Form # P 04

Please Read

Application And Notes, If Any,

Attached

Health Dept. \_\_ Appeal Board \_ Other \_\_\_\_

Department Name

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

BU TELEVISION

PERMIT ISSUED

Permit Number: 10

Permit Number: 100103 **FEB 2 3** 2010

Director - Building & Inspection Services

|  |   | 1 LD 2 3 2010  |
|--|---|--|
| This is to certify thatLAWRENCE DONA   | LD R /Tor Home & Page Pair  |  |
| has permission toremove (4) non-load b   | pearing wa  | City of Portland   |
| AT _563 FOREST AVE   | CB  | 126 D002001  |
| provided that the person or person of the provisions of the Statutes the construction, maintenance at this department. | s of Make and of the One acc  | ting this permit shall comply with all<br>es of the City of Portland regulating<br>tres, and of the application on file in |
| Apply to Public Works for street line and grade if nature of work requires such information.                           | Notice ation of espection must be given and written ermission frocured before this building or part hereof is lather or otherwise REQUIRED. | A certificate of occupancy must be procured by owner before this build-  |
| OTHER REQUIRED APPROVALS   |   |  |
| Fire Dept  |   | /\   |

PENALTY FOR REMOVING THIS CARD

| Cit   | y of Portland, Main                                   | e - Building or Us           | se Permi      | t Applicatio        | n Pe            | ermit No:                   | Issue Date  | :               | CBL:                                    |           |  |
|---|---|------------------------------|---------------|---------------------|-----------------|-----------------------------|-------------|-----------------|---|-----------|--|
|   | Congress Street, 0410                                 | •                            |               |                     | - 1             | 10-0103                     |             |                 | 126 D                                   | 002001    |  |
| Loca  | tion of Construction:                                 | Owner Name:                  |               |                     | Owne            | er Address:                 |             |                 | Phone:                                  |           |  |
| 563 FOREST AVE LAWRENCE   |   |                              | CE DONA       | DONALD R            |                 | FOXBRIAR (                  | CT          |                 |   |           |  |
| Business Name: Contractor Name  |   |                              | ame:          | e: Co               |                 | ractor Address:             | -           |                 | Phone                                   |           |  |
| Maine Running Company Toms Home &   |   |                              | e & Handy     | & Handy Repair      |                 | 163 W Main Street Yarmouth  |             |                 | 2076507460                              |           |  |
| Lesse   | ee/Buyer's Name                                       | Phone:                       |               |                     |                 | it Type:                    |             |                 |   | Zone:     |  |
|   |   |                              |               |                     | Alt             | erations - Co               | mmercial    |                 |   | 8-26      |  |
| Past  | Use:  | Proposed Use                 |               |                     | Perm            | nit Fee:                    | Cost of Wor |                 | CEO District:                           | $\neg$    |  |
| Cor   | nmercial - Retail - "Main                             | e Commercia                  | ıl - Retail - | Retail - remove (4) |                 | \$120.00 \ \ \ \ \$10,000.0 |             | 00.00           | 00 3                                    |           |  |
| Running Company" non-load bear  |   |                              | earing wall   | ing walls           |                 | 1 Approved 1                |             |                 | SPECTION:                               |           |  |
|   |   |                              |               |                     |                 | U                           |             | Use G           | Type: 3b  18c-2003  gnature: MB 2/23/10 |           |  |
|   |   |                              |               |                     |                 |                             |             |                 |   |           |  |
|   |   | _                            |               | _                   | _ <b>**</b> `   | see Con                     | ditions     | エ               | BC-2007                                 | )         |  |
| _   | osed Project Description:                             | <del></del>                  |               |                     |                 | (1)                         |             |                 | D.18                                    | 2/22/1    |  |
| rem   | ove (4) non-load bearing                              | walls                        |               |                     | Signa           |                             |             | Signati         | ure: () VV()                            | 7/2/18    |  |
|   |   |                              |               |                     | PEDI            | ESTRIAN ACT                 | IVITIES DIS | FRICT (         | CT (P.A.D.)  ed w/Conditions  Denied    |           |  |
|   |   |                              |               |                     | Actio           | on: Appro                   | ved Ap      | proved w        |   |           |  |
|   |   |                              |               |                     | ۵.              |                             |             |                 | District                                |           |  |
|   |   | <u> </u>                     |               |                     | Signa           |                             |             |                 | Date:                                   |           |  |
|   | nit Taken By:<br>obson                                | Date Applied For: 02/05/2010 |               |                     |                 | Zoning                      | g Approva   | al              |   |           |  |
| 1.  | This permit application                               |                              | Spe           | cial Zone or Rev    | iews            | Zoni                        | ing Appeal  | T               | Historic Pre                            | servation |  |
| 1.  | Applicant(s) from meeting                             |                              | d   🗆 sı      | ☐ Shoreland         |                 | ☐ Variance                  |             |                 | Not in District or Landman              |           |  |
|   | Federal Rules.  | ing approved state and       |               |                     |                 |                             |             |                 |   |           |  |
| 2.  | Building permits do not                               | include plumbing             | w             | │                   |                 | Miscellaneous               |             |                 | ☐ Does Not Require Review               |           |  |
| ۷.  | septic or electrical work                             |                              |               | - Wettand           |                 |                             |             |                 |   |           |  |
| <ol> <li>Building permits are void if work is not started within six (6) months of the date of issuance.</li> </ol> |   | d                            | ☐ Flood Zone  |                     | Conditional Use |                             |             | Requires Review |   |           |  |
|   |   | _   _                        |               |                     |                 |                             | 1           |                 |   |           |  |
|   | False information may in                              |                              | ☐ St          | Subdivision         |                 | Interpretation              |             |                 | Approved                                |           |  |
| permit and stop all work  |   |                              |               |                     |                 |                             |             |                 |   |           |  |
|   |   |                              | ☐ Si          | Site Plan           |                 | Approved                    |             |                 | Approved w/Conditions                   |           |  |
| PERMIT ISSUED   |   |                              |               |                     |                 |                             |             |                 |   |           |  |
|   | PERIVIT   | 133010                       | Maj [         | Maj 🔲 Minor 🗌 MM 🗌  |                 | ☐ Denied                    |             |                 | ☐ Denied                                |           |  |
|   |   |                              | 0/            | Okulind la          |                 |                             |             |                 | 1 HEM                                   |           |  |
| FEB 2 3 2010  |   | Date:                        | Date: 21 1/10 |                     | Date:           |                             | D           | Date:           |   |           |  |
|   | , , ,   |                              |               | -4-1-1-1-1-1        |                 |                             |             |                 |   |           |  |
|   | City of I   | Portland                     |               |                     |                 |                             |             |                 |   |           |  |
|   | City of r   | -Oi tiai id                  |               |                     |                 |                             |             |                 |   |           |  |
|   |   |                              |               |                     |                 |                             |             |                 |   |           |  |
|   |   |                              |               | TEDTIELC AT         | ION             |                             |             |                 |   |           |  |
| r 1   | -1  | C 1 C41                      |               | CERTIFICAT          |                 | 1 1 .                       | .1 1 1      | 1 41.           |   | 1 1 .1    |  |
|   | eby certify that I am the over been authorized by the |                              |               |                     |                 |                             |             |                 |   |           |  |
|   | diction. In addition, if a                            |                              |               |                     |                 |                             |             |                 |   |           |  |
|   | have the authority to ent                             |                              |               |                     |                 |                             |             |                 |   |           |  |
|   | permit.   | •                            | •             | •                   |                 |                             | •           |                 | •                                       | •         |  |
|   |   |                              |               |                     |                 |                             |             |                 |   |           |  |
| SIGN  | NATURE OF APPLICANT                                   |                              |               | ADDRES              |                 |                             | <br>DATE    |                 | DLIC                                    | ONE       |  |
| O.O.  | anord of Millionni                                    |                              |               | ADDRE               | ,,,             |                             | DAIL        |                 | TIK                                     | 71.1L     |  |
|   |   |                              |               |                     |                 |                             |             |                 |   |           |  |
| RES   | PONSIBLE PERSON IN CHAI                               | RGE OF WORK, TITLE           |               |                     |                 |                             | DATE        |                 | PHO                                     | ONE       |  |

| City of Portland, Ma                  | ine - Building or Use Permi   | t                   | Permit No:                | Date Applied For:    | CRT:                 |  |
|---------------------------------------|---|---------------------|---------------------------|----------------------|----------------------|--|
| 389 Congress Street, 04               | 101 Tel: (207) 874-8703, Fax: (   | (207) 874-8716      | 10-0103                   | 02/05/2010           | 126 D002001          |  |
| Location of Construction:             | Owner Address:  | _                   | Phone:                    |                      |                      |  |
| 563 FOREST AVE LAWRENCE DONALD R 13   |   |                     | 13 FOXBRIAR CT            |                      |                      |  |
| Business Name: Contractor Name: Co    |   |                     | Contractor Address: Phone |                      |                      |  |
| Maine Running Company                 | Toms Home & Handy   | Repair              | 163 W Main Street         | (207) 650-7460       |                      |  |
| Lessee/Buyer's Name                   | Phone:  | i i                 | Permit Type:              |                      |                      |  |
|                                       |   |                     | Alterations - Commercial  |                      |                      |  |
| Proposed Use:                         | ·   | Proposed            | d Project Description:    |                      |                      |  |
| Commercial - Retail - rem             | nove (4) non-load bearing walls   | remove              | e (4) non-load beari      | ng walls             |                      |  |
|                                       |   |                     |                           |                      |                      |  |
|                                       |   |                     |                           |                      |                      |  |
|                                       |   |                     |                           |                      |                      |  |
|                                       |   |                     |                           |                      |                      |  |
| Dept: Zoning                          | Status: Approved with Condition   | ns Reviewer:        | Ann Machado               | Approval D           | Date: 02/05/2010     |  |
| Note:                                 | Statust Approved with condition   |                     | Time tradition            | ripprovur 2          | Ok to Issue:         |  |
|                                       |   | : A d               |                           | 1 h                  |                      |  |
| work.                                 | pproved on the basis of plans subm  | itted. Any deviat   | ions snail require a      | separate approval t  | before starting that |  |
| WOIK.                                 |   |                     |                           |                      |                      |  |
| Dept: Building                        | Status: Approved with Condition   | ns <b>Reviewer:</b> | Jeanine Bourke            | Approval D           | Date: 02/23/2010     |  |
| Note:                                 |   |                     |                           |                      | Ok to Issue:         |  |
| Permit approved based noted on plans. | d on the plans submitted and review   | ved w/owner/cont    | ractor, with addition     | nal information as a | greed on and as      |  |
| 1 ' ' '                               | equired for any electrical, plumbing for approval as a part of this process |                     | larm or HVAC or e         | xhaust systems. Sep  | parate plans may     |  |
| Dept: Fire                            | Status: Approved with Condition   | ns <b>Reviewer:</b> | Capt Keith Gautre         | eau Approval D       | Date: 02/12/2010     |  |
| Note:                                 |   |                     | r                         | FFW- Z               | Ok to Issue:         |  |
|                                       | vall ha affacted by this was ati  |                     |                           |                      | OR to issue.         |  |
| ľ                                     | hall be affected by this renovation   |                     |                           |                      |                      |  |
| 2) All means of egress to             | remain accessible at all times  |                     |                           |                      |                      |  |

#### **Comments:**

2/23/2010-jmb: Contractors came in to review information and also to add a new 19' wall to separate the stock area.

# 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: 563 F  | ORES+ AU   | ne   |  |   |  |  |  |  |
|--|--|--|--|---|--|--|--|--|
| Total Square Footage of Proposed Structure/An  |  | Square Footage of Lot  | Numbe  | er of Stories                             |  |  |  |  |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 196   | Name Man   | nust be owner, Lessee or Buyer ine Lunning Company 63 Forest Are c Zip fortland ME 04/0                                |  | one:                                      |  |  |  |  |
| Lessee/DBA (If Applicable)  Maine Running Company  | Name Do  | ifferent from Applicant)  not Low mance  63 Forest Ave  Zip funtland ME  04101   | C of O Fee                                     | ; \$<br>\$\$                              |  |  |  |  |
| Current legal use (i.e. single family)  If vacant, what was the previous use?  Proposed Specific use:  Is property part of a subdivision?  N/A  Project description:  Remove four (4) non- load bearing walls (wood fname, Dry wall)  Approximately 30 ft.  Contractor's name:  Tom's Home & Harly Repair  Address:  163 W. Main St.  City, State & Zip Yar marth, ME 04096  Telephone: 650-7466 |  |  |  |   |  |  |  |  |
| Who should we contact when the permit is ready  Mailing address: 163 w. Main   | y: Tom   | Cyretin Te   |  |   |  |  |  |  |
| n order to be sure the City fully understands the funay request additional information prior to the issumisfied form and other applications visit the Inspection   | automatic  all scope of the sance of a person on the same of a person on the same of the s | denial of your permit.  ne project, the Pland of and Dermit. For further information of the line at www.portlandmainc. | evelopment I<br>r to downloa<br>or stop by the | Department<br>ad coppes of<br>Anspections |  |  |  |  |
| Division office, room 315 City Hall or call 874-8703. hereby certify that I am the Owner of record of the narnat I have been authorized by the owner to make this approximates of this jurisdiction. In addition, if a permit for work uthorized representative shall have the authority to enterovisions of the codes applicable to this permit.  | pplication as hi<br>described in t   | is/her authorized agent. <b>Source</b> to<br>his application is issued, I certify t                                    | hat the Code                                   | all applicable<br>Official's              |  |  |  |  |
| signature: 11 Town of Cunt   | Date   | : Fel 5, 2010  |  |   |  |  |  |  |

# **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.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> 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

Signature of Inspections Official

Date

Data

**CBL:** 126 D002001 **Building Permit #:** 10-0103

### February 4, 2010

To: City Of Portland

Maine Running Company and the owner, John Rogers, have my permission to pay for and renovate, move non-bearing walls and construct within the premises of:

563 Forest Avenue Portland, ME 04101

Sincerely,

Donald Lawrence Landlord and Owner 463 Baxter Blvd

Portland, ME 04103



