

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

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

Permit No: 01-0955	Issue Date:	CBL: 045 E038001
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Location of Construction: 181 Brackett St	Owner Name: Portland West Neighborhood	Owner Address: 155 Brackett St	Phone: 207-775-0105
Business Name: n/a	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Additions - Commercial	Zone: B-1

Past Use: Commercial / Business	Proposed Use: Commercial / Business; Construct second floor above the existing block masonry addition. Install elevator & improve life safety existing conditions.	Permit Fee: \$1,476.00	Cost of Work: \$242,000.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B PERMIT ISSUED WITH REQUIREMENTS 8/23/01	

Proposed Project Description: Construct second floor & install elevator.  <i>3rd floor shall remain vacant until conditions are met</i>	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: gg	Date Applied For: 08/03/2001	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i># 2001-0023</i> Maj <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/> Date: <i>OK with conditions 8/23/01</i>	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>Reviewed by Bill N.</i> Date: _____
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**PERMIT ISSUED WITH REQUIREMENTS**

**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

7- JT. McDougal and I have talked a number of times  
to the professional designer on this project. J/

8/23/02 Framing OK. J/



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 181 Brackett St

CBL 045 E038001

Issued to Portland West Neighborhood/no contractor/self

Date of Issue 12/10/2003

**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. 01-0955 , 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

2nd Floor Renovation

APPROVED OCCUPANCY

Office Space  
BOCA 1999  
Use Group B  
Type 3B

**Limiting Conditions:**

None

This certificate supersedes  
certificate issued

Approved:

12/10/03 *[Signature]*  
\_\_\_\_\_  
(Date) Inspector

*[Signature]*  
\_\_\_\_\_  
Inspector of Buildings

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.

010955  
**ELECTRICAL PERMIT**  
**City of Portland, Me.**



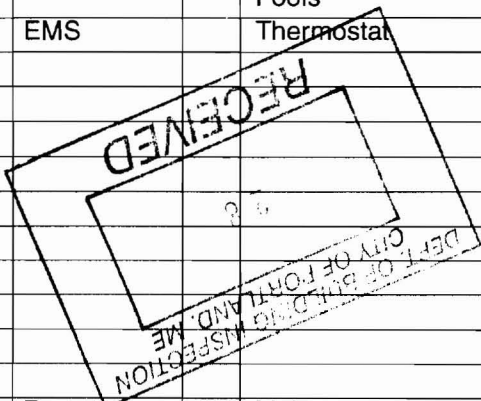
To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 2-28-05  
 Permit # 5005-4177  
 CBL# 45238

LOCATION: 181 BRACKETT ST METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER CITY OF PORTLAND  
 TENANT PORTLAND WEST PHONE # 225-0105

**TOTAL EACH FEE**

<b>OUTLETS</b>	10	Receptacles	4	Switches		Smoke Detector	.20	2.50
<b>FIXTURES</b>	4	Incandescent		Fluorescent		Strips	.20	.80
<b>SERVICES</b>		Overhead		Underground		TTL AMPS <800	15.00	
		Overhead		Underground		>800	25.00	
<b>Temporary Service</b>		Overhead		Underground		TTL AMPS	25.00	
							25.00	
<b>METERS</b>		(number of)					1.00	
<b>MOTORS</b>	1	(number of)					2.00	2.00
<b>RESID/COM</b>		Electric units					1.00	
<b>HEATING</b>		oil/gas units		Interior		Exterior	5.00	
<b>APPLIANCES</b>		Ranges		Cook Tops		Wall Ovens	2.00	
		Insta-Hot		Water heaters		Fans	2.00	
		Dryers		Disposals		Dishwasher	2.00	
		Compactors		Spa		Washing Machine	2.00	
		Others (denote)					2.00	
<b>MISC. (number of)</b>		Air Cond/win					3.00	
		Air Cond/cent				Pools	10.00	
		HVAC		EMS		Thermostat	5.00	
		Signs					10.00	
		Alarms/res					5.00	
		Alarms/com					15.00	
		Heavy Duty(CRKT)					2.00	
		Circus/Carnv					25.00	
		Alterations					5.00	
		Fire Repairs					15.00	
		E Lights					1.00	
		E Generators					20.00	
<b>PANELS</b>		Service		Remote		Main	4.00	
<b>TRANSFORMER</b>		0-25 Kva					5.00	
		25-200 Kva					8.00	
		Over 200 Kva					10.00	
						<b>TOTAL AMOUNT DUE</b>		560
		<b>MINIMUM FEE/COMMERCIAL</b>	<b>45.00</b>			<b>MINIMUM FEE</b>	<b>35.00</b>	<del>35.00</del>



CONTRACTORS NAME DANIEL MERCHANT MASTER LIC. # 60014285  
 ADDRESS 100 SABBADY POINT RD. WINDHAM 04092 LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 838-5243

SIGNATURE OF CONTRACTOR Daniel Merchant 1851  
 1852  
 White Copy - Office • Yellow Copy - Applicant

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

## PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

2005 8176

PORTLAND PERMIT # 9396 TOWN COPY

Date Permit Issued: 05/17/05 \$ 1,240.00  If Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

45 838

## Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

## Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner/Applicant

Date

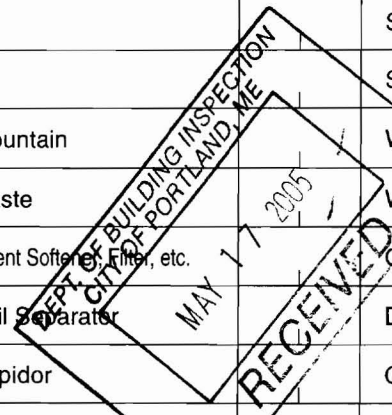
Local Plumbing Inspector Signature

Date Approved

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY _____	<b>Plumbing To Be Installed By:</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # _____
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal		Sink
		Drinking Fountain		Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste		Water Closet (Toilet)
OR		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
OR		Other: _____		Water Heater
	TRANSFER FEE [\$6.00]			
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>



SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE