

PENALTY FOR REMOVING THIS CARD

Cit	y of Portland, Maine -	Building or Use	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703,						146 D006001
Location of Construction: Owner Name:				Owner Address:		Phone:
19 Arbor St Katinda ESG, I		LLC	19 Arbor St.			
Business Name: Contractor Name:		:	Contractor Address:		Phone	
Crickery Wood WRIGHT RYA		AN CONSTRUCTIO	RUCTIO 10 DANFORTH STREET Port		d 2077733625	
Lessee/Buyer's Name Phone:				Permit Type: Alterations - Co	ommercial	Zoge -2
Past Use: Proposed Use:				Permit Fee:	Cost of Work:	CEO District:
government offices office - interior			\$320.00 \$30,000.00 4		4	
1st			Fluoronly	FIRE DEPT:	Denied Use	ECTION: Group: B Type: 3 DBC-2003
Proposed Project Description: interior offices alterations			ONY Signature: KG Signature: WB 7/2 PEDESTRIAN ACTIVITIES DISTRICT (PA.D)			(PA.D)
				Signature:		Date:
Permit Taken By:Date Applied For:tmm08/11/2009			Zoning Approval			
1.	This permit application doe	s not preclude the	Special Zone or Revie	ws Zoi	ning Appeal	Historic Preservation
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	Variar	nce	Not in District or Landmark
2.	Building permits do not include plumbing, septic or electrical work.		Wetland	Misce	llaneous	Does Not Require Review
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone	Condi	tional Use	[]] Requires Review
False information may invalidate a building permit and stop all work		Subdivision		retation	Approved	
	PERMIT	ISSUED	[] Site Plan	Appro	ved	Approved w/Conditions
	SEP 2	1 2009	Maj Minfor MM OL W L Cl Date: C SI	Denied Denied B/D9 Date:	d	Denied Date:
	CITY OF P	the second se		- 1 - 1		

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

389 Congress Street, 0410	1 ICI. (207) 074-0703, 1°an. (2011014-01			146 D006001
Location of Construction:	Owner Name:		Owner Address:	<u> </u>	Phone:
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Business Name:	Contractor Name:		Contractor Address:		Phone
Crickery Wood	WRIGHT RYAN CO	NSTRUCTIO	10 DANFORTH S	TREET Portland	(207) 773-3625
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Com	mercial	
Proposed Use: office - interior alterations - 1	lat flaan on he	-	sed Project Description: ior offices alterations	first floor only	
Note:	tatus: Approved with Condition		r: Marge Schmucka		Ok to Issue: 🔽
1) This property shall remai	n offices. Any change of use sha	all require a se	parate permit applica	tion for review and	approval.
2) Separate permits shall be	required for any new signage				
	required for any new signage.				
3) This permit is being appr work.	oved on the basis of plans submi	itted. Any dev	iations shall require a	separate approval l	before starting that
work.	• • • • •		iations shall require a r: Jeanine Bourke	separate approval l Approval I	
work. Dept: Building St Note:	oved on the basis of plans submi tatus: Approved with Condition ated assemblies must be protected	ns Reviewe	r: Jeanine Bourke	Approval I	Date: 09/21/2009 Ok to Issue: ☑
work. Dept: Building St Note: 1) All penetratios through ra or UL 1479, per IBC 200 2) Separate permits are requ	oved on the basis of plans submi tatus: Approved with Condition ated assemblies must be protected	ns Reviewe d by an approv g, sprinkler, fire	r: Jeanine Bourke red firestop system in	Approval E stalled in accordanc	Date: 09/21/2009 Ok to Issue: ✓ Se with ASTM 814
 work. Dept: Building Standard Standard	oved on the basis of plans submi tatus: Approved with Condition ated assemblies must be protected 3 Section 712. aired for any electrical, plumbing approval as a part of this process ed upon information provided by	ns Reviewe d by an approv g, sprinkler, fire	r: Jeanine Bourke red firestop system in e alarm or HVAC or o	Approval I stalled in accordanc exhaust systems. Se	Date: 09/21/2009 Ok to Issue: ✓ we with ASTM 814 parate plans may
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 work. Dept: Building Standard Note: 1) All penetratios through ration UL 1479, per IBC 2000 2) Separate permits are required to be submitted for a 3) Application approval base and approrval prior to work Dept: Fire Standard Note: 1) New Fire Rated doors shaded 	oved on the basis of plans submi tatus: Approved with Condition ated assemblies must be protected 3 Section 712. aired for any electrical, plumbing approval as a part of this process ed upon information provided by ork. tatus: Approved with Condition	ns Reviewe d by an approv g, sprinkler, fire s. y applicant. An ns Reviewe	r: Jeanine Bourke red firestop system in e alarm or HVAC or o y deviation from app r: Capt Keith Gautr	Approval I stalled in accordanc exhaust systems. Se roved plans require	Date: 09/21/2009 Ok to Issue: ✓ se with ASTM 814 parate plans may s separate review Date: 09/14/2009
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Comments:

8/13/2009-mes: Looks like a new owner - that hasn't been reflected on the permit - we need a deed to show new owner right title and interest - what kind of offices? Left a message with Andy Seymour at Wright Ryan

8/18/2009-mes: Yesterday I received the new deed -

9/17/2009-jmb: Left vcmsg with Greg L. At W/R for details on wall type, enclosed egress, type of construction

Location of Construction:	Owner Name:		Owner Address:	Phone:		
19 Arbor St	Katinda ESG, LLC		19 Arbor St.			
Business Name:	Contractor Name:		Contractor Address:	Phone		
Crickery Wood	WRIGHT RYAN CON	STRUCTIO	10 DANFORTH STREET Portland	(207) 773-3625		
Lessee/Buyer's Name	Phone:		Permit Type:			
			Alterations - Commercial			
9/21/2009-jmb: Greg L. Came into the office to review details						

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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 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

Signature of Inspections Official

<u> 1 21/01</u> 9/31/199 Date Date

CBL: 146 D006001

Building Permit #: 09-0858

09-0858



General Building Permit Application

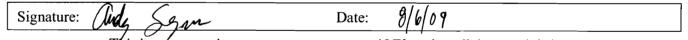
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 19	ARBOR 57	REFT	
Total Square Footage of Proposed Structure/A	rea Square	Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# 146 Block# D Lot# 06	Name CRICKER Address 19 ACC City, State & Zip		ALINDAESG, UC 1 See Dea
Lessee/DBA (If Applicable)	Owner (if different fr Name Address City, State & Zip	rom Applicant)	Cost Of Work: $30, 200, 30$ C of O Fee: $75, 00$ Total Fee: $375, 00$
Current legal use (i.e. single family) 600 If vacant, what was the previous use? 970 Proposed Specific use: $07 + 100$ Is property part of a subdivision? $N0$ Project description: $N0$ $M106$ $A2 = 0.01$ $FL00R$ $0N - Y$ $FL00R$ $0N - Y$	TO FLOOR ANTACHELO	PEAN OF	
Contractor's name: WL/6/17 P/AN Address: 10 DANFORTH ST City, State & Zip PORTERIND 10 Who should we contact when the permit is read Mailing address: 13 DANFORTH	: on N y: ANDY Star	Т 134, 2 Те	elephone:

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 <u>www.portlandmaine.gov</u>, 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.



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



http://www.portlandassessor.com/images/pictures/02749901.jpg

9/16/2009

