

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

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

**PERMIT ISSUED**

Permit No: 04-0437	Issue Date: MAY 07 2004	CBL: 028 M005001
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Location of Construction: 121 Middle St	Owner Name: 123 Llc	Owner Address: 100 Commercial S CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: Scott Monroe	Contractor Address: 20 Green St Saco	Phone: 2072827105
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B3

Past Use: Rackleff Blk / Vacant space "A"	Proposed Use: Commercial Hair Salon / Tenant Fit-up Space "A"	Permit Fee: \$276.00	Cost of Work: \$20,000.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group D Type 3	
		Signature: <i>[Signature]</i> 5/5/04		
ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: <i>[Signature]</i> Date: 4/27/04				

Permit Taken By: Idobson	Date Applied For: 04/20/2004	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied</p> <p>Date: <i>[Signature]</i> 4/27/04</p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p>Date: _____</p>	<p><b>Historic Preservation</b></p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p><i>any exterior work requires separate review</i></p> <p>Date: _____</p>
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**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

~~7/7/04~~ Framing OK. Needs test on  
plumbing, Joshua Adams,

~~7/8/04~~ ps test OK. A/R

8/2/04 Final work is complete. Still need final by m. Collins  
And Lt Mac. OK. to issue c/o JK

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	
Street	<u>Rocky Hill Blvd</u>
Subdivision Lot #	<u>127 Middle St</u>
<b>PROPERTY OWNERS NAME</b>	

Last	First
	<u>Peter</u>
Applicant Name: <u>Scott W. Worneau</u>	
Mailing Address of Owner/Applicant (If Different)	

04-8239

PORTLAND Date Permit Issued: 6/25/07 8969 TOWN COPY \$ 1000  Double Fee Charged

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # 366

28 M 5

### Caution: Inspection Required

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

Signature of Owner/Applicant: \_\_\_\_\_ Date: 6/25/07

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

## PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING	Type of Structure To Be Served:	Plumbing To Be Installed By:
	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>ADU</u>	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb/ Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>1</u>	Sink
		Drinking Fountain		Wash Basin
<b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	<u>1</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	<u>1</u>	Clothes Washer
		Grease / Oil Separator	<u>1</u>	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	<u>1</u>	Water Heater
		Fixtures (Subtotal) Column 2	<u>11</u>	Fixtures (Subtotal) Column 1
			<u>10</u>	Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			<u>129</u>	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

129  
1013  
1390/00  
TOWN COPY

# PLUMBING APPLICATION

Department of Human Sciences /  
Division of Health Engineering

## PROPERTY ADDRESS

Town or  
Plantation

Portland

Street  
Subdivision Lot #

123 Middle St

## PROPERTY OWNERS NAME

Last First

Applicant  
Name

Mailing Address of  
Owner/Applicant  
(If Different)

## 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 @ Permit

Signature of Owner/Applicant

Date

PORTLAND

Date  
Permit  
Issued:

11/99

6764

TOWN COPY

\$

If Double Fee  
Charged

L.P.I. # 0121

Local Plumbing Inspector Signature

## 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.  3 PROPERTY OWNER

LICENSE#

### Hook-Up & Piping Relocation Maximum of 1 Hook-Up

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.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE  
[\$6.00]

### Column 2 Number Type of Fixture

	Hosebibb/ Sillcock
	Floor Drain
	Urinal
	Drinking Fountain
	Indirect Waste
	Water Treatment Softener, Filter, etc.
	Grease / Oil Separator
	Dental Cuspidor
	Bidet
	Other: _____
	Fixtures (Subtotal) Column 2

### Column 1 Number Type of Fixture

	Bathtub (and Shower)
	Shower (Separate)
1	Sink
	Wash Basin
1	Water Closet (Toilet)
	Clothes Washer
	Dish Washer
	Garbage Disposal
	Laundry Tub
1	Water Heater
3	Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE  
FOR CALCULATING FEE

3	Fixtures (Subtotal) Column 2
3	<b>Total Fixtures</b>
	Fixture Fee
	Transfer Fee
	Hook-Up & Relocation Fee
1.2	<b>Permit Fee (Total)</b>