Form # P 04 DISPLAY THIS	CARD O	N PRINCIPAL	FRONTA	AGE OF	WORK	
Please Read Application And Notes, If Any,		F PORT		)		
Attached		PERIMA		Permit Numb	er: 080890	
This is to certify thatOLD_PORT_HOLD	DING CO C MA	RGARITAS MANAG	ENT	PER	INTIS LIED	
has permission to Interior Alterations	to includ eplac	ing ucness or, Insta	al <u>New Fire</u>	Door.		
AT 11 BROWN ST			. 037_100	2001		
provided that the person or per of the provisions of the Statu the construction, maintenance this department.	tes of <b>So</b> line	or and of the Charles buildings and	lances of t	he City of		Julating
Apply to Public Works for street line and grade if nature of work requires such information.		d ven permeon pr his ilding or int the preservice losed	roc d ere s -in 4	procured by	of occupancy owner before th nereof is occupie	is build-
OTHER REQUIRED APPROVALS						
Fire Dept				$\frown$	1	
Health Dept			$\sum$		' // .	1
Appeal Board			Ra	in the	the Sta	26 60
Other Department Name		(		Director - Building	& Inspection Services	2/3
	PENALTY F	OR REMOVING T	HIS CARD		/	1

Cit	y of Portland, Maine - Bui	ilding or Use	Permi	t Application	n Per	mit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871			6	08-0890			037 100	7001		
Location of Construction: Owner Name:				Owner Address:			Phone:			
11 BROWN ST OLD PORT HO		IOLDIN	DLDING CO LLC M 200 GRIFFIN RD S		STE 1		207-774-9398			
Business Name: Contractor Name				Contra	ctor Address:		_	Phone		
Margaritas Ma		anagement Group		200 C	Griffin Park, S	Suite 1 Ports	mouth	uth 6034308105		
Lessee/Buyer's Name Phone:				Permit Type: Alterations - Commercial					Zone: 3	
Past Use: Proposed Use:				Permit	t Fee:	Cost of Work	: CE	O District:	$\overline{1}$	
Co	mmercial Restaurant/Margaritas	Commercial				\$470.00	\$45,000	0.00	1	
	-		argaritas - Interior include Replacing , Installing New Fire		FIRE	DEPT:	Approved	INSPECTI	ON:	·
					- Approved			Use Group:	e Group: A=2 Type: IBC-2003 nature: MB 8 26 68	
		Door.			No Detuils		~			
		D001.					II			
Prop	posed Project Description:						-	$\sim$		d- dia
	erior Alterations to include Repla	cing Kitchen Flo	or, Installing New		Signature: Urea UASS Sign		Signature.	nature: MJ D 4008		
Fir	e Door.				PEDESTRIAN ACTIVITIES DISTRICT (P.4			RICT (P.A	D/ ·	'
			Action		Action: Approved Approved w/C		oved w/Con	/Conditions Denied		
					Signatu	ure:		Da	te:	
Perr		Applied For:				Zoning	Approval			
lm	nd 07/2	2/2008								
1.	This permit application does not	t preclude the	Spee	cial Zone or Revie	ws	Zoning	g Appeal		Historic Prese	rvation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			Variance			Not in District or Landmark		
<ol> <li>Building permits do not include plumbing,</li> </ol>		Wetland			Miscellaneous			Does Not Require Review		
septic or electrical work.										
3. Building permits are void if work is not started		Flood Zone			Conditional Use			Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work		Subdivision			Interpretation			Approved		
			Sit 🗌 Sit	e Plan		Approved	l		Approved w/C	Conditions
	AUG 2	L 2000	Maj [ Date: 0	i Minor MM	3/09	Denied		Date:	(2 qui	rest rest Fevre

#### 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

### BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY) to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X Underground electrical or plumbing inspection prior to pouring concrete X Final inspection required at completion of work. The Unit of the Insulation of Sheetrock

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO require a final inspection</u>.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Signature of Inspections Official

<u>1, e</u>

Date

City of Portland, Maine - Buil	lding or Use Permi	t		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (	207) 874-8703, Fax:	(207) 874	<b>1-8</b> 71	6 08-0890	07/21/2008	037 1007001		
Location of Construction:	Owner Name:			Owner Address:		Phone:		
11 BROWN ST	OLD PORT HOLDIN	OLD PORT HOLDING CO LLC M			STE 1	207-774-9398		
Business Name:	Contractor Name:			Contractor Address:		Phone		
	Margaritas Manageme	ent Group		200 Griffin Park, S	(603) 430-8105			
Lessee/Buyer's Name	Phone:			Permit Type:				
		Alterations			Commercial			
Proposed Use:		]	Propos	ed Project Description:				
Commercial Restaurant/Margaritas -		nclude	Interi	or Alterations to incl	ude Replacing Kitch	en Floor, Installing		
Replacing Kitchen Floor, Installing N	lew Fire Door.		New	Fire Door.				
Dept: Zoning Status: A	pproved	Rev	iewer	: Marge Schmucka	Approval Da	nte: 07/23/2008		
Note:						Ok to Issue: 🗹		
					······································			
Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 08/26/20					nte: 08/26/2008			
Note: Ok to Issue: 🗹								
1) Approval of license is subject to h	nealth inspections per th	e Food Co	ode.					
2) New restaurant, lounge or bar mu	st meet the requirement	s of the Ci	ty and	State Food Codes				
3) Equipment must be installed in co	ompliance with the man	ufacturer's	specif	ications				
<ol> <li>Separate permits are required for Separate plans may need to be sul</li> </ol>								
Dept: Fire Status: A	approved with Condition	ns <b>Rev</b>	iewer	: Capt Greg Cass	Approval Da	ite: 07/24/2008		
Note:				· · ·	••	Ok to Issue: 🗹		
1) No details provided for fire door	installation							
Install shall comply with NFPA 1								

#### Comments:

8/26/2008-jmb: Spoke with Tiger H. For details, missing legend for kitchen equipment, fire door and plumbing drain detail, he submitted, also got pdfs

# THE ACTION OF TH

## **General 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.

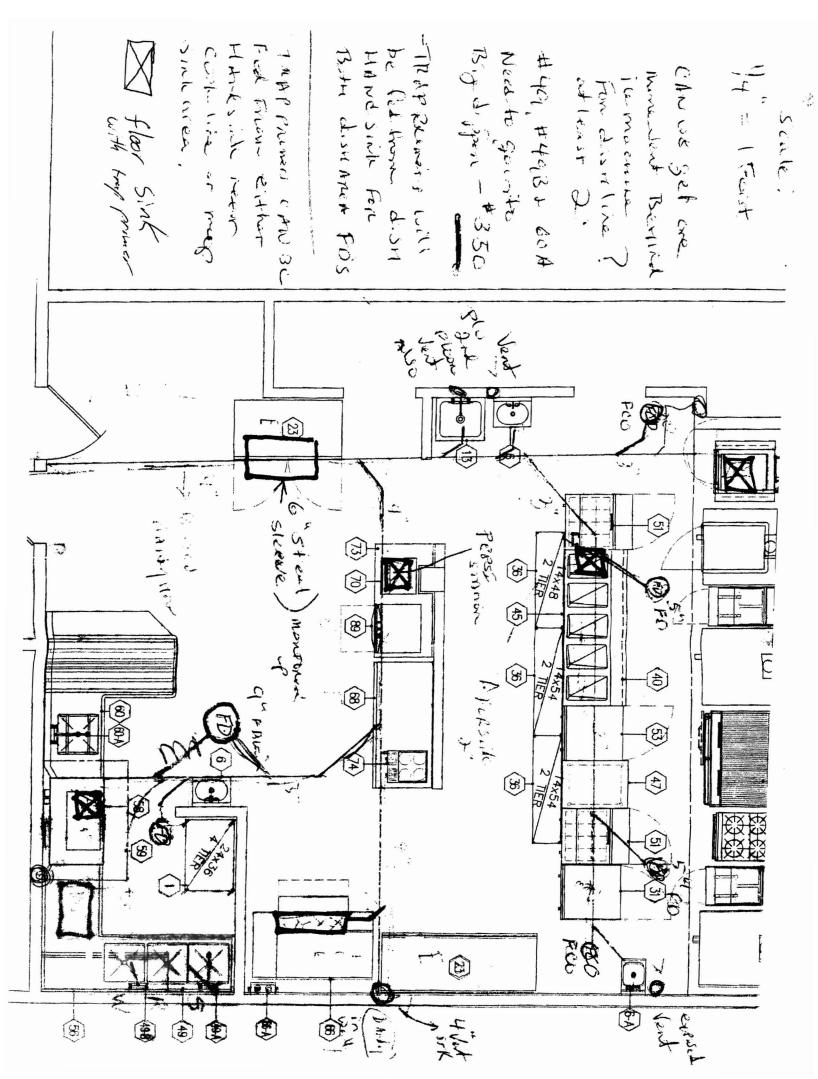
Location/Address of Construction: 11 B	rown st	
Total Square Footage of Proposed Structure/A 1 100 59 F4	rea Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant * <u>must</u> be owner, Lessee or Buye Name Poter Hertman Address 70 champlin Richt City, State & Zip Rochester NH 0386	603-828-2011 207-774-9398
Lessee/DBA (If Applicable) JUL 2 1 2008 Current legal use (i.e. single family) If vacant, what was the previous use?	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of <u>45</u> 000 <u>**</u> Work: <u>\$_</u> C of O Fee: <u>\$_</u> Total Fee: <u>\$_</u>
	If yes, please name and moving some e per f.re dept.	yujarent (Voesn't need)
Contractor's name: <u>Margaritas</u> Address: <u>200</u> <del>Later Criffer</del> City, State & Zip <u>Port Smowth</u> Who should we contact when the permit is read Mailing address: <u>Phartman Mara</u>	y: Tizer Hartman Te	elephone: <u>603 - 528-201</u> / elephone:

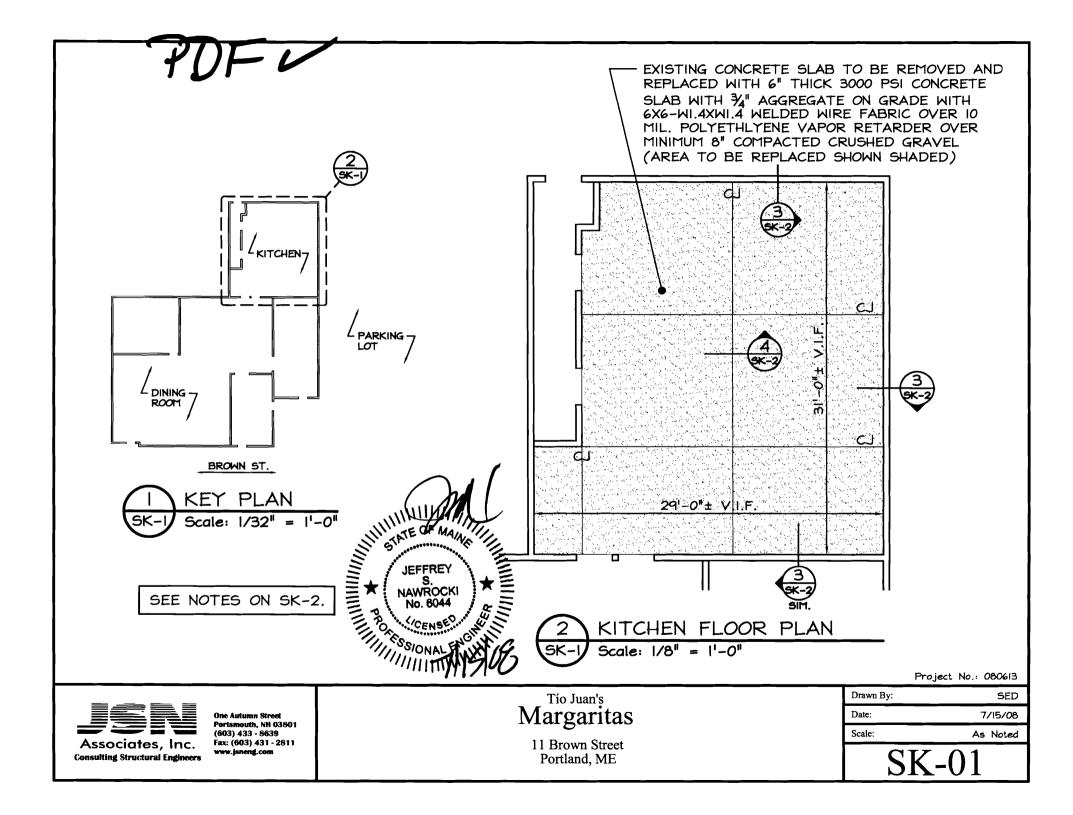
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

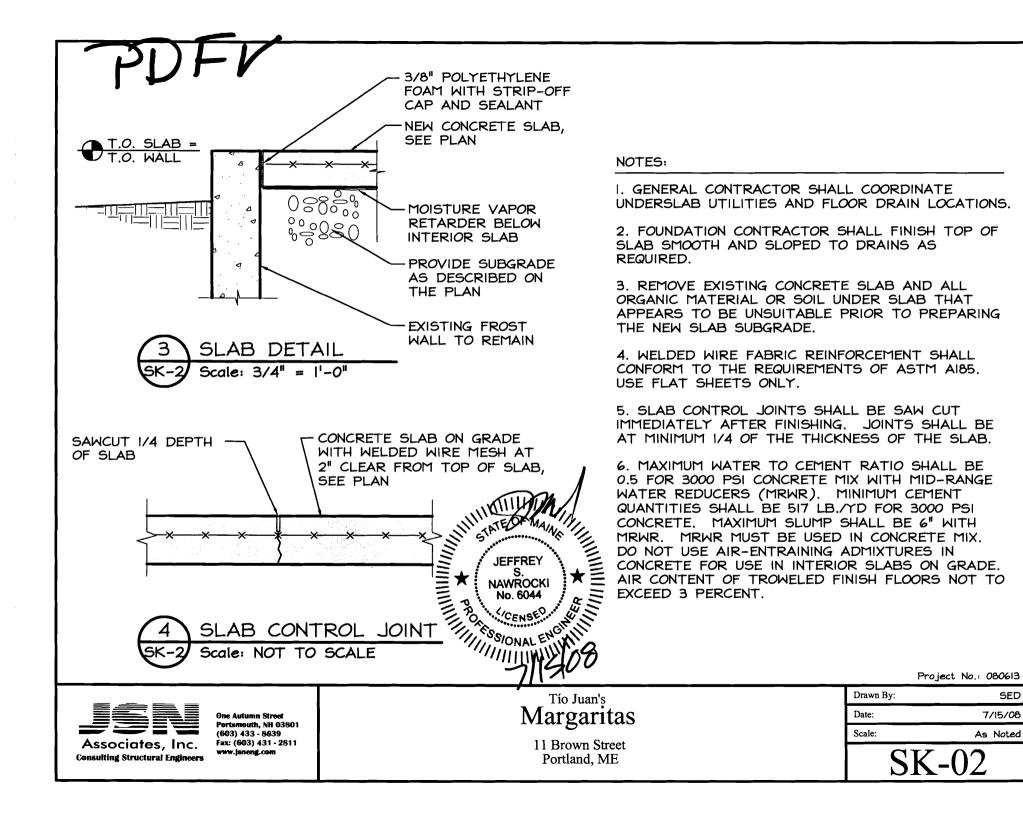
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: Date: This is not a permit; you may not commence ANY work until the permit is issue







SED

7/15/08