

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

<b>Permit No:</b> 09-0599	<b>Issue Date:</b>	<b>CBL:</b> 316 B002001
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<b>Location of Construction:</b> 238 RIVERSIDE ST	<b>Owner Name:</b> SEGAL ASSOCIATES OF NEW JER	<b>Owner Address:</b> 13 PRODUCTION WAY	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> P M Construction Co.	<b>Contractor Address:</b> 19 Industrial Park Rd Saco	<b>Phone</b> 2072827697
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Amendment to Commercial	<b>Zone:</b>

<b>Past Use:</b> Commercial/ Lockards Collision Center - Auto Body Repair	<b>Proposed Use:</b> Commercial/ Lockards Collision Center - Auto Body Repair - Amendment to permit#090399 - Eliminate Mezzanine level	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$30.00	<b>CEO District:</b> 5
		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: Type
<b>Proposed Project Description:</b> Lockards Collision Center - Auto Body Repair - Amendment to permit#090399 - Eliminate Mezzanine level		Signature: _____		
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
		Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied		
		Signature: _____ Date: _____		

<b>Permit Taken By:</b> Ldobson	<b>Date Applied For:</b> 06/11/2009	<b>Zoning Approval</b>	
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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..	<b>Special Zone or Reviews</b> <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"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	<b>Zoning Appeal</b> <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	<b>Historic Preservation</b> <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: _____	Date: _____	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

<b>Location of Construction:</b> 238 RIVERSIDE ST	<b>Owner Name:</b> SEGAL ASSOCIATES OF NEW JER	<b>Owner Address:</b> 13 PRODUCTION WAY	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> P M Construction Co.	<b>Contractor Address:</b> 19 Industrial Park Rd Saco	<b>Phone</b> 2072827697
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Amendment to Commercial	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 07/30/2009
<b>Note:</b> Total parking spaces needed without the mezzanine is 25. Office area is 1526 sf (4 spaces) & rest of first floor is 21265 sf (21 spaces). 30 spaces shown on revised siteplan received 5/11/09. <b>Ok to Issue:</b> <input checked="" type="checkbox"/>			
1) Separate permits shall be required for any new signage.			
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 07/31/2009
<b>Note:</b> <b>Ok to Issue:</b> <input checked="" type="checkbox"/>			
1) Equipment must be installed in compliance per the manufacturer's specifications			
2) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.			
3) Separate Permits shall be required for any new signage.			

**CERTIFICATION**

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	PHO
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