| Attached Attached | PERMIT | Permit NumBERMITAISSUED |
|---|--|--|
| This is to certify thatELC LIMITED LIABILITY has permission toInterior re-fit no structure | | SEP 2 8 2009 |
| AT -130 MIDDLE ST provided that the person or person | C 029 | E001001 CITY OF PORTLAND this permit shall comply with all |
| of the provisions of the Statutes of the construction, maintenance and this department. | | • |
| Apply to Public Works for street line and grade if nature of work requires such information. | Not ation of spectic must be give and writte permission procured before this but and or permission procured in lath or oth sed-in. 2 HOL 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. CAT. Latter | | |
| Health DeptAppeal Board | | 3/17/07 |
| whheat poatr | | × 1 / 1 / |

PENALTY FOR REMOVING THIS CARD

Other ____

Department Name

| Location of Construction: Owner Name: | | | | | | Owner Address: | | | Phone: | | |
|---------------------------------------|---|-----------------------|---------|---------|--------------------|-----------------|---------------------|-----------------|------------|------------------------|----------------------------|
| | MIDDLE ST | | | | ILITY COMP | | IARKET ST | | | | |
| Busin | ess Name: | Contracto | | | | | actor Address: | | | Phone | |
| | | Mainlan | d Stru | ctures, | Inc. | | Bartlett Rd C | orham | | 2078561817 | |
| Lesse | e/Buyer's Name | Phone: | | | | | t Type: | | | Zone | , |
| | | | | | | Alte | erations - Con | nmercial | | | $\underline{\hspace{1cm}}$ |
| Past U | | Proposed | | | | Perm | it Fee: | Cost of Worl | | EO District: | |
| Commercial - Office Commercial - | | | | | | | \$820.00 | \$80,00 | | 1 | |
| | | no struc | tural w | ork no | restrooms | FIRE | DEPT: | Approved | INSPECT | | - 17 |
| | | | | | | | | Denied | Use Grou | p: B Type: 2 | -8 |
| | | | | | | م کاف | See Con | ditions | 7 | BC 2003 | |
| D | sed Project Description: | | | | | * | See Con | | 1 | | |
| - | rior re-fit no structural w | vork no restrooms | | | | Signa | (K | (\mathcal{L}) | Signatura | - AL | |
| mei | ioi io-ni no su uciuidi v | TOTA HO TESHOOHIS | | | | Signati PEDE | STRIAN ACTI | VITIES DIST | Signature: | | 5- |
| | | | | | | 16 | acton Mo | MASE 1 | Set to | ACT with 1 | ~ |
| | | | | | | Action | - F F | | | | |
| | | | | | | Signa | ldy Mr | e they | ZO F | -Not close | -1 |
| Permi | t Taken By: | Date Applied For: | | | | | Zoning | Approva | im | nge of the | 50 |
| Ldo | bson | 09/11/2009 | | | | | | | | | |
| 1. | This permit application | does not preclude | the | Spe | cial Zone or Revie | ws | Zonir | ıg Appeal | | Historic Preservation | ı |
| | Applicant(s) from meet Federal Rules. | | | ☐ Sh | oreland | | ☐ Variance | • | | Not in District or Lan | dmar |
| | Building permits do not septic or electrical work | | | □ w | etland | | ☐ Miscella | neous | | Does Not Require Re | view |
| | Building permits are vo within six (6) months of | f the date of issuand | e. | ☐ Fl | ood Zone | | Condition Condition | onal Use | | Requires Review | |
| | False information may i permit and stop all worl | | g | ☐ Sı | bdivision | | [Interpret | ation | | Approved | |
| | PFI | RMIT ISSUED | | ☐ Si | te Plan | | Approve | d | | Approved w/Conditio | ns |
| | | | 1 | Мај [| Minor MM | 4 | Denied | | | Denied | |
| | | ED 2 0 2000 | | | WILLCO | with | ~} | | | | |
| | 1 1 9 | EP 2 8 2009 | 1 | Date: | Q'all | <u>L/c.</u> | Date: | | Date | <u>:</u> | |
| | L_ | | Ţ | | 7 11/2 | 100 | 1 | | | | |
| | CITY | OF PORTLAN | ID | | | | | | | | |
| | | <u> </u> | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | _ | EDTIELO (CI | ON | | | | | |
| r 1 | dan and Graders I | | 41 | | CERTIFICATI | | | and and | ha de | | ul · |
| | eby certify that I am the been authorized by the | | | | | | | | | | nat |
| | liction. In addition, if a | | | | | | | | | | ive |
| shall | have the authority to en | | | | | | | | | | |
| such 1 | permit. | | | | | | | | | | |
| , | | | | | | | | | | | |
| | | | | | | | | | | | |

| • | nine - Building or Use Permit 101 Tel: (207) 874-8703, Fax: (| | Permit No: 09-0994 | Date Applied For: 09/11/2009 | CBL: 029 E001001 |
|---|---|-------------------------------|------------------------|-------------------------------------|------------------------------------|
| Location of Construction: | Owner Name: | | Owner Address: | | Phone: |
| 130 MIDDLE ST | ELC LIMITED LIAB | ELC LIMITED LIABILITY COMP 42 | | 42 MARKET ST | |
| Business Name: | Contractor Name: | | Contractor Address: | Contractor Address: | |
| | Mainland Structures, I | Inc. | 11A Bartlett Rd G | orham | (207) 856-1817 |
| Lessee/Buyer's Name | Phone: | | Permit Type: | | |
| | | | Alterations - Con | nmercial | |
| Proposed Use: | | Propos | ed Project Description | | |
| Commercial - Office - In | terior re-fit no structural work no res | strooms Interi | or re-fit no structura | al work no restroom: | S |
| Dept: Zoning Note: | Status: Approved with Condition | ns Reviewer | : Marge Schmuck | al Approval I | Oate: 09/14/2009 Ok to Issue: ✓ |
| This property is within street line. The submit | n the Pedestrian Activities District (itted plans show Barton Mortage to be ve requirements that will be placed to | be well beyond | the 20'. If there are | | |
| - | | | | | |
| 2) Separate permits shall | l be required for any new signage. | | | | |
| • | l be required for any new signage. approved on the basis of plans submi | itted. Any devia | ations shall require | a separate approval l | pefore starting that |
| 3) This permit is being a | | | itions shall require : | | |
| 3) This permit is being a work. | approved on the basis of plans submi | | | | |

2) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.

 Dept:
 Fire
 Status:
 Approved with Conditions
 Reviewer:
 Capt Keith Gautreau
 Approval Date:
 09/15/2009

 Note:
 Ok to Issue:
 ✓

- Fire Alarm system shall be maintained.
 If system is to be off line over 4 hours a fire watch shall be in place.
 Dispatch notification required 874-8576.
- 2) Emergancy lights are required to be tested at the electrical panel on the same circuit as the lighting for the area they serve.
- 3) Fire extinguishers required. Installation per NFPA 10
- 4) All means of egress to remain accessible at all times
- 5) Emergency lights and exit signs are required
- 6) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 7) The fire alarm system shall comply with NFPA 72 and Fire Department Technical Standard. A compliance letter is required.
- 8) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

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 designee 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.

| Order R | elease will be incurred if the procedure is not i | ollowed as stated below. |
|-----------|---|------------------------------|
| A Pre-co | onstruction Meeting will take place upon receipt | of your building permit. |
| <u>X</u> | Framing/Rough Plumbing/Electrical: Prior to | Any Insulating or drywalling |
| X | Final inspection required at completion of wo | rk. |
| | te of Occupancy is not required for certain projects ject requires a Certificate of Occupancy. All projec | |
| • | the inspections do not occur, the project cannot DLESS OF THE NOTICE OR CIRCUMSTAN | |
| | CATE OF OCCUPANICES MUST BE ISSUED ACE MAY BE OCCUPIED. | O AND PAID FOR, BEFORE |
| Elm | Alle | 7/78/09 |
| Da | e of Applicant/Designee | Date 18/09 |
| Signature | e of Inspections Official | Date ' |

CBL: 029 E001001 **Building Permit #**: 09-0994

General 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: 130 | MIDDLE STREET POI | RTLAND ME |
|---|---|--|
| Total Square Footage of Proposed Structure/A | rea Square Footage of Lot | |
| Tax Assessor's Chart, Block & Lot | Applicant *must be owner, Lessee or Buyer | r* Telephone: |
| Chart# Block# Lot# | Name | |
| 029 E001 001 | Address | |
| | City, State & Zip | |
| Lessee/DBA (If Applicable) | Owner (if different from Applicant) | Cost Of #C 2 |
| ANDROSCOGGIN BANK | Name ELC. LIMITED LIABILITY | Work: \$ P & C COC |
| | Address 42 Market ST | C of O Fee: \$ |
| 30 LISBON ST LEWKTON ME 04240 | | C of O Fee: \$ |
| | City, State & Zip | Total Fee: \$ \\ \frac{120}{20} |
| 207 376-3508 | POIZTLAND ME 04101 | |
| Current legal use (i.e. single family) If vacant, what was the previous use? | E-J wk | |
| Proposed Specific use: | MORTGAGE COMPANY | |
| Is property part of a subdivision? | If yes, please name | |
| Project description: | a a lunge la Desai | 7004. 5 |
| INTERIOR KE-FIT NO ST | RUCTURAL WORK HO REST | 100143 |
| | | |
| Contractor's name: MAINLAND | STRUCTURES GRP | |
| Address: II BARTLET | T ROAD | |
| City, State & Zip Gornan | M E | elephone (207)856 181 |
| Who should we contact when the permit is read | | • |
| Mailing address: SAME | , | |
| | | |
| Please submit all of the information | | st. Failure to |
| do so will result in the | automatic denial of your permit. | |
| | | 1 |
| n order to be sure the City fully understands the f nay request additional information prior to the iss | 1 , , | |
| his form and other applications visit the Inspection | | |
| Division office, room 315 City Hall or call 874-8703. | | |
| hereby certify that I am the Owner of record of the na | | |
| hat I have been authorized by the owner to make this a liws of this jurisdiction. In addition, if a permit for wor | | |
| uthorized representative shall have the authority to ent | | |
| rovisions of the codes applicable to this permit. | | 4 |
| | | , |
| Signature: | \rightarrow Date: \mathcal{E} | 26 |

This is not a permit; you may not commence ANY work until the permit is issue



Certificate of Design Application

| AILA | | | | | |
|--|---|--------------------------------|---|--|--|
| From Designer: | CLYDE BLACKW | ELL ARCHITECT | # ARC 1834 | | |
| Date: | SEPT 10 2009 | | | | |
| Job Name: | Auproscoggin B | THE / BARTON M | ORTGAGEC | | |
| Address of Construction: | | ST. | | | |
| Constr | 2003 International ruction project was designed to the | 0 | ł below: | | |
| Type of Construction | Use Group Classification FOE TE B pression system in Accordance with | | cNo | | |
| | If yes, separated or non sep | | | | |
| Supervisory alarm System? YE | Geotechnical/Soils report r | required? (See Section 1802.2) | <u>N. A</u> | | |
| Structural Design Calculations | | Live l | oad reduction | | |
| NA Submitted for all | structural members (106.1 - 106.11) | Roof | Roof live loads (1603.1.2, 1607.11) | | |
| Design Loads on Construction | Doguments (1602) | Roof | Roof snow loads (1603.7.3, 1608) | | |
| Uniformly distributed floor live loads | | Groun | nd snow load, Pg (1608.2) | | |
| Floor Area Use | Loads Shown | If Pg > | • 10 psf, flat-roof snow load p | | |
| | | If Pg > | 10 psf, snow exposure factor, a | | |
| | | If Pg > | • 10 psf, snow load importance factor, $_{\vec{k}}$ | | |
| | | Roof t | hermal factor, (1608.4) | | |
| | | Sloped | roof snowload, _{Pr} (1608.4) | | |
| Wind loads (1603.1.4, 1609) | N.A. | Seismi | c design category (1616.3) | | |
| Design option utiliz | ed (1609.1.1, 1609.6) | | eismic force resisting system (1617.6.2) | | |
| Basic wind speed (18 | 309.3) | Respon | nse modification coefficient, R1 and | | |
| Building category an | nd wind importance Factor, b table 1604.5, 1609.5) | deflect | ion amplification factor _{Cl} (1617.6.2) | | |
| Wind exposure cates | | Analys | is procedure (1616.6, 1617.5) | | |
| Internal pressure coeff | · | Design | base shear (1617.4, 16175.5.1) | | |
| • | ing pressures (1609.1.1, 1609.6.2.2) ures (7603.1.1, 1609.6.2.1) | Flood loads (1803.1.6, | 1612) | | |
| Earth design data (1603.1.5, 161 | , | Flood | Hazard area (1612.3) | | |
| Design option utilize | • | Elevati | on of structure | | |
| Seismic use group (" | | Other loads | | | |
| | pefficients, SDs & SD1 (1615.1) | Concer | ntrated loads (1607.4) | | |
| Site class (1615.1.5) | , (-0.0) | | on loads (1607.5) | | |
| - , , | | Misc. lo | pads (Table 1607.8, 1607.6.1, 1607.7, 1607.13, 1610, 1611, 2404 | | |

Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936



Accessibility Building Code Certificate

| Designer: _ | CLYDE BLACKWOLL Architect |
|--|--|
| Address of Project: | 130 Middle ST |
| Nature of Project: | INTERIOR RE-FIT |
| _ | No RESTROOM |
| _ | |
| | |
| designed in compliance with a Law and Federal Americans w | vering the proposed construction work as described above have been applicable referenced standards found in the Maine Human Rights with Disability Act. Residential Buildings with 4 units or more must lousing Accessibility Standards. Please provide proof of compliance Signature: |
| ATE OF MAN | Title: Architect |
| (SEAL) | Firm: THEMAULT LANDMANN ASSOC |
| | Address: 118 Congress ST |
| | PORTLAND ME 04101 |
| | Phone: (207) 842-6260 |

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



Certificate of Design

| Date: | SEPT. 10 2009 |
|---------------------|--|
| From: | |
| These plans and / o | or specifications covering construction work on: |
| 136 Mippe | 5 ST. INTERIOR - RE-FIT FOR RAPHON MORTGA |
| No res | Troom |
| O | |
| JATE OF M | Signature: Lave & Caccule! Title: Architect |
| (SEAL) | Firm: THENLAULT LANDMANN ASSOC |
| | Address: 119 Conquess ST |
| | PORTLAND ME 84161 |
| | Phone: (207) 871 -9904 |

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5

