Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes. If Anv. Attached

RUIL DING INSPECTION

PERIVI

Permit Number: 050997

e of buildings and suctures, and of the application on file in

provided that th	ne person or persons	rm or	rpe	ion a	epting this p	ermit shal	l comply wit	h al
AT 122 Spring St				9	. 039 D00400	1 9007	O F SUA	
has permission to	tear down two chimneys to the	oof line		them to sa	dimensions			
This is to certify that	Aleshire Arthur A/Phoenix A	ciates				<u> </u>	SITY OF POR	<u>) </u>

of the provisions of the Statutes of Laine and or the Original ances of the City of Photographical ating the construction, maintenance and this department.

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

ficatio on mus I INSD. on proc n and w en perm ldina or rt there re this erwise bsed-in ed or JUIRED. UR NO

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

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. Appeal Board_____ Other Department Name

Oirector - Building & irector - Building & respection Services pection Services

PENALTY FOR REMOVING THIS CARD

Deruticate of Occupancy

LOCATION

122 Spring St

(039-D-004)

Issued to

Arthur A. Aleshire

Date of Issue

05 August 1998

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 980600 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

A DDD OVED OCCUPANCY

First Floor . Second & Third Floors

Mus um Dwa ling Unit

Limiting Conditions:

This certificate supersedes certificate issued

Approved:

Inspector

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

CERTIFICATION

tify 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 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, for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all ed by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

E OF APPLICANT

ADDRESS:

12 Hay 1998 DATE:

PHONE:

3LE PERSON IN CHARGE OF WORK, TITLE

PHONE:

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

4-8703, FAX; 874-8716

1	nit No: O ANAC	0
F	ERMIT ISSUEL)
Perr	it Issued: JM - 9 1998	
CI	TY OF PORTLA	ND

Zone:	CBL:	
4.0	·	

Zoning Approval:

Special Zone or Reviews: -

- □ Shoreland □ Wetland
- □ Flood Zone
- □ Subdivision
- ☐ Site Plan mai ☐minor ☐mm ☐

Zoning Appeal

EXISTING BUILDING

- □ Variance
- □ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- □ Approved
- ☐ Denied

Historic Preservation

- □ Not in District or Landmark
- ☐ Does Not Require Review
- ☐ Requires Review

Action:

- ☐ Appoved
- ☐ Approved with Conditions
- ☐ Denied

CEO DISTRICT



City of Portland,	Maine - Bu	ilding or I s e	Permi	it Applicatio	n Per	rmit No:	[]MYDI45	10d 30	極心		
389 Congress Street		0				05-0997			039	1	1001
Location of Construction:	,	Owner Name:				r Address:	1.00	. i 699	Phone		
122 Spring St		Aleshire Arth	ur A		31 T	enney Lr	Tuest Africa	* 1 (H	8	83	-114(
Business Name:		Contractor Name	:		Contr	actor Address:	La700	01 11116	Dhana		· · · · · · ·
		Phoenix Asso	ciates		POI	Box 349 Gr ^{ay}	CHED	SLLIM	201 23	3305 0	6
Lessee/Buyer's Name		Phone:				it Type:					1
					Alte	erations - Dupl	ex			<u> </u>	gone:
Past Use:		Proposed Use:		1	Perm	it Fee:	Cost of Work	c CE	O Distric	et:	_
1st floor: commercial retail museum - 2nd & 3rd floor: one dwelling unit 1st floor: commuseum -2nd dwelling unit		mercial	retail		\$75.00	\$5,70	0.00	2		l	
				FIRE	DEPT:	Approved	INSPECTI	ON:	7.		
				vo chimneys			Denied	Use Group:	se Group: B/K/C Type:		
		rebuilt to roof	line						•		
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		-							1	4	
					Signa			Signature:		\angle	
					PEDE	STRIAN ACTIV	ITIES DISTF	RICT (P.A.D	.) (
					Actio	n: Approve	d Appr	oved w/Con	ditions	\Box	enied
					C:	4		D	4	\smile	
D :: III D	In	l' l'E			Signa			Da	ite:		
Permit Taken By:		applied For: 20/2005				Zoning .	Approval	l			
jharris	07/2	.0/2003	Sne	ecial Zone or Revi	eure	Zoning	g Appeal	_ _	Historic	Preser	vation
			-		CWS		, appear				
			· Si	noreland		Variance			Not in D	istrict o	or Landmar
				etland		√ Miscellan	eous	-	Does No	t Requ	ire Review
							177				
			[[] F	oodZone		Condition	ai Use		Requires	Revie	W
			Sı	abdivision		Interpreta	tion		Approve	×d	
			l ¹Si	te Plan		[Approved		9	Approve	:d w/Co	nditions
			Maj [☐ Minor ☐ MM	(Denied			Denied	1	N
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				CERTIFICAT							
I hereby certify that I a											
that I have been authorhis jurisdiction. In ac											
representative shall ha											
code(s) applicable to s				1		•			1		
SIGNATURE OF APPLICA	ANT			ADDRES	SS		DATE		P	PHONE]
RESPONSIBLE PERSON 1	IN CHARGE OF V	VORK. TITLE					DATE		p	PHONE	,

8/12/05 Pre Con So offer W/Clacil Zegowas On Rm315 - Cleacured Historial Condition of Persons - & Required Angeston (2)

				Pe	ermit No:	PANDIAGO MED	DO SOLVEN)
389 Congress Street, 04	101 Tel: ((207) 874-8703	, Fax: (207)	874-8716	05-0997		039	3
Location of Construction:	<u></u>	Owner Name:	· · · · · · · · · · · · · · · · · · ·		r Address:	5002	O L 9 Phone	
122 Spring St		Aleshire Arth	ur A	31 7	Γenney Lr	2000	or only e	83-1146
Business Name:		Contractor Name	<u>.</u>	Conti	ractor Address:		Phone	
		Phoenix Assoc	ciates	PO	Box 349 Gray	PRINTED	SI LIWU Beet 2	330506
Lessee/Buyer's Name		Phone:		Perm	it Type:			Zone: 2
				Alt	erations - Dupl	lex		B-)
Past Use:		Proposed Use:		Perm	nit Fee:	Cost of Work:	CEO Distri	ct:
1st floor: commercial reta	ail	1st floor: com			\$75.00	\$5,700	0.00 2	
museum - 2nd & 3rd floor: one museum -2nd			I	· · · · · · · · · · · · · · · · · · ·	**	INSPECTION:	2/1)	
dwelling unit dwelling uni		rebuilt to roof		imneys	,) [4]	Denied	Use Group: B/R	Type:
		Tebuiit to 1001	IIIIe		III/A	-	•	. /
					\mathcal{V}/\mathcal{V}			//
Proposed Project Description:			1	ك [CA	-
tear down two chimneys dimensions	to the roof	line and rebuild t	them to same		ature: ESTRIAN ACTIV		Signature:	\
unitensions				redi	ESTRIANACTIV		\	
				Actio	on: Approve	d Appro	oved w/Conditions	Denied
				Signa	ature:		Date:	
Permit Taken By:	Date A	pplied For:			Zoning	Approval		
jharris	07/2	0/2005						
	-		Special Z	one or Reviews	Zoning	g Appeal	Historic	Preservation
			Shorelan	ad	☐ Variance		Not in I	District or Landmark
			Wetland		Miscellan	eous	Does No	ot Require Review
			Flood Zo	one	Condition	al Use.	Require	es Review
			Subdivis	ion	Interpretat	tion	Approve	ed
			Site Plan	ı	Approved		Approve	ed w/Conditions
			Maj Mi	nor MM T	~ Denied		Denied	Hod
			Josep.	2 = / 1/16	latar		Date:	
			Zaic.,	3 014703	late.		 	11.13
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							9	14/19
							q_l	
			CERT	TIFICATION				
I hereby certify that I am t								
that I have been authorize	-				•	-		
this jurisdiction. In additi representative shall have t								
code(s) applicable to such		, to enter an area	us covered by	sach permit at	arry reasonable	Thou to cli	roree are provis	Ton or the
SIGNATUREOF APPLICANT				ADDRESS		DATE	F	PHONE

City of Portland, Maine - Building or Use Permit			Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716			05-0997	0712012005	039 D004001
ocation of Construction:	Owner Name:	(Owner Address:		Phone:
122 Spring St	Aleshire Arthur A		31 Tenney Ln		
Lusiness Name:	Contractor Name:	(Contractor Address:		Phone
	Phoenix Associates		PO Box 349 Gray		(207) 233-0506
.essee/Buyer's Name	Phone:	I	ermit Type:		
		L	Alterations - Duple	ex	
'roposed Use:		Proposed	Project Description:		
1st floor: commercial retail mu unit with two chimneys rebuil	useum -2nd & 3rd floor: one dwe t to roof line	elling tear do dimens	•	o the roof line and re	build them to same
Dept: Historical Sta	tus: Approved with Conditions	Reviewer:	Deborah Andrews	* *	te: 08/04/2005 Ok to Issue: 🗹
* Applicant to contact His continue until staff okays the contact of the contact of the continue until staff okays the continue until staff okays the contact of the c	toric Preservation staff to inspec	et the work upon	completion of 4-5	courses of brickwork	x. Work shall not
Dept: Zoning Sta	tus: Approved with Conditions	Reviewer:	Marge Schmucka	Approval Da	te: 08/04/2005
and one dwelling unit with both the owner ar 8/4/05 Owner left mes who didn't realize the	sage concerning the use which n importance of the use	nit says that this	is a two family. I le	eft voice messages	Ok to Issue:
1) Separate permits shall be re	equired for future decks, sheds, p	pools, and/or ga	rages.		
	or an additional dwelling unit. Yes stoves, microwaves, refrigerate				including, but
	a commercial/retail/museum on quire a separate permit application			dwelling on the 2nd	& 3rd floors.
4) This permit is being approved work.	ved on the basis of plans submitt	ted. Any deviat	ions shall require a	separate approval be	fore starting that
Dept: Building Sta	tus: Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	te: 08/10/2005
Note:			-		Ok to Issue: 🗹
Permit approved based on noted on plans.	the plans submitted and reviewed	d w/owner/contr	actor, with addition	nal information as ag	reed on and as



•	,	aine - Building or Use Permi		Permit No:	Date Applied For:	CBL:
		4101 Tel: (207) 874-8703, Fax: ((207) 874-871	6 05-0997	07/20/2005	039 D004001
	on of Construction:	Owner Name:		Owner Address:		Phone:
	Spring St	Aleshire Arthur A		31 Tenney Ln		
Lusine	ss Name:	Contractor Name:		Contractor Address:		Phone
	Buyer's Name	Phoenix Associates		PO Box 349 Gray Permit Type:		(207) 233-0506
ressee/	buyer s Name	Phone:		Alterations - Dup	lev	
1	sed Use:		ln.	ed Project Description:		
1st flo		ail museum -2nd & 3rd floor: one dy rebuilt to roof line	velling tear o	•		rebuild them to same
Dept Note	: Historical	Status: Approved with Condition	ns Reviewer	: Deborah Andrew	Approval D	Pate: 08/04/2005 Ok to Issue: □
e? *	kisting concrete, are Flashing to be cop	per. ct Historic Preservation staff to inspe	-		-	
_	and one dwelling	Status: Approved with Condition in hold - the last two permits show the gunit on the 2nd &3rd floor. The permer and contractor.	at the legal app		use on the first floor	
		It message concerning the use which e the importance of the use	matched the pro	evious permit - talke	ed with contractor	
1) Se	eparate permits shal	l be required for future decks, sheds	, pools, and/or g	garages.		
		oval for an additional dwelling unit. uch as stoves, microwaves, refrigera				nt including, but
		main a commercial/retail/museum or all require a separate permit applicat			y dwelling on the 2n	d & 3rd floors.
	his permit is being a ork.	approved on the basis of plans submi	tted. Any devia	ations shall require a	separate approval b	pefore starting that
Dept	Building	Status: Approved with Condition	Reviewer	Tammy Munson	Approval D	oate: 08/10/2005
Note	:					Ok to Issue:
	ermit approved base oted on plans.	ed on the plans submitted and review	ed w/owner/cor	tractor, with addition	onal information as a	greed on and as

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 **d** any kind are accepted.

the City, payment arrangements r	must be mad	ac before permits at any ki	nua	пе ассерієсі.
Location/Address of Construction:	-3 3	PAINA STAR	e-/	_
Total Square Footage of Proposed Structur	re	Square Footage of Lot		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# ()39 9 004	Owner:	uz Allahine		Telephone:
Lessee/Buyer's Name (If Applicable) Applicant name, address & cost Of Work: \$ 5 3 37				
If the location is currently vacant, what was prior use: Approximately how long has it been vacant: Proposed use: Paper Beport work is to lear fown Beth Chimneys To Project description: Contractor's name, address & telephone: Nho should we contact when the permit is ready: Me will contact you by phone when the permit is ready. You must come in and pick up the permit and eview 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 STATE OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.		up the permit and order will be Issued		

ente	or all areas	
Signature of applicant:	MAD Kapping	Date: 7-20-05

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 4th floor of City Hall

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

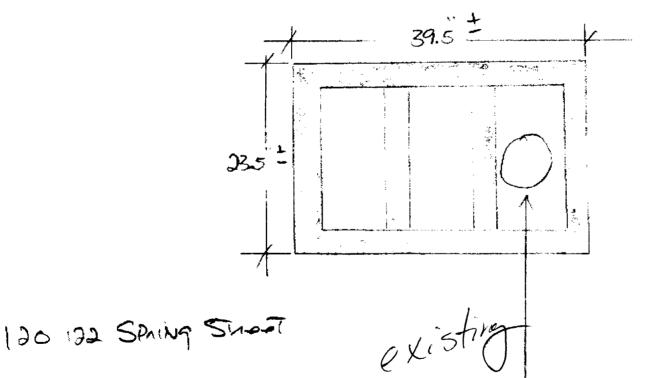
The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

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	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electri	cal: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.
phase, REGARDLESS OF THE NOTICE	Occupancy. All projects DO require a final cur, the project cannot go on to the next E OR CIRCUMSTANCES. ES MUST BE ISSUED AND PAID FOR, PIED 8-12-05 Date 8/12/05 Date Date
<u> </u>	

Chimney @ Roan of house

Plan wiew



Metai

Flux Lines

From: PRIONA ASSOCIATES

TO: TAMM / MUNSON

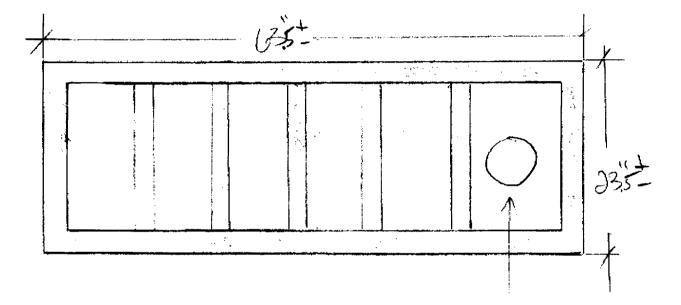
8-10-05

Chimney @ Front of house

Plan Urow

COMMUNICATION No:6

AUG. 10 '05 (THU) 08:28



120 122 SPAINS STREET

TO: TAMM! MUNSON

From: PHOONIX ASSOCIATES

8-10-05

existing.

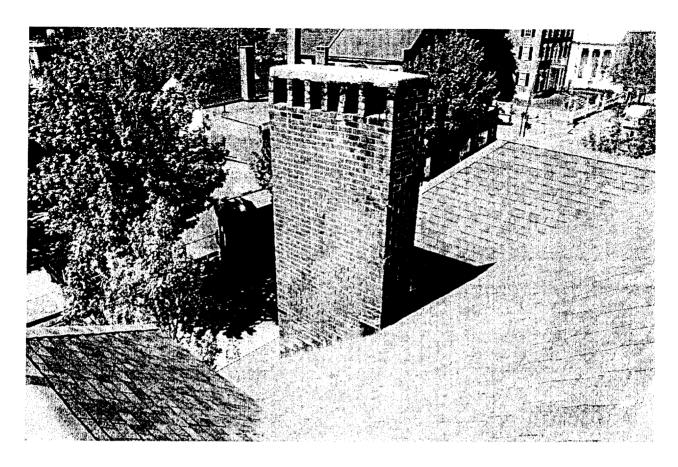
Metal Tlue Lines

874 8716



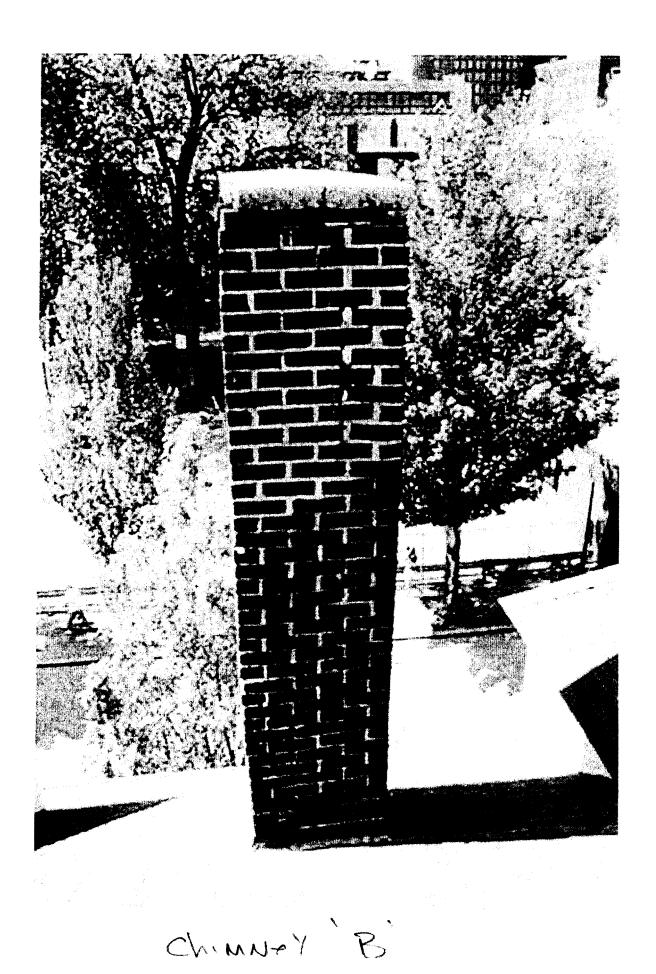
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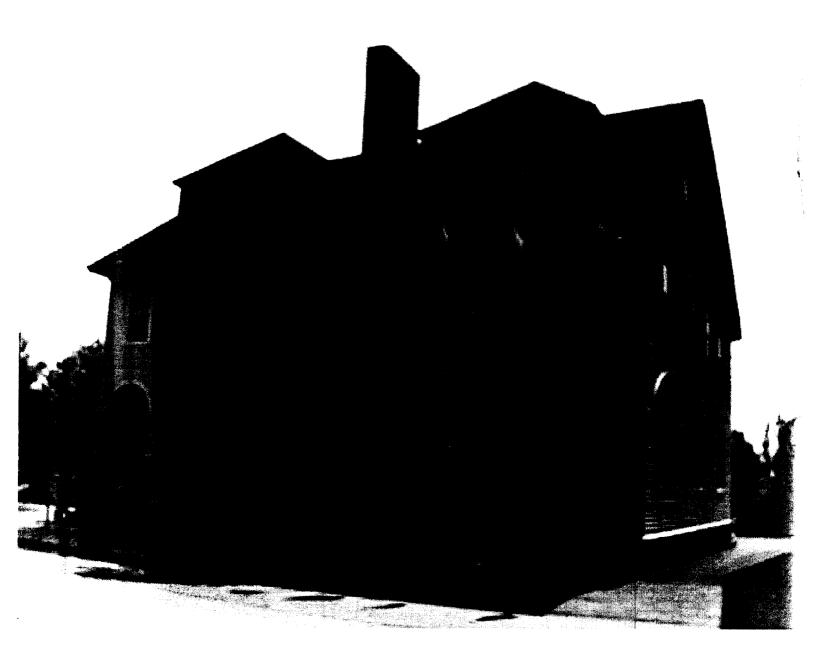


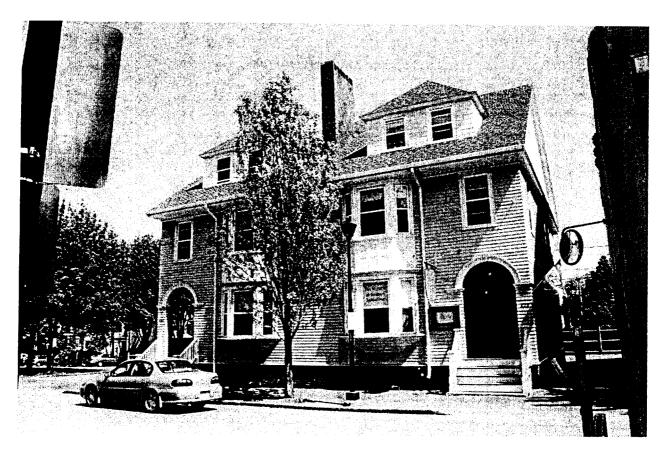
Chimnel, B.

916



Chimney 'B'

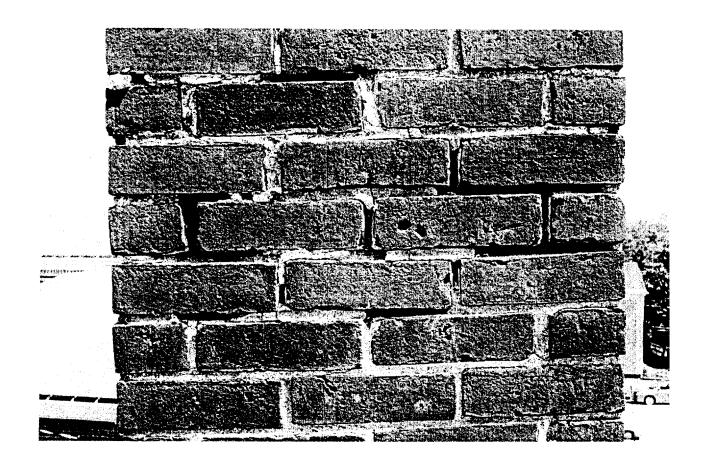




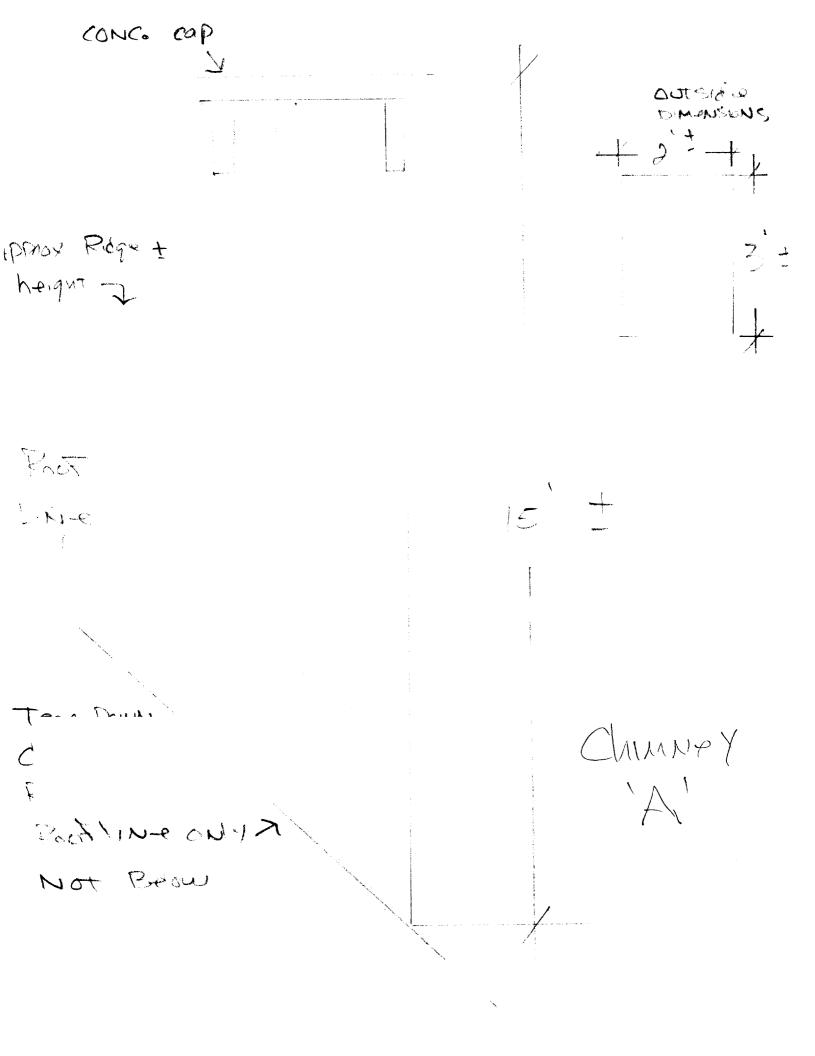


Chimney K





Chimney L



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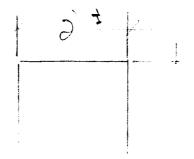
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CITY OF PORTLAND, MAINE

Department of Building Inspections

Received from	
Location of Work	
Cost of Construction Permit Fee	\$
Building (IL) Plun	nbing (I5) Electrical (I2) Site Plan (U2)
Other	
CBL: 7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	<u>1</u>
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