Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

WERECTION

PERM

lion a

Permit Number: 070636

epting this permit shall comply with all

uctures, and of the application on file in

Mances of the City of Portland regulating

This is to certify that PORTLAND BAY PROPER ES LLC

PERMIT ISSUED

has permission to Upgrade smoke wall to firew add ext properties or, enlar window, interior renovations & change bathroo

AT 415 FOREST AVE

OL. 111 C00\$001 JUL 9 2007

ine and or the

e of buildings and

rm or

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

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

ification of inspersion must be an and vote en permotion proceed or the ilding or the state of the control of t

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Crea CLARS

Health Dept.

Appeal Board_

Other

Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - B	Building or Use	Permi	t Application	n	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Te	el: (207) 874-8703	, Fax:	(207) 874-871	6	07-0636			111 C00	05001
Location of Construction:	Owner Name:		_	O	wner Address:			Phone:	-
415 FOREST AVE	PORTLAND	BAY PROPERTIES L		1	7 PHIPPS ST				
Business Name:	Contractor Name	::		Co	ontractor Address:			Phone	
Lessee/Buyer's Name	Phone:		1	Do	umit Tuna		_		Гаста
Lessee Buyer 3 Name I none.				1	Alterations - Con	nmercial			BZb
Past Use:			of you office		ermit Fee:	Cost of Work	c: Ci	EO District:	7
Commercial - Retail Amendmen			Upgrade Shaw	Ľ		\$8,00		1	
to permit# 070154	smoke wall to		l, add exterior ndow, interior	F	IRE DEPT:	Approved	INSPECT	TION:	N
	renovations &	_			Denied Use Gro			PBIT	Type: 5
	location						TUKE	But	. 2
Proposed Project Description: Char	440(154)	``1	(1.3)	ł			I	y T	007
Upgrade smoke wall to firewall, a	dd exterior entry do	いしいり oor. enla	rge window.	Si	gnature:		Signature:	I	19/12
interior renovations & change bath	•		g	\vdash	· (xeu	VITIES DIST		(0.)	1 / /
11 Leonardo	S Proze			Δ	ction: Approv	red 🗀 Anni	roved w/Co	anditions [7]	Denied
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			^	ction. Approv	са [лрр	ioved wice		Defiled
				Si	ignature:		D	Date:	
	te Applied For:				Zoning	Approva	1		
	5/30/2007	Sne	cial Zone or Revie	we	Zonir	ng Appeal		Historic Prese	
1. This permit application does a Applicant(s) from meeting ap	•	l		•		: <u> </u>	. /		
Federal Rules.	pricable State and	Shoreland		Variance		"	Not in District or Landmar		
2. Building permits do not inclu	da nlumbina	$ _{\square_{\mathbf{w}}}$	Wetland Miscellaned		neous	us Does Not Require		mire Review	
septic or electrical work.	de plumonig,		= 100 -th(1) =			Does Not Require Review			
3. Building permits are void if v	vork is not started	Flood Zone			Condition	Conditional Use		Requires Review	
within six (6) months of the d		_	The state of	21/					
False information may invalid	date a building	Su Su	ibdivision	<i>y</i> •	[Interpret	ation	[-	Approved	
permit and stop all work									
		Si	te Plan		Approve	d		Approved w/0	Conditions
PERMIT ISS	SUFD				f				
T EXTENT TO	7	Maj	Minor MM		Denied			Denied	_
		10/	1117		Datas		Data		\geq
JUL 9 ;	2007	Date:	60 V V		Date:		Date		
			•						
CITY OF POR	RTLAND								
		C	ERTIFICATION	ON	Ţ				

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

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 07-0636 05/30/2007 111 C005001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Owner Address: Phone: 415 FOREST AVE 67 PHIPPS ST PORTLAND BAY PROPERTIES L **Business Name:** Contractor Name: Contractor Address: Phone Leonardo's Pizza Lessee/Buyer's Name Phone: Permit Type: Change of Use - Commercial Proposed Use: **Proposed Project Description:** Commercial - Change of use - office to retail establishment-Upgrade smoke wall to firewall, add exterior entry door, enlarge "Leonardo's Pizza" - Upgrade smoke wall to firewall, add exterior window, interior renovations & change bathroom location entry door, enlarge window, interior renovations & change bathroom location **Approval Date:** 06/06/2007 **Dept:** Zoning Status: Approved with Conditions **Reviewer:** Marge Schmuckal Note: Permit #07-0070 was issued to Phil Coupe (Cartridge World) for a change of use from office to retail. Phil Ok to Issue: Coupe is no longer leasing the space so the change of use process was never completed and the legal use at this point is still an office.(a machado) 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. 07/09/2007 **Dept:** Building **Status:** Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** Ok to Issue: Note: 1) This comment is from the ICC for another project on use classification and separation. It states how a "take out" food establishment is classified. Regarding the Pharmacy as a Business Occupancy 1 – As the use was described to be a professional pharmacy and not a drug store, John informed us that it would be considered a business occupancy. John said that this was similar to a take-out food establishment being classified as a Business Occupancy in lieu of Assembly. 2) The wall is allowed to be 1 hour based on the occupancy classification of the pizza take out as "B" as long as the adjacent office/professional space is maintained. 3) All penetratios through rated assemblies must be protected by an approved firestop system installed as tested in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712. 4) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process. 5) Need drawing from FMC Cadd for the bathroom in the adjacent space Dept: Fire Status: Approved Reviewer: Capt Greg Cass **Approval Date:** 06/07/2007 Ok to Issue: Note:

Comments:

7/6/2007-jmb: Phill George called about the permit status. Chris H. Has been reviewing the plans and had requested designed plans based on the scope of the work and project costs. This plan was received from FMC Cadd on 6/29/07. Will need a reduced copy.

7/6/2007-jmb: Spoke to Lee at FMC Cadd to verify the type of construction, shows 1B, the B-type wall is listed as 1-hour, needs to be 2 hour to separate A-2 from M uses. He will make the changes and pdf the file.

7/6/2007-jmb: Left voicemsg w/Phil George to verify the abutting business and if work is associated in there, also to verify the grease trap.

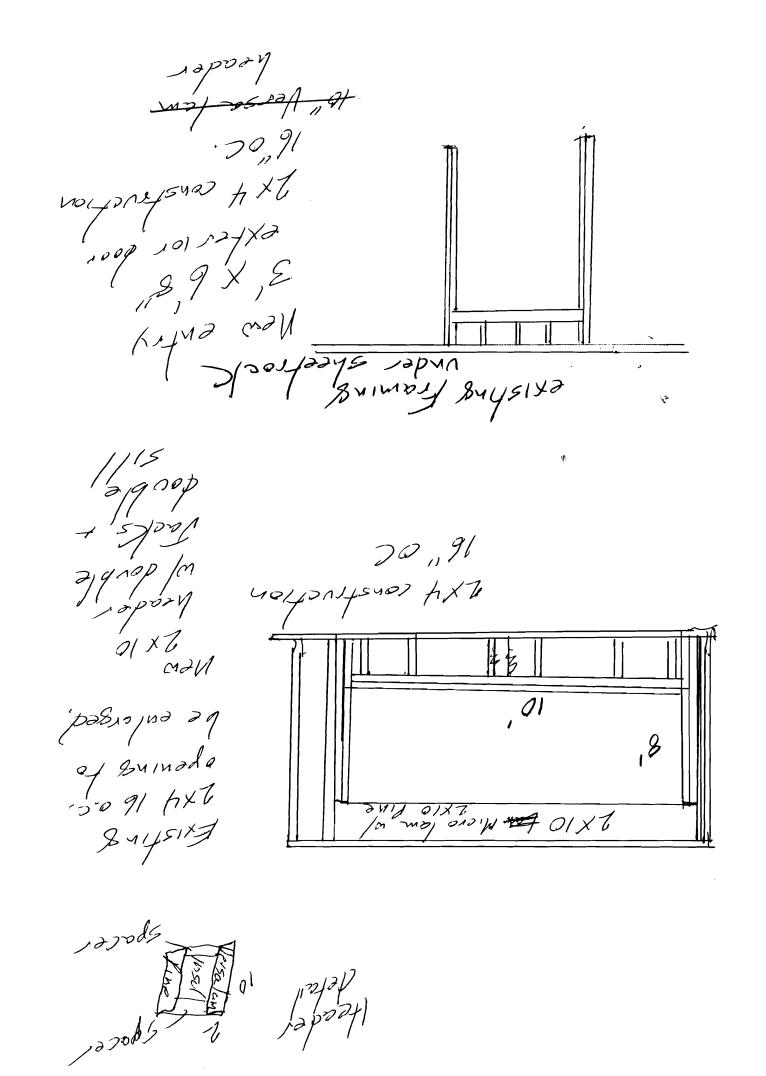
General Building Permit Application

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:	15 Fore	st Ave,	
Total Square Footage of Proposed Structure		Square Footage of Lot	
11/11			
Tax Assessor's Chart, Block & Lot	Owner:	Hund Buy Prope	. Telephone:
Chart# Block# Lot#	100	The Day Trope	Wiles
111 6005001			
Lessee/Buyer's Name (If Applicable)		ne, address & telephone:	Cost Of + 8000 CC
Phil George	Phil Geo	rge	
	PO Box	486	Fee: \$ 100 00
	Burlingt	len VT 05407	-
Current legal use (i.e. single family)		802-734-029	C of O Fee: \$
If vacant, what was the previous use?			
Proposed Specific use:	·a1/		
Is property part of a subdivision?	lf y	yes, please name	17.11111
Troject description. Opgrade smoke	wall(perm	1 40 10137)	n rivewall. 1904
exterior entry door. Enlar	ge exist	ing window.	Keinere 14/PP105
Project description: Upgrade smoke exterior entry door. Enlar non supporting partition: Partitions. Attach exterior Contractor's name address & telephone.	s. Constru	of interior n	1011 5 VPP 1-1748 110
Contractor's name, address & telephone:	aupings	CHEF WINGOLDS + Q	100%. NEIOCATE PAINID
	41/		A
Who should we contact when the permit is rea Mailing address:	Phone: 80	2-7340290	- (h
ivianing address.	1 none 30 /	1310710	
Please submit all of the information out		//. \ a\	n Checklist.
Failure to do so will result in the autom	atic denial of	your permit.	
In order to be sure the City fully understands the fu	ıll scope of the pro	pject, the Planning and Deve	lopment Department may
request additional information prior to the issuance			
other applications visit the Inspections Division on- room 315 City Hall or call 874-8703.	-line at <u>www.portl</u>	andmaine.gov, or stop by the	e hispections Division office,
,			
I hereby certify that I am the Owner of record of the name	ned property or that	the owner of record authorizes	s 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 applicat authority to enter all areas covered by this permit at any re			
Signature of applicant:	N I	Date: . 7	-22-07
- May S	WV-		

Belmeade Road Applicant's designated barking Speces Forest Avenue 12 15 H-19 USA Nails 2743 Sq. Ft. & Dancing Elephant 1462 Sq. Ft.

Frewell defails Unfinished 20 ZXY (A) Windows 40 x 5022 Interior 5'6" drywall both sides to ridge the tridge the rated door. Pamper to be installed hamper to be disturbed. construction with 5/8 partition is 2X4 Proposed dividing occupancy source mar cantilo C Proposed t not 1100 δ sperse Proposed dividing (monscrynorting) 29 Bath AT(1) 1800 4 00st 1 3/32 Scale Retail 21'8" 20 Frost ****
*** 47





City, State, Zip: Portland,

Single 1-3/4" x 9-1/2" VERSA-LAM® 2.0 3100 SP

Floor Beam\FB02

BC CALC® 9.3 Design Report - US Build 047

415 Forest Ave

Brian Schidzig

ESR-1040

1 span | No cantilevers | 0/12 slope

Tuesday, May 29, 2007 16:34

File Name: BC CALC Project Job Name: Coupe

Description: FB02 Specifier:

Designer:

Rufus Deering Lumber Company Company: Misc:

Window Header on gable wall

10-00-00

B0. 3-1/2" LL 600 lbs **DL 173 lbs**

Address:

Customer:

Code reports:

B1, 3-1/2" LL 600 lbs **DL 173 lbs**

Total Horizontal Product Length = 10-00-00

Load Summary					Live	Dead	Snow	Wind	Roof Live	е
Tag Description	Load Type	Ref.	Start	End	100%	90%	115%_	133%	125%	Trib.
1 Standard Load	Unf. Area (psf)	Left	00-00-00	10-00-00	40	10				03-00-00

Controls Summary	Value	% Allowable	Duration	Load Case	Span Location
Pos. Moment	1760 ft-lbs	25.2%	100%	1	1 - Internal
End Shear	606 lbs	19.2%	100%	1	1 - Left
Total Load Defl.	L/993 (0.115")	48.4%		1	1
Live Load Defl.	L/1279 (0.089")	37.5%		1	1
Max Defl.	0.115" `	23.1%		1	1
Span / Depth	12.1	n/a			1

Beari	ng Supports	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material
B0	Post	3-1/2" x 1-3/4"	773 lbs	n/a	16.8%	Unspecified
B1	Post	3-1/2" x 1-3/4"	773 lbs	n/a	16.8%	Unspecified

Cautions

Column at Bearing B0 analyzed for bearing only, column analysis has not been performed. Column at Bearing B1 analyzed for bearing only, column analysis has not been performed.

Notes

Design meets User specified (L/480) Total load deflection criteria. Design meets User specified (L/480) Live load deflection criteria. Design meets arbitrary (0.5") Maximum load deflection criteria.

Disclosure

Completeness and accuracy of input must be verified by anyone who would rely on output as evidence of suitability for particular application. Output here based on building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with current Installation Guide and applicable building codes. To obtain Installation Guide or ask questions, please call (800)232-0788 before installation.

BC CALC®, BC FRAMER® , AJS™, ALLJOIST® , BC RIM BOARD™, BCI® , BOISE GLULAM™, SIMPLE FRAMING SYSTEM®, VERSA-LAM®, VERSA-RIM PLUS®, VERSA-RIM®, VERSA-STRAND®, VERSA-STUD® are trademarks of Boise Wood Products, L.L.C.



Single 1-3/4" x 7-1/4" VERSA-LAM® 2.0 3100 SP

Roof Beam\RB01

BC CALC® 9.3 Design Report - US Build 047

1 span | No cantilevers | 2/12 slope

Tuesday, May 29, 2007 16:38

Job Name: Coupe

Address: 415 Forest Ave City, State, Zip: Portland,

Customer: Brian Schidzig
Code reports: ESR-1040

File Name: BC CALC Project

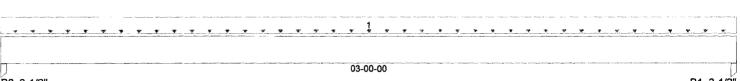
Description: RB01

Specifier: Designer:

Company: Rufus Deering Lumber Company

Misc: Door Header 3'

12



B0, 3-1/2" DL 142 lbs SL 450 lbs B1, 3-1/2" DL 142 lbs SL 450 lbs

Total Horizontal Product Length = 03-00-00

Load Summary					Live	Dead	Snow	Wind	Roof Live	
Tag Description	Load Type	Ref.	Start	End	100%	90%	115%	133%	125%	Trib.
1 Standard Load	Unf. Area (psf)	Left	00-00-00	03-00-00		15	50		0	6-00-00

Controls Summary	Value	% Allowable	Duration	Load Case	Span Location
Pos. Moment	319 ft-lbs	6.6%	115%	3	1 - Internal
End Shear	239 lbs	8.6%	115%	3	1 - Left
Total Load Defl.	L/9020 (0.003")	5.3%		3	1
Live Load Defl.	L/11872 (0.003")	4.0%		3	1
Max Defl.	0.003" `	0.7%		3	1
Span / Depth	4.2	n/a			1

Bear	ing Supports	Dim. (L x W)	Value	% Allow Support	% Allow Member	Material	
B0	Post	3-1/2" x 1-3/4"	592 lbs	n/a	12.9%	Unspecified	
B1	Post	3-1/2" x 1-3/4"	592 lbs	n/a	12.9%	Unspecified	

Slope and Cut Length	Slope	Facia Depth	Horiz. Length	Product Length
Plumb Cut with Hanger to dbl. top plate	2/12	3-1/2"	03-00-00	03-01-11

Cautions

Column at Bearing B0 analyzed for bearing only, column analysis has not been performed. Column at Bearing B1 analyzed for bearing only, column analysis has not been performed.

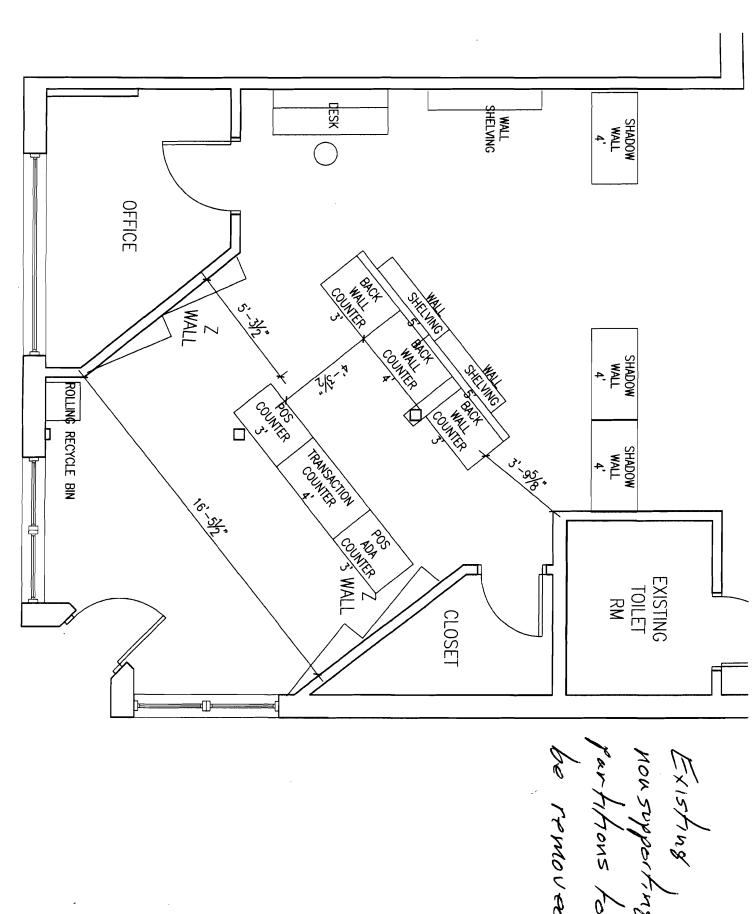
Notes

Design meets User specified (L/480) Total load deflection criteria. Design meets User specified (L/480) Live load deflection criteria. Design meets arbitrary (0.5") Maximum load deflection criteria.

Disclosure

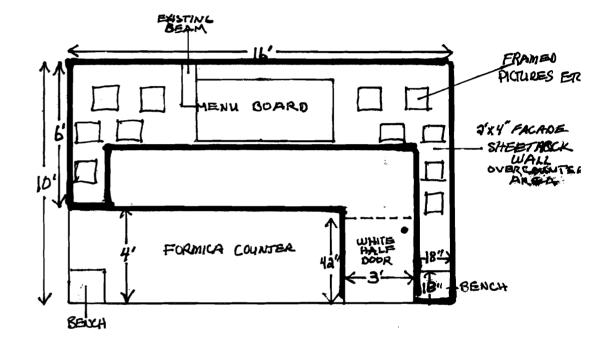
Completeness and accuracy of input must be verified by anyone who would rely on output as evidence of sultability for particular application. Output here based on building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with current Installation Guide and applicable building codes. To obtain Installation Guide or ask questions, please call (800)232-0788 before installation.

BC CALC®, BC FRAMER®, AJS™, ALLJOIST®, BC RIM BOARD™, BCI®, BOISE GLULAM™, SIMPLE FRAMING SYSTEM®, VERSA-LAM®, VERSA-RIM PLUS®, VERSA-RIM®, VERSA-STUD® are trademarks of Boise Wood Products, L.L.C.



Existing partitions to be removed.

ELEVATION RIGHT FRONT COUNTER AREA

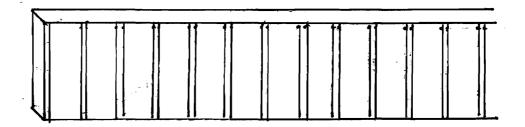


FRONT COUNTER WALLS

CONSTRUCTION ;

DEPICTED ON DRAWING IN CREEN

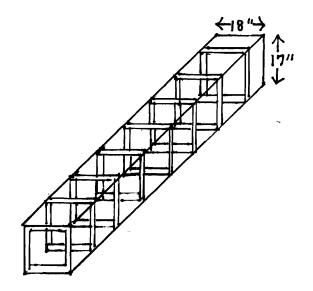
2"X 6" WOOD FRAME, 16" CENTER
COVERED W/ 3/4" WOOD PARTICLE BOARD
FINISHED W/ WHITE LAMENATE
TOPS ON COUNTERS 3/4 PLYWOOD
FINISHED WIDTH, 7"



CUSTOMER BENCH SEATS

CONSTRUCTION:

2"X4" WOOD FRAME COVERED W/ 3/4 PLYWOOD TRIM DETAIL & PAINTED DEPICTED ON DRAWING

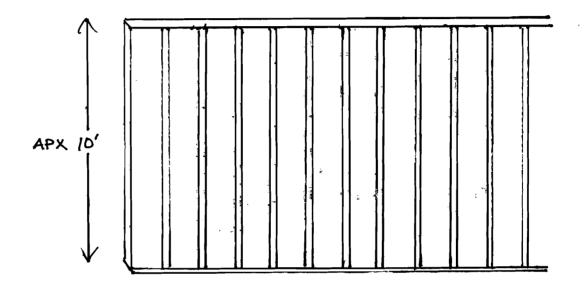


NON SUMPORTING WALLS

CONSTRUCTION; 2"X 4" WOOD FRAME, 16"CENTER,

L'A SHEETROCK, TAPED,
SANSED & PAINSED

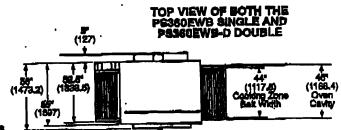
DEPICTED ON DRAWING

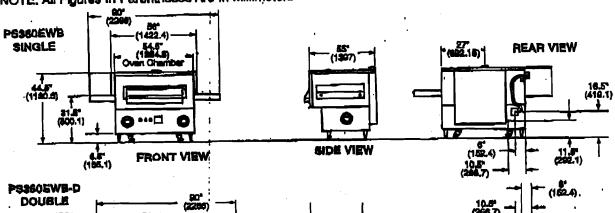


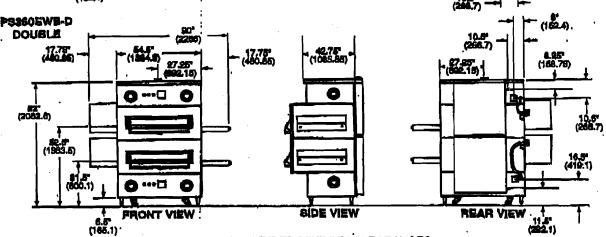


Building chamber opening: 3.878" (98.42 mm). Scale .25" (8.35 mm) \sim 1' (304.8 mm) approx.

NOTE: All Figures in Parentheses Are in Millimeters







: RECOMMENDED MINIMUM CLEARANCES

1100	DIMMENTO LO MINTINIO	IN CERT (I A TI LOCATO
Rear of Oven to Wall	Leit Conveyor Extension to Willi	Right Conveyor Extension to Wat (control panel side)
1" (25.4)	, 04	C)*

GENERAL INFORMATION

		Heating Zone	Enjan Charrisas	Bet Welth	Height .	Width	Depth	Max. Operating Temp.	Bairo Time Ranga	Ship Wi (ibs.)	Ship Cube per cavity
	PEAGOEWS SINGS	54.5" (1 564.3)	16.86 eq. ft. (1.546 eq. m)		44.5° (1130.3)	90° (2286)	63° (1600,E)	550° (287°C)	4 min. to 29 min., 50 esc.	1675	158 RF
_	F5360EWE Double	109* (2768.6)	33.3 mg. ft. (3.093 eq. m)	44° ; (1117年)	(2082.8) 60°	(5500) 80	63° (1600.2)	850° (267°C)	4 min. to 28 min., 80 sec.	2250	150 TC

GAS SUPPLY PROVIDED BY CUSTOMER

Min. Gas Pipo Sixo G	ha Velves (full flow gas abut-off valve)	Regid Supply Gas Pressure	Power			
Natural Gas 1 or 2 ovens 2" (508) NPT .7	5" (19.05) 3D each oven	6" (162.4) to 14" (855.6) water column	170,000 STU/HR per cavity			
Propens Gas 1 or 2 04906 1.5" (28.1) NFT .7	ST (18.00) IO much comp	11.5" (292.1) to 14" (355.6) water column	120 000 STI Will our on the			

ELECTRICAL RATINGS

{		Voltage	Physics	HZ	Amps	Grounding	Breakers
**	(Gas Pina Ovens)	206 or 240	1	80/80	15-	8 pole, 4 wire	per iocal codes

The gas supply prejauras shown are for evens installed in North America The required gas supply pressures of other locations are dependent on local gas type and on all applicable local codes



Middleby Marshell Inc. 1400 Toestmaster Dr. Elgin, IL 60120 USA 1-800-323-5575 FAX (600) 635-4725

GAS OVEN ROUGH-IN

UTILITY ROUGH-IN DIMENSIONS AND POSITIONING FOR PS310 and PS360 SERIES OVENS

CAUTION

IT IS REQUIRED THAT THE OVEN BE PLACED UNDER A VENTILATION HOOD FOR ADEQUATE AIR SUPPLY AND VENTILATION!

> **GAS SUPPLY** Ł

ELECTRICAL SUPPLY PROVIDED BY CUSTOMER

DO NOT USE CONDUIT FOR GROUND

CIRCUIT BREAKER

20 Amp circuit breaker for each cavity. Wire each cavity separately.

ELECTRICAL SPECIFICATIONS

208-240V main blower motors; 1 Ph. 8 Amo draw, 50/60 Hz, 120V control circuit, 3 pole, 4 wire system per cavity (2 hot, 1 neut, 1 grd).

EXPORT: 208-240V or 200-220V main blower motors, 1 Ph, 8 Amp draw, 50/60 Hz, 120V transformer control circuit, 2 pole, 3 wire system per cavity (2 hot, 1 grd).

GAS RATING

Models P\$310, P8380 - 135,000 BTU/Hour. 34,020kcm/HR, 40kW/HR

MINIMUM GAS METER RATING

600 Cu.FL/Hour (17mh) for 1 or 2 even cavities.

1200 Cu.FL/Hour (34mh) for 8 or 4 even CEVITION.

Minimum rating may not take other gas appliances imo consideration. Cas consumption veries at each site, Total STUMA (local/hr) must be calculated on high flame off of each appliance to determine if mater needs to be larger,

MINIMUM.GAS PIPE SIZE

Natural: 2º (51 mm) ID for 1 or 2 oven cavities with runs up to 200 ft.(61m).

2-1/2" (64mm) ID for 3 or 4 often cavitles with runs up to 200 fL(61m)

Must be a dedicated line. Runs over 200 ft. consult factory

Propane: 1-1/2" (38mm) ID for 1 or 2 oven cavities with runs up to 200 \$ (61m).

2" (51 mm) ID for 3 or 4 over cavities with runs up to 200 ft.(61m).

Must be a dedicated line. Runs over 200 ft, consult factory

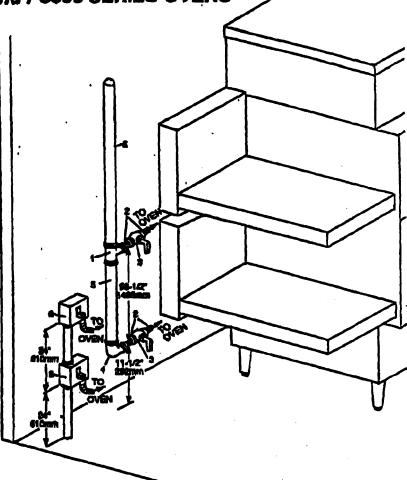


Figure 2-13 Oven Rough-In

GAS VALVES

3/4" (19mm) ID tull flow gas shut-off valve. A separate connection and valve must be provided for each oven.

REQUIRED SUPPLY GAS PRESSURE

Natural: 6 " to 12 " (152 to 305mm) water column Properse: 11.5" to 12" (292 to 305mm) water column

SUGGESTED

If space permits service should be located to the left of the ovens to allow access to switches and valves.

User Supplied Items:

TEM DESCRIPTION

- 1° 2'(51mm) X 2'(51mm) X 3/4'(19mm) TEE 2 3/4''(19mm) X 3'(76mm) NIPPLE
- 3/4" (19mm) FULLFLOW GAS SHUT-OFF VALVE
- 2"(51mm) X 9/4"(19mm) 90" REDUCER ELBOW
- 2"(E1mm) ID GAS SUPPLY PIPE LINE-NATURAL GAS
- 6 15 AMP TOGGLE SWITCH 2 POLE for GAS *NOTE: You must use 2-1/2" diameter pipe (items 1,4 & 5) for tandem ovens.

