

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

Permit No: 05-1264	Issue Date: PERMIT ISSUED	GBL: 526 B067001
Location of Construction: 14 Industrial Way	Owner Name: Northeastern Graphic Supply	Owner Address: Po Box 1418
Business Name:	Contractor Name: Monaghan Construction, Inc.	Contractor Address: PO Box 1235 Scarborough
Lessee/Buyer's Name	Phone:	Phone: 8898755
		Permit Type: CITY OF PORTLAND
		Amendment to Commercial
		Zone: I-M

Past Use: Commercial	Proposed Use: Commercial amend permit # 05-0892 creating data storage area	Permit Fee: \$48.00	Cost of Work: \$2,300.00	CEO District: 5
Proposed Project Description: Amend permit # 05-0892 creating data storage area	Fire Dept: TO DEPA 101	INSPECTION: Use Group: B Type: 205	Signature: <i>[Signature]</i> Date: <i>9/26/05</i>	
Permit Taken By: dmartin	Date Applied For: 09/01/2005	Signature: <i>[Signature]</i> Date: _____		

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	Zoning Appeal	Historic Preservation
	<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Minor <input type="checkbox"/> MM	<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	<input checked="" 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: <i>09/01/05</i>	Date: _____	Date: <i>[Signature]</i>

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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that Northeastern Graphic Supply has permission to Amend permit # 05-0892 cre at 14 Industrial Way

326 B007001

PERMIT ISSUED

Permit Number: 051264

OCT 3 2005

CITY OF PORTLAND

provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and u this department.

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

PERMITS
A permit is required for the construction, alteration, repair, or maintenance of buildings and structures, and of the application on file in

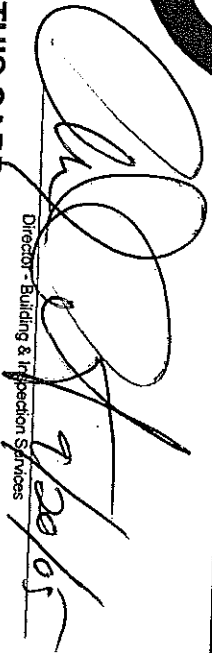
A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept GREEN CROSS
Health Dept PHD

Appeal Board _____
Other _____
Department Name _____

PENALTY FOR REMOVING THIS CARD


Director - Building & Inspection Services

City of Portland, Maine - Building or Use Permit

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Permit No:	Date Applied For:	CBL:
05-1264	09/01/2005	326 B007001

Location of Construction: 14 Industrial Way	Owner Name: Northeastern Graphic Supply	Owner Address: Po Box 1418	Phone:
Business Name:	Contractor Name: Monaghan Construction, Inc.	Contractor Address: PO Box 1235 Scarborough	Phone () 883-3755
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	

Proposed Use: Commercial amend permit # 05-0892 creating data storage area

Proposed Project Description: Amend permit # 05-0892 creating data storage area

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 09/06/2005
Note:

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 09/20/2005
Note:

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cpn Greg Cass **Approval Date:**
Note: SPOKE WITH OWNER PERMIT IS FOR SAW ROOM AS PER PLAN. **Ok to Issue:**

- 1) All construction to comply with NFPA 101
Sprinkler to be dropped in room. No melt away tiles as per conservation with owner.
- 2) Application is for Data storage room, plan shows Saw room.
Please update.

All Purpose Building Permit Application

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

Location/Address of Construction: 14 INDUSTRIAL WAY, PORTLAND ME

Total Square Footage of Proposed Structure <u>500 SQ FT (INTERNAL STORAGE)</u>	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>326</u> Block# <u>B</u> Lot# <u>607</u>	Owner: <u>ANDY GRAHAM, DBA PORTLAND COLOR</u>
Lessee/Buyer's Name (if Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>774-2659</u> <u>ANDY GRAHAM - DBA PORTLAND COLOR</u>
Current use: <u>Commercial</u>	Cost Of Work: \$ <u>2300.00</u> Fee: \$ <u>48.00</u>

If the location is currently vacant, what was prior use: _____

Approximately how long has it been vacant: _____

Proposed use: Hand Paint # 05-0892 Interior Renovations

Project description: Creating A room,

Contractor's name, address & telephone: MONAGHAN WOODWORKS 100 COMMERCIAL ST, PORTLAND ME

Who should we contact when the permit is ready: BRAD FINLEY 756-5410

Mailing address: SAME AS ABOVE

We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 756-5410 (cell)

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

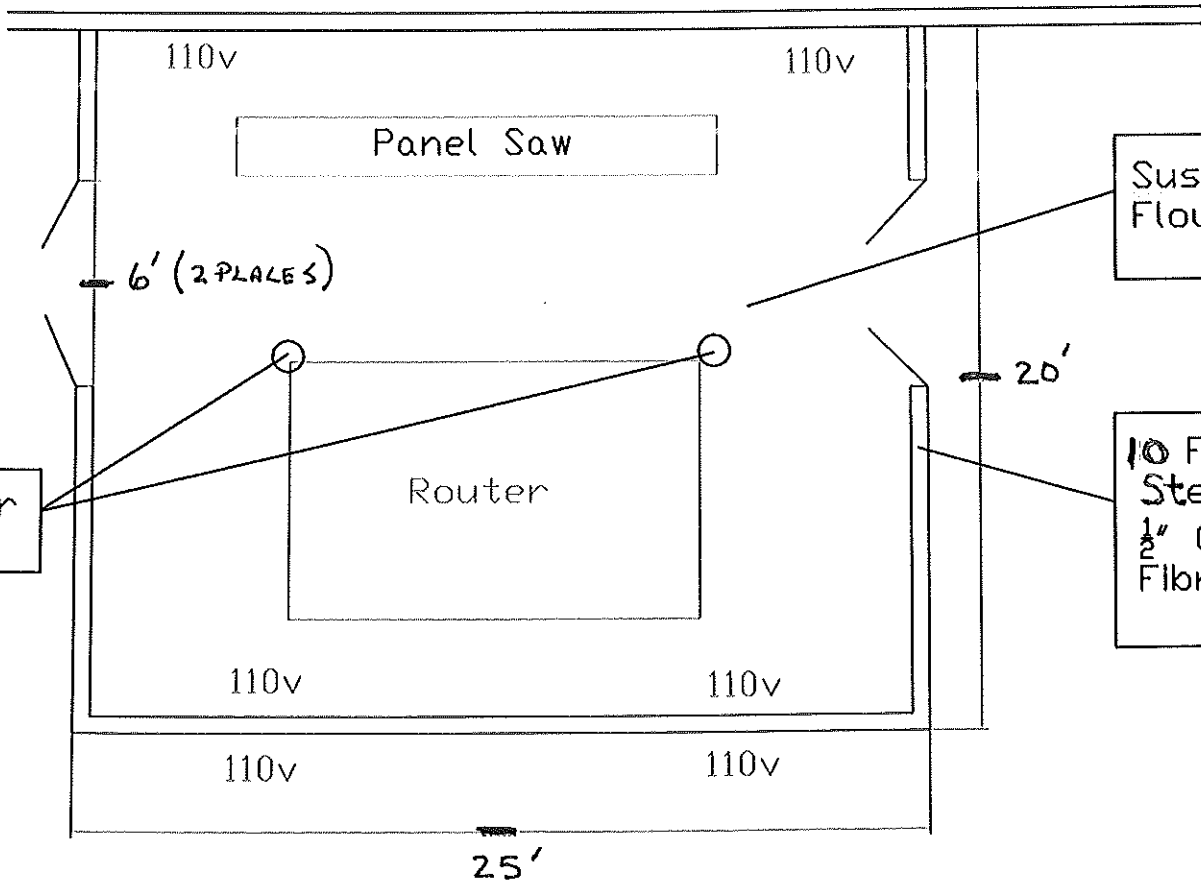
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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 provisions of the codes applicable to this permit.

Signature of applicant: [Signature] Date: 8/29/05

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

326 B 007
DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
AUG 2nd 2005
RECEIVED

Exterior Wall



Suspended Acoustical Ceiling,
Flourescent Lights

Sprinkler
Heads

10 Ft. High Walls
Steel Studs, 16" On Center
1/2" Gypsum Board Both Sides
Fibreglass Insulation

14 INDUSTRIAL WAY
PORTLAND, ME
PORTLAND COLOR
SAW ROOM.

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Planation: Portland
 Street: 14 Industrial Way
 Subdivision Lot #: _____
PROPERTY OWNERS NAME

Last: Grain First: Andrew
 Applicant Name: Dan Plumbing & Heating

Mailing Address of Owner/Applicant: 270 South Main
 (If Different) Portland ME 04102

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: [Signature] Date: 8/22/05

Local Plumbing Inspector Signature: _____ Date Approved: _____

2005-8282

PORTLAND PERMIT # 9509 TOWN COPY

Date Permit Issued: 8/11/05 \$ 1130 if Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

326-B-17

Caution: Inspection Required

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

PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>old</u>	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG/D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>17164</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.	RECEIVED CITY OF PORTLAND AUG 16 2005 FLOOR DRAIN URINAL	2	Shower (Separate)
			1
	Indirect Waste		Wash Basin
	Water Treatment Softener, Filter, etc.		Water Closet (Toilet)
	Grease / Oil Separator		Clothes Washer
	Dental Cuspidor	1	Dish Washer
	Bidet		Garbage Disposal
	Other: _____		Laundry Tub
	Fixtures (Subtotal) Column 2	0.9	Water Heater

TRANSFER FEE [\$6.00]	Type of Fixture	Number	Type of Fixture
OR			
	Fixtures (Subtotal) Column 1	0.1	Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Fixtures (Subtotal) Column 2	0.9	Fixtures (Subtotal) Column 2
Total Fixtures	1.0	Total Fixtures
Fixture Fee		Fixture Fee
Transfer Fee		Transfer Fee
Hook-Up & Relocation Fee		Hook-Up & Relocation Fee
Permit Fee (Total)		Permit Fee (Total)