Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BECTION

Attached	PERMIT	Permit Number: 080400333ED
This is to certify thatBROWNE INTERNATION	CORP (GPM Construction, spices	
has permission toNo changes to kitchen walls	dd partii upsta, nd add a ndow.	MAY 2.6 2000
AT _260 COMMERCIAL ST		15001 OFF OF DO STIAND
provided that the person or persons,	m or a septing this	s permit shall comply with all

ne and of the

of buildings and s

provided that the person or persons, of the provisions of the Statutes of It the construction, maintenance and uthis department.

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

ication inspet n must g and with n permis in procure this to ding or the thereoded or dispersion in the control of the control

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

ances of the City of Portland regulating

ctures, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept. Chean Class
Health Dept.

Amusal Danud

Appeal Board

Other _____ Department Name

Occupante Stark

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application			· •			CBL:			
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716			6 08-0400			041 A015001			
Location of Construction:	I			er Address:		P	hone:		
260 COMMERCIAL ST BROWNE INTERNATIO		IONAL CO	260 COMMERCIAL ST					<u> </u>	
Business Name:	Contractor Name			Contractor Address:			Phone		
	CRM Construc	ction, Serv				2076507860			
Lessee/Buyer's Name	Phone:		Permit Type: Ame work		ut		Zone: WCZ		
Past Use: Proposed Use:						Cost of Work:		District:	7
Commercial - Amend permit #08- 0082		or work m	nove lunch	FIR	\$30.00 RE DEPT:	Approved [PECTION Groups		Type:76
Proposed Project Description: 2nd floor work to move luncadd a window.	chroom to rear - Add par	rtition ups		PED	ion: Approve	VITIES DISTRICT	w/Condi	t	5/22/6
				Signature: Date:					
Permit Taken By:	Date Applied For:	ŀ		Zoning Approval					
lmd 04/22/2008			Special Zone or Reviews Zoning Appeal		Anneal	Historic Preservation			
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance				et or Landman	
 Building permits do not include plumbing, septic or electrical work. 		Wetland		Miscellaneous		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 permit and stop all work		Flood Zone Subdivision		Conditional Use		∫ R	equires Rev	iew	
				Interpretation		A	Approved		
		Site I	Plan		Approved	i	A	pproved w/	Conditions
Figure 1800-10		Maj Minor MM Date: Conductor			Denied Date:		Date:	enied	\geq
Chr Ch			951	(9)	708				
en e	and the second s	CE	RTIFICATIO	ON					
hereby certify that I am the o	wher of record of the na				onosed work is	authorized by th	ne owne	r of recor	d and that

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

City of Portland, Maine - Buil	ding or Use Permit			Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (2	207) 874-8 703, Fax: (2	207) 874-	8716	08-0400	04/22/2008	041 A015001
Location of Construction:	Owner Name:		0	wner Address:		Phone:
260 COMMERCIAL ST	AL ST BROWNE INTERNATIONAL CO 20			260 COMMERCIAL ST		
Business Name:	Contractor Name: Co		Contractor Address:		Phone	
	CRM Construction, Services, Inc. 94		94 Washington Street Auburn		(207) 650-7860	
Lessee/Buyer's Name	Phone:		P	ermit Type:	nendm	
Proposed Use:		P	roposed	Project Description:		
Commercial - Amend permit #08-008	82 - 2nd floor work move	e	2nd flo	oor work to move l	unchroom to rear - A	Add partition upstairs
lunch room to rear. Add partition and	l add a window.	a	nd add	l a window.		
Dept: Zoning Status: A	pproved with Conditions	s Revi	ewer:	Marge Schmucka	l Approval Da	ite: 05/08/2008
Note:						Ok to Issue: 🔽
1) This permit is being approved on work.	the basis of plans submit	tted. Any	deviati	ons shall require a	separate approval be	efore starting that
Dept: Building Status: A	pproved with Conditions	s Revi	ewer:	Jeanine Bourke	Approval Da	ate: 05/22/2008
Note:	••				••	Ok to Issue:
1) All penetratios through rated asse ASTM 814 or UL 1479, per IBC	•	l by an app	roved	firestop system ins	stalled as tested in ac	cordance with
2) All previous conditions remain in	effect					
Dept: Fire Status: A Note: 1) Review emergancy lights and exit	pproved with Conditions	s Revi	ewer:	Capt Greg Cass	Approval Da	nte: 05/20/2008 Ok to Issue: ✓
2) Details and seperate permit requir	red for fire escape.					

Comments:

5/8/2008-mes: The front staff originally had information on the permit about a "restaurant". I spoke to Bob and there is no restaurant - I revised the permit to reflect the actual work.

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.

Total Square Footage of Proposed Structure,	Area Square Footage of Lot	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Bu	uyer* Telephone:	
Chart# Block# Lot#	Name		
	Address		
	City, State & Zip		
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of	
	Name	Work: \$	
	Address	C of O Fee: \$	
· · · · · · · · · · · · · · · · · · ·	City, State & Zip	Total Fee: \$	
Current legal use (i.e. single family)			
If vacant, what was the previous use?			
Proposed Specific use:	If yes, please name		
Project description:	en (remove) - NO WALL	2300A43	
	1 dows		
ADD regotains partition		Heor WALL (hA	
Contractor's name: R. M. Con	vi han hio a	•	
Contractor's name: R. M. Con	vi han hio a	•	
Contractor's name: R. M. Con Address: Gy Was Way For City, State & Zip An Sun M	St. much		
Project description: Change wall For Hitcher ADD reportains pantition Contractor's name: Address: Gy Was Way for City, State & Zip Andrew Who should we contact when the permit is re	St. much		

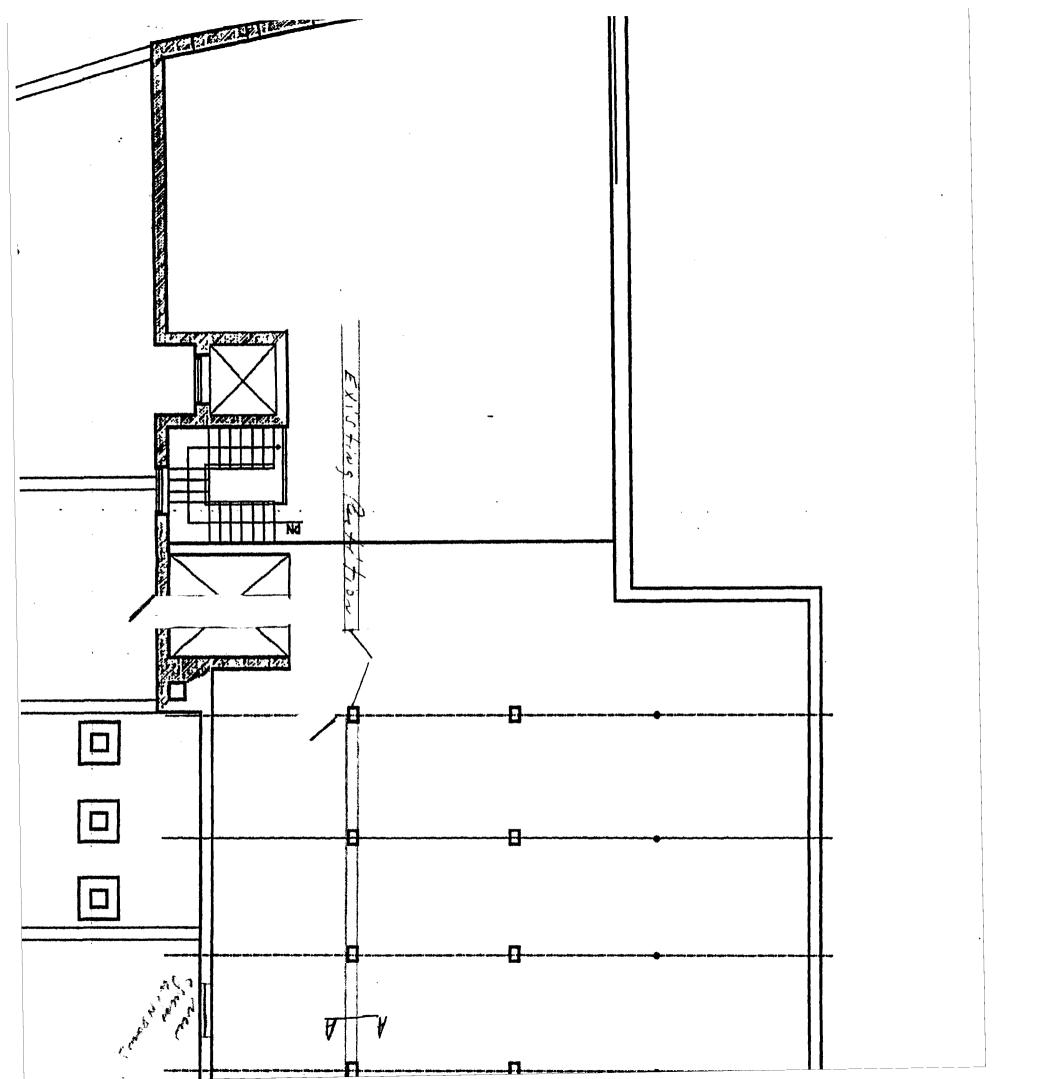
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 www.portlandmaine.gov, 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:	his	Date:	4-22-68	

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



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