Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	11110		• • • • • • • • • • • • • • • • • • • •				
		CITY	OF	PQ	RTI	LAND)

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ne and of the

Please Read Application And Notes, If Any,

CTION

Permit Number: 040125

epting this permit shall comply with all

ances of the City of Portland regulating

ctures, and of the application on file in

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2007	
2004	
CINALITY	
	2004 Riland

ation

provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and u this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication insped n must n permi n and w n procu re this ding or t thered ed or o osed-in. IR NOTICE IS REQUIRED.

of buildings and sa

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

OTHER REQUIRED APPROVALS

Fire Dept. <u>Af /) r r r</u>

Health Dept.

Appeal Board

Other Department Name

PENALTY FOR REMOVING THIS CARD

389 Congress Street, 04					<u>.</u>		268 B015001		
Location of Construction:		Owner Name:		Owner Address:		Ī	Phone:		
225 Riverside St		Evergreen Cre		35 Cumberland St			207-854-5822 Phone		
Business Name:		Contractor Name	•	1	Contractor Address:				
n/a		HBE Financia	l Facilities	11330 Oive Blvd., St. Louis			3145679000		
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:		
n/a				Commercial Permit Fee: Cost of Work: CEO District:					
Past Use: Commercial / Businesss		Proposed Use:	New 14,360 sq. Ft. 2	Permit Fee: \$20,166.00	\$2,229,70		5		
	story steel fran	•	FIRE DEPT:	Approved Denied	INSPECTIO Use Group:				
Proposed Project Description					MX A				
Build New 14,360 sq. Ft	. Steel frame	building.		Signature: Signature: Signature:					
				PEDESTRIAN ACTIVITIES DISTRICT (P.A			l		
				Action: Appr	oved App	proved w/Cond	litions Denied		
				Signature:			Date:		
Permit Taken By:	Date A	polied For:		Zoning Approval					
gg	02/1	2′20 04							
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Special Zone or Revi		Zoning Appeal Variance		Historic Preservation Not in District or Landmar		
2. Building mermits do septic atrical w		plumbing,	Wetland	Misce	Miscellaneous		Does Not Require Review		
3. Building permits are within six (6) month	is of the date	of issuance.	Flood Zone	zner _			Requires Review		
False information may invalidate a building permit and stop all work			Subdivision	Interp	Interpretation		Approved		
			Site Plan H Zov? -0	251 Appro	ved		Approved w/Conditions		
			Maj ∰ Minon ☐ MN	1 Denie	d	[] I	Denied (
		,	1 Drwnc	in (vol)					
			Date:	M Date:		Date:			
I hereby certify that I am to I have been authorized by jurisdiction. In additionable the authority to such permit.	the owner to	o make this appli or work described	cation as his authorized in the application is	he proposed work ad agent and I agree ssued, I certify tha	e to conform t t the code off	to all applications in a contraction to a ll application de la contraction de la con	able laws of this orized representative		
SIGNATURE OF APPLICANT	Γ		ADDRES	S DATE			PHONE		

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

1/13/24 - Selbacks ste to Place East Wall of Jummed Engl special Insp. Danier Sides of Jummed Engl 7/14/14 - Face, Line, 4-12 4- B-12 Then North to Just B-4 B-9 clar derivate the in classes heges albert when the the plans hapened been made to his plans formet for four to plans the maste for four to the formet to process to p alsa H & K-13 THE SUME STATE OF MICHAEL STATE OF MICHAEL STATE OF THE S

CITY OF PORTLAND, MAINE

Department of Building Inspection



Certificate of Occupancy

LOCATION

225 Riverside St

CBL 268 B015001

Issued to

Evergreen Credit Union /HBE Financial Facilities

Date of Issue

07/06/2005

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. 04-0125 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

APPROVED OCCUPANCY

entire

retail banking & related office space

USE GROUP: B TYPE: 5B

BOCA 1999

Limiting Conditions:

Limiting conditions: "Any electronic messaging (i.e. signage) shall not change copy more than once every twenty (20) minutes, other than display of time and temperature".

This certificate supersedes certificate issued

Approved:

(Date)

 $f(\cdot, \cdot)$.

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.

Hook-Up & Relocation Fee
Permit Fee
(Total)

\$

PL	UMBING AF	PPLICATIO	N						
ह राजा	PROPERTY	ADDRESS							
Town Or Plantation									
Street Subdivision Lo	ot#		, 4	Date Date					
	PROPERTY OF	WNERS NAME		Permit Supple Fee Charged Supple Fee Charged					
Last:		CHARACTURE.	f: v: f	L.P.I. # 0,9999					
Applicant Name:	L. A. L. No. A	FAN		U					
Mailing Addres Owner/Applica (If Different)	ant 🗇 🕖 🖽 🗸	04) : (+		26 E B C15					
Logatify tha	Owner/Applica		et of my	1 /		tion Required			
knowledge	and understand that any nspector to deny a Perm	y falsification is reason			Thave inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Plules.				
	Signature of Owner/A	pplicant	Date	Local-Plumbing Inspec	ctor Signature	Date Approved			
			PER	MIT INFORMATION					
This App	olication is for	Тур	e Of Struc	ture To Be Served:	Plumbing To Be Installed By:				
1. NEW PLUMBING 1. SIN			E FAMILY I	DWELLING	1. MASTER PLUMBER				
1. NEW PLUMBING 2. RELOCATED PLUMBING	2. 🗆	MODULAF	R OR MOBILE HOME	2. □ OIL E 3. □ MFG					
		/	LTIPLE FAMILY DWELLING			3. ☐ MFG'D. HOUSING DEALER / MECHANK 4. ☐ PUBLIC UTILITY EMPLOYEE			
		4. 🌣 ÓTHER	R — SPECI	FY GUERGEEFN	5. PROPERTY OWNER				
		<u> </u>	- /- (<i>-</i>	STORY ON TOWN	LICENS	E#			
	Hook-Up & Piping Relo Maximum of 1 Hook-	cation -Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture			
Ĭ	HOOK-UP: to public sewer in those cases where the connection		2	Hosebibb / Sillcock		Bathtub (and Shower)			
	is not regulated and the local Sanitary D	d inspected by	ーチ	Floor Drain		Shower (Separate)			
	OR		2	Urinal	1.0	Sink			
Ĭ	HOOK-UP: to an ex	isting subsurface	2	Drinking Fountain	1	Wash Basin			
	wastewater disposa	- Constant		Indirect Waste	***	Water Closet (Toilet)			
	PIPING RELOCATION Innes, drains, and pinew fixtures.	<u>UN:</u> of sanitary iping without	L	Water Treatment Softener, Filter, etc.		Clothes Washer			
				Grease / Oil Separator		Dish Washer			
		-	1,	Dental Cuspidor		Garbage Disposal			
Y	OR			Bidet		Laundry Tub			
	TRAN			Other:	- 1	Water Heater			
		ANSFER FEE [\$6.00]	1.3	Fixtures (Subtotal) Column 2	2-1	Fixtures (Subtotal) Column 1			
			Y		1.3	Fixtures (Subtotal) Column 2			
		SEE PER	RMIT FEE	SCHEDULE	3 4 Total Fixtures				
				TING FEE	\$270	Fixture Fee			
					s '	Transfer Fee			

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ELECTRICAL PERMIT City of Portland, Me.

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, 40

National Electrical Code and the following specifications:

t, eet meter make & # 815-600 OWNER EVERGIERS (re)

TENANT

						IOIAL EACH		
OUTLETS	125	Receptacles	bo	Switches	Smoke Detector	.20	37.00	
FIXTURES		Incandescent	900	Fluorescent	Strips	.20	40.00	
SERVICES		Overhead	1	Underground	TTL AMPS <800		15.00	
		Overhead		Underground	>800	25.00		
Temporary Service		Overhead		Underground	TTL AMPS	25.00		
				-		25.00		
METERS		(number of)				1.00		
MOTORS		(number of)			-	2.00		
RESID/COM		Electric units				1.00		
HEATING	<u> </u>	oil/gas units		Interior	Exterior	5.00		
APPLIANCES	<u> </u>	Ranges		Cook Tops	Wall Ovens	2.00		
		Insta-Hot		Water heaters	Fans	2.00		
		Dryers		Disposals	Dishwasher	2.00		
		Compactors		Spa	Washing Machine	2.00		
		Others (denote)				2.00		
MISC. (number of)		Air Cond/win				3.00	-	
<u>-</u>	9	Air Cond/cent			Pools	10.00	20.00	
	4	HVAC		EMS	Thermostat	5.00	0,0.30	
	Tī	Signs			_	10.00	10,00	
	_	Alarms/res				5.00	10.00	
	9	Alarms/com				15.00	30.00	
-		Heavy Duty(CRKT)				2.00	30.00	
		Circus/Carnv				25.00		
		Alterations				5.00		
		Fire Repairs				15.00		
		E Lights				1.00		
		E Generators				20.00		
PANELS		Service	6	Remote	Main	4.00	24.00	
TRANSFORMER	 	0-25 Kva	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			5.00	0 1.00	
	1	25-200 Kva				8.00	6.00	
		Over 200 Kva		_		10.00		
	<u> </u>				TOTAL AMOUNT DUE	<u> </u>	184.00	
		MINIMUM FEE/CO	ММ	RCIAL 45.00	MINIMUM FEE	35.00	10100	
and,	_							

MASTER LIC. # M56003714 LIMITED LIC. # ___

SIGNATURE OF CONTRACTOR

White Copy - Office

Yellow Copy - Applicant