Cian of Denales of Main	. D.::14: II	D!4 A!!	_ 4.º	Permit No:		PEBN	T ISSL	CBL		
City of Portland, Maine 389 Congress Street, 0410.				04-18	01			11	4A F0	01001
Location of Construction:	Owner Name:			wner Address		JAN	- 6 200	Phone	:	
364 Forest Ave	Oakhurst Dair	Oakhurst Dairy		364 Forest A					7468	·
Business Name:	Contractor Name	Contractor Name:		Contractor Address: PO Box 8107 Port Charly OF F			DODT	Phone	5	
	Ledgewood Inc					FUNT	207	<i>1</i> 6718	T	
Lessee/Buyer's Name	Phone:	Phone:		Permit Type: Amendment to Commercial						Zone:
				Permit Fee: Cost of Work:			ler	CEO District:		
Past Use:	Proposed Use:	amendment to permit 040281/add		\$11,577.00 \$1,283,332.00				.0 Disu 2	net:	
commercial space		em,storage,mezzan		FIRE DEPT: Approved INSI				SPECTION:		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Use Group	- Tal - 1		
					نــا	Denied	•	ٔ ر	10	100
								1	5/	(5)
Proposed Project Description:						l		(V		Y A
amendment to permit 040281	/add conveyor system,st	orage,mezzanine		Signature EDESTRIAN		TIES DIST	Signature:	$\frac{\mathcal{L}}{\mathcal{D}}$	24	X J
			PEDESTRIANACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conditions Denied							
,				Signature:				ate:		
Permit Taken By:	Date Applied For:	1		Zor	ning /	Approva	1			
jharris	12/07/2004	Zomig ripprovid								
	•	Special Zone or	Reviews	5	Zoning	Appeal		Histori	c Preso	ervation
		Shoreland		☐ Va	riance			Not in	Distric	t or Landmar
		Wetland		☐ Mi	scellan	eous		Does N	Not Req	quire Review
		Flood Zone		Co	ndition	al Use		Requir	res Revi	iew
		Subdivision		[] Int	erpretat	tion		Appro	ved	
		Site Plan		□ Ар	proved			Appro	ved w/C	Conditions
		Maj Minor	MM [] [De	nied			Deniec	1)
) Date: 12/13	3/04	Date:			ate:	_	\geq	
		1	ľ							
		CERTIFIC	ATIO	N						
1 hereby certify that I am the of I have been authorized by the jurisdiction. In addition, if a pushall have the authority to enter such permit.	owner to make this apple permit for work describe	med property, or the dication as his author din the application	hat the orized a oris issu	proposed wo gent and I ag led, I certify	gree to that th	conform to e code offi	o all appl cial's autl	icable iorized	laws o	of this esentative

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

City of Portland, Maine - Bu	ilding or Use Permi	f		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel:	O		4-8716	04-1801	1210712004	114A FOOlOOl		
Location of Construction: .	Owner Name:	. ,	0	wner Address:		Phone:		
364 Forest Ave	Oakhurst Dairy		3	364 Forest Ave		() 772-7468		
Business Name:	Contractor Name:		C	ontractor Address:		Phone		
	Ledgewood Inc.		P	O Box 8107 Portl	and	(207) 767-1866		
Lessee/Buyer's Name	e/Buyer's Name Phone:		Pe	Permit Type:				
				Amendment to Co	mmercial			
Proposed Use:			Proposed	Project Description:				
amendment to permit 0402811add co	onveyor		amendn	nent to permit 040	2811add conveyor			
system,storage,mezzanine			system,	storage,mezzanine	;			
Dept: Zoning Status:	Approved	Rev	iewer:	Marge Schmucka	1 Approval Da	te: 12/13/2004		
Note:						Ok to Issue: 🔽		
		_		<u></u>				
Dept: Building Status:	Approvedwith Condition	s Rev	iewer:	Mike Nugent	Approval Da			
Note:						Okto Issue: 🗹		
1) All of the original conditions of	approval apply to this per	mit. Must	t extend	the special inspect	tion program to cover	all elements of		
this permit, Designer and contra	ctor were notified.							
Dept: Fire Status:	Approved with Condition	s Rev	iewer:	Lt. MacDougal	Approval Da	- te: 12/14/2004		
Note:	approved with condition	is ICV	icwei.	Et. MacDougai		Ok to Issue:		
1	::				·	OK to Issue.		
1) the fire alarm system shall be ma								
2) the sprinkler system shall be mai	ntained to NFPA 13 stand	dard						
								
Comments:								

12121/2004-mjn: need certifications and statement of special inspections, faxed to design professional.

City of Portland, Maine - Building or Use Permit			Permit No: 04-1801	Date Applied For: 12/07/2004	CBL:		
389 Congress Street, 04101 Tel:	(207) 874-8703, Fax: (2	207) 874-8716	04-1801	12/07/2004	114A FOOlOOl		
ocation of Construction: Owner Name:			Owner Address: Phone:				
364 Forest Ave	364 Forest Ave Oakhurst Dairy		364 Forest Ave	() 772-7468			
3usiness Name:	Contractor Name:	C	Contractor Address:	Phone			
	Ledgewood Inc.	I	PO Box 8107 Port	(207) 767-1866			
_essee/Buyer's Name	see/Buyer's Name Phone:		ermit Type:		•		
			Amendment to Co	ommercial			
Proposed Use:		Proposed	Project Description:				
amendment to permit 040281/add co	nveyor	amendr	nent to permit 040	0281/add conveyor			
system, storage, mezzanine	,		storage,mezzanine	•			
Dept: Zoning Status: A	Approved	Reviewer:	Marge Schmucka	al Approval D	ate: 12/13/2004		
Note:	11		C	• • • • • • • • • • • • • • • • • • • •	Okto Issue:		
1,010					01110 1354101		
I							
Dept: Building Status: A	Approved with Conditions	Reviewer:	Mike Nugent	Approval D	ate: 01/05/2004		
Note:					Ok to Issue:		
1) All of the original conditions of a	nnroval annly to this nerr	nit Must extend	the special inspec	tion program to cove	er all elements of		
this permit, Designer and contra		int. Wast extend	the special inspec	tion program to cove	or an elements of		
			- _				
Dept: Fire Status: A	Approved with Conditions	Reviewer:	Lt. MacDougal	Approval D	ate: 12/14/2004		
Note:					Ok to Issue:		
I) the fire alarm system shall be ma	intained to NFPA 72 stand	dard					
2) the sprinkler system shall be main	ntained to NFPA 13 stand	ard					

Comments:

12/21/2004-mjn: need certifications and statement of special inspections, faxed to design professional.

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.

	Total Square Footage of Proposed Structu	ire	Square Foo	•	SEE MO 114		
	Tax Assessor's Chart, Block & Lot Chart# 14A FOOI 00	Owner: B	AUTEST A	LETT AIRY	Telephon		
	Lessee/Buyer's Name (If Applicable) N/A	telephone:		(SEE OU)	cost Of Work: \$_T,Z\$		
UD ME	If the location is currently vacant, what wa Approximately how long has it been vacant Proposed use: AMEDMENT TO Expect description: ADAD IN SLAB CO ADOED SECOND STEPPINE ZANINE,	s prior use: nt: いさている	STEM, ADD	ED STOCAGE PANEUS.	Bl Back syst		
1	Contractor's name, address & telephone: Who should we contact when the permit Is Malling address: F.O. Box BIO7 We will contact you by phone when the permit Is The per	ready: 04404 ermit Is ready y work, with	CLING You must dan Plan Revie	come In and piwer. A stop wo	EAU ck up the peri		

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 properly, 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:	Date: \Z\(\langle\langle\langle\langle\langle

This is NOT a permit, you may not commence ANY work until the permit is issulf you are in a Historic District you may be subject to additional permitting and fe Planning Department on the 4th floor of City Hall