

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

## BUILDING INSPECTION

Please Read Application And Notes, If Any, Attached

Permit Number: 061297

This is to certify that MSM ENTERPRISES LTD Builds Construction

has permission to CVS Pharmacy- interior renovations

AT 449 FOREST AVE

111 A016001

PERMIT ISSUED  
OCT - 2 - 2006  
CITY OF PORTLAND

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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.

Notification of inspection must be given and when permission procedure before this building or part thereof is occupied or service closed-in. 4 HOUR NOTICE REQUIRED.

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

OTHER REQUIRED APPROVALS  
Fire Dept. Greg Cass PFD  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

William A. Collins  
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: 06-1297	Issue Date:	CBL: 111 A016001
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Location of Construction: 449 FOREST AVE	Owner Name: MSM ENTERPRISES LTD	Owner Address: 449 FOREST AVE	Phone:
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Business Name: CVS Pharmacy	Contractor Name: Teds Construction	Contractor Address: 1081 Diamond Hill Road Woonsocket	Phone: 4017694285
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Lessee/Buyer's Name	Phone:		
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Past Use: Commercial /CVS Pharmacy	Proposed Use: CVS Pharmacy- interior renovations	Permit Fee: \$510.00	Cost of Work: \$49,000.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO N+PA 101	INSPECTION: Use Group: M Type: JB FEB 2003
Signature: Green, Cass	Signature: [Signature] 09/20/06

Proposed Project Description:  
CVS Pharmacy- interior renovations

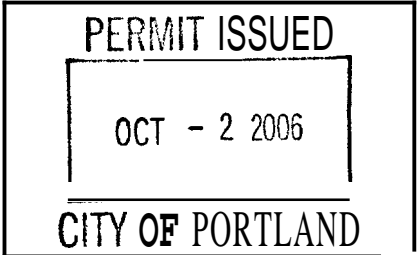
Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: Idobson	Date Applied For: 09/06/2006
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**Zoning Approval**

<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 9/14/06	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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**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

<b>Permit No:</b> 06-1297	<b>Date Applied For:</b> 09/06/2006	<b>CBL:</b> 111 A016001
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<b>Location of Construction:</b> 449 FOREST AVE	<b>Owner Name:</b> MSM ENTERPRISES LTD	<b>Owner Address:</b> 449 FOREST AVE	<b>Phone:</b>
<b>Business Name:</b> CVS Pharmacy	<b>Contractor Name:</b> Teds Construction	<b>Contractor Address:</b> 1081 Diamond Hill Road Woonsocket	<b>Phone</b> (401) 769-4285
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> CVS Pharmacy- interior renovations	<b>Proposed Project Description:</b> CVS Pharmacy- interior renovations
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<b>Dept:</b> Building <b>Status:</b> Approved with Conditions <b>Reviewer:</b> Michael A. Collins <b>Approval Date:</b> 09/28/2006			
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) 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.			
2) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			
<b>Dept:</b> Fire <b>Status:</b> Approved with Conditions <b>Reviewer:</b> Cptn Greg Cass <b>Approval Date:</b> 09/19/2006			
<b>Note:</b>			<b>Ok to Issue:</b> <input type="checkbox"/>
1) All construction shall comply with NFPA 101			



# 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>449 FOREST AVE, PORTLAND, ME 04101</u>		
Total Square Footage of <del>Proposed</del> <u>EXISTING</u> Structure <u>8,506 S.F.</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>111</u> Block# <u>A</u> Lot# <u>14</u>	Owner: <u>JAMES L. GUILD, TRUSTEE</u> <u>NEW CITY TRUST II 40/T</u> <u>715 ROULSTON ST.</u> <u>BOSTON, MA 02116</u>	Telephone: <u>(617) 266-4040</u>
Lessee/Buyer's Name (If Applicable) <u>CVS REALTY CO</u> <u>ONE CVS DRIVE</u> <u>WOONSOCKET, RI 02895</u> <u>(401) 765-1500</u>	Applicant name, address & telephone: <u>TED'S CONSTRUCTION</u> <u>1021 DIAMOND HILL RD.</u> <u>WOONSOCKET, RI 02896</u> <u>(401) 769-4285</u>	Cost Of Work: \$ <u>49,000.</u> Fee: \$ _____ C of O Fee: \$ _____
Current Specific use: <u>MERCANTILE / PHARMACY</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>SAME</u>		
Project description: <u>PHARMACY RENOVATION - NEW PICTURES, SECURITY GRILLE, CARPET, PAINT WALLS.</u>		
Contractor's name, address & telephone: <u>SAME AS APPLICANT.</u>		
Who should we contact when the permit is ready: <u>RON AUBIN; TED'S CONSTRUCTION</u> Mailing address: _____ Phone: <u>(401) 769-4285</u>		

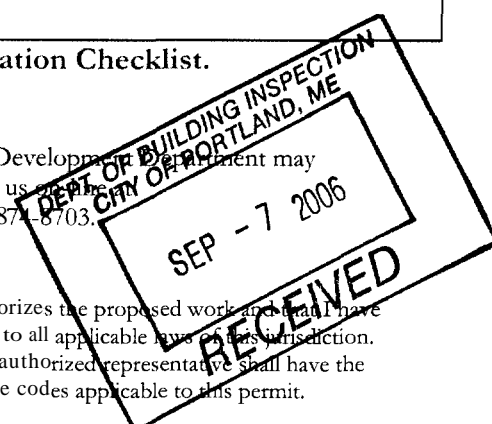
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

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 visit us at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections office, room 315 City Hall or call 877-8703.

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 of applicant: <u>[Signature]</u>	Date: <u>9/6/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.





**CVS** Realty Co.

June 9, 2006

New City Trust II  
715 Boylston Street  
Boston, MA 02116

Re: CVS STORE #0374 Portland, ME

To Whom It May Concern:

We are planning a Rx Renovation project at the above-mentioned CVS location. The scope of work entails interior modifications and cosmetic improvements to the Pharmacy area. There are no structural modifications planned.

Although your lease agreement with CVS does not require approval for this type of work your consent is needed so that we may obtain the necessary building permits. Please indicate your consent to this project by signing and dating this letter where indicated below and returning it to my attention via fax.

If you have any questions or concerns regarding this project, please do not hesitate to contact me.

Sincerely,

*Brad McCaffrey*  
William Starck Architects, Inc.  
Phone: 508-679-5733  
Fax: 508-672-8556

I hereby approve this special project.

JAMES GOULD  
(Print Name/Title)

*[Signature]*  
(Authorized Signature)

\_\_\_\_\_  
(Date)



**CVS** Realty Co.

September 12, 2006

Greg Cass, Fire Prevention Officer  
C/O Portland Fire Department  
380 Congress Street  
Portland, ME 04101

**Re: CVS STORE #0374, 449 Forest Ave., Portland, ME**

Dear Mr. Cass,

I am writing to you in reference to our prior phone conversation on September 12, 2006 pertaining to the above mentioned CVS. I have enclosed a set of construction drawings for your review and comments.

When you have had the opportunity to review these drawings, please contact me @ (508) 679-5733, to advise me on how to, further, proceed in the permitting process.

Thank you for your time and if you have questions please do not hesitate to contact me.

Sincerely,

Kerri M. Crane  
William Starck Architects, Inc.  
Phone: 508-679-5733  
Fax: 508-672-8556

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