

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

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| Permit No: 06-0529 | Issue Date: | CBL: 314 A004001 |
|------------------------------|--------------------|----------------------------|

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| Location of Construction: 583 Warren Ave | Owner Name: Cp & S Associates Llc | Owner Address: 583 Warren Ave | Phone: |
| Business Name: | Contractor Name: Mainland Structures, Inc. | Contractor Address: 11A Bartlett Rd Gorham | Phone 2078561817 |
| Lessee/Buyer's Name | Phone: | Permit Type: Commercial | Zone: |

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|---|--|---|---------------------------------------|---------------------------|
| Past Use: Vacant Land | Proposed Use: Car wash- Build a 41'4" x 48' masonry car wash | Permit Fee: \$5,046.00 | Cost of Work: \$549,204.00 | CEO District: 5 |
| Proposed Project Description: Build a 41'4" x 48' masonry car wash | | 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: _____ | | | | |

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| Permit Taken By: Idobson | Date Applied For: 04/18/2006 | 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: |
| | 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: |

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 with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 08/29/2006

Note: 8/28/06 received stamped approved site plans with proviso from planning to wait before issuing **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 2) Separate permits shall be required for any new signage.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 10/19/2006

Note: **Ok to Issue:**

- 1) Stamped Mechanical plans showing equipment installation and provisions to compensate for structural impact and Hard copies of the amended construction documents must be submitted prior to erection of walls
- 2) The Statement of Special Inspections lacks a seismic quality assurance plan and cover sheet w/ signature blocks etc.

Dept: Fire **Status:** Approved **Reviewer:** Cptn Greg Cass **Approval Date:** 08/03/2006

Note: **Ok to Issue:**

Comments:

08/29/2006-mes: 8/28/06 received stamped approved site plan from planning with conditions. Apparently this planning approval is being appealed to the Planning Board. I will get rid of permit for zoning purposes. Permit placed back in hold area at front.

05/19/2006-mes: This permit can not be reviewed for zoning because the planning board has not approved the site plan application yet. There are some issues with the traffic folks. This office will need a stamped approved site plan from planning PRIOR to final zoning review. Gave permit to Mike to see if he can look at bldg code issues.

05/26/2006-mjn: There are NO PLANS!!!!!!!!!!!!!! I left a message with the designer and Frank Grondin from Mainland

07/27/2006-ldobson: Dropped additional information off. Pulled from hold w/MJN basket

07/31/2006-mjn: Still no plans, I spoke with the architect today and will provide this and a statement of Special Inspections Will refer to Fire for review.

CERTIFICATION

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO