

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BU **PERMIT** ICTION

Please Read Application And Notes, If Any, Attached

Permit Number: 090940

PERMIT ISSUED

SEP 25 2009

This is to certify that MIHALAKIS DESPINA & THEODOROS MIHALAKIS JTS
has permission to Commercial Restaurant "Your Grandma's Home" - interior renovations
AT 408 FOREST AVE CP 116 D001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lath or other work is used-in. 2 HOURLY NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. CAPT. R. [Signature]

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature] 9/24/09
Director - Building & Inspection Services

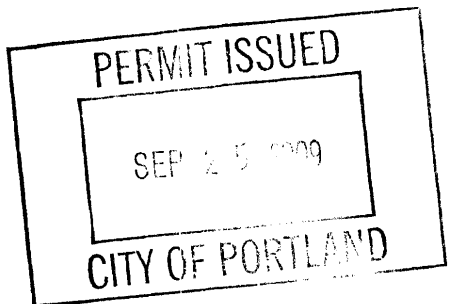
PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0940	Issue Date:	CBL: 116 D001001
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Location of Construction: 408 FOREST AVE	Owner Name: MIHALAKIS DESPINA & THEOD	Owner Address: 61 MAIN ST	Phone:
Business Name: Your Grandma's Place	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name: David Casvikes	Phone:	Permit Type: Alterations - Commercial	Zone: B2b
Past Use: Commercial Restaurant	Proposed Use: Commercial Restaurant "Your Grandma's Place" - interior renovations	Permit Fee: \$270.00	Cost of Work: \$25,000.00
Proposed Project Description: Commercial Restaurant "Your Grandma's Place" - interior renovations		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied *See Conditions	INSPECTION: Use Group: A2 Type: JB IBC-2003 Signature: JMB 9/24/09
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.): Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
Permit Taken By: Ldobson		Date Applied For: 08/28/2009	

Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <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"/>	Zoning Appeal <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
	Historic Preservation <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: <i>9/31/09</i>	Date:



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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

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 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.


 X **Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling**

 X **Final inspection required at completion of work including health and fire.**

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 MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.



Signature of Applicant/Designee

Date



Signature of Inspections Official

 9/24/09

Date

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0940	Date Applied For: 08/28/2009	CBL: 116 D001001
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Business Name: Your Grandma's Place	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name: David Casvikes	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial Restaurant "Your Grandma's Place" - interior renovations	Proposed Project Description: Commercial Restaurant "Your Grandma's Place" - interior renovations
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<p>Dept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 08/31/2009</p> <p>Note: Ok to Issue: <input checked="" type="checkbox"/></p> <p>1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.</p> <p>2) Separate permits shall be required for any new signage.</p>
<p>Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 09/24/2009</p> <p>Note: Ok to Issue: <input checked="" type="checkbox"/></p> <p>1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.</p> <p>2) Equipment must be installed in compliance per the manufacturer's specifications</p> <p>3) New cafe, restaurant, lounge, bar or retail establishment where food or drink is prepared shall meet the requirements of the City and State Food Codes</p> <p>4) Approval of City license is subject to health inspections per the Food Code.</p> <p>5) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.</p>
<p>Dept: Fire Status: Approved with Conditions Reviewer: Capt Keith Gautreau Approval Date: 09/03/2009</p> <p>Note: Ok to Issue: <input checked="" type="checkbox"/></p> <p>1) Installation of a Fire Alarm system requires a Knox Box to be installed per city ordinance</p> <p>2) All construction shall comply with NFPA 101</p> <p>3) A separate permit is required for the exhaust hood system.</p> <p>4) The fire alarm system shall comply with NFPA 72 and Fire Department Technical Standard. A compliance letter is required.</p> <p>5) A single source supplier should be used for all through penetrations.</p> <p>6) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.</p> <p>7) Emergency lights and exit signs are required</p> <p>8) Emergency lights are required to be tested at the electrical panel on the same circuit as the lighting for the area they serve.</p> <p>9) Fire Alarm system shall be maintained. If system is to be off line over 4 hours a fire watch shall be in place. Dispatch notification required 874-8576.</p> <p>10) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.</p>

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Lessee/Buyer's Name David Casvikes	Phone:	Permit Type: Alterations - Commercial	

Comments:
9/24/2009-jmb: Spoke with John O. About details of raised floor in kitchen area, entrance structure to be new awning and cosmetic facade. He will send a detail on the platform framing. Ok to issue



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>408 FOREST AVENUE</u>		
Total Square Footage of Proposed Structure/Area <u>2465 SF</u>		Square Footage of Lot <u>5871 SF</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>116 D 1</u>	Applicant * <u>must be owner, Lessee or Buyer</u> * Name <u>PAVLO CASVIKES</u> Address <u>408 FOREST AVENUE</u> City, State & Zip <u>PORTLAND ME 04101</u>	Telephone: <u>516-395-6757</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>MIHALAKIS DESPINA</u> Address <u>61 MAIN STREET</u> City, State & Zip <u>WINTROP ME 04364</u>	Cost Of Work: \$ <u>25,000</u> C of O Fee: \$ _____ Total Fee: \$ <u>270</u>
Current legal use (i.e. single family) <u>VACANT</u> If vacant, what was the previous use? <u>RESTAURANT</u> Proposed Specific use: <u>RESTAURANT</u> Is property part of a subdivision? <u>NO</u> If yes, please name _____ Project description: <u>REMODEL EXISTING VACANT RESTAURANT INTO NEW RESTAURANT, CALLED "YOUR GRANDMA'S PLACE"</u>		
Contractor's name: <u>"YOUR GRANDMA'S PLACE" LLC</u> Address: <u>408 FOREST AVE</u> City, State & Zip <u>PORTLAND ME 04101</u> Telephone: _____ Who should we contact when the permit is ready: <u>PAVLO CASVIKES</u> Telephone: <u>516-395-6757</u> Mailing address: <u>408 FOREST AVE PORTLAND ME 04101</u>		

Please submit all of the information outlined on the applicable 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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: [Signature] Date: 08/28/09

This is not a permit; you may not commence ANY work until the permit is issue



Certificate of Design Application

From Designer:

JOHN J OSSIE CAD-DE-TECH LLC

Date:

08/28/09

Job Name:

"YOUR GRANDMA'S PLACE"

Address of Construction:

408 FOREST AVENUE PORTLAND ME 04101

2003 International Building Code

Construction project was designed to the building code criteria listed below:

Building Code & Year IBC 2003 Use Group Classification (s) ASSEMBLY - 2

Type of Construction NON COMBUSTABLE UNPROTECTED

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC NO

Is the Structure mixed use? NO If yes, separated or non separated or non separated (section 302.3) _____

Supervisory alarm System? YES Geotechnical/Soils report required? (See Section 1802.2) _____

Structural Design Calculations

_____ Submitted for all structural members (106.1 - 106.11)

Design Loads on Construction Documents (1603)

Uniformly distributed floor live loads (7603.11, 1807)

Floor Area Use	Loads Shown
_____	_____
_____	_____
_____	_____
_____	_____

Wind loads (1603.1.4, 1609)

- _____ Design option utilized (1609.1.1, 1609.6)
- _____ Basic wind speed (1809.3)
- _____ Building category and wind importance Factor, w table 1604.5, 1609.5
- _____ Wind exposure category (1609.4)
- _____ Internal pressure coefficient (ASCE 7)
- _____ Component and cladding pressures (1609.1.1, 1609.6.2.2)
- _____ Main force wind pressures (7603.1.1, 1609.6.2.1)

Earth design data (1603.1.5, 1614-1623)

- _____ Design option utilized (1614.1)
- _____ Seismic use group ("Category")
- _____ Spectral response coefficients, S_D & S_I (1615.1)
- _____ Site class (1615.1.5)

- _____ Live load reduction
- _____ Roof *live* loads (1603.1.2, 1607.11)
- _____ Roof snow loads (1603.7.3, 1608)
- _____ Ground snow load, P_g (1608.2)
- _____ If $P_g > 10$ psf, flat-roof snow load P_f
- _____ If $P_g > 10$ psf, snow exposure factor, C_e
- _____ If $P_g > 10$ psf, snow load importance factor, I_f
- _____ Roof thermal factor, C_t (1608.4)
- _____ Sloped roof snowload, P_s (1608.4)
- _____ Seismic design category (1616.3)
- _____ Basic seismic force resisting system (1617.6.2)
- _____ Response modification coefficient, R and deflection amplification factor, C_d (1617.6.2)
- _____ Analysis procedure (1616.6, 1617.5)
- _____ Design base shear (1617.4, 1617.5.1)

Flood loads (1803.1.6, 1612)

- _____ Flood Hazard area (1612.3)
- _____ Elevation of structure

Other loads

- _____ Concentrated loads (1607.4)
- _____ Partition loads (1607.5)
- _____ Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)



Accessibility Building Code Certificate

Designer:

JOHN J OSSIE CAD-DE-TECH. LLC

Address of Project:

408 FOREST AVENUE PORTLAND ME 04101

Nature of Project:

RENOVATE EXISTING VACANT

RESTAURANT INTO NEW RESTAURANT

CALLED "YOUR GRANDMA'S PLACE"

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act. Residential Buildings with 4 units or more must conform to the Federal Fair Housing Accessibility Standards. Please provide proof of compliance if applicable.

Signature: _____

Title: DESIGNER / OWNER

Firm: CAD-DE-TECH LLC

Address: 235 RIVERSIDE IND.

PACKWAY PORTLAND ME

Phone: 207-329-6499.

(SEAL)

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



Certificate of Design

Date: 08/28/09

From: JOHN J OSSIE CAD-DE-TECH LLC

These plans and / or specifications covering construction work on:

"YOUR GRANDMA'S PLACE"

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the **2003 International Building Code** and local amendments.

Signature: _____

Title: DESIGNER/OWNER

Firm: CAD-DE-TECH LLC

Address: 235 RIVERSIDE IND.

PARSONS PORTLAND ME 04101

Phone: 207-329-6499

(SEAL)

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