	D		Permit No:	DEDIAIT I	CHI Du			
City of Portland, Maine	U		PERMITI					
389 Congress Street, 04101		6, Fax: (207) 874-871			029 D0020			
Location of Construction:	Owner Name:		Owner Address	TAL SAUG 2 5	2000 Phone:			
121 COMMERCIAL ST	MAD COW L		100 COMMERC	CIAL ST				
Business Name:	Contractor Name		Contractor Address		Phone			
······································	Monaghan Wo	odworks Inc.		Sc Porland PO	<u>····</u>			
Lessee/Buyer's Name	Phone:		Permit Type:		Z			
			Change of Use -	Commercial	<u></u>	$5^{-7}$		
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:			
Commercial - Angies Pizza		hange of use Tenant	\$775.00	\$68,000.00	1			
restaurant		il (Company C) w/	FIRE DEPT:	- Apploved	PECTION:	~ 0		
	exterior modif	ications	Γ	Denied	Use Group: M Type: 55			
					abile			
			long Cu	28	X/2//CG			
Proposed Project Description:			- ara Curs 8/21/2			iAt		
Change of use and Tenant fit-u	p for retail w/ exterior	modifications	Signature:	Signa	ature: M			
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
			Action: Approved Approved w/Conditions Denied					
			Signature: Date: 8/10/06					
Permit Taken By:	Date Applied For:		Zoning Approval					
dmartin	08/04/2006							
1. This permit application do	bes not preclude the	Special Zone or Reviews		ing Appeal	Historic Preservation			
Applicant(s) from meeting	g applicable State and	Shoreland	Variance		Not in District or Landmark			
Federal Rules.								
2. Building permits do not in	clude plumbing.	Wetland	Miscell	aneous	Does Not Require Review			
septic or electrical work.	<i>F8</i> ,							
3. Building permits are void	if work is not started	Flood Zone	Conditi	ional Use	Requires Review			
within six (6) months of the								
False information may inv	alidate a building	Subdivision		Interpretation		Approved		
permit and stop all work								
		Site Plan	Approv	red	Approved w/Conditions			
		Maj Minor MM	Denied	A Denied		Denied to Hustonic Eliolos		
		al with con	nit the		8/10	105		
		Date:	0/0( Date:		Date: 8115/06	STH-		

## 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 Department of Building Inspection



Certificate of Occupancy

LOCATION 121 COMMERCIAL ST

L ST CBL 029 D002001

Issued to MAD COW LLC /Monaghan Woodworks Inc.

Date of Issue 11/16/2006

**Upis is to certify** that the building, premises, or part thereof, at the above location, built – altered – changed as to use under Building Permit No. 06-1163, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PC	ORTION OF BUILDING OR PREMISES	APPROVED OCCUPANCY
·]	Entire	Retail Space Use Group M Type 5B
Limiting Cond	litions:	IBC 2003
-	none	
This certificate certificate issu		
Approved:		
(Date)	Inspector	Inspector of Buildings
		of building or premises, and ought to be transferred from

11/09/06 Fining owny to Issie Clo

Form # P 01

## ELECTRICAL PERMIT City of Portland, Me.



Wed. 777

To the Chief Electrical Inspector, Portland Maine:

···· · · ·

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date_	SEPT	<u> 18</u>	2006
Permit	# DC	- 48:	30
CBL#_	29	bo	000

	00.	14 C		PHONE #		= & # 			
		*7					ΤΟΤΑΙ	EACH	FEE
OUTLETS	16	Receptacles	6	Switches		Smoke Detector	22	.20	4.40
			¥						
FIXTURES	22	Incandescent	22	Fluorescent		Strips	44	.20	8.80
								15.00-	
SERVICES		Overhead		Underground		TTL AMPS <80		15.00	
		Overhead		Underground		>80		25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
				Chaorground				25.00	
METERS		(number of)						1.00	
MOTORS	-	(number of)						2.00	<u> </u>
RESID/COM	-	Electric units						1.00	<u> </u>
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens		2.00	
		Insta-Hot		Water heaters		Fans		2.00	
		Dryers		Disposals		Dishwasher		2.00	+
		Compactors		Spa		Washing Machine		2.00	+
		Others (denote)						2.00	<u> </u>
MISC. (number of)	¥	Air Cond/win						3.00	
	7	Air Cond/cent				Pools		10.00	10.0
		HVAC		EMS		Thermostat	(	5.00	
		Signs						10.00	+
		Alarms/res						5.00	<u> </u>
		Alarms/com						15.00	<u> </u>
		Heavy Duty(CRKT)			D	EPT. OF BUILDING INSP	COTION	2.00	
_		Circus/Carnv			1	CITY OF PORTLAND,	<del>⊑CHON</del> ME	25.00	<u> </u>
		Alterations			1			5.00	<u> </u>
		Fire Repairs			$\top$	CED 1.0 0000	1-1	15.00	1
	10	E Lights			Γ	SEP 1 8 2006	10	1.00	10,00
		E Generators			1			20.00	
						RECEIVED			<u> </u>
PANELS		Service	1	Remote	L	Main	_ /	4.00	4.00
TRANSFORMER		0-25 Kva	-					5.00	
								8.00	
		Over 200 Kva						10.00	
							E		
		MINIMUM FEE/CO	MME	RCIAL 55.00	)	MINIMUM FEE	45.00		37.1
ONTRACTORS NAM	/E	1	ECT	RIC IN		MASTER LIC. #/	45.00	10.00	<b>3</b> 7,
DDRESS //:	2_	Summit	S	i south	_th	<sup>©</sup> LIMITED LIC. #			
	77	6-3774	2				/		

PLU		PPLICATI	ON			Department of Health and Human Services Division of Environmental Health			
	PROPERTY	Y ADDRESS							
Town or Plantation	· · · · · · · · · · · · · · · · · · ·	K., . [		20068320					
Street Subdivision Lot #			PORTL		ERMIT # 10020 TOWN COPY				
P	PROPERTY C	WNERS NAME		Date Permit 91/9	116	\$ 477 FEE Charged			
						LP.# 7.4.4			
Last: Applicant		First:	~.~	Local Plumbing Inspect	or Signature				
Name:	Con.	FCP	-11	-	060	~~			
Mailing Address Owner/Applican (If Different)		11. 1-41	1 74.						
	Owner/Appl	licant Statement	1,22	Ca	ution: Inspec	tion Required			
		nitted is correct to the b any <u>falsificat</u> ion is rease		I have inspected th compliance with th		orized above and found it to be in Rules.			
	pectors to deny a P	efmjt.	12 6	IAAAA					
S	Signature of Owner/	1. C - 1	Date	E Local Plumbing	nspector Signature	Bate Approved			
^	,	· · · · · · · · · · · · · · · · · · ·	PERM	IT INFORMATION	5 J. 10-1.				
This Applic	ation is for	Тур		ire To Be Served:	Plun	nbing To Be Installed By:			
1 DINEW P	LUMBING	1. SINGLE			1. MAST	ER PLUMBER			
2. 🗆 RELOC					<ol> <li>A. M. Amerika (Alberta), Statistical and Alberta (Alberta).</li> </ol>	2.			
		3. 🗆 MULTIPL			3. 🗆 MFG'[	. 🗆 MFG'D. HOUSING DEALER/MECHANIC			
		4. 🗹 OTHER -	- SPECIFY	<u> </u>	W D STORES IS A STRUCTURE IN	PUBLIC UTILITY EMPLOYEE     PROPERTY OWNER			
					1				
Hook-III	p & Piping Reloca	tion		Column 2					
	mum of 1 Hook-U		Number	Type of Fixture	Number	Type of Fixture			
	OK-UP: to public		, N	Hosebibb / Sillcock		Bathtub (and Shower)			
is r	not regulated and local Sanitary D	inspected by		Floor Drain		Shower (Separate)			
	0	R		Urinal	INSPECT	10 Bink			
но	OK-UP: to an ex	isting subsurface	1	Drinking Fountain	OBTLAND, ME	Wasi Basin			
was	stewater disposa	l system.	2	Urinal Drinking Fountain Indirect Waste DEPT. OF BUIL Undirect Waste DEPT. OF P	1026	Water Closet (Toilet)			
line	PING RELOCATIONS, and pipe w fixtures.			Water Treatment Softener, Nilter, SE					
				Grease / Oil Separator	ECEIVE	Dish Washer			
	~			Roof Drain		Garbage Disposal			
	01	R		Bidet		Laundry Tub			
				Other:	/	Water Heater			
TRANSFER FEE [\$6.00]				Fixtures (Subtotal) Column 2		Fixtures (Subtotał) Column 1			
·	, (	-1	Y			Fixtures (Subtotal) Column 2			
	all		MIT FEE S		6	Total Fixtures			
	<u>'</u> <u>'</u> '	FOR C	ALCULATI			Fixture Fee			
				i siyi <del>i</del> r		Transfer Fee			
				•		Hook-Up & Relocation Fee			
Page 1 of HHE-211 Rev.					14	Permit Fee (Total)			
				TOWN COPY					