

Location of Construction: 1075 Forest Ave		Owner: Northern Utilities		Phone: 8000		Permit <b>9:60871</b>	
Owner Address: SAA Pctd, ME 04101		Leasee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: LaBreque Construction, L.L.C.		Address: 65 Brook Rd, Falmouth, ME 04105		Phone: 797-6305		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>SEP - 4 1996</b>  <b>CITY OF PORTLAND</b> </div>	
Past Use: Utility Facility/Off		Proposed Use: Some		COST OF WORK: \$ 10,000.00 PERMIT FEE: \$ 70.00			
Proposed Project Description: Exterior Renovations - Cold Patch Bins				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.O.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied				Zoning Approval: Zone: CBL: 146-7-006 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"/>			
Permit Taken By: Mary Gresik		Date Applied For: 28 August 1996					

1. This permit application doesn't 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..

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

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 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 provisions of the code(s) applicable to such permit

*[Signature]*  
 SIGNATURE OF APPLICANT **Carolyn Small** ADDRESS: \_\_\_\_\_ DATE: **28 August 1996** PHONE: **797-7000**

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT 6

COMMENTS

10-2-96

Work is all completed

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

Location of Construction: 1075 Forest Ave		Owner: Northern Utilities		Phone: 797-8000		Permit No: <b>60871</b> <b>PERMIT ISSUED</b> SEP - 4 1996 <b>CITY OF PORTLAND</b>
Owner Address: SAA Ptld, ME 04103		Leasee/Buyer's Name:		Phone:		
Contractor Name: LaBreque Construction, Inc.		Address: 55 Brook Rd Falmouth, ME 04105		Phone: 797-6305		BusinessName:
Past Use: Utility Facility/Off		Proposed Use: Same		<b>COST OF WORK:</b> \$ 10,000.00 <b>PERMIT FEE:</b> \$ 70.00 <b>FIRE DEPT.</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <b>INSPECTION:</b> Use Group: Type: B00A96 Signature: <i>[Signature]</i>		
Proposed Project Description: Exterior RENovations - Cold Patch Bins		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Signature: <i>[Signature]</i> Date: _____		Zone: <i>B-2</i> CBL: 146-F-006 Signature: <i>[Signature]</i>
Permit Taken By: Mary Gresik		Date Applied For: 28 August 1996				

1. This permit application doesn't 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..

**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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* Carolyn Small ADDRESS: \_\_\_\_\_ DATE: 28 August 1996 PHONE: 797-8000

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_  
 White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT **6**

LaBRECQUE CONSTRUCTION, Inc.

55 BROOK ROAD  
FALMOUTH, MAINE 04105  
Telephone 797-6305

146-F-006

Northern Utilities, Inc.  
1075 Forest Avenue  
Portland, Maine  
04103

August 20, 1996

Atten: Mel Roast

RE: Concrete Materials Bins

We are pleased to quote on the construction of three concrete materials bins at your Forest Avenue location [ 40'L x 12'W x 5' H ].

ITEMS INCLUDED:

1. Excavation for footings and walls
2. Supply and install concrete footings and 1' foundation wall to an elevation 5' above existing grade [ approx. 88 LF ]
3. Backfill wall with existing material
4. Supply and install a 6" reinforced concrete slab for each bin [ approx. 58 SY ]
5. Clean up of work area

Price....\$ 9,200.00

\*NOT INCLUDED:

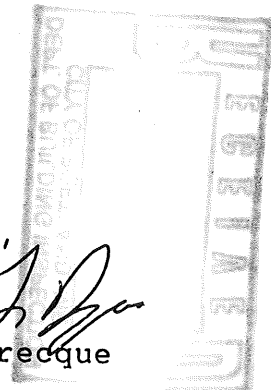
1. Paving of area by owner

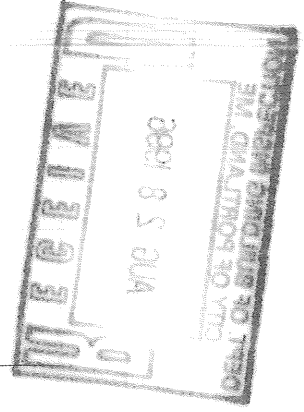
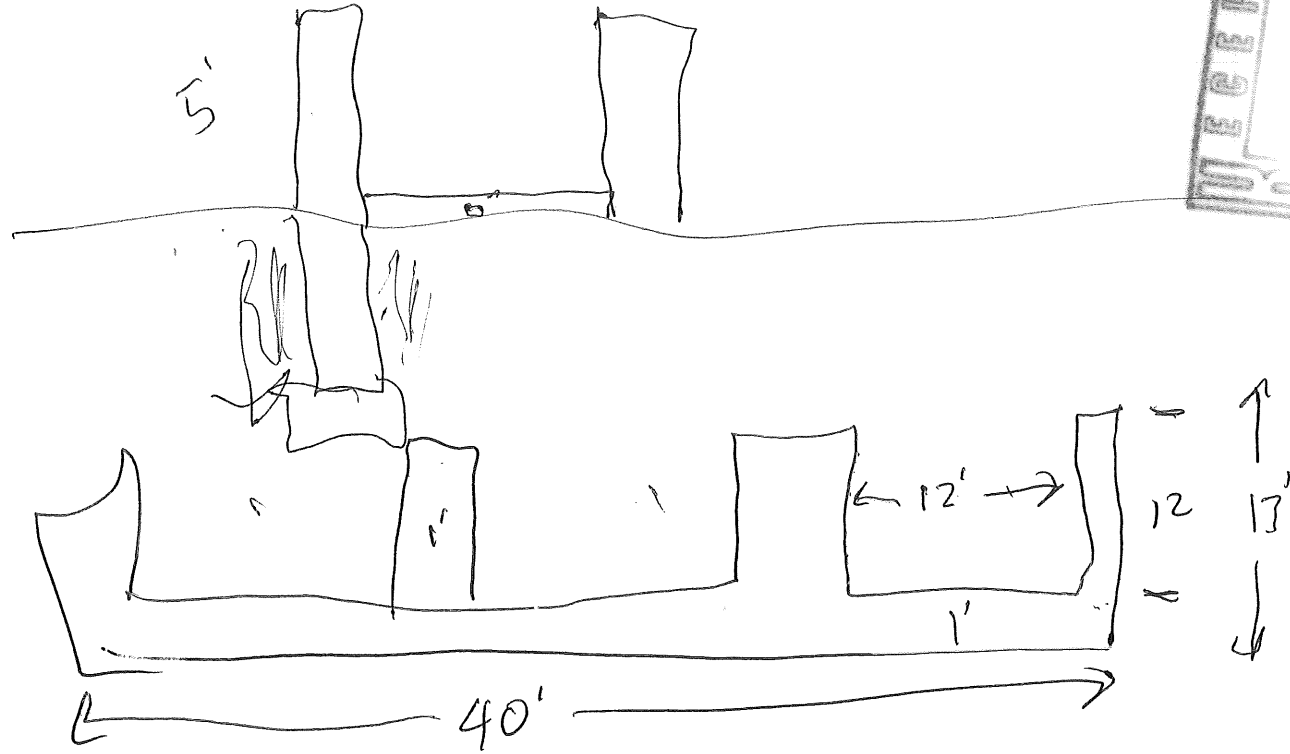
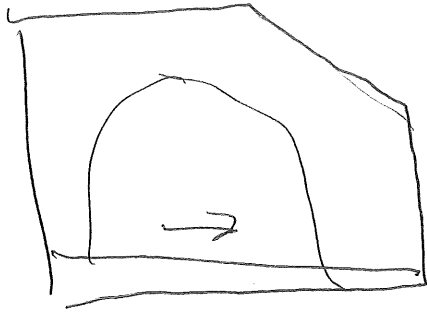
*gravel if necessary*  $\frac{800.}{10,000}$

Authorized signature.....

Sincerely,

*Scott LaBrecque*  
Scott LaBrecque





**CERTIFICATE OF INSURANCE:**

**CR 01/09/97**

**PRODUCER**  
**PRATT INSURANCE AGENCY INC**  
  
**P O BOX 439**  
**WESTBROOK, ME**  
**04098**  
**PHONE 207-854-9745**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**

**INSURED**  
  
**NEPTUNE PROPERTIES, INC.**  
**Michael Sparks & Arthur Girard**  
**120 EXCHANGE STREET**  
**Portland ME**  
**04101**

- COMPANY LETTER A **Peerless Insurance Company**
- COMPANY LETTER B **MAINE EMPLOYERS MUTUAL INS CO**
- COMPANY LETTER C
- COMPANY LETTER D
- COMPANY LETTER E

> COVERAGES **-----**  
THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFF DATE	POLICY EXP DATE	LIMITS
	<b>GENERAL LIABILITY</b>				
A	<input checked="" type="checkbox"/> COMMERCIAL GEN LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCC. <input type="checkbox"/> OWNERS'S & CONTRACTOR'S PROTECTIVE <input type="checkbox"/> <input type="checkbox"/>	<b>CPP 4313674</b>	<b>12/15/96</b>	<b>12/15/97</b>	<b>GENERAL AGGREGATE 2000000</b> <b>PROD-COMP/OP AGG. 2000000</b> <b>PERS. &amp; ADV. INJURY 1000000</b> <b>EACH OCCURRENCE 1000000</b> <b>FIRE DAMAGE (ANY ONE FIRE) 50000</b> <b>MED. EXPENSE (ANY ONE PERSON) 5000</b>
	<b>AUTOMOBILE LIAB</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/>				<b>COMB. SINGLE LIMIT</b> <b>BODILY INJURY (PER PERSON)</b> <b>BODILY INJURY (PER ACCIDENT)</b> <b>PROPERTY DAMAGE</b>
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				<b>EACH OCCURRENCE</b> <b>AGGREGATE</b>
	<b>WORKERS' COMP AND EMPLOYERS' LIAB</b>				<b>STATUTORY LIMITS EACH ACCIDENT</b> <b>DISEASE-POL. LIMIT</b> <b>DISEASE-EACH EMP.</b>
	<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**  
**COMMERCIAL PROPERTY LOCATED AT #1037 FOREST AVE. PORTLAND, MAINE 04103**  
**BROAD FORM GENERAL LIABILITY POLICY COVERING PREMISES & OPERATIONS**

> **CERTIFICATE HOLDER** **-----**  
  
**CITY OF PORTLAND**  
**CITY HALL - SIGN PERMIT**  
**CONGRESS STREET**  
**PORTLAND ME**  
**04101**  
**ACORD 25-S (7/90)**

**CANCELLATION** **-----**  
= SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT = FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.  
\* AUTHORIZED REPRESENTATIVE  
**Alexander T Pratt III**

# ELECTRICAL PERMIT

## City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical code and the following specification:

Date ~~March~~ December 18, 1996

LOCATION: 1075 Forest Ave (REAR ST.)

Permit # \_\_\_\_\_

OWNER Northern Utilities ADDRESS \_\_\_\_\_

**TOTAL EACH FEE**

OUTLETS										
	1	Receptacles	1	Switches		Smoke Detector		2	.20	.40
FIXTURES		(number of)								
	1	incandescent		fluorescent				1	.20	.20
		fluorescent strip							.20	
SERVICES										
		Overhead				TTL AMPSTO	800		15.00	
	x	Underground					800	100	15.00	15.00
TEMPORARY SERV.										
		Overhead				AMPS OVER	800		25.00	
		Underground					800		25.00	
METERS	1	(number of)							1.00	1.00
MOTORS		(number of)							2.00	
RESID/COM		Electric units							1.00	
HEATING		oil/gas units							5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens			2.00	
		Water heaters		Fans		Dryers			2.00	
Disposals		Dishwasher		Compactors		Others (denote)			2.00	
MISC. (number of)		Air Cond/win							3.00	
		Air Cond/cent							10.00	
		Signs							5.00	
		Pools							10.00	
		Alarms/res							5.00	
		Alarms/com							15.00	
		Heavy Duty							2.00	
		Outlets								
		Circus/Carnv							25.00	
		Alterations							5.00	
		Fire Repairs							15.00	
		E Lights							1.00	
		E Generators							20.00	
		Panels							4.00	
TRANSFORMER		0-25 Kva							5.00	
		25-200 Kva							8.00	
		Over 200 Kva							10.00	
						TOTAL AMOUNT DUE				
						MINIMUM FEE/COMMERCIAL	35.00			
						MINIMUM FEE		25.00		
										25.00

INSPECTION: Will be ready \_\_\_\_\_ or will call x

CONTRACTORS NAME Moreau Elect

ADDRESS 711 Lisbon St- Lewiston

TELEPHONE 782-4800

MASTER LICENSE No. John Tew #15600

LIMITED LICENSE No. \_\_\_\_\_

SIGNATURE OF CONTRACTOR

