

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <i>19 West St 1st fl</i>		Owner: <i>Cardiovascular Consultants</i>		Phone:		Permit No: <b>960662</b>	
Owner Address:		Leasee/Buyer's Name: <i>J. W.</i>		Phone:		Business Name:	
Contractor Name: <i>Biskup Construction</i>		Address: <i>P.O. Box 1058 Portland, ME 04104</i>		Phone: <i>878-8112</i>		Permit Issued: <b>JUL 10 1996</b>	
Past Use: <i>Prof Office</i>		Proposed Use: <i>Same</i>		COST OF WORK: <b>\$ 8,000.00</b>		PERMIT FEE: <b>\$ 60.00</b>	
Proposed Project Description:  <i>Make Interior Renovations</i>				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>B</i> Type: <i>35</i>	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
Signature: _____				Date: _____			
Permit Taken By: <i>Mary Gresik</i>		Date Applied For: <i>02 July 1996</i>					

**PERMIT ISSUED**  
**JUL 10 1996**  
**CITY OF PORTLAND**

Zone: *R-6* CBL: *055-B-013*  
Zoning Approval: *C. J. F. Jensen*  
**Special Zone or Reviews:**  
 Shoreland *ok w/g*  
 Wetland  
 Flood Zone *7/3/96*  
 Subdivision  
 Site Plan  major  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action: *NO EXTERIOR WORK*  
 Approved  
 Approved with Conditions  
 Denied

Date: *2 July 96*

**PERMIT ISSUED WITH LETTER**

**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 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 provisions of the code(s) applicable to such permit

*02 July 1996*

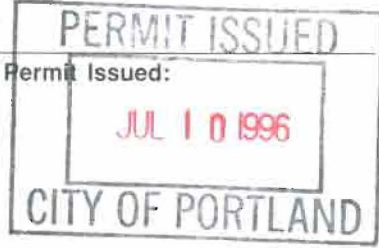
SIGNATURE OF APPLICANT *Jim Biskup* ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

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

CEO DISTRICT **3**

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 19 West St 1st fl		Owner: Cardiovascular Consultants		Phone:	Permit No: <b>960662</b>
Owner Address:		Leasee/Buyer's Name:		Phone:	BusinessName:
Contractor Name: Biskup Construction		Address: P.O. Box 1058 Ptld, ME 04104		Phone: 878-8112	
Past Use: Prof Office		Proposed Use: Same		COST OF WORK: \$ 8,000.00	PERMIT FEE: \$ 60.00
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Permit Taken By: Mary Gresik		Date Applied For: 02 July 1996		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____	



Zone: *R-6* CBL: 055-B-013  
Zoning Approval: *C. 10 for use in microfiche*  
Special Zone or Reviews:  
 Shoreland *ok us*  
 Wetland  
 Flood Zone *7/31/96*  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action: *NO EXTERIOR WORK*  
 Approved  
 Approved with Conditions  
 Denied

Date: *2/July/96*

*[Signature]*  
CEO DISTRICT **3**  
*A. Sump*



- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

No debris removal necessary.

**CERTIFICATION**

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SIGNATURE OF APPLICANT <i>Jim Biskup</i>		ADDRESS:		DATE: 02 July 1996	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE <i>Permit</i>					PHONE:

Inspection Services  
P. Samuel Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

## CITY OF PORTLAND

July 9, 1996

Biskup Construction  
P. O. Box 1058  
Portland, Maine 04104

RE: 19 West St.

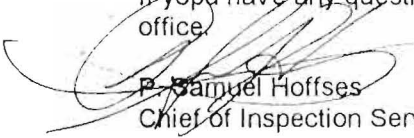
Re: Dear Sir,

Your application to make alterations has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not excuse the applicant from meeting applicable State and Federal laws.

### Building and Fire Code Requirements

- 1 The sprinkler system shall be maintained to NFPA #13 standards.
2. All exit signs, lights, and means of egress lighting shall be done accordance with Chapter 10, section & subsections 1023 & 1024, of the city's building code . (THE BOCA NATIONAL BUILDING CODE ).
3. Portable fire extinguisher shall be located as per NFPA 10.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

  
P. Samuel Hoffses  
Chief of Inspection Services

cc M. Schmuckal Asst. Chief of Inspections  
LT Mc Dougall PFD

055-B-013

# 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 specification:

Date July 8, 1996

Permit # 03857 03758

LOCATION: 19 West St

OWNER Cardiovascular Center ADDRESS \_\_\_\_\_

							TOTAL EACH FEE		
<b>OUTLETS</b>									
	4	Receptacles	2	Switches	Smoke Detector		6	.20	1.20
<b>FIXTURES</b>		(number of)							
		incandescent	9	fluorescent			9	.20	1.80
		fluorescent strip						.20	
<b>SERVICES</b>									
		Overhead			TTL AMPSTO	800		15.00	
		Underground				800		15.00	
<b>TEMPORARY SERV.</b>									
		Overhead			AMPS OVER	800		25.00	
		Underground				800		25.00	
<b>METERS</b>		(number of)						1.00	
<b>MOTORS</b>		(number of)						2.00	
<b>RESID/COM</b>		Electric units						1.00	
<b>HEATING</b>		oil/gas units						5.00	
<b>APPLIANCES</b>		Ranges		Cook Tops	Wall Ovens			2.00	
		Water heaters		Fans	Dryers			2.00	
Disposals		Dishwasher		Compactors	Others (denote)			2.00	
<b>MISC. (number of)</b>		Air Cond/win						3.00	
		Air Cond/cent						10.00	
		Signs						5.00	
		Pools						10.00	
		Alarms/res						5.00	
		Alarms/com						15.00	
		Heavy Duty						2.00	
		Outlets							
		Circus/Carnv						25.00	
		Alterations						5.00	
		Fire Repairs						15.00	
		E Lights						1.00	
		E Generators						20.00	
		Panels						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>			
						<b>MINIMUM FEE/COMMERCIAL</b>	<b>35.00</b>		
						<b>MINIMUM FEE</b>	<b>25.00</b>		<b>25.00</b>

INSPECTION: Will be ready 7/8/96 P.M. or will call \_\_\_\_\_

CONTRACTORS NAME Walter E. Burnell, Inc.

ADDRESS P. O. Box 235, Gray, ME 04039

TELEPHONE 657-2113

MASTER LICENSE No. 03857 03758

LIMITED LICENSE No. \_\_\_\_\_

SIGNATURE OF CONTRACTOR

655-B-013

# 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 specification:

Date 8/16/96

Permit # 17139

LOCATION: 19 West St

OWNER Cardiovascular Ct ADDRESS \_\_\_\_\_

							TOTAL EACH FEE		
<b>OUTLETS</b>									
	Receptacles		Switches		Smoke Detector			.20	
<b>FIXTURES</b>	(number of)								
	incandescent		fluorescent					.20	
	fluorescent strip							.20	
<b>SERVICES</b>									
	Overhead				TTL AMPSTO	800		15.00	
	Underground					800		15.00	
<b>TEMPORARY SERV.</b>									
	Overhead				AMPS OVER	800		25.00	
	Underground					800		25.00	
<b>METERS</b>	(number of)							1.00	
<b>MOTORS</b>	(number of)							2.00	
<b>RESID/COM</b>	Electric units							1.00	
<b>HEATING</b>	oil/gas units							5.00	
<b>APPLIANCES</b>	Ranges		Cook Tops		Wall Ovens			2.00	
	Water heaters		Fans		Dryers			2.00	
Disposals	Dishwasher		Compactors		Others (denote)			2.00	
<b>MISC. (number of)</b>	Air Cond/win							3.00	
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<b>TRANSFORMER</b>	0-25 Kva							5.00	
	25-200 Kva							8.00	
	Over 200 Kva							10.00	
							TOTAL AMOUNT DUE		
<b>MINIMUM FEE/COMMERCIAL 35.00</b>							<b>MINIMUM FEE</b>	<b>25.00</b>	<b>25</b>

INSPECTION: Will be ready now or will call \_\_\_\_\_

CONTRACTORS NAME Cunningham Security Syst

ADDRESS 313 Read St- Ptld

TELEPHONE 878-5858

MASTER LICENSE No. MC60017139

LIMITED LICENSE No. ↗

SIGNATURE OF CONTRACTOR

*Brian A. Cunningham*

8/5/90 Have yet to block in 2 doorways, have removed walls. New doors on site, Contractor not available.

8/14/90 C of O Inspection - have asked Contractor to pick out but directional arrow or signage indicating EX II. Electrical Inspector had issues - will speak to him.

8/21/90 Mike Adams, Electrical Inspector issues all out. OK to occupy.

Inspection Record	Type	Date
Foundation:		
Framing:		
Plumbing:		
Final:		
Other:		