

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 030687

Please Read
Application And
Notes, If Any,
Attached



This is to certify that Forest City Chevrolet/Keeley Construction

has permission to Amendment to Permit # 0209 Shoring Plans for Demo

AT 1000 Brighton Ave City 263 B043001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 procured before this building or part thereof is leased or otherwise closed-in. 24 HOUR NOTICE 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

[Signature]
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: 03-0687	Issue Date:	CBL: 263 B043001
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Location of Construction: 1000 Brighton Ave	Owner Name: Forest City Chevrolet	Owner Address: 1000 Brighton Ave	Phone:
Business Name:	Contractor Name: Keeley Construction	Contractor Address: P.O. Box 1174 Portland	Phone 2077738499
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: B-2

Past Use: Forest City Chevrolet/Commercial	Proposed Use: Forest City Chevrolet/Commercial	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>N/A</i> Type: <i>NA</i> <i>U 6/27/03</i>	

Proposed Project Description: Amendment to Permit # 020982/Shoring Plans for Demo	Signature:	Signature:
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: gad	Date Applied For: 06/16/2003	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <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"/> Date: <i>6/10/03</i>	<p>Zoning Appeal</p> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<p>Historic Preservation</p> <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

03-0687

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.

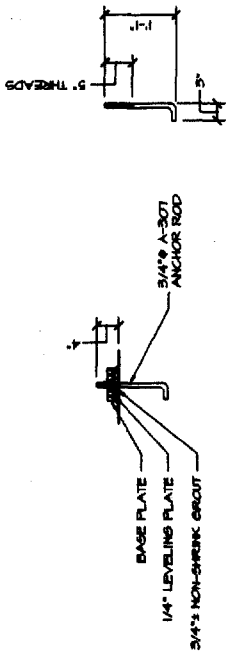
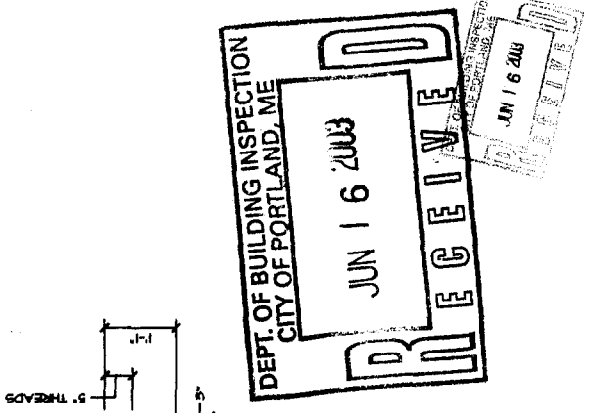
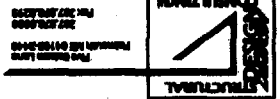
Location/Address of Construction: <u>1000 Brighton Ave Forest City Chevrolet, Brighton Ave</u>	
Total Square Footage of Proposed Structure	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>263</u> Block# <u>B</u> Lot# <u>043</u>	Owner: <u>Forest City Chevrolet</u>
Telephone:	
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone:
	Cost Of Work: \$ <u>0</u> Fee: \$ <u>30⁰⁰</u>
Current use: _____	<u>Amendment to permit #</u>
If the location is currently vacant, what was prior use: _____	<u>020982</u>
Approximately how long has it been vacant: _____	
Proposed use: _____	
Project description: <u>shoring details during demolition now provided.</u>	
Contractor's name, address & telephone: <u>Keeley Const. Co. Inc</u>	
Who should we contact when the permit is ready: <u>Chuck Stone</u>	
Mailing address: <u>19 Westfield St Portland, ME</u>	
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: <u>773-8499</u>	

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 APPROVE 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.

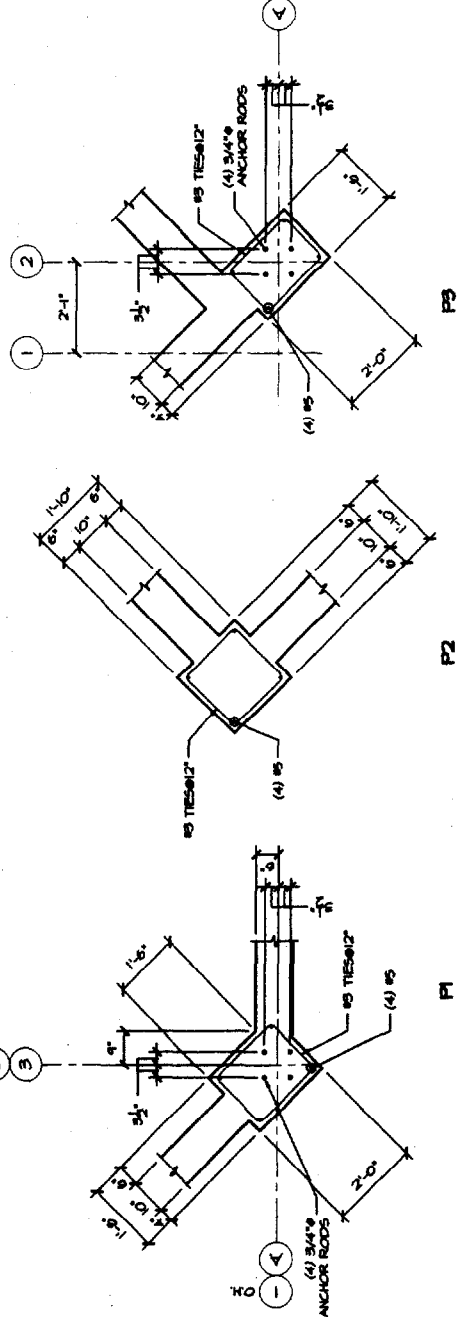
Signature of applicant: 	Date: <u>6/16/03</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



PIER DETAILS
1/2"=1'-0"

- DESIGN CRITERIA:
- BUILDING CODE: IRR BOCA NATIONAL BUILDING CODE
 - DESIGN LOADS:
 - A. SNOW LOAD, P_S
 - GROUND SNOW LOAD, P_G
 - SHOCK EXPOSURE FACTOR
 - WIND EXPOSURE FACTOR
 - ROOF TRUSS FACTOR
 - PLAT ROOF SNOW LOAD
 - WIND LOADS:
 - MAIN WIND-FORCE RESISTING SYSTEM
 - BASIC WIND SPEED, V
 - WIND EXPOSURE FACTOR, K_z
 - WIND DIRECTION FACTOR, K_d
 - WIND VELOCITY PRESSURE, P_w
 - EXPOSURE AND GLADDING
 - SEISMIC DESIGN DATA:
 - PEAK VELOCITY RELATED ACCELERATION, A_v
 - SEISMIC ZONE AS
 - SEISMIC PERFORMANCE CATEGORY
 - SEISMIC PERFORMANCE CATEGORY
 - SOIL PROFILE TYPE
 - SITE SOIL COEFFICIENT, S
 - BASIC STRUCTURAL SYSTEM
 - RESPONSE MODIFICATION FACTOR, R
 - DEFLECTION AMPLIFICATION FACTOR, C_d
 - ANALYSIS PROCEDURE



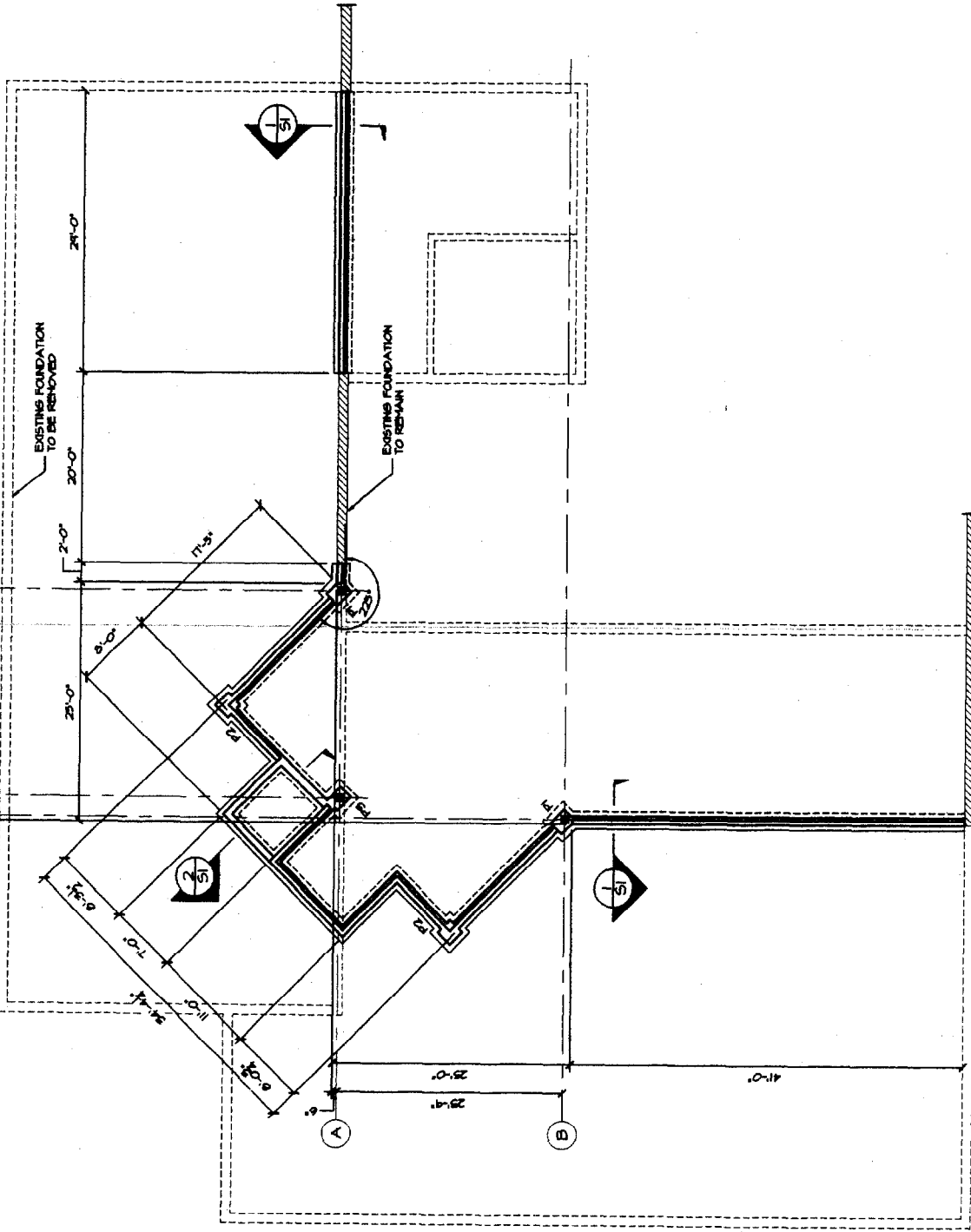
FOUNDATION PLAN
1/8"=1'-0"

TOP OF SLAB ELEVATION = 67'-5 1/2" (MATCH EXISTING).
TOP OF WALL ELEVATION = 67'-5 1/2" (MATCH SLAB).
TOP OF SHELF ELEVATION = 66'-11 1/2" (6" BELOW SLAB).
FOOTINGS AT ALL PIERS (P1, P2&P3) ARE 5'-0" x 5'-0" x 1'-0" WITH (4) # 5 BOTHWAYS BOTTOM.

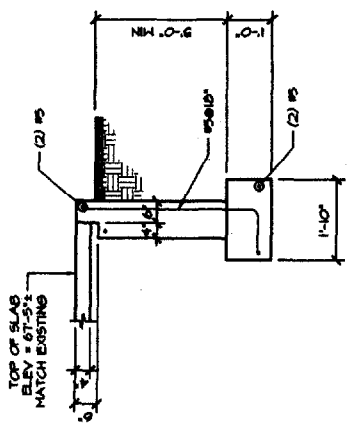
ALL CONCRETE WORK SHALL BE IN ACCORDANCE WITH REQUIREMENTS AND RECOMMENDATIONS OF ACI 318-01 PROPORTION DESIGN MIXES TO PROVIDE CONCRETE WITH THE FOLLOWING PROPERTIES:

FROST WALLS AND FOOTINGS:
STRENGTH 4000 PSI AT 28 DAYS
MAXIMUM W/C RATIO 0.50
ENTRAINED AIR 6.0-8.0%
SLUMP 5"-6"

SLAB-ON-GRADE:
STRENGTH 4000 PSI AT 28 DAYS
MAXIMUM W/C RATIO 0.45
ENTRAINED AIR 3.0-5.0%
FRESH CONCRETE SHALL BE CURED WITH WET BURLAP AND POLYETHYLENE SHEETING WITH MIN. 1.0 POUNDS PER SQ YD SLUMP 5"-6"



SECTION 1
1/2"=1'-0" S1
PROVIDE MATCHING CORNER BARS.



SECTION 2
1/2"=1'-0" S1
SEE SECTION 1 FOR ADDITIONAL INFORMATION.

