Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

#### **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

# BUILDING INSPECTION PERMIT

Permit Number: 100239

This is to certify that <u>Boulos Property Mana</u>	gement/n/a	
has permission toChange of Use: from s	ales & warehouse to sales & manufacturing.	Andrew Control Control
AT 190 Riverside St	CBL 267	A005001
	ons, firm or corporation accepting	
	of Maine and of the Ordinances of	
the construction, maintenance at this department.	nd use of buildings and structures,	and of the application on file i
Apply to Public Works for street line and grade if nature of work requires such information.	Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR 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. CAPT. R. Faut and		
Health Dept		
Appeal Board	_	100 For For 8/2/11
Other Department Name		Director - Building & Inspection Services
	ENALTY FOR REMOVING THIS CARE	) / /

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Application And Notes, If Any, Attached	PERMIT	Permit Number: 100239
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has permission toChange of Use: from s	ales & ware nouse to sales & manufacturing.	
AT -190 Riverside St	CBL 26	57 A005001
of the provisions of the Statutes	of Maine and of the Ordinances	g this permit shall comply with all of the City of Portland regulating es, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
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Health Dept.	A STATE OF THE STA	
Appeal Board Other Department Name		ramilPorte 8/2/11
	ENALTY FOR REMOVING THIS CAN	Director - Building & Inspection Services

City of Portland, Maine -	<b>Building or Use Permit</b> Tel: (207) 874-8703, Fax: (20	Z) 024 021	Permit No: 10-0239	<b>Date Applied For:</b> 03/11/2010	CBL:
Location of Construction:		/) 8/4-8/1		03/11/2010	267 A005001
	Owner Name:		Owner Address:		Phone:
190 Riverside St (unit 5B)	Boulos Property Manager	nent	One Canal Plaza S	uite 500	207-485-5454
Business Name:	Contractor Name:		Contractor Address:		Phone
	n/a		n/a Portland		
Lessee/Buyer's Name kids crooked house	Phone:		Permit Type: Change of Use - C	Commercial	
Proposed Use:		Propos	ed Project Description:		
Change of Use: from sales & wa manufacturing - Unit 5B	arehouse to offices &	Chan manu	ge of Use: from sale facturing - Unit 5B	s & warehouse to op	ffices &
Note:  1) This leased area shall remain review and approval.	us: Approved with Conditions  a sales and light manufacturing. A	Any change (		separate permit app	Ok to Issue:  plication for
work.	ed on the basis of plans submitted				
Note:	is: Approved with Conditions	Reviewer	: Jeanine Bourke	Approval D	
					Ok to Issue: 🔽
1) This is a Change of Use ON	LY permit. It does NOT authorize	e any constr	uction activities.		
<ol><li>Separate permits are required pellet/wood stoves, commerce as a part of this process.</li></ol>	d for any electrical, plumbing, spi cial kitchen exhaust hood systems	rinkler, fire and fuel ta	alarm HVAC systernks. Separate plans i	ns, heating applianc may need to be subn	es, including nitted for approval
<ol> <li>Application approval based u and approrval prior to work.</li> </ol>	upon information provided by app	plicant. Any	deviation from appr	oved plans requires	s separate review
Dept: Fire Statu	s: Approved with Conditions	Reviewer	: Capt Keith Gautre	eau Approval D	vate: 03/19/2010
Note:					Ok to Issue:
1) The occupancy will be review	wed as a Mercantile class C.				30% W.V.
2) Fire extinguishers required. I					
•	use only, any construction shall re	equire additi	onal permits. The o	occupancy shall mee	t NFPA 101 code

#### Comments:

3/12/2010-gg: did not receive check until 3/11/10. /gg

3/23/2010-jmb: Left vcmsg for Amanda P. For clarification on what the light manufacturing is, is the building sprinklered and separation from the sales area.

8/2/2011-jmb: Contacted Amanda P., she confirmed the building is sprinkled, there are no retail sales at this location, only business offices for internet sales, no customers go to the shop. The structures are manufactured here, dust collection installed and separation from offices.

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Location of Construction:,		Owner Name:		Owner Address:		Phone:
190 Riverside St Unl	15B	Boulos Proper	ty Management	One Canal Plaza	Suite 500	207-485-5454
Business Name:		Contractor Name	•	Contractor Address	•	Phone
		n/a		n/a Portland		
Lessee/Buyer's Name		Phone:		Permit Type:		Zone:
kids crooked house				Change of Use	- Commercia	1 15-4
Past Use:		Proposed Use:		Permit Fee:	Cost of Worl	k: CEO District:
Commercial / Sales & V	Warehouse	Change of Use		\$105.00	\$3	0.00 3
	+5B		ales & manufacturin Fices		Approved Denied	INSPECTION: Use Group: FIB Type: 3B
				*See Con		DBC-2069
Proposed Project Descriptio	n:					
Change of Use: from sa		ouse to sales & m	anufacturing.	Signature:	46/)	Signature: XVB 8/2/1/
marging the year of the entire that		offices	unteres e fremunitario († ) • (Constituent e escape fremunitario († )	PEDESTRIAN ACT	TVITIES DIST	TRICT (P.A.D.)
Same and the same				Action: Appro	oved	proved w/Conditions Denied
					street in Tri	24
				Signature:	<del>y</del>	Date:
Permit Taken By: gg	U ANDRESSE	pplied For: 1/2010		Zonin	g Approva	ıl
1. This permit applica	tion does not	nreclude the	Special Zone or Re	views Zon	ing Appeal	Historic Preservation
Applicant(s) from r Federal Rules.			Shoreland	☐ Varian	ice	Not in District or Landmark
2. Building permits do septic or electrical		plumbing,	☐ Wetland	Misce	llaneous	☐ Does Not Require Review
3. Building permits ar within six (6) mont	e void if wor		Flood Zone	Condi	tional Use	Requires Review
False information n	nay invalidat		Subdivision	Interp	retation	☐ Approved
			Site Plan	Appro	ved	☐ Approved w/Conditions
			Maj Minor M	IM Denie	i	☐ Denied
			JOKW MY CON	V1143		
			Date:	Date:	······································	Date: V
			> 5/	12/10		,
			1	1'		
			CERTIFICA	TION		
						d by the owner of record and that to all applicable laws of this
jurisdiction. In addition,	if a permit f	or work describe	d in the application i	is issued, I certify the	at the code of	fficial's authorized representative vision of the code(s) applicable to
		•	-		-	· · · · · · · · · · · · · · · · · · ·
such permit.						

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

8/18/2011 - AMANDA HAS NOT

Completed ANY WORK Due TO MIS ordestrooky

ABOUT Time Frame - Told Her To CALL

US when SHE WAS TEADY AND WE

Will do a Te-inspection - BKL

# \* CHANGE OF USE

# General 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.

Escation, fiduces of Constitution: 1011		
Total Square Footage of Proposed Structure,	Piverside St, Unit 5B, I Area Square Footage of Lot	Donatland, 04103
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  367 A 005	Applicant *must be owner, Lessee or I Name KiJS (no ked House Address 190 lius i Je St. Unit 5 City, State & Zip Portland, ME O	B 207.485-5454
Lessee/DBA (If Applicable)  Lids Crooked House, LLC	Owner (if different from Applicant)  Name  Address  City, State & Zip	Cost Of Work: \$ N/A C of O Fee: \$30+75 Total Fee: \$ 105
Current legal use (i.e. single family)  If vacant, what was the previous use?  Sales  Proposed Specific use:  Sales + Manual  Is property part of a subdivision?  Project description:  No Work +> be purely with the purely was a subdivision.	+ Warehouse (storage)	RECEIVEL MAR 1 1 2010
Contractor's name:		Dept. of Building Inspecti City of Portland Maine
Address:		Telephone:
Who should we contact when the permit is real	ady: Huanda Pike, KiJs (nok	Telephone: 20 . 485 . 954
Mailing address: 110 KUBile St. 11	MTON	·
Mailing address: [10 MUMBLE ST U Please submit all of the information	outlined on the applicable Chec	cklist. Failure to
Mailing address: [10 MUMBLE ST U Please submit all of the information	e automatic denial of your permi	d Development Department
Please submit all of the information do so will result in the order to be sure the City fully understands the y request additional information prior to the is form and other applications visit the Inspect.	e automatic denial of your permi e full scope of the project, the Planning and essuance of a permit. For further informatic ions Division on-line at www.portlandmaine.go mamed property, or that the owner of record a est application as his/her authorized agent. I ago	d Development Department on or to download copies of gov, or stop by the Inspections uthorizes the proposed work and the to conform to all applicable

# \*CHANGE OF USE

## General Building Pennitapplication

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		makes of the owner treasure of the	The State of the S
		Address of the Color of the Col	
		Owner distincted tool payout. Name Address  Addr	
	TEVIE OF RAM	e H. M. Maria Jacking (Direct Street Str	If vacant, what was the previous use? Silvingosed Specific use: Salids et Marad. Is properly pair of a subdirection.
eno	Dept. of Building Inspecti City of Portland Maine		Campions of Same
	Telephone: II 18E NEY	a tomords Pic, viletonia	Mark State & Sup.  Who should not considered to the permit of the state of the stat
		outlined on the applicable Check automatic denial of your permit	Please submit all circle in formation (it in the circle in the

2. The college of the self-ordered by the cultive operating project, the Phinning and Development Feedback of the college of the self-ordered by the cultivation of the development of the college of

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	and they for a first	· · · · · · · · · · · · · · · · · · ·	

General 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:   90 (	GUASILACT MUILED DOG	1000 1 1112
Total Square Footage of Proposed Structure/	Area Square Footage of Lot	Mana, 09103
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  217 A	Applicant *must be owner, Lessee or Buyer* Name Kids (no ked House Address 190 liwsik St, Unit 5B	Telephone:
	City, State & Zip Portland, ME 04/83	) v
Lessee/DBA (If Applicable)  Lids Crooked House, LLC	Owner (if different from Applicant)  Name Box los Properly Mangrand	Cost Of Work: \$
	City, State & Zip Port of ME	Total Fee: \$ 105
Current legal use (i.e. single family)  If vacant, what was the previous use?  Salts  Proposed Specific use:  Salts + Manu  Is property part of a subdivision?  Project description:	+ Were house (storage)	RECEIVED
No work to be perform	red. Only than use.	MAR - 8 2010
Contractor's name:Address:	Do	ept. of Building Inspect of City of Portland Maine
City, State & Zip	Tele	ahaa
Who should we contact when the permit is read dailing address: 10 hussel St. U	dy: Kuanda Pika KiJs (no Katreler	phone: 201.485.454
Please submit all of the information	outlined on the applicable Checklist.	Failure to

do so will result in the automatic denial of your permit.

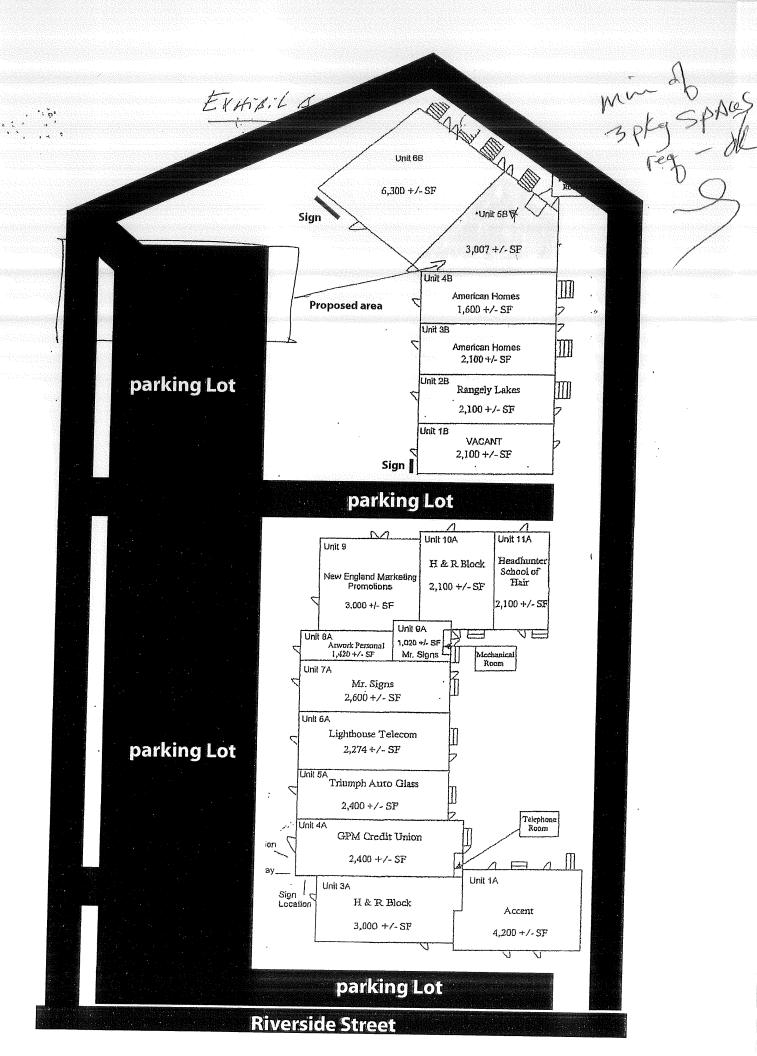
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

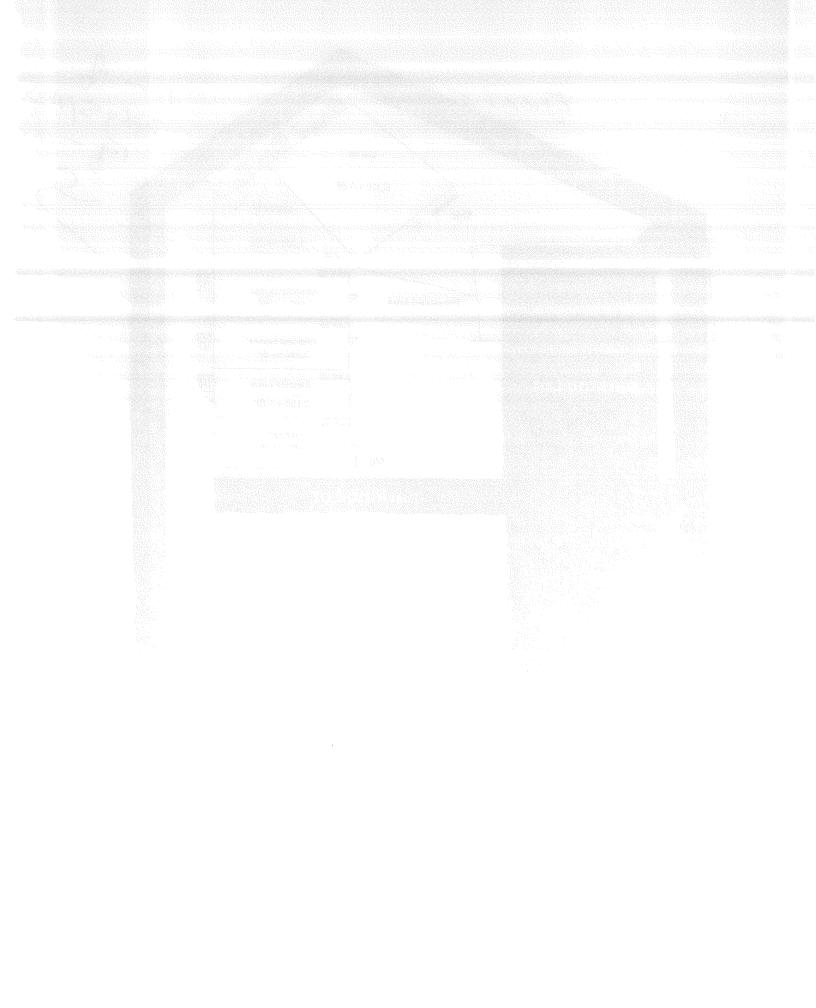
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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 permi

Signature Date: his is not a permit; you may not commence ANY work until the permit is issue davidosa

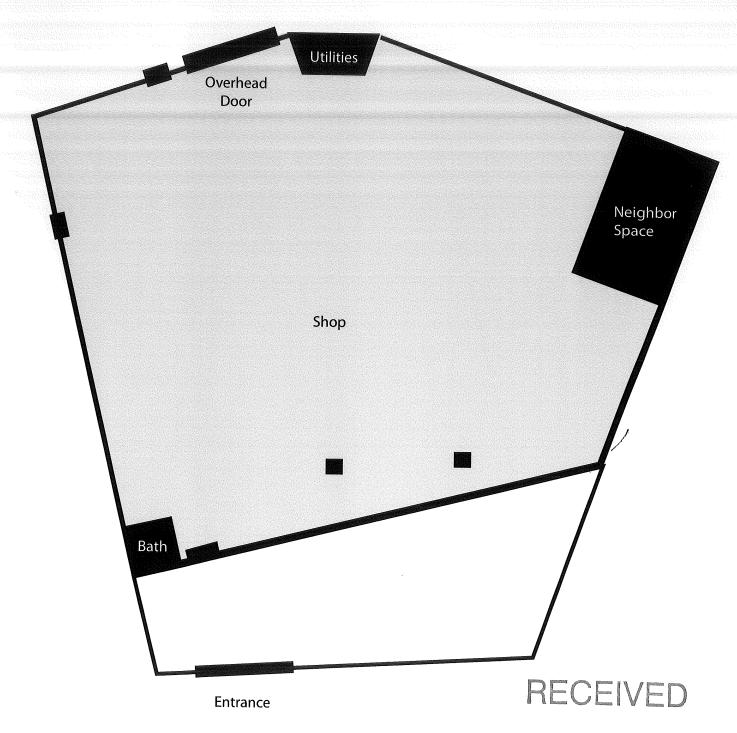
nas 8- AAN

Dept. of Building Inspections
City of Portland Maine





Kids Crooked House, LLC 190 Riverside Street - Suite 5B Portland, Me 04062



MAR -8 2010

Dept. of Building Inspections City of Portland Maine