

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

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

DEPT. OF BUILDING INSPECTION

Permit No: 05-0215	Issue Date: MAR 10 2005	CITY OF PORTLAND, ME. 033 K01001
-----------------------	----------------------------	-------------------------------------

<b>Location of Construction:</b> 351 Cumberland Ave	<b>Owner Name:</b> Abilities & Goodwill Inc	<b>Owner Address:</b> 353 Cumerland Ave	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Curtis Hamilton	<b>Contractor Address:</b> 353 Cumberland Ave Portland	<b>Phone:</b> 2074156005
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	<b>Zone:</b> B-3

<b>Past Use:</b> Commercial	<b>Proposed Use:</b> Commercial Create 6 room, 1 kitchen and 1 ADA bathroom	<b>Permit Fee:</b> \$276.00	<b>Cost of Work:</b> \$20,000.00	<b>CEO District:</b> 1
<b>Proposed Project Description:</b> Create 6 rooms, 1 kitchen and 1 ADA bathroom <i>change use from retail to services for the deaf community</i>		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: 3 Type: 30 3/8/05 <i>Not in PAD</i>	
Signature:		Signature:		
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: Date:				

<b>Permit Taken By:</b> dmartin	<b>Date Applied For:</b> 03/02/2005	<b>Zoning Approval</b>		
<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:	<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:

**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

04/17/05 Training okay } ~~MAA~~

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

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

<b>Permit No:</b> 05-0215	<b>Date Applied For:</b> 03/02/2005	<b>CBL:</b> 033 K001001
------------------------------	--	----------------------------

<b>Location of Construction:</b> 351 Cumberland Ave	<b>Owner Name:</b> Abilities & Goodwill Inc	<b>Owner Address:</b> 353 Cumerland Ave	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Curtis Hamilton	<b>Contractor Address:</b> 353 Cumberland Ave Portland	<b>Phone:</b> (207) 415-6005
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Commercial - change of use from retail to services for the deaf - Create 6 room, 1 kitchen and 1 ADA bathroom	<b>Proposed Project Description:</b> Create 6 rooms, 1 kitchen and 1 ADA bathroom
--	--

**Dept:** Zoning      **Status:** Approved      **Reviewer:** Marge Schmuckal      **Approval Date:** 03/03/2005  
**Note:**      **Ok to Issue:**

**Dept:** Building      **Status:** Approved      **Reviewer:** Mike Nugent      **Approval Date:** 03/08/2005  
**Note:**      **Ok to Issue:**

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Lt. MacDougal      **Approval Date:** 03/07/2005  
**Note:**      **Ok to Issue:**

- 2) the fire alarm system shall be maintained to NFPA 72 standards
- 3) the sprinkler system shall be maintained to NFPA 13 standards

**Dept:** Zoning      **Status:** Pending      **Reviewer:**      **Approval Date:**      **Ok to Issue:**

**Dept:** Building      **Status:** Pending      **Reviewer:**      **Approval Date:**      **Ok to Issue:**

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME

MAR 2 2005

RECEIVED

## All Purpose 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: <u>353 Cumberland Ave, Portland, ME</u>		
Total Square Footage of Proposed Structure <u>Former RETAIL SPACE 4,500 sq ft +/-</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>33</u> Block# <u>K</u> Lot# <u>001</u>	Owner: <u>Goodwill Industries of Northern New England</u>	Telephone: <u>207 415-6005</u>
Lessee/Buyer's Name (If Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>Curtis Hamilton 353 Cumberland Ave Portland ME 207 415 6005</u>	Cost Of Work: \$ <u>20,000</u> Fee: \$
Current use: <u>VACANT Former RETAIL STORE</u>		
If the location is currently vacant, what was prior use: <u>RETAIL STORE</u>		
Approximately how long has it been vacant: <u>4 MONTHS</u>		
Proposed use: <u>DEAF COMMUNITY REHAB FACILITY</u>		
Project description: <u>Build 6 Rooms, Kitchen, ONE ADA BATHROOM</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>CURTIS HAMILTON 207 415 6005</u>		
Mailing address: <u>353 Cumberland Ave Portland ME 04101</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>207 415 6005</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 provisions of the codes applicable to this permit.

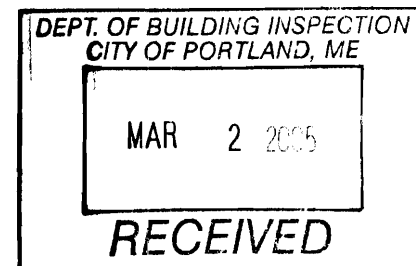
Signature of applicant: 

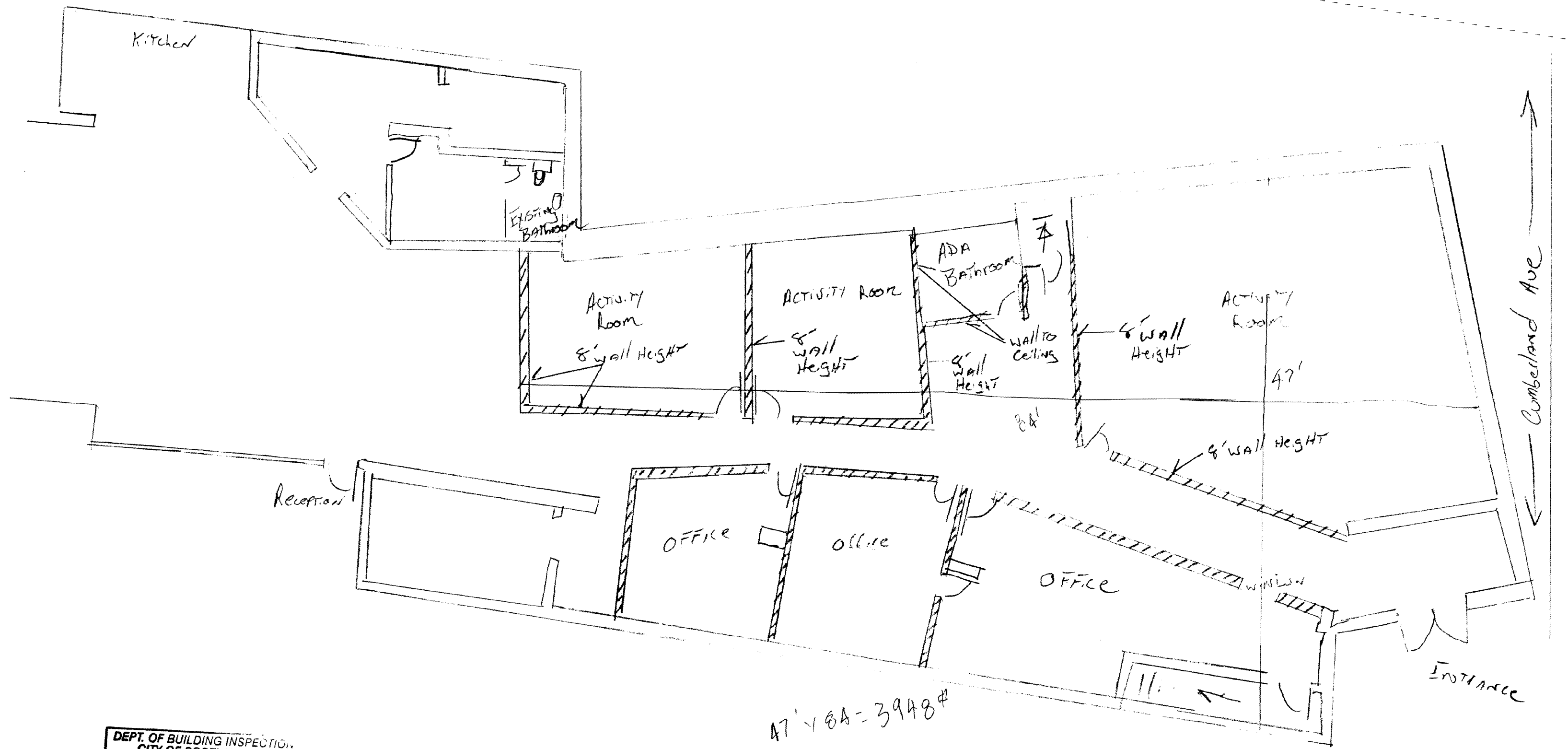
Date: ~~3-2-05~~ 3-2-05

This is NOT a permit, you may not commence ANY work until the permit is issued.  
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4<sup>th</sup> floor of City Hall

## Cover Letter

**Goodwill Industries of Northern New England proposes to renovate our recently vacated store front located at 353 Cumberland Ave. Portland, Maine. Our intent is a change of use from retail sales, to a facility that helps the deaf community to better function in society. This program is called Deaf Community Life Skills; currently this program is located on Preble Street in a leased space. This renovation will allow Goodwill to consolidate this program into our own facility, saving our agency money in the long run, and by doing so will better enable use to serve our mission of helping the disabled.**





DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME

MAR 2 2005

RECEIVED

47' x 84' = 3948#  
353 Cumberland Ave  
Former Goodwill Retail Store

Scale 1/8" = 1'  
 [Hatched Box] = walls to be built  
 [Solid Box] = Existing

Alder St →

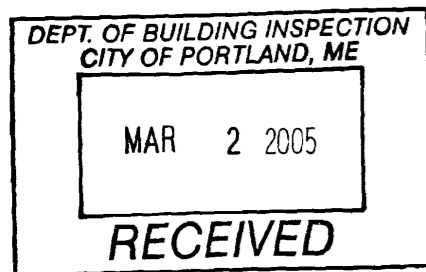
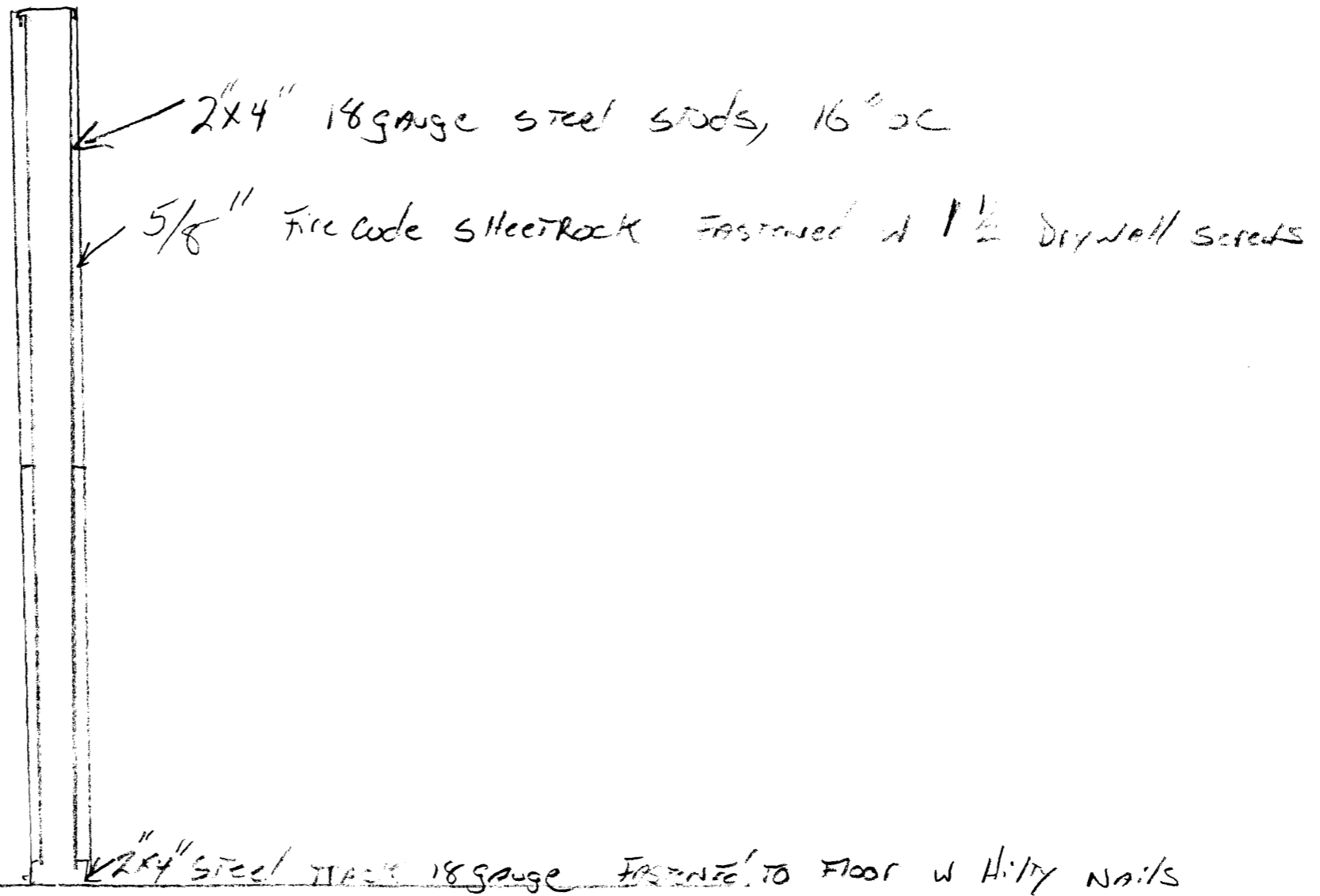
Door Schedule

ADD 6 3'0" x 6'8" Birch veneer doors  
w steel knockdown frames

Fire Rating 20 min

Lever Classroom Function Knobs  
Chrome Finish

4" x 6" windows safety glass



Concrete floor  
6" thick

# ELECTRICAL PERMIT

## City of Portland, Me.



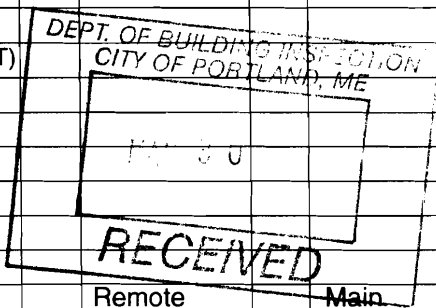
To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 3/30/05  
 Permit # 2005-4271  
 CBL# 3321

LOCATION: 353 Cumberland Ave METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER \_\_\_\_\_  
 TENANT Goodwill PHONE # \_\_\_\_\_

**TOTAL EACH FEE**

OUTLETS	24	Receptacles	Switches	Smoke Detector	.20	4.80	
FIXTURES		Incandescent	Fluorescent	Strips	.20		
SERVICES		Overhead	Underground	TTL AMPS <800	15.00		
		Overhead	Underground	TTL AMPS >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		
		Others (denote)			2.00		
	MISC. (number of)		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			
	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 Seabee Electric MASTER LIC. # 17768  
 ADDRESS 84 Pleasant Hill Rd. Scarborough LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 883-5448

SIGNATURE OF CONTRACTOR [Signature]



# PLUMBING APPLICATION

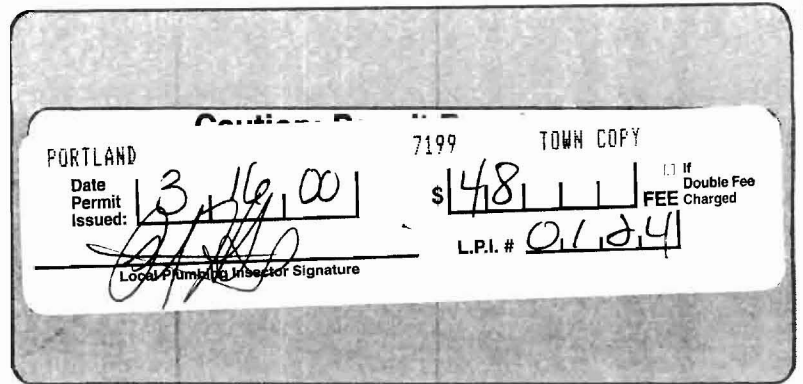
## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

## PROPERTY OWNERS NAME

Last:	First:
-------	--------

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



### 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

Date

### Caution: Inspection Required

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

Local Plumbing Inspector Signature

Date Approved

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	<b>Plumbing To Be Installed By:</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>2800</u>
---	---	---

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.  <b>OR</b> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		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
				Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



**CITY OF PORTLAND, MAINE**  
**Department of Building Inspections**

\_\_\_\_\_ 20 \_\_\_\_\_

Received from \_\_\_\_\_

Location of Work \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

Building (I1) \_\_\_\_ Plumbing (I5) \_\_\_\_ Electrical (I2) \_\_\_\_ Site Plan (U2) \_\_\_\_

Other \_\_\_\_\_

CBL: \_\_\_\_\_

Check #: \_\_\_\_\_

**Total Collected \$** \_\_\_\_\_

**THIS IS NOT A PERMIT**

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy