

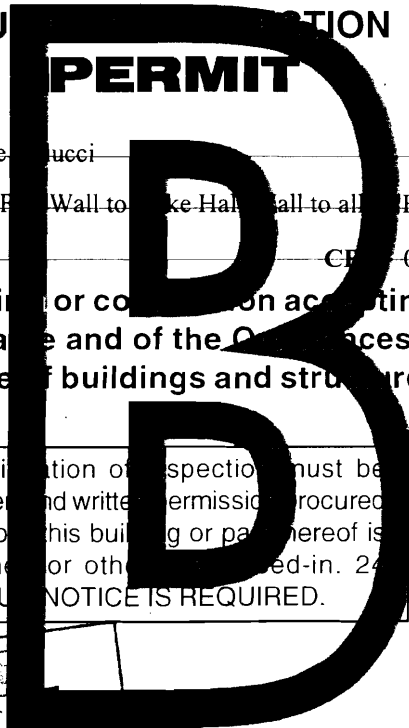
# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING DEPARTMENT

### PERMIT

Permit Number: 090077

Please Read Application And Notes, If Any, Attached



This is to certify that CARDENTE LINDA A /Steve Mucci  
has permission to Remove two Walls, Alter one Wall to make Hall, Wall to all Expansion of Exercise Room.  
AT 34 DIAMOND ST CP 023 A002001

provided that the person or persons, firm or corporation accounting 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.

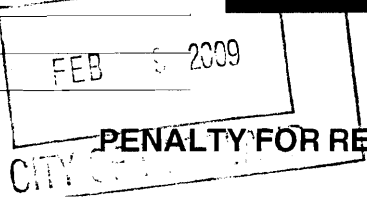
Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise red-in. 24 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. CAPT. W. [Signature]  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name



[Signature] 2/9/09  
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: 09-0077	Issue Date: 02/09/09	CBL: 023 A002001
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Location of Construction: 34 DIAMOND ST	Owner Name: CARDENTE LINDA A	Owner Address: 299 FOREST AVE	Phone: 207-939-6513
Business Name:	Contractor Name: Steve Colucci	Contractor Address: 190 Riverside, Unit 10 Portland	Phone: 2079396513
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: ILB

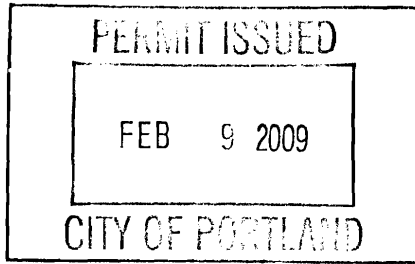
Past Use: Commercial/World Gym	Proposed Use: Commercial/World Gym - Remove two Walls, Alter one Full Wall to make Half Wall to allow Expansion of Exercise Room.	Permit Fee: \$60.00	Cost of Work: \$3,500.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied * See Conditions	INSPECTION: Use Group: A-3 Type: IB IBC-2003	

Proposed Project Description: Remove two Walls, Alter one Full Wall to make Half Wall to allow Expansion of Exercise Room.	Signature: <i>RC</i>	Signature: <i>OK</i>
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: lmd	Date Applied For: 02/03/2009	<b>Zoning Approval</b>
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>02/03/09</i>	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 APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

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

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

<b>Permit No:</b> 09-0077	<b>Date Applied For:</b> 02/03/2009	<b>CBL:</b> 023 A002001
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<b>Location of Construction:</b> 34 DIAMOND ST	<b>Owner Name:</b> CARDENTE LINDA A	<b>Owner Address:</b> 299 FOREST AVE	<b>Phone:</b> 207-939-6513
<b>Business Name:</b>	<b>Contractor Name:</b> Steve Colucci	<b>Contractor Address:</b> 190 Riverside, Unit 10 Portland	<b>Phone:</b> (207) 939-6513
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Commercial/World Gym - Remove two Walls, Alter one Full Wall to make Half Wall to allow Expansion of Exercise Room.	<b>Proposed Project Description:</b> Remove two Walls, Alter one Full Wall to make Half Wall to allow Expansion of Exercise Room.
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 02/03/2009

**Note:** **Ok to Issue:**

- 1) Separate permits shall be required for any new signage.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Chris Hanson      **Approval Date:** 02/09/2009

**Note:** **Ok to Issue:**

- 1) Separate permits are required for any electrical, plumbing, HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) State law requires notification of hazardous materials and abatement by a licensed professional
- 3) This approves interior demolition only, no structural work allowed. No other construction activities allowed, including plumbing, electrical and heating

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Capt Keith Gautreau      **Approval Date:** 02/06/2009

**Note:** **Ok to Issue:**

- 1) Fire Alarm system shall be maintained.  
If system is to be off line over 4 hours a fire watch shall be in place.  
Dispatch notification required 874-8576.

**BUILDING PERMIT INSPECTION PROCEDURES**

**Please call 874-8703 or 874-8693 (ONLY )**

**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 for 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.**

**A Pre-construction Meeting will take place upon receipt of your building permit.**

  X   **Final inspection required at completion of work.**

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.**

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

  
\_\_\_\_\_  
Signature of Applicant/Designee

  2-9-09    
Date

\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date



# 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.

34 Diamond St.

Location/Address of Construction: <u>WORLD GYM 265 MATHEWAC WAY</u>		
Total Square Footage of Proposed Structure/Area <u>200 sq'</u>	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# <u>023</u> Block# <u>A 002</u> Lot#	Applicant *must be owner, Lessee or Buyer* Name <u>STEPH COLUCCI</u> Address <u>190 RIVERSIDE ST #10</u> City, State & Zip <u>PORT., ME 04103</u>	Telephone: <u>939-6513</u>
Lessee/DBA (If Applicable)  <u>FEB 3 2009</u>	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>3500-</u> C of O Fee: \$ _____ Total Fee: \$ <u>60-</u> <u>ASTE + The Sect</u> <u>\$100.00</u>
Current legal use (i.e. single family) <u>WORLD GYM</u> Number of Residential Units _____ If vacant, what was the previous use? _____ Proposed Specific use: <u>GROUP EXERCISE ROOM EXPANSION</u> Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Remove 2 walls + cut 1 wall down to a 1/2 wall to allow expansion of the group exercise room.</u>		
Contractor's name: <u>STEVE COLUCCI</u> Address: <u>190 RIVERSIDE ST UNIT 10</u> City, State & Zip <u>PORTLAND, ME 04103</u> Telephone: _____ Who should we contact when the permit is ready: <u>STEVE COLUCCI</u> Telephone: <u>939-6513</u> Mailing address: _____		

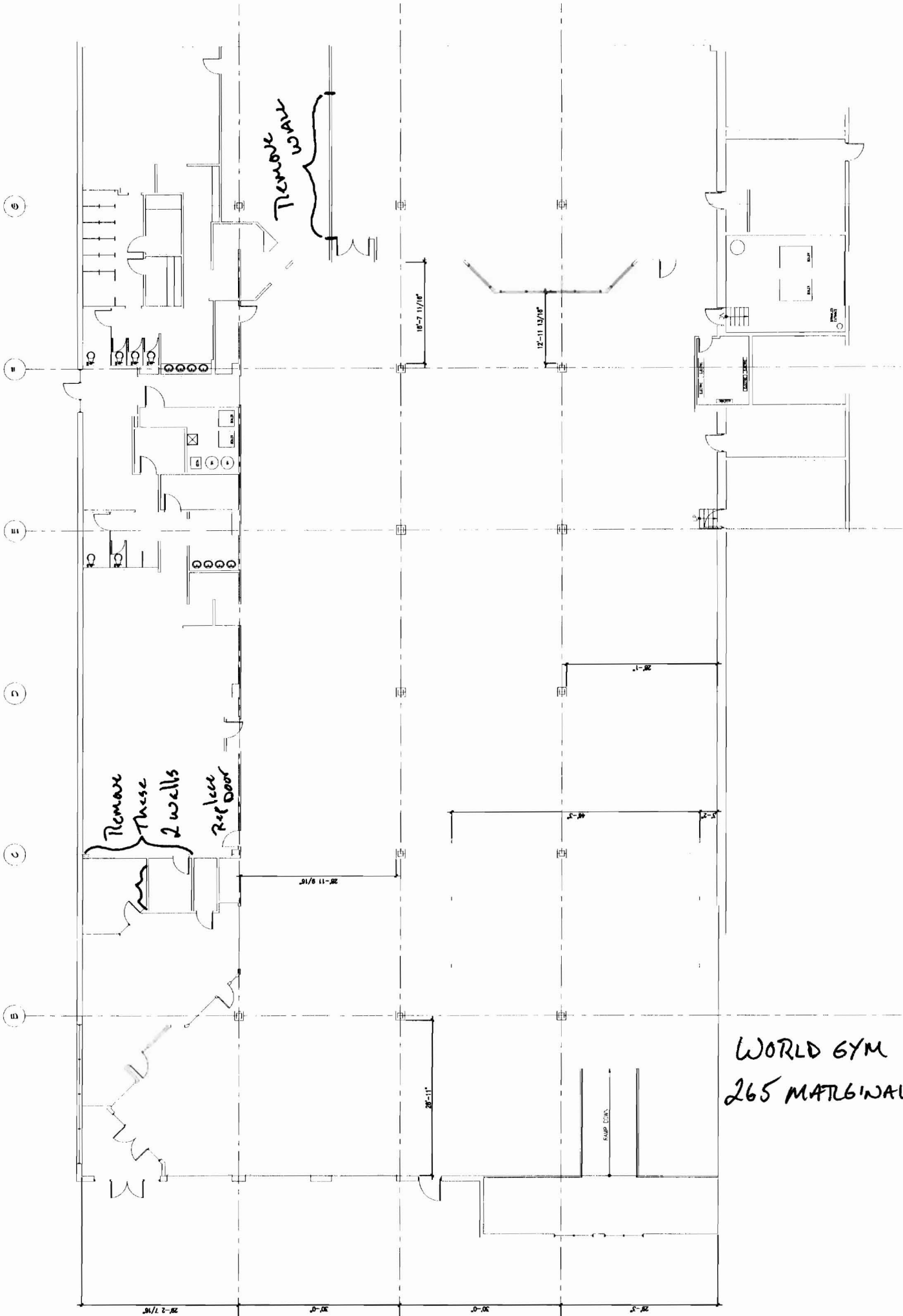
**Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.**

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department 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: <u>[Signature]</u>	Date: <u>2-1-2009</u>
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This is not a permit; you may not commence ANY work until the permit is issue



Remove These 2 walls  
Replace Door

Remove Us All

WORLD GYM  
265 MARGINAL WAY

TING CONDITIONS PLAN  
SCALE: 1/8" = 1'-0"

ISSUED FOR R

19 20 21 22 23 24 25 26 27

# VENDOR HALL

EXIT

STAIRS

56 57 58 59 60 61 62 63 64 65 66 67 301 302 303 304

Private Office

Room 3

## ROOM 2

47	48	49	50	51	52	53	54
39	40	41	42	43	44	45	46

Pape Mitsubishi

Landmarks, Inc.

The Shed Co.

RESTROOMS

STAIRS

EXHIBITION VENDOR ENTRANCE

EXIT ONLY

## ROOM 1

1	14	15	16	17	18
	9	10	11	12	13

28 29 30 31 32 33 34 35 36 37 38

2 3 4 5 6 7 8

RESTROOMS

## FORE STREET ENTRANCE

## SECOND FLOOR

EXIT

EXIT

STAIRS

94 93 92 91 90 89 88

## UPSTAIRS ROOM 2

82	83	84	85
78	79	80	81

Booksellers Corner

## UPSTAIRS ROOM 3

Lecture Hall

Children's Area

RAMP

68

STAIRS

77 76 75 74 73 72 71

70 69

EXIT

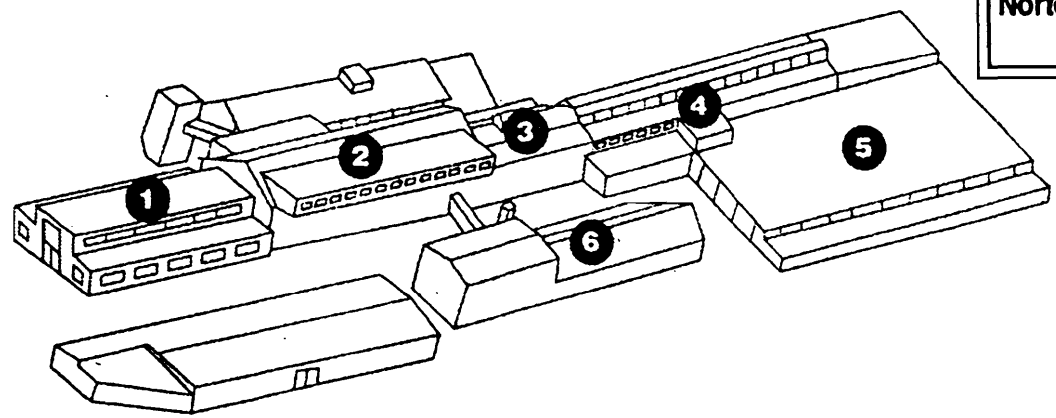
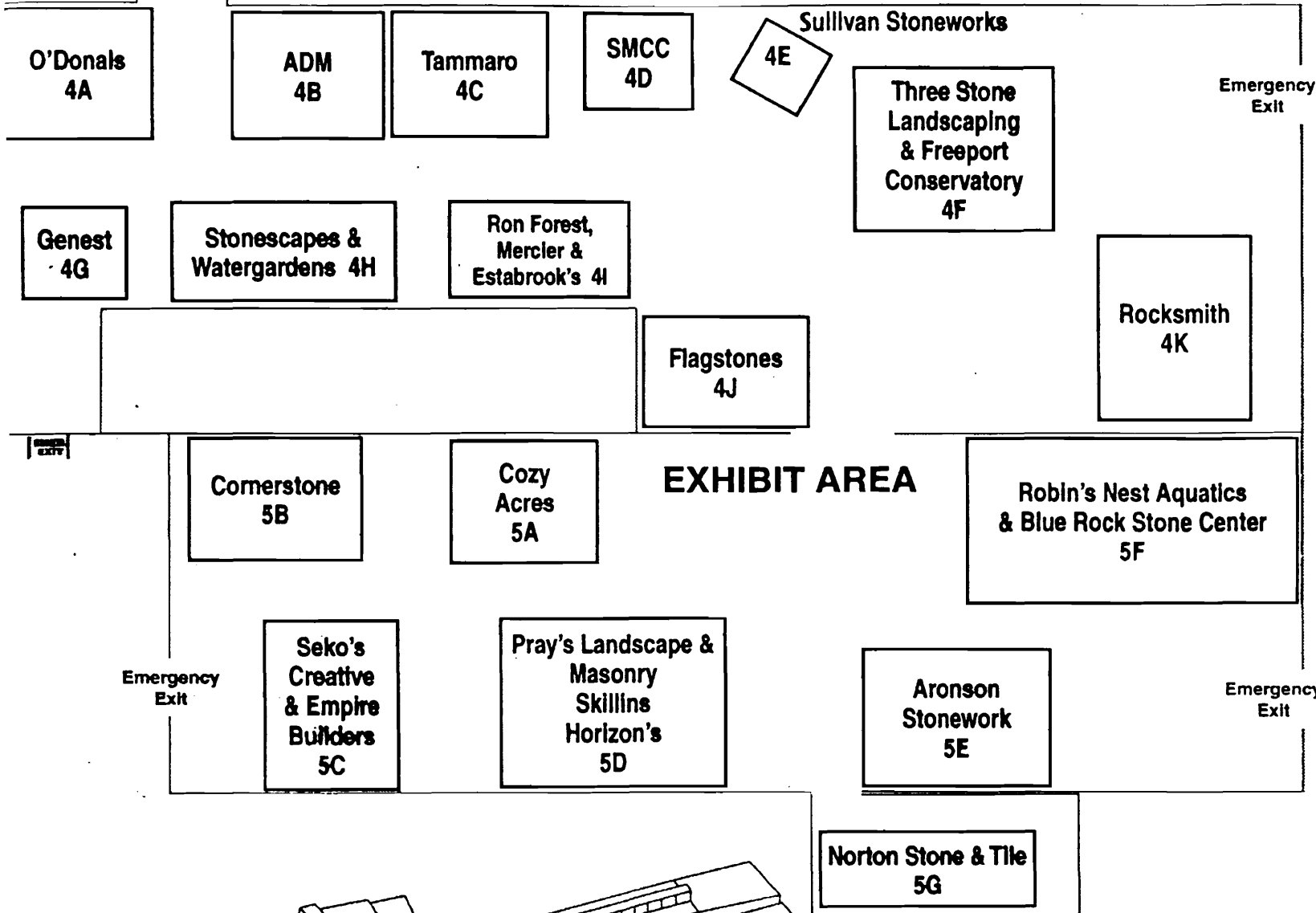
EXIT

EXIT

EXIT

## ROOM 6

Food Court





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

## BUILDING DEPARTMENT

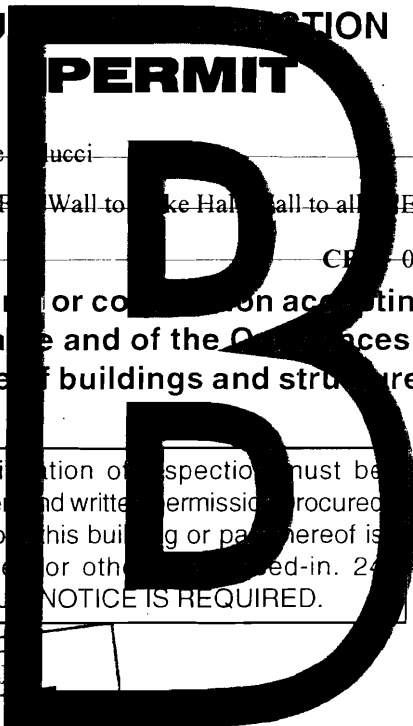
### PERMIT

Permit Number: 090077

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AT 34 DIAMOND ST CE 023 A002001

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.



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#### OTHER REQUIRED APPROVALS

Fire Dept. CHPT. A. [Signature]  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_

FEB 5 2009  
CITY OF PORTLAND

[Signature] 2/9/09  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

# SCANNED

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

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

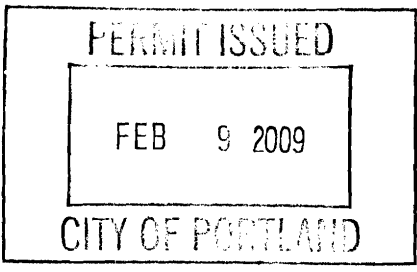
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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: ILB

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Proposed Project Description: Remove two Walls, Alter one Full Wall to make Half Wall to allow Expansion of Exercise Room.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied * See Conditions	INSPECTION: Use Group: A3 Type: IB IBC-2003	
		Signature: <i>RC</i>	Signature: <i>Q</i>	
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: lmd	Date Applied For: 02/03/2009
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<b>Zoning Approval</b>		
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..	<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>2/3/09</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: _____	



**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