

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 041115

Please Read Application And Notes, If Any, Attached

This is to certify that Langdon Street Real Estate Inc. atco Construction has permission to New 2400 sq. Ft. Garage AT 91 Sewall St 190 F008001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of 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.

Notification of inspection must be given and when permission is procured before this building or part thereof is started or closed-in. FOUR NOTICE IS REQUIRED.

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 Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1115	Issue Date:	CBL: 190 F008001
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Location of Construction: 91 Sewall St	Owner Name: Langdon Street Real Estate Inc	Owner Address: 7 Langdon St	Phone:
Business Name:	Contractor Name: Patco Construction	Contractor Address: 1293 Main St Sanford	Phone 2073245574
Lessee/Buyer's Name	Phone:	Permit Type: Building Miscellaneous	Zone: B5

Past Use: Parking Lot	Proposed Use: Bus Garage	Permit Fee:	Cost of Work: \$227,000.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: V Type: 3B	

Proposed Project Description: New 2400 sq. Ft. Garage	Signature: <i>[Handwritten Signature]</i>	Signature: <i>[Handwritten Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: dmartin	Date Applied For: 08/04/2004	Zoning Approval		
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <i>NA</i> <input type="checkbox"/> Wetland <i>Separate permits are required for wetland</i> <input type="checkbox"/> Flood Zone <i>Panel 13 Zone C</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i># 2004-0116</i> Major <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/> <i>OK with conditions</i> Date: <i>8/10/04</i>	Zoning Appeal <input type="checkbox"/> Variance <i>Sign X8</i> <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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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

09/02/04 - checked forms for footing - all ok
in + forms ok - can pour cement - no problem.
W/S at 12:45, on M

9-8-04 checked forms + rebar
for walls ok to pour now

9-14-04 checked foundation OK to Backfill
MM

9/17/04 - checked underground plumbing - test
on + holding required time - OK to Backfill,
Jan M

9/27/04 - checked rebar for floor piers - OK -
OK to pour cement floor. Jan M

11/5/04 - checked Forming + plumbing - Forming OK - stairs OK
plumbing test on + pressure OK - Can close in when electrical
inspection completed. MM

11/17/04 -

Handrails, rock under stairs, vacuum biker. + need final sign
off on special inspections. MM

11/17/05 - Follow up -
OK for CO
MM

12/22/04 - Follow up - not
done - Call Rick Day.
MM



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 91 Sewall St

CBL 190 F008001

Issued to Langdon Street Real Estate Inc/Patco Construction

Date of Issue 01/05/2005

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 04-1115 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Entire

APPROVED OCCUPANCY

Bus Garage/Bus Wash Facility
BOCA 1999
Use Group U Type 3B

Limiting Conditions:

TEMPORARY: Expires June 1, 2005. Miscellaneous site work incomplete.
No mechanical work is allowed on premises.

This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

PLUMBING APPLICATION

Bldg # 041115

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	91 Sewall St.

2004-8388

Date Permit Issued: 8/13/04

Local Plumbing Inspector Signature: [Signature]

L.P.I. # 0680

190 # 8

PROPERTY OWNERS NAME

Last:	Concord Trailways
Applicant Name:	Kirkup
Mailing Address of Owner/Applicant (If Different)	11 Wallace Ave. S. Portland, ME 04106

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 9/1/04

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: _____ Date Approved: _____

PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Commercial</u>	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>25095</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.	6	Hosebibb / Sillcock		Bathtub (and Shower)
	2	Floor Drain	1	Shower (Separate)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
OR TRANSFER FEE (\$6.00)		Bidet		Laundry Tub
	1	Other: Toilet Hopper	1	Water Heater
	9	Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
			13	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation F
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

10.00 Fee

124.35 Fee

10/1/04

74.00