

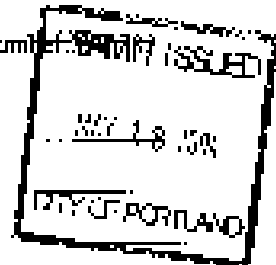
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

CONSTRUCTION

## PERMIT

Permit Number



Please Read Application And Notes, If Any Attached

This is to certify that City Of Portland is hereby

giving permission to None More Than 12' linear feet of work

AT 101 Middle St.

125 BRICK

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.

Notation: inspection must be made and work in progress before this permit is issued. A 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. 1/23/84

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_  
Examiner Name

*[Signature]*  
Chief, Building & Construction

**PENALTY FOR REMOVING THIS CARD**

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

189 Congress Street, 04101 Phone: (207) 874-8700 Fax: (207) 874-8716

Permit No: 14-0582	PROJECT NO: 14-0582	CITY: 028 1001001
Owner Name: City of Portland	Owner Address: 369 Congress St	Phone:
Business Name: N/A	Contractor Name: City of Portland	Contractor Address: 389 Congress Street 04102
Contractor Phone: N/A	Permit Type: Alterations - Commercial	Phone: 2078745380

Location of Construction: 301 Middle St	Owner Name: City of Portland	Owner Address: 369 Congress St	Phone:
Business Name: N/A	Contractor Name: City of Portland	Contractor Address: 389 Congress Street 04102	Phone: 2078745380
Contractor's Name: N/A	Phone: N/A	Permit Type: Alterations - Commercial	Page: 3

Proposed Use: Police Station	Proposed Use: Police Station / Move 12 linear feet of wall 6.	Permit Fee: \$0.00	Cost of Work: \$0.00	CEO District: 2
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FILE DEPT: Approved Serial	INSPECTION: Ins Group B Ins 26 5/18/14 <i>[Signature]</i>
Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
PREFERRED ACTIVITIES DISTRICT (P.A.D.)	
APPROVED	APPROVED
Signature:	Date:

Proposed Project Description:  
Move 12 linear feet of wall 6.

Permit Taken By: JE	Date Applied For: 05/11/2014
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**Zoning Approval**

- 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 Districts: <input type="checkbox"/> Historic <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> All Other <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Prev <input type="checkbox"/> <input checked="" type="checkbox"/> Other <i>[Signature]</i>	Zoning Approval: <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Int. Protection <input type="checkbox"/> Approved <input type="checkbox"/> Denial	Signature/Date: <input type="checkbox"/> Not a 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"/> Denial Date:
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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 a premises covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK TITLE	ADDRESS	DATE	PHONE

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

380 Congress Street, 04103 | Tel: (207) 874-8700, Fax: (207) 874-8716

Permit No:	How Applied For:	CUL:
04-0582	05/16/2004	003 - 600 - 041

Location of Construction: 101 Middle St.	Owner Name: City of Portland	Owner Address: 380 Congress St.	Phone:
Business Name: n/a	Contractor Name: City of Portland	Contractor Address: 380 Congress Street Portland	Phone: (207) 874-8500
License/Agent's Name: n/a	Phone: n/a	Permit Type: Alterations - Commercial	

Proposed Use: Police Station (Move 12' linear feet of wall @)	Proposed Project Description: Move 12' linear feet of wall @
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Dept: Zoning	Status: Approved	Reviewer: Mary Schmeckel	Approval Date: 05/14/2004
Notes:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 05/18/2004
Notes:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Fire	Status: Approved	Reviewer: L. MacDougal	Approval Date: 05/17/2004
Notes:			Ok to Issue: <input checked="" type="checkbox"/>

# 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 designer 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.

**Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8692 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]  
Signature of Applicant/Designer

5/20/04  
Date

[Signature]  
Signature of Inspections Official

5/20/04  
Date

CBL: 0081100

Building Permit #

05135813

C-0583

# All Purpose 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.

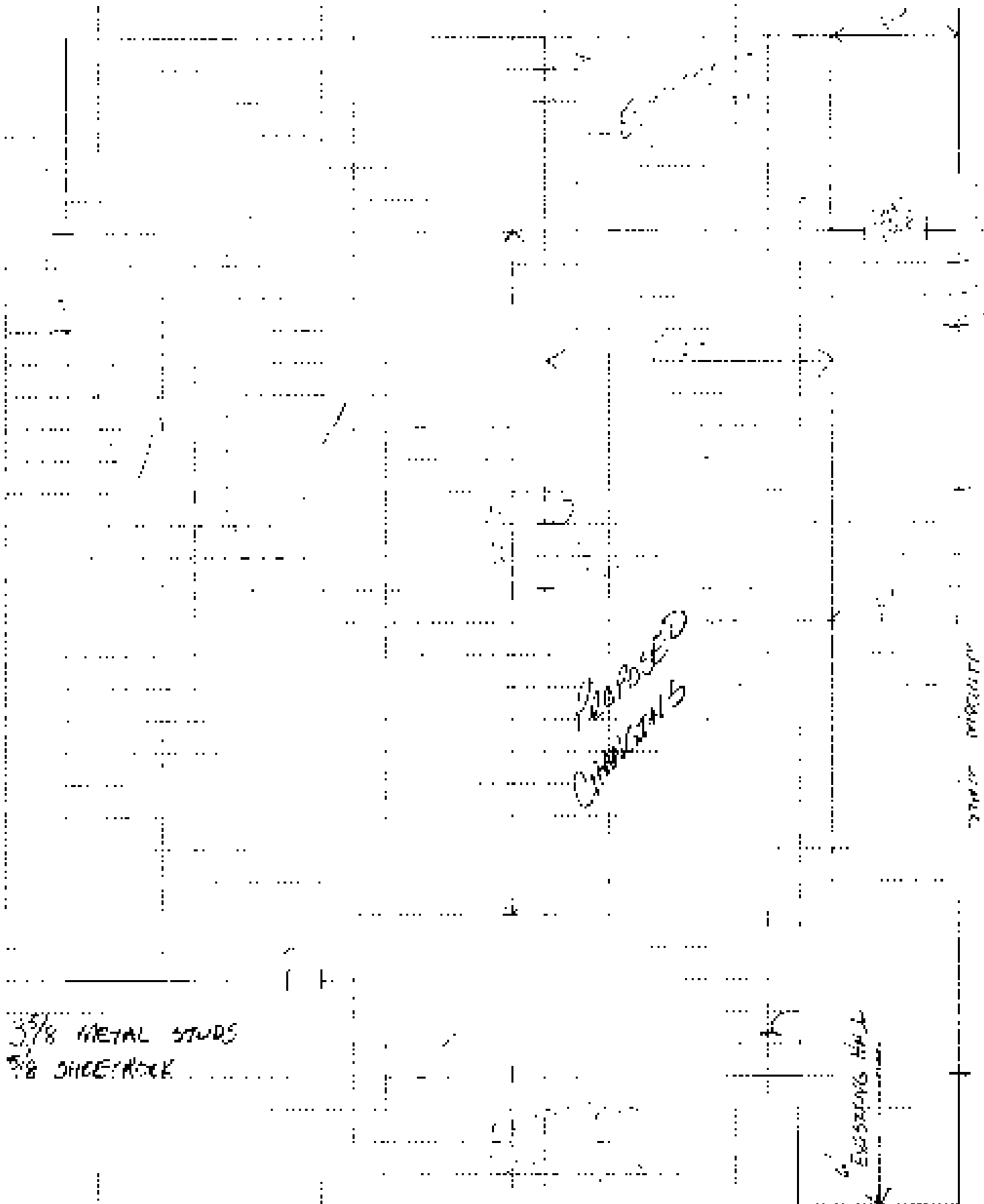
Location/Address of Construction: <u>109 MIDDLE ST.</u>		
Total Square Footage of Proposed structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart: <u>048 W 001</u>	Owner: <u>CITY OF FORT WORTH</u>	Telephone: <u>(817) 530-XXXX</u>
Lessee/Buyer's Name, if applicable: <u>N/A</u>	Applicant Name, address & telephone: <u>CAROL ALVES PUBLIC BUILDINGS</u>	Cost of Work \$: <u>7</u> Fee: \$ <u>300.00</u>
Current Use: <u>POLICE STATION</u>		
If the location is currently vacant, what was prior use: <u>N/A</u>		
Approximately how long has it been vacant: <u>N/A</u>		
Proposed Use: <u>N/C</u>		
Project description: <u>MOVE 12' L.F. OF WALL 6'</u>		
Contractor's name, address & telephone: <u>CAROL ALVES</u>		
Who should we contact when the permit is ready:		
Mailing address: <u>389 CONG ST. FORT WORTH</u>		
We will contact you by phone when this permit is ready. You must come in and pick up the permit and review the requirements before starting any work with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>233-8523</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorized me to propose work and that I have been authorized by the owner to make this application as either authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, I agree to pay for work described in the application & issue. I certify that the City Officials authorized by the City shall have the authority to enter at any reasonable hour to enforce the provisions of the code applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>5/11/07</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



3/8 METAL STUDS  
 5/8 SHEETROCK

EXISTING HALL

PROPOSED  
 CHANGING ROOMS