

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

Permit No: 02-0589	Issue Date: JUL 23 2002	CBL: 029 A003001
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Location of Construction: 3 Milk St	Owner Name: Milk Street Associates Llc	Owner Address: Po Box 7525 CITY OF PORTLAND	Phone: 207-879-1671
Business Name:	Contractor Name: Portland Safe	Contractor Address: 3 Mallison St Windham	Phone: 2078931800
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B-4

Past Use: Banking Facility	Proposed Use: Banking Facility with an after hours depository.	Permit Fee: \$93.00	Cost of Work: \$9,500.00	CEO District: 1
Proposed Project Description: Replace Window with an after hour depository.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>BO</i> Type: <i>2</i> 7/22/02	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</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: jmy	Date Applied For: 06/04/2002	<b>Zoning Approval</b>	
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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..	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"/> Date: <i>dc 7/27/02</i>	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 Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>D.A. 7/2/02</i> <i>placed by bldg. owner.</i>
	<i>Not A Drive Thru ONLY After hours depository</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

02-0589

# 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>3 MILK STREET</u>		
Total Square Footage of Proposed Structure <u>4.8 FT<sup>2</sup></u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>019</u> Block# <u>A</u> Lot# <u>003</u>	Owner: <u>BRUCE KISTLER</u>	Telephone: <u>207-879-1671</u>
Lessee/Buyer's Name (If Applicable) <u>CAMDEN NATIONAL CORP.</u> <u>DAN SWINDLER</u>	Applicant name, address & telephone: <u>PORTLAND SAFE FOR CAMDEN NAT'L CORP.</u> <u>207-893-1800</u>	Cost Of Work: \$ <u>9,500</u> Fee: \$ <u>93-</u>
Current use: <u>BANKING FACILITY</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>EXTEND USE BY ADDING AN AFTER-HOURS DEPOSITERY</u>		
Project description: <u>REPLACE WINDOW WITH NIGHT HEAD AND INSULATING WALL AROUND HEAD</u>		
Contractor's name, address & telephone: <u>PORTLAND SAFE CONSULTING &amp; DESIGN, INC., WINDHAM, ME/893-1800</u>		
Who should we contact when the permit is ready: <u>BOB PARSLAW</u>		
Mailing address: <u>3 MALLISON FALLS ROAD</u> <u>WINDHAM, ME 04062</u>		
We will contact you by phone when the 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>207-893-1800</u>		

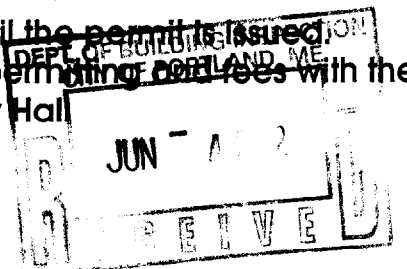
**IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.**

I hereby certify that I am the Owner of record of the named property, or that the owner of record 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: <u>Robert G. Parslow / CAMDEN NATIONAL CORP.</u>	Date: <u>6/4/02</u>
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ROBERT G. PARSLAW / PORTLAND SAFE

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 fees with the Planning Department on the 4th floor of City Hall



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

Please Read Application And Notes, If Any, Attached

## BUILDING DEPARTMENT PERMIT

Permit Number: 020589

This is to certify that Milk Street Associates Llc/Portland and Safety

has permission to Replace Window with an after our departmentary.

AT 3 Milk St 029 A003001

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 written permission procured before this building or part thereof is laid or occupied. CLOSED-IN. HOURS 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. [Signature]

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

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

Other \_\_\_\_\_  
Department Name

[Signature] 7/22/09  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

## **PORTLAND SAFE CONSULTING & DESIGN, INC.**

**3 MALLISON FALLS ROAD  
WINDHAM, ME 04062**

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Tel: 207-893-1800  
Fax: 207-893-3454  
E-mail: [portsafe@gwi.net](mailto:portsafe@gwi.net)

June 4, 2002

Inspection Services  
City of Portland  
389 Congress Street  
Portland, Maine 04101

Submission of Plan for Permit RE: Camden National Bank at 3 Milk Street, Portland, Maine.

Portland Safe Consulting and Design, Inc. is the authorized agent for Camden National Bank in obtaining all permissions for the installation of an after-hours depository in its Milk Street Branch. Permission has been obtained from the Landlord of Camden National Bank at 3 Milk Street, and the attached drawing contains the specifications of the Landlord for this purpose by Mr. Bruce Kistler.

The plan is to remove the existing window panes at the specified location for the depository. The glass will be replaced by the depository head that will be surrounded by an insulated wood frame enclosure. The night head is attached to a U.L. TL-15 depository chest resting on a 2x2 angle iron frame, open on all sides, that will straddle an air register in the floor. The exterior face of the surround will be painted to match existing, and the interior surround will be painted to match existing. Top and bottom joints are to be flashed and sealed with side joints sealed.

The sidewalk at this location meets ADA guidelines for slope (Slope and Rise [4.8.2] of the ADAAG Manual), and allows for a 51.5" maximum height and 14" reach depth for wheelchair (Side Approach [4.34.3] of the ADAAG Manual). The depository head is outfitted with a special handle extension to accommodate ease of use.

Submitted by:



Robert Parslow  
Special Projects Coordinator  
Portland Safe Consulting and Design, Inc.

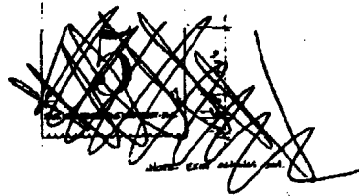
Hi Deb, I believe this is the opening they plan to use for the Night Deposit Box.

It will be recessed 2' 10" +/-.

Baker Kesner

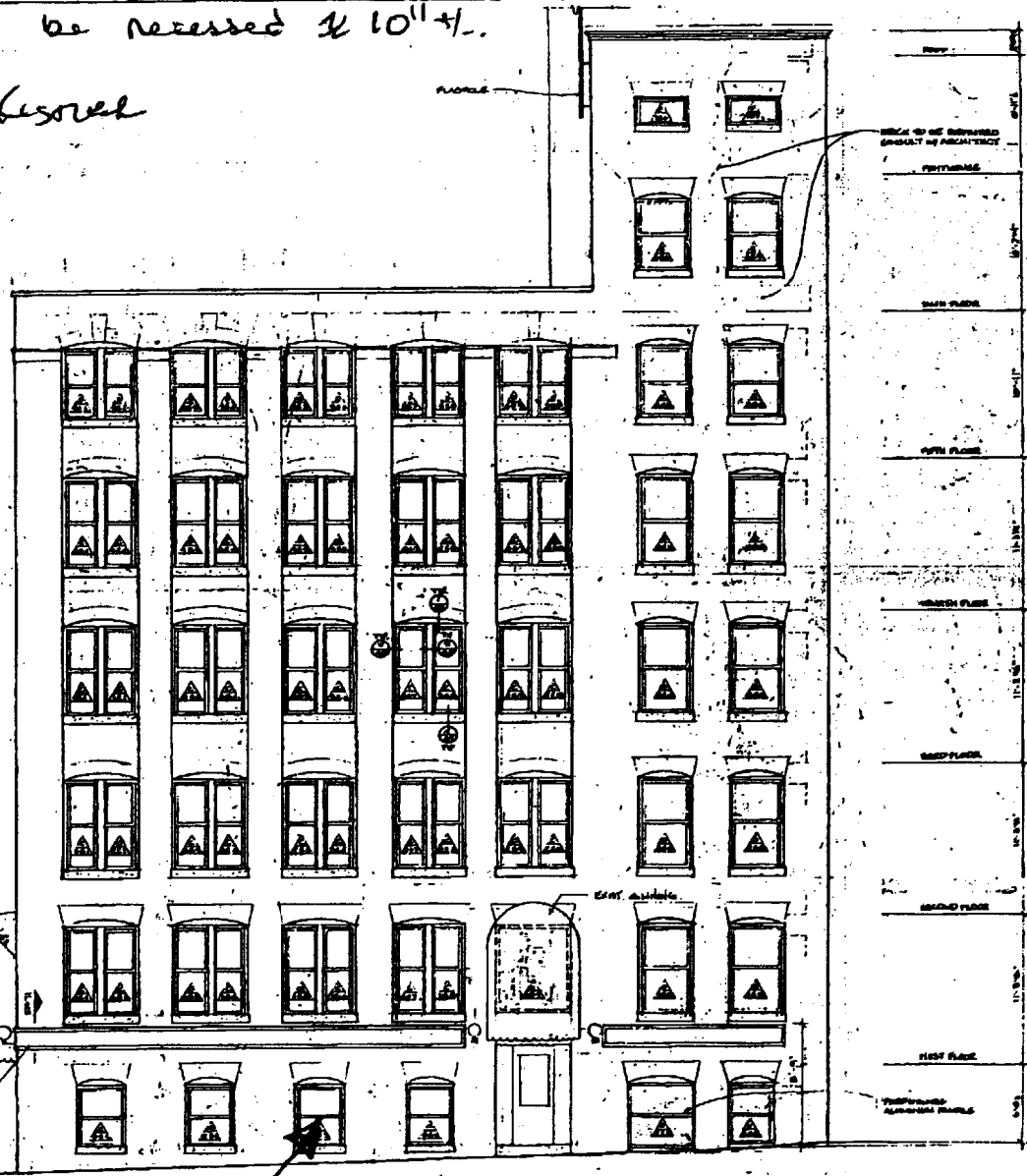
Fore River Company  
P.O. Box 7625  
5 Milk Street  
Portland, ME 04112  
Fax: (207) 772-9078  
Telephone (207) 772-8484

TO: Deb Andrews  
FAX #: 756-8258  
FROM: B. Kesner  
DATE: 7/16/02  
# of Pages (incl. this page): 1



CHANGE: 2006 CALADRA CLASH  
REVISION: 2004 BRICE & HARRIS  
2001 CALADRA CLASH

EXIST. AIRING  
INDIVIDUAL TENANT GRAPING  
ON SHARPSHAW



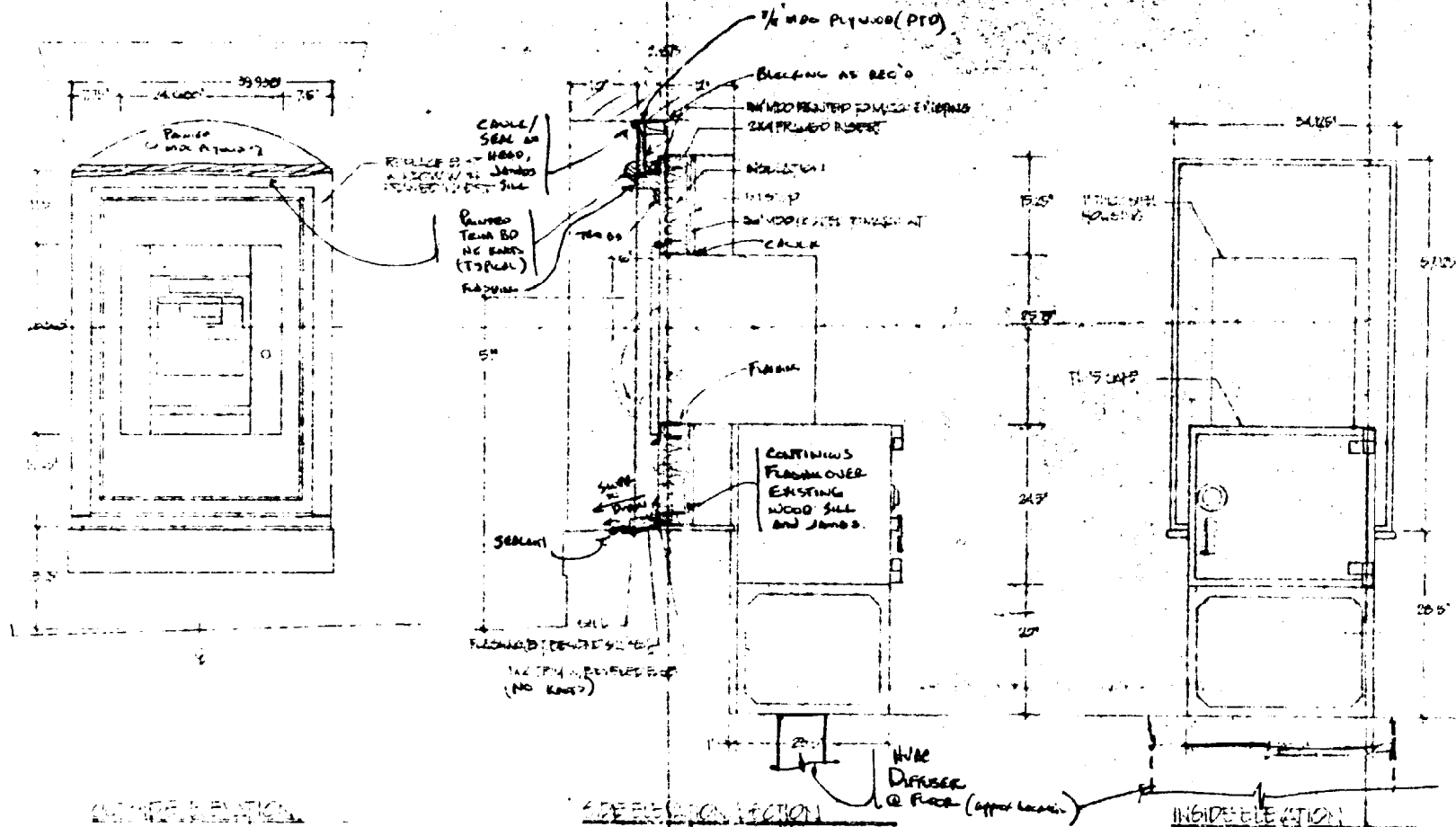
EAST ELEVATION

NIGHT  
Deposit Box  
TO BE LOCATED IN EXIST M.O.

5 Milk St.

P.1  
(207) 772-9078  
Fore River Co  
Jul 16 02 08:37a

NOTE: USE NON SOLVENTIC ACTING / NON CORRODING / NON RUSTING ANCHORS ONLY  
NO KNOTS IN PAINTED WOOD TRIM



- NOTES:**
- Do NOT ANCHOR INTO BRICK OR SILL (ANCHOR INTO MORTAR JOINTS)
  - SAVE WINDOW BLIND & BRACKETS
  - CAREFULLY REMOVE MESH WINDOW FRAME, SASH, AND METAL PANNING AND SAVE ALL PARTS & PIECES FOR REINSTALLATION. REMOVE SOME ALL PARTS - PICUS ON SITE IN LOWER LEVEL
  - LEAVE EXISTING WOOD WINDOW FRAME AND BRACKETS IN PLACE
  - OWNER TO APPROVE FINISH SCHEDULE IN WRITING.
  - Tenant responsible for the maintenance of this opening and any and all damage caused due to window damage including but not limited to water infiltration/leaks.
  - Drawing NOT reviewed for structural adequacy (Tenant responsibility).
  - Drawing NOT reviewed for code compliance (Tenant responsibility).
  - Tenant will REINSTALL EXISTING WINDOW, SASH, AND PANNING AT END of Tenancy to MATCH THE EXISTING CONDITION of the window, window opening, sealants, INTERIOR FINISHES, and TRIM and REINSTALL the WINDOW BLIND. All COSTS AT Tenants Sole expense.
  - Tenant to REPAIR any damage to Floor, carpet, INTERIOR walls, HVAC duct or grill CAUSED BY INSTALLATION OR REMOVAL OR DROP BY OR REINSTALLATION of window, SASH, PANNING, BRACKETS, ETC.

*leave window frame in place  
 install plywood in front of it  
 still to feature recessed opening.*

Approved AS NOTED  
 Bruce Kistner 4/5/02

