

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0489	Issue Date:	CBL: 271 A002001
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Location of Construction: 510 Warren Ave	Owner Name: M T S Llc	Owner Address: 512 Warren Ave	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone:

Past Use: Jokers Arcade	Proposed Use: Day Care within Jokers confines	Permit Fee: \$44.00	Cost of Work: \$3,000.00	CEO District: 1
Proposed Project Description: Change of Use to Day Care, new bathroom		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: kwd	Date Applied For: 05/09/2003	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <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 APPLICAN _____ ADDRESS _____ DATE _____ PHO _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT _____ DATE _____ PHO _____

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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 05/15/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Pending	Reviewer: Mike Nugent	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Fire	Status: Approved with Conditions	Reviewer: Lt. McDougall	Approval Date: 05/15/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) the fire alarm system and sprinkler system shall be tested to the appropriate standard and the results submitte to the Portland Fire Department 2) the fire alarm system shall be maintained to NFPA 72 standards 3) the sprinkler system shall be maintained to NFPA 13 standards 4) Application requires State Fire Marshal approval.			

Comments:
5/12/03-kwd: need construction detail on bathroom (no info provided). Left voicemail message. Kwd
5/16/03-mjn: need breakdown of services, ages etc. To determine use group. Will in all likelihood need fire separation assemblies etc. Left message w/ applicant. Sent inspector Carroll to see if this is already occurring on premises

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO