

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 2014-01601	Issue Date:	CBL: 029 D003001
---------------------------------	--------------------	----------------------------

Location of Construction: 111 Commercial -6th floor	Owner Name: BLANCHARD BLOCK LLC	Owner Address: PO BOX 7626 PORTLAND, ME 04112		Phone: (207) 773-8422
Business Name:	Contractor Name: Scott Lindsay	Contractor Address: 97 Exchange Street Portland ME 04112		Phone: (207) 773-8422
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial		Zone: B3
Past Use: Retail & Restaurant on 1st floor, offices on 2-6 floors.	Proposed Use: Retail & Restaurant on 1st floor, offices on 2-5 floor and 2 residential rental units on the 6th floor	Permit Fee: \$2,120.00	Cost of Work: \$200,000.00	CEO District: 2
		INSPECTION: Use Group: R-3/B/M Type: 3A Residential dwelling units(2 units on 6th floor) Occupant load = 7 per unit Business(Floors 2-5) Mercantile(Floor 1) NFPA 13 Required 6th Floor MUBEC/IBC 2009		
Proposed Project Description: 6th floor - Change of use from offices to 2 residential rental units		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: bjs	Date Applied For: 07/21/2014	Zoning Approval		
<ol style="list-style-type: none"> 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 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: _____	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 type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____	

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

Location of Construction: 111 Commercial -6th floor	Owner Name: BLANCHARD BLOCK LLC	Owner Address: PO BOX 7626 PORTLAND, ME 04112	Phone: (207) 773-8422
Business Name:	Contractor Name: Scott Lindsay	Contractor Address: 97 Exchange Street Portland ME 04112	Phone: (207) 773-8422
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B3

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