

Official Use Only	DW#	Date Issued	Exp. Date	Cr. #	Amount Rec.
60253					

207-287-5671

**STATE OF MAINE
DEPARTMENT OF HEALTH & HUMAN SERVICES
HEALTH INSPECTION PROGRAM LICENSE APPLICATION**

RECEIVED

1. License Category (Check one):

- New Establishment Change of Ownership Remodeling Converting
 Expanding: seating sites rooms

042 D004

MAR 14 2008

2. Establishment Information:

Establishment Name Becky's Diner Seasonal Year round
Location: (street, road) 390 Commercial St City/Town Portland, Me
Phone # 207 7737070 FAX # 207 7752425 E-mail dinergirl6@hotmail.com

HEALTH INSPECTION PROGRAM

3. License Type: [Check the one(s) that fit the best.]

- | | | |
|---|--|--|
| <input type="checkbox"/> Adult Recreational Camp | <input type="checkbox"/> Eating Place plus Lodging | <input type="checkbox"/> School Feeding / Catering |
| <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> Eating Place Mobile | <input type="checkbox"/> Sr. Citizen Meal Satellite |
| <input type="checkbox"/> Bottle Club | <input type="checkbox"/> Eating Place Takeout | <input type="checkbox"/> Sr. Citizen Meal Commissary |
| <input type="checkbox"/> Campground | <input type="checkbox"/> Eating Place / Vending Machine | <input type="checkbox"/> Soup Kitchen |
| <input type="checkbox"/> Catering Establishment | <input type="checkbox"/> Jails (Correctional Facilities) | <input type="checkbox"/> Temporary Food Service |
| <input type="checkbox"/> Cottages | <input type="checkbox"/> Lodging Place | <input type="checkbox"/> Trip & Travel Youth Camp |
| <input type="checkbox"/> Day Youth Camp | <input type="checkbox"/> Residential Youth Camp | <input type="checkbox"/> Vending Machine |
| <input checked="" type="checkbox"/> Eating Place | <input type="checkbox"/> School Feeding Satellite | <input type="checkbox"/> Vending Machine Commissary |
| <input type="checkbox"/> Eating Place and Caterer | <input type="checkbox"/> School Feeding | <input type="checkbox"/> Vending Machine Location |

Number: Seats 99 Camping Sites _____ Rooms _____ Cottages _____ Campers: Boys _____ Girls _____ Staff _____

NOTE: Eating Places located in Portland, South Portland, Lewiston, and Auburn only pay a flat fee of \$60.00.

4. Business Owner Information: Please print clearly: Association Corporation, LLC Individual Partnership

Name Rebecca B. Rand Contact Person's Name Rebecca B. Rand Contact Phone # 207 7737070

Employer Identification Number (EIN) 01-0462409 Social Security Number (SS#) 004-56-9476

(SS # not required, collected on a voluntary basis)

5. Mailing Address for License & Renewal Notices:

Street 390 Commercial St City Portland State Maine ZIP 04101

6. Previous Owner's Information:

Former Owner's Name _____ Former Business Name _____

7. Signatures:

Applicant's Signature Rebecca B. Rand Print Rebecca B. Rand

Date of Application 2-22-08 Planned Opening Date _____

8. Does water come from an on site source: (Well, spring, surface water) Yes No

If yes, please contact the Drinking Water Program at: 207-287-7690, for further information and requirements, and refer to the form titled "Water Testing Requirements for Licensed Establishments"

9. Is Wastewater disposal to a private system: (Not maintained by a municipality) Yes No

If yes, please contact the Subsurface Wastewater Program at: 207-287-5672, for further information and requirements, and refer to the form entitled "Septic Review Requirements for an Eating and Lodging License"

**PLEASE ALLOW 30 DAYS FOR PROCESSING.
MAKE CHECKS PAYABLE TO TREASURER, STATE OF MAINE, AND REFER TO FEE SCHEDULE ON PAGE 4.**

Eating Place Business Plan for Review

Please complete the table below by filling in the blanks, and placing a check mark where applicable to your business plan.

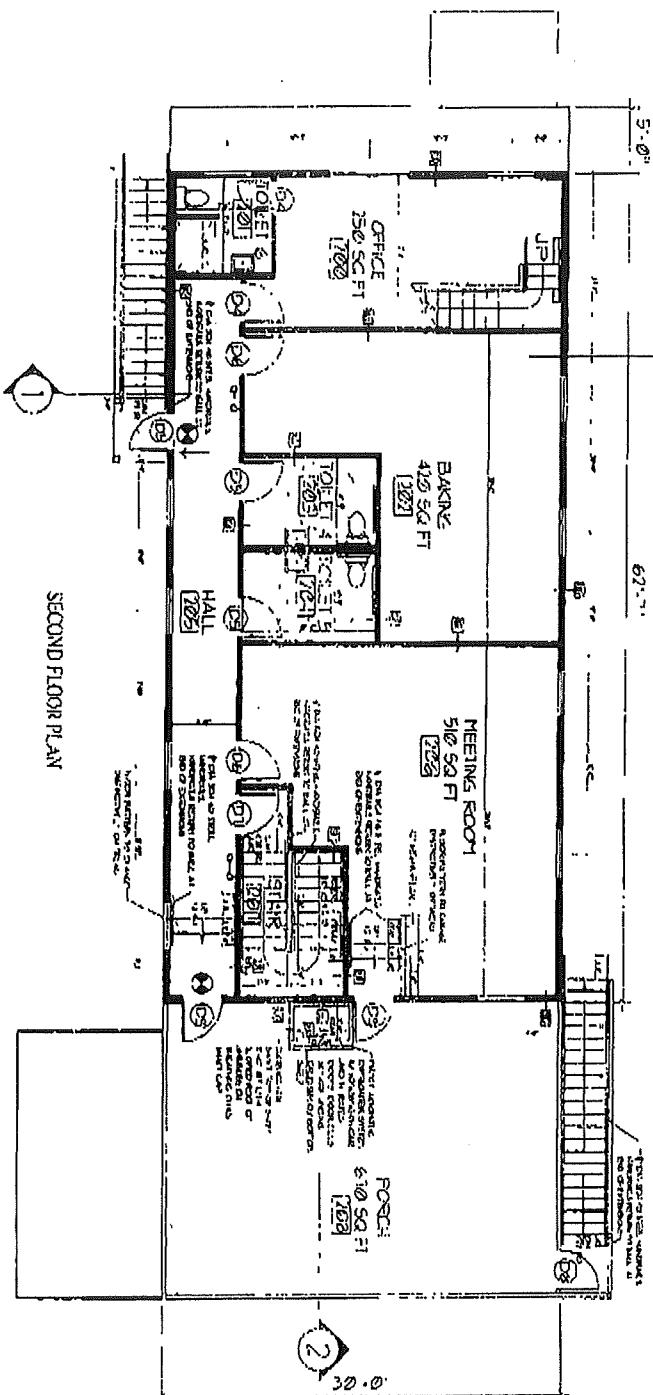
Please provide a menu or draft menu

COLD STORAGE		PROPOSED OPERATING HOURS		SERVICE PROVIDED		
Walk-in Cooler	<input checked="" type="checkbox"/>	Sunday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Take-out	<input checked="" type="checkbox"/>
Reach-in Refrigerator	<input checked="" type="checkbox"/>	Monday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Buffet	
Closed Display Refrigerator	<input checked="" type="checkbox"/>	Tuesday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Sit-Down	<input checked="" type="checkbox"/>
Open Display Refrigerator		Wednesday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Delivery	
Refrigerated Buffet Unit		Thursday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Window	
Beverage Cooler	<input checked="" type="checkbox"/>	Friday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Catering	
Refrigerated Food Prep. Unit	<input checked="" type="checkbox"/>	Saturday:	4 ^{AM} / _{PM}	9 ^{AM} / _{PM}	Other	
Rapid Pull-down Refrigerator		KITCHEN EQUIPMENT & SINKS		TOILET FACILITIES		
Walk-in Freezer	<input checked="" type="checkbox"/>	Ice Machine(s)		<input checked="" type="checkbox"/>	Number of Fixtures:	
Reach-in Freezer	<input checked="" type="checkbox"/>	Warewashing Sink(s) with 3 basins		<input checked="" type="checkbox"/>	Men's Bathroom	2
Closed Display Freezer		Warewashing Sink(s) with 2 basins			Water Closets	2
Open Display Freezer		Hand washing Sink(s)		<input checked="" type="checkbox"/>	Urinals	
Freezer Buffet Unit		Utility Sink(s)		<input checked="" type="checkbox"/>	Lavatories	2
Other		Food Prep Sink(s)		<input checked="" type="checkbox"/>		
DRY STORAGE		LIQUOR SERVICE				
Metal Shelves	<input checked="" type="checkbox"/>	Beer		<input checked="" type="checkbox"/>	Women's Bathroom	2
Wooden Shelves		Wine		<input checked="" type="checkbox"/>	Water Closets	2
Plastic Shelves		Mixed Drinks			Lavatories	2
Cabinets		Other				
Bins (food grade)	<input checked="" type="checkbox"/>				Employee Bathroom	
Barrels (food grade)					Water Closets	1
Bulk					Urinals	
Pallets					Lavatories	1
Other					Other (describe)	

CERTIFIED FOOD HANDLERS

Name:	Certificate Date:
Name:	Certificate Date:
Name:	Certificate Date:
Name:	Certificate Date:
Name:	Certificate Date:

Additional Information:

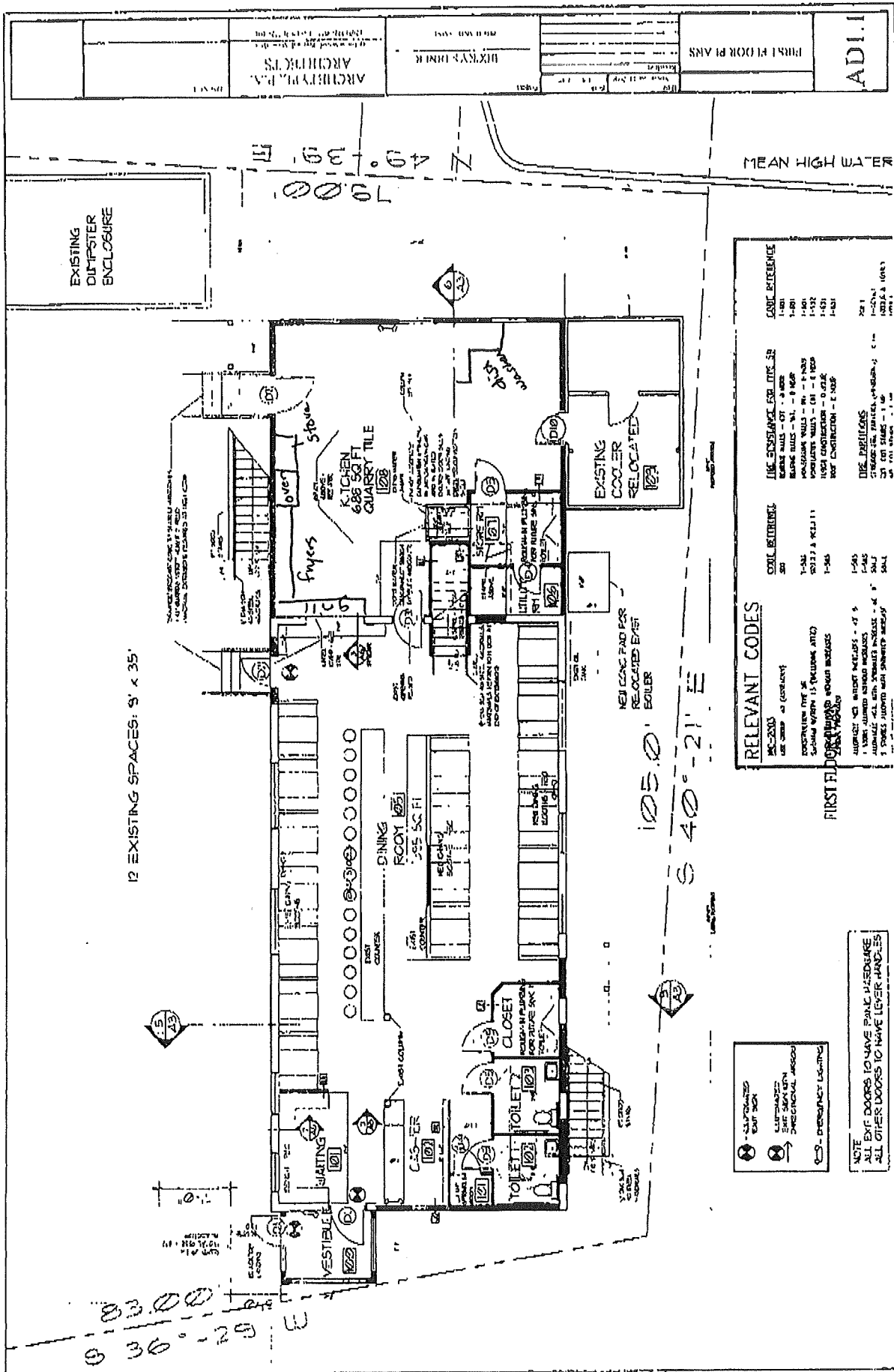


SECOND FLOOR PLAN

	ILLUMINATED EXIT SIGN
	ILLUMINATED EXIT SIGN WITH DIRECTIONAL ARROWS
	EMERGENCY LIGHTING

NOTE:
ALL EXIT DOORS TO HAVE PANIC HARDWARE
ALL OTHER DOORS TO HAVE LEVER HANDLES

AD1.2	SECOND FLOOR PLAN	DATE: 11.15.11	BY: BURKS DESIGN	ARCHETYPE P.A. ARCHITECTS	NO. 100



FIRST FLOOR PLANS

HEXLEY BIRN

ARCHITECTS

DESIGN

AD-1.1

RELEVANT CODES

ME-2003	ME-2003 - 4.0.1.1	ME-2003 - 4.0.1.1.1	ME-2003 - 4.0.1.1.2	ME-2003 - 4.0.1.1.3	ME-2003 - 4.0.1.1.4	ME-2003 - 4.0.1.1.5	ME-2003 - 4.0.1.1.6	ME-2003 - 4.0.1.1.7	ME-2003 - 4.0.1.1.8	ME-2003 - 4.0.1.1.9	ME-2003 - 4.0.1.1.10	ME-2003 - 4.0.1.1.11	ME-2003 - 4.0.1.1.12	ME-2003 - 4.0.1.1.13	ME-2003 - 4.0.1.1.14	ME-2003 - 4.0.1.1.15	ME-2003 - 4.0.1.1.16	ME-2003 - 4.0.1.1.17	ME-2003 - 4.0.1.1.18	ME-2003 - 4.0.1.1.19	ME-2003 - 4.0.1.1.20	ME-2003 - 4.0.1.1.21	ME-2003 - 4.0.1.1.22	ME-2003 - 4.0.1.1.23	ME-2003 - 4.0.1.1.24	ME-2003 - 4.0.1.1.25	ME-2003 - 4.0.1.1.26	ME-2003 - 4.0.1.1.27	ME-2003 - 4.0.1.1.28	ME-2003 - 4.0.1.1.29	ME-2003 - 4.0.1.1.30	ME-2003 - 4.0.1.1.31	ME-2003 - 4.0.1.1.32	ME-2003 - 4.0.1.1.33	ME-2003 - 4.0.1.1.34	ME-2003 - 4.0.1.1.35	ME-2003 - 4.0.1.1.36	ME-2003 - 4.0.1.1.37	ME-2003 - 4.0.1.1.38	ME-2003 - 4.0.1.1.39	ME-2003 - 4.0.1.1.40	ME-2003 - 4.0.1.1.41	ME-2003 - 4.0.1.1.42	ME-2003 - 4.0.1.1.43	ME-2003 - 4.0.1.1.44	ME-2003 - 4.0.1.1.45	ME-2003 - 4.0.1.1.46	ME-2003 - 4.0.1.1.47	ME-2003 - 4.0.1.1.48	ME-2003 - 4.0.1.1.49	ME-2003 - 4.0.1.1.50	ME-2003 - 4.0.1.1.51	ME-2003 - 4.0.1.1.52	ME-2003 - 4.0.1.1.53	ME-2003 - 4.0.1.1.54	ME-2003 - 4.0.1.1.55	ME-2003 - 4.0.1.1.56	ME-2003 - 4.0.1.1.57	ME-2003 - 4.0.1.1.58	ME-2003 - 4.0.1.1.59	ME-2003 - 4.0.1.1.60	ME-2003 - 4.0.1.1.61	ME-2003 - 4.0.1.1.62	ME-2003 - 4.0.1.1.63	ME-2003 - 4.0.1.1.64	ME-2003 - 4.0.1.1.65	ME-2003 - 4.0.1.1.66	ME-2003 - 4.0.1.1.67	ME-2003 - 4.0.1.1.68	ME-2003 - 4.0.1.1.69	ME-2003 - 4.0.1.1.70	ME-2003 - 4.0.1.1.71	ME-2003 - 4.0.1.1.72	ME-2003 - 4.0.1.1.73	ME-2003 - 4.0.1.1.74	ME-2003 - 4.0.1.1.75	ME-2003 - 4.0.1.1.76	ME-2003 - 4.0.1.1.77	ME-2003 - 4.0.1.1.78	ME-2003 - 4.0.1.1.79	ME-2003 - 4.0.1.1.80	ME-2003 - 4.0.1.1.81	ME-2003 - 4.0.1.1.82	ME-2003 - 4.0.1.1.83	ME-2003 - 4.0.1.1.84	ME-2003 - 4.0.1.1.85	ME-2003 - 4.0.1.1.86	ME-2003 - 4.0.1.1.87	ME-2003 - 4.0.1.1.88	ME-2003 - 4.0.1.1.89	ME-2003 - 4.0.1.1.90	ME-2003 - 4.0.1.1.91	ME-2003 - 4.0.1.1.92	ME-2003 - 4.0.1.1.93	ME-2003 - 4.0.1.1.94	ME-2003 - 4.0.1.1.95	ME-2003 - 4.0.1.1.96	ME-2003 - 4.0.1.1.97	ME-2003 - 4.0.1.1.98	ME-2003 - 4.0.1.1.99	ME-2003 - 4.0.1.1.100
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NOTE

ALL EYE DOORS TO HAVE PANE GLASSAGE

ALL OTHER DOORS TO HAVE LEVER HANDLES