Form # P 04 DISPLAY THIS CA	RD ON PRINCIPAL FRONTAGE OF WORK
Please Read Application And Notes, If Any,	PLUE DING INCRECTION
Attached This is to certify that FACTORS FINANCIAL	
has permission to Change of use from office	PERMITISSUED
AT 685 CONGRESS ST	JAN 2 5 2007
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	of mine and of the Printances of the City of Portland regulating
Apply to Public Works for street line and grade if nature of work requires such information.	A certificate of occupancy must be pream and view permition proceed bore this aliding or pirt there is led or permition osed-in 4 UR NO
OTHER REQUIRED APPROVALS Fire Dept Health Dept	
Other Department Name	Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 07-0006 047 C034001 Location of Construction: Owner Name: Owner Address: Phone: 685 CONORESS ST FACTORS FINANCIAL FRC INC P0 B0X 7002 Phone: Business Name: Contractor Name: Contractor Address: Phone: Jay Villani 43 Clark St Portland 2072723004 Lesse/Buyer's Name Phone: 2072723004 Past Use: Proposed Use: Permit Type: Cost of Work: Commercial - office Restaurant- Change of use from office to Restaurant- build ADA bathrooms Permit Fee: Cost of Work: CEO District: IS 2_1 Proposed Project Description: Change of use from office to Restaurant- build ADA bathrooms Signature: Cost of Work: Signature: Mb 1/25/6 T Permit Taken By: Date Applied For: Ot/02/2007 Zoning Approved Not in District or Landmar federal Rules. 1. This permit applicable State and Federal Rules. Shoreland Variance Mot in District or Landmar for the district reservation federal Rules. 2. Building permits do not include plumbing, septic or electrical work. Shoreland Miscellaneous Does Not Require Revi	City of Portland, M	aine - Buil	ding or Use I	Permit	Applicatior	Per	mit No:	Issue Date:		CBL:	
685 CONGRESS ST FACTORS FINANCIAL FRC INC PO BOX 7002 Business Name: Contractor Name: Contractor Name: Contractor Address: Phone Jay Villani 43 Clark St Portland 2072723004 Lesse/Buyer's Name Phone: Permit Type: Zone: Jay Villani 207-272-3004 Change of Use - Commercial Zone: Past Use: Proposed Use: Cost of Work: S2 Commercial - office Restaurant-Change of use from office to Restaurant- build ADA bathrooms Prefit Type: Denied Signature: Use Cookd Work: S2	389 Congress Street, 0	4101 Tel: (207) 874-8703	, Fax: (2	07) 874-871	5	07-0006		_	047 C03	34001
Business Name: Contractor Name: Jay Villani Contractor Address: Phone Jay Villani 2072223004 Permit Type: Zone: Zone: Zone: Jay Villani 207-272-3004 Permit Type: Zone: Zone: Zone: Jay Villani 207-272-3004 Permit Type: Zone: Zone: Zone: Ommercial - office Proposed Use: Restaurant - build ADA Permit Fee: Cost of Wark: CEO District: IS 2_1 Proposed Project Description: Change of use from office to Restaurant - build ADA bathrooms Proposed Project Description: Isignature: May / 2 5 / 6 7 Promist application does not preclude the Application does not neidude plumbing, septic or cletrical work. Storeland Variance Not in Disence or Landmain Proved 2. Building permits applicable State and Federal Rules. Storeland Wetland Miscellaneous Does Not Require Review 2. Building permits are void if work is not started within six (6) months of the date of issuarce. False information may invalidate a building permit and stop all work. Subdivision Interpretation Approved Approved JA	Location of Construction:		Owner Name:			Owner	Address:			Phone:	
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Lesse/Buyer's Name Phone: 207-272-3004 Permit Type: Zone: Tay Villani 207-272-3004 Permit Type: Change of Use - Commercial If and the commercial - office Restaurant- Change of use from office to Restaurant- build ADA bathrooms Permit Fee: Cost of Work: If and the composition office to Restaurant- build ADA bathrooms Proposed Project Description: Change of use from office to Restaurant- build ADA bathrooms Signature: Cost of Work: If and the composition office to Restaurant- build ADA bathrooms Proposed Project Description: Change of use from office to Restaurant- build ADA bathrooms Signature: Cost of Work: Signature: Mile 1/2 5/6 7 Proposed Froject Description: Change of use from office to Restaurant- build ADA bathrooms Signature: Cost of Work: Signature: Mile 1/2 5/6 7 PEDESTRIAN ACTIVITIES DISTRICT (PARE) Action: Approved of Approved w/Conditions Denied Signature: Date: Permit Taken By: Date Applied For: Cost of Work is not include plumbing, septic or electrical work. Shoreland Variance Not in District Preservation 1. This permit application does not preclude the Applied For: Shoreland Coning Appeal Historic Preservation	Business Name: Contractor Name		:		Contractor Address:		Phone				
Jay Villani 207-272-3004 Change of Use - Commercial Image: Commercial - office Past Use: Proposed Use: Restaurant - Change of use from office to Restaurant - build ADA bathrooms S345.00 \$22,000.00 2 Proposed Project Description: Change of use from office to Restaurant - build ADA bathrooms File DEPT: See Condetures Signature: Image: Commercial - office	Jay Villani				43 CI	ark St Portla	ind		20727230	04	
Past Use: Commercial - office Proposed Use: Restaurant- Change of use from office to Restaurant- build ADA bathrooms Permit Fee: S345.00 Cost of Work: S345.00 CEO District: S22_000.00 IS2_1 Proposed Project Description: Change of use from office to Restaurant- build ADA bathrooms FIRE DEPT: See Conditions Special Zone or Reviews Signature: Date. Signature: Date. Special Zone or Reviews Signature: Date. Not in District or Landmär Permit Taken By: Idobson D1/02/2007 Special Zone or Reviews Zoning Approval Wetland Historic Preservation (Not in District or Landmär 2. Building permits do not include plumbing, septic or electrical work. Shoreland Wetland Miscellancous 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 Conditional Use Requires Review Maj	Lessee/Buyer's Name Phone:				Permit	Туре:			L	Zone:	
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office to Restaurant- build ADA bathrooms FIRE DEPT: Approved Denied INSPECTION: Use Group: 4-2: Type: See: Conditions Proposed Project Description: Change of use from office to Restaurant- build ADA bathrooms See: Conditions Ibit C 2003 Signature: MB 1/25/07 Permit Taken By: Idobson Date Applied For: 01/02/2007 Special Zone or Reviews Soning Appeal 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Special Zone or Reviews Zoning Appeal 2. Building permits do not include plumbing, septic or electrical work. Shoreland Miscellaneous Does Not Require Review Plood Zone Conditional Use Requires Review Shiel Plan Approved Approved w/Conditions Maip Mingo MM Denied Shiel Plan Approved Approved JAN 2 5 2007 JAN 2 5 2007 Date: Date: Date:	Past Use:		Proposed Use:			Permi	t Fee:	Cost of Work:	CE	O District:	B21
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CITY OF PORTLAND											
	CITY OF PO	RTIAND									

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

Additional work per Capt. Cass: 01/08/07

To build an hour rated firewall along the wall that separates the two spaces at 685congress street. The wall is to consist of metal studs, 16" on center and double 5/8" sheet rock.

To set up an appointment with Captain Cass and Inspections (Arthur Rowe) to discuss and review plans for Adobe oven.

& FURTHEST FROM FROM PRODUCTO NEALEST EXIT 60'-65'.

ilding or Use Permit : (207) 874-8703, Fax: (20 Owner Name: FACTORS FINANCIAI	07) 874-871	c 07-0006	1		
Owner Name:		6	01/02/2007	047 C034001	
FACTORS FINANCIAI		Owner Address:	·	Phone:	
	L FRC INC	PO BOX 7002			
Contractor Name:	Contractor Name:			Phone	
Jay Villani		43 Clark St Portlan	nd	(207) 272-3004	
Phone:		Permit Type:			
207-272-3004		Change of Use - Commercial			
	Propos	sed Project Description:	;		
Approved with Conditions	Neviewei	• Warge Semmucka	a Approvar <i>D</i>		
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	Phone: 207-272-3004	Phone: 207-272-3004 fice to Restaurant- build ADA Propose	Phone: Permit Type: 207-272-3004 Change of Use - Change of Use from office	Phone: Permit Type: 207-272-3004 Change of Use - Commercial fice to Restaurant- build ADA Proposed Project Description: Change of use from office to Restaurant- build	

 PERMIT ISSUED	
JAN 2 5 2007	
CITY OF PORTLAND	



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	e Square Footage of Lot
roum oquine roomage or rroposed ordering	
	4200'
Tax Assessor's Chart, Block & Lot	Owner: FACTERS FINANCIAL INC. Telephone:
Chart# Block# Lot#	PU Bux 7002
	POZTLAND, ME 04112
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Cost Of
JAY VILLANI	JAY VILLANI Work: \$ 25,000
UNY VICCAN	12 CLARK ST
·	POLITLAND, ME <u>F 15</u> (+102 201 272-30,4 Cof O Fee: \$ 245
Current Specific use:	- 4102 201 272-3a14 Cof O Fee: \$ 345
If vacant, what was the previous use?	ARTLAND BIOCOCIKAS
Proposed Specific use:	unt
	•
Project description:	A BUILD ADA BATYROOMS, KITC
CCAPP AT RE	estaurant; Buico ADA BATYROOMS, Kitc tood cryanst system, misc electrical regard
LUNE, TN; FALLATION OT P	tood existings radiation into electricities of a
Retrigeration ect.	
Contractor's name, address & telephone:	TAY VILLANI PORTLAND, MECHICZA
Contractor's name, address & telephone:	TAY VILLANI PORTLAND, MECHICZA
References ect. Contractor's name, address & telephone: Who should we contact when the permit is a Mailing address:	TAY VILLANI PORTLAND, MECHICZA
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References ect. Contractor's name, address & telephone: Who should we contact when the permit is a Mailing address: JAJ VILLANI JB CLARK ST	TAY VILLANI PORTLAND, MECHICZA
Refriger from ect. Contractor's name, address & telephone: Who should we contact when the permit is a Mailing address: JAY VILLANI HOCHARK ST PERTLAND, ME 04102	TAY VILLANI H3 (LARK ST. PORTLAND, ME OfICZA ready: JAY VILLANI Phone: 272-3004
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This is not a permit; you may not commence ANY work until the permit is issued.

Good day,

My name is Jay Villani and I am the chef/owner of Local 188, 188 State Street, Portland Maine. I have been in business for 8 years, and I have the opportunity to expand my business into the space formerly known as Portland Biologicals. This is a narrative explaining what it is I wish to do at **685 Congress Street**:

685 Congress Street is comprised of two separate spaces; a 4200sqft space in front and a 6000 sqft space (currently occupied by Protection One) in the back. There is also a 4600 sqft asphalt parking lot directly behind the building, half of which shall be used for customer parking. The space I am referring to is the store front directly on Congress Street.

It is my intention to build an 80 seat Class A restaurant with a full service bar. An open kitchen will featured an adobe style wood fired oven along with commercial ranges, a salamander and grill. Licensed professionals shall install the appropriate hood and commercial kitchen fire suppression system.

Two ADA approved bathroom structures shall be built; a men's room with two toilets, one 3'x3' for wheel chair access, and a single urinal. A women's room with two toilets, one 3'x3' for wheel chair access.

The space is currently fitted with a sprinkler system, and 3 points of egress. Two store front entrances and exits and one side door exit. The side door being of the crash bar variety. All exits are clearly lit.

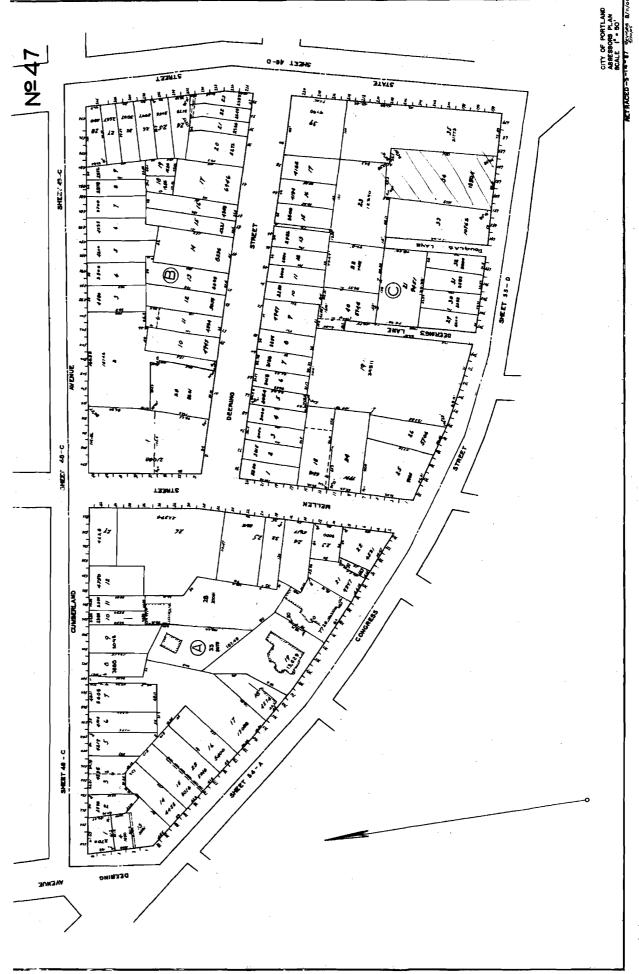
Demo work to include:

There are currently several non-bearing walls that will be removed. I would also like to take down an acoustic tile ceiling and refurbish the original tin ceiling that is covered within. Tightening up all loose wires in appropriate conduit, and install drop lighting system. Along with the ceiling, the removal of what seems to be a half-century-old pvc tile floor and the installation of a pine board floor.

All plumbing and electrical needs shall be addressed by licensed professionals and the appropriate permits shall be pulled by these technicians. At this time, I am getting quotes for said work and the names of those who shall be responsible for the installation will be submitted when applicable.

Thank you for your time,

Jay Villani Local 188 207 272 3004



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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.

A Pre-construction Meeting will take place upon receipt of your building permit.

Footing/Building Location Inspec	ction: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	rical: Prior to any insulating or drywalling
Final/Ce <u>rtificate of Occupancy</u> :	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

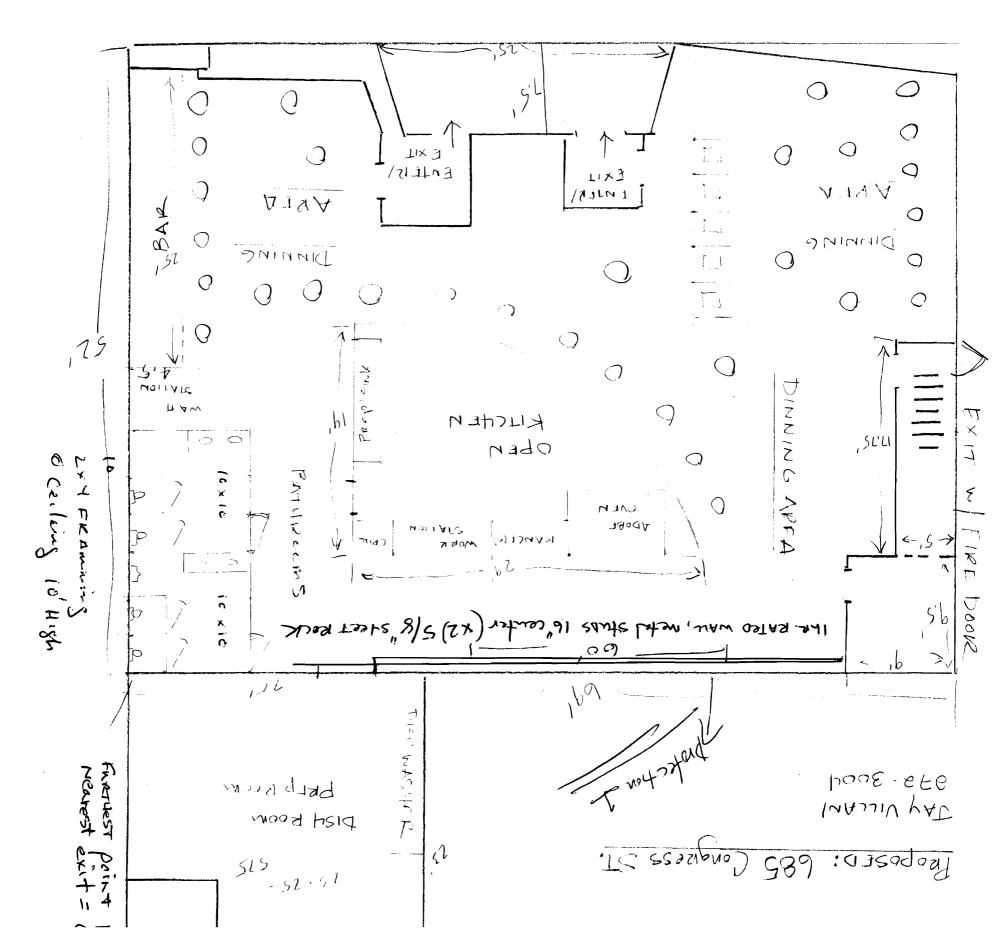
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects **DO** require a final inspection

phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

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

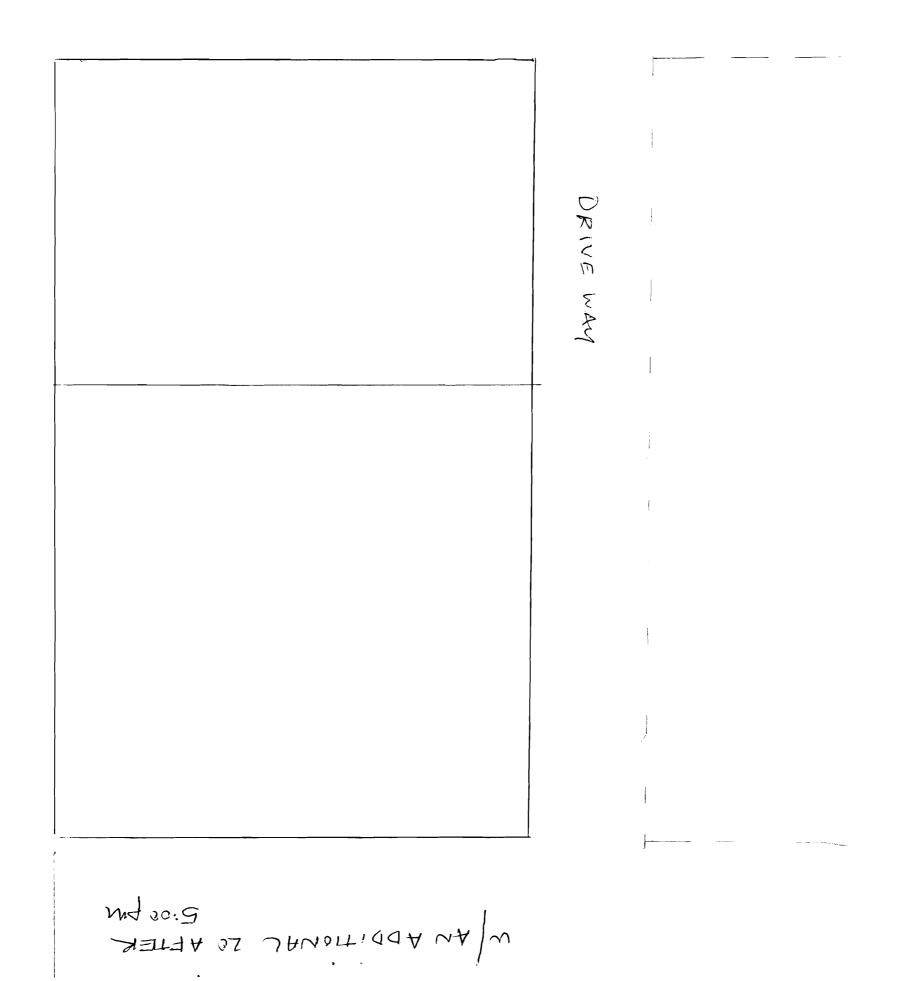
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Signature of Applicant/Desig	inee,	Date
Donna Martin	Hamin	1-25-07
Signature of Inspections Offi	cial	Date
CBL: NY C 034	Building Permit #:	0.7 - 0.006

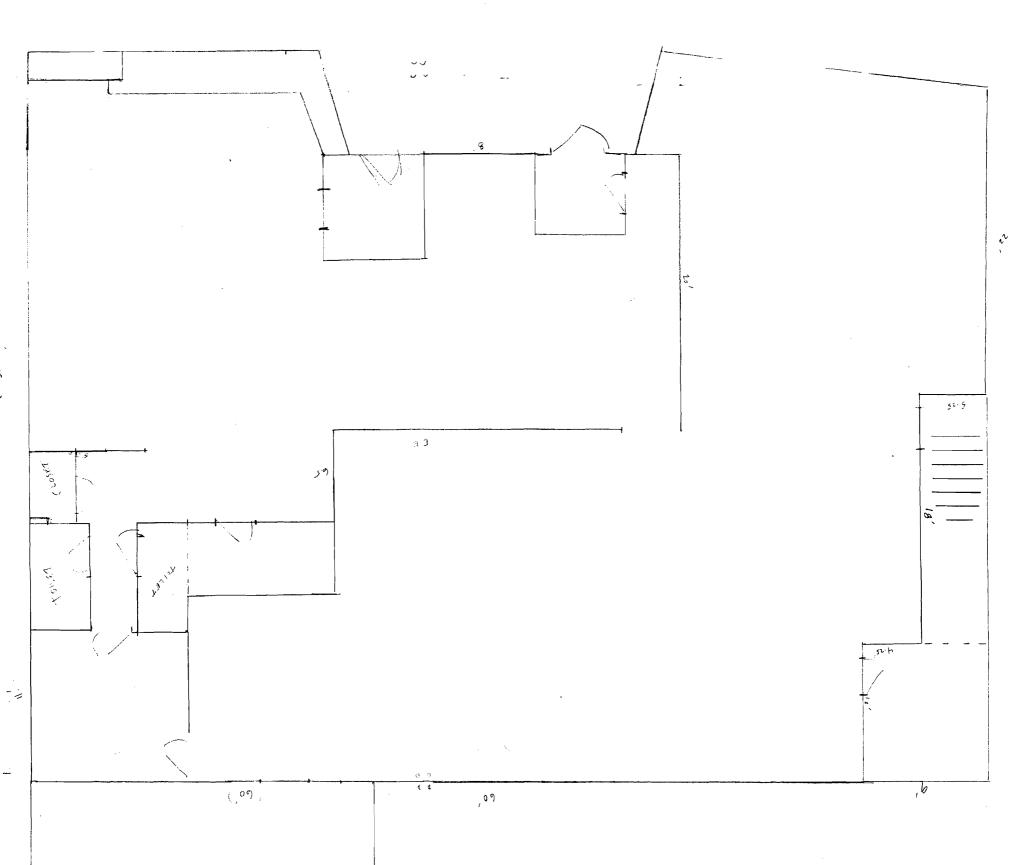
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CONCRESS STREET

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