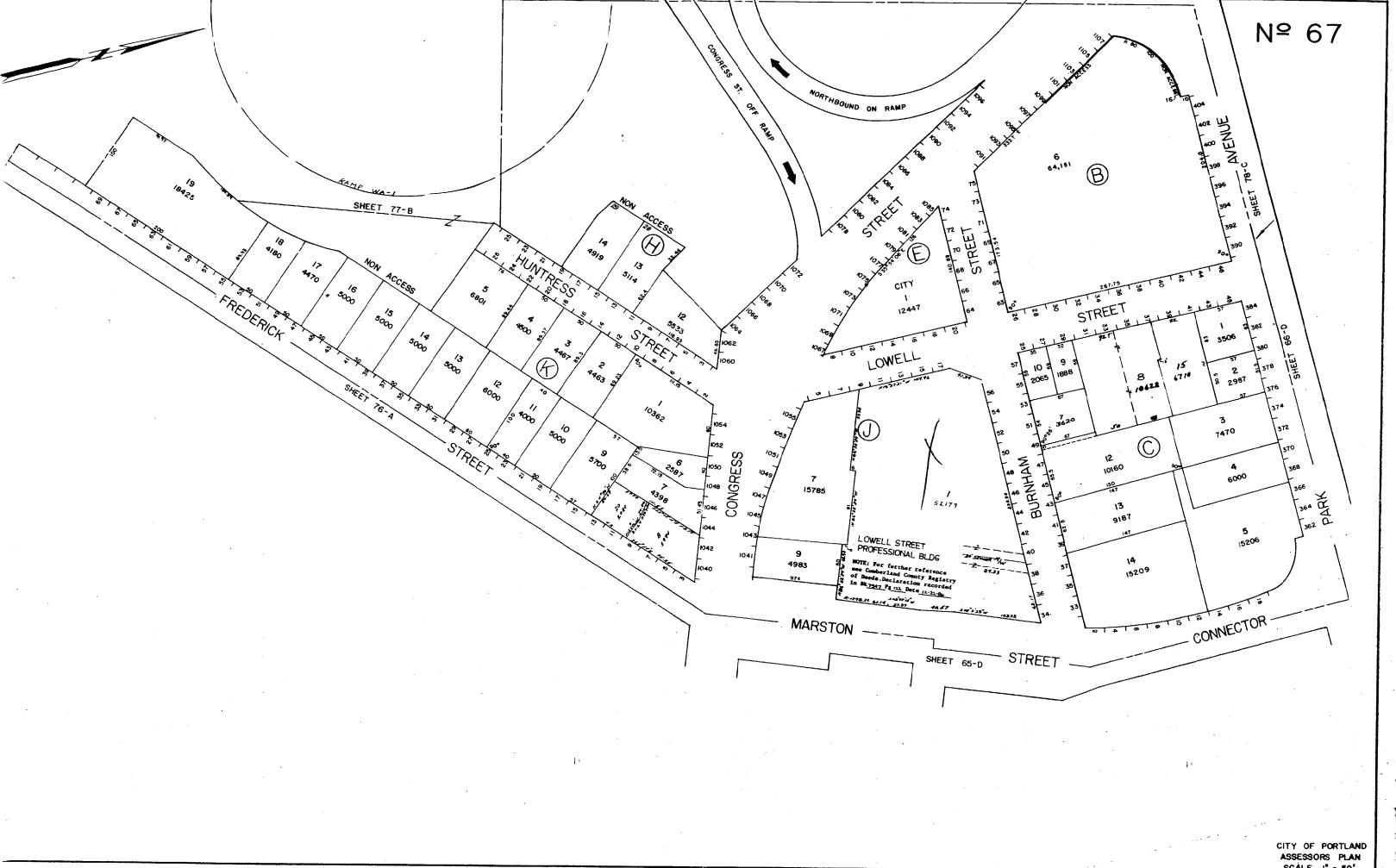
389 Congress Street, ( Location of Construction:		Owner Name:	,/11	(201) 014-011		Address:	<b>UN 2-8-20</b> 0	2	067 J00 Phone:	
			undra Associates			well St			774-8277	,
Business Name:		Contractor Name: Applicant				actor Addres	F PORT	AND	7/4-02// Phone	
					Portland					
Lessee/Buyer's Name		Phone:				t Type:			<b>_</b>	Zone:
					Alte	rations - Co	mmercial			18-2
ast Use: Proposed Use:		Proposed Use:			Permi	t Fee:	Cost of Work	: CE	O District:	7
L		Maine Eye Center/Dr's Office			\$107.00   \$12,000.00   3			3		
				FIRE DEPT: Approved INSPECTION:				ON:		
					ł		Denied	Use Group:	B	Type:
									~ do/	27/1
Proposed Project Description					4				$V^{\omega \chi}$	
Replace existing storefr		anlarged 10"	nutoma	tia daan	g		41444	_ (		1, 8
replace existing storen	ont, audition of	cinal ged, 46	s" automatic door.		Signat		IVITIES DIST	Signature:	my	m
					1				/	
					Action	ı: Appro	ved Appr	oved w/Con	ditions	Denied
					Signat	ure:		Da	te:	
Permit Taken By:	Date App	lied For:		***	<u> </u>	Zoning	Approval	]		
gg	06/13/2002									
1. This permit applica	-		Special Zone or Revie		ews	Zoning Appeal		] ]	Historic Preservation	
Applicant(s) from meeting applicable Federal Rules.		ble State and Shoreland				☐ Variance			Not in District or Landman	
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>			☐ Wetland ☐ Miscellaned		aneous		Does Not Require Review			
3. Building permits ar within six (6) month	hs of the date of	f issuance.	Flood Zone		Conditi	onal Use		Requires Review		
False information may invalidate a building permit and stop all work		building	Subdivision			Interpre	tation	Approved		
			☐ Si	te Plan		Approv	ed		Approved w/	Conditions
			Maj [	Minor MM		Denied			Denied	
			Date!	1/2010	<b>つ</b> 」	Date:		Date:		$\prec$
		'		9010						
				ERTIFICATI						
hereby certify that I am	the owner of re	cord of the na	med pro	operty, or that th	ne prop	osed work is	s authorized b	y the owr	ner of recor	d and that
have been authorized by	y the owner to r	nake this appli	cation a	as his authorized	d agent	and I agree	to conform to	all applic	cable laws	of this
urisdiction. In addition, hall have the authority to	o enter all areas	covered by su	i in me ch pern	application is is nit at any reason	ssuea, 1 1able h	certify that our to enforce	the code office	cial's authorion of the	orized repr	esentative
uch permit.			<b>F</b>			our to officia	oc ale provisi	ion of the	code(s) ap	pricable to
SIGNATURE OF APPLICAN	Т	·		ADDRES	5	•	DATE		РНО	NE NE
RESPONSIBLE PERSON IN	CHARGE OF WO	RK, TITLE					DATE		PHO	NE.

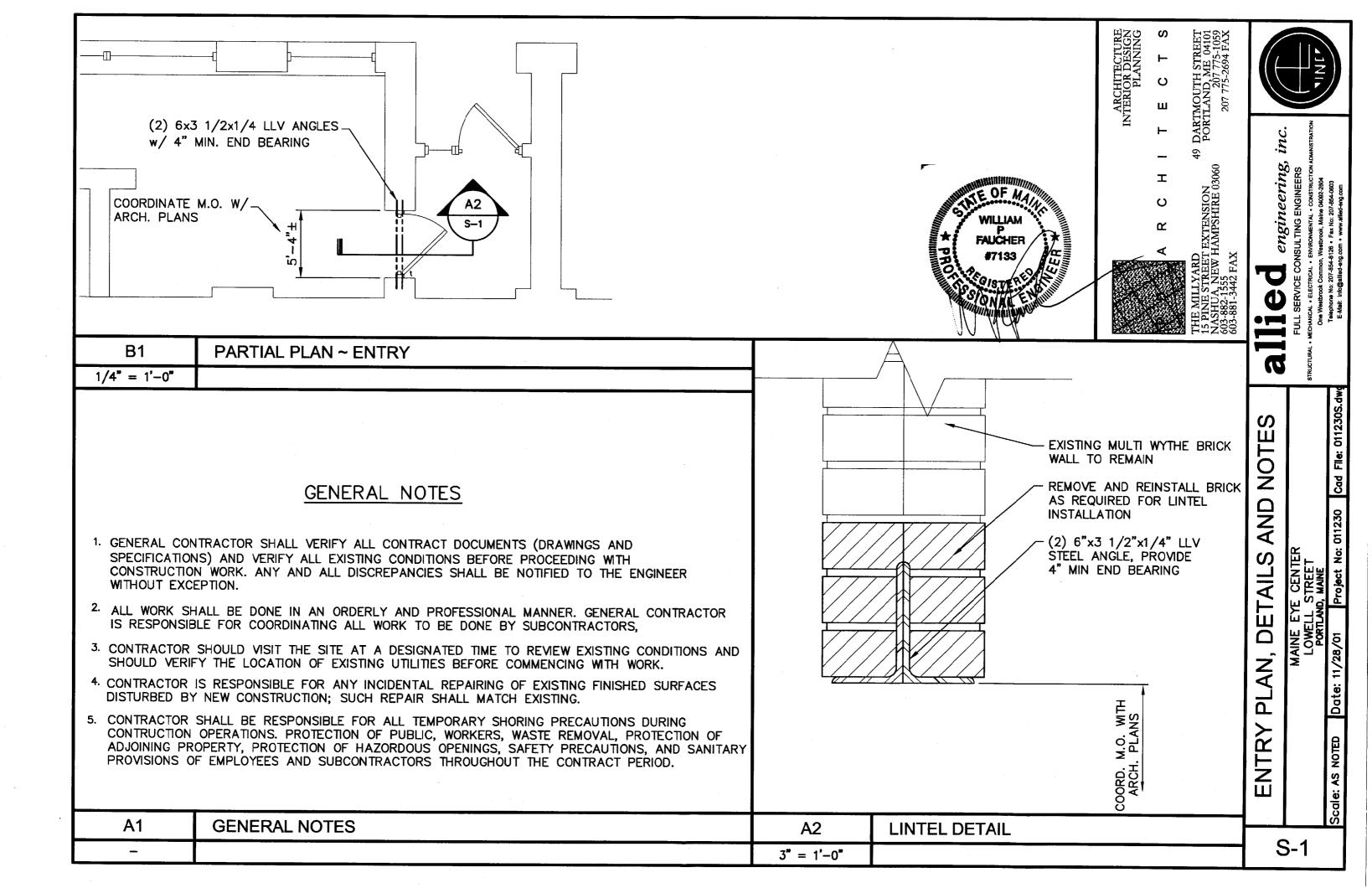
DATE

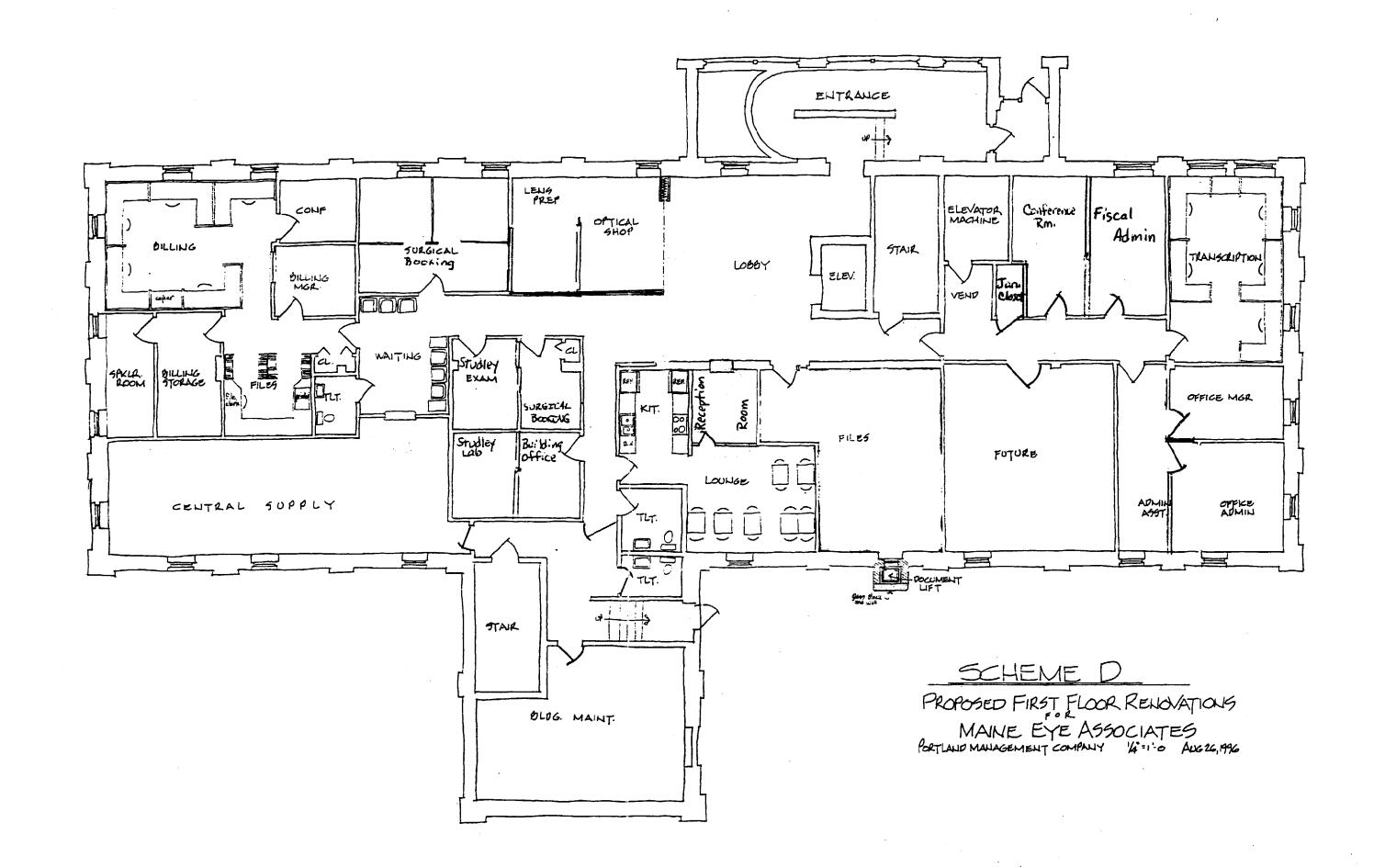
PHONE



CITY OF PORTLAND ASSESSORS PLAN SCALE !" = 50'

REVISED





Form # P 04

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

Please Read Application And Notes, If Any, Attached

## PERMIT

Permit Number: 020651

<del></del>	
This is to certify that Tundra Associates/Applicant	
has permission to Replace existing storefront, a	tion of carged, automata por.
AT 15 Lowell St	067 J00101A
provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and uthis department	ine and of the angles of the City of Portland requi

Apply to Public Works for street line and grade if nature of work requires such information.

n fication inspect in must in and with a permit on procuble re this liding or in thereof is added in the IR NOTICE IS REQUIRED.

A certificate of occupancy mus procured by owner before this bing or part thereof is occupied.

OTHER REQUIRED APPROVALS

artment Name

Director - Building & Injection Fervices

PENALTY FOR REMOVING THIS CARD

02-0651

#### All Purpose 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: Main	IE EVE C	ENTER 15 LOW	e26 ;	STREET	PORTLOND
Total Square Footage of Proposed Structu	Square Footage of Lot				
Tax Assessor's Chart, Block & Lot Chart# 7 Block# Lot#00 )	Owner:	ndra Ossocia	tes	Telepho	ne: -877
Lessee/Buyer's Name (If Applicable)	Applicant name, address & Cost Of telephone: where the Center Work: \$ 12,000.00				
Current use: PROFESSIONAL MEDICAL BUILDING  If the location is currently vacant, what was prior use:  Approximately how long has it been vacant:  Proposed use:  Proposed use:  Project description: REPLACE EXISTING STOREFRONT WITH NEW STOREFRONT THAT HAS A  Project description: REPLACE EXISTING STOREFRONT WITH NEW STOREFRONT THAT HAS A  48" DOUR WITH AN AUTOMATIC DOUR OPENER. ENLARGE INWER DOUR OPENINE  W BRICK HALL TO PROVIDE FASIER ALLESS.					
Contractor's name, address & telephone:  Who should we contact when the permit i  Mailing address: 15 Lowell STREET  PORTLAND MAINE	·	RIAN NEPRASH	Ph	** none: 774	1.8777 <sub>X</sub> 350

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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.

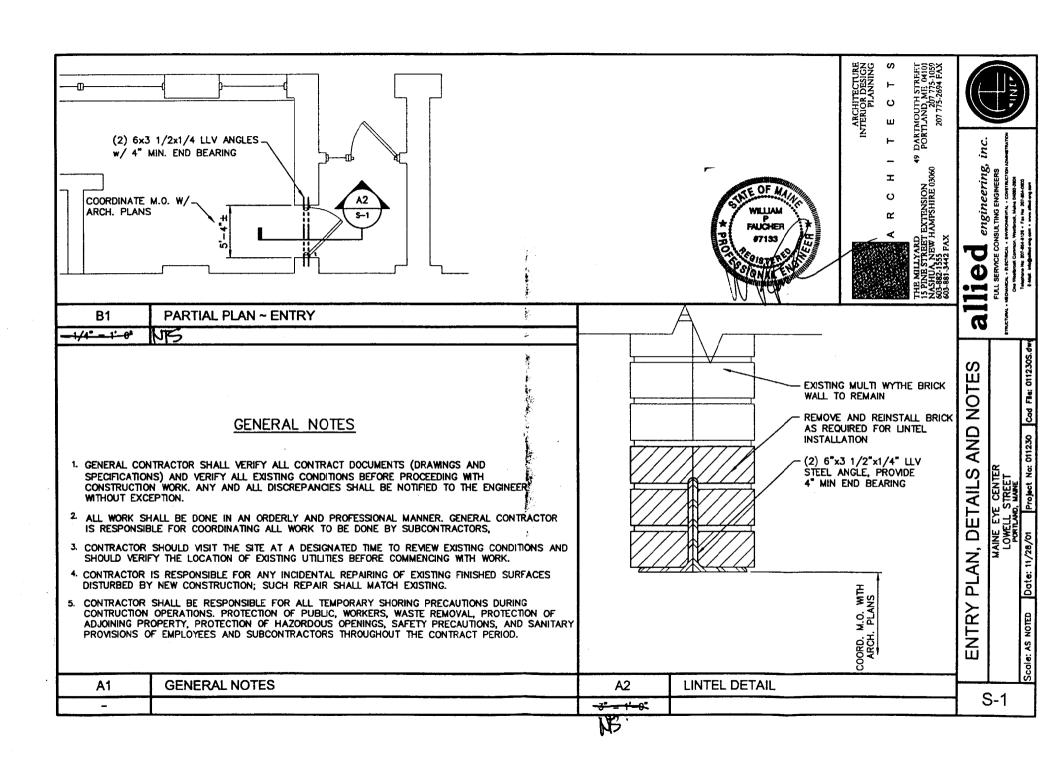
To Trilo portain.	2 2			
Signature of applicant:	Cherryalus	Na Pres [	Date: 6/13/0:	2
This is not a perm	it, you may hot commer	mee nce ANY worl	k until the pers	OF BUILDING INSPECTION THE STREET OF BUILDING INSPECTION ME
			jane.	JUN 1 3 2002

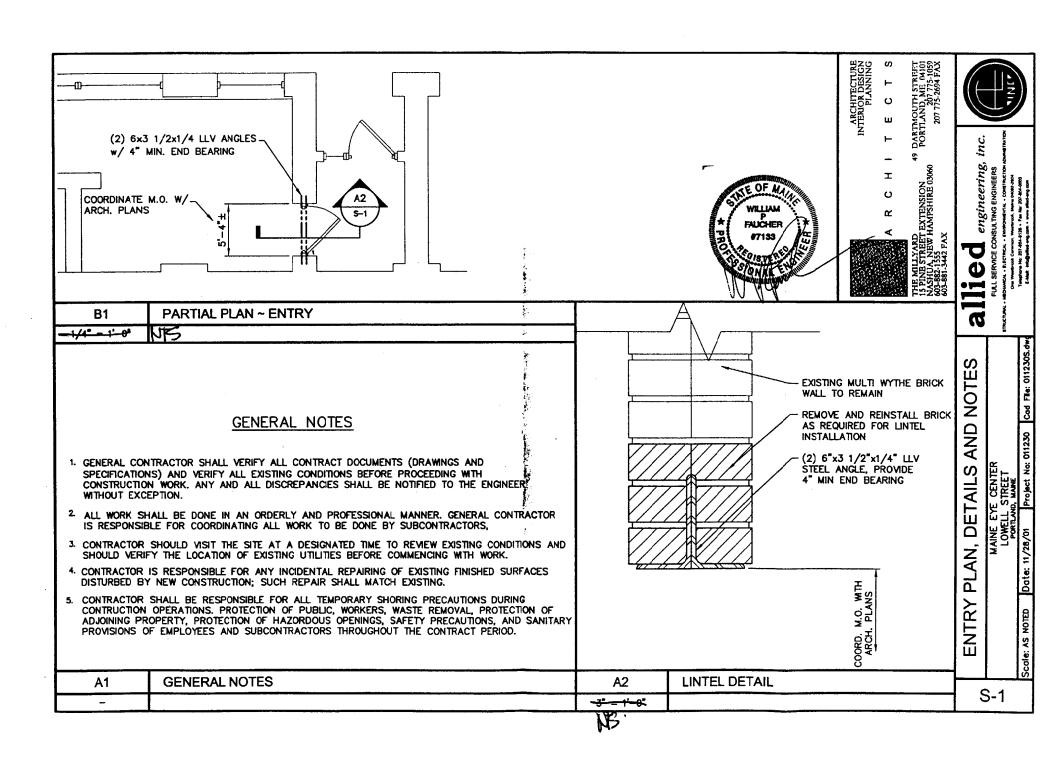
# BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

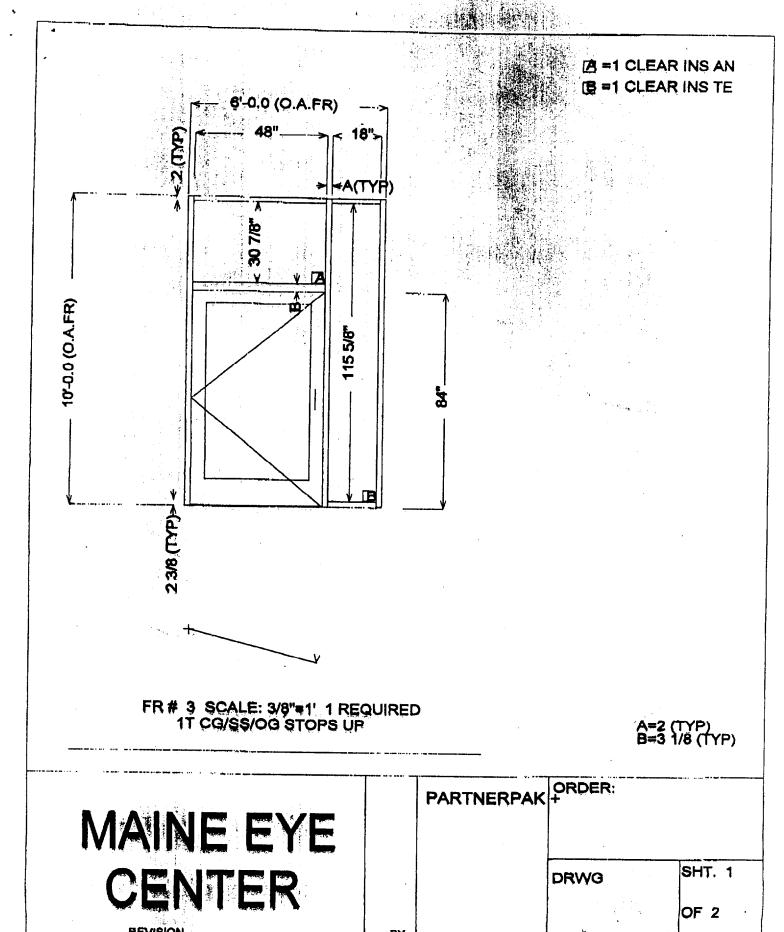
Permits expire in 6 months, if the project is not started or ceases for 6 months.

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:

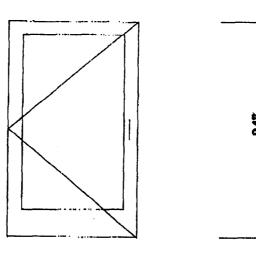
By initializing at each inspection time, you a inspection procedure and additional fees fro Work Order Release" will be incurred if the below Pre-construction Meeting: Must be streetipt of this permit. Jay Reynolds, Developmalso be contacted at this time, before any site wingle family additions or alterations.	om a "Stop Work Order" and "Stop e procedure is not followed as stated scheduled with your inspection team upon nent Review Coordinator at 874-8632 must
Footing/Building Location Inspection	n: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
raming/Rough Plumbing/Electrical	Prior to any insulating or drywalling
Final/Certificate of Occupancy: Prus	ior to any occupancy of the structure or e. NOTE: There is a \$75.00 fee per spection at this point.
Certificate of Occupancy is not required for cer you if your project requires a Certificate of Occinspection  If any of the inspections do not occur phase, REGARDLESS OF THE NOTICE O	ior to any occupancy of the structure or e. NOTE: There is a \$75.00 fee per spection at this point.  tain projects. Your inspector can advise upancy. All projects DO require a final the project cannot go on to the next R CIRCUMSTANCES.
CERIFICATE OF OCCUPANICES BEFORE THE SPACE MAY BE OCCUPIE	MUST BE ISSUED AND PAID FOR,
Signature of applicant/designee	1/, /o2 Date
Signature of Inspections Official	 Date
CBL: 067 5001 Building Permit #:	20651











### **DOOR ONLY**



REVISION

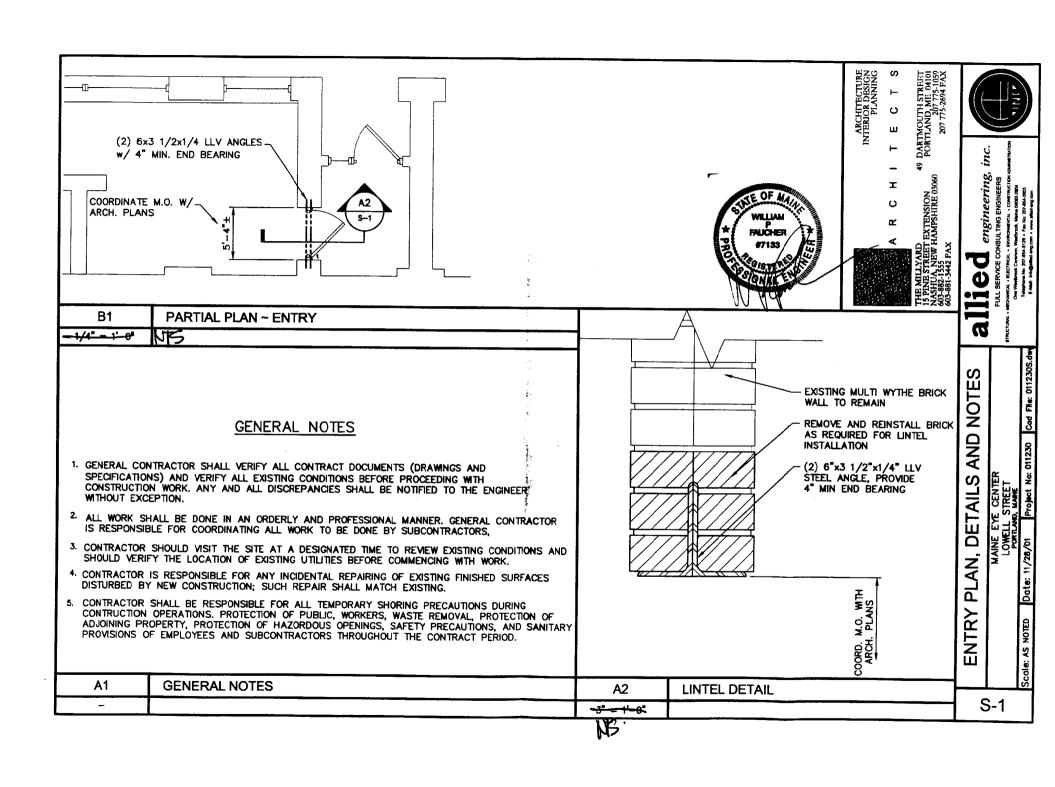
PARTNERPAK +

ORDER:

DRWG

SHT. 1

OF 2



June 12, 2002

This project is to provide easier access into the building. The first work to be done is to enlarge the door opening in the inner brick wall. The opening would be enlarged from  $36" \times 87"$  to  $64" \times 108"$ . This new opening will not have a door.

The second phase will consist of replacing the existing storefront with a new storefront that has a 48" wide door. The new storefront will be installed in the same footprint as the old storefront. The new door will be equipped with an automatic door opener, with two wall mounted push plate switches.

The brickwork will be done by: Gnome Masonry, PO Box 66803, Falmouth, ME 04105

The storefront and automatic opener will be installed by: **Cumberland County Glass**, South Portland, ME, 04116

All electrical work will be done by: T. A. Napolitano, South Portland, ME, 04116

Should there be any questions please contact me at 774-8277 ext 350.

Sincerely,

Brian J. Neprash Building Manager

Bran I Negard

June 12, 2002

This project is to provide easier access into the building. The first work to be done is to enlarge the door opening in the inner brick wall. The opening would be enlarged from 36" x 87" to 64" x 108". This new opening will not have a door.

The second phase will consist of replacing the existing storefront with a new storefront that has a 48" wide door. The new storefront will be installed in the same footprint as the old storefront. The new door will be equipped with an automatic door opener, with two wall mounted push plate switches.

The brickwork will be done by: Gnome Masonry, PO Box 66803, Falmouth, ME 04105

The storefront and automatic opener will be installed by: **Cumberland County Glass**, South Portland, ME, 04116

All electrical work will be done by: T. A. Napolitano, South Portland, ME, 04116

Should there be any questions please contact me at 774-8277 ext 350.

Sincerely,
Suas, J. Negal

Brian J. Neprash Building Manager