

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP ..... 00033
B.O.C.A. TYPE OF CONSTRUCTION .....
ZONING LOCATION ... F-2 ... PORTLAND, MAINE ... Jan. 7, 1983

JAN 12 1983

CITY of PORTLAND

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION .. 230 Anderson Street ... Fire District #1 [ ] #2 [ ]
1. Owner's name and address ... Pine State Elevator Co. - same ... Telephone 773-7206 ...
2. Lessee's name and address ... Telephone ...
3. Contractor's name and address ... Phil Germani - Germani Constr. - 15 Bradley St. Telephone 772-5628

Proposed use of building ... service & installation of elevators ... No. of sheets ...
Last use ... printing company ... No. families ...
Material ... No. stories ... Heat ... Style of roof ... Roofing ...

Other buildings on same lot ... Appeal Fees \$ ...
Estimated contractual cost \$ ... 5,000 ... Base Fee ... 35.00

FIELD INSPECTOR—Mr. ... @ 775-5451 ... stop order removal 25.00 ... Late Fee ... 190.00 ...

Change of use from printing company to elevator service ... total 135.00
To make alterations to existing building as per plans. 1 sheets of plans. Stamp of Special Condition

send permit to # 1 ... 195 Commercial Street

Stamp of Special Condition
PERMIT ISSUED WITH LETTER

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? ... Is any electrical work involved in this work? ...
Is connection to be made to public sewer? ... If not, what is proposed for sewage? ...
Has septic tank notice been sent? ... Form notice sent? ...
Height average grade to top of plate ... Height average grade to highest point of roof ...
Size, front ... depth ... No. stories ... solid or filled land? ... earth or rock? ...
Material of foundation ... Thickness, top ... bottom ... cellar ...
Kind of roof ... Rise per foot ... Roof covering ...
No. of chimneys ... Material of chimneys ... of lining ... Kind of heat ... fuel ...
Framing Lumber—Kind ... Dressed or full size? ... Corner posts ... Sills ...
Size Girder ... Columns under girders ... Size ... Max on centers ...
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor ... 2nd ... 3rd ... roof ...
On centers: 1st floor ... 2nd ... 3rd ... roof ...
Maximum span: 1st floor ... 2nd ... 3rd ... roof ...
If one story building with masonry walls, thickness of walls? ... height?

IF A GARAGE

No. cars now accommodated on same lot ... to be accommodated ... number commercial cars to be accommodated ...
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE
BUILDING INSPECTION—PLAN EXAMINER ...
ZONING: ...
BUILDING CODE PERMITS ISSUED ...
Fire Dept.: ...
Health Dept.: ...
Others: ...

MISCELLANEOUS
Will work require disturbing of any tree on a public street? ...
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? ...

Signature of Applicant: Ronald W. O'Brien Phone # ... same ...
Type Name of above: Ronald O'Brien for Pine State Elevator

Stamp: PERMIT ISSUED WITH LETTER

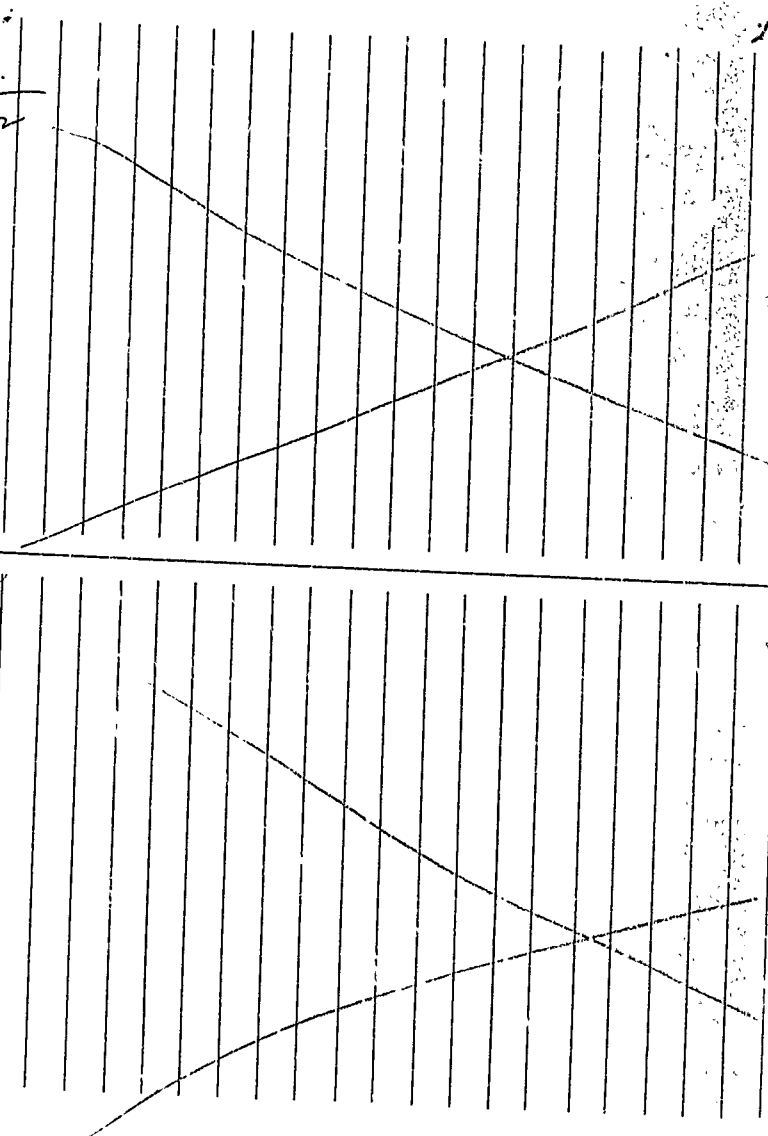
FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

Handwritten signature: M. Adolator

Permit No. 83/033  
 Location 230 Anderson St.  
 Owner Crink State Operator  
 Date of permit 1-7-83  
 Approved 1-12-83  
 Dwelling \_\_\_\_\_  
 Garage \_\_\_\_\_  
 Alteration Change of use

NOTES

1-13-83 - Plumber O.K. RA  
 w/ P/O K.  
 1-20-83 - Closing in RA  
 w/ P/O K.  
 1-28-83 - Plumber w/ P/O RA  
 2-8-83 - Checked w/ P/O  
 3-21-83 - Plumber work in  
Progress. O.K. RA  
 4-4-83 - All work complete  
O.K. Plumber back to work  
O.K. Crane C.O. RA



PERMIT # \_\_\_\_\_ CITY OF Portland BUILDING PERMIT APPLICATION

Please fill out any part which applies to job. Proper plans must accompany form

MAP # \_\_\_\_\_ LOTS \_\_\_\_\_

Owner: Male Automobile Assn.

Address: Box 3544 Portland, ME 04104 774-0377

LOCATION OF CONSTRUCTION: 232-260 Harrison Street

CONTRACTOR: Barbara Proprietor SUBCONTRACTORS: \_\_\_\_\_

ADDRESS: Thomson's Point Portland, ME 774-0377

Est. Construction Cost: \_\_\_\_\_ Type of Use: Retail

The Use: \_\_\_\_\_

Building Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ H \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_

Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion: Explain 2,100-gallon tanks, temporary

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Resident Buildings Only: \_\_\_\_\_

Of Dwelling Units: \_\_\_\_\_ # Of New Dwelling Units: \_\_\_\_\_

Foundation:

1. Type of Soil: \_\_\_\_\_
2. Footing: Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footing Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other: \_\_\_\_\_

Floor:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girders Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joist Spacing: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Standing Size: \_\_\_\_\_ Spacing: \_\_\_\_\_
2. No. windows: \_\_\_\_\_
3. No. Doors: \_\_\_\_\_
4. Header Sizes: \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size: \_\_\_\_\_
7. Insulation Type: \_\_\_\_\_ Size: \_\_\_\_\_
8. Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
9. Siding Type: \_\_\_\_\_ Weather Exposure: \_\_\_\_\_
10. Masonry Materials: \_\_\_\_\_
11. Metal Materials: \_\_\_\_\_

Interior Walls:

1. Building Size: \_\_\_\_\_ Bracing: \_\_\_\_\_
2. Header Size: \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type: \_\_\_\_\_
4. Fire Wall if required: \_\_\_\_\_
5. Other Materials: \_\_\_\_\_

**For Official Use Only**

Date: <u>February 23, 1988</u>	Sub/Division: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits: _____	Name: _____
Ridge Code: _____	Lot: _____
Time Limit: _____	Block: _____
Estimated Cost: _____	Permit Expiration: _____
Value & Occupancy: _____	Ownership: _____
Fees: <u>32</u>	

Ceiling:

1. Ceiling Joists Size: \_\_\_\_\_
2. Ceiling Strapping Size: \_\_\_\_\_ Spacing: 16" O.C.
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type: \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_ Size: City Code

Roof:

1. Truss or Rafter Size: \_\_\_\_\_ Span: \_\_\_\_\_
2. Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
3. Roof Covering Type: \_\_\_\_\_
4. Other: \_\_\_\_\_

Chimneys:

- Type: \_\_\_\_\_ Number of Fire Places: \_\_\_\_\_

Heating:

- Type of Heat: \_\_\_\_\_

Electrical:

- Service Entrance Size: \_\_\_\_\_ Smoke Detector Required: Yes  No

Plumbing:

1. Approval of soil test if required: Yes  No
2. No. of Tubs or Showers: \_\_\_\_\_
3. No. of Flushes: \_\_\_\_\_
4. No. of Lavatories: \_\_\_\_\_
5. No. of Other Fixtures: \_\_\_\_\_

Swimming Pools:

1. Type: \_\_\_\_\_
2. Pool Size: \_\_\_\_\_ Square Footage: \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

Zoning:

- District: \_\_\_\_\_ Area: Frontage Req. \_\_\_\_\_ Provided: \_\_\_\_\_
- Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:

- Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
- Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_
- Conditional Use: Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Submittal \_\_\_\_\_
- Shore and Floodplain Mgmt. \_\_\_\_\_ Special Exception \_\_\_\_\_
- Other: (Explain) \_\_\_\_\_
- Date Approved: \_\_\_\_\_

Permit Received By: Lynne Bennett

Signature of Applicant: Thomas Ransoy Date: 2/23/88

Signature of CEO: Thomas Ransoy Date: 2/24/88

Inspection Dates: \_\_\_\_\_

White Tax Assessor Yellow GPCOG White Tax CEO Copyright GPCOG 1987

**PLOT PLAN**



**FEES (Breakdown From Front)**

				Units
Base Fee \$				
Subdivision Fee \$				
Site Plan Review Fee \$				
Other Fees \$				
(Explain)				
Late Fee \$				

**COMMENTS**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature of Applicant Thomas E. Ramsey Date 2/23/88

924287

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 33.80 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form. **PERMIT ISSUED**

Owner: Town Taxi Phone # \_\_\_\_\_  
 Address: 226 Anderson St Ptd, ME 04101  
 LOCATION OF CONSTRUCTION 226 Anderson St  
 Contractor: Rockwell Burr Sub: \_\_\_\_\_  
 Address: 184 Read St Ptd, ME 04103 Phone # 761-3939  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: Comm w/sign  
 Past Use: Comm  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Tot. l Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Con. Miniuma \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Erect Sign (4'x11') (UL # E143239)

**For Official Use Only**  
 Date: Oct 23, 1992 Subdivision: \_\_\_\_\_  
 Name: NOV-3 1992  
 City Code: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 Ownership: CITY OF PORTLAND

**Foundation:**  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other: \_\_\_\_\_

**Floor:**  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

**Exterior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Spac(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

**Interior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Spac(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

**Zoning:**  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
**Review Required:**  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other: WDA 11-3-92 (Explain) \_\_\_\_\_

**Ceiling:**  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

**Roof:**  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: Approved  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_  
 Date: 10/23/92

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Date: 10/23/92

**Heating:**  
 Type of Heat: \_\_\_\_\_  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Toilets or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage: \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Gresik  
 Signature of Applicant Charles Limpert Date Oct 23, 1992  
 CEO's District \_\_\_\_\_

CONTINUED TO REVERSE SIDE 11 Mrs. Leary  
 Ivory Tag - CEO

White - Tax Assessor

924230

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 35.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: E.S.N. Enterprises Phone # 773-1711  
 Address: 226 Anderson St Ptd, ME 04101  
 LOCATION OF CONSTRUCTION 226 Anderson St  
 Contractor: Portland Pump Sub.: \_\_\_\_\_  
 P.O. Box 1180 Scarborough, ME 04074  
 Address: \_\_\_\_\_ Phone # 883-4317  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: \_\_\_\_\_  
 \_\_\_\_\_ Past Use: \_\_\_\_\_  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Remove 1-5,000 gal underground tank  
Install

**For Official Use Only**

Date: October 2, 1992 Subdivision: \_\_\_\_\_  
 Inside Fire Limits: \_\_\_\_\_  
 Bldg Code: \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_

**PERMIT ISSUED**  
**OCT 20 1992**  
**CITY OF PORTLAND**

Zoning: \_\_\_\_\_  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required: \_\_\_\_\_  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other WSP (Explain) \_\_\_\_\_ 10-5-92

**Foundation:**  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

**Floor:**  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

**Exterior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

**Interior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

**Ceiling:**  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

**Roof:**  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: Approved  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Date: 10/5/92  
 Signature: [Signature]

**Heating:**  
 Type of Heat: \_\_\_\_\_

**Electrical:**  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

**HISTORIC PRESERVATION**

Received By Mary Gresik Date Oct 2, 1992

Signature of Applicant [Signature]

CEO's District \_\_\_\_\_

CONTINUED TO REVERSE SIDE  
Ivory Tag - CEO

**PERMIT ISSUED WITH REQUIREMENTS**

**PERMIT ISSUED WITH REQUIREMENTS**

[Signature]

White - Tax Assessor

BUILDING PERMIT REPORT

DATE: 10/14/92

ADDRESS: 226 Anderson St.

REASON FOR PERMIT: Underground Tank Removal Installation

BUILDING OWNER: ESN Enterprises

CONTRACTOR: Portland Pump

PERMIT APPLICANT Bill Brassard

APPROVED:  DENIED

CONDITION OF APPROVAL OR DENIAL:

- (1) All underground tank removal and/or installation shall be done in accordance with Department of Environmental Protection Regulations Chapter 691
- (2) No cutting of tanks on site. Cutting of tanks to be done at an approved tank disposal site.
- (3) ~~Fire Dispatcher must be notified 48 hours in advance of removal and/or transportation of tanks.~~
- 3.) Limited to installation of tank only. Additional permit or amendment to this permit for pump installation and controls.

# PROJECT SITE SKETCH

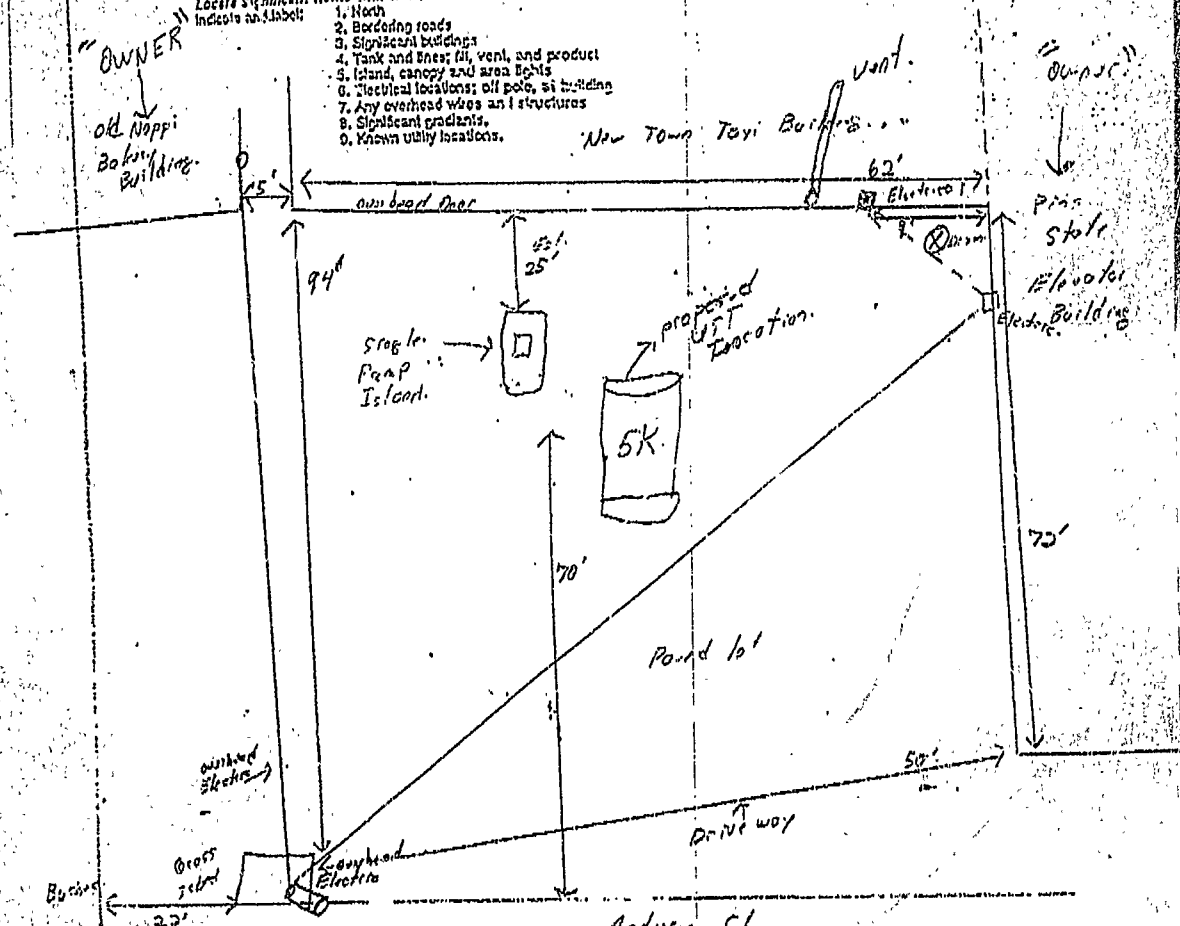
Date 6-11-93  
By M.B.

CUSTOMER Town Taxi

LOCATION 226 Anderson St. Portland

PROJECT Install 5K UST & new 2 hose, sink product pump

- SKETCH LIST  
Locate & label items with two measurements from reference points.  
Indicate an offset.
1. North
  2. Bordering roads
  3. Significant buildings
  4. Tank and lines; fill, vent, and product
  5. Island, canopy and area lights
  6. Electrical locations; oil pole, air building
  7. Any overhead wires and structures
  8. Significant gradients
  9. Known utility locations.



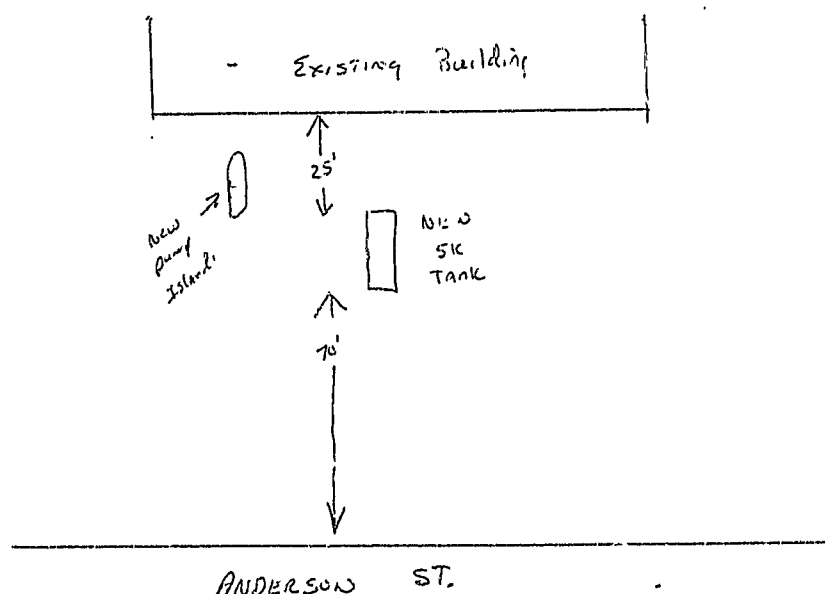


DEPARTMENT OF ENVIRONMENTAL PROTECTION  
REGISTRATION FORM FOR UNDERGROUND OIL  
AND HAZARDOUS SUBSTANCES (CHEMICAL)  
STORAGE TANKS  
(Pursuant to 38 M.R.S.A. Section 563, 40 CFR Part 280)

Facility Name: E.S.N. Enterprises  
Location (Town/City): Portland  
Owner: Elliott S. Nathanson

REGISTRATION NUMBER  
(Complete ONLY if Registration Number has  
been previously assigned.)

12. If this registration involves replacing tanks or installing tanks, ATTACH a drawing of the facility showing the location of tanks (and piping) to be installed and any existing tanks. USE the space below for a sketch if no drawing already exists. THE FORM OF ADDITIONAL PROTECTION for tanks used for marketing and distribution of oil in sensitive areas should be detailed on the drawing. MONITORING WELL LOCATIONS should be provided for all tanks greater than 1,100 gallons that are used for on-site consumption of oil.



**DEPARTMENT OF ENVIRONMENTAL PROTECTION  
REGISTRATION FORM FOR UNDERGROUND OIL  
AND HAZARDOUS SUBSTANCES (CHEMICAL)  
STORAGE TANKS**  
(Pursuant to 38 M.R.S.A. Section 563, 40 CFR Part 280)

Facility Name: F.S.N. Enterprises  
 Location (Town/City): Portland, ME.  
 Owner: Elliott Nathanson.

REGISTRATION NUMBER
<small>(Complete ONLY if Registration Number has been previously assigned.)</small>

4. TANK OWNER  
 A. Name: Elliott Nathanson - F.S.N. Enterprises  
 B. Mail Address: 25 Woodfield Rd.  
 C. Town/City: Portland D. State: ME.  
 E. Zip Code: 04102 F. Telephone: (207) 774-1398

5. TANK OPERATOR  
 A. Name: F.S.N. Enterprises  
 B. Mail Address: 25 Woodfield Rd  
 C. Street Address: same  
 D. Town/City: Portland E. State: ME.  
 F. Zip Code: 04102 G. Telephone: (207) 774-1399

6. COMPLETE the next two pages of this form and include each tank currently at the facility and each new or replacement tank planned for the facility.

7. ENCLOSE a check for the applicable registration fee with this submittal made payable to "Treasurer -- State of Maine" and return to the Department of Environmental Protection, Registration fees are applicable ONLY to active, new, or replacement tanks used for the marketing and distribution of oil. Registration fees are due upon registration and annually thereafter, prior to the first day of January. Fees are as follows:

\_\_\_\_\_ Tanks 6,000 gallons or under in size \_\_\_\_\_ \$25 per tank  
 \_\_\_\_\_ Tanks over 6,000 gallons in size \_\_\_\_\_ \$50 per tank

8. MAKE TWO COPIES of this form. SUBMIT the original to the DEPARTMENT OF ENVIRONMENTAL PROTECTION (Bureau of Oil & Hazardous Materials Control, State House Station 17, Augusta, Maine 04333). SEND one copy to the LOCAL FIRE DEPARTMENT having jurisdiction. RETAIN the third copy for your records. For new and replacement tanks, registrations are due at least five (5) business days prior to installation. Registrations for existing tanks are due prior to February 1, 1980.

9. CERTIFY THIS FORM BY SIGNING. By signing this form, the tank registrant certifies that all information is accurate and complete, and that they will comply with all applicable federal, state and local laws and regulations concerning the underground storage of petroleum or other hazardous materials. The owner or operator is required by Maine statute to file an amendment to this registration with the Department of Environmental Protection immediately upon any change in the information on this form.

7-15-82 Date Elliott S. Nathanson Owner  
 Owner or Authorized Employee Title  
 (Please PRINT or TYPE) (Please PRINT or TYPE)

Elliott S. Nathanson  
 SIGNATURE



**PORTLAND PUMP COMPANY**  
**PETROLEUM SYSTEMS**

Lt. MacDougal  
Portland Fire Dept.  
Central Garage  
380 Congress Street  
Portland, Maine 04101

October 16, 1992

Dear Sir:

This letter is in regard to the proposed installation of the Underground Fuel Tank Storage system with a 2 hose, single product, (gas) suction pump at the 226 Anderson Street location. This pump will be installed in accordance with NFPA 30 & 30A, the National Electrical Code (NFPA 70), the Maine DEP Chapter 691 including the required single check valve located under the pump. In addition, the necessary electrical work will be performed according to Class 1 Standards.

Sincerely,

William A. Brassard  
Portland Pump Company

FILE:WBI 31302

Post-It™ brand fax transmittal memo 7671		# of pages 1 /	
To	Lt. MacDougal	From	Bill Brassard
Co.	Portland Fire Dept.	Co.	Portland Pump
Dept.		Phone #	
Fax #		Fax #	

924301

Permit # 924301 City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Lessee: Town Taxi Co Phone # 773-1711  
 Address: 226 Anderson St- Ptld, ME 04101  
 LOCATION OF CONSTRUCTION 226 Anderson St.  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: retail taxi & Retail gas sales  
 Past Use: retail taxi(10/92)  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion: Change of Use - from retail taxi (10/92)

**For Official Use Only**

Date: 11/2/92 Subdivision: \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name: NOV-6-1002  
 Bldg Code \_\_\_\_\_ Lot: \_\_\_\_\_  
 Time Limit \_\_\_\_\_ Ownership: CITY OF PORTLAND  
 Estimated Cost \_\_\_\_\_

Zoning: \_\_\_\_\_  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain): 11-3-92

Foundation: to retail taxi & retail gas sales  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 b. Other \_\_\_\_\_

Floor:  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Exterior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

Interior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

Chimneys:  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating:  
 Type of Heat: \_\_\_\_\_  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Bathrooms \_\_\_\_\_  
 5. No. of Closets \_\_\_\_\_  
 Swimming Pools:  
 1. Type \_\_\_\_\_  
 2. Pool Size \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

HISTORIC PRESERVATION

PERMIT ISSUED WITH LETTER

Permit Received By Louise Hanson  
 Signature of Applicant Louise Hanson Date 11-2-92  
 CEO's District Elliott-Nathan

CONTINUED TO REVERSE SIDE  
Ivory Tag - CFO  
III MA. Heary

White - Tax Assessor

924287

Permit # 924287 City of Portland BUILDING PERMIT APPLICATION Fee 33.80 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Town Taxi Phone # \_\_\_\_\_  
 Address: 226 Anderson St Ptd, ME 04100  
 LOCATION OF CONSTRUCTION 226 Anderson St  
 Contractor: Rockwell Burr Sub: \_\_\_\_\_  
184 Read St Ptd, ME 04103  
 Address: \_\_\_\_\_ Phone # 761-3939  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: Comm w/sign  
 Past Use: Comm  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Erect Sign (4'x11') (UL # E143230)

**For Official Use Only**  
 Date: Oct 23, 1992  
 Inside Fire Limits \_\_\_\_\_  
 Bldg Code \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_  
 Subdivision \_\_\_\_\_  
 Name \_\_\_\_\_  
 Ownership: CITY OF PORTLAND  
 Private \_\_\_\_\_  
 PERMIT ISSUED  
 NOV - 3 1992

Zoning: \_\_\_\_\_  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain) WDA - 11-3-92

Foundation:  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

Floor:  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Exterior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

Interior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_  
 Action:  Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_  
 Action:  Approved  
 Approved with Conditions  
 Denied

Chimneys:  
 Type: \_\_\_\_\_  
 Number of Fire Places \_\_\_\_\_  
 Signature: \_\_\_\_\_

Heating:  
 Type of Heat: Mina Lead

Electrical:  
 Service Entrance Size: \_\_\_\_\_  
 Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Grosik

Signature of Applicant Charles Limpert Date Oct 23, 1992

CEO's District 11

CONTINUED TO REVERSE SIDE MR. Leary

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN



**FEES (Breakdown From Front)**

Base Fee \$ \_\_\_\_\_

Subdivision Fee \$ \_\_\_\_\_

Site Plan Review Fee \$ \_\_\_\_\_

Other Fees \$ \_\_\_\_\_

(Explain) \_\_\_\_\_

Late Fee \$ \_\_\_\_\_

Type	Inspect' on Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS *1/23 Sign has been pulled*

**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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

*Charles [Signature]* ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

SIGNATURE OF APPLICANT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE NO. \_\_\_\_\_



1285 Walt Whitman Road  
Melville, New York 11747-3081  
(516) 271-6200  
FAX No. (516) 271-8259/8260  
MCI Mail No. 255-3315  
Telex No. 6852015

**MEL**

File E143239

Vol. 1

Issued: 3-5-92

FOLLOW-UP SERVICE PROCEDURE

(TYPE L)

SIGNS  
(UXVT)

Manufacturer: Rockwell Burr Sign & Design Inc. <sup>(Subscriber)</sup> (#E143239)  
(753390-001) 184 Read Street  
Portland, ME 04103

Applicant: Same as Manufacturer

Listee: Same as Manufacturer

This Procedure authorizes the above Manufacturer to use the Listing Mark of Underwriters Laboratories Inc. only on Listed products covered by this Procedure, in accordance with the Listing and Follow-Up Service Agreement.

The Prescribed Mark or Marking shall be used only at the above manufacturing location on such products which comply with this Procedure and any other applicable requirements.

The Procedure contains information for the use of the above named manufacturer and the representatives of Underwriters Laboratories Inc. and is not to be used for any other purpose. It is lent to the Manufacturer with the understanding that it is not to be copied, either wholly or in part, and that it will be returned to Underwriters Laboratories Inc. upon request.

This PROCEDURE, and any subsequent revisions, is the property of UNDERWRITERS LABORATORIES INC., and is not transferable.

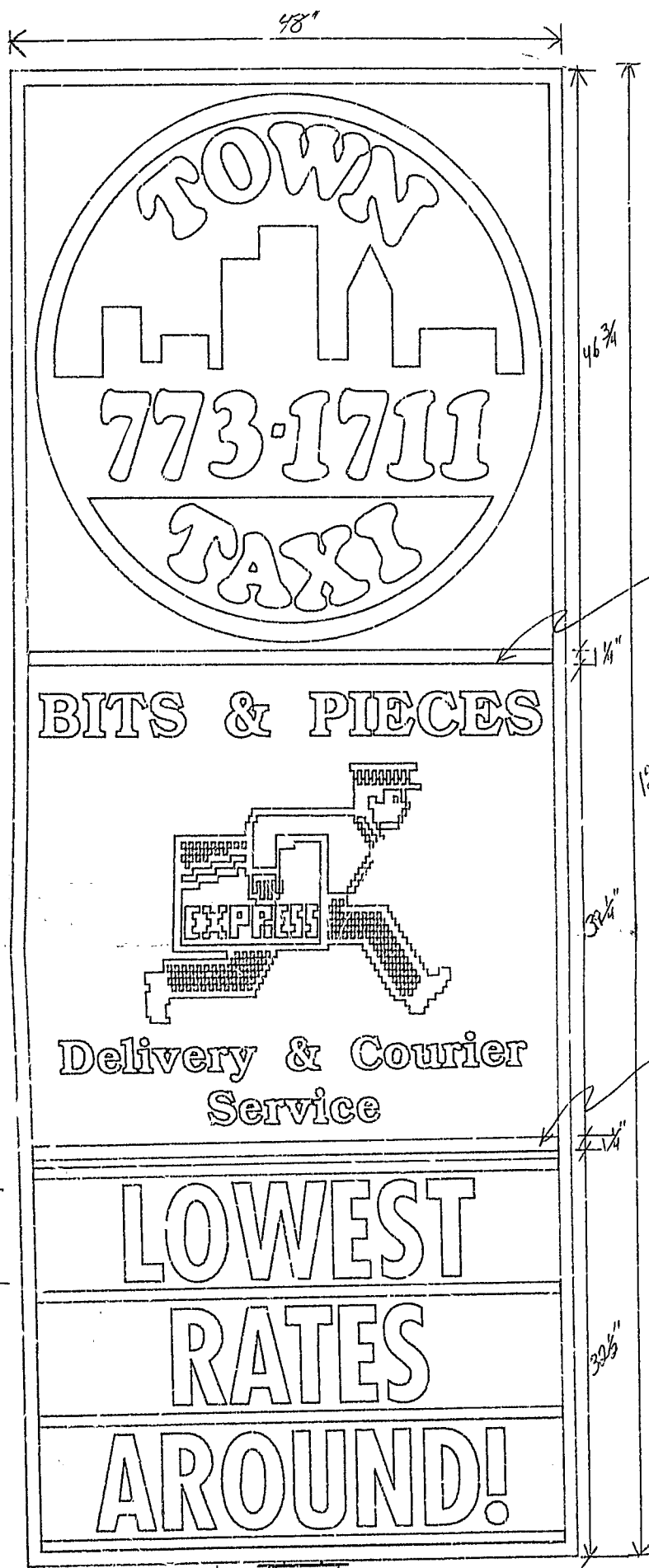
UNDERWRITERS LABORATORIES INC.

*Robert H. Levine*

Robert H. Levine  
Vice President, Follow-Up Services

Lib\E143239-PC

A not-for-profit organization  
dedicated to public safety and  
committed to quality service



8'9"  
TO GROUND

SCALE  
1" = 10"

FINAL DRAFT

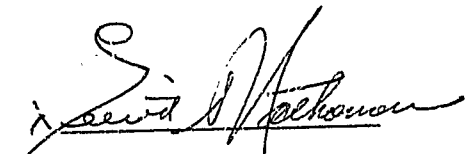
APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

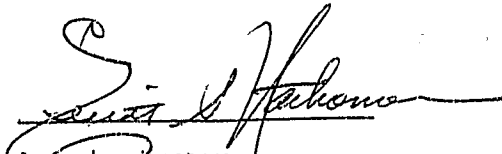


WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN-OR AWNING PROPOSED TO BE ERECTED ON A BUILDING AT 226 Anderson St. IN PORTLAND, MAINE ESN Enterprises being the owner of the premises at 226 Anderson St. in Portland, Maine hereby gives consent to the erection of a certain sign owned by Town Taxi Co. over the sidewalk or on the building from said premises as described in application to the Division of Inspection Services of Portland, Maine for a permit to cover the erection of said sign:

And in consideration of the issuance of said permit ESN Enterprises owner of said premises, in event said sign shall cease to serve the purpose for which it was erected or shall become dangerous and in event the owner of said sign shall fail to remove said sign or make it permanently safe in case the sign still serves the purpose for which it was erected, hereby agrees for himself or itself, for his heirs, its successors, and his or its assigns, to completely remove said sign in such condition and of order from him to remove it.

In Witness whereof, the owner of said premises has signed this consent and agreement this 19<sup>th</sup> day of October 1982.

  
Owner's signature

  
Lessee's signature

18.80  
25.00  
33.80

# INSURANCE BINDER

ISSUE DATE: (MM/DD/YY)

8/13/92

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

PRODUCER  
 TURNER BARKER INS  
 157 FOX STREET  
 PORTLAND ME 04101

COMPANY  
 MAINE BOND & CAS CO  
 DATE EFFECTIVE TIME 8/14/92 12:01 X AM  
 BINDER NO. ESNE50-1 G  
 EXPIRATION DATE TIME 9/14/92 X 12:01 AM NOON

CODE 0000369538  
 SUB-CODE

THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY NO. BOUND  
 DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (including Location)  
 PACK FIRE LIAB

INSURED  
 ESN ENTERPRISES  
 SHEILA  
 226 ANDERSON STREET  
 PORTLAND ME 04102

COVERAGES	TYPE OF INSURANCE PROPERTY CAUSES OF LOSS	COVER. GE/FORMS	AMOUNT	LIMITS	
				DEDUCTIBLE	COINSUR.
	BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC.	Building Contents	200,000 60,000	250	90

GENERAL LIABILITY	GENERAL AGGREGATE
COMMERCIAL GENERAL LIABILITY	\$2,000,000
CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	PRODUCTS - COMP/OP AGG. \$
OWNER'S & CONTRACTOR'S PI QT.	PERSONAL & ADV. INJURY \$
	EACH OCCURRENCE \$1,000,000
	FIRE DAMAGE (Any one fire) \$
RETRO DATE FOR CLAIMS MADE:	MED. EXPENSE (Any one person) \$5,000

AUTOMOBILE LIABILITY	COMBINED SINGLE LIMIT
ANY AUTO	\$
ALL OWNED AUTOS	BODILY INJURY (Per Person) \$
SCHEDULED AUTOS	BODILY INJURY (Per accident) \$
HIRED AUTOS	PROPERTY DAMAGE \$
NON-OWNED AUTOS	MEDICAL PAYMENTS \$
GARAGE LIABILITY	PERSONAL INJURY PROT. \$
	UNINSURED MOTORIST \$

AUTO PHYSICAL DAMAGE DEDUCTIBLE	ACTUAL CASH VALUE
ALL VEHICLES	STATED AMOUNT \$
COLLISION:	OTHER \$
OTHER THAN COLL:	EACH OCCURRENCE \$

EXCESS LIABILITY	AGGREGATE
UMBRELLA FORM	\$
OTHER THAN UMBRELLA FORM	SELF-INSURED RETENTION \$

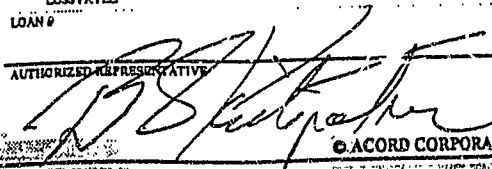
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY	STATUTORY LIMITS
	EACH ACCIDENT \$
	DISEASE-POLICY LIMIT \$
	DISEASE-EACH EMPLOYEE \$

SPECIAL CONDITIONS/OTHER COVERAGES  
 PROOF OF COVERAGE UNTIL POLICY ARRIVES FROM THE COMPANY

NAME & ADDRESS: PEOPLES HERITAGE BANK  
 1 PORTLAND SQUARE  
 PORTLAND ME 04101

MORTGAGEE  
 LOSS PAYEE  
 LOAN #

ADDITIONAL INSURED

AUTHORIZED REPRESENTATIVE  


ACORD 75-S (7/90) © ACORD CORPORATION 1990

**CERTIFICATE OF INSURANCE**

ISSUE DATE (MM/DD/YY)  
 05/18/92

**PRODUCER**  
 Clark Associates  
 307 Cumberland Avenue  
 P O Box 3543  
 Portland, ME 04104  
 (207) 774-6257

**INSURED**  
 Rockwell Burr Sign & Design Inc.  
 184 Read Street  
 Portland, ME 04103

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

COMPANIES AFFORDING COVERAGE	
COMPANY LETTER A	Renover
COMPANY LETTER B	Aetna
COMPANY LETTER C	
COMPANY LETTER D	
COMPANY LETTER E	

**COVERAGES**  
 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT. <input type="checkbox"/>	ZDP3591553-01	08/23/91	08/23/92	GENERAL AGGREGATE \$ 600,000 PRODUCTS-COMP/OPS AGGREGATE \$ 600,000 PERSONAL & ADVERTISING INJURY \$ 300,000 EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ 50,000 MEDICAL EXPENSE(Any one person) \$ 5,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTC <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/>	ADP3750291	08/23/91	08/23/92	COMBINED SINGLE LIMIT \$ 100,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ EACH OCCURENCE AGGREGATE \$
B	EXCESS LIABILITY <input type="checkbox"/> Umbrella Form <input type="checkbox"/> Other Than Umbrella Form WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	094C0021312677	07/22/91	07/22/92	STATUTORY LIMITS \$ 100,000 EACH ACCIDENT \$ 500,000 DISEASE - POLICY LIMIT \$ 100,000 DISEASE - EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

CANCELLATION  
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OF REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE *Nancy Pare*

EXHIBIT C

MORTGAGE LOAN INSPECTION

Bruce W. Goodwin, P.L.S.

P.O. Box 2314

South Portland, ME 04116-2314

1-207-799-3211

BORROWER(S): ESN ENTERPRISES

LOCATION: 226 ANDERSON ST.  
PORTLAND, MAINE

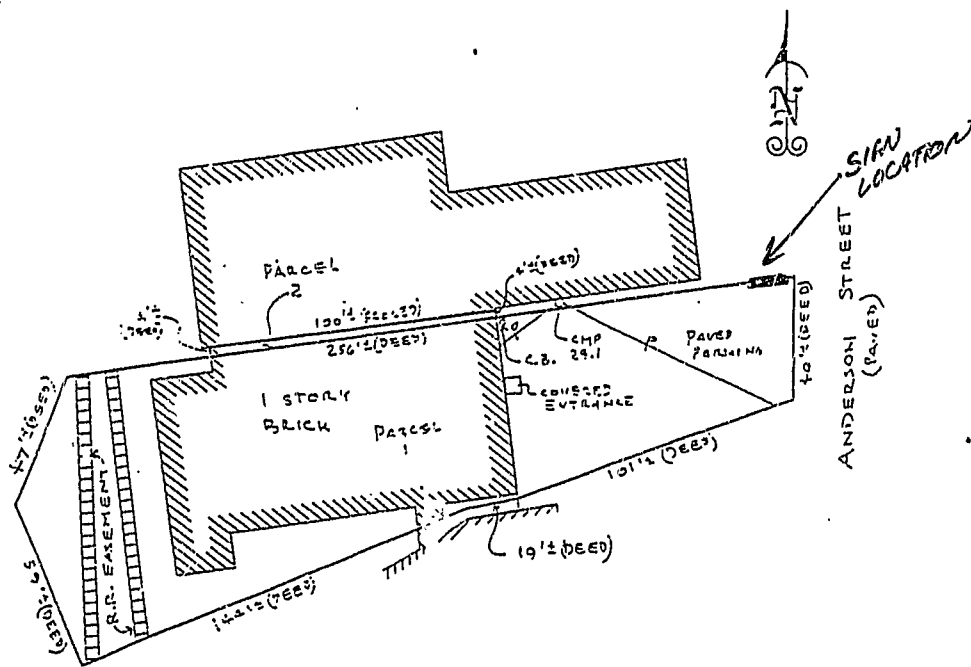
JOB NO: 142-77

DATE: 6-10-92

SCALE: 1"=50'

SOURCE DEED: bk 47 pg 113

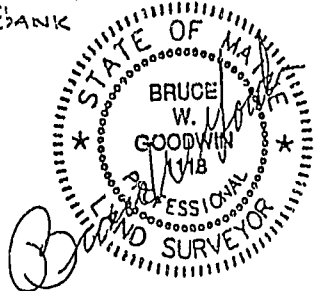
RECORDED PLAN: bk PG  
LOT(S):



NOTE: THIS IS NOT A BOUNDARY SURVEY. This plan is made for the purposes of determining that the improvements are within the apparent boundary lines. THE PREPARER IS NOT LIABLE FOR ANY OTHER USE BY ANY OTHER PERSON OR ENTITY.

CERTIFICATION: I hereby certify to PEOPLES HERITAGE SAVINGS BANK and its mortgage title insurer that based upon inspection made with reasonable certainty, that:

- ) this plan was made from an inspection of the site.
- ) there ARE NO apparent violations of municipal ordinances regarding building setbacks in effect at time of construction.
- ) the principal structure(s) located on the premises ARE NOT in a flood hazard zone as delineated on the flood maps used by the Federal Emergency Management Agency.



CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION 226 Anderson St.

Date of Issue 1/13/93

Issued to E S N Enterprises

This is to certify that the building, premises, or part thereof, at the above location, ~~was~~ — altered — changed as to use under Building Permit No. 92/4301, 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

APPROVED OCCUPANCY

change of use - from retail tag  
to retail taxi & retail gas sales

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved

(Date)

Inspector

Inspector of Buildings

This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Permit # 924301 924301 City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Lessee: Town Taxi Co Phone # 773-1711  
 Address: 226 Anderson St- Ptld, ME 04101  
 LOCATION OF CONSTRUCTION 226 Anderson St.  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: retail taxi & Retail gas sales  
 Past Use: retail taxi (10/92)  
 # of Existing Res. Units: \_\_\_\_\_ # of New Res. Unit: \_\_\_\_\_  
 Building Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms: \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Change of Use - from retail taxi (10/92)

**For Official Use Only**

Date: 11/2/92  
 Inside Fire Limits: \_\_\_\_\_  
 Bldg Code: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_

Subdivision: \_\_\_\_\_  
 Name: NOV - 6 1992  
 Lot: \_\_\_\_\_  
 Ownership: CITY OF PORTLAND

Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other: WHA - 11-3-92 (Explain)

Foundation: to retail taxi & retail gas sales

1. Type of Soil: \_\_\_\_\_  
 2. Set Backs: Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other: \_\_\_\_\_

Floor:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Studding Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows: \_\_\_\_\_  
 3. No. Doors: \_\_\_\_\_  
 4. Header Size: \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size: \_\_\_\_\_  
 7. Insulation Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 8. Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 9. Siding Type: \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials: \_\_\_\_\_  
 11. Metal Materials: \_\_\_\_\_

Interior Walls:

1. Studding Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes: \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type: \_\_\_\_\_  
 4. Fire Wall if required: \_\_\_\_\_  
 5. Other Materials: \_\_\_\_\_

CEILING:

1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_ Size \_\_\_\_\_  
 4. Insulation Type: \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

Roof:

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_  
 Chimneys: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Heating: \_\_\_\_\_ Type of Heat: \_\_\_\_\_  
 Electrical: \_\_\_\_\_ Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_  
 Plumbing: \_\_\_\_\_ Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

1. Approval of soil test if required \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:

1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law \_\_\_\_\_

**PERMIT ISSUED WITH LETTER**

**PERMIT ISSUED WITH LETTER**

Permit Received By Louise E. Chase  
 Signature of Applicant [Signature] Date 11-2-92  
 CEO's District 111355 Anna Hanson  
 CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO [Signature]

White - Tax Assessor

Inspection Services  
Samuel P. Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

CITY OF PORTLAND

November 5, 1992

Town Taxi Co.  
226 Anderson St  
Portland, ME 04101

Re: 226 Anderson St

Dear Sir,

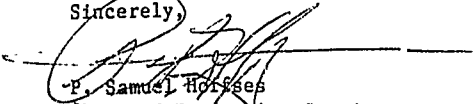
Your application for a Change of Use from retail taxi to retail gas sales has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all the requirements of this letter are met.

1. A remote shut-off switch shall be located to shut-off pump in case of emergency.
2. Pump shall be protected and anchored against physical damage by vehicles.
3. Instructions for the operation of dispensers shall be conspicuously posted.
4. Conspicuous and legible signs prohibiting smoking shall be posted within sight of customer being served.
5. The motors of all equipment being fueled shall be shut-off during the fueling operation.
6. At least one (1) fire extinguisher with a minimum 5 BC shall be located within 75 feet of each pump.
7. Installation shall be in compliance with the rules and regulations of the State Fire Marshal's Office of Maine for flammable and combustible liquids.
8. The control console operator must observe the filling operation of each vehicle including closed circuit television.
9. Also, your proposed change of use must comply with Article 6, Section 609.0 of the City's building code.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

  
-P. Samuel Hoffses  
Chief of Inspection Services

cc: LT W. Garroway, Fire Prevention Bureau  
W. Giroux, Building Inspections

389 Congress Street • Portland, Maine 04101 • (207) 874-8704

**MORTGAGE LOAN INSPECTION**

Bruce W. Goodwin, P.L.S.

117 O. Box 2314  
South Portland, ME 04116-2314  
1-207-799-3211

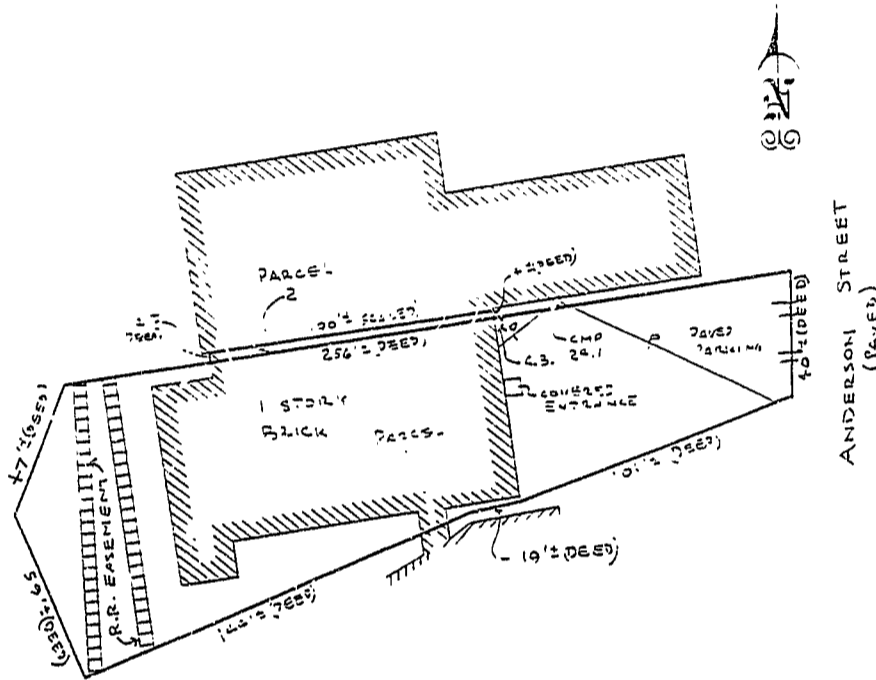
**COPY**

BORROWER(S): ESQ. ENTERPRISES  
LOCATION: 226 ANDERSON ST  
PORTLAND, MAINE

JOB NO.: 100-1  
DATE: 6-10-92  
SCALE: 1"=50'

SOURCE DEED: bk 42-10 pg 3

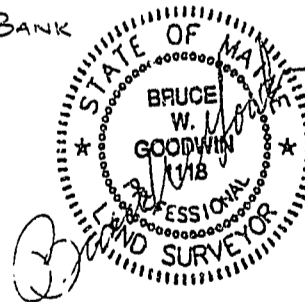
RECORDED PLAN: bk PG  
LOT(S):



**NOTE: THIS IS NOT A BOUNDARY SURVEY.** This plan is made for the purposes of determining that the improvements are within the apparent boundary lines. **THE PREPARER IS NOT LIABLE FOR ANY OTHER USE BY ANY OTHER PERSON OR ENTITY.**

**CERTIFICATION:** I hereby certify to PEOPLES HERITAGE SAVINGS BANK and its mortgage title insurer that based upon inspection made with reasonable certainty, that:

- this plan was made from an inspection of the site.
- there ARE NO apparent violations of municipal ordinances regarding building setbacks in effect at time of construction.
- the principal structure(s) located on the premises ARE NOT in a flood hazard zone as delineated on the flood maps used by the Federal Emergency Management Agency.







CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

Issued to E. S. N. Enterprises

LOCATION 225 Anderson St.

Date of Issue 9/29/92

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. 92/4782 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

APPROVED OCCUPANCY

Change of Use - from plumbing contractor  
to retail service

**Limiting Conditions:**

All requirements must be met of Building & Fire Codes within  
forty-five (45) days.

This certificate supersedes  
certificate issued

Approved:

*Eric L. Mendonça*  
(Date) Inspector

*[Signature]*  
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and is to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

924082

Permit # 924082 City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone \_\_\_\_\_ Map # \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: E.S.N. Enterprises Phone # \_\_\_\_\_  
Address: 25 Woodfield Rd Ptd, ME 04102

LOCATION OF CONSTRUCTION 226 Anderson St.  
Contractor: Peoples Heritage Bk. Sub: 879-0573

Address: 44 Oak St; Ptd, ME 04001 Phone # \_\_\_\_\_  
Est. Construction Cos. \_\_\_\_\_ Proposed Use: retail service

# of Existing Res. Units \_\_\_\_\_ f New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
# Stories: \_\_\_\_\_ # I \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explanation: Change of Use - from plumbing contractor to retail service

**For Official Use Only** SEP - 1 1992

Date: 8/26/92 Subdivision: \_\_\_\_\_  
 Inside Fire Limits: \_\_\_\_\_ Name: \_\_\_\_\_  
 Lidg Code: \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_ Estimated Cost: \_\_\_\_\_

**Zoning:** Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
**Review Required:**  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain): W-27-92

**Foundation:**  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

**Floor:**  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

**Exterior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

**Interior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

**Ceiling:**  
 1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_ Size \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

**Roof:**  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

**Chimneys:** Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
**Heating:** Type of Heat: \_\_\_\_\_

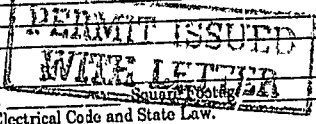
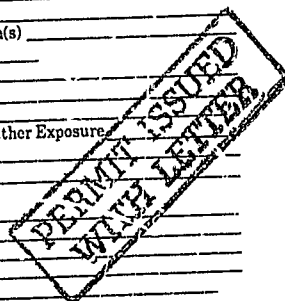
**Electrical:** Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase  
 Signature of Applicant Frank Connor Date 8/26/92  
 CEO's District \_\_\_\_\_

CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO Ma. Leary



**HISTORIC PRESERVATION**

White - Tax Assessor

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 2.17

Subdivision Fee \$ \_\_\_\_\_

Site Plan Review Fee \$ \_\_\_\_\_

Other Fees \$ \_\_\_\_\_

(Explain) \_\_\_\_\_

Late fee \$ \_\_\_\_\_

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

*Requesting a Certificate of Occupancy*

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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

*[Signature]*

ADDRESS

PHONE NO.

*879--0573*

PHONE NO.

Inspection Services  
Samuel P. Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

**CITY OF PORTLAND**

September 1, 1992

R: 226 Anderson St. - Portland

E.S.N. Enterprises  
25 Woodfield Rd.  
Portland, ME 04102

Dear Sir:

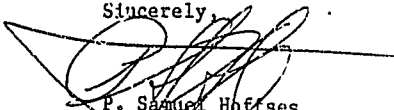
Your application to change the use from plumbing contractor to retail service has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

- Building and Fire Code Requirements
1. Office, restroom, and kitchenette areas shall be separated from the garage-storage area by 2 hour fire resistance rated partitions or walls.
  2. The garage area shall be provided with two separate and remote means of egress, overhead doors do not comply. Passage through the office area is acceptable provided there are properly rated 1-1/2 hours self closing fire doors in place that swing in the direction of exit travel.
  3. Emergency lighting and illuminated exit signs shall be provided in accordance with sections 5-9 and 5-10 of N.F.P.A. 101 Life Safety Code.
  4. Portable fire extinguishers shall be provided in accordance with N.F.P.A. #10. 40B Rating Minimum.
  5. Garage, office and other areas shall have ventilation air supplied as per the BOCA National Mechanical Code/1990, Article 16, section 1602.0 Mechanical ventilation table M-1602.2.
  6. Article 6, section 609.0 Public Garages of the BOCA National Building Code/1990 gives the requirements fuel-dispensing, fuel dispensing systems, ventilation and special hazards.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

  
S. P. Hoffses  
Chief of Inspection Services

/el

cc: LT. Wallace Garroway, Fire Prevention Bureau

# APPLICATION FOR SUBMETER



For Sewer User Charge Adjustments

The undersigned hereby requests permission to install additional water meter(s) in accordance with Section 322.6C of the "Municipal Code of the City of Portland, Maine".

It is understood that all expenses related to the purchase, installation and maintenance of the meter(s) is to be borne by the applicant.

## To be Completed by Applicant

Address where sub-meter is requested 220 Anderson St.

Property owner name Mr. John Nappi (Nappi's Bakery)

Tax Map Reference (on Real Estate Tax Bill) 9-A-13

Property owner address 141 Foreside Rd. Cumberland Maine

Person to be contacted to schedule inspections Robert Cordice 772-2671  
(Name and Telephone Number)

Portland Water District Acct. No. (on bill) P-9-151 B

Billing Name & Address (on bill) 222 Anderson St.  
Portland Maine 04101

Location and size existing Portland Water District Service Meter 3/4"  $\phi$  in back of office in warehouse section

Proposed location and size of sub-meter 5/8"  $\phi$  meter in line rear of building on left side

Will remote reading register be utilized? NO  YES (If yes, state location near existing meter)

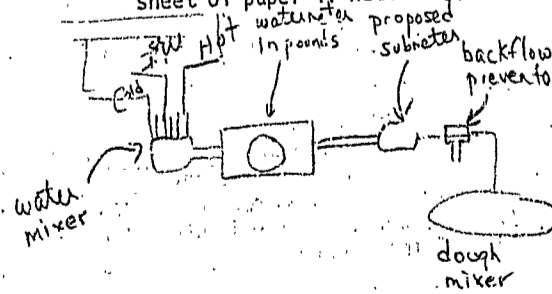
Description of proposed changes in plumbing required for submetering:

install submeter and in line backflow preventer in line to dough mixer

The volume of water to be submetered can be shown not to enter the sewerage system by virtue of its use for:

bread products

Sketch plan showing proposed changes in plumbing and the location of existing and proposed meters. Show water flow through submeter to non-discharge equipment or location (use additional sheet of paper if necessary)



I certify the above information is true and correct:

Robert Cordice  
Signature

n.d.

4-14-51  
Date

**INSTRUCTIONS**

- First - The applicant is to complete front of this form. The Tax Map Reference can be found on your Real Estate Tax Bill directly following owners name and address in the center of your Property Tax Bill. Billing name and address should be copied from your Water & Sewer Bill as well as the Portland Water District Account Number which is in the lower left corner of the Water and Sewer Bill.
- Second - No. 1 completed application form to:  
 City of Portland  
 Dept. of Public Works  
 404 City Hall  
 Portland, Maine 04101  
 ATTN: MR. WILLIAM GOODWIN
- Third - The Public Works Department will call the person indicated on front side to schedule pre-installation inspection. During this inspection the Public Works section of this form (below) will be completed. Following this inspection Public Works will mail copies of the application form. If the application is approved 3 copies will be made, one will be mailed to the Portland Water District, one will be forwarded to the City Plumbing Inspector and one will be mailed back to the Applicant. If the application is denied, one copy will be made and mailed to the applicant showing reason for denial.
- Fourth - Upon receipt of a copy of the approved application, the applicant can purchase and install the sub-meter as approved. Following installation the applicant or his plumber must call the Chief Plumbing Inspector at 775-5451 Ext. 804 for an inspection of the completed installation. Following inspection by the Chief Plumbing Inspector, the Water District will be requested to seal the sub-meter and arrange to have an automatic reading system (if applicable - See General Information) instituted where by the volume shown by the submeter will be credited on the Sewer User Charges of the Bill.

355

**GENERAL INFORMATION**

Section 322.6C of the "Municipal Code of the City of Portland, Maine" reads as follows:

"Submetering of Water Volume. Any person who feels that recorded water records are not a reliable index of his discharge volume may install an additional water meter of a type approved by the Director to measure the volume of water which can be shown not to enter the sewerage system. The person installing such a meter shall immediately notify the Director of such installation and shall be responsible to the Director for reporting meter readings not less often than every three months. Such person shall be credited with the volume charges for the volume shown by such meter, which meter shall be accessible for reading by the City or its agents at all reasonable times."

The City and the District have arranged to relieve the customer from the reporting responsibility required above if both meters can be read simultaneously by the District's meter. This can be accomplished by locating the sub-meter directly adjacent to the pre-existing service meter or by equipping the sub-meter located elsewhere with a remote reading register located so both readings can be made at the same time.

Approved meters are Neptune and Rockwell meters, conforming to the following specifications:

1. shall meet or exceed ANSI accuracy test requirements and be accompanied by a certificate of test accuracy.
2. the meters will have straight reading, cubic foot registers.
3. the meters will have the meter number stamped into the main case.
4. the meters shall be magnetic drive.
5. shall have either a rotating disc or oscillating piston.
6. shall have a bronze case.

Approved meters are available from the Water District, which sells them for the price the District buys them from the manufacturers. If you wish to purchase a sub-meter from the District you must bring your copy of an approved application with you at time of purchase.

**TO BE COMPLETED BY PUBLIC WORKS**

Pre-installation inspection by Norman Twaddle  
 on 4-19-81

Automatic reading system requested  YES  NO  
 A Watts #9 Back Flow Preventer or equal shall be installed in line to dough mixer

Application  Approved  Denied

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TO BE COMPLETED BY THE PLUMBING INSPECTOR**

An inspection of the completed installation of the submetering system approved on this application was conducted on 4-26-81  
 By Ernold R. Goodwin, Chief Plumbing Inspector of the City of Portland.

- The submetering system was installed as approved.  
 No cross connections were found.

The installation is  approved  dis-approved Ernold Goodwin

**TO BE COMPLETED BY THE WATER DISTRICT**

Date submeter sold 7-2-81  
 Submeter account number P-9-81513  
 Submeter make and number 5/8" RRR # 30533056  
 Submeter installation readings 0  
 Submeter account entered into computer n.a.  
 Submeter account entered into meter book 7-8-81  
 Special Instructions \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date October 30, 1992  
 Receipt and Permit number 0291

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 226 Anderson St.

OWNER'S NAME: Town Taxi ADDRESS: same

OUTLETS: FEES

Receptacles 1 Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL \_\_\_\_\_

FIXTURES: (number of)

Incandescent \_\_\_\_\_ Fluorescent \_\_\_\_\_ (not strip) TOTAL \_\_\_\_\_

Strip Fluorescent \_\_\_\_\_ ft. \_\_\_\_\_

SERVICES:

Overhead \_\_\_\_\_ Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes \_\_\_\_\_

METERS: (number of) \_\_\_\_\_

MOTORS: (number of)

Fractional \_\_\_\_\_

1 HP or over \_\_\_\_\_

RESIDENTIAL HEATING:

Oil or Gas (number of units) \_\_\_\_\_

Electric (number of rooms) \_\_\_\_\_

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler) \_\_\_\_\_

Oil or Gas (by separate units) \_\_\_\_\_

Electric Under 20 kws \_\_\_\_\_ Over 20 kws \_\_\_\_\_

APPLIANCES: (number of)

Ranges \_\_\_\_\_ Water Heaters \_\_\_\_\_

Cook Tops \_\_\_\_\_ Disposals \_\_\_\_\_

Wall Ovens \_\_\_\_\_ Dishwashers \_\_\_\_\_

Dryers \_\_\_\_\_ Compactors \_\_\_\_\_

Fans \_\_\_\_\_ Others (denote) \_\_\_\_\_

TOTAL \_\_\_\_\_

MISCELLANEOUS: (number of)

Branch Panels \_\_\_\_\_ Gasoline Pump \_\_\_\_\_ 15.00

Transformers \_\_\_\_\_

Air Conditioners Central Unit \_\_\_\_\_

Separate Units (windows) \_\_\_\_\_

Signs 20 sq. ft. and under \_\_\_\_\_

Over 20 sq. ft. \_\_\_\_\_

Swimming Pools Above Ground \_\_\_\_\_

In Ground \_\_\_\_\_

Fire/Burglar Alarms Residential \_\_\_\_\_

Commercial \_\_\_\_\_

Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under \_\_\_\_\_

over 30 amps \_\_\_\_\_

Circus, Fairs, etc. \_\_\_\_\_

Alterations to wires \_\_\_\_\_

Repairs after fire \_\_\_\_\_

Emergency Lights, battery \_\_\_\_\_

Emergency Generators \_\_\_\_\_

INSTALLATION FEE DUE: \_\_\_\_\_  
 FOR REMOVAL OF A "STOP ORDER" (304-16.11) ..... DOUBLE FEE DUE: \_\_\_\_\_  
 TOTAL AMOUNT DUE: 15.00

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call X

CONTRACTOR'S NAME: Donald Cyr (Portland Pump)

ADDRESS: 13 Wood Ave. Saco, Maine 04072

TEL.: 232-3491

MASTER LICENSE NO.: LG53000291 SIGNATURE OF CONTRACTOR: \_\_\_\_\_

LIMITED LICENSE NO.: \_\_\_\_\_ Donald Cyr

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY  
 CONTRACTOR'S COPY — GREEN

**ELECTRICAL INSTALLATIONS —**

Permit Number 0291  
 Location 226 AVULS/SSW  
 Owner Town Hall  
 Date of Permit 10-30-92  
 Final Inspection VOIDED-NA  
 By Inspector See Brief  
 Permit Application Register Page No. 135

INSPECTIONS: Service \_\_\_\_\_ by \_\_\_\_\_  
 Service call \_\_\_\_\_  
 Closing-in \_\_\_\_\_ by \_\_\_\_\_

PROGRESS INSPECTIONS:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE:	REMARKS:

DO NOT WRITE IN THESE SPACES

FOR THE USE OF THE PERMITTING OFFICE