				ERMIT ISS	HED]	
City of Portland, Main	•		1 1 0 2	0362		CBL:	
389 Congress Street, 0410	1 Tel: (207) 874-8703,	Fax: (207) 874-87	10			189 A0	13001
Location of Construction:			Owner Addr		u iŽ	Phone:	
1200 Congress St		Norway Savings Bank		550		774-5000	
Business Name: Contractor Name:					LAND	ND Phone	
		onstruction, Inc.	P.O. Box 1264 Portland			2078653300	
Lessee/Buyer's Name Phone:			Permit Type: Alteration	s - Commercial			3-2
Past Use: Proposed Use:			Permit Fee:	Cost of Wor	rk: C	EO District:	
Bank/Office Space Bank/Office S				86.00	3	<u>. L </u>	
			FIRE DEPT:	Approved	INSPECT	ION:	m 20
			1	Denied	Use Grou	p: D	Type: 25
					T	SOCA CO	rici
Proposed Project Description:		- H. W. J. W.			-	,00,	
Tenant Fit Up/Office Space	-Bank		Signature:	14 MV	Signature	ON: BOCA (*)	
Tanan Tiv op om o poo				N ACTIVITIES PIS	IBICT (P.A	.D.)	
			Action:	Approved A 7	proved w/Co	nditions 🗀	Denied
			<u></u>				
			Signature:			Date:	
Permit Taken By:	Date Applied For:		Z	oning Approv	al		
gad	04/12/2002	Special Zone or Re	view I	Zoning Appeal		Historic Pres	ervetion
This permit application does not preclude the Applicant(s) from meeting applicable State and Endersh Pulse.		Shoreland		Variance	[Not in District or Landma	
Federal Rules. 2. Building permits do not include plumbing,		Wetland		Miscellaneous Does Not Req		juire Review	
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		Flood Zone		Conditional Use Requires R		Requires Revi	icw
		Subdivision	ision		[Approved	
		Site Plan		Approved		Approved w/C	Conditions
		Maj Minor D M		Denied] Denied	
		78/	207/2		D-4		
		Date: UP A	OUU Date:		Date	7:	/
I hereby certify that I am the that I have been authorized this jurisdiction. In addition representative shall have the code(s) applicable to such pe	by the owner to make this a, if a permit for work des authority to enter all are	application as his au cribed in the applica	at the proposed athorized agen tion is issued,	t and I agree to co I certify that the c	onform to code offici	all applicable al's authorize	e laws of ed
SIGNATURE OF APPLICANT		ADDRI	ESS	DAT	E	PHON	IE .

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

All Purpose 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:	,00 c	SHERES STARE	7		
Total Square Footage of Proposed Structu	re	Square Footage of Lot			
Tax Assessor's Chart, Block & Lot Chart# 1 29 Block# A Lot#	Owner:	102-14 3011165 30. 20.30x 8050 00710). 26.	774-6000		
Lessee/Buyer's Name (If Applicable)		name, address & CE-1ERLI-E CO-57. Po. Box 1244 Tarlyand. LE	Cost Of Work: \$ 167.886		
Current use: Dark OFFILE SPEE If the location is currently vacant, what was prior use: L/A Approximately how long has it been vacant: L/A Proposed use: Dark OFFILE SPEE Project description:					
Contractor's name, address & telephone: TOTING: AFE CONST., TOTING: 1244 Who should we contact when the permit is ready: Mailing address: We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE:					

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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.

Signature of applicants Date: 4/11/62

This is NOT a permit, you may not commence ANY work until the permit is issued. The lift you are in a Historic District you may be subject to additional permitting to the Planning Department on the 4th floor of City Hall



CITY OF PORTLAND MAINE

89 Congress Sf., Rm 315 Portland, ME 04101 Tel. -207-874-8704 Fax- 207-874-8716

	•

Inspector of Buildings City of Portland, Maine

Planning & Urban Development

Division of Housing & Community Services

TRUM DESIGNER	Clyde Blackwell I neriault Landmann Associates				
	118 Congress Street, Portland ME 04101				
DATE:	April 18, 2001				
Job Name: Address of	Norway Savings				
Construction:	1200 Congress Street, Portland				
	A NATIONAL BUILDING CODE/1999 Fourteenth EDITION				
Construction	on project was designed according to the building code criteria listed below:				
Building Code and Year _	BOCA 1999 Use Group Classification(s) B= Business				
Type of Construction	2B Bldg. Height 45 ° Bldg. Sq. Footage 8190 1 st , 11711, 2nd, 101473rd				
Seismic Zone Group Class					
Roof Snow Load Per Sq. I	Ft. NA Dead Load Per Sq. Ft. NA				
Basic Wind Speed (mph) NA Effective Velocity Pressure Per Sq. Ft. NA					
Floor Live Load Per Sq. F	t. NA				
Structure has full sprinkler	r system? Yes X No Alarm System? Yes X No				
Sprinkler & Alarm system Portland Fire Department.	s must be installed according to BOCA and NFPA Standards with approval from the				
Is structure being consider	red unlimited area building: Yes No _X				
If mixed use, what subsect	tion of 313 is being considered NA				
	each room or space, designed into this Project.				

(Designers Stamp & Signature)

Moe Blowell Moe Blowell





CITY OF PORTLAND BUILDING CODE CERTIFICATE 389 Congress St., Rm 315 Portland, ME 04101

TO:

Inspector of Buildings City of Portland, Maine

Department of Planning & Urban Development Division of Housing & Community Service

FROM:

Clyde Blackwell Theriault Landmann Associates 118 Congress Street

RE:

Certificate of Design

DATE:

April 11, 2002

These plans and/or specifications covering construction work on:

Non-structural partitions for new offices within an existing landscape office space and finishes.

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code1999 Fourteenth Edition, and local amendments.

Signature

(SEAL)

Title

Mychitecil

Firm

Therrault Landman Arbociates

Address

118 Conques

Street PuttaaME 0410

AR 1834

As per Maine State Law:

\$50,000.00 or more in new construction, repair, expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

PSH 6/20/2k



City of Portland Maine 389 Congress St., Rm. 315

Portlland, ME 04101

ACCESSIBILITY CERTIFICATE

TO:	Inspector of Buildings City of Portland, Maine Department of Planning & Urban Development Division of Housing & Community Services				
FROM:	Cl <u>yde Blackwell Theriault L</u>	andmann Ass	sociates 118 Congress Street, Portland		
RE:	Certificate of Design, HAN	Certificate of Design, HANDICAP ACCESSIBILITY			
DATE:	April 11, 2002				
_	s and/or specifications covering and partitions for new offices v		work on: ing landscape office space and finishes.		
		 			
engineer/arc	designed and drawn up by the chitect according to State Regular Accessibility.	undersigned, a alations as ado	Maine registered pted by the State of Maine on		
		Signature	In & Carull		
(SEAL)		Title	Architect		
		Firm	Theriault Landmann Associates		
		Address	118 Congress Street		
			Portland, ME 04101		

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 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 a inspection procedure and additional fees from a Work Order Release" will be incurred if the probelow.	"Stop Work Order" and "Stop			
Pre-construction Meeting: Must be scheen receipt of this permit. Jay Reynolds, Development also be contacted at this time, before any site work single family additions or alterations.	Review Coordinator at 874-8632 must			
Footing/Building Location Inspection:	Prior to pouring concrete			
MA Re-Bar Schedule Inspection:	Prior to pouring concrete			
Foundation Inspection:	Prior to placing ANY backfill			
Framing/Rough Plumbing/Electrical:	Prior to any insulating or drywalling			
use. I	to any occupancy of the structure or NOTE: There is a \$75.00 fee per ction at this point.			
Certificate of Occupancy is not required for certain you if your project requires a Certificate of Occupa inspection	projects. Your inspector can advise incy. All projects DO require a final			
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 MU BEFORE THE SPACE MAY BE OCCUPIED	UST BE ISSUED AND PAID FOR,			
Signature of applicant/designee Signature of Inspections Official	Date Date			
CRI 190 A 012 Building Permit # 07	+ 0362			



