Form # P 04

Please Read

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

LION

aron ar

must bl

procured

hereof is

129 L004001

PERMIT ISSUED

BU Application And Notes, If Any, Attached

Permit Number: 101388 UEC - 6 2010

oting this permit shall comply with all

aces of the City of Portland regulating

This is to certify that _____ VIP FURNITURE LLC /Jake has permission to _ Tenant fit-up from Retail to ret

or cd

City of Portland

AT 683 FOREST AVE

provided that the person or persons, fi e and of the of the provisions of the Statutes of Ma the construction, maintenance and use f 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.

Not ation o spectid permissi give nd writte befd this bui g or pa lath or oth sed-in. 2

HO

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

OTHER REQUIRED APPROVALS Fire Dept.

Health Dept.

Appeal Board

Other

Decartment Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

NOTICE IS REQUIRED.

CIT	y of Portland, Maine - Bu	Permit Applicati	on Pei	rmit No:	Issue Date:	CBL;			
389 Congress Street, 04101 Tel: (207) 874-8703			, Fax: (207) 874-8	716	10-1388		129 L0	04001	
Location of Construction: Owner Name:		Owner Name:		Оwne	Owner Address:		Phone:	Phone:	
		VIP FURNITI	J RE LL C	44 W	VASHINGTO	N AVE			
Business Name: Contrac		Contractor Name	ontractor Name:		actor Address:		Phone	_	
		Jake Co	ake Co		16 Emery Corvier Road Limerick			2074150997	
Lessee/Buyer's Name Phone:		Phone:		Permi	Permit Type:			Zone:	
			Alte	Alterations - Commercial			1B-2b		
Past Use: Proposed Use:				Perm	it Fee:	Cost of Work:	CEO District:	<u> </u>	
		Store - Tenant fit-up	,	\$120.00	\$10,000.00	4			
		from Retail to	retail grocery		DEPT: 🔽		ECTION:		
				IDI/	Approved Use Group:			Туре:	
				775				_	
				-1				23	
Prop	osed Project Description:				0.0	ع ا مه ٥	Jan 10	12/1/	
Ter	ant fit-up from Retail to retail gr	осегу		Signal	Signature: Signature: Signature:			146/18	
				PEDE	PEDESTRIAN ACTIVITIES DISTRICT (P.A.			, ,	
				Action	n: 🗀 Approve	w/Conditions	Conditions Denied		
							_		
	to make a market	A P . a . T	Signature:			Date:			
	· ·	Applied For:	Zoning Approval						
Idobson 11/04/2010									
			Special Zone on De	denne	Zonina		Ili Annia Bres		
1.	This permit application does no		Special Zone or Re	views	Zoning	Appeal	Historic Pres		
1.	This permit application does no Applicant(s) from meeting appl		Special Zone or Re	views	Zoning Uariance	; Appeal		ervation ct or Landmark	
	This permit application does no Applicant(s) from meeting appl Federal Rules.	icable State and	Shoreland	views	☐ Variance		Not in Distric	ct or Landmark	
1.	This permit application does not Applicant(s) from meeting appl Federal Rules. Building permits do not include	icable State and		views	ì `			ct or Landmark	
2.	This permit application does not Applicant(s) from meeting appl Federal Rules. Building permits do not include septic or electrical work.	icable State and	Shoreland Wetland	views	☐ Variance	eous	Not in Distric	ct or Landmark	
	This permit application does not Applicant(s) from meeting appl Federal Rules. Building permits do not include septic or electrical work. Building permits are void if wo	icable State and plumbing, rk is not started	Shoreland	views	☐ Variance	eous	Not in Distric	ct or Landmark	
2.	This permit application does not Applicant(s) from meeting appl Federal Rules. Building permits do not include septic or electrical work. Building permits are void if wo within six (6) months of the dat	e plumbing, rk is not started e of issuance.	Shoreland Wetland Flood Zone	views	☐ Variance ☐ Miscellan ☐ Condition	eous al Use	Not in District Does Not Rec	ct or Landmark	
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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	<u> </u>	DATE	PHONE

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating, drywalling or covering.
- X Final inspection required at completion of work, including health inspection prior to occupancy.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

Building Permit #: 10-1388

CBL: 129 L004001

City of Portland, Maine	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101	Tel: (207) 874-8703, Fax: (2	207) 874-8716	10-1388	11/04/2010	129 L004001
Location of Construction:	Owner Name:	0	wner Address:		Phone:
683 FOREST AVE	VIP FURNITURE LLC	C 4	4 WASHINGTON	N AVE	
Business Name:	Contractor Name:	C	Contractor Address:		Phone
Lessee/Buyer's Name	Phone:		ermit Type: Alterations - Comr	nercial	
Proposed Use:		Proposed	Project Description:		
Retail Grocery Store - Tenant	fit-up from Retail to retail groce	ry Tenant	fit-up from Retail (to retail grocery	
Note:	atus: Approved with Conditions	Reviewer:	Marge Schmucka	Approval I	Onte: 11/05/2010 Ok to Issue: ✓
1) Separate permits shall be	required for any new signage.				
This permit is being approwork.	ved on the basis of plans submit	ted. Any deviation	ons shall require a	separate approval l	pefore starting that
Dept: Building Sta	atus: Approved with Conditions	Reviewer:	Jeanine Bourke	Approval I	Date: 12/06/2010
Note:	11			1 F	Ok to Issue:
	shall be tempered per Sec. 2406	of IBC 2003			
,	s subject to health inspections pe				
3) New cafe, restaurant, loun the City and State Food Co	ge, bar or retail establishment w odes	here food or drin	k is sold and/or pre	epared shall meet th	ne requirements of
	red for any electrical, plumbing, ercial kitchen exhaust hood syste				
S) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approrval prior to work.					s separate review
Dept: Fire Sta	ntus: Approved with Conditions	Reviewer:	Ben Wallace Jr.	Approval I	Date: 12/01/2010
Note:					Ok to Issue: 🗹
1) All construction shall com	ply with City Code Chapter 10.				

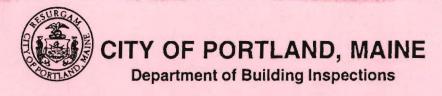
Comments:

11/19/2010-Idobson: Jake Co 16 Emery Corvier Road Limerick 04048 (207) 415-0997 Removed himself as contractor LJD

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: 683	Forest Ave.		
Total Square Footage of Proposed Structure/A	· . •	tage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 199 4	Applicant *must be were Name Adul Al Address YY Wosh City, State & Zip Port	my for Ave	Telephone:
Lessee/DBA (If Applicable)	Owner (if different from A Name Khachy) Address 6 8 3 FRO City, State & Zip p 0 A	DISCAGE	
Current legal use (i.e. single family) If vacant, what was the previous use? Froposed Specific use: Is property part of a subdivision? Project description: Contractor's name: ###################################	rniture Retail etail If yes, please na	her of Residential Un	ehio 65343
Address: 16 KMRRY COR	WER RY		
City, State & Zip L TVN/k2 TCK	11 6 04004		hone: 201-415-6997
Who should we contact when the permit is read Mailing address:	KhoehyA	The Cod Teleph	hone:
Please submit all of the information do so will result in the			Failure to
In order to be sure the City fully understands the may request additional information prior to the isst this form and other applications visit the Inspection Division office, room 315 City Hall or call 874-8703. I hereby certify that I am the Owner of record of the nother I have been authorized by the owner to make this	uance of a permit. For furth ons Division on-line at <u>www.po</u> amed property, or that the own application as his/her authors	ner information or to ortlandmaine.cov or to ner of lecord authorized of gent. I agree types	odownload copies of op by the Inspections s the proposed work and nform to all applicable
laws of this jurisdiction. In addition, if a permit for wor authorized representative shall have the authority to en provisions of the codes applicable to this permit.	k described in this application er all areas covered by this per	is issued, I certify that	the Code Official's
7 / (7)0 - Oct	7	CON -	
This is not a permit; you may r	ot commence ANY work	until the permit is	issued



Original Receipt

		11. 4. 20 10
Received from Location of Work	Khar GE	ry Alkaniany
Cost of Construction	\$	Building Fee:
Permit Fee	\$	Site Fee:
	Certifica	ate of Occupancy Fee:
		Total:
Building (IL) Plu	umbing (I5)	Electrical (I2) Site Plan (U2)
Other		
CBL: 129. L	4	
Check #:CO		Total Collected s /20

No work is to be started until permit issued. Please keep original receipt for your records.

Taken by:

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

direct exit to Sidewolk - 360 4 P 34 / 106 3404 10 x 34 3944 Not A change of use Shelving PATES doesn't need to be malyzed at this line 106 Eisting bothroom F10'> COOLER SPICS Glass front 2×6 WALLS Shelving 2 xxxx ceiling Cooler RIG BATTS PLASTIC 4mil Vupor Burnier Shelvin be exterior grade plywood INTERTOR WALLS 12824 2X6 WALLS Dainted and seuled WITH HIGH GLOSS SHRATHING SCHUBBABLE PHINT completely shouthed with Fiberslass Insulation 1/4 Luarn type Board Durated whate Thomas insulation DUOR EXTORIOR 30 6 & FUR GIVTRANCE 5/15/15, / Surth on walls Residential grade door of Glass display down on