



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

Date March 2, 19 88  
 Receipt and Permit number 22965

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 100 Commercial Street, Suite 404-104  
 OWNER'S NAME Hanson Project Management ADDRESS 5 M. K. St., Portland, Maine

OUTLETS		FEEES
Receptacle	Switches 8 Plugmold _____ ft TOTAL 1-30	3.00
FIXTURES (number of)		
Incandescent 3	Flourescent 7 (not strip) TOTAL 15	3.50
Strip Flourescent _____ 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 main boiler) _____		
Oil or Gas (by separate units) _____		
Electric Under 20 kws 4	Over 20 kws _____	5.00
APPLIANCES (number of)		
Ranges _____	Water Heaters _____	
Cook Tops _____	Disposals _____	
Wall Ovens _____	Dishwashers _____	
Dryer _____	Compactors _____	
Fans _____	Others (describe) _____	
TOTAL _____		
MISCELLANEOUS (number of)		
Branch Panels _____		
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 <input checked="" type="checkbox"/> (Relocation existing panel, Suite-404) _____		2.00
Repair after fire _____		
Emergency Lights, batter _____		
Emergency Generators _____		
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE _____	
FOR REMOVAL OF A "STOP ORDER" (394 18.b)	DOUBLE FEE DUE _____	
	TOTAL AMOUNT DUE: _____	13.50

INSPECTION  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call   
 CONTRACTOR'S NAME Energy Electric  
 ADDRESS 225 Warrer Ave., Portland, Maine  
 TEL. 727-9340  
 MASTER LICENSE NO. 3270  
 LIMITED LICENSE NO. \_\_\_\_\_

SIGNATURE OF CONTRACTOR

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

INSPECTIONS Service

Service called in

Closing in

PROGRESS INSPECTIONS

5/5/88  
5/5/88

by *[Signature]*

Permit Application F enter Page No 26  
By Inspector *[Signature]*  
Final Inspection 1  
Date of Permit 3/2/88  
Operator *[Signature]*  
Location *[Signature]*  
Permit Number 2-2905  
ELECTRICAL INSTALLATIONS -  
Suite 104

DATE 6/10/88 REMARKS Ok to close entire office over

DATE 1/5/89



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 100 Commercial Street

Issued to Thomas Block Associates Partnership

Date of Issue January 3, 1989

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. 88/1383, 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

2nd Floor

APPROVED OCCUPANCY

Offices

Limiting Conditions:

None

This certificate supersedes  
certificate issued

Approved:

1/3/89  
(Date)

*A. Rowe*  
Inspector

*P. Samuel Johnson*  
Inspector of Buildings

Notice: 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 #001383

CITY OF Portland

BUILDING PERMIT APPLICATION

MAP #

LOT#

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

Owner: Thomas Block Associates Partnership

Address: 100 Commercial St., Portland, 04101

LOCATION OF CONSTRUCTION: 100 Commercial St., 2nd Floor

CONTRACTOR: owner SUBCONTRACTORS: 775-2022

ADDRESS: 774-8778 - Scott Humen

Est. Construction Cost: \$49,000 Type of Use: Offices

Past Use:

Building Dimensions L W Sq. Ft. # Stories Lot Size

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Interior demolition of dry wall partitions and

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE renovations as per

Residential Buildings Only: # Of Dwelling Units # Of New Dwelling Units

Foundations:

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

Floors:

- 1. Sills Size: Sills must be anchored.
2. Girder Size:
3. Lally Column Spacing: Size: Spacing 16" O.C.
4. Joists Size:
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

For Official Use Only
Date: November 10, 1988
Subdivision: Yes/No
Name:
Lot:
Block:
Permit Expiration:
Ownership: Public/Private

Ceiling:
1. Ceiling Joists Size:
2. Ceiling Strapping Size Spacing PERMIT ISSUED
3. Type Ceiling:
4. Insulation Type Size NOV 14 1988
5. Ceiling Height:

Roof:
1. Truss or Rafter Size Spacing
2. Sheathing Type Size City Of Portland
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 O.D. GAS

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

Zoning:
District: W-2 Street Frontage Req: Provided
Required 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:
Shore and Floodplain Mgmt: Special Exception:
Other: (Explain)
Date Approved: 11/10/88

Permit Received By: Honey Crossman

Signature of Applicant: Scott Humen Date: 11-88

Signature of CEO: H. M. ... Date: 11-88

Inspection Dates:

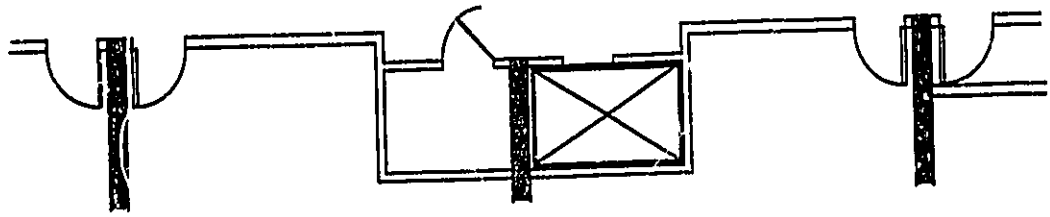
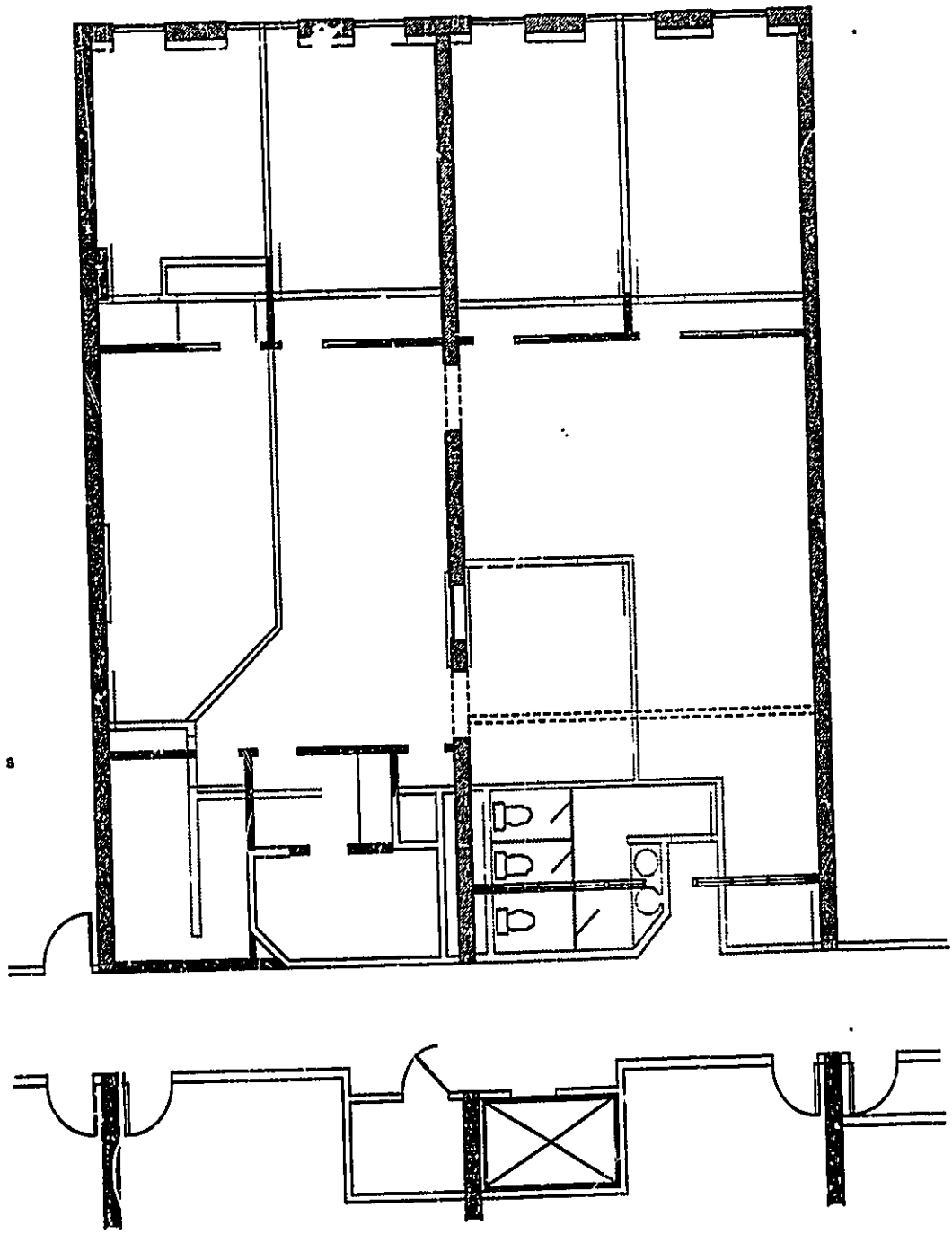
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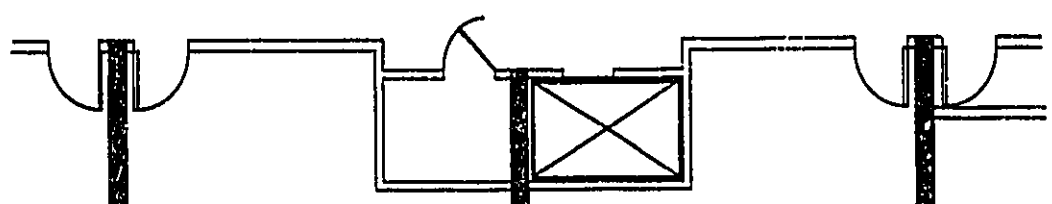
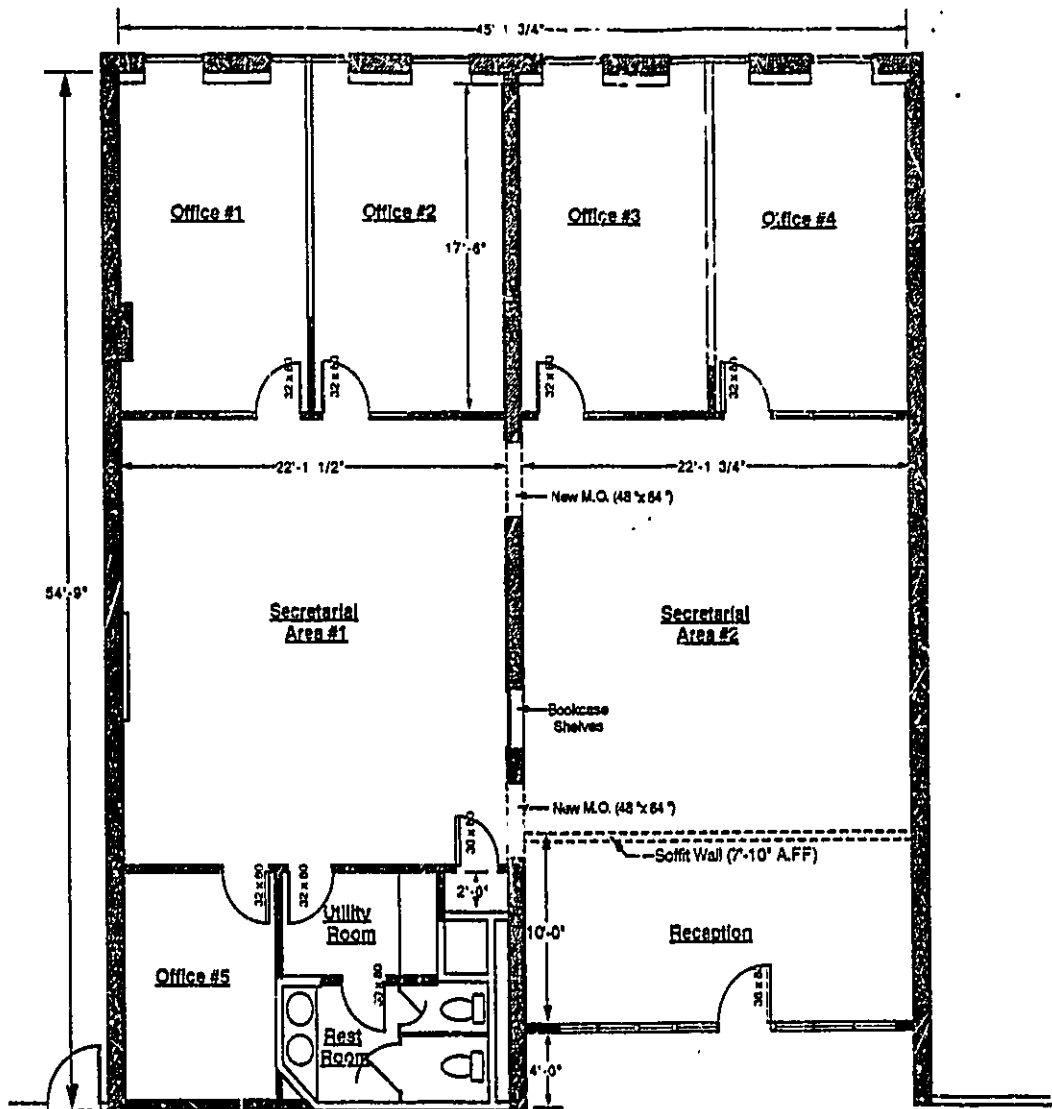
- ===== Existing partition to be removed
- ==== Existing partition to remain
- ==== New partition
- ==== Existing brick masonry wall
- ==== Recessed fluorescent light with parabolic lens
- ⊕ Existing light to remain
- Recessed incandescent light (Lightoller 1146/1102 w/100 watt A-lamp)
- ⊙ Recessed incandescent wall-washer (Lightoller 1135/1102 w/150 watt reflector lamp)
- ⊕ New duplex receptacle
- ⊕ Existing duplex receptacle
- ⊕<sub>w</sub> New duplex receptacle in wiremold
- ⊕<sub>c</sub> New duplex receptacle for computer
- ⊙ Thermostat
- S Wall switch
- ▲ Telephone jack

RECEIVED

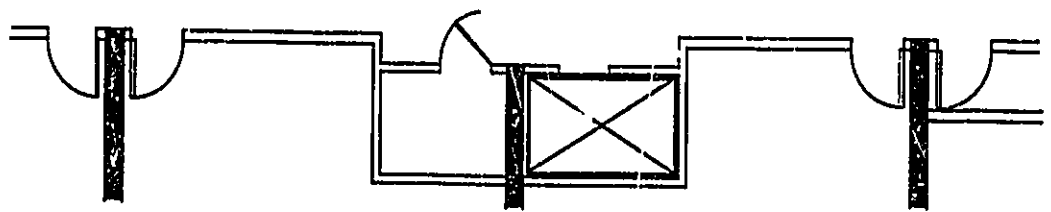
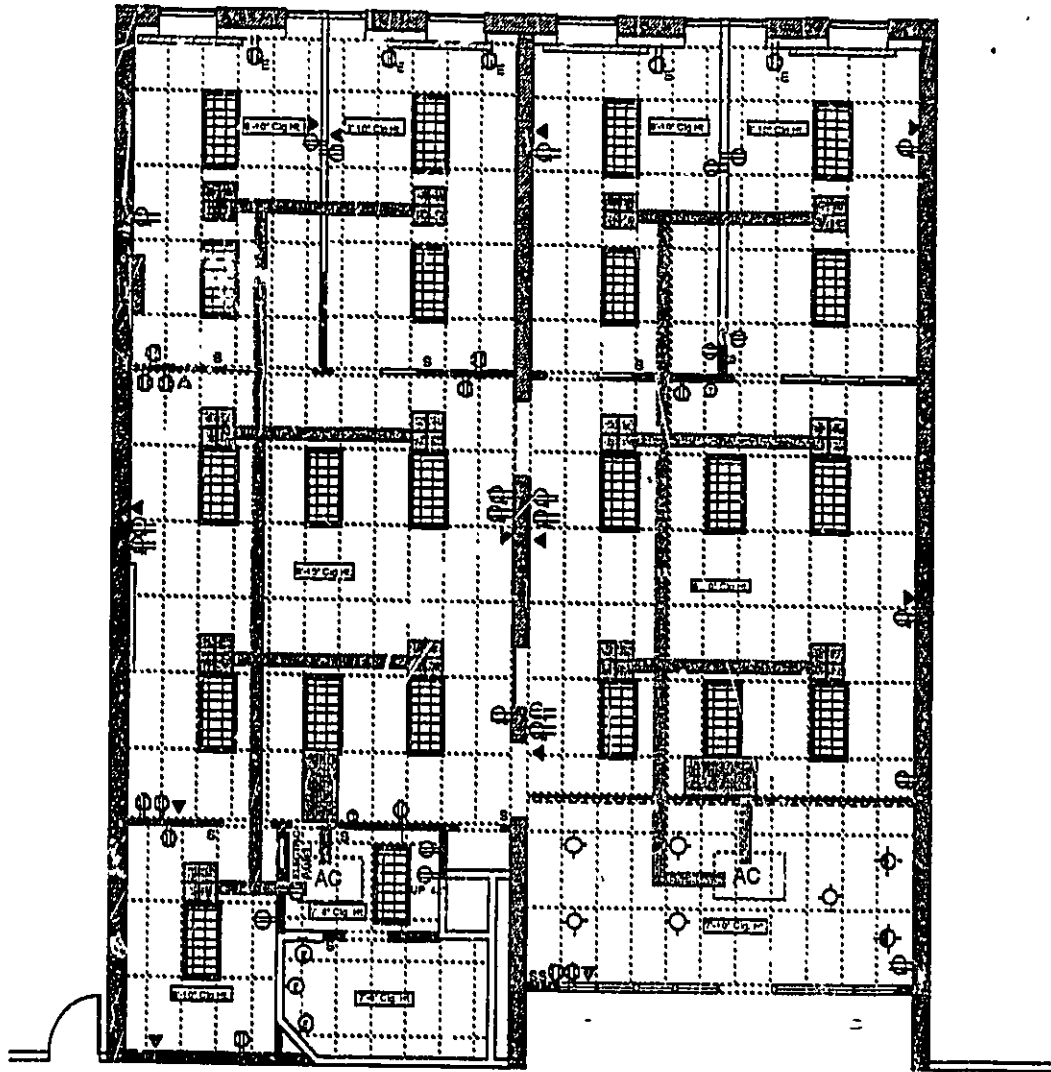
NOV 08 1988

DEPT OF BUILDING INSPECTIONS  
CITY OF PORTLAND





**FLOOR PLAN**  
 SUITE 210—THOMAS BLOCK      DATE: 10-20-88



# REFLECTED CEILING PLAN

SUITE 210—THOMAS BLOCK

DATE: 10-20-88



24'-1"

22'-0"

22'-1"

23'-0"

21'-3"

3'-0"

AREA AFFECTED  
BY CONSTRUCTION

THOMAS BUCK  
SECOND FLOOR  
100 COMMERCIAL ST

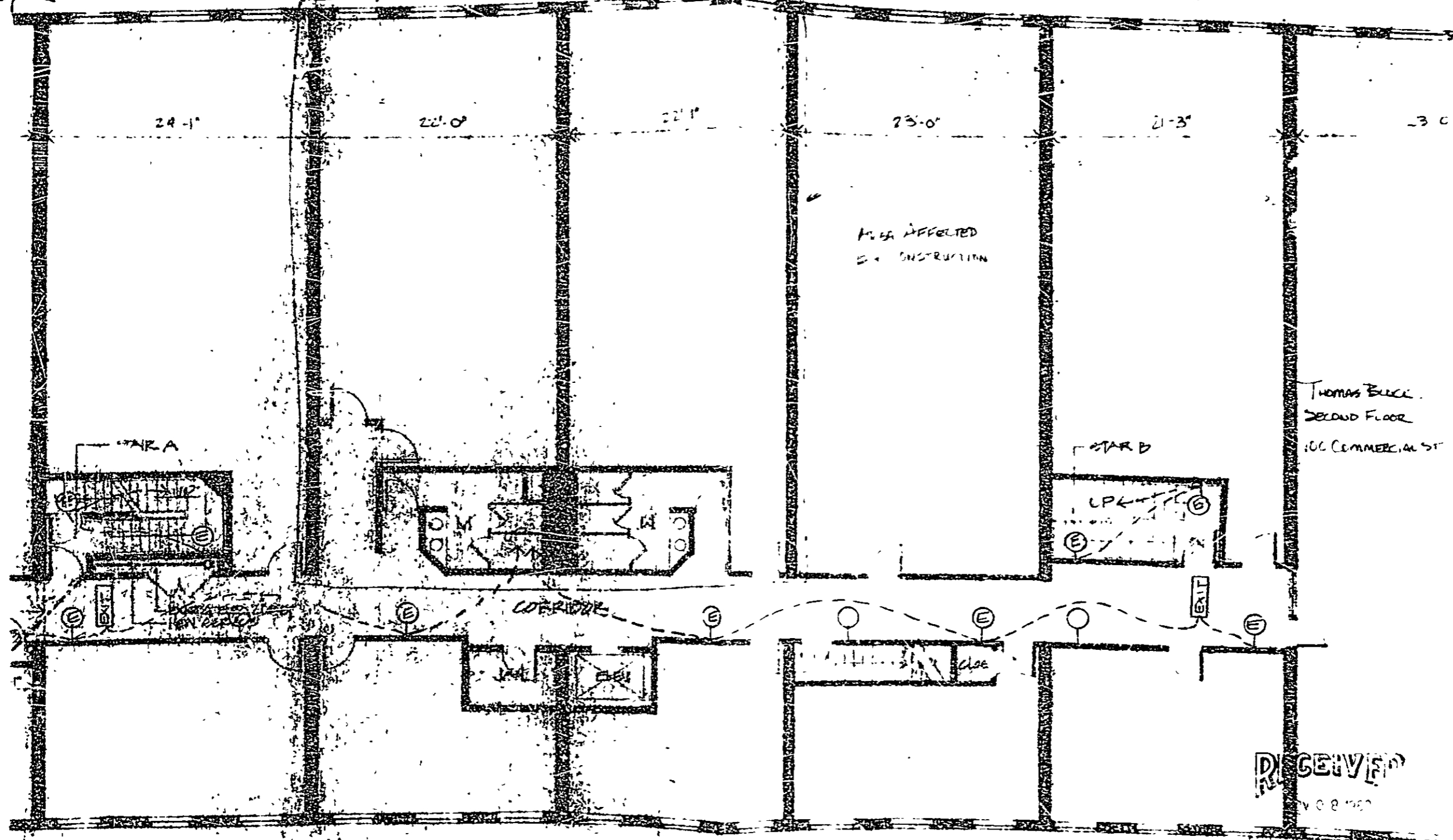
STAIR A

STAIR B

UP

CORRIDOR

DISCOVERED  
MAY 8 1960





CITY OF PORTLAND, MAINE  
Department of Building Inspection

## Certificate of Occupancy

LOCATION 100 Commercial Street

Issued to TBA Partnership

Date of Issue January 3, 1989

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. 88/920, 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

Suite 100

APPROVED OCCUPANCY

Office

Limiting Conditions:

None

This certificate supersedes  
certificate issued

Approved:

1/3/89  
(Date)

*P. Howe*  
Inspector

*R. J. Hayes*  
Inspector of Buildings

Note: 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 # 000920 CITY OF Portland BUILDING PERMIT APPLICATION**

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: 10A Partnership  
 Address: c/o of Hanson Project Management 5 Milk Street  
 LOCATION OF CONSTRUCTION: 100 Commercial Street Suite 100  
 CONTRACTOR: Hanson Project Man SUBCONTRACTORS: 774-8778

ADDRESS: \_\_\_\_\_  
 Est. Construction Cost: 30,000.00 Type of Use: commercial/residential  
 Past Use: \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 Conversion - Explain interior renovations

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE  
 Residential Buildings Only:  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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 \_\_\_\_\_

**For Official Use Only**

Date: July 25, 1988 Subdivision: Yes / No \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit: 30-000-00 Permit Expiration \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_  
 Value Structure \_\_\_\_\_  
 For \_\_\_\_\_

**PERMIT ISSUED**  
 City of Portland

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing 48" @ 2' 1988  
 3. Type Ceiling: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Zoning:  
 District B-3 Street 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 \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_  
 Date Approved: July 27, 1988

Permit Received By: Joanne  
 Signature of Applicant: [Signature] **PERMIT ISSUED**  
 Signature of CEO: [Signature] **LETTER**  
 Date: 8-1-88  
 Inspection Date: \_\_\_\_\_

**PLOT PLAN**



**FEES (Breakdown From Front)**  
Base Fee \$ 170.00  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

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

**COMMENTS**

1/3/88 COJO RR

Signature of Applicant

*Clara S. Jones*

Date 7/27/88

CITY OF PORTLAND, MAINE

309 CONGRESS STREET  
PORTLAND, MAINE 04101  
(207) 775-5451



DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF  
INSPECTION SERVICES DIVISION

August 2, 1988

TBA Partnership  
c/o Hanson Project Management  
5 Milk Street  
Portland, Maine

Re: 100 Commercial Street

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

This permit is approved with the understanding that an approved second means of egress be installed.

Please submit a revised plan showing this second means of egress to Lt. Collins of the Fire Prevention Bureau.

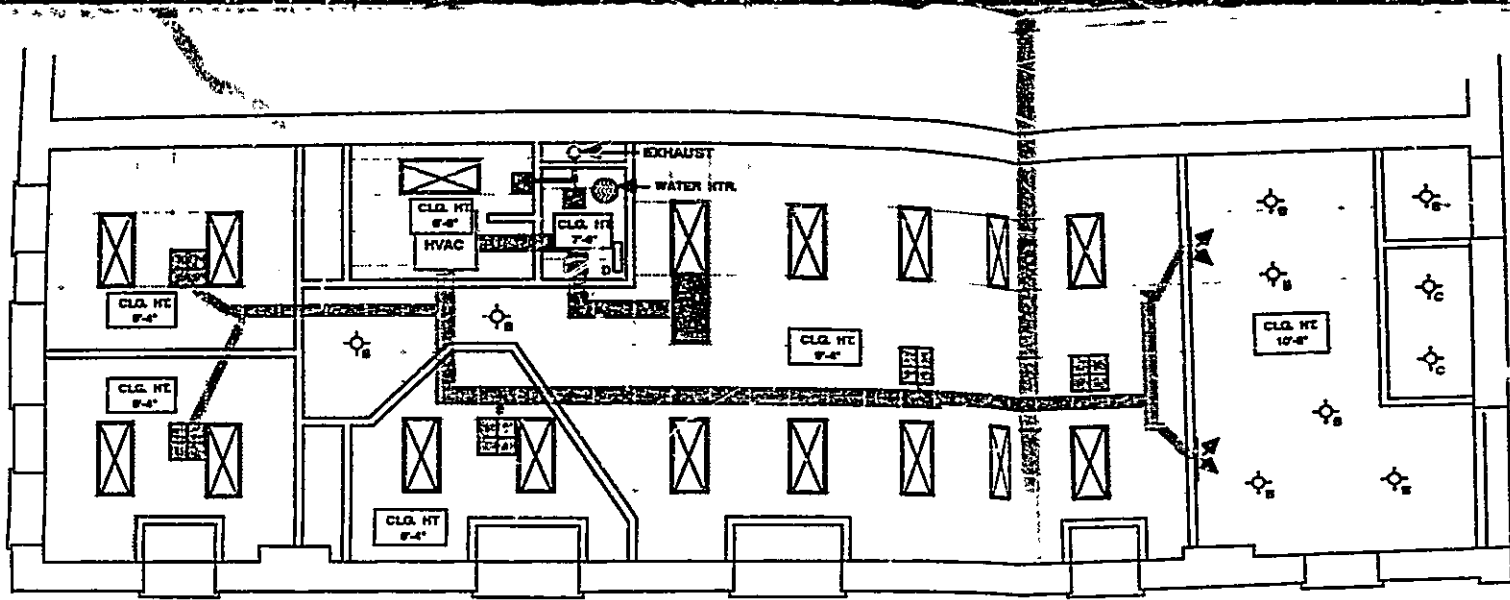
If you have any questions on these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses  
Chief, Inspection Services

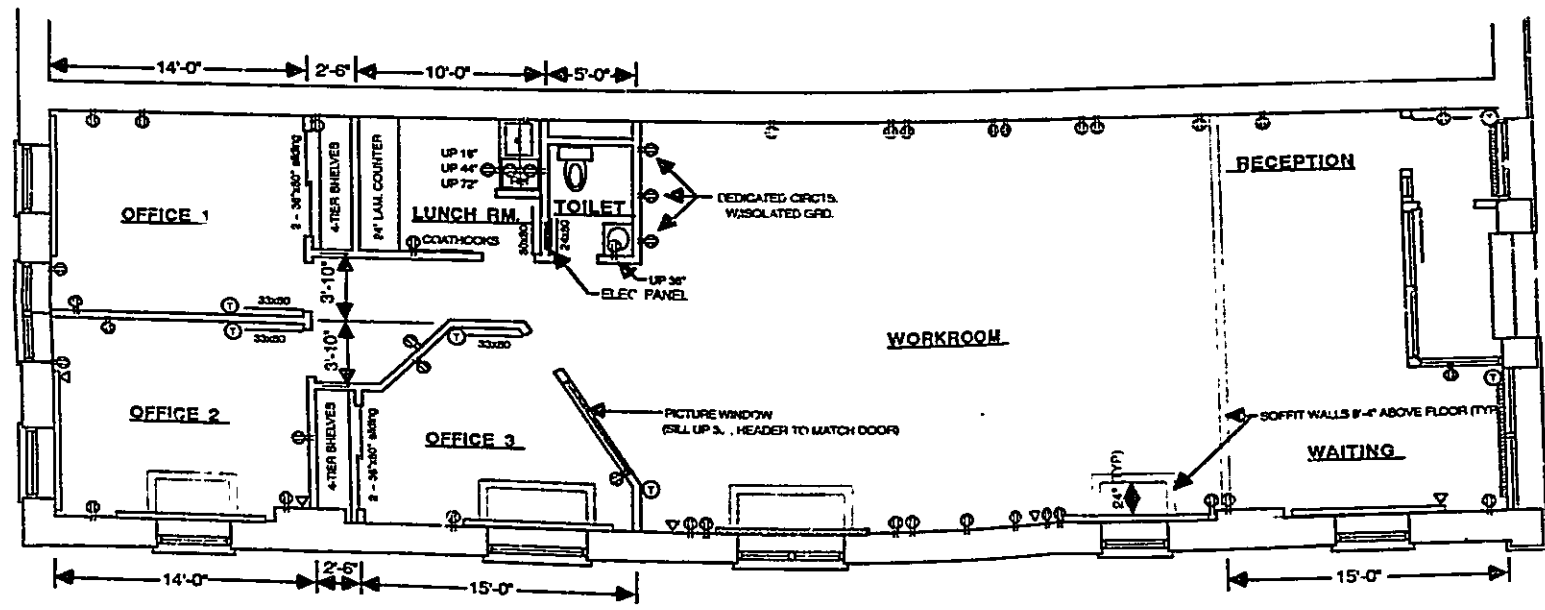
cc: Lt. Collins, Fire Prevention

/lmc



**REFLECTED CEILING & LIGHTING PLAN**

ELECTRICAL LEGEND	
	New duplex receptacle (up 18" unless otherwise noted)
	Existing receptacle
	Existing telephone rough-in
	Rerouted thermostat
	New baseboard heater
	Existing baseboard heater
	2x4' recessed fluorescent w/parabolic louver
	Lightolier 1146/1102 w/100 watt A-lamp
	Similar to B fixture except suitable for exterior use
	Lightolier 4735



**FLOOR LAYOUT & ELECTRIC PLAN**

HEWINS TRAVEL  
 SUITE 100  
 THE THOMAS BLOCK  
 100 COMMERCIAL STREET  
 PORTLAND, ME.  
 DATE: 7-5-88  
 SCALE:



HANSON PROJECT MANAGEMENT  
 5 MILK STREET PORTLAND MAINE 04101

PERMIT # 001383 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Thomas Block Associates Partnership  
 Address: 100 Commercial St., Portland, 04101  
 LOCATION OF CONSTRUCTION 100 Commercial St., 2nd Floor  
 CONTRACTOR: owner SUBCONTRACTORS: 775-2022  
 ADDRESS: 774-8778 - Scott Shuman  
 Est. Construction Cost: \$49,000 Type of Use: Offices

Past Use: \_\_\_\_\_  
 Building Dimensions L. \_\_\_\_\_ W. \_\_\_\_\_ Sq Ft. \_\_\_\_\_ # Stories: \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion - Explain interior demolition of dry wall petitions and renovations as per plans.  
 COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE  
 Residential Buildings Only: \_\_\_\_\_ # Of Dwelling Units \_\_\_\_\_  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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: \_\_\_\_\_ 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 \_\_\_\_\_

For Official Use Only	
Date: <u>November 8, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limit: _____	Name: _____
Blg Code: _____	Lot: _____
Time Limit: _____	Block: _____
Estimated Cost: <u>\$49,000</u>	Permit Expiration: _____
Value Structure: _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$265.00</u>	

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ **PERMIT ISSUED**  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceiling \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size NOV 14 1988  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ **City Of Portland**  
 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 \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Zoning: \_\_\_\_\_  
 District \_\_\_\_\_ Street Frontage Req. \_\_\_\_\_ Provided \_\_\_\_\_  
 Required 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 \_\_\_\_\_  
 Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_  
 Date Approved \_\_\_\_\_

Permit Received By Nancy Grosman

Signature of Applicant Scott Shuman Date 11-8-88  
ASST. FIRE OWNER

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates 10/2/88



**PLUMBING APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**  
Town or Plant: Cortland  
Street Subdivision Loc. # 100 Commercial St

**PROPERTY OWNERS NAME**  
Last: FULLWOODS First: \_\_\_\_\_  
Applicant Name: Carl J. Hendrickson  
Mailing Address of Owner/Applicant (if Different): 100 Commercial St, Cortland, ME 04119

**PORTLAND**  
Date Permit Issued: 11/10/88 PERMIT # 3,174 TOWN COPY  
FEE: \$119.10 (Check Fee Charged)  
Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # 11123

**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 Inspector to deny a Permit.  
Signature of Owner/Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**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: NOV 10 1988

**PERMIT INFORMATION**

This Application is for:  
1.  NEW PLUMBING  
2.  RELOCATED PLUMBING  
NOV 10 88

Type Of Structure To Be Served:  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER - SPECIFY Restaurant

Plumbing To Be Installed By:  
1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D. HOUSING DEALER/MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER  
LICENSE # 0,1,9,9,7

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	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><b>OR</b></p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Hosebibb / Silcock		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
		Groase/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: <u>Condensate drains</u>		Water Heater
Number of Hook-Ups & Relocations	<u>2</u>	Fixtures (Subtotal) Column 2	<u>1</u>	Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee			<u>2</u>	Fixtures (Subtotal) Column 2
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
			<u>9</u>	Permit Fee (Total)

TOWN COPY





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

Date Nov. 21 1988

Receipt and Permit number 29795

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: 100 Commercial St. - Suite 210  
 OWNER'S NAME: Hanson Management ADDRESS: Milk St., Portland, Maine

OUTLETS: \_\_\_\_\_ FEES \_\_\_\_\_

Receptacles 25 Switches 10 Plugmold \_\_\_\_\_ ft. TOTAL 31-60 ..... 5.00

FIXTURES: (number of) \_\_\_\_\_

Incandescent \_\_\_\_\_ Fluorescent 20 (not strip) TOTAL 20 ..... 4.00

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 \_\_\_\_\_

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

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

Dryers \_\_\_\_\_

Fans \_\_\_\_\_

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

Disposals \_\_\_\_\_

Dishwashers \_\_\_\_\_

Compactors \_\_\_\_\_

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

TOTAL \_\_\_\_\_

MISCELLANEOUS: (number of) \_\_\_\_\_

Branch Panels \_\_\_\_\_

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 ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_

FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... \_\_\_\_\_

TOTAL AMOUNT DUE: 9.00

INSPECTION: \_\_\_\_\_

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

CONTRACTOR'S NAME: Energy Elec.

ADDRESS: 296 Warren Ave., Portland, ME, P.O. Box 1436 04104

TEL.: 797-9340

MASTER LICENSE NO.: 03270

LIMITED LICENSE NO.: \_\_\_\_\_

SIGNATURE OF CONTRACTOR: \_\_\_\_\_

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

**ELECTRICAL INSTALLATIONS-**

Permit Number 29795  
 Location 100 Commonwealth St  
 Owner Home Program  
 Date of Permit 11/21/88  
 Final Inspection 12/15/88  
 By Inspector [Signature]  
 Permit Application Register Page No. 19

INSPECTIONS: Service \_\_\_\_\_ by \_\_\_\_\_  
 Service called in \_\_\_\_\_  
 Closing-in 11/30/88 by [Signature]

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

DATE:	REMARKS:

CODE  
 COMPLIANCE  
 COMPLETED  
 DATE 1/5/89

**PLUMBING APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**

Town Or Plantation: Portland

Street Subdivision Lot #: 1 Mount Street 100 Commercial St

**PROPERTY OWNERS NAME**

T B R Properties

Last: \_\_\_\_\_ First: \_\_\_\_\_

Applicant Name: Wm Miles Jr

Mailing Address of Owner/Applicant (if Different): P.O. Box 243 Weston VT

PORTLAND PERMIT # 3,158 TOWN COPY

Date Issued: 10/31/88 \$ 11210 FEE Double Fee Charge?

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # 1193

**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 Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 10/31/88

**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: 10/31/88

**PERMIT INFORMATION**

This Application is for:

1.  NEW PLUMBING

2.  RELOCATED PLUMBING

Type Of Structure To Be Served:

1.  SINGLE FAMILY DWELLING

2.  MODULAR OR MOBILE HOME

3.  MULTIPLE FAMILY DWELLING

4.  OTHER - SPECIFY Other

Plumbing To Be Installed By:

1.  MASTER PLUMBER

2.  OIL BURNERMAN

3.  MFG'D. HOUSING DEALER/MECHANIC

4.  PUBLIC UTILITY EMPLOYEE

5.  PROPERTY OWNER

LICENSE # 101523

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<p><b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District</p> <p><b>OR</b></p> <p><b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.</p> <p><b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.</p>		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cup/dior		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
Number of Hook-Ups & Relocations	Fixtures (Subtotal) Column 2		4	Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		4	Fixtures (Subtotal) Column 2 & Column 1
			1/2	Total Fixtures
			1/2	Hook-Up & Relocation Fee
			1/2.00	Permit Fee (Total)

TOWN COPY

**B** PERMIT # 001386 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Gourmet Caterers Inc.  
 Address: 100 Commercial St., Portland,  
 LOCATION OF CONSTRUCTION 100 Commercial St.  
 CONTRACTOR: Eastern Stainless Fabricators SUBCONTRACTORS: 508-295-5955  
 ADDRESS: 8 Thatcher Lane, NX Wareham, Mass.

Est. Construction Cost: \$4900 Type of Use: Caterers  
 Past Use: \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 Conversion - Explain Install a stove hood as per attached plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE  
 Residential Buildings Only:  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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

Floors:  
 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 \_\_\_\_\_

**For Official Use Only**

Date: November 10, 1988 Subdivision: Yes / No  
 Inside Fire Limits \_\_\_\_\_ Name \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Area Limit \_\_\_\_\_ Block \_\_\_\_\_  
 Estimated Cost: \$4900 Permit Expiration: \_\_\_\_\_  
 Value/Structure \_\_\_\_\_ Ownership: \_\_\_\_\_  
 For: \$45.00 Fee: \_\_\_\_\_ Private \_\_\_\_\_

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ **PERMIT ISSUED**  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceiling: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size NOV 14 1988  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ **City Of Portland**  
 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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Zoning:  
 District: \_\_\_\_\_ Street 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 \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shore and Floodplain Mgmt: \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other: \_\_\_\_\_ (Explain) \_\_\_\_\_  
 Date Approved: \_\_\_\_\_

Permit Received By Nancy Grossman *(signature)*  
 Signature of Applicant [Signature] Date 11/10/88  
 Signature of CEO [Signature] Date \_\_\_\_\_

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

PERMIT # 1295 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_  
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Thomas Block Assoc. Partnership  
 Address: 100 Commercial St.

LOCATION OF CONSTRUCTION 100 Commercial St. 2nd floor  
 CONTRACTOR: Same SUBCONTRACTORS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 Est. Construction Cost: \$11,000 Type of Use: Office Space  
 Past Use: Office Space  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft. \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 \_\_\_\_\_ Conversion - Explain Construct 2 rest rooms (1 ladies-1Men)

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE  
 Residential Buildings Only:  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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 \_\_\_\_\_

For Official Use Only	
Date: <u>October 17, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits: _____	Name: _____
Bldg Code: _____	Lot: _____
Time Limit: _____	Block: _____
Estimated Cost: <u>\$11,000</u>	Permit Expiration: _____
Value/Structure: _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$75.00</u>	

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size OCT 18 1988  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size City Of Portland  
 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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Zoning:  
 District \_\_\_\_\_ 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 \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_  
 Date Approved \_\_\_\_\_

Permit Received By E. Latini

Signature of Applicant Scott M. Hanna Date 10/17/88  
 ACCENT FOR OWNER

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates (b) AK



CITY OF PORTLAND, MAINE  
Department of Building Inspection

## Certificate of Occupancy

LOCATION 100 Commercial St.

Issued to Thomas Block Associates

Date of Issue July 29, 1988

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. 88-778, 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

Suite 120  
Limiting Conditions:

Commercial

This certificate supersedes  
certificate issued

Approved:

7/29/88  
(Date)

Inspector

Inspector of Buildings

Notice: 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 # 000778 CITY OF Portland BUILDING PERMIT APPLICATION**

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Thomas Block Associates  
 Address: Hanson Project Management, 5 Milk St., Portland 04101  
 LOCATION OF CONSTRUCTION: 100 Commercial St., Portland, Suite 120  
 CONTRACTOR: Hanson Project SUBCONTRACTORS: 774-8778  
 ADDRESS: 5 Milk St., Portland

Est. Construction Cost: \$9,000 Type of Use: commercial residential bldg.

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

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
Flooring over existing opening in second  
(conversion - Explain Floor 1, 2) as per plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE  
 Residential Buildings Only: \_\_\_\_\_  
 # Of Dwelling Units \_\_\_\_\_ # Of Dwelling Units \_\_\_\_\_

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 \_\_\_\_\_ Spacing 16" O.C.  
 4. Joists Size: \_\_\_\_\_ Size \_\_\_\_\_  
 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 \_\_\_\_\_

**For Official Use Only**

Date: June 20, 1988 Subdivision: Yes / No \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Lot: \_\_\_\_\_  
 Block: \_\_\_\_\_  
 Permit Expiration: \_\_\_\_\_  
 Ownership: \_\_\_\_\_ Public / Private \_\_\_\_\_  
 Estimated Cost: \$9,000  
 Value/Structure: \_\_\_\_\_  
 Fee: \$62.00

**PERMIT ISSUED**

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_ JUL 1 1988  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceiling: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_ **City Of Portland**

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 \_\_\_\_\_ O.P. 52

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

Zoning:  
 District: B-3 Street 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 \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shore and Flood, Inland Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other (Explain): \_\_\_\_\_  
 Date Approved: A.R. Dwyer on June 22, 1988

Permit Received By: N.J. Zema

Signature of Applicant: J. V. Collins Date: 6/21/88  
 Signature of CEO: J. V. Collins Date: 6-30-88

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

White-Tax Assessor

Yellow-GPCOG

White Tag-CEO

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**PLOT PLAN**

N



**FEES (Breakdown From Front)**

Base Fee \$25.00 \_\_\_\_\_  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ 40.00 \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

**Type**

**Inspection Record**

**Date**

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

**COMMENTS**

7/28/88 AC

copy for unit 214.

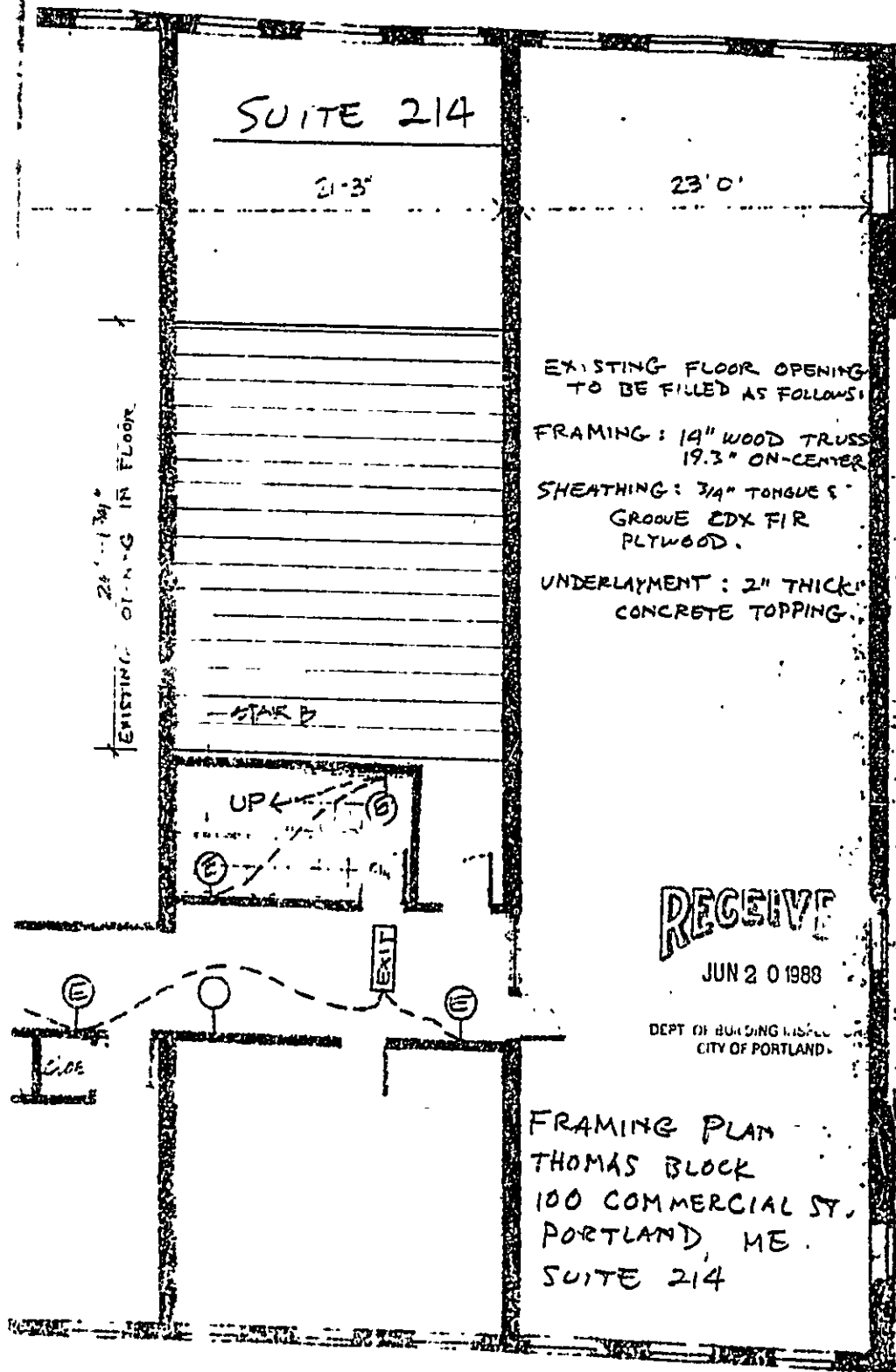
Signature of Applicant

*Clair D. Janson*

Date

6/20/88





SUITE 214

21'-3"

23'-0"

EXISTING OPENING IN FLOOR  
24'-1 3/4"

EXISTING FLOOR OPENING  
TO BE FILLED AS FOLLOWS:  
FRAMING: 19" WOOD TRUSS  
19.3" ON-CENTER  
SHEATHING: 3/4" TONGUE &  
GROOVE EDX FIR  
PLYWOOD.  
UNDERLAYMENT: 2" THICK  
CONCRETE TOPPING.

STAIR B

UP

EXIT

C/O

RECEIVED

JUN 20 1988

DEPT OF BUILDING INSPECTION  
CITY OF PORTLAND

FRAMING PLAN  
THOMAS BLOCK  
100 COMMERCIAL ST.  
PORTLAND, ME  
SUITE 214

SUITE 214

21'-3"

23'-0"

26'-1 3/4"  
EXISTING OPENING IN FLOOR

EXISTING FLOOR OPENING  
TO BE FILLED AS FOLLOWS:

FRAMING: 14" WOOD TRUSS  
19.3" ON-CENTER

SHEATHING: 3/4" TONGUE &  
GROOVE EDX FIR  
PLYWOOD.

UNDERLAYMENT: 2" THICK  
CONCRETE TOPPING

-STAR B

UP ←

EXIT

clo

RECEIVED

JUN 20 08

DEPT OF L...  
CITY OF PORTLAND

FRAMING PLAN  
THOMAS BLOCK  
100 COMMERCIAL ST.  
PORTLAND, ME  
SUITE 214

PERMIT # 001386

CITY OF Portland

**BUILDING PERMIT APPLICATION**

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

LOT# \_\_\_\_\_

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

Owner: Gourmet Caterers Inc.

Address: 100 Commercial St., Portland,

LOCATION OF CONSTRUCTION 100 Commercial St.

CONTRACTOR: Eastern Stainless Fabricators SUBCONTRACTORS: 508-295-5955

ADDRESS: 8 Thatcher Lane, KI Wareham, Mass.

Est. Construction Cost: \$4900 Type of Use: Caterers

Past Use: \_\_\_\_\_

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

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

Conversion - Explain Install a stove hood as per attached plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

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

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: \_\_\_\_\_ Spacing 16" O.C.
- 4. Joists Size: \_\_\_\_\_
- 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 \_\_\_\_\_

**For Official Use Only**

Date: November 10, 1988 Subdivision: Yes / No \_\_\_\_\_

Inside Fire Limits: \_\_\_\_\_ Name: \_\_\_\_\_

Edge Code: \_\_\_\_\_ Lot: \_\_\_\_\_

Time Limit: \_\_\_\_\_ Block: \_\_\_\_\_

Estimated Cost: \$4900 Permit Expiration: \_\_\_\_\_

Value Structure: \_\_\_\_\_ Ownership: \_\_\_\_\_

Fee: \$45.00 Public / Private \_\_\_\_\_

Ceiling: **PERMIT ISSUED**

- 1. Ceiling Joists Size: \_\_\_\_\_
- 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_
- 3. Type Ceilings: \_\_\_\_\_
- 4. Insulation Type \_\_\_\_\_ Size: NOV 14 1988
- 5. Ceiling Height: \_\_\_\_\_

Roof: **City Of Portland**

- 1. Truss or Rafter Size \_\_\_\_\_
- 2. Sheathing Type \_\_\_\_\_
- 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 00.05

Swimming Pools: \_\_\_\_\_

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

Zoning: \_\_\_\_\_

District: UB1 Street 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 \_\_\_\_\_ Subdivision \_\_\_\_\_

Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_

Other: (Explain) \_\_\_\_\_

Date Approved: 11/10/88 *(Signature)*

Permit Received By Nancy Grossman

Signature of Applicant [Signature] Date 11/10/88

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

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

78/11/11 White Tag Assessor [Signature] GPCOG White Tag CEO [Signature] Copyright GPCOG 1987

PLOT PLAN

N



**FEES (Breakdown From Front)**

Base Fee \$ 25.00

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

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

Other Fees \$ 20.00

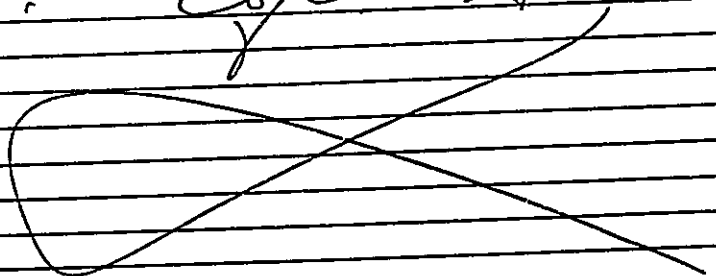
(Explain) \_\_\_\_\_

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

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

COMMENTS

11/21/88 CGC ACG



Signature of Applicant Robert M. Williams, Agent of Owner Date 11/10/88

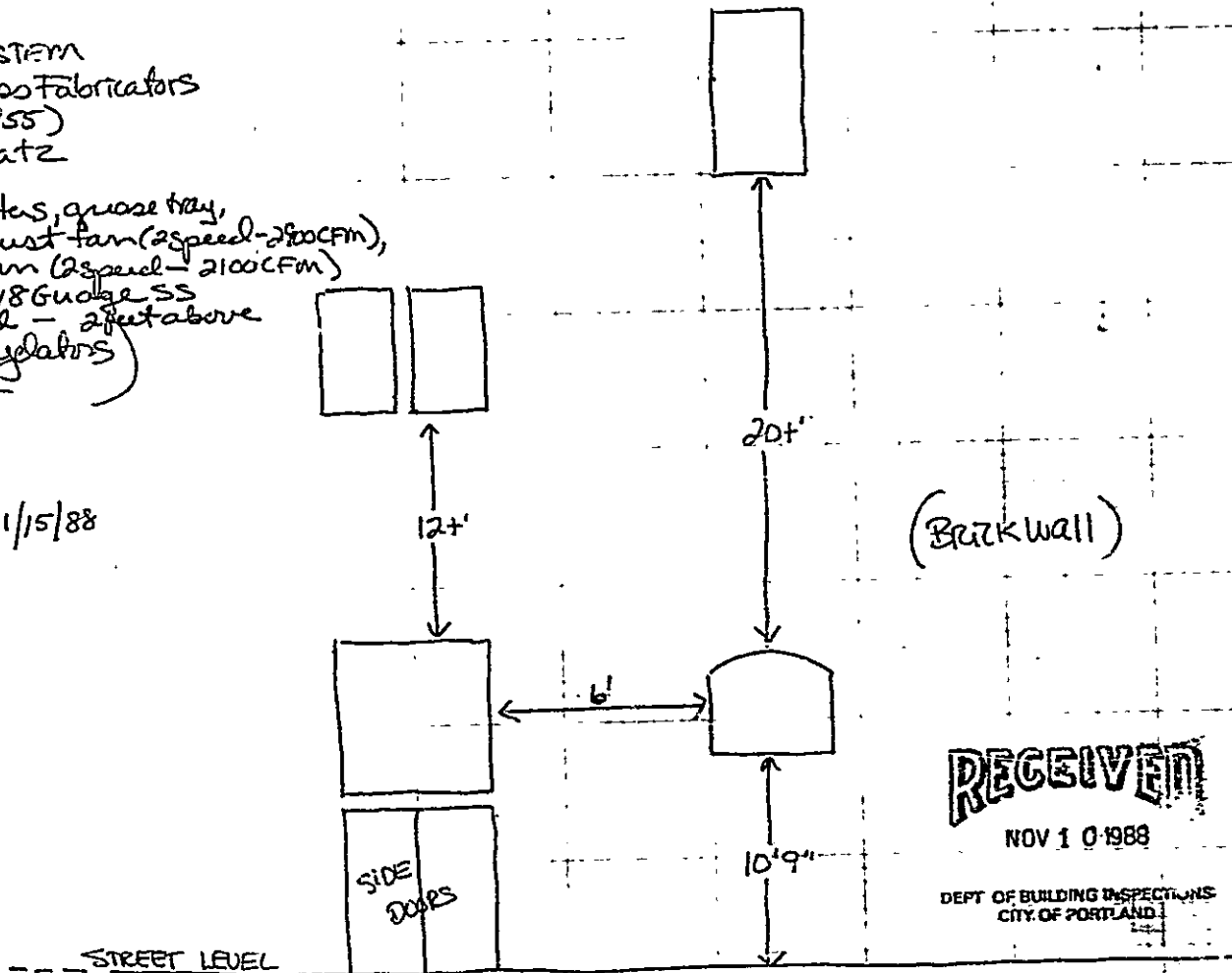
NEDZIKI  
PA. Frank & John

FO DWORNS  
100 Commercial Street  
Portland, ME 04101  
(773-9741)

10' SS HOOD SYSTEM  
Eastern Stainless Fabricators  
(808-295-5955)  
Rudy Frantz

10' X 48" w/ filter, grease tray,  
duct, exhaust fan (2 speed - 2800 CFM),  
make-up fan (2 speed - 2100 CFM)  
40-50 lb. 18 Gauge SS  
1" from wall - 2 feet above  
(no grease or fryolators  
by lease)

Installation: 11/15/88



**RECEIVED**

NOV 10 1988

DEPT OF BUILDING INSPECTIONS  
CITY OF PORTLAND

PERMIT # 920 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: TBA Partner ship  
 Address: c/o of Hanson Project Management 5 Milk Street  
 LOCATION OF CONSTRUCTION: 100 Commercial Street Suite 100  
 CONTRACTOR: Hanson Project Man SUBCONTRACTORS: 774-8778  
 ADDRESS: \_\_\_\_\_

Est. Construction Cost: 30,000.00 Type of Use: commercial/residential

Past Use: \_\_\_\_\_

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

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

Conversion - Explain interior renovations

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

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

Foundations:

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 \_\_\_\_\_

For Official Use Only	
Date: <u>July 27, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>30,000.00</u>	Permit Expiration: _____
Value Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>170.00</u>	

Roof:

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 \_\_\_\_\_
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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

Zoning:

District: \_\_\_\_\_ Street Frontage Req: \_\_\_\_\_ Provided \_\_\_\_\_

Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Review Required:

Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Sub-division \_\_\_\_\_

Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_

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

Date Approved \_\_\_\_\_

Permit Received By Joanne Quint

Signature of Applicant Joanne Quint (acting as agent for Hanson Project Management) July 27, 1988

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates 7 Adddate

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**  
Town Or Plantation: PORTLAND  
Street Subdivision Lot #: 100 Commercial St.

**PROPERTY OWNERS NAME**  
Last: Nappi First: Rail  
Applicant Name: MARK OBERON M.D.

Mailing Address of Owner/Applicant (If Different):  
9 Broad Ave. Dr. Jc  
Cumberland Co., ME 04027

PORTLAND 4079 TOWN COPY  
DATE: 11/27/90 FEE: \$3.94  
Mark Oberon Local Plumbing Inspector Signature  
L.P.I. # 011237

**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 Inspector to deny a Permit.  
Signature of Owner/Applicant: Mark Oberon Date: 11/26/90

**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: JLU 11/1990

**PERMIT INFORMATION**

This Application is for:  
1.  NEW PLUMBING  
2.  RELOCATED PLUMBING

Type Of Structure To Be Served:  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER - SPECIFY Restaurant

Plumbing To Be Installed By:  
1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D HOUSING DEALER/MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER  
LICENSE # 125211

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District  <b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.  <b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other		Water Heater
Number of Hook-Ups & Relocations			2	
Hook-Up & Relocation Fee				
	Fixtures (Subtotal) Column 2		6	Fixtures (Subtotal) Column 1
			7	Fixtures (Subtotal) Column 2
			1.6	Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

\$ 30.00



PC902234

Permit # \_\_\_\_\_ 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.

**T B H Partnership** Phone # 871-6438  
 Address: 100 Commercial St; Pld, ME 04101  
 LOCATION OF CONSTRUCTION 100 Commercial St.  
 Contractor: RXXXX Nappi & Sons Sub: 799-4409 ← call for pickup  
 Address: 20 Beach Bluff; Cape Elizabeth, ME 04107  
 Est. Construction Cost: \$800. Proposed Use: pizza retail w  
 Past Use: pizza retail cooking  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Storics: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion: install cooking-hood vent

**For Official Use Only PERMIT ISSUED**  
 Date 11/16/90 Subdivision: \_\_\_\_\_  
 Name: DEC-20-1990  
 Lot: \_\_\_\_\_  
 Ownership: City of Portland  
 Estimated Cost: 800  
 Zoning: vent B-3 Thomas Block  
 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: OK WPA 12-7-90

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

**Floors:**  
 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. Studling 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. Studling 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 \_\_\_\_\_ Not in District nor Landmark  
 3. Type Ceiling: \_\_\_\_\_ Does not require review  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

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

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Signature: J. Hamilton

**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.

Permit Received By Lowry ISSUED  
 Signature of Applicant WPA Date 11/16  
 Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_  
 Inspection Dates \_\_\_\_\_

White-Tax Assessor Yellow-GPCOG White Tag -CEO © Copyright GPCOG 1988

110 MA. MITCHELL



902234

Permit # \_\_\_\_\_ 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: T R H Partnership Phone # 871-6438  
 Address: 100 Commercial St; Ptld, ME 04101  
 LOCATION OF CONSTRUCTION: 100 Commercial St.  
 Contractor: RXXXXX Haopi & Sons Sub: 799-4409 ← call for price  
 Address: 20 Beach Bluff; Cape Elizabeth, ME 04107  
 Est. Construction Cost: \$300 Proposed Use: pizza retail w cooking  
 Past Use: pizza retail  
 # 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: Install cooking-hood vent

**For Official Use Only PERMIT ISSUED**  
 Date: 9/15/90 Subdivision: Name: DEC-20-1990  
 Issued Fire Limits \_\_\_\_\_ Lot \_\_\_\_\_  
 City Code \_\_\_\_\_ Ownership: City of Portland  
 Time Limit \_\_\_\_\_  
 Estimated Cost: 300  
 Zoning: v2  
 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): OK WDA 12-7-91

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

**Floors:**  
 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 \_\_\_\_\_

**HISTORIC PRESERVATION**  
 Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ Not in District or Landmark.  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.  
 3. Type Ceiling: \_\_\_\_\_  
 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: 11/16/90  
 Signature: [Signature]

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Signature: [Signature]

**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 Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

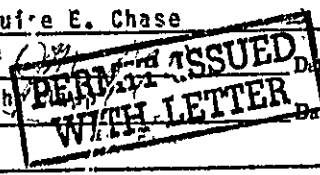
**Swimming Pools:**  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louie E. Chase

Signature of Applicant: John [Signature] Date: 11/16

Signature of CEO: [Signature] Date: \_\_\_\_\_

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



50/01/11 White-Tax Assessor Yellow-GPCOG White Tag-CEQ © Copyright GPCOG 1988 101 MA MITCHELL

PLOT PLAN

N



**FEES (Breakdown From Front)**  
Base Fee \$ 23  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

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

COMMENTS Head is installed and has been approved by LT. Garraway 12/20/90  
McM

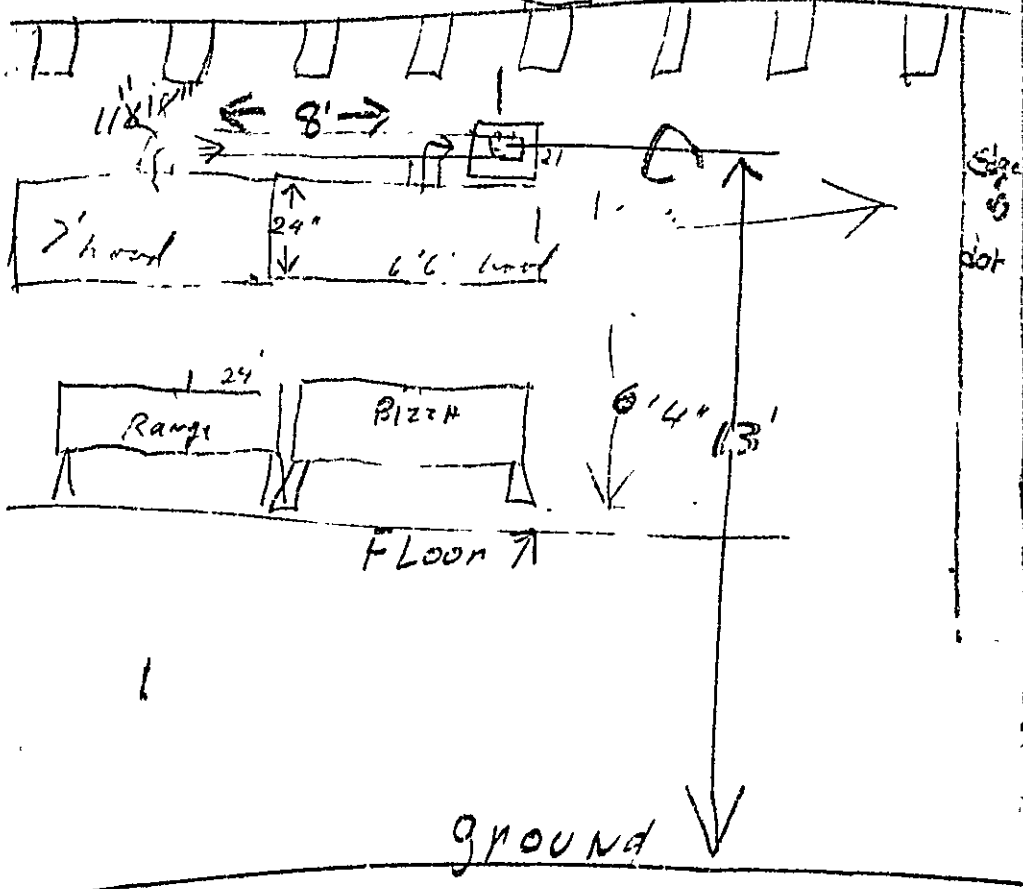
*(The following section contains multiple lines of text that have been completely crossed out with diagonal slashes.)*

Signature of Applicant [Signature]

Date 11/16/90

Faced  
Workshop

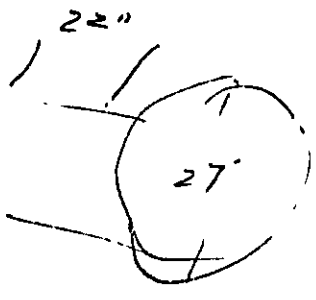
#800, - Portland  
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RECEIVED

NOV 16 1990

DEPT OF BUILDING INSPECTIONS  
CITY OF PORTLAND



100 Commercial St

## ARTICLE 5

### KITCHEN EXHAUST EQUIPMENT

#### SECTION M-500.0 GENERAL

**M-500.1 Scope:** In addition to the other requirements of this code, the provisions of this article shall govern the construction, installation, alteration and repair of all kitchen exhaust equipment

#### SECTION M-501.0 WHERE REQUIRED

**M-501.1 Commercial cooking appliances:** A commercial exhaust hood shall be provided for each commercial cooking *appliance*

##### Exceptions

1. An *appliance* located within a dwelling unit and not used for commercial purposes
2. Completely enclosed ovens.
3. Steam tables.
4. Auxiliary cooking equipment that does not produce grease-laden vapors, including toasters, coffee makers and egg cookers.

**M-501.2 Domestic cooking appliances:** Domestic cooking *appliances* used for commercial purposes shall be provided with a commercial exhaust hood. Domestic cooking *appliances* used for noncommercial purposes shall be provided with *ventilation* in accordance with Article 16.

Exception: Completely enclosed ovens.

#### SECTION M-502.0 FACTORY-BUILT COMMERCIAL HOODS AND DUCTS

**M-502.1 Approval of hoods:** Factory-built commercial exhaust hoods tested in accordance with UL 710 listed in Appendix A, and bearing the *label* of an approved agency, shall be installed in accordance with the manufacturer's instructions for the *labeled* equipment. The exhaust hood shall be designed for the type of cooking *appliance* provided, and shall conform to Section M-503.1.

**M-502.2 Other type hoods:** Factory-built commercial exhaust hoods that are not tested in accordance with UL 710 listed in Appendix A shall conform to all of the requirements in this article for commercial exhaust hoods.

THE BOCA NATIONAL MECHANICAL CODE/1990

**M-502.3 Approval of ducts:** Ducts bearing the *label* of an approved agency shall be installed in accordance with the manufacturer's instructions for the *labeled* duct. Ducts shall be designed for the type of cooking *appliance* and hoods served.

**SECTION M-503.0 COMMERCIAL HOOD DESIGN**

**M-503.1 Vapor confinement:** The system shall be designed to confine cooking vapors and residues within the hood.

**M-503.2 Hood construction:** The hood and other parts of the primary collection system shall be constructed of steel or stainless steel. The minimum nominal thickness of steel shall be 0.048 inch (No. 18 Manufacturers Standard Gage). The minimum nominal thickness of stainless steel shall be 0.037 inch (No. 20 U.S. Standard Gage).

**M-503.2.1 Joints:** All external joints and seams shall be welded liquid tight.

**M-503.2.2 Interior surfaces:** The interior surfaces of the hood shall not have any areas that can accumulate grease.

**Exception:** Grease collection systems under filters and troughs on the perimeter of canopy hoods.

**M-503.3 Canopy hoods:** Canopy hoods shall be designed to completely cover the cooking equipment. The edge of the hood shall extend a minimum horizontal distance of 6 inches (152 mm) beyond the edge of the cooking surface on all open sides.

**M-503.4 Noncanopy-type hoods:** Hoods of the noncanopy type shall be located a maximum of 3 feet (914 mm) above the cooking surface. The edge of the hood shall be set back a maximum of 1 foot (305 mm) from the edge of the cooking surface.

**M-503.5 Hood exhaust:** The hood exhaust shall create a draft from the cooking surface into the hood.

**M-503.5.1 Quantity of exhaust:** Canopy hoods attached to the wall shall exhaust a minimum of 100 cubic feet per minute (cfm) per square foot ( $0.50 \text{ m}^3/\text{s} \cdot \text{m}^2$ ) of the hood area. Canopy hoods exposed on all sides shall exhaust a minimum of 150 cfm per square foot ( $0.75 \text{ m}^3/\text{s} \cdot \text{m}^2$ ) of hood area. Hoods of the noncanopy type shall exhaust a minimum of 300 cfm per lineal foot ( $0.46 \text{ m}^3/\text{s} \cdot \text{m}$ ) of cooking surface. The minimum quantity of exhaust shall not be reduced where tests indicate conformance to Section M-503.1.

**M-503.5.2 Makeup air:** *Makeup air* shall be supplied during the operation of the kitchen exhaust system. The amount of *makeup air* shall be approximately equal to the amount of exhaust air. The *makeup air* shall not reduce the effectiveness of the exhaust system.

The temperature differential between *makeup air* and air in the conditioned space shall not exceed 10 degrees F. (5.5 degrees C.).

**Exceptions**

1. *Makeup air* that is part of the air conditioning system.

PERMIT # 1448 CITY OF Portland BUILDING PERMIT APPLICATION

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

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

Owner: FPA Partnership

Address: 100 Commercial Street, 04101 774-8778

LOCATION OF CONSTRUCTION Suite 304 100 Commercial Street

CONTRACTOR: FPA Partnerships SUBCONTRACTORS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Est. Construction Cost: 25,000 Type of Use: offices

Past Use: \_\_\_\_\_

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

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

Conversion - Explain interior renovation

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:  
# Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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. Lolly 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 \_\_\_\_\_

For Official Use Only	
Date: <u>November 2, 1987</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Blgd Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>25,000</u>	Permit Expiration _____
Value/Structure: <u>2142.00</u>	Ownership: _____
Fees _____	Public / Private _____

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

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

Plumbing:  
1. Approval of soil test NOV 10 1987 Yes \_\_\_\_\_ No \_\_\_\_\_  
2. No. of Tubs or Showers \_\_\_\_\_  
3. No. of Flushes \_\_\_\_\_  
4. No. of Lavatories 1  
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.

Zoning:  
District: P-3 Street 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 \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
Other (Explain) \_\_\_\_\_  
Date Approved: Nov 4 1987

Permit Received By Kandi Cote

Signature of Applicant [Signature] Date \_\_\_\_\_

Signature of CEO [Signature] Date 11-9-87

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

**PLOT PLAN**



<b>FEES (Breakdown From Front)</b>	<b>Type</b>	<b>Inspection Record</b>	<b>Date</b>
Base Fee \$ _____	_____	_____	____/____/____
Subdivision Fee \$ _____	_____	_____	____/____/____
Site Plan Review Fee \$ _____	_____	_____	____/____/____
Other Fees \$ _____ (Explain) _____	_____	_____	____/____/____
Late Fee \$ _____	_____	_____	____/____/____

**COMMENTS**

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

Signature of Applicant Richard H. Hew Date \_\_\_\_\_



**B** PERMIT # 002075 TOWN OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: TBA Partnership  
 Address: 555 Washington St., Suite 5, Wellesley, Mass 02181  
 LOCATION OF CONSTRUCTION 100 Commercial St., 3rd and 4th floors  
 CONTRACTOR: KH Golder Construction CONTRACTORS: 878-2949  
 ADDRESS: 36 Waverly St., Portland,

**For Official Use Only**

Date May 8, 1989 Subdivision: Yes / No \_\_\_\_\_  
 Inside Fire Limit \_\_\_\_\_ Name \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Type Limit \_\_\_\_\_  
 Estimated Cost: \$22,000 **PERMIT ISSUED**  
 Value/Structure \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_  
 Fee \$130.00 **MAY 15 1989**

Est. Construction Cost: \$22,000 Type of Use: residential/commercial  
 Past Use: ANY QUESTIONS/ALL CORRESPONDENCE TO: Cindy O'Connell  
Hansen Project Management  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories: \_\_\_\_\_ Lot Size: 5 Milk St. 04101  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment 774-8778  
 \_\_\_\_\_ Conversion - Explain: interior renovations. Suites 305 and 402.  
**COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE** 2 sets of plans submitted.  
 Residential Buildings Only: \_\_\_\_\_ for both suites.  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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

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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Zoning:  
 District: \_\_\_\_\_ Street Frontage Req: \_\_\_\_\_ Provided \_\_\_\_\_  
 Required 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 \_\_\_\_\_  
 Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other: \_\_\_\_\_ (Explain) \_\_\_\_\_  
 Date Approved \_\_\_\_\_

Permit Received By Nancy Grossman

Signature of Applicant Cynthia O'Connell Date 5/8/89  
as agent for owner

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates (10) KHJ

Foundations:  
 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 Size \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_



B

PERMIT # 002057 CITY OF BUILDING PERMIT APPLICATION MAP # LOT #

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

Owner: Thomas Black Associates Partnership Hanson Project Management 774-8778

Address: 100 Commercial Street

LOCATION OF CONSTRUCTION 100 Commercial Street

CONTRACTOR: Goldier Constructi SUBCONTRACTORS:

ADDRESS: 36 Waverly Street, Ptd, Me.

Est. Construction Cost: 65,000. Type of Use: Office Complex

Past Use:

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

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain interior renovations to 12 suites

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: # Of Dwelling Units # Of New Dwelling Units

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

For Official Use Only
Date: 4/21/89
Subdivision: Yes / No
Name:
Loc:
Block:
Time Limit:
Estimated Cost: 65,000
Value/Structure: 345.00
Permit Expires:
Ownership: Public/Private

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

Roof: 1. Truss or Rafter Size 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 Street 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 Subdivision Shore and Floodplain Mgmt Special Exception Other (Explain) Date Approved

Permit Received By

Signature of Applicant Cynthia O'Connell Date

Signature of CEO (10) HJL Date

Inspection Dates

PERMIT **002057**

CITY OF

**Thomas Block Complex**  
BUILDING PERMIT APPLICATION

MAP #

LOT #

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

Owner: Thomas Block Associates Partnership

Address: 100 Commercial Street

LOCATION OF CONSTRUCTION 100 Commercial Street

CONTRACTOR: Goldier Construct SUBCONTRACTORS:

ADDRESS: 36 Waverly Street, Ptd, Ma.

Est. Construction Cost: 65,000. Type of Use: Office Complex

Past Use:

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

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Interior renovations to 12 suites

**COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE**

Residential Buildings Only

# Of Dwelling Units      # Of New Dwelling Units     

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:
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 Size      Span(s)
3. Wall covering Type
4. Fire wall if required
5. Other Materials

**PERMIT ISSUED  
WITH LETTER**

White-Tax Assesor

Yellow-GPCOG

White Tag (BO)

Copyright GPCOG 1987

For Official Use Only

Date: <u>4/21/89</u>	Subdivision: Yes <u>    </u> No <u>    </u>
Inside Fire Limits <u>    </u>	Name <u>    </u>
Blgd Code <u>    </u>	Lot <u>    </u>
Time Limit <u>    </u>	Block <u>    </u>
Estimated Cost: <u>65,000.</u>	Permit Expiration: <u>    </u>
Value/Structure <u>    </u>	Ownership: <u>    </u> Public <u>    </u> Private <u>    </u>
Fee <u>365.00</u>	

Ceiling:

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

**PERMIT ISSUED**

**MAY 10 1989**

Roof:

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

**City Of Portland**

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      CO.      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.

Zoning:

District      Street Frontage Req:      Provided     

Required Setbacks: Front      Back      Side      Side     

Review Required:

Zoning Board Approval: Yes      No      Date:     

Planning Board Approval: Yes      No      Date:     

Conditional User:      Variance      Site Plan      Subdivision     

Shore and Floodplain Mgmt.      Special Exception     

Other:      (Explain)     

Date Approved: 5-7-89

Permit Received By     

Signature of Applicant:      Date 5-2-89

Signature of CEO:      Date 5-8-89

Inspection Date:     

*Handwritten notes:*  
OK  
W.D. [Signature]  
1107 MA. TRAVIS





CITY OF PORTLAND, MAINE

389 CONGRESS STREET  
PORTLAND MAINE 04101  
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF  
INSPECTION SERVICES DIVISION

May 10, 1989

RE: 100 Commercial Street

Hanson Project Management  
5 Milk Street  
Portland, Maine 04101

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirement:

Each unit shall have access to two separate and remote and approved exits in accordance with the Life Safety Code.

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

Sincerely,

  
P. Samuel Hoffses  
Chief of Inspection Services

/el

cc: LT. James Collins, Fire Prevention Bureau

PERMIT # **002078**

TOWN OF Portland

BUILDING PERMIT APPLICATION

MAP # LOT 1

*Thomas Block Building*

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

For Official Use Only

Owner: TBA Partnership

Date: May 8, 1988

Subdivision: Yes / No

Address: 555 Washington St., Suite 5, Wellesley, Mass 02181

Inside Fire Limits

Name

Reg Code

Lot

Time Limit

Block

Estimated Cost: \$22,000

Permit Expiration:

Valid Structure

Ownership:

Fee \$130.00

Public

Private

LOCATION OF CONSTRUCTION 100 Commercial St., 3rd and 4th floors

CONTRACTOR: EM Golder Construction SUBCONTRACTORS: 875-2949

ADDRESS: 36 Waverly St., Portland,

Est. Construction Cost: \$22,000 Type of Use: residential/commercial

Ceiling:

1. Ceiling Joists Size:

2. Ceiling Strapping Size

Spacing

3. Type Ceilings:

4. Insulation Type

5. Ceiling Height:

**PERMIT ISSUED**

Size

MAY 15 1988

Part Use: ANY QUESTIONS/ALL CORRESPONDENCE TO: Cindy O'Connell

Main. gen. code: 04101

Building Dimensions L      W      Sq. Ft.      # Stories:      Lot Size: 5 DRIVE 3L

Is Proposal Use:      Seasonal      Condominium      Apartment 774-8778

Conversion - Explain interior renovations. Suites 305 and 402.

Roof:

1. Truss or Rafter Size

2. Sheathing Type

3. Roof Covering Type

4. Other

**CITY OF PORTLAND**

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE 2 sets of plans submitted

Residential Buildings Only

# Of Dwelling Units      # Of New Dwelling Units     

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 0902S No     

2. No. of Tubs or Showers     

3. No. of Flushes     

4. No. of Lavatories     

5. No. of Other Fixtures 00-001

Swimming Pools:

1. Type:     

2. Pool Size:      x      Square Footage     

3. Must conform to National Electrical Code and State Law.

Zoning:

District      Street Frontage Req.:      Provided     

Required 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     

Shore and Floodplain Mgmt.      Special Exception     

Other:      (Explain)     

Date Approved WDA 5-12-88

Permit Received By Nancy Grossman

Signature of Applicant [Signature] Date 5/16/88

Signature of CEO [Signature] Date 5/16/88

Inspection Dates     

© Copyright GPCOG 1987

White-Tax Assessor [Signature] GPCOG [Signature] White-Tax CEO [Signature]

Foundations:

1. Type of Soil:
2. Set Backs - Front      Rear      (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

5/16/88

[Signature]

THOMAS BLOCK Bldg'ing



PLOT PLAN

Elevator  
Beau of Harbour Standards  
State of Me.  
August -

FEES (Breakdown From Front)		Type	Inspection Record	Date
Base Fee \$	25.00			
Subdivision Fee \$				
Site Plan Review Fee \$				
Other Fees \$	105.00			
(Explain)				
Late Fee \$				

COMMENTS 12/13/89 Final - three plus inspections were made during the renovation; completed as per plans of Bldg'ing codes

Signature of Applicant Cynthia O'Connell - as agent for owner Date 5/8/89



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

Date 11/28/90, 19\_\_  
 Receipt and Permit number 01759

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: 100 Commercial St. (Nappi's Pizza)  
 OWNER'S NAME: Phil Nappi ADDRESS: Cape Eliz

	FEES
<b>OUTLETS:</b>	
Receptacles <u>x</u> Switches _____ Plugmold _____ ft. TOTAL <u>10</u> .....	2.00
<b>FIXTURES:</b> (number of)	
Incandescent _____ Flourescent <u>x</u> (not strip) TOTAL <u>2</u> .....	4.00
Strip flourescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ ..	
<b>METERS:</b> (number of) _____	
<b>MOTORS:</b> (number of)	
Fractional <u>2</u> .....	4.00
1 HP or over _____	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws <u>x</u> Over 20 kws _____	5.00
<b>APPLIANCES:</b> (number of)	
Ranges _____	Water Heaters _____
Cook Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
<b>TOTAL</b> .....	
<b>MISCELLANEOUS:</b> (number of)	
Branch Panels _____	
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 ADDITIONAL WORK NOT ON ORIGINAL PERMIT .....	DOUBLE FEE DUE: _____
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	TOTAL AMOUNT DUE: <u>15.00</u>

minimum fee

**INSPECTION:**  
 Will be ready on 11/30 - pm, 19\_\_; or Will Call \_\_\_\_\_  
**CONTRACTOR'S NAME:** Thomas Black  
**ADDRESS:** 255 Allen Ave; P.tld  
**TEL:** 797-0892  
**MASTER LICENSE NO.:** #10181 **SIGNATURE OF CONTRACTOR:**  
**LIMITED LICENSE NO.:** \_\_\_\_\_ *Thomas Black*

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







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

Date 1/9/91, 19\_\_  
 Receipt and Permit number 01036

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: 100 Commercial St - Suite 102  
 OWNER'S NAME: Thomas Block Assoc ADDRESS: \_\_\_\_\_

	FEES
<b>OUTLETS:</b>	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____	
<b>FIXTURES: (number of)</b>	
Incandescent _____ Fluorescent _____ (not strip) TOTAL _____	
Strip Fluorescent _____ ft. _____	
<b>SERVICES:</b>	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____	
<b>METERS: (number of)</b> <u>1</u> _____	1.00
<b>MOTORS: (number of)</b>	
Fractional _____	
1 HP or over _____	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
<b>APPLIANCES: (number of)</b>	
Ranges _____ Water Heaters _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
<b>TOTAL</b> _____	
<b>MISCELLANEOUS: (number of)</b>	
Branch Panels <u>1</u> _____	4.00
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 ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....  
**TOTAL AMOUNT DUE: 15.00**

**INSPECTION:** Will be ready on now, 19\_\_; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: Energy Electric  
 ADDRESS: 100 Commercial St - Suite 102 Portland, ME  
 TEL.: 797-9340  
 MASTER LICENSE NO. J. K. Boehm #04645 SIGNATURE OF CONTRACTOR: \_\_\_\_\_  
 LIMITED LICENSE NO.: \_\_\_\_\_

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

minimum fee





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

Date 1/23/90, 19\_\_  
 Receipt and Permit number 01052

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: 100 Commercial St.  
 OWNER'S NAME: Mr. Dexter ADDRESS: same

OUTLETS:	FEE
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL 1-30 .....	3.00
FIXTURES: (number of)	
Incandescent <u>24</u> Fluorescent _____ (not strip) TOTAL .....	4.00
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 <u>1</u>
Cook Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
TOTAL <u>1</u> .....	1.50
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windings) _____	
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 _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT .....	INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	DOUBLE FEE DUE:
	TOTAL AMOUNT DUE: <u>8.90</u>

INSPECTION: Frid am 1/26  
 Will be ready on AMX; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: L & E Electric  
 ADDRESS: No Gorham RD; Gorham, ME  
 TEL: 825 5217  
 MASTER LICENSE NO: Timothy Welch #14044 SIGNATURE OF CONTRACTOR: \_\_\_\_\_  
 LIMITED LICENSE NO: \_\_\_\_\_

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





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

Date 11/28/90, 19  
 Receipt and Permit number 01759

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: 100 Commercial St. (Nappi's Pizza)  
 OWNER'S NAME: Phil Nappi ADDRESS: Cape Eliz.

	FEES
<b>OUTLETS:</b>	
Receptacles <u>x</u> Switches _____ Plugmold _____ ft. TOTAL <u>10</u> .....	<u>2.00</u>
<b>FIXTURES:</b> (number of)	
Incandescent _____ Fluorescent <u>x</u> (not strip) TOTAL <u>2</u> .....	<u>4.00</u>
Strip Fluorescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ ..	
<b>METERS:</b> (number of) .....	
<b>MOTORS:</b> (number of)	
Fractional <u>2</u> .....	<u>4.00</u>
1 HP or over .....	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) .....	
Electric (number of rooms) .....	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) .....	
Oil or Gas (by separate units) .....	
Electric Under 20 kws <u>x</u> Over 20 kws .....	<u>5.00</u>
<b>APPLIANCES:</b> (number of)	
Ranges _____ Water Heaters _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL .....	
<b>MISCELLANEOUS:</b> (number of)	
Branch Panels .....	
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 .....	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT .....	INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	DOUBLE FEE DUE:
	TOTAL AMOUNT DUE: <u>15.00</u>

INSPECTION: \_\_\_\_\_ minimum fee

Will be ready on 11/30 - pm, 1990; or Will Call \_\_\_\_\_

CONTRACTOR'S NAME: Thomas Black

ADDRESS: 255 Allen Ave. Ptd

TEL: 797-0892

MASTER LICENSE NO.: #10181 SIGNATURE OF CONTRACTOR: \_\_\_\_\_

LIMITED LICENSE NO.: \_\_\_\_\_ Thomas Black

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





923820

Permit # \_\_\_\_\_ 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.

PERMIT ISSUED

Owner: "Perot for President" Phone # \_\_\_\_\_  
Address: c/o Arthur Rowe #8697  
LOCATION OF CONSTRUCTION 100 Commercial St. - third floor  
Contractor \_\_\_\_\_ Sub: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
Est. Construction Cost: 1000 Proposed Use: office w intr ren  
Past Use: office  
# 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 interior renovations - walls; doors

**For Official Use Only**  
Date 6/17/92 Subdivision: \_\_\_\_\_  
Inside Fire Limits \_\_\_\_\_  
Bidg Code \_\_\_\_\_  
Time Limit \_\_\_\_\_  
Estimated Cost: 1000  
Owner: \_\_\_\_\_  
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) \_\_\_\_\_

JUN 24 1992

Street Frontage Provided: Waterfront Overlay  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
Zoning: B-3

Foundations  
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 \_\_\_\_\_

White - Tax Assessor

Ceiling:  
1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
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: \_\_\_\_\_

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.

Permit Received By \_\_\_\_\_ Date \_\_\_\_\_

Signature of \_\_\_\_\_ Date \_\_\_\_\_

Address: Arthur Rowe 111

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]

HISTORIC PRESERVATION

1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
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: \_\_\_\_\_

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.

Permit Received By \_\_\_\_\_ Date \_\_\_\_\_

Signature of \_\_\_\_\_ Date \_\_\_\_\_

Address: Arthur Rowe 111

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]

HISTORIC PRESERVATION

1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
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: \_\_\_\_\_

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.

Permit Received By \_\_\_\_\_ Date \_\_\_\_\_

Signature of \_\_\_\_\_ Date \_\_\_\_\_

Address: Arthur Rowe 111

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]

923831

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: T.B.A. Partnership/Arcadia Bay Phone # 775-2022  
 Address: 100 Commercial St. Suite 214  
 LOCATION OF CONSTRUCTION 100 Commercial St. Suite 214  
 Contractor: R.P. Morrison Builders, Inc.  
 Address: 169C Lewiston Rd. Gray, Me 04039 Phone # 892-9418  
 Est. Construction Cost: 3,000,00 Proposed Use: office bldg w/ interior renovations Zoning B-3  
 Past Use: office bldg  
 # 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 office bldg w/ interior renovations

For Official Use Only		CRIM. ISSUED
Date <u>\$35.00 6-18-92</u>	Subdivisor:	
Inside Fire Limits _____	Name _____	
Bldg Code _____	Lot _____	
Time Limit _____	Ownership _____	
Estimated Cost _____		

Street Frontage Provided: W Overlay  
 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 (E. Field) WNA - 76-23-82

## Foundations

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

## Floors

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 \_\_\_\_\_

White - Tax Assessor

## Ceiling:

1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor LANDMARK.
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Required Review.
5. Ceiling Height: \_\_\_\_\_

## Roof:

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

## 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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

Permit Received By J. FoggSignature of Applicant Ronald Morrison Date 6/18/92

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

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

928820

Permit # 928820 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: Perot for President Phone # \_\_\_\_\_  
 Address: E/O Arthur Rowe #869B  
 LOCATION OF CONSTRUCTION 100 Commercial St. - third floor  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: 1000 Proposed Use: office w intr ren Zoning: B-3  
 Past Use: office  
 # 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: interior renovations - walls; doors  
handicapped ramp

**For Official Use Only**

Date: 6/17/92  
 Inside Fire Limits \_\_\_\_\_  
 Bldg Code: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_  
 Estimated Cost: 10000

Subdivision Name: \_\_\_\_\_  
 Owner: \_\_\_\_\_

**PERMIT ISSUED**  
 JUN 24 1992  
 CITY OF PORTLAND

Street Frontage Provided: Waterfront Overlay  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Sid \_\_\_\_\_ 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): WMA 26-18-92

**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. Insula on 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 \_\_\_\_\_

White - Tax Assessor

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District nor Landmark
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Required Review
5. Ceiling Height: \_\_\_\_\_

**Roof:**

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

**Chimneys:**

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

**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.

Permit Received by \_\_\_\_\_ Chase  
**PERMIT ISSUED**  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**WITH LETTER**  
 CEO/Dir: \_\_\_\_\_

CONTINUE TO REVERSE SIDE  
 Ivory Tag - CEO [Signature]

PLOT PLAN

N  
↑

FEES (Breakdown From Front)  
Base Fee \$ 25-  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Inspection Record	
Type	Date
<i>Progress Inspected</i>	<i>6/29/92</i>
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

*6/29/92. Completed. JLD*

### 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 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

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

Inspection Services  
Samuel P. Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

**CITY OF PORTLAND**

June 23, 1992

Mr. Arthur Rowe # 8697  
100 Commercial Street  
Portland, Maine (Third Floor)

100 Commercial Street

Dear Sir:

Your application to make interior renovations 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.

1. Ramps shall meet the requirements of Section 5-2.5 of the N.F.P. Life Safety Code as a minimum.
2. Portable fire extinguishers shall be provided in accordance with Section 27-3.5 and N.F.P.A. #10.

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

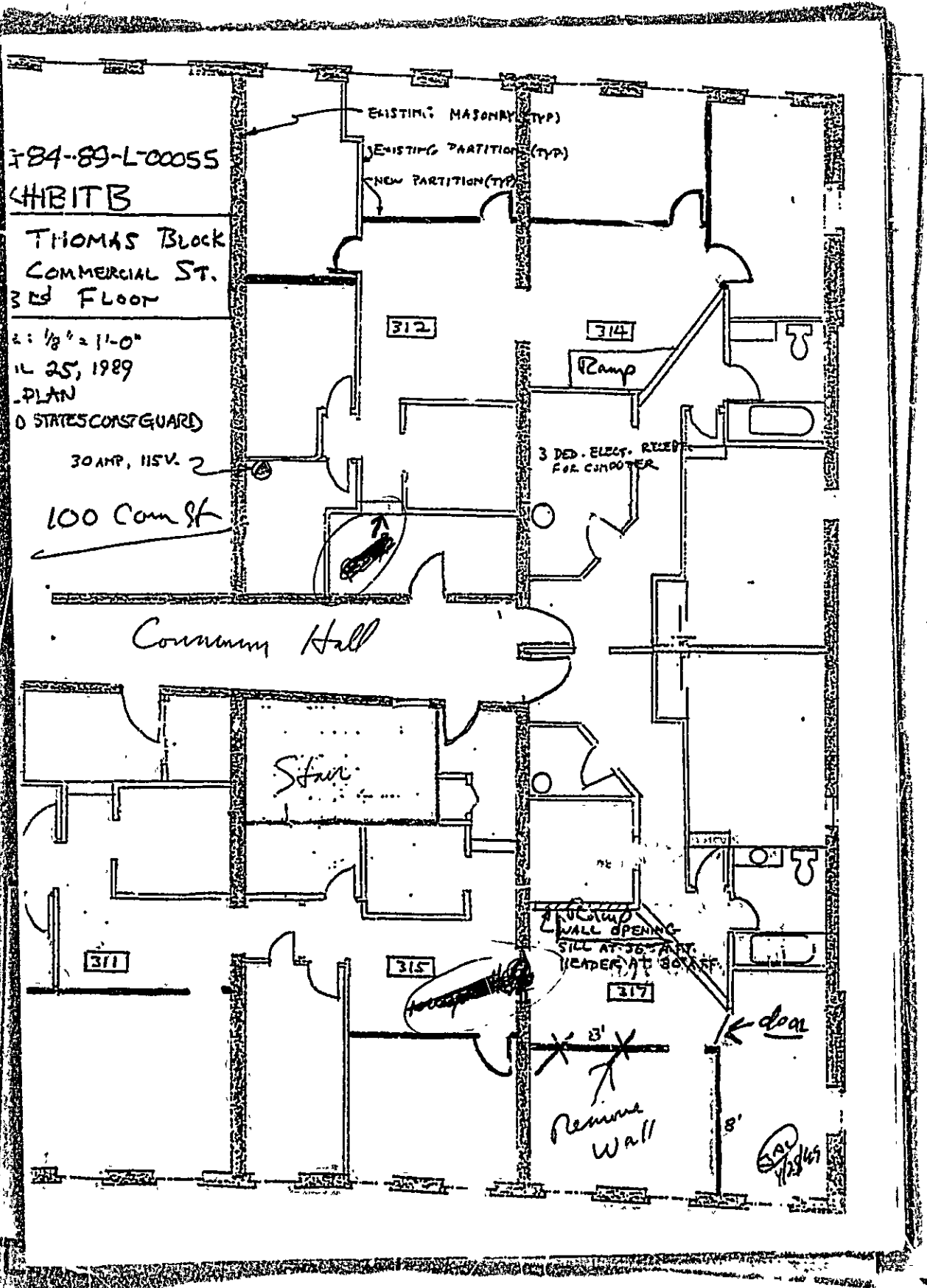
Sincerely,

A handwritten signature in dark ink, appearing to read "Samuel P. Hoffses", written over a horizontal line.

P. Samuel Hoffses  
Chief of Inspection Services

/jcf

cc: Lt. Wallace Carroway, Fire Prevention Bureau



184-89-L-00055  
4HBIB

THOMAS Block  
COMMERCIAL ST.  
3RD FLOOR

2: 1/2" = 1'-0"  
JUL 25, 1989  
PLAN  
D STATES CONST GUARD

30 AMP, 115V. 2  
100 Corn St

Common Hall

Stair

WALL OPENING  
SILL AT 36" HGT.  
HEADER AT 30" HGT.

Reinforce  
Wall

door  
SUN  
11/23/85