Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

Permit Number: 090507

provided that the person or persons, first or composition accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Common of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

ation o spectio nd written bermission procured Apply to Public Works for street line this building or part hereof is and grade if nature of work require such information. or oth NOTICE IS REQUIRED. OTHER REQUIRED APPROVALS 8 2009 Fire Dept. Health Dept. CITY OF PORTLAND Appeal Board Other Department Name

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

PENALTY FOR REMOVING THIS CARD

SCANNED

City of Portland, Main	e - Buile	ding or Use	Permi	t Applicatio	n Pe	ermit No:	Issue Date	. /	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703						09-0507	5/27	109	032 H0	08001
Location of Construction: Owner Name:			Owner Address:		11		Phone:			
80 EXCHANGE ST MURAL AS		SOCIATES		PO	BOX 10189	,				
Business Name: Lessee/Buyer's Name		Contractor Name:			Cont	ractor Address:			Phone	
		Lynchworks LCC / James Lynch			7 Blackstrap Road Cumberland			nd	2077499387	
		Phone:			Permit Type:				Zone:	
					Alt	terations - Co	mmercial			B-3
Past Use: Proposed Use:		Proposed Use:			Pern	nit Fee: Cost of Work:		k:	CEO District:	7
Commercial "The Grill Room" Commercial "replace floor		The Grill Room" -			\$90.00	\$6,20	00.00	1		
		replace floor			FIRI				SPECTION:	
							Denied	Use G	roup: A-J	Type: 72
	- 1								roup: A-2- TBC-6	2000 >
									JISC 0	3
Proposed Project Description:									00	1/
Replace Floor								gnature 3/27/6		
					PEDESTRIAN ACTIVITIES DISTRIC			TRICT (T (P.A.D.)	
i, II					Actio	on: Appro	ved App	proved w	//Conditions	Denied
					Sign	ature:			Date:	
Permit Taken By:	Date An	plied For:	Ι		0.8		A	.1		
Ldobson	05/27					Zoning	g Approva	d I		
			Spe	cial Zone or Revi	ews	ews Zoning Appeal			Historic Preservation	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 			Shoreland		Variance			Yes Not in District or Landman		
			Shoreland			Variance			Not in District of Eardina	
2. Building permits do not include plumbing,			□w	etland		☐ Miscellaneous			☐ Does Not Require Review	
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			☐ F1	ood Zone	Conditional Use			Requires Review		
			Subdivision		☐ Interpretation			Approved		
			☐ Si	te Plan		Approv	ed		Approved w/	Conditions
			Mail	□ Minor □ M		Denied			Danied	
PERMIT ISSUED			Maj Minor MM		a [Demed			Denied	
			Otylcondihar			Doto:			Date: a squarte various i appropriate that Hisporic Preservation.	
			Date:	KM 5 12.	1/97	Date:		IL	vale. a squite	14
MAY 2	8 2009								4 approval	HW 1-
									Hisport Pre	servation.
OLTY OF D	ODTIA	CIND								
CITY OF P	UNILA	1110								
			(ERTIFICAT	ION					
I hereby certify that I am the	owner of	record of the na	med pr	operty, or that t	he pro	posed work i	s authorized	by the	owner of recor	rd and that
I have been authorized by the										
jurisdiction. In addition, if a pshall have the authority to ent										
such permit.	er an area	as covered by si	ich pen	int at any reaso	maure	nour to emor	ce the provi	131011 01	the code(s) up	pricable to
F										
GIGVLENING CO. LOCAL				ARRES	20		DATE		BITO	NE
SIGNATURE OF APPLICANT				ADDRES	SS DATE		2	PHO	NE	
RESPONSIBLE PERSON IN CHA	RGE OF W	ORK, TITLE					DATE		PHO	NE

City of Portland, Maine	- Building or Use Permi	t	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101			8716 09-0507	05/27/2009	032 H008001		
Location of Construction:	Owner Name:		Owner Address:				
80 EXCHANGE ST	MURAL ASSOCIAT	ES	PO BOX 10189	PO BOX 10189			
Business Name:	Contractor Name:	Contractor Name: Lynchworks LCC / James Lynch		Contractor Address:			
	Lynchworks LCC / Jan			7 Blackstrap Road Cumberland			
Lessee/Buyer's Name	me Phone:		Permit Type:	Permit Type:			
			Alterations - Con	nmercial			
Proposed Use:		Pi	oposed Project Description	1:			
Commercial " The Grill Room" - replace floor			Replace Floor				
Dept: Zoning Sta	tus: Approved with Condition	ns Revie	wer: Ann Machado	Approval I	Date: 05/27/2009		
Note:	• • • • • • • • • • • • • • • • • • • •				Ok to Issue:		
ANY exterior work require District.	es a separate review and approv	val thru His	toric Preservation. This	property is located	within an Historic		
This permit is being appro- work.	ved on the basis of plans submi	itted. Any	deviations shall require	a separate approval	before starting that		
Dept: Building Sta	tus: Approved with Condition	ns Revie	ewer: Chris Hanson	Approval I	Date: 05/27/2009		
Note:					Ok to Issue:		
Permit approved based on noted on plans.	the plans submitted and review	ved w/owne	r/contractor, with addit	ional information as	agreed on and as		
	red for any electrical, plumbing oproval as a part of this process		fire alarm or HVAC or	exhaust systems. Se	parate plans may		

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any

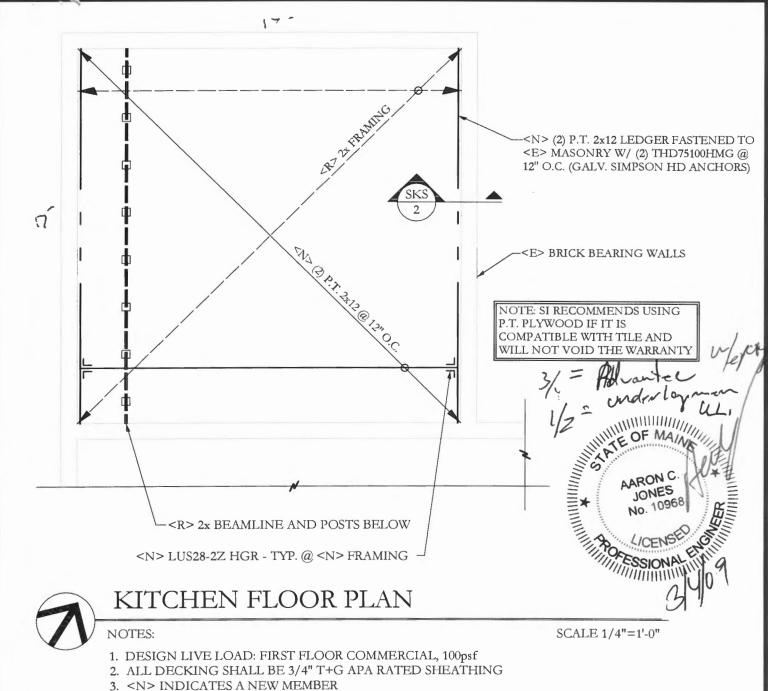
Location/Address of Construction: 84	Exchange Street		
Total Square Footage of Proposed Structure			Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 32 /-/ 8	Applicant *must be owner, Lessee or Boname Harding Smith Address City, State & Zip	ıyer*	Telephone: 319 - 4368
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Mural Associates Address R. O. 10189 City, State & Zip	C	ost Of Ork: \$ 6,000.
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision?	T.E.		its
Project description: Replacing Floor			Y 2 7 2009
Contractor's name: Lynchworks Address: 7 Blacks Irap Rd City, State & Zip Cumber land			one: <u>749-9387</u>
	1 (Teleph	one: 829-6639
Who should we contact when the permit is re- Mailing address: 7 Rockstrop R	d Comberland		one: <u>829 - 663 9</u> Failure to
Who should we contact when the permit is remailing address: 7 Rockstop R Please submit all of the information	ady: James Lyuch Combeland n outlined on the applicable Check e automatic denial of your permit.	dist. F	ailure to

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 provision of the codes applicable to this permit.

Signature:	Date: 5/27/09	

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

Revised 09-26-08



- 4. <E> INDICATES AN EXISTING MEMBER TO REMAIN
- 5. <R> INDICATES AN EXISTING MEMBER TO BE REMOVED
- 6. ALL NEW MEMBERS SHALL BE P.T. SPF #2 OR BETTER
- 7. IF MEMBER IS NOT INDICATED AS <E>, <N> OR <R> MEMBER IS TO BE CONSIDERED A NEW, <N>, MEMBER
- 8. VERIFY ALL EXISTING CONDITIONS IN FIELD, CONTACT SI. INC IF CONDITIONS IN FIELD DO NOT MATCH PLAN

Title: New Kitchen/Dish Washing Room Floor Plan



d. ME. 04101

BUILD WITH CONFIDENCE

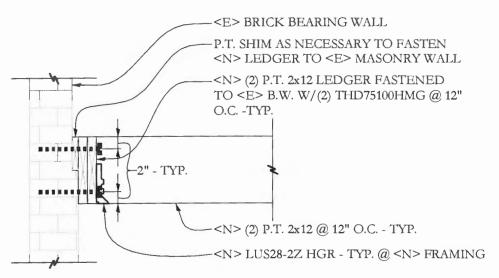
SI IOB# 09-0013

The Grill Room

Portland, ME

MAY 2 7 2009

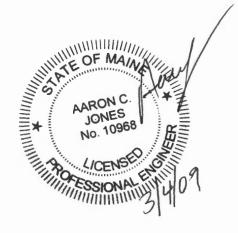
Scale: 1/4''=1'-0''Date: 3/4/09



SECTION



3/4"=1'-0



Title: New Kitchen/Dish Washing Room Floor Section

Structural Integrity

77 Oak Street
Pordand, ME, 04101
p. 207-774-4614
f. 866-793-7835
evww.structuralinteg.com

BUILD WITH CONFIDENCE

SI JOB# 09-0013

The Grill Room

Portland, ME

MAY 2 7 2009

Scale: 3/4"=1'-0"
Date: 3/4/09

SKS-2

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 Release" will be incurred if the procedure is no	
A Pre-construction Meeting will take place upon recei	ipt of your building permit.
X Framing/Rough Plumbing/Electrical: Prior	to Any Insulating or drywalling
Certificate of Occupancy is not required for certain project your project requires a Certificate of Occupancy. All pro	•
If any of the inspections do not occur, the project can REGARDLESS OF THE NOTICE OR CIRCUMSTA	
CERIFICATE OF OCCUPANICES MUST BE ISSUETHE SPACE MAY BE OCCUPIED.	ED AND PAID FOR, BEFORE
Mary M	5/28/09
Signature of Applicant/Designee	Date
Signature of Inspections Official	Date

CBL: 032 H008001 Building Permit #: 09-0507

06/01/09 Stronting farming vill ne-inspect