

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

Please Read Application And Notes, If Any, Attached



Permit Number: 080540

PERMIT ISSUED  
JUL 21 2003  
CITY OF PORTLAND

This is to certify that ELIE MICHAEL R/Seth Di Antonio  
has permission to Change of use from retail to nail & glass blowing studio  
AT 255 St John St L 064 D00300

provided that the person or persons whom or whom 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.

Classification of inspection must be given and when permission procured before this building or part thereof is occupied or closed-in. 4 HOUR 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. Craig Cass  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*James Burke* 6/30/08  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

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

Permit No: 08-0540	Issue Date:	CBL: 064 D003001
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Location of Construction: 255 St John St	Owner Name: ELIE MICHAEL R	Owner Address: 33 RAMSDELL RD	Phone:
Business Name: The Blazin Ace	Contractor Name: Seth Dipietrantonio	Contractor Address: 4 Picnic Hill Freeport	Phone 2075224567
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B-2

Past Use: Commercial / Retail ("The Blazin Ace")	Proposed Use: Commercial / glass blowing studio - Change of use from retail to retail & glass blowing studio.	Permit Fee: \$115.00	Cost of Work: \$1,500.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>F2</b> Type: <b>SB</b>	
		See Conditions IBC-2003		

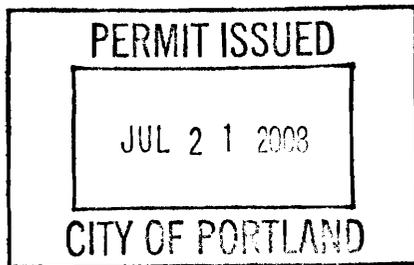
**Proposed Project Description:**  
Change of use from retail to retail & glass blowing studio

Signature: *Greg Carr* Signature: *JMB 6/30/08*  
**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**  
 Action:  Approved  Approved w/Conditions  Denied  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: ldobson	Date Applied For: 05/21/2008	<b>Zoning Approval</b>		
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- This permit application does not 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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>6/1/08 ABM</i>	Date: _____	Date: <i>ABM</i>



**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

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

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

Permit No: 08-0540	Date Applied For: 05/21/2008	CBL: 064 D003001
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<b>Location of Construction:</b> 255 St John St	<b>Owner Name:</b> ELIE MICHAEL R	<b>Owner Address:</b> 33 RAMSDELL RD	<b>Phone:</b>
<b>Business Name:</b> The Blazin Ace	<b>Contractor Name:</b> Seth Dipietrantonio	<b>Contractor Address:</b> 4 Picnic Hill Freeport	<b>Phone</b> (207) 522-4567
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Change of Use - Commercial	

<b>Proposed Use:</b> Commercial / glass blowing studio - Change of use from retail to retail & glass blowing studio.	<b>Proposed Project Description:</b> Change of use from retail to retail & glass blowing studio
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 06/04/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.				
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 06/30/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.				
2) All penetrations through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712.				
<b>Dept:</b> Fire	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Capt Greg Cass	<b>Approval Date:</b> 06/05/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
1) The glass blowing room is to be separated from the rest of the structure with 2 hr. Rated construction. Provide details of construction type.				

<b>Comments:</b>
5/28/2008-amachado: Spoke to Seth. Glass blowing studio is for him and his partner. Walls already existed. Put more sheet rock up. Jeanie says need to know what he did for separation. Details should be part of permit. Don't know if the concrete pad meets the impervious surface ratio of 80%.
6/4/2008-amachado: Spoke to Seth. He is not using a concrete pad now for the tanks. They will go on the ground.
6/30/2008-jmb: Per Seth, the separating wall detail is 2 layers of 5/8 type x on the inside of the studio over a layer of 1/2", the wall separating the office space has 1/2" on it and he will add another layer of 5/8 type x.



# 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.

Location/Address of Construction: <u>259 ST. JOHN ST. Portland ME 04102</u>		
Total Square Footage of Proposed Structure/Area <u>9'9 1/2" X 13'8 3/4"</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>064      D      003</u>	Applicant * <b>must</b> be owner, Lessee or Buyer* Name <u>Seth DiPietrantonio</u> Address <u>4 Picnic Hill</u> City, State & Zip <u>Freeport ME 04032</u>	Telephone: <u>Cell 207 522 4567</u> <u>→ 207 871-8800</u> <u>Store</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Mike Elie</u> Address <u>259 St John St</u> City, State & Zip <u>Portland ME 04102</u>	Cost Of Work: \$ <u>1,500.00</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>Retail</u> " <u>The Blazin Ace -</u> " If vacant, what was the previous use? Proposed Specific use: <u>Retail / Manufacturing / glassblowing</u> <u>Chango &amp; WDe</u> Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>The space is going to be used for a glass blowing studio. We have talked with Greg Cass on several occasions about meeting the fire codes. We have gone above and beyond with two layers of sheet rock on all walls and ceiling along with fire rated bunker board on the table. The table has a back to it that goes directly up to the hood.</u>		
Contractor's name: <u>Seth DiPietrantonio</u>		
Address: <u>4 Picnic Hill</u>		Telephone: <u>Primary - Cell 522-4567</u>
City, State & Zip <u>Freeport ME 04032</u>		Telephone: <u>871-8800</u>
Who should we contact when the permit is ready: <u>Seth DiPietrantonio</u>		Telephone: <u>871-8800</u>
Mailing address: _____		

**Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.**

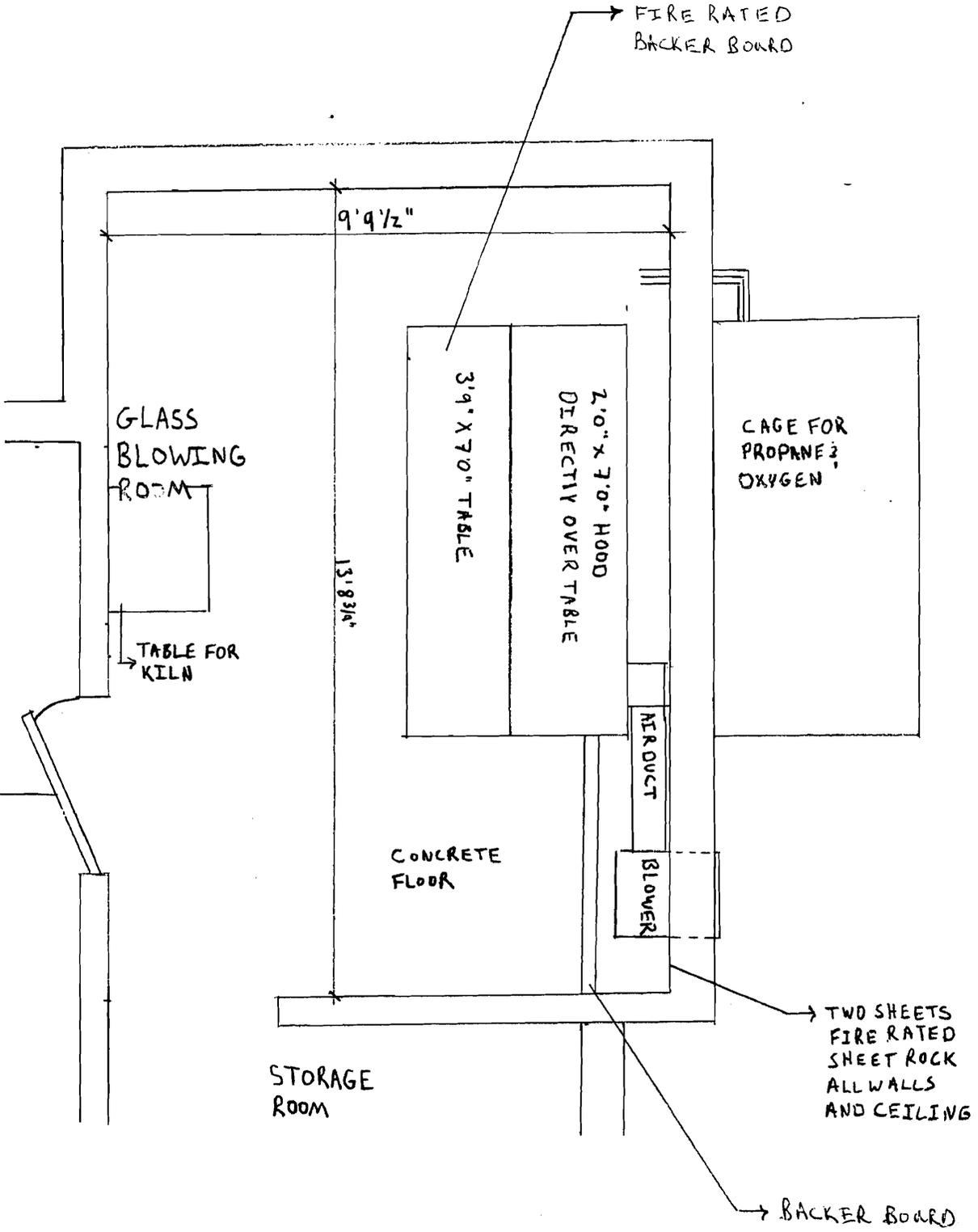
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: Seth DiPietrantonio      Date: 4-25-08

**This is not a permit; you may not commence ANY work until the permit is issued**

SCALE  
3/8" = 1'0"



FIRE RATED  
BACKER BOARD

9'9 1/2"

GLASS  
BLOWING  
ROOM

TABLE FOR  
KILN

3'9" X 7'0" TABLE

2'0" X 7'0" HOOD  
DIRECTLY OVER TABLE

CAGE FOR  
PROPANE &  
OXYGEN

13'8 3/4"

AIR DUCT

BLOWER

CONCRETE  
FLOOR

METAL  
DOOR &  
DOOR  
FRAME

STORAGE  
ROOM

TWO SHEETS  
FIRE RATED  
SHEET ROCK  
ALL WALLS  
AND CEILING

BACKER BOARD



## Operating Procedure for The Blazin' Ace Glass Blowing

Attn: Greg Cass

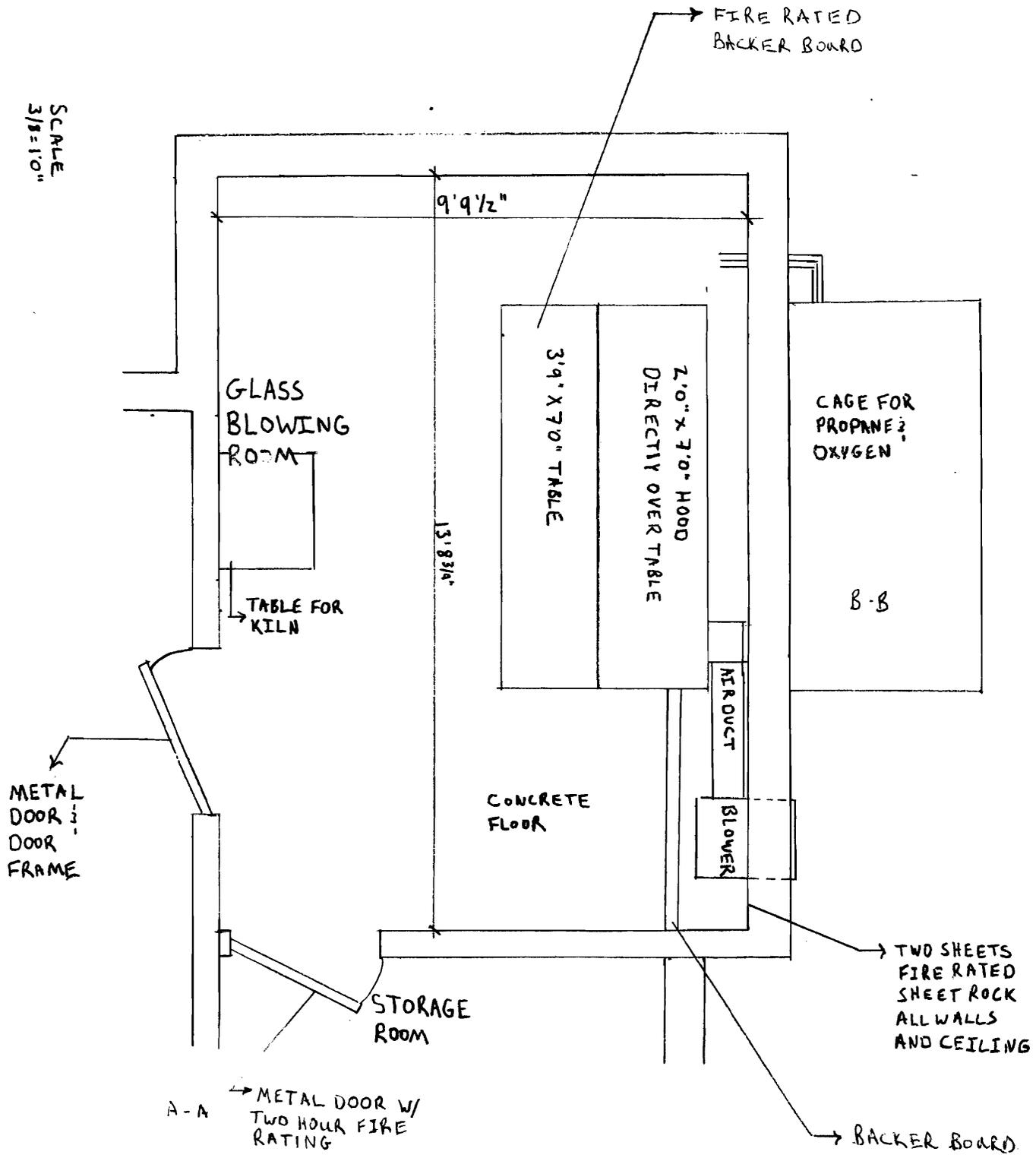
Here are the steps that you requested for the glass blowing process.

1. Oxygen and propane turned on at the tanks. Tanks are external in a cage.
2. Ventilation is then turned on.
3. Kiln turned on and set at 1125 F.
4. The torch is turned on propane first, then oxygen.
5. safety glasses are put on.
6. Glass is then blown starting with the process of kneeling to heat the glass to temp. The glass is then worked to a finished product and put in the kiln to cool.
7. The process of turning the equipment off is:
  - a. Shut the torch down, oxygen is turned off then propane is turned off.
  - b. The blower for the hood is shut off.
  - c. Oxygen and propane is then shut off at the tanks.

We are almost done with the glass blowing room, we have just a few things to do in order to complete the room. I have contacted zoning and am waiting for a reply. If possible can we schedule an appointment to have you come down and take a look at what we have done. I want to thank you for your time and willingness to work with us in this process.

The Blazin' Ace  
259 Saint John St.  
Portland Maine 04103  
Seth DiPietrantonio

SCALE  
3/8"=1'0"



A-A METAL DOOR  
NEEDS TO BE  
INSTALLED

B-B THE CAGE WILL  
BE SET ON a 3 1/2"

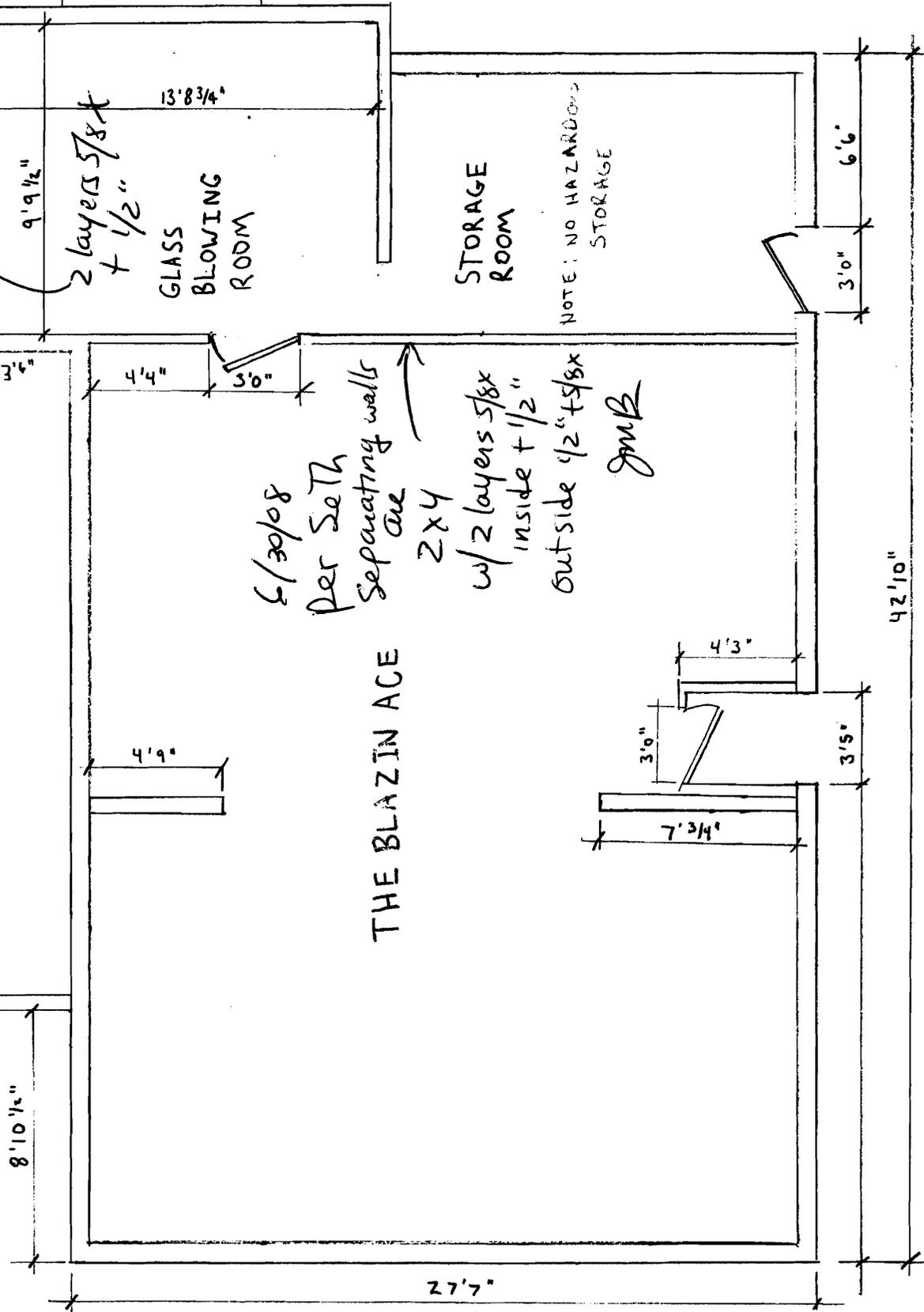
117.5 x 164.75 = 19358.125

208.25 x 108 = 22491  
41849.13

= 290.17 φ

UNIT BEHIND  
BLAZIN' ACE

8'10 1/2"



GLASS BLOWING ROOM

STORAGE ROOM

NOTE: NO HAZARDOUS STORAGE

THE BLAZIN ACE

6/30/08  
Per Seth  
Separating walls are  
2x4  
w/ 2 layers 5/8"  
inside + 1/2"  
outside 1/2" + 5/8"  
JMB

CAGE FOR  
PROPANE &  
OXYGEN  
DIM. 7'6" W,  
6'6" T, 3'6" D  
DESIGN LOAD  
1000 LB.

PARKING SPOTS

SCALE  
3/16" = 1'0"

SIDE WALK



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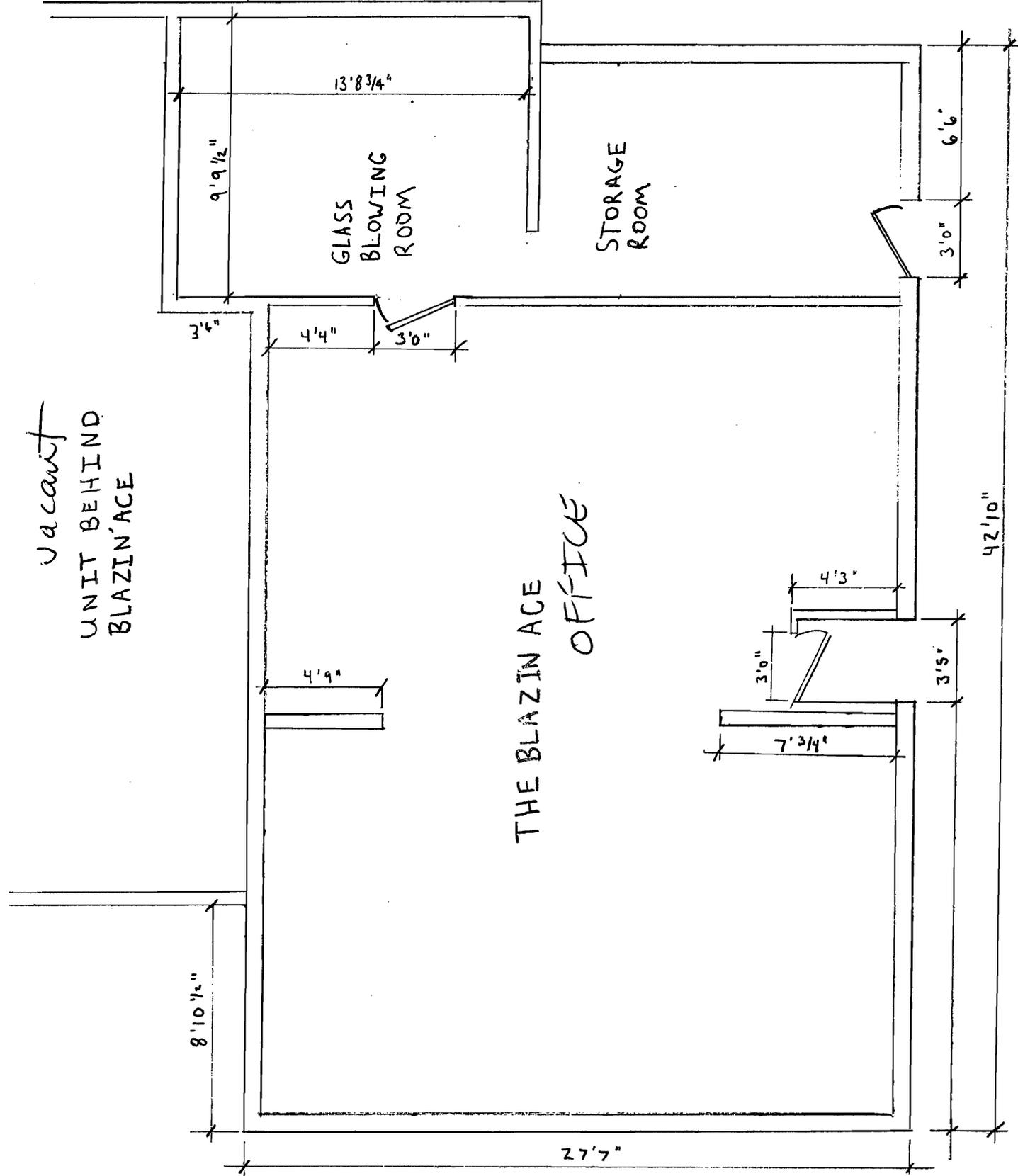
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The Blazin' Ace  
259 Saint John St.  
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Seth DiPietrantonio

CAGE FOR  
PROPANE &  
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DIM. 7'6" W,  
6'6" T, 3'6" D  
DESIGN LOAD  
1000 LB.



vacant  
UNIT BEHIND  
BLAZIN ACE

THE BLAZIN ACE  
OFFICE

SCALE  
3/16" = 1'0"

SIDE WALK

PARKING  
SPOTS

Grey,

This is the information that I have thus far for the Glass blowing studio. I have typed an operating procedure and I have a floor plan of the room. In the floor plan I have included where the hood is located along with the table directly below it. The table was built with fire rated backer board. The table also has a back which ~~is~~ boxes in the area where the glass will be blown and it goes directly up to the hood. I have also shown where the blower is located and where the kiln will be located. Once we get approval I will need to pour a slab for the cage located outside and shown on the floor plan. Gayle was not sure that I had all the information needed in order to submit the change of use application. If you could take a look at what I have thus far so I can complete the application I would be most grateful.

Thank You

Seth Detertons

I will call you Monday morning and if you have any question give me a call at 522-4567

Over