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City of Portland, Maine - Building or Use I			Permit Applicatio	n Permit No:	Issue Date:	CBL:	
	Congress Street, 04101	U		07 047	3	065 D018001	
Loca	ation of Construction:	Owner Name:		<b>Owner Address:</b>		Phone	
32	1 VALLEY ST	SHALOM HO	DUSE INC	PO BOX 560			
Busi	iness Name:	ContractorName	e:	Contractor Addr	ess:	Phone'	
The Thaxter C		Company	55 Bell Street	Porti Gali Y UL	2077753499		
Lessee/Buyer's Name Phone:					Zome: SQ		
Past	t Use:	Proposed Use:	1				
Co	mmercial / Peabody Group	Peabody Grou	p/ Interior tenant fit-	\$1,056.0	0 \$115,000.0	0 2	
up for of		frees	FIRE DEFT:	Denied U	SPECTION: se Group: P Type: J 5/J/K		
Prop	posed Project Description:	<u>C 44</u>			P.F.D. 5-13-05	(1)	
Pea	abody Group/ Interior tenar	nt fit-up for iffe	5	Signature			
			PEDESTRIĂN ACTIVITIES DISTRICT (P.A.D.)				
				Action: Approved Approved w/Conditions Denied			
				Signature:		Date:	
Perr	mit Taken By:	Date Applied For:		Zon	ing Approval		
lde	obson	04/26/2005					
1.	This permit application d	oes not preclude the	Special Zone or Review	ews Z	Coning Appeal	Historic Preservation	
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	C Var	iance	Not in District or Landmark	
2.	. Building permits do not include plumbing, septic or electrical work.		Wetland	[] Mis	cellaneous	Does Not Require Review	
3.	•		Flood Zone	Cor	ditional Use	Requires Review	
		he date of issuance.					
		validate a building	Subdivision	Inte	rpretation	Approved	
	within <b>six</b> (6) months of t False information may in	validate a building	Subdivision	Inte	-	Approved	
	within <b>six</b> (6) months of t False information may in	validate a building			proved		
	within <b>six</b> (6) months of t False information may in	validate a building	Site Plan		proved	Approved w/Conditions	

## 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

6-7-05 Oal From Deno work on going interior partition 6-1405 on ok to closen 8-4-05 Did male Intern & 11-05, Did Julko W/ Mille Colleis Just Export stur V level work on the stars completed OK MM

E.	
1	CITY OF PORTLAND, MAINE Department of Building Inspection
	( Certificate of Occupancy
	LOCATION 321 VALLEY ST CBL 065 D018001
	Issued to SHALOM HOUSE INC /The Thaxter Company Date of Issue 09/07/2005
	This is to certify that the building, premises, or part thereof, at the above location, built – altered
	- changed <b>as</b> to use under Building Permit No. <sup>05-0473</sup> , has had final inspection, <b>has</b> been found to conform substantially to requirements of <b>Zoning</b> Ordinance <b>and</b> Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, <b>as</b> indicated below.
	PORTION OF BUILDING OR PREMISES     APPROVED OCCUPANCY
	Entire Office Space Use Group B
	Type 2B
	<ul> <li>Limiting Conditions:</li> <li>None</li> </ul>
	This certificate supersedes certificate issued Approved: (Date) (

Form # P 01

То

LOCATION:

TENANT \_\_\_\_

CMP ACCOUNT #

## ELECTRICAL PERMIT City of Portland, Me.



10-19-04 Date

\_ . \_ . .

Chief Electrical Inspector, Portland Maine:

52

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

Permit#

CBL#\_ 69 lley Streez METER MAKE & # halom OWNER C) PHONE #

						TOTAL	. EACH	FEE D
OUTLETS	50	Receptacles	20	Switches		Smoke Detector	.20	19/00
FIXTURES	D	Incandescent	10	Fluorescent		Strips	.20	2 700
SERVICES		Overhead		Underground		TTL AMPS <800	15.00	
		Overhead		Underground		>800	25.00	
							25.00	
Temporary Service		Overhead		Underground		TTL AMPS	25.00	
		(					1.00	
METERS	ļ	(number of)					2.00	
MOTORS	ļ	(number of)		i				
RESID/COM		Electric units					1.00	
HEATING		oil/gas units		Interior		Exterior	5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00	, reg
		Insta-Hot	Δ	Water heaters		Fans	2.00	4100
		Dryers	1	Disposals		Dishwasher	2.00	40%00
		Compactors		Spa		Washing Machine	2.00	, , -
		Others (denote)					2.00	
MISC. (number of)		Air Cond/win					3.00	â
	5	Air Cond/cent				Pools	10.00	50000
		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	
	1	Alterations				OCT 1 2004	5.00	~
		Fire Repairs					15.00	15000
· · · · · · · · · · · · · · · · · · ·	15	E Lights					1.00	101-
	12	E Generators					20.00	
				_				
PANELS		Service		Remote		Main	4.00	
TRANSFORMER		0-25 Kva				· · · · · · · · · · · · · · · · · · ·	5.00	
		25-200 Kva					8.00	
		Over 200 Kva					10.00	
						TOTAL AMOUNT DUE		e e
		MINIMUM FEE/CC	MMI	ERCIAL 45.00		MINIMUM FEE 35.00		89 100
CONTRACTORS NAI	De	John Pern worth St	ŢĒ	Electric Co Portlu	In 1	(MASTER LIC. #	S	
	32	<u>G-3033</u>		<u> </u>		- lat	11	$S^{-}$
		n l	$\cap$			$\wedge \ell^{\gamma}$	$\langle \rangle$	ر ر
SIGNATURE OF COM	ITRA	CTOR	N	1 <u>1</u>			`	

PLUMBING APPLICATION						Department of Human Sciences Division of Health Engineering		
	PROPERTY							
Town or Plantation Vertland					. 8199			
Subdivision Lot # 321 Valles St-					PERMIT	# 9417 TOWN COPY • ↓ ↓ ↓ ↓ 0 0 0 0 0		
	PROPERTY OW	ANEES NAME		Date Permit Issued:	105	FEE Charged		
		First:		Local Plumbing Inspector	Signature			
Applicant Name: Muinel Ple + H+ Mailing Address of Owner/Applicant 6,74 Microsoft-					DOK	5		
(If Diffe		ant Statement	L- 01(63		ution: Inspec			
knowle	y that the informationsubmit dge and understand that any	falsification is reaso		-	I have inspected the installation authorized above and found <i>it to be in</i> compliance with the Maine Plumbing Rules			
Plumbi		. Alter	1.131c					
	Signature of Owner/Ap	plicant	f Date	<u> </u>	nspector Signature	Date Approved		
	::::. 		PERM					
	pplication is for			re To Be Served:	Plumbing To Be Installed By:			
• •			FAMILY DWE	ELLING MOBILE HOME	1. XMASTER PLUMBER 2. 🗆 OIL BURNERMAN			
	ELOCATED UMBING		E FAMILY D		3. [] MFG'D. HOUSING DEALER/MECHA			
		4. 🗶 OTHER -	- SPECIFY		4. □ PUBLIC UTILITY EMPLOYEE 5. □ PROPERTY OWNER			
	1					4		
	ook-Up& Piping Relocatio Maximum of 1 Hook-Up	'n	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture		
	HOOK-UP: to public s those cases where the	ewer in		Hosebibb / Sillcock		Bathtub (and Shower)		
	is not regulated and in the local Sanitary Dist	ispected by trict		Floor Drain	*	Shower (Ceparate)		
	OI	R		Urinal		Sink		
	HOOK-UP: to an existing subsurface			Drinking Fountain		Wash Basin		
	wastewater disposal s			Indirect Waste	2	Water Closet (Toilet)		
	PIPING RELOCATION lines, drains, and pipir new fixtures.	\$1: ôf sanitary ng without		Water Treatment Softener, Filter, etc.	I	Clothes Washer		
				Grease / Oil Separator		Dish Washer		
				Dental Cuspidor	,	Garbage Disposal		
<b>Y</b>	OR			Bidet		Laundry Tub		
			Other:		Water Heater			
		SFERFEE \$6.00]		Fixtures (Subtotal) Column 2	.6	Fixtures (Subtotal) Column 1		
			¥			Fixtures (Subtotal)		
			MIT FEE SO		6	Column 2 Total Fixtures		
FOR CALCULATING					36	Fixture Fee		
						Transfer Fee		
					36	Hook-Up & Relocation Fee Permit Fee (Total)		

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## Please call <u>874-8703</u> 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 followin 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 Inspection	Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
<u>M</u> Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical	Prior to any insulating or drywalling
USG	for to any occupancy of the structure or e. <b>NOTE:</b> There is a \$75.00 fee per pection 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

\_\_\_\_\_ If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES N	MUST BE ISSUED AND PAID FOR
BEFORE THE SPACE MAY BE OCCUPIEI	
X ym & Ketto	2/27/05
Signature of Applicant/Designee	Date /27
	5/2/105
Signature of Inspections Official	Date
CBL: COE DAIE Building Permit #;	030477