

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

Location of Construction: 152 Middle Street 04101		Owner: Ronald M Cedrone		Phone: 773-2020		Permit No: 90990	
Owner Address: 28 Hedgerow Dr., Falmouth, ME 04105		Lessee/Buyer's Name: Casco Bay Eye Care, LLC 152 Middle St.		Phone:		Business Name:	
Contractor Name: Thomas J. McDermott		Address: 66 Desert Road, Freeport ME 04032		Phone:		Permit Issued: SEP 13 1999	
Past Use: Office		Proposed Use: Same		COST OF WORK: \$ #		PERMIT FEE: \$ 34.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: 5/9/99 Use Group: 5 Type: 1 Signature: [Signature]	
Proposed Project Description: Replace current sign with replacement (new name) Unlighted-hanging sign 4x5 Signage				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: Special Zone or Reviews: <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"/>	
Permit Taken By: UB		Date Applied For: 8-23-99		Signature:		Date:	

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..

***** Sent to: Becky Darling
Casco Bay Eye Care, L.L.C.
152 Middle Street
Portland, ME 04101

**PERMIT ISSUED
WITH REQUIREMENTS**

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT		ADDRESS:		DATE: 8-23-99		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:			

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal <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	
Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
Date: 8-23-99	
CEO DISTRICT ub	

BUILDING PERMIT REPORT

DATE: 23 Aug. 97 ADDRESS: 152 middle ST. CBL: 029-A-pp1

REASON FOR PERMIT: Signage

BUILDING OWNER: Ronald M. Cedrone

PERMIT APPLICANT: Thomas McDermott /Contractor

USE GROUP B CONSTRUCTION TYPE _____

The City's Adopted Building Code (The BOCA National Building Code/1996 with City Amendments)

The City's Adopted Mechanical Code (The BOCA National Mechanical Code/1993)

CONDITION(S) OF APPROVAL

This permit is being issued with the understanding that the following conditions are met: *1 *34

Approved with the following conditions:

1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. Before concrete for foundation is placed, approvals from the Development Review Coordinator and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection)
3. Foundation drain shall be placed around the perimeter of a foundation that consists of gravel or crushed stone containing not more than 10 percent material that passes through a No. 4 sieve. The drain shall extend a minimum of 12 inches beyond the outside edge of the footing. The thickness shall be such that the bottom of the drain is not higher than the bottom of the base under the floor, and that the top of the drain is not less than 6 inches above the top of the footing. The top of the drain shall be covered with an approved filter membrane material. Where a drain tile or perforated pipe is used, the invert of the pipe or tile shall not be higher than the floor elevation. The top of joints or top of perforations shall be protected with an approved filter membrane material. The pipe or tile shall be placed on not less than 2" of gravel or crushed stone, and shall be covered with not less than 6" of the same material. Section 1813.5.2
4. Foundations anchors shall be a minimum of 1/2" in diameter, 7" into the foundation wall, minimum of 12" from corners of foundation and a maximum 6' o.c. between bolts. (Section 2305.17)
5. Waterproofing and dampproofing shall be done in accordance with Section 1813.0 of the building code.
6. Precaution must be taken to protect concrete from freezing. Section 1908.0
7. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
8. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4, Section 407.0 of the BOCA/1996)
9. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code. (The BOCA National Mechanical Code/1993). Chapter 12 & NFPA 211
10. Sound transmission control in residential building shall be done in accordance with Chapter 12, Section 1214.0 of the City's Building Code.
11. Guardrails & Handrails: A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Groups 42", except Use Group R which is 36". In occupancies in Use Group A, B, H-4, I-1, I-2, M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect. (Handrails shall be a minimum of 3e4" but not more than 38". Use Group R-3 shall not be less than 30", but not more than 38".) Handrail grip size shall have a circular cross section with an outside diameter of at least 1 1/4" and not greater than 2". (Sections 1021 & 1022.0) - Handrails shall be on both sides of stairway. (Section 1014.7)
12. Headroom in habitable space is a minimum of 7'6". (Section 1204.0)
13. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 3/4" maximum rise. All other Use Group minimum 11" tread, 7" maximum rise. (Section 1014.0)
14. The minimum headroom in all parts of a stairway shall not be less than 80 inches. (6'8") 1014.4
15. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside without the use of special knowledge or separate tools. Where windows are provided as means of egress or rescue they shall have a sill height not more than 44 inches (1118mm) above the floor. All egress or rescue windows from sleeping rooms shall have a minimum net clear opening height dimension of 24 inches (610mm). The minimum net clear opening width dimension shall be 20 inches (508mm), and a minimum net clear opening of 5.7 sq. ft. (Section 1018.6)
16. Each apartment shall have access to two (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units. (Section 1010.1)

COMMENTS

9/16/99 Pre Con by Home Conditions reviewed w Betty Durling (X)

4/26/00 Done (X)

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

TO: BECKI DARLING - FAX-775-2447

33452



THOMAS J. McDERMOTT
Woodcarving • Gilding
66 Desert Rd.
Freeport, Maine 04092

PH-FAX-865-1300

**THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE
PERMIT IS ISSUED**

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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 (include Portion of Building): <u>152 Middle Street</u>			<u>04101</u>
Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Number Chart# <u>029</u> Block# <u>A</u> Lot# <u>001</u>		Owner: <u>Ronald M. Cedrone</u>	Telephone#: <u>773-2020</u>
Owner's Address: <u>28 Hedgeow Drive Falmouth, ME 04105</u>		Lessee/Buyer's Name (If Applicable): <u>Casco Bay Eye Care, L.L.C.</u> <u>152 Middle Street, Becky Darling</u>	Cost Of Work: Fee \$ <u>34-</u>
Proposed Project Description: (Please be as specific as possible) <u>REPLACE CURRENT SIGN WITH REPLACEMENT</u> <u>(NEW NAME) UNLIGHTED - HANGING SIGN.</u> <u>4x5</u>			
Contractor's Name, Address & Telephone <u>Thomas J. McDERMOTT</u> <u>66 DESERT ROAD</u> <u>FREEPORT, ME 04032</u>		Rec'd By <u>ub</u>	
Current Use: <u>Office</u>		Proposed Use: <u>same</u>	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must include the following with your application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/ Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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/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: <u>Mecca R. Day</u>	Date: <u>7/20/99</u>
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Building Permit Fee: \$25.00 for the 1st \$1000. cost plus \$5.00 per \$1,000.00 construction cost thereafter.

Additional Site review and related fees are attached on a separate addendum



Casco Bay E Y E C A R E LLC.

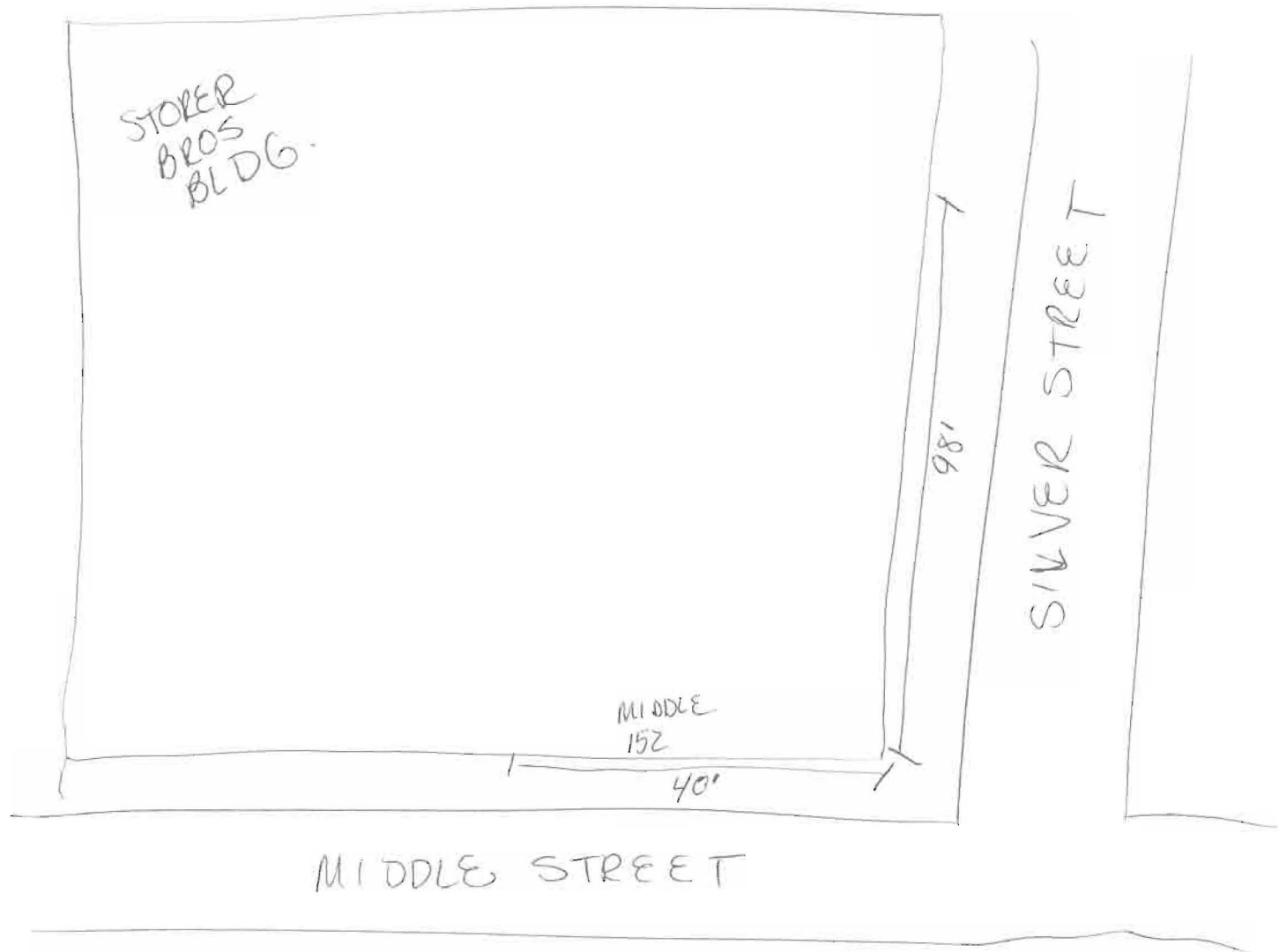
Michael P. Anastasio, O.D.

Ronald M. Cedrone, O.D.

Steven A. Goldstein, O.D.

Francis H. Robbins, O.D.

Timothy W. Tofford, O.D.



SEE PHOTOS

Business Correspondence
P.O. Box 7487
Portland, Maine 04112
207/773-2020
fax 207/775-2447

480 Congress Street
Portland, Maine 04101
207/772-9661

770 Congress Street
Portland, Maine 04102
207/772-8384
fax 207/773-0020

152 Middle Street
Portland, Maine 04101
207/773-2020
fax 207/775-2447

Ten Q Street
South Portland, Maine 04106
207/799-3877
fax 207/799-4617

Falmouth Family Health Center
5 Bucknam Road, Suite 1E
Falmouth, Maine 04105
207/781-1800
fax 207/781-1569

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 152 Middle Street ZONE: B-3

OWNER: Ronald M. Cedrone

APPLICANT: Casco Bay EyeCare, L.L.C.

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO
FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS _____ HEIGHT _____
MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____
SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS _____
MORE THAN ONE SIGN? YES NO DIMENSIONS _____
AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

see attached pictures. Sign is 4' x 5' = 20'

*** TENANT BLDG. FRONTAGE (IN FEET): 40' x 2 = 80'

*** REQUIRED INFORMATION

AREA FOR COMPUTATION

YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: Mica R Day DATE: 7/26/99

not returned

ck # 533

3400



Michael P. Anastasio, O.D.

Ronald M. Cedrone, O.D.

Steven A. Goldstein, O.D.

Francis H. Robbins, O.D.

Timothy W. Tolford, O.D.

August 24, 1999

City of Portland
Code Enforcement Officer

To Whom It May Concern:

Please accept this letter as my permission for replacement of the hanging sign located in front of 152 Middle Street. Our business name has changed to Casco Bay EyeCare from Eye Associates. The existing attachments will be used.

Your records will show that I am the owner of this property.

Sincerely,

A handwritten signature in dark ink, appearing to read "Ronald M. Cedrone", is written over a light blue circular stamp.

Ronald M. Cedrone

/

CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YY)
08/20/99

PRODUCER

ARI Insurance Group
25 Middle Street
P.O. Box 567
Portland

ME 04112-0567

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY

A**Maine Employers Mutual In**

COMPANY

B**The Maryland/Precision**

COMPANY

C

COMPANY

D

INSURED

Casco Bay Eye Care, LLC
152 Middle Street

Portland

ME 041010000

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
B	GENERAL LIABILITY	PPS32281900	01/01/99	01/01/00	GENERAL AGGREGATE	\$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 1,000,000
					MED EXP (Any one person)	\$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	ANY AUTO				BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	HIRED AUTOS					
	NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	ANY AUTO				OTHER THAN AUTO ONLY	
					EACH ACCIDENT	\$
					AGGREGATE	\$
B	EXCESS LIABILITY	PPS32281900	01/01/99	01/01/00	EACH OCCURRENCE	\$ 3,000,000
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$ 3,000,000
	OTHER THAN UMBRELLA FORM					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1810049237	01/01/99	01/01/00	WC STATUTORY LIMITS	OTH-ER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT	\$ 100,000
	OTHER				EL DISEASE - POLICY LIMIT	\$ 500,000
					EL DISEASE - EA EMPLOYEE	\$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 REF: REPLACEMENT OF SIGN
 CITY OF PORTLAND IS NAMED AS ADDITIONAL INSURED

CERTIFICATE HOLDER

CITY OF PORTLAND
389 CONGRESS STREET

PORTLAND**ME****04101**

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE

EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL

10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.

BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Michael S. Reali




existing sign
to be replaced



MIDDLE ST

Casco Bay E Y E C A R E L L C.

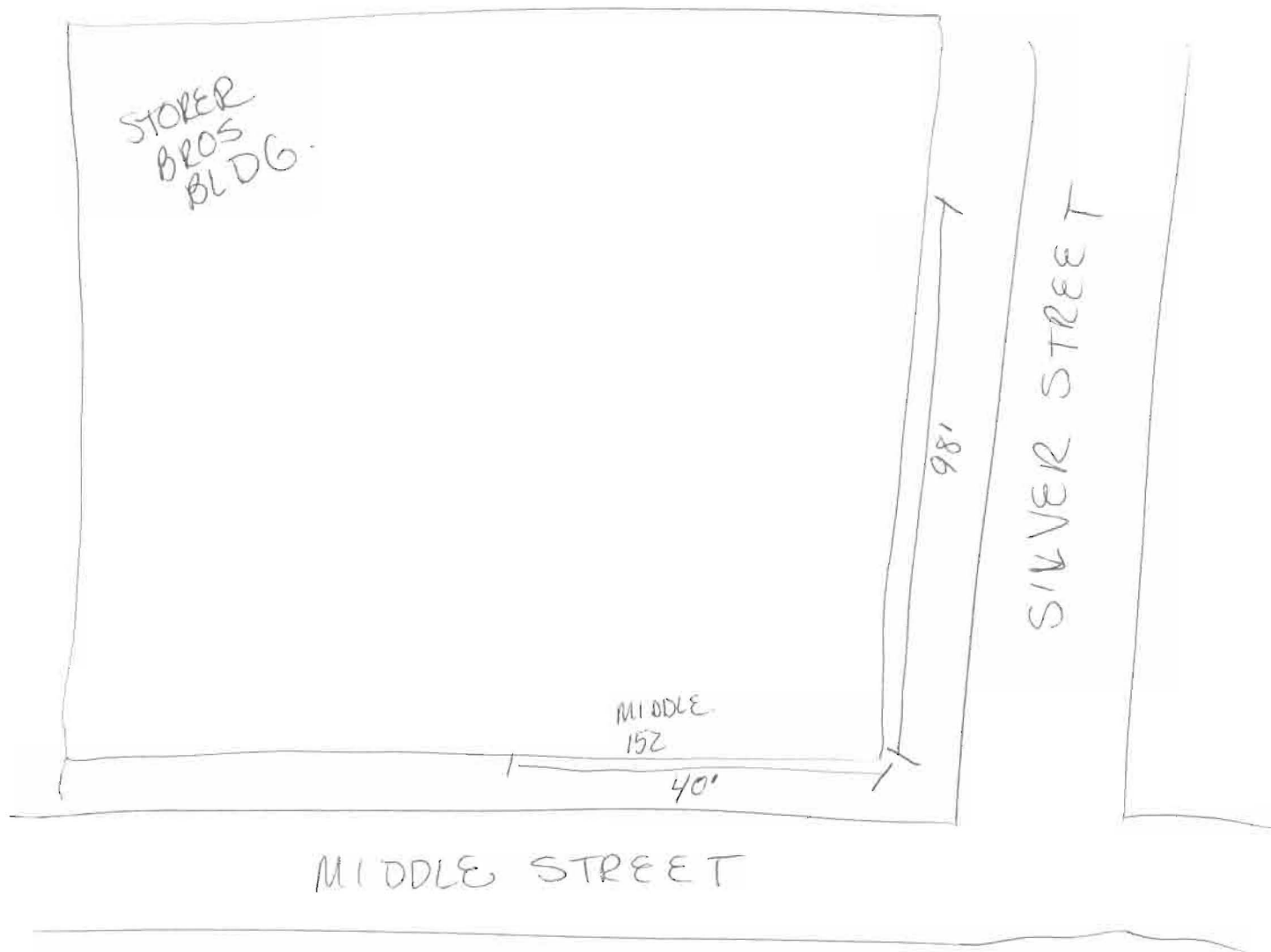
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Steven A. Goldstein, O.D.

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Timothy W. Telford, O.D.



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207/772-9661

770 Congress Street
Portland, Maine 04102
207/772-8384
fax 207/773-0020

152 Middle Street
Portland, Maine 04101
207/773-2020
fax 207/775-2447

Ten Q Street
South Portland, Maine 04106
207/799-3877
fax 207/799-4617

Falmouth Family Health Center
5 Bucknam Road, Suite 1E
Falmouth, Maine 04105
207/781-1800
fax 207/781-1569

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

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OWNER: Ronald M. Cedrone

APPLICANT: Casco Bay EyeCare, L.L.C

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO

MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS _____ HEIGHT _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____

IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: _____

see attached pictures sign is 4' x 5' = 20 #

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*** REQUIRED INFORMATION

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YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: Marcia R. Day DATE: 7/26/99

ck #5135

3400

INFORMATION REQUIREMENTS FOR SIGN PERMIT APPLICATION

Applicants for a sign permit will be asked to submit the following information to the Code Enforcement Office:

1. Proof of insurance
2. Letter of permission from the owner
3. A sketch plan of lot, indicating location of buildings, driveways and any abutting streets or right of ways. Lengths of building frontages and street frontages should be noted. (see attached)
4. Indicate on the plan all existing and proposed signs
5. Computation of the following:
 - A) Sign area of each existing and proposed building sign
 - B) Sign area height and setback of each existing and proposed freestanding sign.
6. A sketch of any proposed sign(s), indicating dimensions, materials, source of illumination and construction method (see attached).
7. Certificate of flammability required for awning/canopy at time of application.
8. UL # required for lighted signs at the time of application.
9. **You must have complete structural details (i.e. showing all connections to buildings and footing details) Specifics required or your permit may be held up**

Fee for permit - \$25.00 plus \$0.20 per square foot

Fee for awning based on cost of work - \$25.00 for the first \$1,000.00, \$5.00 for each additional \$1,000.000.

NOTE: Once a sketch plan has been filed for a property, the code enforcement office will keep a record of the plan so that a new sketch plan will not be required for later changes to signage on the property. In such an instance, applicants will only be required to submit information applicable to the new sign.