ok to Issue:</b> <input type="checkbox"/>		

<b>Comments:</b> 11/25/2003-mjn: Left a message with Alan Spear regarding HVAC/ vent for coffee machines
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# BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

**Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

**Footing/Building Location Inspection:** Prior to pouring concrete

**Re-Bar Schedule Inspection:** Prior to pouring concrete

**Foundation Inspection:** Prior to placing ANY backfill

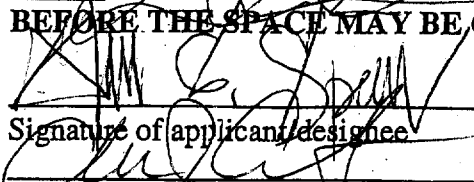
**Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

**Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. **NOTE:** There is a \$75.00 fee per inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

**If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

~~CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED~~

  
\_\_\_\_\_  
Signature of applicant/designee

\_\_\_\_\_  
Date

12/4/03

  
\_\_\_\_\_  
Signature of inspections Official

\_\_\_\_\_  
Date

CBL: 013 1020 Building Permit #: 031415



# Commercial 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>43 Washington Ave., Portland</u>		Total Square Footage of Proposed Structure: <u>existing building: 5259 sq</u>	
Square Footage of Lot: <u>0.137 acres</u>		Tax Assessor's Chart, Block & Lot: <u>Chart # 13, Block # I, Lot # 20</u>	
Owner: <u>Bartk# Island LLC</u> 67 India Street Portland, Maine Telephone: <u>207/879-2233</u>		Lessee/Buyer's Name (If Applicable): <u>n.g.</u>	
Applicant name, address & telephone: <u>Bartk# Island LLC</u> 67 India Street Portland ME 04101 207-879-2233		Current Specific use: <u>former Vito's Bakery Building</u>	
Proposed Specific use: <u>Coffee By Design Roastery, Retail and Office</u>		Project description: <u>Manager determined this is not a change of use. Existing building footprint remains unchanged. Renovation interior to include partition wall to define specific areas. Renovation will include a small retail counter in front part of building. See attached CBD Roastery plan.</u>	
Contractor's name, address & telephone: <u>Alan Spear, general contractor</u> 67 India St., Portland, ME 04101 207/879-2233		Who should we contact when the permit is ready: <u>Alan Spear</u> 207/879-2233	
Mailing address: <u>67 India Street</u> Portland, ME 04101		Phone: <u>207/879-2233 x6</u>	

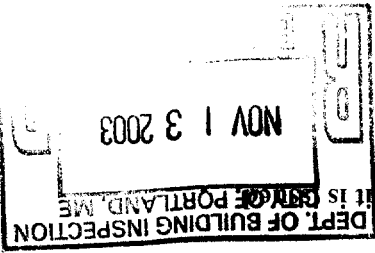
Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections 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 of applicant: [Signature] Date: 11/13/03

Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost



This is not a Permit; you may not commence any work until the Permit is issued.