

4/21/07

done.

AA

City of Portland, Maine - Building or Use Permit

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

Permit No: 03-0376	Date Applied For: 04/23/2003	CBL: 029 K001001
------------------------------	--	----------------------------

Location of Construction: 85 Commercial St	Owner Name: Olympia Equity Investors Iv Llc	Owner Address: 50 Monument Sq 2nd Floor	Phone:
Business Name: n/a	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Alterations - Commercial	

Proposed Use: Retail / Food Service; additional restaurant seating.	Proposed Project Description: Additional restaurant seating.
---	--

Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 04/28/2003	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Pending	Reviewer: Mike Nugent	Approval Date:	Ok to Issue: <input type="checkbox"/>
Note: 1) Addition of				
Dept: Fire	Status: Approved	Reviewer: Lt. McDougall	Approval Date: 04/29/2003	Ok to Issue: <input checked="" type="checkbox"/>
Note:				

Comments:
04/30/2003-mjn: Need to know how many seats!

PLUMBING APPLICATION

2003-8059

PROPERTY ADDRESS

Town or Plantation: ROSELAND, NC

Street: 25 COMMERCIAL ST

Subdivision Lot #:

PROPERTY OWNERS NAME

Last: Chippitt Realty First:

Applicant Name: RESTSIDE HOBBY

Mailing Address of Owner/Applicant (If Different): SAME

Date Permit Issued: 3/13/04

Local Plumbing Inspector Signature: [Signature]

L.P.I. # 06180

Fee: \$121/1001 Double Fee Charged

0091 00!

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: NOV 13

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Local Plumbing Rules.

Local Plumbing Inspector Signature: [Signature] Date Approved: 9/21/04

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Commercial</u></p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>0889581</u></p>
--	--	---

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input checked="" type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	/	Sink
		Drinking Fountain		Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	/	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

Check # 764

TOWN COPY

31