Form # P 04

#### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

#### **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

### CTION

Permit Number: 080085

This is to certify that	EVERGREEN HOR	DNS CO	POPATION	/David ra	nd Enter	rp		
nas permission to	Interior Renovation	Divide s	e into :	perate by	s spaces	w/ office and wa	arehouse use	
AT 26 EVERGREEN	DR				CBL	329 A014001		
provided that the pers	son or persons	m or	-ati	on ep	ting th	nis permit s	hall comply	with al
of the provisions of t	•	_	d of the		_	-	Portland reg	
the construction, mai this department.	ntenance and เ	of bui	ildings a	nd star et	ures, a	and of the a	pplication o	n file iı
Apply to Public Works for and grade if nature of wor such information.	1 1 2	fication and w re this ad or o JR NOTI	n permi ding or	n must on procu t therec iosed-in. UIRED.		procured by o	of occupancy r owner before thi ereof is occupied	is build-
OTHER REQUIRED APP Fire Dept	<u> </u>				<u> </u>			/
Appeal Board		_		1	YOM	w Drik	E 2/5/	108
Other Department Name					100	Director - Building &	Inspection Services	
	PFNA	LTY FOR	REMOVI	NG THIS	CARD		,	

City of Portland. Ma	aine - Building or Us	e Permi	t Application	Permit No:	Issue Date:	CBL:	
_	4101 Tel: (207) 874-87		I	08-0085		329 A01	4001
Location of Construction:	Owner Name:			wner Address:		Phone:	
26 EVERGREEN DR	EVERGRE	EN HORI	ZONS CORP 8	93 BEACH PON	D RD		
Business Name:	Contractor Na	me:	Co	ontractor Address:		Phone	
	David Gara	nd Enterp	rises, Inc.	14 County Road	Gorham	20783913	10
Lessee/Buyer's Name	Phone:		Pe	ermit Type:			Zone:
				Alterations - Con	nmercial		I-1
Past Use:	Proposed Use:		Po	ermit Fee:	Cost of Work:	CEO District:	1
Warehouse	Office/Ward		1	\$495.00	\$40,000.00	5	
				TRE DEPT:		PECTION:	
	and wareho		ces w/ office		Denied Use	Group:	Type:3B
	and wareno	use use		Orden ave	Haz	-0	_
				ordinari	1 '''' =	Group: F1 DBC-20	ひろ
Proposed Project Description		1			٨	Dan 6 21	15/08
office and warehouse use	Divide space into 3 seperate	ousiness		ignature: (1000)	VITIES DISTRICT	ature: MB 2	<u> </u>
A 2000	•				VIIIES DISTRICT	(1.A.D.)	
Accessing Prime in	~ <b>*</b> C		A	Action: Approv	ed Approved	w/Conditions	Denied
use			s	signature:		Date:	
Permit Taken By:	Date Applied For:	T		Zoning	Approval		
ldobson	01/28/2008						
1. This permit applicat	ion does not preclude the	Spe	cial Zone or Reviews	Zonin	g Appeal	Historic Prese	ervation
	neeting applicable State an	d   [ ] sı	noreland	Variance	;	Not in District	t or Landma
2. Building permits do septic or electrical v	not include plumbing,	L. W	etland	Miscella	neous	Does Not Req	uire Review
3. Building permits are	e void if work is not started as of the date of issuance.	1     FI	ood Zone	Condition	onal Use	Requires Revi	iew
	ay invalidate a building	[] Si	ubdivision	[ Interpret	ation	[_  Approved	
<b>po</b>		Si	ite Plan	[ ] Approve	d	Approved w/C	Conditions
PERMIT IS	SUED	Мају	Minor MM	Denied		Denied C	
		DU	withcon	affec			$\rightarrow$
rrn 1 s	2008	Date: .	2 1/29/0	Date:		Date:	
FEB 15	2000		J ' '1				
CITY OF PO	RTLAND						
		4	CERTIFICATION	N			
I hereby certify that I am	the owner of record of the				authorized by the	he owner of recor	d and tha
I have been authorized by	y the owner to make this a	plication	as his authorized a	agent and I agree	to conform to all	l applicable laws	of this
jurisdiction. In addition.	if a permit for work descr	ibed in the	application is issu	red, I certify that	the code official	's authorized repr	esentativo
shall have the authority to	o enter all areas covered by	y such per	mit at any reasonal	ble hour to enforce	e the provision	of the code(s) app	plicable t
such permit.							
SIGNATURE OF APPLICAN	T		ADDRESS		DATE	PHO	NE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, Maine -	<b>Building or Use Permit</b>	:	Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101	_		08-0085	01/28/2008	329 A014001
Location of Construction:	Owner Name:		Owner Address:	<u>'</u>	Phone:
26 EVERGREEN DR	EVERGREEN HORIZ	ZONS CORPO	893 BEACH PON	ID RD	Thoue.
Business Name:	Contractor Name:		Contractor Address:		Phone
	David Garand Enterpr	ises, Inc.	114 County Road	Gorham	(207) 839-1310
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Con	nmercial	
Proposed Use:		Propos	ed Project Description	<del></del>	
Office/Warehouse - Interior Res	novations / Divide space into 3				perate business spaces
seperate business spaces w/ offi			fice and warehouse		votato o abilioso spaces
Dept: Zoning Stat	us: Approved with Condition	ns Reviewer	: Marge Schmuck	al Approval D	ate: 01/29/2008
Note:	11				Ok to Issue:
1) This permit is being approv work.	ed on the basis of plans submi	tted. Any devia	ations shall require	a separate approval b	efore starting that
2) Separate permits shall be re	quired for any new signage.				
	warehousing with office space ed to be a change of use if the			separate permit appl	ication for review
Dept: Building Stat	us: Approved with Condition	s Reviewer	: Jeanine Bourke	Approval D	ate: 02/15/2008
Note:					Ok to Issue:
1) All penetratios through rated ASTM 814 or UL 1479, per		d by an approve	d firestop system ir	stalled as tested in ac	cordance with
Separate permits are require Separate plans may need to	ed for any electrical, plumbing be submitted for approval as a	•			
Dept: Fire Stat	us: Approved with Condition	s Reviewer	: Capt Greg Cass	Approval D	ate: 01/31/2008
Note:					Ok to Issue:
1) Storage of products other th	an Ordinary hazard class proh	nibited.			

#### Comments:

2/15/2008-jmb: Spoke with John L. To determine type of construction. The allowable height and area table 503 determines it can be type 3B. Ok for combustible framing.

2/1/2008-gg: received site plan exemption as of 1/31/08, IT WAS NOT APPLICABLE, NO CHANGE OF USE PER MARGE /gg (put with permit) (Jeanie)

### **BUILDING PERMIT INSPECTION PROCEDURES** Please call 874-8703 or 874-8693 (ONLY) to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop

Work Order Release" will be incurred if below.	the procedure is not followed as stated
A Pre-construction Meeting will take pla	ce upon receipt of your building permit.
Footing/Building Location Inspec	etion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	ical: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.
you if your project requires a Certificate of inspection	cur, the project cannot go on to the next
CERIFICATE OF OCCUPANIC BEFORE THE SPACE MAY BE OCCU	ES MUST BE ISSUED AND PAID FOR, PIED
X	
Signature of Applicant/Designee	Date 2 · 19.08
Signature of Inspections Official  CBL: 328- A-4 Building Permit	Date 4. 080085

### General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any roperty within the City, payment arrangements must be made before permits of any kind are accepted.

ocation/Address of Construction: 26 E	Evergreen Drive	FORTIAND, Me.
otal Square Footage of <del>Proposed</del> Structure/A	rea Square Pootage of Lot	5,000 SF ±
ax Assessor's Chart, Block & Lot	Accessed the common of the com	·
hart# Block# Lot#	Name Evergreen Horizon  Address  Address	45
329 A 14	Address 893- Peach RC	
	( ) ( [   00] ( ) [	3884
IDDA (If Applicable)	Owner (if different from Applicant)	Cost Of X
essee/DBA (If Applicable)	, ,	Work: \$ 140,000
	Name	"
1 1 - 1 - 1	Address	C of O Fee: \$
sot A change of ase	City, State & Zip	Total Fee: \$ 420
roposed Specific use:  property part of a subdivision?  Theriox  contractor's name:  ddress:  If Courte  ity, State & Zip  Cho should we contact when the permit is reach	Divide 3 seperate by E'96; es- and Ent Inc. 1 Dd 07038	Telephone: 839-3190
ailing address:		
Please submit all of the information do so will result in the	outlined on the applicable Chec automatic denial of your permi	
rder to be sure the City fully understands the f	full scope of the project, the Planning and	l Development Department

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

This is not a permit; you may not commence ANY work until the permit is issue

provisions of the codes applicable to this permit

Signature:









Reviewed for Barrier Free

# 17404

**Not Sprinkled** 

#### AIM EVERGREEN, LLC (REMODELING)

Located at: 26 EVERGREEN DRIVE

**PORTLAND** 

Occupancy/Use: BUSINESS/INDUSTRIAL

THM SE SOR

Permission is hereby given to:

ART BIBEAU

340 FORE ST. PORTLAND, ME 04101

to construct or alter the afore referenced building according to the plans hitherto filed with the Commisioner and now approved.

No departure from application form/plans shall be made without prior approval in writing. This permit is issued under the provision of Title 25, Chapter 317, Section 2448 and the provisions of Title 5, Section 4594 - F.

Nothing herein shall excuse the holder of this permit for failure to comply with local ordinances, zoning laws, or other pertinent legal restrictions. Each permit issued shall be displayed/available at the site of construction.

This permit will expire at midnight on the

24 th of July

2008

Dated the

25 th day of January

A.D. 2008

Commissioner

**Copy-2 Architect** 

Comments:

JOHN H. LEASURE

SIX Q ST. SOUTH PORTLAND, ME 04106

21mproporties @sbcglobal.net



## Application for Construction Permit

SHADED AREAS ARE FOR OFFICE USE ONLY (8/04)

Department of Public Safety State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

Tel: 207-626-3870 Fax: 207-287-6251

Project Information Project Information Project Name: AIM GUERGREEN,	rmation L.C.
Street Location: 26 EVERGREEN DRIVE	Town Location: PORTLAND
County: CUMBERLAND	Number of Stories: 1
New Building: Renovation:	Addition: Cocupancy Change: Co
Sprinkler System: Yes No Supervised: Tes No	Square Footage:
Date of Construction Start-up:	Estimated Project Cost:
Disc Included: Yes No	Construction Permit Fee:
( X ) ( )	
Apartments Occupancy Class  Nursing Home	Educational —
Hotel / Motel Industrial	Daycare
Rooming & Lodging Residential Care Lev	
Congregate Housing ☐ Residential Care Level Hospital ☐ Assembly Class ≥10	vel II
	□ B□ C□
Fire Resistive: Type I (443), (332)	Unprotected Ordinary: Type III (200)
Protected Non-Combustible: Type II (222), (111)	Heavy Timber: Type IV (2HH)
Unprotected Non-Combustible: Type II (000)	Protected Wood Frame: Type V (111)
Protected Ordinary: Type III (211)	Unprotected Wood Frame: Type V (000)
Address	
Owner's Name: ART BIBEAU Tel	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tel Mailing Address: 340 FORE ST.	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tel	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST.  Town: PORTLAND State:	Pephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tel Mailing Address: 340 FORE ST.	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST.  Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST	ephone: 772.5161 Fax:  Me Zip Code: 04101  ephone: 767 4600 Fax: DITO  E-mail: Jleasure @ maine. vr.com
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST. Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST Town: So. PORTLAND State:	Pephone: 772.5161   Fax:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST.  Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST  Town: So. PORTLAND State:	Pephone:
Owner's Name: ART BIBEAU Tel  Mailing Address: 340 FORE ST.  Town: PONTLAND State:	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tel  Mailing Address: 340 FORE ST.  Town: PONTLAND State:	ephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST.  Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST  Town: So. PORTLAND State:  General Contractor: GARAUD TUTERINIETTEL Mailing Address: 114 COUNTY ROAD  Town: GORHAM State:	Pephone: 772.5161 Fax:
Owner's Name: ART BIBEAU TEL  Mailing Address: 340 FORE ST.  Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE TEL  Maine Registration Number: Me 310  Mailing Address: SIX Q ST  Town: So. PORTLAND State:  General Contractor: GARAUD ENTERPRETEL  Mailing Address: 114 COUNTY ROAD	Pephone: 772.5161 Fax:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST.  Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST  Town: So. PORTLAND State:  General Contractor: GARAUD TUTERINIETTEL Mailing Address: 114 COUNTY ROAD  Town: GORHAM State:	Pephone:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST. Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST Town: So. PORTLAND State:  General Contractor: GARAND ENTERPRETEL Mailing Address: 114 COUNTY ROAD  Town: GORHAM State:  Signature of Applicant:  Preliminary Approval: Date: Construction Permit: Date:	Pephone:
Owner's Name: ART BIBEAU Tell Mailing Address: 340 FORE ST. Town: PORTLAND State: 1  Design Professional: JOHN H. LEASURE Tell Maine Registration Number: Me 310  Mailing Address: SIX Q ST. Town: So. PORTLAND State:  General Contractor: GARAND ENTERPRETELL Mailing Address: 114 COUNTY ROAD  Town: GORHAM State:  Signature of Applicant:  Preliminary Approval: Date: Construction Permit: Date: Approval Letter: Date:	Pephone:
Mailing Address: 340 FORE ST.  Town: PORTLAND State:	Pephone:
Owner's Name: ART BIBEAU Tel Mailing Address: 340 FORE ST. Town: PORTLAND State:	Pephone:

#### Construction Permit Fee Sche

Make Check Payable to: "Treasurer, State of Mainer"

Department of Public Safety State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

> Tel: 207-626-3870 Fax: 207-287-6251

#### **New Construction**

#### ermit Fee

armit Faa

25 Section \$2450

\$.05/ square foot of occupied space

\$.02/ square foot for bulk storage occupancies

Renovations exceeding 80% of occupied space are considered to be Public schools, (K-12), follow the renovation fee schedule below.

\$50.00.....For a Plan Review to acquire only an Approval.

(This may be obtained only when a permit is)

#### Renovations

new construction.

required by the State.)

(8-23-04)

ermit Fee		Construction Cos
\$25.00	For under	\$10,000.00
\$50.00	From	\$10,000.00
	but less than	\$20,000.00
\$75.00	From	\$20,000.00
	but less than	· · · · · · · · · · · · · · · · · · ·
**************************************	<b>&gt;</b>	\$50,000.00
\$100.00	From	\$50,000.00
•	but less than	\$100,000.00
\$150.00	From	\$100,000.00
1 - 2 - 5 - 5	but less than	\$500,000.00
\$200.00	From	\$500,000.00
	but less than	\$1,500,000.00
\$250.00	From	\$1,500,000.00
	but less than	\$2,250,000.00
\$350.00	From	\$2,250,000.00
	but less than	\$3,000,000.00
\$450.00	From	\$3,000,000.00



## Application for Barrier-Free Permit

State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

> Tel: 207-626-3870 Fax: 207-287-6251

SHADED AREAS ARE FOR OFFICE USE ONLY (8-25-04)



¥		X	* "		<u> </u>		
Street I	Location: <u> </u>		GREGU P	PRIVE TOW	LC. √n Location: <u></u> Zip (		ND
Pro	New Building	g:   []uoen [		ration: Fee	Chai (fee schedule is	nge of Use: \$\footnote{\psi}_{\text{c}}	
Mailing Town: . Maine	Address: So. Po	NTLAND Number: _ M	State	: <u>Me</u> :	Zip (	Code: <u>6 41</u>	06
2 " " " "	oved for Pern ments:	nit:	Date:	PI	an Reviewer: _		<del></del>
				<u> </u>			
LOG#	DATE PLANS RECEIVED	REVIEW FEE	DATE FEE RECEIVED	CHECK #	PLAN REVIEWER	DATE PERMIT ISSUED	PERMIT#



#### Barrier-Free Permit Fee Schedule

State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

Tel: 207-626-3870 Fax: 207-287-6251

Make Check Payable to: "Treasurer, State of Maine"



rmit Fee		Construction Cost
\$25.00	For under	\$100,000.00
\$50.00	From	\$100,000.00
	but less than	\$350,000.00
150.00	From	\$350,000.00
	but less than	\$600,000.00
200.00	From	\$600,000.00
	but less than	\$2,000,000.00
250.00	From	\$2,000,000.00



### APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

_	AIM EVERGRE	eu, LLC		
Ā	oplicant  340 Fore Strong Address  oplicant's Mailing Address  ART BIBEAU - 340 For Substitution Number 1985  onsultant/Agent/Phone Number 1985	RCHT-767 4600	Project N	REEN COMM, SVITES Name/Description
_	escription of Proposed Develo	ETS, OFFICE	S, FINEWALLS -	539 A 614
	C.B. BUG. DIVIDE SUITES (1) 3600	EXIST. 9,5	40 SF INTO 3 0	FFICE (VAREHOUS
	ease Attach Sketch/Plan of Pro	The second secon	Applicant's Assessment	Planning Office
	iteria for Exemptions: e Section 14-523 (4) on back side o	f form	· (Yes, No, N/A)	Use Only
a)	Within Existing Structures; No No Demolitions or Additions	ew Buildings,	No.	
b)	Footprint Increase Less Than 500	Sq. Ft.	No.	
c)	No New Curb Cuts, Driveways, P	arking Areas	No.	
d)	Curbs and Sidewalks in Sound Cowith ADA	ndition/Comply	YES	
e)	No Additional Parking/ No Traffic	Increase	No.	
f)	No Stormwater Problems	DEPT. OF BUILDING INSPE	NO.	
g)	Sufficient Property Screening	CITY OF PORTLAND	ME VES	
h)	Adequate Utilities	JAN 3 1 2008	Ves.	
	Exemption Granted	B. U. Becan Sure F. S. C.	vision Use Only  ption Exemption	Denied

	—— Planning Division Use	Only —
Exemption Granted	Partial Exemption	Exemption Denied
Site Plan	examption is not	Mqu-1ed Marge
of and its	automine that	this to not a change
Planner's Signature		Date 1/30/2008



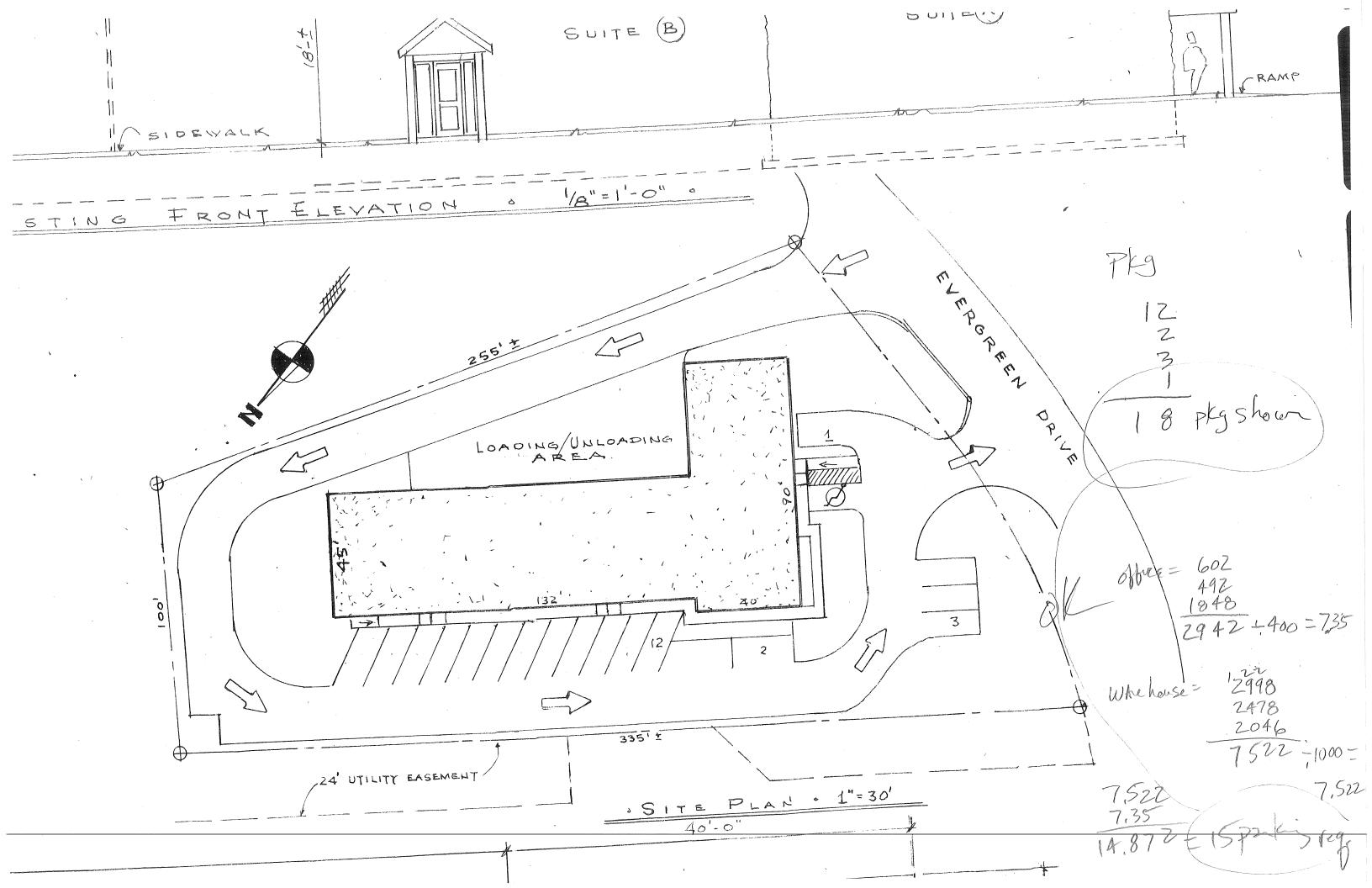
## Application for Construction Permit

SHADED AREAS ARE FOR OFFICE USE ONLY (8/04)

Department of Public Safety State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

> Tel: 207-626-3870 Fax: 207-287-6251

Duningt Name	XIM E	Project la	nformation			
Project Name: Street Location:	26 EVE	noneen dri	UE Town I	ocation Po	KTLAND	
	UMBERLA			of Stories: 1		
New Build	ding:	Renovation: 🔼	Addition:	Occupa	ancy Change: [	
Sprinkler Syst	em: Yes No	Supervised: Tes N	Square I	Footage:		
Date of Const Disc Included	ruction Start-up:			ed Project Cost:		· · · · · · · · · · · · · · · · · · ·
Disc included			Constitu	ction Permit Fee:		
			Classification	1)		
Apartments Hotel / Motel		Nursing Home Industrial			Educatio Daycare	
Rooming & Lo		Residential Care			Detentio	n 🗀
Congregate H Hospital	ousing —	Residential Care Assembly Class		300<1000	Business  Other	
Limited Care		Mercantile	A □ B □	_ c	ouloi	-
		Constru	action Type	)		
Fire Resistive	: Type I (443), (3			otected Ordinary:	Type III (200)	
l .	n-Combustible: T Non-Combustible	11 /// //		y Timber: Type I\		
•			E FIOLE	cted Wood Fram	e. Type v (TTT)	
Protected Ord	linary: Type III (2	<u>:11)</u>	☐ Unpro	otected Wood Fra	ame: Type V (00	00)
		Add	Unproduced Iresses	otected Wood Fra	ame: Type V (00	00)
Owner's Name	e: ART BI	Add BEAU	dresses	772 · 5161		00)
Owner's Name	e: ART BI	Add BEAU FORE ST.	dressesTelephone: _	772.5161	Fax:	
Owner's Name Mailing Address: Town:	340 F	Add BEAU FORE ST.	tresses _Telephone: _	772·5161 Zip C	Fax:	1
Owner's Name Mailing Address: Town: Design Profes	B: ART BI 340 F ORTLAND SSIONAL: JOHN	Add  BEAU  FORE ST.  State:	Telephone:	772·5161 Zip 0	Fax: code:	1
Owner's Name Mailing Address: Town: Design Profes Maine Registrati	E: ART BO 340 F ORTLAND SSIONAL: JOHN ON Number: Y	Add BEAU FORE ST. State: ME 310	Telephone:	772·5161 Zip 0	Fax: code:	1
Owner's Name Mailing Address: Town: Design Profes Maine Registrati Mailing Address	B: ART BI 340 F ORTLAND SSIONAL: JOHN	Add TORE ST.  State:  H. LEAGURE  Me 310  ST.	Telephone:	772.5761 Zip C 767 4600 Jleasure	Fax:	I vr.cc
Owner's Name Mailing Address: Town:  Design Profes Maine Registrati Mailing Address Town:  So.	E: ART BO 340 F ORTLAND SSIONAL: JOHN ON Number: Y SIX Q PORTLA	Add  BEAU  FORE ST.  State:  H. LEASURE  ME 310  ST.  State	Telephone:  Telephone:  Telephone:  Telephone:  E-mail:	772.5761 zip 0 767 4600 Jleasure zip 0	Fax:	1 vr.ce
Owner's Name Mailing Address: Town:  Design Profes Maine Registrati Mailing Address Town:  So.	E: ART BI 340 F ORTLAND SSIONAL: JOHN ON Number: V PORTLA PORTLA	Add  IBEAU  FORE ST.  State:  H. L. EASURE  ME 310  ST.  ND State  AUD ENTERPHY	Telephone:  Telephone:  Telephone:  Telephone:  E-mail:	772.5761 zip 0 767 4600 Jleasure zip 0	Fax:	1 vr.ce
Owner's Name Mailing Address: Town:  Design Profes Maine Registrati Mailing Address Town:  General Cont	E: ART BI 340 F ORTLAND SSIONAL: JOHN ON Number: Y PORTLA PORTLA PARTLA	Add  IBEAU  FORE ST.  State:  H. L. EASURE  ME 310  ST.  ND State  AUD ENTERPHY	Telephone:  Telephone:  Telephone:  E-mail:  MC  (NC)  Telephone:	772.5161 Zip 0 767 4600 Jleasure Zip 0 839.319	Fax:	1 vr.ce 06
Owner's Name Mailing Address: Town: Design Profes Maine Registrati Mailing Address Town: General Cont Mailing Address	e: ART BI 340 F ORTLAND SSIONAL: JOHN ON Number: Y PORTLA PORTLA PORTLA	Add  IBEAU  FORE ST.  State:  HEASURE  ME 310  ST.  ND State  AUD ENTERPRY  COUNTY R	Telephone:  Telephone:  Telephone:  E-mail:  MC  (NC)  Telephone:	772.5161 Zip 0 767 4600 Jleasure Zip 0 839.319	Fax:	1 vr.ce 06
Owner's Name Mailing Address: Town: Design Profes Maine Registrati Mailing Address Town: General Cont Mailing Address Town: Signature of	ART BO 340 F DATIAND SSIONAL: JOHN ON Number: V SIX CO PONTIA PONTIA PONTIA Applicant:	Add  IBEAU  FORE ST.  State:  H. LEACURE  ME 310  ST.  ND State  AND ENTERPRI  COUNTY R  State	Telephone:  Me Telephone: E-mail:  Me (NC, Telephone: Me Me Me Me Me Me	772.5761 Zip C 767 4600 Jleasure Zip C 839.3190	Fax:	1 vr.cc 06 .331
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Owner's Name Mailing Address: Town: Design Profes Maine Registrati Mailing Address Town: General Cont Mailing Address Town: Signature of Preliminary A Construction Approval Let	ART BO 340 F DATIAND  SSIONAL: JOHN  ON Number: V  SIX C  PORTIA  Applicant: SAN  Applicant: SAN  Permit: SAN  Ter: SAN	Add  IBEAU  FORE ST.  State:  H. LEACURE  ME 310  ST.  ND State  AND ENTERPRI  COUNTY R  State	Telephone:  Telephone:  Telephone:  E-mail:  MC  (NC,  Telephone:  MC  Applications of the content of the conte	772.5761 Zip C 767 4600 Jleasure Zip C 839.3190	Fax:	1 vr.cc 06 .331
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# Application for Construction Permit

SHADED AREAS ARE FOR OFFICE USE ONLY (8/04)

Department of Public Safety State Fire Marshal's Office 52 State House Station Augusta, Maine 04333-0052

Tel: 207-626-3870 Fax: 207-287-6251

Project Info	ormation , LLC,
Street Location: 26 EVENGUEEN DRIV	
County: CUMBERLAND	Number of Stories: 1
New Building: Renovation:	Addition: Cocupancy Change: C
Sprinkler System: Yes No Supervised: No	Square Footage:
Date of Construction Start-up:	Estimated Project Cost:
Disc Included: Yes No	Construction Permit Fee:
Occupancy C	lassification
Apartments Nursing Home	Educational
Hotel / Motel Industrial Rooming & Lodging Residential Care L	Daycare Detention
Rooming & Lodging Residential Care L Congregate Housing Residential Care L	
1	_evel
Limited Care	A□ B□ C□
Construct	tion Type
Fire Resistive: Type I (443), (332)	Unprotected Ordinary: Type III (200)
Protected Non-Combustible: Type II (222), (111)	Heavy Timber: Type IV (2HH)
Unprotected Non-Combustible: Type II (000)	
Protected Ordinary: Type III (211)	Unprotected Wood Frame: Type V (000)
<i></i>	
A P Addre	esses
Owner's Name: ART BIBEAU	Telephone: 772.5161 Fax:
Owner's Name: ART BIBEAU  Mailing Address: 340 Fore ST.	Telephone: 772.5161 Fax:
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Owner's Name: ART BIBEAU  Mailing Address: 340 FORE ST.  Town: PORTLAND State:  Design Professional: JOHN H. LEASURE  Maine Registration Number: Me 310	Telephone: 772.5761 Fax:
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