

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

## BUILDING DEPARTMENT PERMIT

Permit Number: 021100

This is to certify that Running With Scissors, Inc./  
has permission to Change of Use and Interior Renovations  
AT 34 Portland St 033 J012001

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

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is altered or closed-in. 24 HOUR 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. [Signature]  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

[Signature] 10/8/02  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 02-1100	Issue Date:	CBL: 033 J012001
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Location of Construction: 34 Portland St	Owner Name: Running With Scissors, Inc.	Owner Address: 20 Nicola Road	Phone: 603-755-9581
Business Name: n/a	Contractor Name: self	Contractor Address: Portland	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Change of Use - Commercial	Zone: B2b

Past Use: Commercial / Vacant; prior use was a Printing Company	Proposed Use: Change of Use; from Printing Company to Artist Studio & Gallery	Permit Fee: \$133.00	Cost of Work: \$5,000.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 5B	

Proposed Project Description: Change of Use and Interior Renovations	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
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: gg	Date Applied For: 09/25/2002	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: 9/27/02	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <input checked="" 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: _____
	separate permits for signage No D.U. ok with architect		

**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

1935-36 1st side  
opened [unclear] [unclear]  
[unclear] [unclear] [unclear]  
etc. for [unclear] [unclear]



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 34 Portland St

CBL 033 J012001

Issued to Running With Scissors, Inc./self

Date of Issue 12/04/2002

**This is to certify** that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 02-1100, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

First and Second Floors

APPROVED OCCUPANCY

Art Studio & Gallery  
Use Group B  
Type 5B

**Limiting Conditions:**

The basement and third floors are not approved for use under this permit. This space is for working only, no living quarters allowed.

**This certificate supersedes  
certificate issued**

**Approved:**

(Date)

*Inspector*

*Inspector of Buildings*

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

# PLUMBING APPLICATION

2007-8336

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	24 Portland St

## PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	Waseen Wilmo
Mailing Address of Owner/Applicant (If Different)	25 Grove Rd Cape Elizabeth Me

Date Permit Issued:	10/15/07	6232	Town Code:	001	<input type="checkbox"/> Double Fee Charged
Local Plumbing Inspector Signature		\$	3000	FEE	
		L.P.I. #	C1640		

033 5012

## 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.

0710

## Caution: Inspection Required

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

Signature of Owner/Applicant

Date

Local Plumbing Inspector Signature

Date Approved

## PERMIT INFORMATION

### This Application is for

- 1.  NEW PLUMBING
- 2.  RELOCATED PLUMBING

### Type of Structure To Be Served:

- 1.  SINGLE FAMILY DWELLING
- 2.  MODULAR OR MOBILE HOME
- 3.  MULTIPLE FAMILY DWELLING
- 4.  OTHER - SPECIFY \_\_\_\_\_

### Plumbing To Be Installed By:

- 1.  MASTER PLUMBER
  - 2.  OIL BURNERMAN
  - 3.  MFG'D. HOUSING DEALER/MECHANIC
  - 4.  PUBLIC UTILITY EMPLOYEE
  - 5.  PROPERTY OWNER
- LICENSE # 192181

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<p><b>OR</b></p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p><b>OR</b></p> <p>TRANSFER FEE [\$6.00]</p>		Hosebibb / Sillcock		Bathtub (and Shower)
	1	Floor Drain		Shower (Separate)
		Urinal	3	Sink
		Drinking Fountain		Wash Basin
		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
<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p>			4	Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

30  
40

# ELECTRICAL PERMIT City of Portland, Me.



MC

To the Chief Electrical Inspector, Portland Maine:  
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 10/1/02  
Permit # 5002 4828  
CBL# 033 5012

LOCATION: 34 PORTLAND ST. METER MAKE & # \_\_\_\_\_  
CMP ACCOUNT # \_\_\_\_\_ OWNER ARLETTE MACDONALD  
TENANT ARLETTE MACDONALD PHONE # 650-8661

							TOTAL EACH FEE		
OUTLETS	30	Receptacles		Switches		Smoke Detector		.20	
FIXTURES	6	Incandescent	12	Fluorescent		Strips		.20	
SERVICES		Overhead		Underground		TTL AMPS	<800	15.00	
		Overhead		Underground			>800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS		(number of)						1.00	
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens		2.00	
		Insta-Hot		Water heaters		Fans		2.00	
		Dryers		Disposals		Dishwasher		2.00	
		Compactors		Spa		Washing Machine		2.00	
MISC. (number of)		Others (denote)						2.00	
		Air Cond/win						3.00	
		Air Cond/cent				Pools		10.00	
		HVAC		EMS		Thermostat		5.00	
		Signs						10.00	
		Alarms/res						5.00	
		Alarms/com						15.00	
		Heavy Duty(CRKT)						2.00	
		Circus/Carnv						25.00	
		Alterations						5.00	
	Fire Repairs						15.00		
	3	E Lights						1.00	
		E Generators						20.00	
PANELS		Service		Remote		Main		4.00	
TRANSFORMER		0-25 Kva						5.00	
		25-200 Kva						8.00	
		Over 200 Kva						10.00	
							TOTAL AMOUNT DUE		
MINIMUM FEE/COMMERCIAL 45.00							MINIMUM FEE	35.00	45.00

CONTRACTORS NAME BAUMAN ELECTRIC INC. MASTER LIC. # MS 60017684  
ADDRESS 20 ORCHARD RD. CAPS ELIZABETH LIMITED LIC. # \_\_\_\_\_  
TELEPHONE 207 767-1167 CELL 838-0475

SIGNATURE OF CONTRACTOR [Signature]