

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

Permit Number: 091421

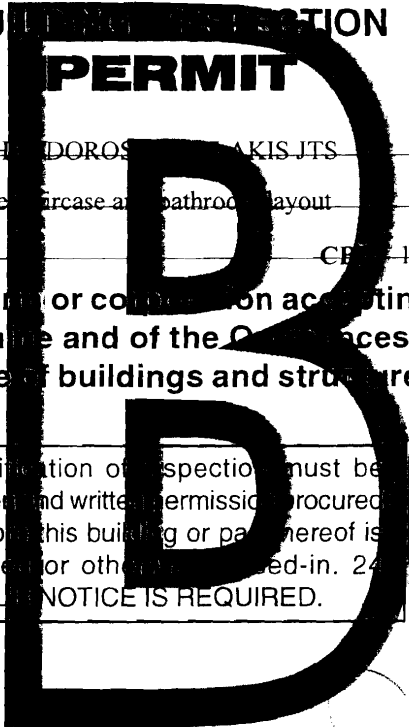
JAN - 7 2010

This is to certify that MIHALAKIS DESPINA & THEODOROS MIHALAKIS JTS

has permission to Amend permit# 090940 change staircase and bathroom layout City of Portland

AT 408 FOREST AVE CE# 116 D001001

provided that the person or persons, firm or corporation accounting 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 lathed or otherwise finished-in. 24 HOUR 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. Sanchez

Health Dept. _____

Appeal Board _____

Other _____
Department Name

Anna Bute 1/7/10
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: 09-1421	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:
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Business Name: Your Grandma's Place	Contractor Name:	Contractor Address:	Phone:
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Lessee/Buyer's Name David Casvikes	Phone:	Permit Type: Amendment to Commercial	Zone: B2L
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Past Use: Commercial Restaurant "Your Grandma's connected w/ permit# 090940	Proposed Use: Commercial Restaurant "Your Grandma's connected w/ permit# 090940 - Amend permit# 090940 change staircase and bathroom layout	Permit Fee: \$70.00	Cost of Work: \$3,000.00	CEO District: 2
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>* See Conditions</i>	INSPECTION: Use Group: A-2 Type: SB IBL-2003 Signature: <i>AMB 1/7/09</i>
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Proposed Project Description:
Amend permit# 090940 change staircase and bathroom layout

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Signature:	Date:	

Permit Taken By: Ldobson	Date Applied For: 12/17/2009	Zoning Approval
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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"/> MVI <input type="checkbox"/> Date: <i>12/17/09</i>	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 Date:	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:
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PERMIT ISSUED

JAN - 7 2010

City of Portland

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

Permit No: 09-1421	Date Applied For: 12/17/2009	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: Amendment to Commercial	

Proposed Use: Commercial Restaurant "Your Grandma's connected w/ permit# 090940 - Amend permit# 090940 change staircase and bathroom layout	Proposed Project Description: Amend permit# 090940 change staircase and bathroom layout
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 12/17/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) All original conditions for the use are still in force.			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 01/07/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) All previous conditons apply			
2) The spiral stairs shall meet the minimum standards of the IBC 2003			
3) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Capt Keith Gautreau	Approval Date: 12/18/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Amended plans look good. The conditions on the original permit still apply.			

Comments:

1/7/2010-jmb: John O. Came into office to review



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 Ave</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>116 0 001</u>	Applicant * must be owner, Lessee or Buyer * Name <u>Your Grandmas LLC</u> Address <u>408 Forest Ave</u> City, State & Zip <u>Portland, ME 04101</u>	Telephone:
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>3,000</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) _____ Number of Residential Units _____ If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Amendments to permit # 09-0949</u> <u>Staircase & Bathroom</u>		
Contractor's name: <u>Your Grandmas 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 Casini</u>		
Mailing address: <u>408 Forest Ave</u>		

RECEIVED
DEC 17 2009
Dept. of Building Inspections
City of Portland Maine
Cell # 976-395-6157

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: <u>[Signature]</u>	Date: <u>12/17/09</u>
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This is not a permit; you may not commence ANY work until the permit is issue

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: 09/24/2009	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:

Past Use: Commercial Restaurant	Proposed Use: Commercial Restaurant "Your Grandma's Place" - interior renovations	Permit Fee: \$270.00	Cost of Work: \$25,000.00	CEO District: 2
Proposed Project Description: Commercial Restaurant "Your Grandma's Place" - interior renovations		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
		Signature:	Signature:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature: Date:		

Permit Taken By: Ldobson	Date Applied For: 08/28/2009	Zoning Approval		
<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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"/> Date:	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 Date:	Historic Preservation <input 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:

CERTIFICATION

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SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE