

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

PERMIT ISSUED		Permit No: 02-1059	Issue Date: OCT 4 2002	CBL: 033 K004001
Location of Construction: 343 Cumberland Ave	Owner Name: Preble Street Resource Center	Owner Address: Po Box 1459	Phone: 775-0026	
Business Name:	Contractor Name: WRIGHT RYAN CONSTRUCTIO	Contractor Address: 10 DANFORTH STREET Portland	Phone: 2077733625	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B 3	

Past Use: Vacant/Box Manufacturer	Proposed Use: OfficeSpace/Dental Clinic/Teen Center	Permit Fee: \$9,998.00	Cost of Work: \$1,425,000.00	CEO District: 2
Proposed Project Description: Construct Office Space/Dental Clinic/Teen Center		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 3B <i>10/3/02</i>	
		Signature: <i>JMM</i>	Signature: <i>Ch... [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: gad	Date Applied For: 09/13/2002	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>ch. use - exist - Bldg - no addition</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i>example issued previously K.F.</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>OK 9/24/02</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input checked="" type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <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: <i>[Signature]</i>
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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

02-1059

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>343 CUMBERLAND AVE</u>		
Total Square Footage of Proposed Structure <u>10,900 sq Footprint, 2 Storey</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>33</u> Block# <u>K</u> Lot# <u>4</u>	Owner: <u>PROBLE ST. RESOURCE CENTER</u>	Telephone: <u>775-0026</u>
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: <u>Proble St. Resource Center</u> <u>5 Portland St. - PORT</u> <u>775-0026</u>	Cost Of Work: \$ <u>1,425,000.</u> Fee: \$ <u>9,998.-</u>
Current use: <u>VACANT</u>		
If the location is currently vacant, what was prior use: <u>BOX MANUFACTURER</u>		
Approximately how long has it been vacant: <u>1 YEAR</u>		
Proposed use: <u>OFFICES / DENTAL CLINIC / TEEN CENTER</u>		
Project description: <u>RENOVATION OF EXISTING BUILDING TO ACCOMMODATE PROBLE STREET'S OFFICES AND PROGRAMS AS WELL AS CITY OF PORTLAND AND OTHER AGENCY SPACE</u>		
Contractor's name, address & telephone: <u>WRIGHT-RYAN CONSTRUCTION, INC</u> <u>773-3625</u>		
Who should we contact when the permit is ready: <u>BILL ROWLES</u>		
Mailing address: <u>10 DANFORTH ST.</u> <u>Portland 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>773-3625</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: <u>Steph Schults</u> <u>AS AGENT FOR OWNER</u>	Date: <u>9.13.02</u>
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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 4th floor of City Hall

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

CONSTRUCTION PERMIT

Permit Number: 021059

Please Read
Application And
Notes, If Any,
Attached

This is to certify that Preble Street Resource Center WRIGHT CONSTRUCTION
has permission to Construct Office Space/Dental Clinic/Tenants Center
AT 343 Cumberland Ave L. 033 K004001

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.

Notification of inspection must
given and written permission procured
before this building or part thereof
labeled or closed-in.
HOURS NOTICE IS REQUIRED.

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

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

OTHER REQUIRED APPROVALS

Fire Dept. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature] 12/13/02
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Application Number **2-1059**

Department **Zoning**

Status **Approved with Conditions**

Author **Marge Schmuckal**

Address **343 Cumberland Ave**

Approval Date **09/24/2002**

Issue Date **09/18/2002**

Marge Schmuckal **09/24/2002**

[Redacted Section]

Created Date **09/17/2002** By **gad** Update Date **09/24/2002** By **mes**

DEPARTMENT DIRECTOR
Lee D. Urban



DIVISION DIRECTORS
Mark B. Adelson
Housing & Neighborhood Services

Alexander Q. Jaegerman
Planning

John N. Lufkin
Economic Development

DEPARTMENT OF PLANNING AND DEVELOPMENT

October 2, 2002
James Sterling
142 High St.
Portland, ME 04101

RE: Waiver Request 343 Cumberland Ave. (017 E015) Building Permit #020834

Dear James,

This office has reviewed your request dated 10/1/02, with regard to the fire separation distance for the proposed change of use for the Offices/Dental Clinic/Teen Center at the above location. The following are the facts:

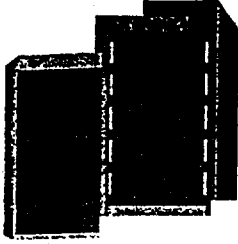
- 1) The subject structure is located on the interior property line.
- 2) There is a 12 foot easement on the abutting parcel that precludes development in this area.
- 3) The building is type 3B construction, Use Group B.
- 4) The Building is completely protected with an NFPA 13 System

The applicant requests that the City measure the fire separation distance to a line that is one half of the distance from the subject structure to the easterly easement limit on the abutting property. This distance is 6 feet.

Based on the above facts the City of Portland hereby grants the request based on the following conditions:
1)The openings on the east elevation must be limited to 25%. Because this is an NFPA 13 fire suppression system, the code considers the openings protected .

Sincerely,

Mike Nugent
Manager of Inspection Services



**CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Rm 315
Portland, ME 04101**

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Service

FROM: James Sterling Architect

RE: Certificate of Design

DATE: 09 September 2002

These plans and/or specifications covering construction work on:

343 Cumberland Ave.

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code/1999 Fourteenth Edition, and local amendments.

(SEAL)



Signature *James Sterling*

Title Architect

Firm James Sterling Architect

Address P.O. Box 7305, Portland, ME

04112

As per Maine State Law:

\$50,000.00 or more in new construction, repair, expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.



**CITY OF PORTLAND
ACCESSIBILITY CERTIFICATE**

Designer: James Sterling AIA

Address of Project 343 Cumberland Ave.

Nature of Project Renovation

Date 09 September 2002

The technical submissions covering the proposed construction work as described above have been have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act.

(SEAL)

Signature 

Title Architect

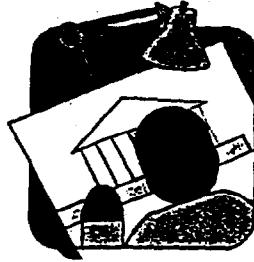
Firm James Sterling Architect

Address P.O. Box 7305

Portland, ME 04112

Telephone 772-0037





CITY OF PORTLAND MAINE

389 Congress St., Rm 315

Portland, ME 04101

Tel. - 207-874-8704

Fax - 207-874-8716

TO: Inspector of Buildings City of Portland, Maine
Planning & Urban Development
Division of Housing & Community Services

FROM DESIGNER: James Sterling Architect

142 High Street Portland

DATE: _____

Job Name: Casco Paper Box Building

Address of Construction: 343 Cumberland Ave.

THE BOCA NATIONAL BUILDING CODE/1999 Fourteenth EDITION

Construction project was designed according to the building code criteria listed below:

Building Code and Year 1999 Use Group Classification(s) B

Type of Construction 111(200) Bldg. Height 2 storey Bldg. Sq. Footage 22,000 +/-

Seismic Zone NA Group Class NA

Roof Snow Load Per Sq. Ft. NA Dead Load Per Sq. Ft. NA

Basic Wind Speed (mph) NA Effective Velocity Pressure Per Sq. Ft. NA

Floor Live Load Per Sq. Ft. 100 lbs/sf gross

Structure has full sprinkler system? Yes No Alarm System? Yes No

Sprinkler & Alarm systems must be installed according to BOCA and NFPA Standards with approval from the Portland Fire Department.

Is structure being considered unlimited area building: Yes No

If mixed use, what subsection of 313 is being considered NA

List Occupant loading for each room or space, designed into this Project.

PSH 6/07/2K



(Designers Stamp & Signature)

facsimile transmittal

To: James Sterling **From:** Mike Nugent
Fax: 773-8545 **Date:** September 30, 2002
Phone: **Pages:** 1
Re: 343 Cumberland Ave. (033-K004)

Urgent For Review Please Comment Please Reply Please Recycle

I have commenced the review of the above project and have the following questions:

- 1) Pursuant to Section 602, what type of construction is the building? *3B*
- 2) Please provide a code justification for the new windows on the East Side of the building, See Section 705 of the 1999 BOCA Code.
- 3) Please provide occupant loads for the communal room (102) and Preble St. room (139) *120*
250 150/PER.
- 4) Is a local Exhaust System required for the Kitchen? *YES*
- 5) Is a grease trap? ~~_____~~
- 6) Upper level, rooms 146, upper hall etc. seem to exceed the limitations of Section 1011.2 Dead Ends *✓*
- 7) Similarly on the Lower level, Is the "storage hall" an exit access?