	y of Portland, Maine -	O			Per	mit No: 05-0539	Issue Dat	e:	CBL: 052 C00	3001	
389 Congress Street, 04101 Tel: (207) 874-870  Location of Construction:  Owner Nam					Owner Address:		Phone:				
189 Park Ave Business Name:			Maine Center For The Blind &  Contractor Name:  Benchmark			189 Park Ave  Contractor Address: 34 Thomas Dr. Westbrook			DI		
		Benchmark							Phone 2075917600		
Less	ee/Buyer's Name	Phone:			Permit Type: Additions - Commercial				Zone:		
Past Use: SRO housing and offices		Proposed Use: SRO housing a	and offices/ create 30 d renovate existing 33' ry building		Permit Fee:   Cost of Wor   \$31,002.00   \$3,433,88						
					Approved		INSPEC	NSPECTION: Jse Group: Type			
crea	oosed Project Description: ate 30 new apartments and a NDITIONAL PERMIT	renovate existing 33' x 4	6' three	story building	Signat PEDES	ure: STRIAN ACTI	VITIES DIST	Signatu:			
					Action Approved Approv						
					Signat	ure:			Date:		
	nit Taken By: obson	Date Applied For: 05/06/2005	Zoning Approval								
1.	This permit application do	oes not preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting Federal Rules.	g applicable State and	Shoreland			☐ Variance			Not in District or Landn		
2.	Building permits do not include plumbing, septic or electrical work.		Wetland			Miscellaneous			Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon			Conditional Us			Requires Review		
	False information may inverse permit and stop all work	validate a building	☐ Subdivision ☐ Site Plan			☐ Interpretatio			Approved		
						Approved			Approved w/Condition		
			Мај [	Mino MM	☐ ☐ Denied			☐ Denied			
			Date:			Date:		Da	ate:		
I hav juris shal	reby certify that I am the over been authorized by the ordiction. In addition, if a pell have the authority to entenach permit.	owner to make this appliermit for work described	med procation a	as his authorized application is iss	ne prop l agent sued, I	and I agree t certify that th	o conform t se code offic	o all ap	plicable laws of thorized repres	of this sentative	
SIG	NATURE OF APPLICAN			ADDRESS	S		DATE	,	P	НО	

Location of Construction: Owner Name: Maine Center Fo		Blind &	Owner Address: 189 Park Ave	Phone:	
Business Name:	ame: Contractor Name: Benchmark		Contractor Address: 34 Thomas Dr. Westbrook	Phone 2075917600	
Lessee/Buyer's Name	Phone:		Permit Type: Additions - Commercial	·	Zone:

Dept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 06/02/2005

Note: 5/31/05 received the signed contract from Amy Devins from the lawyers office - still have not received the stamped approved site plan from planning - but I have reviewed what I have for zoning compliance. 

Ok to Issue: ✓

- 2) Separate permits shall be required for any new signage.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Mike Nugent
 Approval Date:
 06/10/2005

 Note:
 Ok to Issue:
 ✓

- 1) No construction can occur until final plan review and plan revisions are completed.
- 2) No construction can occur until all Planning Conditions are met.
- 3) Staff is signing off on this project so the applicant may receive a conditional permit for closing purposes. The applicant still needs to submit final plans for review, easement language from School Department, and performance guarantee and associated inspection fee.

 Dept:
 Fire
 Status:
 Approved with Conditions
 Reviewer:
 Cptn Greg Cass
 Approval Date:
 06/02/2005

 Note:
 Ok to Issue:
 ✓

- 1) Maintain access for fire apperatious ata all times
- 2) Fire alarm system to comply with NFPA 72
- 3) Sprinkler system to comply with NFPA 13
- 4) All building construction to comply with NFPA 101

## 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 APPLICAN	ADDRESS	DATE	PHO