Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

| Please Read<br>Application And | CITY                       | AND     | PERMIT ISSUED |            |       |                               |   |
|--------------------------------|----------------------------|---------|---------------|------------|-------|-------------------------------|---|
| Notes, If Any,<br>Attached     |                            | PERM    |               |            | nit N | imber: 071048<br>OCT - 5 2007 |   |
|                                | 54D - 18 LLC /Henckel Desi | and Fab |               |            |       | NET CONTRACT                  |   |
| has permission to              | Install a Hood System      |         |               |            | (     | CITY OF PORTLAND              | ) |
| AT 575 CONGRESS S              | ST                         |         |               | 037 A04500 | 1     |                               |   |

m or

ine and of the

tion

provided that the person or persons, of the provisions of the Statutes of I the construction, maintenance and u this department.

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

OTHER REQUIRED APPROVALS

N fication inspect in must generally and with permit on procuble rething ding or at thereoder the permit of the pe

of buildings and sa

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

epting this permit shall comply with all

ctures, and of the application on file in

ances of the City of Portland regulating

| Fire Dept. Crec CLARS |  |
|-----------------------|--|
| Health Dept.          |  |
| Appeal Board          |  |
| Other                 |  |

PENALTY FOR REMOVING THIS CARD



| City of Portland, Ma   | aine - Buil                      | ding or Use      | Permi                 | t Applicatio            | n Per  | mit No:           | Issue Date                  | :  | CBL:                  |                |
|--|----------------------------------|------------------|-----------------------|-------------------------|--|-------------------|-----------------------------|--|-----------------------|----------------|
| 389 Congress Street, 04  |                                  | •                |                       |                         | 1  | 07-1048           |                             |  | 037 AC                | 045001         |
| Location of Construction:  |                                  | Owner Name:      |                       |                         | Owner  | Address:          |                             |  | Phone:                |                |
| 575 CONGRESS ST 54D - 18   |                                  |                  | LLC                   |                         |  | 559 CONGRESS ST   |                             |  |                       |                |
| Business Name:   |                                  | Contractor Name  | :                     |                         | Contra   | ector Address:    |                             | <del></del>                                      | Phone                 |                |
|  |                                  | Henckel Desig    | n and F               | abrication              | 134 F  | Hartley Stree     | t Portland                  |  | 2073182               | 623            |
| Lessee/Buyer's Name  | Phone:                           |                  |                       | Permit Type:            |  |                   |                             | <del>-                                    </del> | Zone:                 |                |
|  |                                  |                  |                       | İ                       | Ноо  | d Systems, C      | Commerical                  |  |                       | B-30           |
| Past Use:  |                                  | Proposed Use:    |                       | <u> </u>                | Permi  | t Fee:            | Cost of Wor                 |  | CEO District:         |                |
| Commercial   | Commercial install a Hood System |                  |                       | \$6,706.00              |  |                   |                             | 1  |                       |                |
|  |                                  |                  | ,                     | FIRE DEPT: INS          |  |                   | INSPE                       | CTION:   | 1100                  |                |
|  |                                  |                  |                       |                         | 1  |                   | * -                         | Use Gr   | oup:A-2               | Type           |
|  |                                  |                  |                       |                         | 1  | L                 | Denied                      |  | 7, -                  | Hood           |
|  |                                  |                  |                       |                         | 1  | CPA               | 96                          | HOM  | oup:A-Z<br>C-2003     | * "            |
| Proposed Project Description   | :                                | <del></del>      |                       |                         | 1 ′  |                   | • •                         |  | 0                     | •              |
| Install a Hood System  |                                  |                  |                       |                         | Signati  | ure: Usca         | CARR                        | Signatu  | ire: MB 1             | 0/5/07         |
| }  |                                  |                  |                       |                         | PEDESTRIAN ACTIVITIES DISTRIC  Action: Approved Approved |                   |                             | TRICT (  | CT (P.A.D.)           |                |
|  |                                  |                  |                       |                         |  |                   |                             | nroved w   |                       |                |
|  |                                  |                  |                       |                         | Action   | г. [_] жүргө      |                             | proved w   | Conditions            | Demica         |
|  |                                  |                  |                       |                         | Signat   | ure:              |                             |  | Date: 6/2             | -9/0/          |
| Permit Taken By:   | Date A                           | pplied For:      |                       |                         |  | Zoning            | Ápprova                     | al   |                       | <del></del>    |
| dmartin  | 08/28                            | 3/2007           |                       |                         |  |                   |                             |  |                       |                |
| 1. This permit applicat  | ion does not                     | preclude the     | Spe                   | cial Zone or Revi       | ews  | ews Zoning Appeal |                             | ł  | Historic Preservation |                |
| Applicant(s) from m  | able State and                   |                  |                       | ☐ Variance              |  |                   | Not in District or Landmark |  |                       |                |
| Federal Rules.   |                                  |                  | 1                     |                         | 1  |                   |                             | 1  |                       |                |
| 2. Building permits do not include plumbing, septic or electrical work.  |                                  |                  | ☐ Wetland ☐ Miscellat |                         | aneous   |                   | Does Not Require Review     |  |                       |                |
| 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 |                                  |                  | Flood Zone            |                         |  | Conditional Use   |                             |  | Requires Review       |                |
|  |                                  |                  | Subdivision           |                         | Interpretation   |                   | 1                           | Approved   |                       |                |
| permit and stop all v  | -                                |                  | Subdivision           |                         | merpiciation   |                   |                             | Д Арргочец                                       |                       |                |
|  |                                  |                  | ∐ <sub>Si</sub>       | te Plan                 |  | Approve           | ed                          | 1  | Approved w            | /Conditions    |
|  |                                  |                  |                       |                         |  | ripprovi          |                             | {  |                       | ~              |
|  |                                  |                  | Maid                  | Minon MM                | ı 🗆 . 🖠  | Denied            |                             | 1  | Denie                 | )              |
| l PF   | RMIT ISS                         | SUED             |                       | with a                  | mW   | w                 |                             | }  |                       |                |
|  |                                  |                  | Date                  | 0 01                    | 4/2  | Date:             |                             | D  | vate:                 |                |
| 1 1 _  |                                  |                  | -                     | <del>&gt;&gt; 411</del> | 70   | -                 |                             |  | 7                     |                |
| 1 1 0  | ICT - 5 2                        | 2007             | •                     |                         | '' (   | '                 |                             |  |                       |                |
|  |                                  | 1 1              |                       |                         |  |                   |                             |  |                       |                |
| CITY   | OF POR                           | TLAND            |                       |                         |  |                   |                             |  |                       |                |
| LUIT   | UI I UII                         | ILMINO           |                       |                         |  |                   |                             |  |                       |                |
|  |                                  |                  | (                     | CERTIFICATI             | ON   |                   |                             |  |                       |                |
| I hereby certify that I am   | the owner of                     | record of the na | med pr                | operty, or that t       | he prop  | osed work is      | s authorized                | by the   | owner of reco         | rd and that    |
| I have been authorized by  | the owner to                     | o make this appl | ication               | as his authorize        | d agent  | and I agree       | to conform                  | to all a   | pplicable laws        | of this        |
| jurisdiction. In addition,   |                                  |                  |                       |                         |  |                   |                             |  |                       |                |
| shall have the authority to  | enter all are                    | as covered by si | ich peri              | nit at any reaso        | nable h  | our to entore     | ce the prov                 | ision of   | the code(s) ap        | oplicable to   |
| such permit.   |                                  |                  |                       |                         |  |                   |                             |  |                       |                |
|  |                                  |                  |                       |                         |  |                   |                             |  |                       |                |
| SIGNATURE OF APPLICANT   |                                  |                  |                       | ADDRESS                 |  | DATE              |                             | PHO  | ONE                   |                |
|  |                                  |                  |                       |                         |  |                   |                             |  |                       |                |
| DECDONCIDI E DEDCOM DI   | CHADGE OF "                      | VODE TITLE       |                       |                         |  |                   | DATE                        | <del></del>                                      | DIT                   | DNE            |
| RESPONSIBLE PERSON IN (  | LIANUE UP W                      | OKK, HILE        |                       |                         |  |                   | DAIL                        |  | rn                    | 71 <b>1</b> 11 |

| P                           | LUMBING A   | APPLICATION                 | NC          |  |  | Division of Health Engineering                            |  |  |  |
|-----------------------------|---|-----------------------------|-------------|--|--|---|--|--|--|
|                             | PROPERT   | Y ADDRESS                   |             |  |  |   |  |  |  |
| Town or<br>Plantation       |   |                             |             | _                                      | 2057-8237  |   |  |  |  |
| Street<br>Subdivision Lot # |   |                             |             | PORTL                                  | PORTLAND PERMIT # 10392 TOWN COPY  |   |  |  |  |
|                             | PROPERTY C  | WNERS NAME                  |             | Date   C   )                           | 01   | ©     /   |  |  |  |
| Last                        |   | First I                     |             | Issued:                                | <u> </u>   | FEE Charged   |  |  |  |
| Last: Applica               |   | First:                      |             | Local Plumbing inspect                 | or Signature   | L.P.I. # 0 17 1414  |  |  |  |
| Mailing Add<br>Owner/Ap     | dress of plicant  |                             |             | 7 37                                   |  |   |  |  |  |
| knowled                     | Owner/App<br>that the information sub-<br>lge and understand that<br>g Inspectors to deny a F | any falsification is reaso  |             | I have inspected the                   | e installation autho   | tion Required  orized above and found it to be in  Rules. |  |  |  |
|                             | Signature of Owner  | /Applicant                  | Da          | te Local Plumbing I                    | nspector Signature   | Date Approve  |  |  |  |
| G. P.                       |   | 1                           | PERM        | IIT INFORMATION                        |  |   |  |  |  |
| This Ap                     | plication is for  | Тур                         | e of Struct | ture To Be Served:                     | Plumbing To Be Installed By:   |   |  |  |  |
| 1. 🗆 NE                     | W PLUMBING  | 1.   SINGLE                 | FAMILY DW   | /ELLING                                | 1. ☑ MASTER PLUMBER  |   |  |  |  |
| 2. 🗆 RE                     | LOCATED<br>JMBING   | 2. □ MC                     | DDULAR O    | R MOBILE HOME                          | 2. □ OIL BURNERMAN 3. □ MEG'D HOUSING DEALER/MECHANIC  |   |  |  |  |
| , ,                         | SIVIBIING   |                             | E FAMILY [  |  | <ul> <li>3. ☐ MFG'D. HOUSING DEALER/MECHANIC</li> <li>4. ☐ PUBLIC UTILITY EMPLOYEE</li> <li>5. ☐ PROPERTY OWNER</li> </ul> |   |  |  |  |
|                             |   | 4. OTHER -                  | - SPECIFY   |  |  |   |  |  |  |
| L                           |   | <u> </u>                    |             |  | LICENSI  | <u> </u>  |  |  |  |
| Но                          | ok-Up & Piping Reloca<br>Maximum of 1 Hook-U  |                             | Number      | Column 2<br>Type of Fixture            | Number   | Column 1 Type of Fixture                                  |  |  |  |
|                             | HOOK-UP: to publi those cases where   |                             |             | Hosebibb / Sillcock                    | 1  | Bathtub (and Shower)                                      |  |  |  |
|                             | is not regulated and<br>the local Sanitary D  | d inspected by<br>District. |             | Floor Drain                            | 1  | Shower (Separate)   |  |  |  |
|                             | 0   | $\mathbf{R}$                | /           | Urinal                                 | 1.7  | Sink  |  |  |  |
|                             | HOOK-UP: to an exwastewater disposa   | kisting subsurface          |             | Drinking Fountain                      | 5  | Wash Basin  |  |  |  |
|                             |   |                             |             | Indirect Waste                         | 4  | Water Closet (Toilet)                                     |  |  |  |
|                             | PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.                |                             |             | Water Treatment Softener, Filter, etc. |  | Olothes Washer  |  |  |  |
|                             |   |                             | ,           | Grease / Oil Separator                 | 1 1000   | Dish Washer   |  |  |  |
|                             |   |                             |             | Dental Cuspidor SEP                    |  | Garbage Disposal  |  |  |  |
| Y                           | OR  |                             |             | Bidet                                  |  | Laundry Tub   |  |  |  |
|                             |   |                             |             | Other:                                 | ix   | Water Heater  |  |  |  |
| TAKE ME TO                  |   | ANSFER FEE [\$6.00]         |             | Fixtures (Subtotal) Column 2           |  | Fixtures (Subtotal) Column 1                              |  |  |  |
|                             | 1   |                             | Y           |  | <b>-</b>   | Fixtures (Subtotal) Column 2                              |  |  |  |
|                             | 15,54   |                             | MIT FEE S   | SCHEDULE                               | 28   | Total Fixtures  |  |  |  |
|                             |   |                             | ALCULAI     |  |  | Fixture Fee   |  |  |  |
|                             |   |                             |             |  |  | - Transfer Fee  |  |  |  |
|                             | 1 of 1<br>Rev. 7/04   |                             |             | TOWN COPY                              | 177  | Hook-Up & Relocation Fee<br>Permit Fee<br>(Total)         |  |  |  |