

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

**PERMIT ISSUED**

Permit No: 02-1058	Issue Date: OCT 28 2002	CBL: 044 G005001
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Location of Construction: 71 State St	Owner Name: Seventy-five State St	Owner Address: 75 State St	Phone: 772-2675
Business Name:	Contractor Name: WRIGHT RYAN CONSTRUCTIO	Contractor Address: 10 DANFORTH STREET Portland	Phone: 2077733625
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Commercial	Zone: R-6

Past Use: Elderly Housing/ Dining Area	Proposed Use: Elderly Housing/ Dining Area/Exercise Room/Movie Theater	Permit Fee: \$1,598.00	Cost of Work: \$225,000.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: I-1 Type: 2A 10/25/02	

Proposed Project Description: Renovate Dining Room, Addition of Movie Theater and Exercise Room	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: gad	Date Applied For: 09/16/2002	<b>Zoning Approval</b>		
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>9/19/02</i></p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p><b>Historic Preservation</b></p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p><i>Any Exterior work requires a separate review</i></p> <p>Date:</p>
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**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 \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ DATE \_\_\_\_\_ PHONE \_\_\_\_\_

07-1258

# 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 of any kind are accepted.

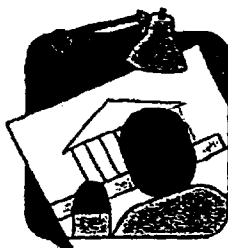
Location/Address of Construction: <u>71/75 STATE STREET, PORTLAND</u>		
Total Square Footage of Proposed Structure <u>4300 S/F RENOVATION</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>044</u> Block# <u>6</u> Lot# <u>005</u>	Owner: <u>SEVENTY FIVE STATE STREET</u>	Telephone: <u>772-2675</u>
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: <u>WRIGHT-RYAN CONST. 10 DAWFORTH ST PORTLAND ME</u>	Cost Of Work: \$ <u>225,000.-</u> Fee: \$ <u>1598</u>
Current use: <u>DINING Room</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>DINING Room</u>		
Project description: <u>DINING Room RENOVATION ADD THEATER + EXERCISE Room</u>		
Contractor's name, address & telephone: <u>PETER HABER e WRIGHT-RYAN CONSTRUCTION 773-3625</u>		
Who should we contact when the permit is ready: <u>PETER HABER</u>		
Mailing address: <u>10 DAWFORTH ST. PORTLAND, ME</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review 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: <u>773-3625</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant: <u>P. Haber</u>	Date: <u>9.16.02</u>
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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 4<sup>th</sup> floor of City Hall



ATTENTION: MIKE  
NUGENT

### CITY OF PORTLAND MAINE

389 Congress St., Rm 315  
Portland, ME 04101  
Tel. - 207-874-8704  
Fax - 207-874-8716

TO: Inspector of Buildings City of Portland, Maine  
Planning & Urban Development  
Division of Housing & Community Services

FROM DESIGNER: RAUDE W. GRAY  
GAWRON ARCHITECTS

DATE: 10/21/02

Job Name: SOUTH COMMONS DINING ROOM RENOVATION

Address of Construction: 75 STATE ST., PORTLAND, ME

THE BOCA NATIONAL BUILDING CODE/1999 Fourteenth EDITION  
Construction project was designed according to the building code criteria listed below:

Building Code and Year \_\_\_\_\_ Use Group Classification(s) RES. CARE I  
PROTECTED, NON COMBUSTIBLE  
Type of Construction TYPE II Bldg. Height N/A Bldg. Sq. Footage N/A  
Seismic Zone N/A Group Class N/A  
Roof Snow Load Per Sq. Ft. N/A Dead Load Per Sq. Ft. N/A  
Basic Wind Speed (mph) N/A Effective Velocity Pressure Per Sq. Ft. N/A  
Floor Live Load Per Sq. Ft. N/A

Structure has full sprinkler system? Yes  No \_\_\_\_\_ Alarm System? Yes  No \_\_\_\_\_  
Sprinkler & Alarm systems must be installed according to BOCA and NFPA Standards with approval from the Portland Fire Department.

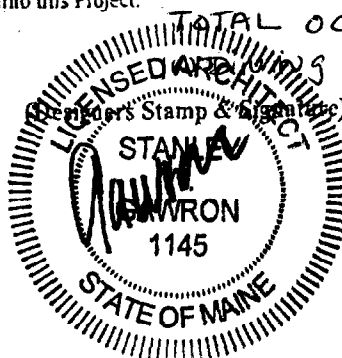
Is structure being considered unlimited area building: Yes No N/A

If mixed use, what subsection of 313 is being considered ALL-ASSEMBLY AREA

List Occupant loading for each room or space, designed into this Project.

TOTAL OCCUPANCY - 99  
32 - MOVIE  
THEATRE

PSH 6/07/2K



# 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.

JMS **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. ~~Joe Reynolds~~, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

N/A **Footing/Building Location Inspection:** Prior to pouring concrete

N/A **Re-Bar Schedule Inspection:** Prior to pouring concrete

N/A **Foundation Inspection:** Prior to placing ANY backfill

JMS **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

JMS **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.  
*pay at time of pickup*

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

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

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

[Signature]  
Signature of applicant/designee

10/28/2005  
Date

[Signature]  
Signature of Inspections Official

10/28/02  
Date

CBL: 0446003 Building Permit #: 021058



**CITY OF PORTLAND  
ACCESSIBILITY CERTIFICATE**

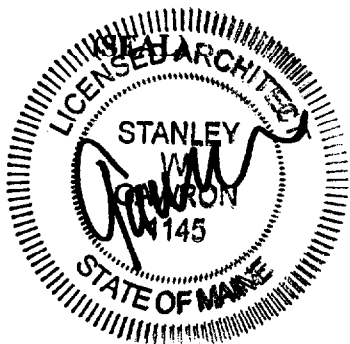
Designer: RANDY W. GRAY

Address of Project 75 STATE STREET

Nature of Project RENOVATION OF  
DINING ROOM

Date 10/21/02

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act.



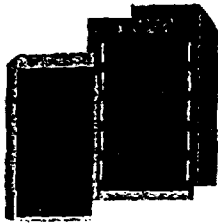
Signature Stan Gauron

Title Architect

Firm Gauron Architects

Address Scarborough, Me

Telephone 883.6307



CITY OF PORTLAND  
BUILDING CODE CERTIFICATE  
389 Congress St., Rm 315  
Portland, ME 04101

TO: Inspector of Buildings City of Portland, Maine  
Department of Planning & Urban Development  
Division of Housing & Community Service

FROM: RADE W. GRAY / GAWRON ARCHITECTS

RE: Certificate of Design

DATE: 10/21/02

These plans and/or specifications covering construction work on:

COSMETIC CHANGES + RENOVATIONS TO SOUTH Commons

DINING Room Space, BATHROOMS, LOBBY. NO STRUCTURAL CHANGES, WILL OCCUR

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code/1999 Fourteenth Edition and local amendments.



Signature Stan Gawron  
Title Architect  
Firm Gawron Architects  
Address Scarborough, ME

As per Maine State Law:

\$50,000.00 or more in new construction, repair, expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

## PERMIT

Permit Number: 021058

Please Read Application And Notes, If Any, Attached

This is to certify that Seventy-five State St/WRIGLEY RYAN CONSTRUCTION  
has permission to Renovate Dining Room, Addition of Men's Theater and Exercise Room  
AT 71 State St L 044 G005001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission is procured before this building or part thereof is laid or closed-in. HEAVY NOTICE IS REQUIRED.

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

**OTHER REQUIRED APPROVALS**

Fire Dept. AMV  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*[Signature]*  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**