

940163

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$410 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: 225 Commercial St. Assoc Phone # 775-7442Address: Box 4857 - Ptld, ME 04112LOCATION OF CONSTRUCTION 225 Commercial StContractor: Project Mgt Inc Sub.: 775-7442Address: Box 4857 - Ptld, ME 04112 Phone # _____Est. Construction Cost: 78,000 Proposed Use: office/retail

Past Use: _____

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use OnlyDate 3/7/94

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 78,000

Subdivision _____

Name _____

Lot _____

Ownership: _____

Public _____

Private _____

CITY OF PORTLAND

Zoning:

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____

Special Exception _____

Other (Explain) _____

Ceiling:

1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By _____

Signature of Applicant _____

CEO's Designation _____

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

32-V-012

PERMIT ISSUED

MAR 16 1994

CITY OF PORTLAND

HISTORIC PRESERVATION

Not in District nor Landmark.

Does not require review.

Requires Review.

Action Approved with Conditions.

Signature: _____

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 16, 1994

RE: 225 Commercial St., Portland

Project Mgt. Inc.
Box 4857
Portland, ME 04112

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

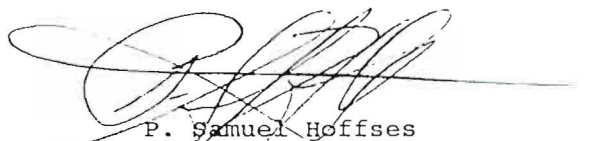
No Certificate of Occupancy can be issued until all requirements of this letter are met.

Building & Fire Code Requirements

1. Stairs serving four or more stories shall be provided with a sign within the enclosure at each floor landing. The sign shall indicate the floor level, the terminus of the top and bottom of the stair enclosure, and the identification of the stairs.
2. Portable fire extinguishers shall be provided in accordance with NFPA #10.
3. A fire alarm acceptance report shall be submitted to the Portland Fire Department.
4. Handrails shall be installed as per Chapter 10 section and subsections 1022.0 of the City's building code. (The BOCA National Building Code/1993)

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,



P. Samuel Hoffses
Chief of Inspection Services

/el

cc: LT. Gaylen McDougal, Fire Prevention Bureau

PROJECT MANAGEMENT, INC.

22 Free Street, Suite 300, P.O. Box 4857
Portland, Maine 04112
207-775-7442

March 7, 1994

P. Samuel Hoffses
Chief of Inspection Services
Department of Planning and Urban Development
389 Congress Street
Portland, Maine 04101

RE: 223 - 231 Commercial Street

Dear Sam:

Enclosed are two sets of Architectural Drawings and Engineering Plans for the renovation at 223 - 231 Commercial Street. At this time, we are only constructing the building core. Tenant space permits will be applied for at a later time.

We are requesting a permit for the following scope of work.

1. Construct two 2 hour fire rated stair towers, ingress and egress corridors and partitions as detailed on the plans.
2. Install new two non-combustible steel stair towers.
3. Install openings in masonry partitions.
4. Construct the 2 hour fire rated elevator shaft way.
5. Bathroom and 1 hour fire rated corridor walls.

I have submitted to the Planning department proof of a \$1,000.00 performance guarantee.

Sincerely,



Cyrus Y. Hagge

KEY BANK OF MAINE NON-PERSONAL SIGNATURE CARD

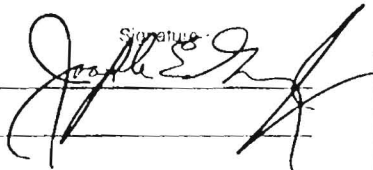
KEY SAVER - NP Account No. 191275000187
Depositor Type Professional association/corporation
Office 00127 Date Opened: 01/25/94
Account Title 225 COMMERCIAL STREET ASSOCIATES INC No. Signatures Req 1
Address P O BOX 4857
City FORTLAND State: ME Zip: 04112
Business Phone 2077757442 TIN: 016117444
Opened By: AMY LACKE Opening Deposit: 1,000.00

Account No. 191275000187

ID EXISTING CUSTOMER

Business Authorization/Resolution on file Y/N. Y

By signing below, I acknowledge receipt of and agree to Key Bank's Deposit Account Agreement and Schedule of Rates, Fees, and Charges.

Authorized Signer	Title	Signature
1 JOSEPH GRAY	DIR. URBAN PLANNING	
2		
3		
4		
5		

ARE MULTIPLE SIGNATURES REQUIRED? N Y (N)

NUMBER OF SIGNERS REQUIRED: :

PRINT TITLE(S) OVER SIGNATURE LINE ON CHECK? N Y N

RELATED CUSTOMER / SIGNER:

1. JOSEPH GRAY

TITLE:

1. C.F. URBAN PLANNING

2.

2.

3.

3.

4.

4.

5.

5.

GROUP CUSTODIAL REPORTING:

GROUP NUMBER TYPE

GROUP NUMBER

DIVISION NUMBER

UNIT NUMBER

RELATIONSHIP CODE

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 410

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	
	Date	
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____

COMMENTS Work completed - stairs + elevators appear properly altered
and meet code - see other permits for C.O.'s

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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Agnes J. Hogg
SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.