| | ~ | | | | Issue Date: | | CBL: | |
|---|---|--|---|---|--|---|--|--|
| | | , Fax: (207) 874-87 | | | <u> </u> | | | 6001 |
| | | | | | | | Phone: | |
| | | | _ | | | | | |
| | | | | | | | - | |
| - | Bellino - Gros | 50 | _ | | ortland | | 20787820 | 87 |
| ee/Buyer's Name | Phone: | | | | | | | Zone: |
| | Proposed Use: | | Permi | it Fee: | Cost of Wor | k: C | EO District: |] |
| | - | stall seven (7) Trane | | \$500.00 | \$45.00 | 0.00 | 5 | |
| | rooftop units. | (,) | FIRE | | | | TION: | L |
| | | | | | Denied | | p: U | Type: ///AC |
| | | | * | see Cond | itions | , | HVAC | 1 |
| osed Project Description: | | | | 6 | $\overline{\mathbf{n}}$ | | ~ // | |
| all seven (7) Trane rooftop | o units. | | - | | 6 | Signature | TAN' | |
| | | | PEDE | STRIAN ACTI | VITIES DIST | RICT (P.A | A.D.) | |
| | | | Action | n: 🗌 Approve | ed 🗌 App | roved w/Co | ondition | Denied |
| | | | Signa | ture: | | C | Date: | |
| iit Taken By: | Date Applied For: 09/14/2009 | | | Zoning | Approva | 1 | / | |
| This permit application do | es not preclude the | Special Zone or Rev | iews | Zonin | g Appeal | | Historic Prese | rvation |
| | | Shoreland | | Variance | | t | Not in Distric | t or Landmark |
| | nclude plumbing, | Wetland | | 🗌 Miscellar | neous | |] Does Not Req | uire Review |
| 3. Building permits are void if work is not started | | Flood Zone | | Conditional Use | | Requires Revi | ew | |
| | | Subdivision | | | ation | | Approved | |
| | | Site Plan | | | 1 | |] Approved w/C | Conditions |
| Set 17 7 | | Maj Minor M | M 10 4 10 9 | Denied Date: | | | | 3 |
| | Congress Street, 04101 tion of Construction: Allen Ave ness Name: Igreens re/Buyer's Name Use: nmercial / Walgreens osed Project Description: all seven (7) Trane rooftop nit Taken By: This permit application do Applicant(s) from meeting Federal Rules. Building permits do not in septic or electrical work. Building permits are void within six (6) months of th False information may inv permit and stop all work | Congress Street, 04101 Tel: (207) 874-8703 tion of Construction: Owner Name: Allen Ave Lockard Rober ness Name: Contractor Name lgreens Bellino - Gross te/Buyer's Name Phone: Use: Proposed Use: nmercial / Walgreens Walgreens / In rooftop units. osed Project Description: all seven (7) Trane rooftop units. all seven (7) Trane rooftop units. 09/14/2009 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building | Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-87 tion of Construction: Owner Name: Allen Ave Lockard Robert A tess Name: Contractor Name: lgreens Bellino - Grosso tey/Buyer's Name Phone: Use: Proposed Use: nmercial / Walgreens Walgreens / Install seven (7) Trane rooftop units. osed Project Description: all seven (7) Trane rooftop units. all seven (7) Trane rooftop units. Special Zone or Rev Oy14/2009 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Shoreland Building permits do not include plumbing, septic or electrical work. Flood Zone Building permits are void if work is not started within six (6) months of the date of issuance. Subdivision False information may invalidate a building permit and stop all work Site Plan Maj | Yor Fortrand, Wanne - Building of Ose Fermit Apprecation Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 tion of Construction: Owner Name: Allen Ave 69 H tess Name: Contractor Name: Contractor Name: lockard Robert A 69 H tess Name: Contractor Name: Contractor Name: lockard Robert A 69 H tess Name: Bellino - Grosso 980 refBuyer's Name Phone: Permit bit HV. Proposed Use: Permit numercial / Walgreens Walgreens / Install seven (7) Trane rooftop units. Permit osed Project Description: all seven (7) Trane rooftop units. Signa ift Taken By: Date Applied For: 09/14/2009 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Shoreland Building permits do not include plumbing, septic or electrical work. Wetland Flood Zone Building permits of the date of issuance. False information may invalidate a building permit and stop all work Site Plan Maj Minor MM Maj Minor MM | Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 09-0997 tion of Construction: Owner Name: Owner Address: Allen Ave Lockard Robert A 69 Hancock Rd tess Name: Contractor Name: Contractor Address: Bellino - Grosso 980 Riverside St F regers Bellino - Grosso 980 Riverside St F regers Bellino - Grosso 980 Riverside St F regers Proposed Use: Permit Type: IVAC Walgreens / Install seven (7) Trane \$500.00 rooftop units. Signature: # osed Project Description: all seven (7) Trane rooftop units. Signature: wilding permit application does not preclude the Special Zone or Reviews Zoning 09/14/2009 Shoreland Wariance This permit application does not preclude the Shoreland Miscellan Septior electrical work. Subdivision Entopted Building permits are void if work is not started Flood Zone Condition Maj Minor MM Denied Wetland Site Plan Approve Storelan S | Or Ortratilit, yname - Building Of Ose Fermit Application 09-0997 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 09-0997 iii on Construction: Owner Name: Contractor Address: Allen Ave Contractor Address: 69 Hancock Rd sess Name: Contractor Address: 980 Riverside St Portland greens Bellino - Grosso 980 Riverside St Portland seyByer's Name Phone: HVAC Use: Proposed Use: Permit Type: nmercial / Walgreens Walgreens / Install seven (7) Trane S500.00 rooftop units. Signature: Stopoord ased Project Description: all seven (7) Trane rooftop units. Signature: it Taken By: Date Applied For: Coning Approvad 09/14/2009 Special Zone or Reviews Zoning Approva This permit application does not preclude the Application from meeting applicable State and Federal Rules. Shoreland Wariance Building permits do not include plumbing, septic or electrical work. Shoreland Shoreland Wariance Felent T ISSUED Stie Plan Approved Mai Miscellaneous Site Plan Approved | OF OFTERING, Walling of Oxer Permit Application 09-0997 Gongress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 09-0997 Gin of Construction: Owner Address: Allen Ave Lockard Robert A 69 Hancock Rd ress Name: Bollino - Grosso 980 Riverside St Portland ress Name: Bollino - Grosso 980 Riverside St Portland ress Name: Promosed Use: Permit Type: HVAC HVAC S500.00 \$45,000.00 Use: Proposed Use: Walgreens / Install seven (7) Trane Permit Fee: S500.00 \$45,000.00 osed Project Description: all seven (7) Trane rooftop units. Signature: INSPECT Use: all seven (7) Trane rooftop units. Date Applied For: Signature: Signature: Signature: it Taken By: Date Applied For: 09/14/2009 Zoning Approval Approval This permits do not include plumbing, soptio or electrical work. Shoreland Waliand Miscellaneous Building permits do not include plumbing, soptio or electrical work. Shoreland Conditional Use Gonditional Use Gonditional Use Building permits are void if work is not | Allen Ave Lockard Robert A 09-0997 344 E03 Signature: Owner Address: Phone: Allen Ave Lockard Robert A 69 Hancock Rd Press Name: Contractor Name: Contractor Address: Phone: greens Bellino - Grosso 980 Riverside St Portland 20787820: greens Bellino - Grosso 980 Riverside St Portland 20787820: greens Bellino - Grosso 980 Riverside St Portland 20787820: use: Proposed Use: HVAC EVENT: Cost of Work: CEO District: Use: nmercial / Walgreens / Install seven (7) Trane Fremit Sec: Cost of Work: Stature: Wurker osed Project Description: all seven (7) Trane rooftop units. Signature: Signature: HUAC Signature: 09/14/2009 Signature: Signature: Signature: Date: This permit application does not preclude the Special Zone or Reviews Zoning Appeal Histric Press Building permits do not include plumbing, septic or electrical work. Shoreland Variance Does Not Req Building permits do not include of issuance. <td< td=""></td<> |

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 APPLICANT | ADDRESS | DATE | PHONE |
|---|---------|------|-------|
| RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE | | DATE | PHONE |

| Fill IN AND S | Sign with Ink |
|---|--|
| | FOR PERMIT WER EQUIPMENT |
| accordance with the Laws of Maine, the Building Code of the | |
| Location / CBL WAShing For & Allen NUR Name and address of owner of appliance WALGARENS WASHINGTON & FLLEN AUR, PORT Installer's name and address Belling / GAUSSO INC 980 Riverside ST PORTHAND ME 641 | Use of Building Repart Stare Date 9.14-09 Image ME Call mail XX Mail 103 Telephone 207-878-2087 |
| Location of appliance: | Type of Chimney: |
| □ Basement □ Floor | Masonry Lined |
| Attic Roof | Factory built NONE |
| Type of Fuel: Gas Oil Solid | Metal Factory Built U.L. Listing # |
| Appliance Name: TRANK RTUS (7) | |
| U.L. Approved & Yes D No | □ Direct Vent TypeUL# |
| U.I., Approved E les E No | lype <u>100102</u> 0L# |
| Will appliance be installed in accordance with the manufacture's installation instructions? Yes INO | Type of Fuel Tank Gas |
| IF <u>NO</u> Explain: | |
| | Size of Tank |
| The Type of License of Installer: | Number of Tanks |
| Solid Fuel # | Distance from Tank to Center of Flame feet. |
| □ Oil # □ Gas # <u>ME PNT 2300</u> | A 445000 |
| $\Box \text{ Gas # } \underline{ME} P \underline{NI} 2300$ | Cost of Work: <u>\$45060</u> Permit Fee: <u>\$470</u> |
| • Other | Permit Fee: \$ 470 |
| Approved | Approved with Conditions |
| | |
| Fire: | See attached letter or requirement |
| Ele.: | |
| Bidg .: Signature of Installer Robert A Provide | Inspector's Signature Date Approved |
| | Pink - Applicant's Gold - Assessor's Copy |

| • | aine - Building or Use Permit | | Permit No: 09-0997 | Date Applied For: 09/14/2009 | CBL: |
|--|--|------------------|---------------------------|---------------------------------|----------------------|
| 389 Congress Street, 0 | 4101 Tel: (207) 874-8703, Fax: (| (207) 874-87 | /16 | 09/14/2009 | 344 E036001 |
| Location of Construction: | Owner Name: | Owner Name: | | | Phone: |
| 336 Allen Ave | Lockard Robert A | Lockard Robert A | | 69 Hancock Rd | |
| Business Name: | Contractor Name: | | Contractor Address: | Contractor Address: | |
| Walgreens | Bellino - Grosso | | 980 Riverside St F | Portland | (207) 878-2087 |
| Lessee/Buyer's Name | Phone: | | Permit Type: | | |
| | | | HVAC | | |
| Proposed Use: | | Prop | oosed Project Description | : | |
| Walgreens / Install sever | n (7) Trane rooftop units. | Ins | tall seven (7) Trane ro | oftop units. | |
| | | | | | |
| | | | | | |
| | | | | | |
| - | | | | | |
| Dept: Zoning | Status: Approved with Condition | ns Review | er: Marge Schmuck | al Approval D | ate: 09/14/2009 |
| Note: | | | | | Ok to Issue: 🗹 |
| 1) These units SHALL | meet the maximum noise allowances | under the B-2 | 2 Zone | | |
| 2) All conditions placed | l upon the original building permit ar | e still in force | 2. | | |
| This permit is being work. | approved on the basis of plans submi | itted. Any de | viations shall require a | a separate approval t | before starting that |
| Dept: Building | Status: Approved with Condition | ns Review | er: Tammy Munson | Approval D | Date: 09/17/2009 |
| Note: | | | | | Ok to Issue: 🗹 |
| 1) Installation must be i | n compliance with all other approved | d structural, n | ecahnical, etc. plans. | | |
| , | · · · · · | , | | | |
| Dept: Fire | Status: Approved with Condition | ns Review | er: Capt Keith Gauti | reau Approval D | ate: 09/15/2009 |
| Note: | | | | | Ok to Issue: |
| 1) Install shall comply | with NFPA 54. | | | | |
| 2) Install shall comply | with all manufacture's specifications. | | | | |
| 1 | | | | | |

| PERMIT ISSUED | |
|------------------|--|
| SEP 1 7 2009 | |
| CITY OF PORTLAND | |

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 the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Signature of Inspections Official

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|---|------|---|--------|
| | SEP | 1 | 7 |
| | V OF | | |

Building Permit #: 09-0997

Date

Date

DWD ENGINEERING, INC.

5 MICHAEL ROAD EAST BRIDGEWATER, MA 02333 (508) 378-9602 FAX (508) 378-2922

September 11, 2009

City of Portland-Building Inspections Division 389 Congress Street Portland, ME 04101

RE: Roof Steel-Walgreen's Allens Avenue-Portland, ME

Dear Sir or Madam;

This letter is to certify that the roof steel (steel joists and structural steel) has been designed to support the proposed roof top units as shown on the architectural drawings (prepared by Moeser & Associates) for the above reference project.

If you have any questions concerning this letter or if I can be of further assistance, please do not hesitate to

contact me.

Cc: Moeser & Associates P M Construction

