Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

VERECTION

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provided that the	e person or persons	rm or		tion a	epting th	isp	ermit shall comply	with al	l
AT _618 OCEAN AVE			-		L 174 A0	1300	CITY OF DODT! AND		
has permission to	install 1 type 2 kitchen hood	1 Type	illens.	od w/ sur	ssion system	m	JUL 2 8 27		
This is to certify that	JEWISH HOME FOR THE	ED THE	E/C M Cin	nino, Inc			111 0 0 0000		
		_				1			

ine and of the

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and the of buildings and further uctures, 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.

ificatio on must f inspe en perm n and v on proc bre this Iding or rt there ed or osed-in JR NO ∟QUIRED.

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

Permit Number: 7086999 ED

nances of the City of Portland regulating

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. **Appeal Board** Other Department Name

PENALTY FOR REMOVING THIS CARD

Not scanned 8/4/08 Amp

City of Portland, Maine	- Building or Use	Permi	t Application	Per	mit No:	Issue Date:	C	BL:		
389 Congress Street, 04101	•			- 1	08-0919			174 A0	13001	
Location of Construction:	Owner Name:	Owner Name:			r Address:		Ph	Phone:		
618 OCEAN AVE	JEWISH HON	JEWISH HOME FOR THE AGED			630 OCEAN AVE					
Business Name:	Contractor Name	Contractor Name: C M Cimino, Inc			actor Address:		Ph	one		
	C M Cimino,				arren Ave. W	estbrook	20	2078548876		
Lessee/Buyer's Name	Phone:	 			t Type:			Zone:		
				1	od Systems, (Commerical	Bel		B-R-3	
Past Use:	Proposed Use:				it Fee:	Cost of Work:	CEO District:			
ì	-	Commercial - "Inn at Cedar				i	i i			
Commercial - "Inn at Cedars" Assisted living					\$780.00 \$26,000.00 FIRE DEPT: Approved INS			PECTION: TYPE		
Assisted fiving	1	Assisted living - install 1 type 2 kitchen hood- & 1 Type 1 kitchen		Approveu						
	hood w/ suppr	•	•	ļ	Deffied 1		e Group:		11,500	
		nood w suppression system			TO NAPA 96 D			11/2012		
				100	, , , , , ,	1	yr(c) a	105	•	
Proposed Project Description:				1	1		Λ-	0.0	glista c	
install 1 type 2 kitchen hood-	& 1 Type 1 kitchen hoo	d w/ su	ppression		ture: Ovce	5 7 2 3 1 5	Signature M 30/9/02			
system				PEDE	STRIAN ACT	IVITIES DISTRIC	CT (P.A.D/)	Γ (P.A.D.)		
				Action	n: Appro	ved Approve	ed w/Conditi	d w/Conditions Denied		
				Signature:			Date:			
Permit Taken By:	Date Applied For:				Zoning	Approval				
ldobson	07/28/2008	}				,pp. o				
This permit application defined to the second	pes not preclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal	Hist	toric Pres	ervation	
Applicant(s) from meeting Federal Rules.		Shoreland		☐ Variance		✓ Not in District or Landmark				
Building permits do not include plumbing, septic or electrical work.			etland	,	Miscella	☐ Do	☐ Does Not Require Review			
3. Building permits are void	☐ FI	ood Zone	Conditional Use			Rec	Requires Review			
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			abdivision	Interpretation			Ap	Approved		
	☐ Si	te Plan	Approved			Ap	Approved w/Conditions			
PERMIT	Moi Minor MM [Denied		│ □ Des	Denied				
PERMIT ISSUED			Maj Minor MM		Defined			1		
							Men			
JUL 28	2009	Date:	Philor A	h	Date:		Date:			
CITY OF PO	RTLAND									
			CERTIFICATION							
I hereby certify that I am the ov										
I have been authorized by the of										
jurisdiction. In addition, if a pershall have the authority to enter										
such permit.	air areas covered by st	.en pen	ine de dity (CasOl.	aoic II	cui to ciiioit	the provision	i or the co	acis, ap	Privatile to	
F										
SIGNATURE OF APPLICANT			ADDRESS	S		DATE		PHO	NE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE