

Inspection Services
Michael J. Nugent
Manager

Department of Urban Development
Joseph E. Gray, Jr.
Director



CITY OF PORTLAND

January 30, 2001

Cianchette & Family, LLC
42 Market Street
Portland, Maine 04101

RE: 145 Commercial Street
C/B/L: 386A-B-021

CERTIFIED MAIL: 70001670000030717427

Dear Sir or Madame,

Our records indicate that the certificate of occupancy required pursuant to building permit # 000933 has not been issued. Please be advised that the occupancy of the portion of the premises covered by the permit without the Certificate of Occupancy is a violation of Section 108.1 of the City Building Code (1999 BOCA)

This is a notice of violation pursuant to Section 116.2 of the Code. All referenced violations shall be corrected within 30 days of the date of this notice. Our records will be reviewed again on February 14, 2001. Failure to comply will result in this office referring the matter to the City of Portland Corporation Counsel for legal action and possible civil penalties, as provided for in Section 1-15 of the Code and in Title 30-A M.R.S.A. ss 4452.

This constitutes an appealable decision pursuant to Section 121 of the Code. Please feel free to contact me at 874-8700, if you wish to discuss the matter or have any questions.

Sincerely,

A handwritten signature in black ink that reads "Mike Nugent".

Mike Nugent
Manager of Inspection Services

FEB - 5



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 145 COMMERCIAL STREET 029-8-001

Issued to CIANCHETTI & FAMILY

Date of Issue NOV. 17 2000

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 000933, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

SECOND FLOOR

APPROVED OCCUPANCY

USE GROUP B TYPE 2B BOCA 99

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

18 Nov 00
(Date)

Inspector

Inspector of Buildings

Handwritten initials: MJC

NOTICE: This certificate certifies lawful use of building or premises, and rights to be transferred from owner to buyer when property changes hands. Copy will be furnished to owner or tenant for one dollar.

TOTAL P. 00

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Mike Nugent
Manager of Inspection Services

Cianchette Family, L.L.C.
42 Market Street
Portland, ME 04101-5022
(207) 774-1000

F A X C O V E R S H E E T

DATE: February 1, 2001
TO: Mike Nugent PHONE: 874 8700
AT: CITY OF PORTLAND FAX: 874 8716
Cc:
FROM: Deb Vargo PHONE: (207) 774 -1000
of pages: 3 FAX: (207) 774-2946

RE: Certificate of Occupancy

Dear Mr. Nugent,

Following is a copy of the certified letter we received today and a copy of the certificate of occupancy which the letter references. Please let me know if your office needs anything further.

Thank you.



CITY OF PORTLAND, MAINE
Department of Building Inspection

Feb. 5 2001

Received from Charvet Family a fee

of fifty two /100 Dollars \$ 50.00

for permit to install
erect
alter Certificate of occupancy

at 145 Commercial St move
demolish Est. Cost \$ —

check # 213
CBL 009 5001

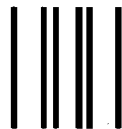
Inspector of buildings
Per [Signature]

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. **PRESERVE THIS RECEIPT.** In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$5.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Auditors Copy

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

DEPT OF PLANNING & URBAN DEVELOPMENT
PORTLAND CITY HALL ROOM 315
389 CONGRESS STREET
PORTLAND, MAINE 04101

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Received by (Please Print Clearly) B. Date of Delivery</p> <p>D. VARGAS 2/1/11</p> <p>C. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X [Signature]</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>
<p>1. Article Addressed to: 295-001</p> <p>Cianchetti Family</p> <p>422 Market St</p> <p>Port 1 me 01101</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Copy from service label)</p> <p>7000101000030717422</p>	

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 1670 0000 3071 7427

[Redacted area]

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (to be completed by mailer)
301-A-B-001
Street, Apt. No. or P.O. Box No.
City, State, ZIP+4