

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

Location of Construction: 477 Congress Street 2nd fl suite 200		Owner: Octobert Corp c/o Boulos Prop.	Phone: 871-1290	Permit No: 990770
Owner Address: One Canal Plaza		Lessee/Buyer's Name: WMTW Holding /Corp	Phone:	BusinessName:
Contractor Name: H.E. Callahan Const. Co.		Address: Turner Rd Auburn		Phone: 784-6927
Past Use:	Proposed Use:	COST OF WORK: \$ 19,850.	PERMIT FEE: \$144.00	Permit Issued: JUL 20 1999 Zone: CBL B-3 037-F-022 Zoning Approval: <i>[Signature]</i> 7/20/99 Special Zone or Reviews: <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"/>
Office	TV offices	FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: 0 Type: 201 <i>BOCA 96</i>	
Proposed Project Description: Construct. Steet support structure with a pipe grid to Support lights for television news set.		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Permit Taken By: SP		Date Applied For: July 15, 1999 K.		
		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		

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 provisions of the code(s) applicable to such permit

July 15, 1999 K.

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

SAM



10/22/99
completed?

ARC

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	R. ...
Street Subdivision Lot #	477 Congress

PROPERTY OWNERS NAME

Last: Cook First: SPY

Applicant Name: Auto temp

Mailing Address of Owner/Applicant (If Different):
11 L ... ME

[Handwritten signature and date]

Date Permit Issued: 13 10 4 10 21 \$ 616101 # Double Fee FEE Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 0640

037 F D A 2

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

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGL FAMILY ING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIFLE DWELLING 4. <input checked="" type="checkbox"/> - SPECIF <u>...</u>	Plumbing To Be Installed By: 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>18717</u>
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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
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb/ Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>1</u>	Sink
		Drinking Fountain		Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		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: _____	<u>1</u>	Water Heater
		Fixtures (Subtotal) Column 2	<u>10</u>	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			<u>10</u>	Fixtures (Subtotal) Column 2
			<u>60</u>	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street Subdivision Lot #	477 CALLESS ST.
PROPERTY OWNERS NAME	
OTTOBER DEKORATION	
Last:	First:
Applicant Name:	PHILIP MEYER
Mailing Address of Owner/Applicant (If Different)	11401 MECHANICAL SYSTEMS 194 HERRON RD HUBBARD, ME

PORTLAND
Date Permit Issued: 7/12/03
Local Plumbing Inspector Signature: *[Signature]*
7754 TOWN COPY
\$ 11.00 L.P.I. # 01124 Double Fee Charged
037 F022

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 Inspector 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

[Signature]
5/15/03

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type Of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>OFFICE</u> <u>ROY T. ETEADLT - MASTER NUMBER</u>	Plumbing To Be Installed By: 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>L 2580</u>
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	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
Hook-Up & Piping Relocation Maximum of 1 Hook-Up HOOK UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District OR HOOK-UP to an existing subsurface wastewater disposal system	1	Hosebibb / Sillcock	1	Bathtub (and Shower)
	1	Floor Drain	1	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	3.2	Wash Basin
		Indirect Waste	3.9	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures	1	Grease/Oil Separator	1	Dish Washer
	1	Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups & Relocations		Other	9	Water Heater
\$ Hook-Up & Relocation Fee	1	Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
		8.0	8.1	Total Fixtures
		\$ 7.00		Fixture Fee
		\$ 10.00		Hook-Up & Relocation Fee
		\$ 4.16		Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE