

240111

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$30.60 Zone _____ Map # _____ Lot # _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Peter Williamson Phone # _____
Leasee: Million Dollar Store 171 York St 04102 775-4404

LOCATION OF CONSTRUCTION 171 York St

Contractor: Sign Design Sub: _____
Address: UI# 295433 Phone # _____

Dist. Construction Cost: _____
Proposed Use: Store w/sign
Past Use: Store

of Existing Rear Units _____ # of New Rear Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____
Is Proposed Use: Seasonal Condominium Conversion _____
Explain Conversion: Erect Lighted Sign as per Plans

Foundations:
1. Type of Soil: _____
2. Set Backs - Front: _____ Rear: _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other: _____

Floor:
1. Sills Size: _____ Sills must be anchored
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____
5. Bridging Type: _____ Size: _____ Spacing If O.C. _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:
1. Studding Size: _____ Spacing: _____
2. No. windows: _____
3. No. Doors: _____
4. Header Sizes: _____
5. Bracing: Yes _____ No _____ Spacing: _____
6. Corner Posts Size: _____
7. Insulation Type: _____
8. Sheathing Type: _____ Size: _____
9. Siding Type: _____
10. Masonry Materials: _____
11. Metal Materials: _____
Interior Walls:
1. Studding Size: _____ Spacing: _____
2. Header Sizes: _____
3. Wall Covering Type: _____
4. Fire Wall if required: _____
5. Other Materials: _____

Roof:
1. Truss or Rafter Size: _____
2. Sheathing Type: _____
3. Roof Covering Type: _____
4. Insulation Type: _____
5. Ceiling Height: _____

Chimneys:
Type: _____
Number of Fire Places: _____

Heating:
Type of Heat: _____
Service Entrance Size: _____
Smoke Detector Required: Yes _____ No _____

Electrical:
Plumbing:
1. Approval of soil test if required: Yes _____ No _____
2. No. of Tubes or Showers: _____
3. No. of Finishes: _____
4. No. of Lavatories: _____
5. No. of Other Fixtures: _____

Swimming Pools:
1. Type: _____
2. Pool Size: _____ Square Footage: _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Gresik
Signature of Applicant Paul Gaudett Date 18 Feb 94
CEO's District _____

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO IBMB MASSON

White - Tax Assessor

For Official Use Only
Date: 18 Feb 94
Inside Fire Limits: _____
Bldg Code: _____
Time Limit: _____
Estimated Cost: _____
CITY OF PORTLAND
PERMIT ISSUED
FEB 21 1994

Review Required: _____
Zoning Board Approval: Yes _____ No _____
Planning Board Approval: Yes _____ No _____
Conditional Use: _____
Shoreland Zoning: Yes _____ No _____
Special Exception: _____
Other (Explain): _____
Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____
Zoning: _____
Historic Preservation: _____

Ceiling:
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size: _____
3. Type Ceilings: _____
4. Insulation Type: _____
5. Ceiling Height: _____

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