

924002

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$27.40 Zone _____ Map # _____ Lot # _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Elizabeth Reardon Phone # _____
 Address: 10 Exchange St- Bldg, ME 04101
 LOCATION OF CONSTRUCTION 8 Exchange St. (Leather Exchange)
 Contractor: Rockwell Burr Sub.: 761-3030
 Address: 184 Read St- Ptld, ME Phone # 04103
 Est. Construction Cost: _____ Proposed Use: retail w sign
 Past Use: _____
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion erect sign - 4'x3'

For Official Use Only

Date: 6/17/92 Subdivision: AUG 13 1992
 Inside Fire Limits: _____ Name: _____
 Bldg Code: _____ Loc: _____
 Time Limit: _____ Ownership: CITY OF PORTLAND Public _____ Private _____
 Estimated Cost: _____

Zoning: F-10
 Street Frontage Provided: _____ Back _____ Side _____
 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 Exemption _____
 Other: W-101 (Explain) 6-17-92

Foundation:

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

Floor:

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

Exterior Walls:

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

Interior Walls:

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

Ceiling:

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

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

1. Type: _____
2. Number of Fire Places _____

Heating:

1. Type of Heat: _____

Electrical:

1. Service Entrance Size: _____
2. 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:Louise E Chase**Signature of Applicant:**JEFF ROCKWELLDate 6/17/92**CEO's District:**

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

MR. IRVING

White - Tax Assessor

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 27,40
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Inspection Record

Type	Date
<i>Sign Insp</i>	<i>9/15/95</i>
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

Notes Placed as per plan & codes

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

ACORD. CERTIFICATE OF INSURANCE

DME 04433

ISSUE DATE (MM/DD/YY)

PRODUCER

MR. BURLAP CORPORATION
P.O. BOX 10609
24 CITY CENTER
PORTLAND ME 04104

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

COMPANIES AFFORDING COVERAGE**INSURED**

LYNNER EXCHANGE
10 EXCHANGE STREET
PORTLAND, ME 04101

COMPANY LETTER A PERLESS INSURANCE CO
COMPANY LETTER B
COMPANY LETTER C
COMPANY LETTER D
COMPANY LETTER E

COVERAGES

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

CO. LTR.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY	BINDER10000	05-05-92	05-05-93	GENERAL AGGREGATE \$ 2,000,000
	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$ 1,000,000
	CLAIMS MADE X OCCUR.				PERSONAL & ADV. INJURY \$ 1,000,000
	OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				
	ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	SCHEDULED AUTOS				
	HIRED AUTOS				BODILY INJURY (Per accident) \$
	NON-OWNED AUTOS				
	GARAGE LIABILITY				PROPERTY DAMAGE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
	OTHER THAN UMBRELLA FORM				
	WORKER'S COMPENSATION				STATUTORY LIMITS
	AND				EACH ACCIDENT \$
	EMPLOYERS' LIABILITY				DISEASE-POLICY LIMIT \$
					DISEASE-EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

FOR THE PURPOSES

CERTIFICATE HOLDER

CITY OF PORTLAND
10 EXCHANGE STREET
PORTLAND, ME 04101

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Cindi Cole

ACORD 25-S (7/80)

©ACORD CORPORATION 1990

APR-28-92 TUE 9:09

2077616614

P.02

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED
TO BE ERECTED ON A BUILDING AT 10 Exchange St.
IN PORTLAND, MAINE People's Heritage Park JAPEX INC. YMB the owner of the premises
at 10 Exchange St. in Portland, Maine hereby gives consent to the
erection of a certain sign owned by Elizabeth H. Beardon over the
sidewalk or on the building from said premises as described in application
to the Division of Inspection Services of Portland, Maine for a permit to
cover the erection of said sign:

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

In Witness whereof, the owner of said premises has signed this consent and
agreement this 30 day of April 19 92.

Shane Becker
Owner's signature JAPEX, INC
ASSET MANAGEMENT
OFFICER

Egon
Lessee's signature



City of Portland
Department of Planning and Urban Development
Room 211 City Hall, 389 Congress Street
Portland, Maine 04101 207-874-8300

Form 6.21.90

HISTORIC PRESERVATION APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Pursuant to review under the City of Portland's Historic Preservation Ordinance (Chapter 14, Article IX of the Portland City Code), application is hereby made for a Certificate of Appropriateness for the following work on the specified historic property:

Property Name and Address: The Leather Exchange @ 10 Exchange St.

Applicant: (name) Elizabeth Reardon (telephone) 774-2562
(company) The Leather Exchange
(address) 10 Exchange St.

Property Owner, if different: (name) People's Heritage Bank, APEX, INC
(address) 90 PEOPLES HERITAGE BANK
ONE PORTLAND SQUARE PORTLAND, ME 04101
(telephone) 207-761-8545

Architect (if any): _____

Contractor or Builder (if any): Palwell Bar Sign and Design

Local Designation: ☒ within historic district: (name) Old Port
☐ Landmark. ☐ Contributing. ☐ Non-contributing.

National Register Status: ☐ Landmark. ☐ District. ☐ Not Applicable.

Description of Proposed Work (Use additional sheets as necessary. Submit architectural sketches, plans, scale drawings, photographs, specifications, or other supporting documentation as required. All submission materials will be retained by the City. In the case of demolition or removal of a structure, the following indicates the proposed condition and appearance of the property thereafter): One (1) Over-The-Sidewalk Sign To Be Hung From An Existing Wrought-Iron Bracket At Site. Medex Waterfront Panel Shall Be Wrapped With Steel Banding. Please See Details.

Work is proposed in conjunction with: ☐ Major site plan application. ☐ Minor site plan application.
☐ Building permit application. ☒ None of the above.

Applicant's Signature [Signature]

Owner's Signature (if different) [Signature]

Note: No application fee. Applicant is responsible for costs of sending notices and placement of legal ad. Such costs shall be paid prior to issuance of Certificate/Building Permit or upon denial of Application.

FOR CITY USE ONLY

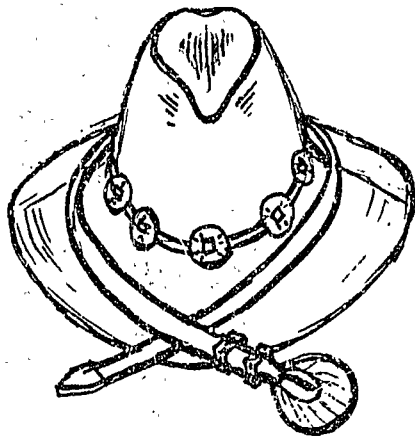
Historic Resource Inventory Number: 6/12/92 Assessor's Chart/Block/Lot: _____

Date Application Submitted: 6/12/92 Date Application Complete: _____

rockwell burt

Existing Bracket

THE
LEATHER



EXCHANGE

8

54"

36"

10'6"

To Sidewalk

Description:

One (1) Two-Sided Projecting
Sign To Be Mounted On
An Existing Bracket & Medersm
Waterproof Panel with Steel Framing

SF = $12\frac{3}{4}$

FAX (207) 761-3939 (Ask for EXT. #103)
184 Read St.
Portland, ME 04103
(207) 761-3939

COLORS:

Background: Cream-Colored

Hat: Combination of Airbrushed
Browns, Blacks and Grays

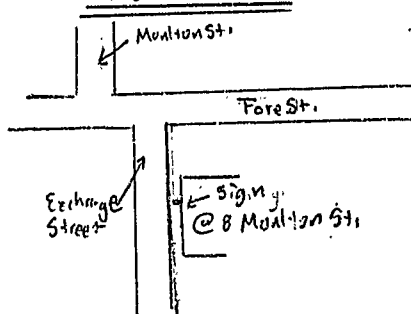
Framing: Flat Black

Lettering 'And 8': Burgundy

Rules: Black

Bracket and Sign Hangers: Flat Black

PLOT DRAWING:



PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION

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

Owner: Exchange Builders Assoc. - Bill Dowd

Address: ***60 York Street 773-6250 *

LOCATION OF CONSTRUCTION 10 Exchange Street

CONTRACTOR: Presision Builders SUBCONTRACTORS: _____

ADDRESS: 24 East Kidder

Est. Construction Cost: 500. Type of Use: residential (26 units)

Past Use: residential

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

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain change of use 1 unit to 2 unit (3rd Floor)

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

Residential Buildings Only:

Of Dwelling Units 10-29-92 # Of New Dwelling Units Permit

Foundation: not issued

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

Floor: owner - Apex Inc

1. Sills Size: bt 9540 Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: pld Size: _____
4. Joists Size: 04112 Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls: Dowd Properties; prop mgt

1. Studding Size _____ Spacing _____
2. No. windows Rm 206; 10 Exchange
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type Exchange Bldg Assoc Size _____
8. Sheathing Type _____
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 Assesor

Yellow-GPCOG

White Tag -CEO

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Please call when ready

MAP # _____ LOT# _____

For Official Use Only

Date <u>May 18, 1989</u>	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee <u>25.00</u>	

Ceiling:

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

Roof:

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

Chimneys:

Type: _____ Number of Fire Places "gle mome"

Heating:

Type of Heat: retail service

Electrical:

Service Entrance Size: #21 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 26 units
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 _____

Review Required:

Required Setbacks: Front _____ Back _____ Side _____ Side _____

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 Deborah Goode

Signature of Applicant [Signature] Date 5/14/89

Signature of CEO [Signature] Date 5-22-89

Inspection Dates _____

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

10 Exchange St.

May 25, 1989

Mr. William Dowd
Exchange Builders Association
60 York Street
Portland, Maine 04101

Dear Mr. Dowd:

We do not find any dimensions on your plot plan for converting an apartment at 10 Exchange Street in the B-3 Business to two separate apartments. We need to know how many apartments there are at 10 Exchange Street so that we may determine the appropriate density for this building.

Do you have any information which shows that these were "grandfathered" or previously approved as two separate apartments? Please advise this office regarding the size of these units and the number of apartments originally approved for this project.

Sincerely,

A handwritten signature in cursive script, appearing to read "William D. Giroux".

William D. Giroux
Zoning Enforcement Officer

cc: P. Samuel Hoffses, Chief, Inspection Services
Hugh Irving, Code Enforcement Officer
Warren J. Turner, Administrative Assistant

CITY OF PORTLAND, MAINE
M E M O R A N D U M

TO: Marge Schmuckal, Assistant Chief of Inspection Services
FROM: W. Paul Niehoff, Materials Engineer *W. P. Niehoff*
DATE: 7 April, 1994
SUBJECT: 10 Exchange Street Door Swing

After reviewing the field conditions at 10 Exchange Street and discussing the situation with you and Gary Hamilton, I believe we all agree that the requested 1 foot 10 inch door swing into the sidewalk is not acceptable as currently requested.

Bill Hopkins of Archtellic will research the 1 foot 6 inch door swing situation.

As I understand, the request was tabled at Wednesday's meeting. If a re-application is submitted, we can certainly meet at the location and hopefully come to an agreement or a resolution.

Please call me if needed.

WPN:jmd

pc: W. J. Bray, Deputy Director, City Engineer
P. Samuel Hoffses, Chief of Inspection Services
G. Hamilton, Historic Prevention

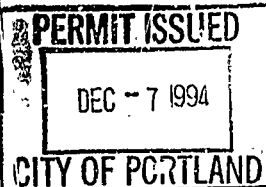
941270



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 12/5/94



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 10-24 Exchange St. Use of Building 25 dwelling units No. Stories Existing Building
 Name and address of owner of appliance Northbay
 Installer's name and address Scribner & Iverson, Inc. 797-9441 Telephone
 P O Box 3779 - Portland, ME 04104

General Description of Work:

To install a gas furnace in 26 units - Rinnai

IF HEATER, OR POWER BOILER

Location of appliance living room Any burnable material in floor surface or beneath? yes
 If so, how protected? by the unit Kind of fuel? natural gas
 Minimum distance to burnable material, from top of appliance or casing top of furnace 3 ft
 From top of smoke pipe 8 ft From front of appliance 10 ft From sides or back of appliance 3 in
 Size of chimney flue 2 inch Other connections to same flue no 3 ft
 If gas fired, how vented? special vent Rated maximum demand per hour 22,000 btu
 Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes each

IF OIL BURNER

Name and type of burner Labelled by Underwriters' laboratories?
 Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
 Type of floor beneath burner Size of vent pipe
 Location of oil storage Number and capacity of tanks
 Low water shut off Make No.
 Will all tanks be more than five feet from any flame? How many tanks enclosed?
 Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
 If so, how protected? Height of Legs, if any
 Skirting at bottom of appliance? Distance to combustible material from top of appliance?
 From front of appliance From sides and back From top of smokepipe
 Size of chimney flue Other connections to same flue
 Is hood to be provided? If so, how vented? Forced or gravity?
 If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

cost of work: \$64,000

 Mr. Salvatore Raja
 master plumber: 45512

Amount of fee enclosed? \$340

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

CS 30C

INSPECTION

FILE

APPLICANT'S

ASSESSOR'S COPY

Signature of Installer

PLOT PLAN

N
↑

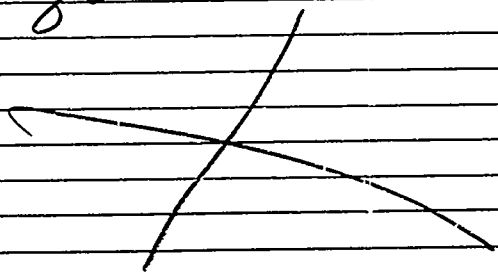
FEES (Breakdown From Front)

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

Inspection Record

Type	Date	
_____	/	/
_____	/	/
_____	/	/
_____	/	/
_____	/	/

COMMENTS 7/7/88. all CJO. OK.



Signature of Applicant *Joseph F. DeLoe*

Date 8/30/88

PERMIT # **001083**

CITY OF Portland BUILDING PERMIT APPLICATION

MAP #

LCT#

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

Owner: Joe DeGeorge

Address: 96 Emery St., Apt. 1, Portland 04102

LOCATION OF CONSTRUCTION 10 Exchange St.

CONTRACTOR: owner SUBCONTRACTORS: 773-6501

ADDRESS:

Est. Construction Cost: Type of Use: retail space

Past Use:

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

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain change of use from vacant to food vend.

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 August 30, 1988
 Inside Fire Limits
 Bldg Code
 Time Limit
 Estimated Cost
 Value/Structure
 Fee \$25.00

Subdivision: Yes / No

Name
 Lot
 Block
 Permit Expiration:
 Ownership: Public Private

PERMIT ISSUED

Ceiling:

1. Ceiling Joists Size: Spacing SEP 6 1988
2. Ceiling Strapping Size
3. Type Ceilings: Size
4. Insulation Type
5. Ceiling Height:

Roof:

1. Truss or Rafter Size Span
2. Sheathing Type Size
3. Roof Covering Type
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 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 Aug 30, 1988

Permit Received By Nancy Grossman

Signature of Applicant

Date

Signature of CEO

Date 9-1-88

Inspection Dates

White-Tax Assessor

Yellow-GPCOG

White-Tag CEO

© Copyright GPCOG 1987



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 10 Exchange Street.

Issued to Joe DeGeorge

Date of Issue September 7, 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. 38/1083, 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

1st Floor Partial

APPROVED OCCUPANCY

Food Vending

Limiting Conditions:

None

This certificate supersedes
certificate issued

Approved:

9/7/88

(Date)

Inspector

James V. Collins, Lieut
[Signature]
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 # 1083 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Joe DeGeorge

Address: 96 Emery St., Apt. 1, Portland 04102

LOCATION OF CONSTRUCTION 10 Exchange St.

CONTRACTOR: owner SUBCONTRACTORS: 773-6501

ADDRESS: _____

Est. Construction Cost: _____ Type of Use: retail space

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain change of use from vacant to food vending.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE (no renovations)

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 August 30, 1988

Subdivision: Yes / No _____

Inside Fire Limits _____

Name _____

Bldg Code _____

Lot _____

Time Limit _____

Block _____

Estimated Cost _____

Permit Expiration: _____

Value _____

Ownership: _____

Public _____

Fee \$25.00

Private _____

Ceiling:

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

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
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 of Applicant Joseph J. DeGeorge Date 8/30/88

Signature of CEO OK Date _____

Inspection Dates _____

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

© Copyright GPCOG 1987

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25.00 Zone _____ Map # _____ Lot# _____

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

Owner: Eddy Capone Phone # _____
Contact: Geo. Jackson 774-8874
Address: 32 Greenleaf St. Portland 04101
LOCATION OF CONSTRUCTION 10 Exchange St.
Contractor: Port City Glass Sub: _____
Address: and Jackson Phone # _____
Est. Construction Cost: 1300.00 Proposed Use: _____
Past Use: _____
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion to install front door as per plan

For Official Use Only	
Date <u>Jan 26, 1994</u>	Subdivision: _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Ownership: _____ Public _____ Private _____
Estimated Cost _____	

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required: _____
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) 1-28-94

Ceiling: **HISTORIC PRESERVATION**
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____ Not in District nor Landmark.
3. Type Ceilings: _____ Does not require review.
4. Insulation Type _____ Size _____ Requires Review.
5. Ceiling Height: _____

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

Chimneys: Type: _____ Number of Fire Places _____ Date: _____
Signature: _____

Heating: Type of Heat: _____

Electrical: Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

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

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

Permit Received By Latini

Signature of Applicant Warren Rowell Date 1/26, 94

CEO's District 2

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

White - Tax Assessor

12 M. M. M. M. M.

**CITY OF PORTLAND, MAINE
M E M O R A N D U M**

TO: Marge Schmuckal, Assistant Chief of Inspection Services
FROM: W. Paul Niehoff, Materials Engineer *W. P. Niehoff*
DATE: 7 April, 1994
SUBJECT: 10 Exchange Street Door Swing

After reviewing the field conditions at 10 Exchange Street and discussing the situation with you and Gary Hamilton, I believe we all agree that the requested 1 foot 10 inch door swing into the sidewalk is not acceptable as currently requested.

Bill Hopkins of Archtellic will research the 1 foot 6 inch door swing situation.

As I understand, the request was tabled at Wednesday's meeting. If a re-application is submitted, we can certainly meet at the location and hopefully come to an agreement or a resolution.

Please call me if needed.

WPN:jmd

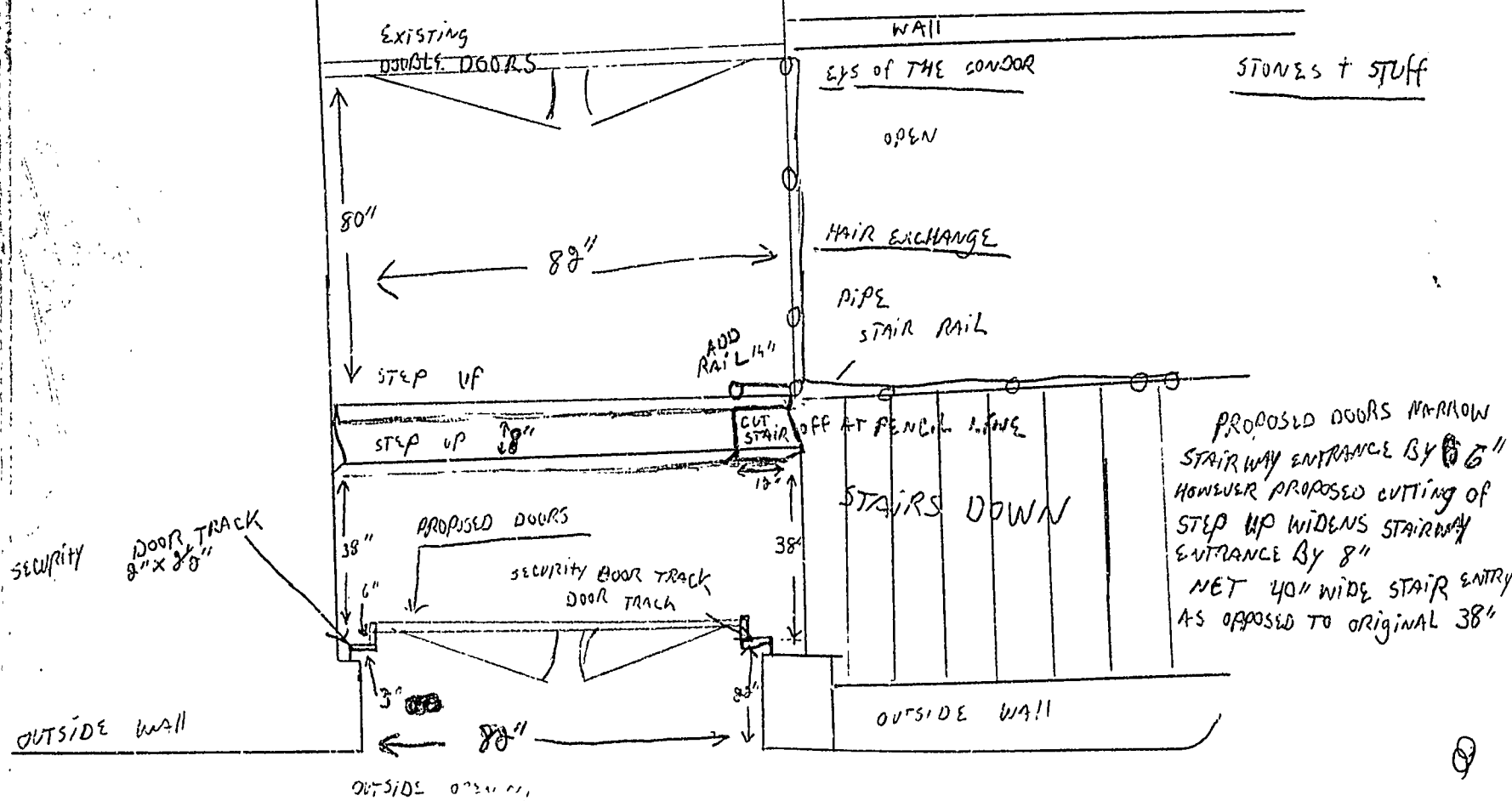
pc: W. J. Bray, Deputy Director, City Engineer
P. Samuel Hoffses, Chief of Inspection Services
G. Hamilton, Historic Prevention

WARREN ROWELL
774-8874

PROPOSED ADDITION OF EXTERIOR DOORS AT 10 EXCHANGE ST

APPLICATION FOR PERMIT PREVIOUSLY FILED

RECEIVED
CITY OF BOSTON
DEPT. OF PUBLIC WORKS
OFFICE OF THE CITY ENGINEER



proposed addition of 10 doors at 10 Exchange St

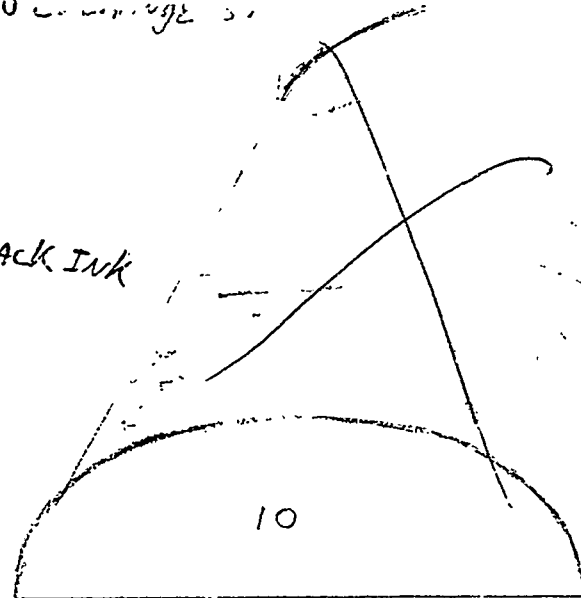
proposed

10 Exchange St

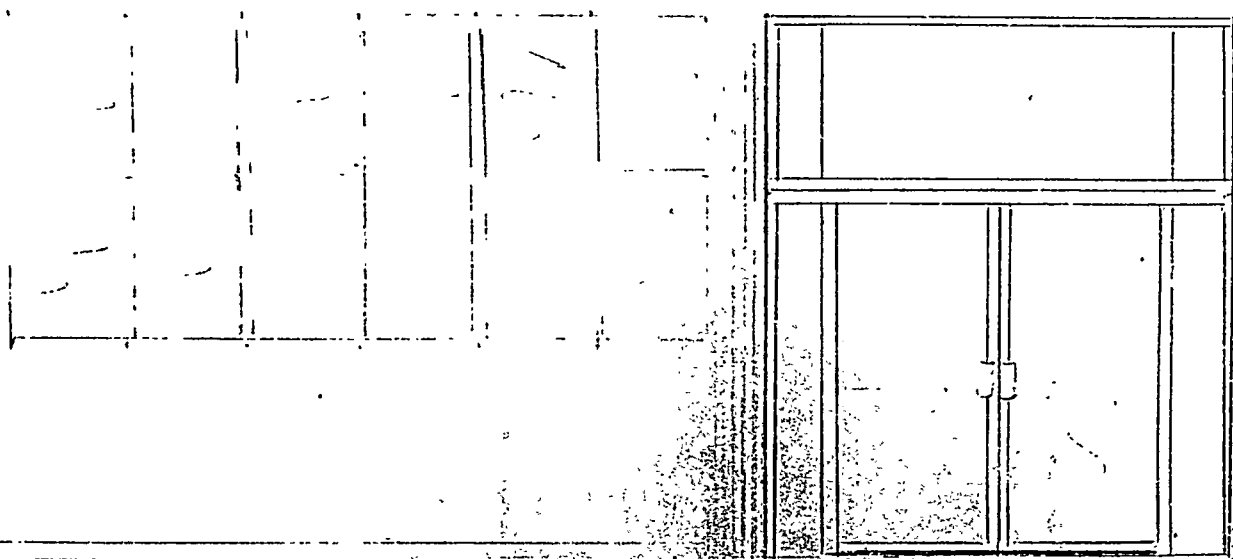
Walter Lowell
George Jackson
774-8874

PROPOSED DOORS IN BLACK INK

DOORS STAIN AND COMMERCIAL
ALUMINUM AND GLASS DOORS BRONZE
ACCENTED W/ TITANUM LIGHT



CANOPY R. 3' FOR VISAR - 1/1 A.D. -
ACTUAL ELEVATION 6' 8" APPROX.



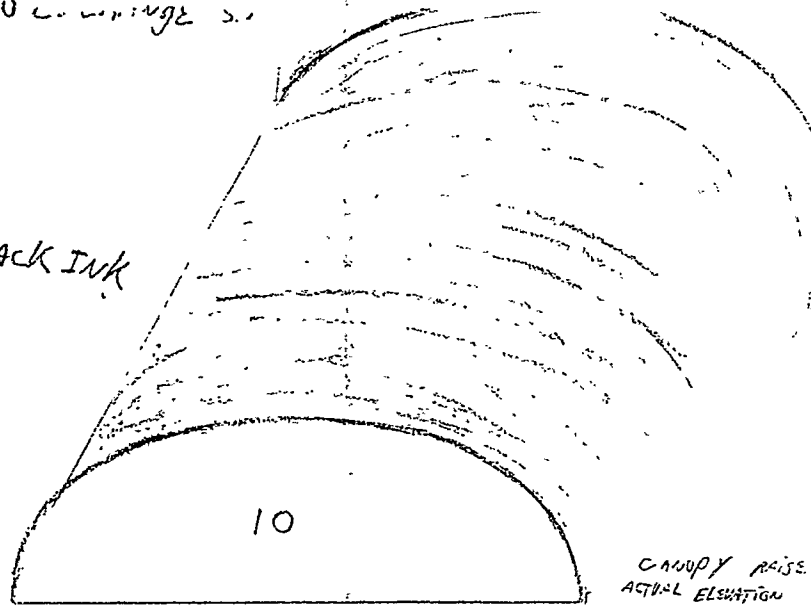
proposed Addition of Doors at 10 Exchange St

2

Wamen Rowell
George Jackson
774-8874

PROPOSED DOORS IN BLACK INK

DOORS STAND AND COMMERCIAL
ALUMINUM AND GLASS DOORS BRONZE
ANODIZED W/ TRANSOM LIGHT



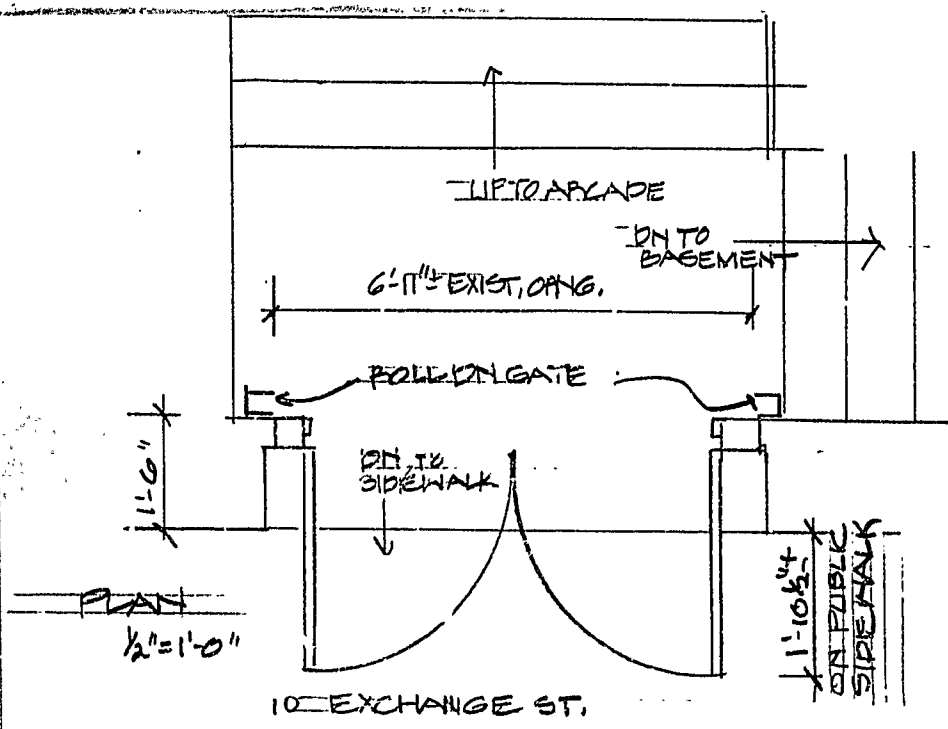
NO SCALE

CANOPY RAISED FOR VISIBILITY AND IN
ACTUAL ELEVATION 6'8" APPROX.



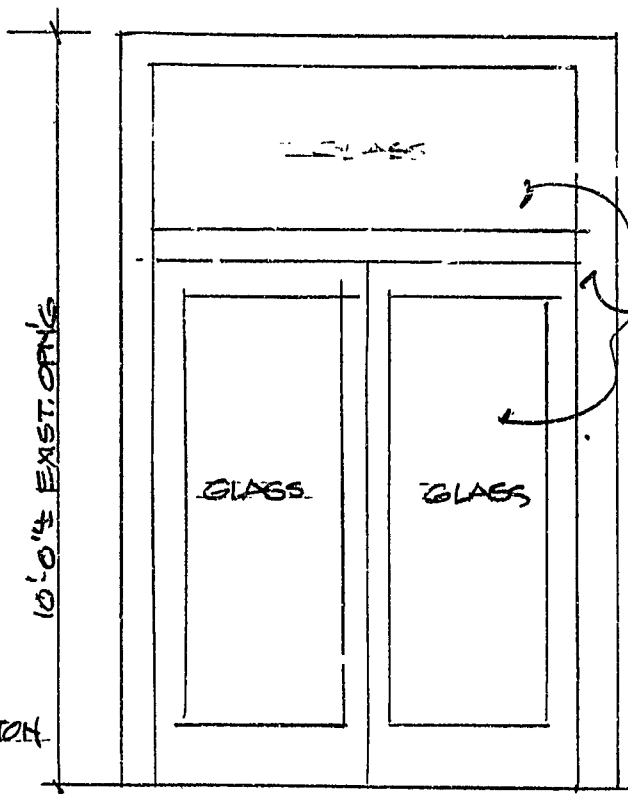
3/23/94

Existing
permit



PLAN
1/2" = 1'-0"

10 EXCHANGE ST.



ELEVATION

2- NEW 3' x 7'0"
PAINTED HARDWOOD
DOORS FRAME
& TRANSOM

NEW ENTRY DOORS
FOR 10 EXCHANGE
STREET-PORTLAND

ARCHITELIC
772 6022 B.V.I.
3/22/94 Hopkins
1/2" = 1'-0"

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

Location of Construction: 10 Exchange St		Owner: Joe Soley		Phone:		Permit No. 960152	
Owner Address: P.O. Box 367 Portland, ME 04112		Leasee/Buyer's Name: Mac Gray Laundry Co.		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED MAR - 8 1996 </div>	
Past Use: Retail		Proposed Use: Laundromat		COST OF WORK: \$ FIRE DEPT. E: Approved <input type="checkbox"/> Denied <input type="checkbox"/> Signature: <i>[Signature]</i>		PERMIT FEE: \$ 50.00 (Double) INSPECTION: Use Group: Type: Signature:	
Proposed Project Description: Change Use				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:			
Permit Taken By: Mary Gresik		Date Applied For: 28 February 1996					

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

PERMIT ISSUED WITH LETTER

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* ADDRESS: 04112-0367 DATE: 28 February 1996 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal

- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

Historic Preservation

- ☐ Not in District or Landmark
- ☒ Does Not Require Review
- ☒ Requires Review

Action:

- ☒ Approved
- ☐ Approved with Conditions
- ☐ Denied

Date: *[Signature]*

CEO DISTRICT 2

[Signature]

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical code and the following specification:

LOCATION: 10 Exchange St

Date 28 February 1996

Permit # 7764

OWNER J. Soley/Monopoly, Inc. ADDRESS _____

						TOTAL EACH FEE		
OUTLETS								
	Receptacles	Switches				10	.20	2.00
FIXTURES	(number of)							
	incandescent	fluorescent					.20	
	fluorescent strip						.20	
SERVICES								
	Overhead			TTL AMPS TO	800		15.00	
	Underground				800		15.00	
TEMPORARY SERV.								
	Overhead			AMPS OVER	800		25.00	
	Underground				800		25.00	
METERS	(number of)						1.00	
MOTORS	(number of)						2.00	
RESID/COM	Electric units						1.00	
HEATING	oil/gas units						5.00	
APPLIANCES	Ranges	Cook Tops	Wall Ovens				2.00	
	Water heaters	Fans	Dryers				2.00	
Disposals	Dishwasher	Compactors	Others (denote)				2.00	
MISC. (number of)	Air Cond/win						3.00	
	Air Cond/ceit						10.00	
	Signs						5.00	
	Pools						10.00	
	Alarms/res						5.00	
	Alarms/com						15.00	
	Heavy Duty						2.00	
	Outlets							
	Circus/Carnv						25.00	
	Alterations						5.00	
	Fire Repairs						15.00	
	E Lights						1.00	
	E Generators						20.00	
	Panels						4.00	
TRANSFER	0-25 Kva						5.00	
	25-200 Kva						8.00	
	Cver 200 Kva						10.00	
						TOTAL AMOUNT DUE		
						MINIMUM FEE		
						25.00		50.00

INSPECTION: Will be ready Ready or will call _____ (Double)

CONTRACTORS NAME Dick McDuffie

ADDRESS RR 2 Box 626 W. Buxton

TELEPHONE 727-3796

MASTER LICENSE No. 7764 SIGNATURE OF CONTRACTOR

LIMITED LICENSE No. _____ Dick McDuffie

Permit Number 7764
Location 10 Exchange
Owner J. S. / Monopoly
Date of Permit 2-28-96
Final Inspection 2-28-96
by Inspector S. R. C.

PROGRESS INSPECTIONS: _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____

REMARKS:

[illegible]



HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine,

9-51287

PERMIT ISSUED

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. 01 Dec 95

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

DEC - 7 1995

CITY OF PORTLAND

Location 10 Exchange St. Use of Building Office/Retail No. Stories 4 New Building Existing "

Name and address of owner of appliance Joe Soley, 10 Exchange St., Portland

Installer's name and address Scribner & Iverson, 54 Warren Ave., Portland Telephone 207-797-9441

General Description of Work

To install Rinnai & Eco-Therm Gas fired units in individual office or retail stores.

IF HEATER, OR POWER BOILER

Location of appliance by outside wall Any burnable material in floor surface or beneath? Yes

If so, how protected? Unit designed for wood floor Kind of fuel? Nat. Gas

Minimum distance to burnable material, from top of appliance or casing top of furnace 10"

From top of smoke pipe 0 From front of appliance 3 From sides or back of appliance 2"

Size of chimney flue 3" Other connections to same flue No

If gas fired, how vented? Thru wall Rated maximum demand per hour 22 MBH

Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? Yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?

Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?

Type of floor beneath burner Size of vent pipe

Location of oil storage Number and capacity of tanks

Low water shut off Make No.

Will all tanks be more than five feet from any flame? How many tanks enclosed?

Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?

If so, how protected? Height of Legs, if any

Skirting at bottom of appliance? Distance to combustible material from top of appliance?

From front of appliance From sides and back From top of smokepipe

Size of chimney flue Other connections to same flue

Is hood to be provided? If so, how vented? Forced or gravity?

If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Salvatore Rava 05512 Master Plumber

46,000-

Amount of fee enclosed? 250.00

APPROVED:

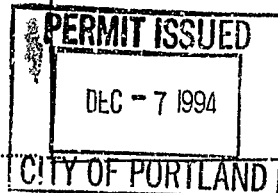
941270



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 12/5/94



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 10-24 Exchange St. Use of Building 26 dwelling units No. Stories New Building Existing "
 Name and address of owner of appliance Northbay
 Installer's name and address Scribner & Iverson, Inc. 797-9441 Telephone
 P O Box 8779 - Portland, ME 04104

General Description of Work

To install a gas furnace in 26 units. Rinnai

IF HEATER, OR POWER BOILER

Location of appliance living room Any burnable material in floor surface or beneath? yes
 If so, how protected? by the unit Kind of fuel? natural gas
 Minimum distance to burnable material, from top of appliance or casing top of furnace 8 ft
 From top of smoke pipe 8 ft From front of appliance 10 ft From sides or back of appliance 3 inc
 Size of chimney flue 2 inch Other connections to same flue no & 3 ft
 If gas fired, how vented? special vent Rated maximum demand per hour 22,000 btu
 Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes each

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
 Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
 Type of floor beneath burner Size of vent pipe
 Location of oil storage Number and capacity of tanks
 Low water shut off Make No
 Will all tanks be more than five feet from any flame? How many tanks enclosed?
 Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
 If so, how protected? Height of Legs, if any
 Starting at bottom of appliance? Distance to combustible material from top of appliance?
 From front of appliance From sides and back From top of smokepipe
 Size of chimney flue Other connections to same flue
 Is hood to be provided? If so, how vented? Forced or gravity?
 If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

cost of work: \$64,000 Mr. Salvatore Raia
 master plumber: #5512

Amount of fee enclosed? \$340

APPROVED:

Never called for inspection

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

CS 306

Signature of Installer

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY

ms Munson

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical code and the following specification:

Date May 31, 1996

LOCATION: 10 Exchange Street (MAYNARD)

Permit # 7764

OWNER Joe Soley

ADDRESS _____

						TOTAL EACH FEE		
OUTLETS								
	2	Receptacles	1	Switches	Smoke Detector		3	.20 .60
FIXTURES		(number of)						
		incandescent	2	fluorescent			2	.20 .40
		fluorescent strip						.20
SERVICES								
		Overhead			TL AMPSTO	800		15.00
		Underground				800		15.00
TEMPORARY SERV.								
		Overhead			AMPS OVER	800		25.00
		Underground				800		25.00
METERS		(number of)						1.00
MOTORS		(number of)						2.00
RESID/COM		Electric units						1.00
HEATING		oil/gas units						5.00
APPLIANCES		Ranges		Cook Tops	Wall Ovens			2.00
		Water heaters		Fans	Dryers			2.00
Disposals		Dishwasher		Compactors	Others (denote)			2.00
MISC. (number of)		Air Cond/win						3.00
		Air Cond/cent						10.00
		Signs						5.00
		Pools						10.00
		Alarms/res						5.00
		Alarms/com						15.00
		Heavy Duty						2.00
		Outlets						
		Circus/Carnv						25.00
		Alterations						5.00
		Fire Repairs						15.00
		E Lights						1.00
		E Generators						20.00
		Panels						4.00
TRANSFORMER		0-25 Kva						5.00
		25-200 Kva						8.00
		Over 200 Kva						10.00
TOTAL AMOUNT DUE								
MINIMUM FEE/COMMERCIAL 35.00						MINIMUM FEE	25.00	25.00

INSPECTION:

Will be ready _____

or will call 6/4/96

CONTRACTORS NAME Dick McDuffy

ADDRESS P. O. Box 6517, Portland 04102

TELEPHONE 828-4973 528-4977

MASTER LICENSE No. 7764

LIMITED LICENSE No. _____

SIGNATURE OF CONTRACTOR

Dick McDuffy

Permit Number 7269
Location 10 Exchange St.
Owner DESOLO
Date of Permit 5/31/96
Final Inspection 6/4/96
By Inspector [Signature]

Closing-in 6/4/96 by HWV

6/4/96 (Rough-in)

5/2/86 Told Dick Duffy, NO (BOX/AC) CABLE WILL BE
ALLOWED PER INSPECTION AND (CITY ORD.) ANY
LONGER (FUTURE)

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

Location of Construction: 10 Exchange St		Owner: Soley, Joseph		Phone:		Permit No: 260785	
Owner Address:		Leasee/Buyer's Name: Granny's Burritos 10 Exchange St Portland, ME 04101 772-6305		Business Name:		PERMIT ISSUED	
Contractor Name:		Address:		Phone:		Permit Issued: AUG - 9 1996	
Past Use: Retail		Proposed Use: Food Service		COST OF WORK: \$		PERMIT FEE: \$ 27.00	
		8 studs considered retail		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: A3 Type: 3B Signature: <i>[Signature]</i> DOCA 96	
Proposed Project Description: Change Use				PEDESTRIAN ACTIVITIES DISTRICT (I/D): Action: Approved Approved with Conditions: Denied		Zoning: B-3 CBL: 032-I-012 Zoning Approval: <i>See permit required for signs</i> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>OK 8/7/96</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input checked="" type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: Mary Gresik		Date Applied For: 07 August 1996					

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. Failure to start work may invalidate a building permit and stop all work..

Mail

Christopher Godin
24 Morning St
Portland, ME 04101

**PERMIT ISSUED
WITH LETTER**

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT *[Signature]* Christopher Godin ADDRESS: DATE: 07 August 1996 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

- ### Zoning Appeal
- ☐ Variance
 - ☐ Miscellaneous
 - ☐ Conditional Use
 - ☐ Interpretation
 - ☐ Approved
 - ☐ Denied

- ### Historic Preservation
- ☐ Not in District or Landmark
 - ☐ Does Not Require Review
 - ☐ Requires Review
- Action: *signature, subject to public review.*
- ☐ Approved
 - ☒ Approved with Conditions
 - ☐ Denied

Date: 8/7/96

[Signature]

CEO DISTRICT

2

T. Manson

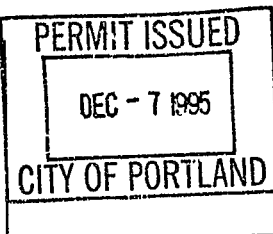


951287

FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR
HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine,



To the INSPECTOR OF BUILDINGS, PORTLAND, ME. 07 Dec 95

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 10 Exchange St. Use of Building Office/Retail No. Stories 4 New Building Existing ☒
Name and address of owner of appliance Joe Soley, 10 Exchange St., Portland
Installer's name and address Scribner & Iverson, 54 Warren Ave., Portland Telephone 207-797-9441

General Description of Work

To install Rinnai & Eco-Therm Gas fired units in individual office or retail stores.

IF HEATER, OR POWER BOILER

Location of appliance by outside wall Any burnable material in floor surface or beneath? Yes
If so, how protected? Unit designed for wood floor Kind of fuel? Nat. Gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 10"
From top of smoke pipe 0 From front of appliance 3' From sides or back of appliance 2"
Size of chimney flue 3" Other connections to same flue No
If gas fired, how vented? Thru wall Rated maximum demand per hour 22 MBH
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? Yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Salvatore Raia 05512 Master Plumber

46,000-

Amount of fee enclosed? 250.00

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

CS 300

Signature of Installer

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY

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

Location of Construction: 10 Exchange St		Owner: Soley, Joseph		Phone:		Permit No: 960439
Owner Address: P.O. Box 367 Portland, ME 04112		Lease/Buyer's Name:		Phone:		
Contractor Name:		Address:		Phone:		PERMIT ISSUED MAY 22 1996 CITY OF PORTLAND Zone: CBL: 032-I-012 Zoning Approval: <i>OK 5/16/96</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input checked="" type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Past Use: Retail		Proposed Use: Same		COST OF WORK: \$ 450.00		
				PERMIT FEE: \$ 25.00		
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		
Proposed Project Description: Interior Renovations				INSPECTION: Use Group: Type:		
				Signature: <i>[Signature]</i>		
				Signature:		
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		
				Action: <input type="checkbox"/> Approved		
				<input type="checkbox"/> Approved with Conditions:		
				<input type="checkbox"/> Denied		
				Signature: <i>[Signature]</i>		
				Date: <i>[Signature]</i>		
Permit Taken By: Mazy Gresik		Date Applied For: 14 May 1996				

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

**PERMIT ISSUED
WITH LETTER**

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* Joseph Soley ADDRESS: R 367.04112-0367 DATE: 14 May 1996 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.R.W. Pink-Public File Ivory Card-Inspector

Action: *522 P.A.D.*
☐ Approved
☒ Approved with Conditions
☐ Denied
Date: *5/15/96*
[Signature]
CEO DISTRICT **2**
T. Munson

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

DECEMBER 10, 1996

SOLEY JOSEPH L
PO BOX 367
PORTLAND ME 04112

Re: 10 EXCHANGE ST
CBL: 032- - I-012-001-01
DU: 1

Dear Mr. Soley:

We recently received a complaint, and an inspection was made at the above-referenced address. As a result of the inspection, you are hereby notified to correct the following substandard housing conditions:

- | | |
|--|--------|
| 1. INT - 3RD FLR - APT #306 - FRONT DOOR | 108.20 |
| SELF-CLOSING DEVICE IS INOPERATIVE | |
| 2. INT - HALLS | 113.30 |
| SOME LIGHTS ARE OUT | |

The above-mentioned conditions are in violation of Article V of the Municipal Code of the City of Portland, Maine, and must be corrected within thirty (30) days. Failure to comply with this order may result in a complaint being filed for prosecution in District Court.

Sincerely,

A handwritten signature in dark ink, appearing to read "Arthur Rowe".

Arthur Rowe
Code Enforcement Officer

A handwritten signature in dark ink, appearing to read "Tammy Munson".

Tammy Munson
Code Enfc. Offr./ Field Supv.



CITY OF PORTLAND
Planning and Urban Development Department

MEMORANDUM

TO: P Samuel Hoffses, Ch/Bldg/Insp

DATE: December 24, 1996

FROM: Arthur Rowe, C E O *AR*

RE: 10 Exchange St (Joseph Soley)

The current number of units in this building is as follows:

Fourth Floor - 13 apartments

Third Floor - 14 apartments

Second Floor - 14 offices

First Floor - commercial shops

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

Location of Construction: 10 Exchange St		Owner: Joe Soley		Phone:		Permit No: 960152	
Owner Address: P.O. Box 367 Ftld, ME 04112		Leasee/Buyer's Name: Mac Gray Laundry Co.		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED MAR - 8 1996 </div>	
Past Use: Retail		Proposed Use: Laundromat		COST OF WORK: \$		PERMIT FEE: \$ 50.00 (Double)	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: Change Use		Signature: <i>[Signature]</i>		Signature:		Zone: CB CBL: 022-1-012 Zoning Approval:	
Permit Taken By: Mary Gralik		Date Applied For: 28 February 1996		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input checked="" type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm	
				Signature:		Date:	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

**PERMIT ISSUED
WITH LETTER**

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT **Joseph Soley** ADDRESS: DATE: **28 February 1996** PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT *[Signature]*
MS MURPHY

COMMENTS

April - Plumbing installed improperly - not vented -
no fire ratings maintained

June - Plumbing fixed - gas vented to outside -
walls sheetrocked w/ 5/8 fire rated rock.

OK Above

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 8, 1996

Mac Gray Laundry, Company
P. O. Box 367
Portland, Maine 04112

RE: 10 Exchange Street

Dear Sir,

Your application to change the use from retail sales to laundromat has been reviewed and a permit is herewith issued subject to the requirements listed below. This permit does not excuse the applicant from meeting applicable State and Federal laws.

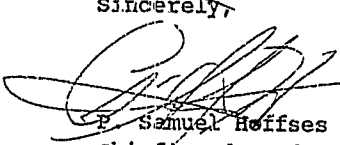
No Certificate of Occupancy will be issued until all requirements of this letter are met.

Building and Fire Code Requirements

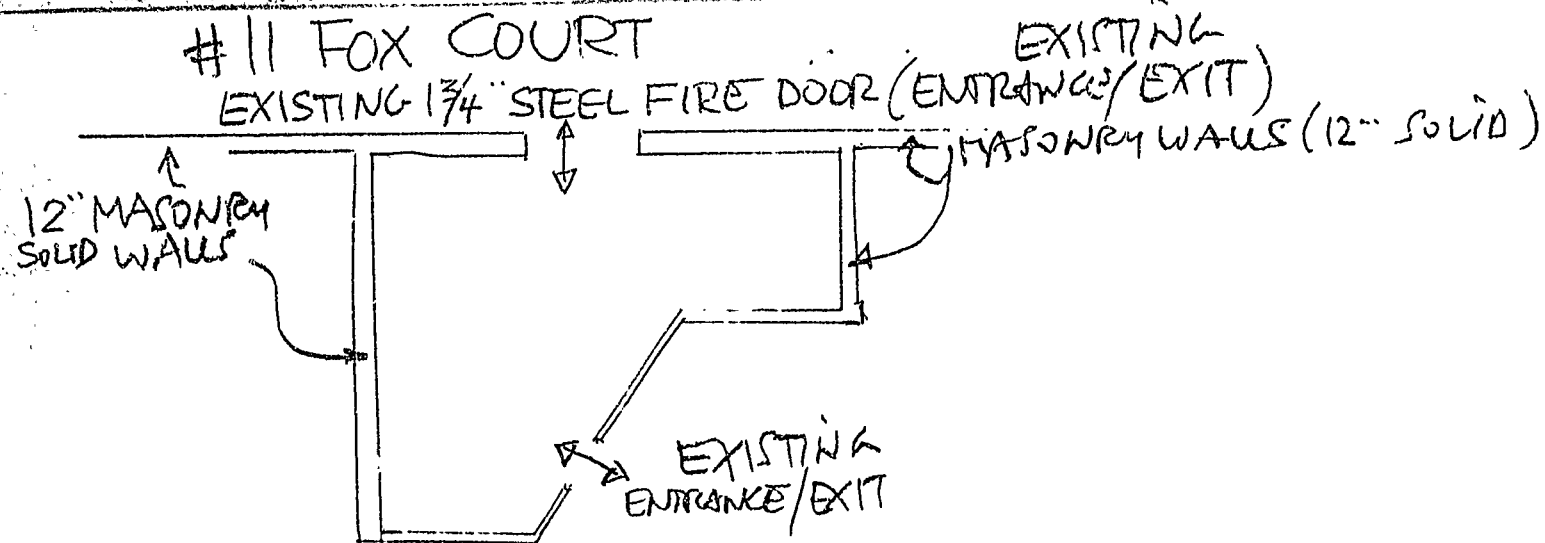
1. This permit is being issued with the understanding that the laundromat has a one hour and automatic fire suppression system.
2. The fire suppression system shall be maintained to NFPA standards.

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

Sincerely,


P. Samuel Hoffses
Chief, Code Enforcement Division

cc: Lt. McDougall, PFD



10 EXCHANGE STREET

CHANGE ONLY FROM
T-SHIRT RETAIL TO LAUNDRY RETAIL
UNDER PRESENT PERMITTED USES.

NO PHYSICAL CHANGE
IN SPACE WHATSOEVER
250# (A LITTLE LESS)

2/27/84

John P. PWS
MONOPOLY, INC.
PO BOX 367 DTS
PRIN ME 04112

#11 FOX COURT

EXISTING 1 3/4" STEEL FIRE DOOR (ENTRANCE/EXIT)

EXISTING

12" MASONRY
SOLID WALLS

MASONRY WALLS (12" SOLID)

EXISTING
ENTRANCE/EXIT

10 EXCHANGE STREET

CHANGE ONLY FROM

T-SHIRT RETAIL TO LAUNDRY RETAIL
UNDER PRESENT PERMITTED USES.

☒ NO PHYSICAL CHANGE

IN SPACE WHATSOEVER
250# (A LITTLE LESS)

2/27/86

PRO
MONROVIA, INC
PO BOX 367 DTS
PRIN ME 04112

BUILDING PERMIT REPORT

DATE _____
ADDRESS _____
REASON FOR PERMIT _____
BUILDING OWNER _____
CONTRACTOR _____
PERMIT APPLICANT _____
APPROVED _____
DENIED _____

3/4/96

10 Exchange St

change of use

Joe Soly

Joe Soly

CONDITIONS OF APPROVAL OR DENIAL:

- 1) Portable Fire extinguishers shall be provided in accordance w/ NFPA 70
- 2) Commercial Dryers shall be installed in accordance w/ NFPA 54
- 3) The sprinkler system shall be maintained to NFPA 13 standards
- 4) The Fire alarm system shall be maintained to NFPA 72 standards

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-871

Location of Construction: 10 Exchange St		Owner: Soley, Joseph		Phone:		Permit No: 96048	
Owner Address: P.O. Box 367 Portland, ME 04112		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		PERMIT ISSUED Permit Issued: MAY 22 1996	
Past Use: Retail Vacant		Proposed Use: Bar Retail		COST OF WORK: \$ 450.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		PERMIT FEE: \$ 25.00 INSPECTION: Use Group: Type:	
Proposed Project Description: Interior Renovations		Signature: [Signature]		Signature:		Zone: B-3 CBL: 032-1-012 Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm	
Permit Taken By: Mary Gralik		Date Applied For: 14 May 1996		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: [Signature] Date: [Date]		Zoning Appeal: <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

**PERMIT ISSUED
WITH LETTER**

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT **MONOPOLY Inc** **B-367.04112 0367** DATE: **14 May 1996** PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT **2**

T. MINSKY

COMMENTS

7/24/96 - Appears to be done per plans - Space appears to be smaller than 10×16 - approx 10×12 or 8×10 .

OK to occupy

1 sprinkler head in space.

Inspection Record

Type	Date
Foundation: _____	_____
Framing: <u>N/A</u>	_____
Plumbing: _____	_____
Final: <u>OK</u>	<u>7/24/96</u>
Other: _____	_____



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 10 Exchange St (032-1-002)

Issued to Joseph Soley/Monopoly, Inc.

Date of Issue 26 July 1996

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. 960433, 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

First Floor
Right/Middle

Retail

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

(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.

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

May 21, 1996

Mr. Joseph Soley
P. O. Box 367
Portland, Maine 04112

RE: 10 Exchange Street

Dear Joe,

Your application to erect a 10' x 16' retail space has been reviewed and a permit is herewith issued subject to the requirements listed below. This permit does not excuse the applicant from meeting applicable State and Federal laws.

No Certificate of Occupancy will be issued until all requirements of this letter are met.

Building and Fire Code Requirements

1. This permit is being issued with the understanding that the newly created laundry mat at this address be enclosed with a minimum of a one hour separation from the rest of the tenant spaces.
2. The sprinkler system shall be maintained to NFPA 13 Standards.
3. A portable fire extinguisher shall be located as per NFPA 10. They shall bear the label of an approved agency and be of an approved type.

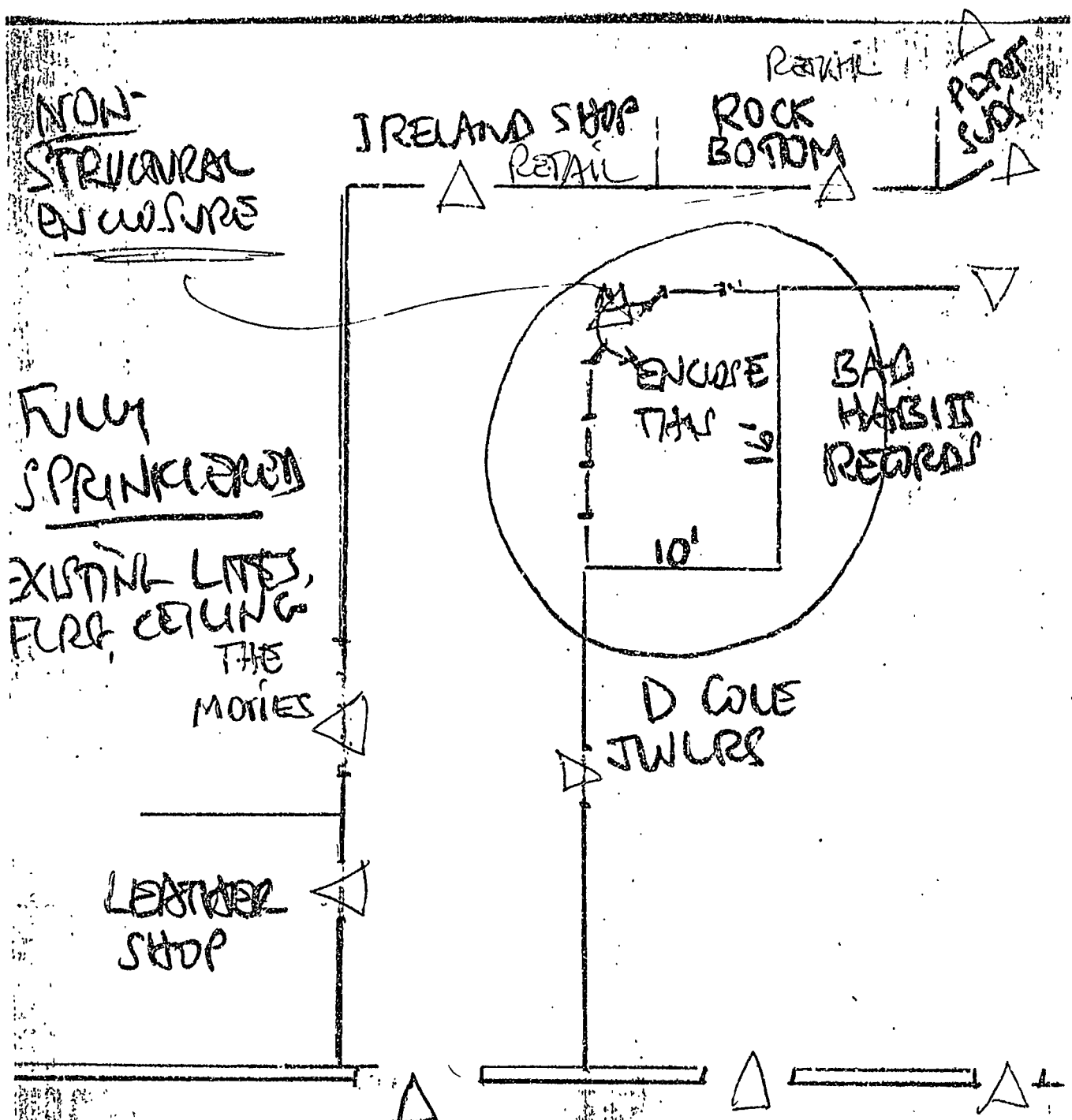
If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

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

P. Samuel Hoffses
Chief, Code Enforcement Division

cc: Lt. McDougall, PFD



NON-
STRUCTURAL
ENCLOSURE

FULL
SPRINKLER

EXISTING LINES,
FLOOR, CEILING
THE
MOVIES

LEATHER
SHOP

IRELAND SHOP
RETAIL

ROCK
BOTTOM

PORT
SUB

ENCLOSURE
16'
10'

BAD
HABIT
RETAIL

D COW
JULUS

ENTRANCE
10 EXCHANGE STREET
OLD PORT, PORTLAND ME 04101

INSTALL 6 2x4-16'0"
W/GUARD OR PLYWOOD (6)
PANELS & SINGLE DOOR ON X
APPROX 3'0"± WIDTH

04120107
MONOFLOW
5/10/96
SCALE 1"=10'

NON-
STRUCTURAL
ENCLOSURE

FULL
SPRINKLERED

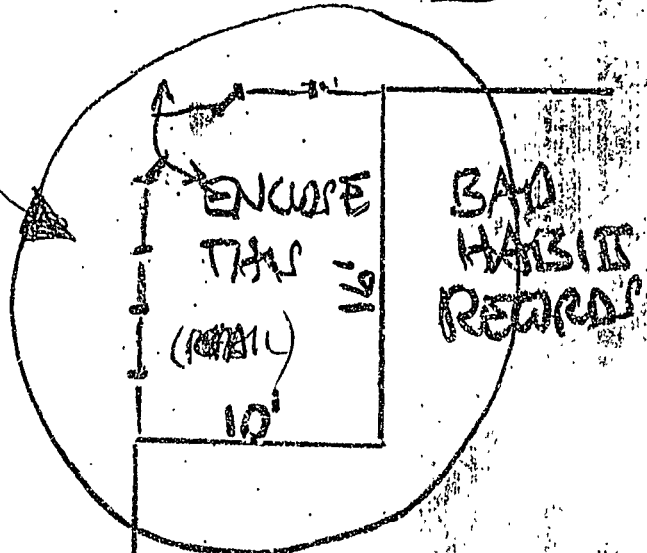
EXISTING LINES,
FLOOR CEILING
THE
MOVIES

LEATHER
SHOP

IRELAND SHOP

ROCK
BOTTOM

PORT
SIDE



D COLE
TOWERS

ENTRANCES

10 EXCHANGE STREET

OLD PORT, PORTLAND ME 04101

INSTALL 6 2x4-16'0"

W/GLASS OR PLYWOOD (6)

PANELS & SINGLE DOOR ON X

APPROX 3'0"± WIDTH

04112-0367

MONROVIA, CA

5/10/96

SCALE 1"=10'

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8711

Location of Construction: 10 Exchange St		Owner: Saley, Joseph		Phone:		Permit No: 960785	
Owner Address:		Leasee/Buyer's Name: Granwy's Barrios 10 Exchange St Pold,		Phone:		Business Name: ME 04101 772-6305	
Contractor Name:		Address:		Phone:		Christopher Godin	
Past Use: Retail		Proposed Use: Food Service		COST OF WORK: \$		PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTIO. Use Group A3 Type: 38	
		3 Sins cons done retail		Signature: 11-23-7		Signature: COCA 467	
Proposed Project Description: Change Use				PEDESTRIAN ACTIVITIES DISTRICT (A3) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____			
Permit Taken By: Mary Gresh		Date Applied For: 07 August 1996					

PERMIT ISSUED

AUG - 9 1996

CITY OF PORTLAND

Zone:	CBL: 032-1-012
Zoning Approval: Sup. Permit for 1st	
Special Zone or Reviews	
<input type="checkbox"/> Shoreland	
<input type="checkbox"/> Wetland	
<input type="checkbox"/> Flood Zone	
<input type="checkbox"/> Subdivision	
<input type="checkbox"/> Site Plan <input checked="" type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm	

Zoning Appeal	
<input type="checkbox"/> Variance	
<input type="checkbox"/> Miscellaneous	
<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Interpretation	
<input type="checkbox"/> Approved	
<input type="checkbox"/> Denied	

Historic Preservation	
<input type="checkbox"/> Not in District or Landmark	
<input type="checkbox"/> Does Not Require Review	
<input checked="" type="checkbox"/> Requires Review	

Action:	
<input type="checkbox"/> Approved	
<input checked="" type="checkbox"/> Approved with Conditions	
<input type="checkbox"/> Denied	

Date:	07/11/96
-------	-----------------

CEO DISTRICT

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Christopher Godin
24 Morning St
Portland, ME 04101

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT **Christopher Godin** ADDRESS: _____ DATE: **07 August 1996** PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED WITH LETTER

COMMENTS

8/15/96- Initial walk thru - need to add plumbing + food service equip.

OK Anne

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

August 8, 1996

Mr. Christopher Godin
24 Morning St.
Portland, Me. 04101

RE: 10 Exchange St.

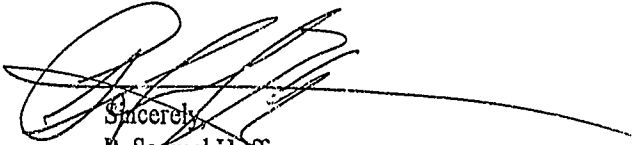
Dear Sir

Your application to change the use from retail to food service has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not excuse the applicant from meeting applicable State and Federal laws.

NO CERTIFICATE OF OCCUPANCY WILL BE ISSUED UNTIL ALL REQUIREMENTS OF THIS LETTER ARE MET.

Building and Fire Code Requirements

1. The sprinkler system shall be maintained to NFPA # 13 standards.
2. Portable fire extinguishers shall be provided in accordance with NFPA # 10.
3. All devices used in connection with food preparation shall be of approved type and shall be installed in an approved manner.
4. Equipment utilizing gas and related gas piping shall be installed in accordance with NFPA # 54.
5. Sep. permits will be required for signage.
6. Any exterior alterations, including signage, are subject to a separate review.


Sincerely,
P. Samuel Hoffses
Chief of Inspection Services

cc: M. Schmuckal
D. Andrews
Lt. McDougall

40"x8" window

4"x8" window

2 small windows
3"x5"

Sinks

Counter

Hand
Sink

Linoleum Floor

Counter

2 Door
Reach
In

1 Door
Reach
In

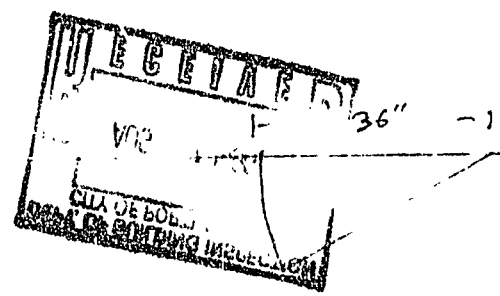
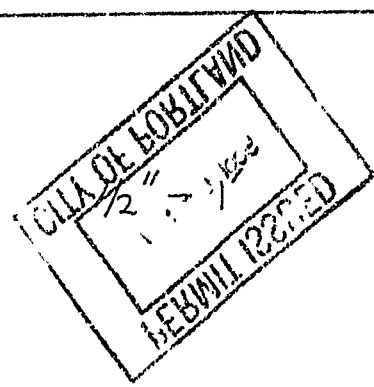
4
Burner
stove

Sandwich
Unit

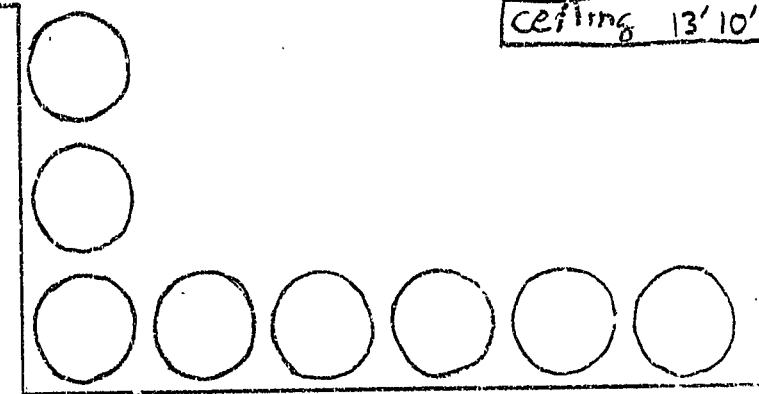
4"x8" Wall

Carpeted

ceiling 13'10"



counter



seating

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

Location of Construction: 10 Exchange St		Owner: Soley, Joseph		Phone:		Permit No: 970083 PERMIT ISSUED Permit Issued: FEB - 4 1997 CITY OF PORTLAND	
Owner Address: P.O. Box 367 Ptd, ME 04112		Leasee/Buyer's Name:		Phone:			Zoning: B-3 CBL: 032-I-012 Zoning Approval: OK 1/31/97 Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input checked="" type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Contractor Name:		Address:		Phone:			
Past Use: Retail		Proposed Use: Same		COST OF WORK: \$ 120.00 PERMIT FEE: \$ 25.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: M Type: 30 Signature: <i>[Signature]</i> Signature: <i>[Signature]</i> PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Approved with Conditions: <input type="checkbox"/> Signature: _____ Date: _____			
Proposed Project Description: Interior removal of 200 brick Street Level							
Permit Taken By: Mary Gresik		Date Applied For: 27 January 1997					

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
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CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT *[Signature]* **Joseph Soley** ADDRESS: _____ DATE: **27 January 1997** PHONE: _____
 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal
☐ Variance
☐ Miscellaneous
☐ Conditional Use
☐ Interpretation
☐ Approved
☐ Denied
Historic Preservation
☐ Not in District or Landmark
☐ Does Not Require Review
☒ Requires Review
 Action: *Any exterior alteration including signage, subject to separate review.*
☐ Approved ☐ Approved with Conditions ☐ Denied
 Date: **1/28/97**
[Signature]
CEO DISTRICT **2**
A. Rowe

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical code and the following specification:

Date 27 August 1996

Permit # 7764

LOCATION: 10 Exchange St

OWNER, Soley, Joseph

ADDRESS

Granny Burrito

TOTAL EACH FEE

OUTLETS					TOTAL EACH FEE		
	Receptacles		Switches				
FIXTURES	(number of)			Smoke Detector			.20
	incandescent		fluorescent				.20
	fluorescent strip						.20
SERVICES							
	Overhead			TTL AMPSTO	800		15.00
	Underground				800		15.00
TEMPORARY SERV.							
	Overhead			AMPS OVER	800		25.00
	Underground				800		25.00
METERS	(number of)						1.00
MOTORS	(number of)						2.00
RESID/COM	Electric units						1.00
HEATING	oil/gas units						5.00
APPLIANCES	Ranges		Cook Tops	Wall Ovens			2.00
	Water heaters	1	Fans	Dryers		1	2.00
Disposals	Dishwasher		Compactors	Others (denote)			2.00
MISC. (number of)	Air Cond/win						3.00
	Air Cond/cent						10.00
	Signs						5.00
	Pools						10.00
	Alarms/res						5.00
	Alarms/com						15.00
	Heavy Duty						2.00
	Outlets						
	Circus/Carnv						25.00
	Alterations						5.00
	Fire Repairs						15.00
	E Lights						1.00
	E Generators						20.00
	Panels						4.00
TRANSFORMER	0-25 Kva						5.00
	25-200 Kva						8.00
	Over 200 Kva						10.00
				TOTAL AMOUNT DUE			
	MINIMUM FEE/COMMERCIAL 35.00			MINIMUM FEE			25.00
INSPECTION							25.00

INSPECTION:

Will be ready XXXXXXXXXXXX

or will call

CONTRACTORS NAME

Dick McDuffie

ADDRESS

P.O. Box 6517 Portland 04102

TELEPHONE

828-4972

MASTER LICENSE No.

7764

SIGNATURE OF CONTRACTOR

LIMITED LICENSE No.

Dist 1200/ma

ELECTRICAL INSTALLATIONS

Permit Number _____

Location _____

Owner _____

Date of Permit _____

Final Inspection 10/11/96

By Inspector Philip E. [Signature]

INSPECTION: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS:

10/17/96 (Ernst)

DATE:

REMARKS:

[illegible]

8 Exchange Street
lower level

December 18, 1978

Exchange Assoc. Trust
24 Exchange Street
Portland, Maine

cc: Fire Department

Gentlemen:

A permit is issued herewith to make alterations to lower level of building, as per plans, subject to the following Fire Department and Building Code requirements.

A commercial automatic sprinkler system shall be installed to protect the entire basement of all connected or inter-connected basement areas.

Section 1204.9 of the BOCA Building Code requires that the entire building be protected with an automatic sprinkler system.

The existing alarm system shall be extended to the newly occupied areas.

All required exit signs and emergency lights shall be extended to include any and all new areas.

Very truly yours,

Earle S. Smith
Building Inspection Supervisor

ESS/r