

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 080162

Please Read Application And Notes, If Any, Attached

This is to certify that POULOS NICHOLAS E

has permission to Repair and Replace old sheetrock, replaster

AT 9 VERANDA ST

429 H030001

MAR - 3 2008

CITY OF PORTLAND

PERMIT ISSUED

provided that the person or persons who apply for or accept this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is loaded or services closed-in. 4 HOUR NOTICES REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

2/28/08 *Christy M*
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0162	Issue Date: 2/19/08	CBL: 429 H030001
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Location of Construction: 9 VERANDA ST	Owner Name: POULOS NICHOLAS E	Owner Address: 40 BERKELEY ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B-2

Past Use: Commercial - Restaurant	Proposed Use: Commercial - Restaurant - Repair and Replace old sheetrock, replace ceiling	Permit Fee: \$30.00	Cost of Work: \$500.00	CEO District: 4
Proposed Project Description: Repair and Replace old sheetrock, replace ceiling		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B2 Type: SB IBC-2013	
		Signature:	Signature: 2/20/08 [Signature]	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 02/25/2008	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 Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 2/27/08 [Signature]	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
	[Handwritten: OK Review]		

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

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 2/27/08
 Permit # 2008-4144
 CBL# 429 H030

LOCATION: 9 VERANDA STREET METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER HAI X PHAM (VERANDA THAI CUISINE)
 TENANT _____ PHONE # cell - 749-7078

							TOTAL EACH FEE	
OUTLETS	20	Receptacles	10	Switches	1	Smoke Detector		.20
						HEAT DETECTOR		
FIXTURES	24	Incandescent	5	Fluorescent		Strips		.20
SERVICES		Overhead		Underground		TTL AMPS <800		15.00
		Overhead		Underground		>800		25.00
Temporary Service		Overhead		Underground		TTL AMPS		25.00
								25.00
METERS	4	(number of)						1.00
MOTORS	1	(number of) <u>BLWK</u>						2.00
RESID/COM		Electric units						1.00
HEATING		oil/gas units		Interior		Exterior		5.00
APPLIANCES		Ranges		Cook Tops		Wall Ovens		2.00
		Insta-Hot		Water heaters		Fans		2.00
		Dryers		Disposals	1	Dishwasher		2.00
		Compactors		Spa		Washing Machine		2.00
		Others (denote)			2	FREEZER		2.00
MISC. (number of)	2	Air Cond/win			1	SANDWICH COOLER		3.00
		Air Cond/cent				Pools		10.00
		HVAC		EMS		Thermostat		5.00
		Signs						10.00
		Alarms/res						5.00
		Alarms/com						15.00
		Heavy Duty(CRKT)						2.00
		Circus/Carnv						25.00
		Alterations						5.00
		Fire Repairs						15.00
	2	E Lights						1.00
		E Generators						20.00
PANELS	2	EXIT LT						
		Service	1	Remote (508)		Main		4.00
TRANSFORMER		0-25 Kva						5.00
		25-200 Kva						8.00
		Over 200 Kva						10.00
						TOTAL AMOUNT DUE		
						MINIMUM FEE/COMMERCIAL 55.00		
						MINIMUM FEE		45.00

CONTRACTORS NAME ROMEO A. BARCEAL MASTER LIC. # MS 600 17950
 ADDRESS 6 SADDLE LANE, GORHAM, ME LIMITED LIC. # _____
 TELEPHONE cell - 749-4291 H - 839-4844

SIGNATURE OF CONTRACTOR

✓ 1552

White Copy - Office • Yellow Copy - Applicant

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant _____ Date _____

PORTLAND

Date Permit Issued: 2/29/08

PERMIT # 10550 TOWN COPY

\$ 111.42 # Double Fee Charged

L.P.I. # 0732

Jeanne Banks
Local Plumbing Inspector Signature

1-11-08

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature _____ Date Approved _____

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p>Plumbing To Be Installed By:</p> <p>1. <input type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # _____</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center; font-size: 2em;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>OR</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE