APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

1/20/87 Dk

Date April 11, 1986

Receipt and Permit number D26444

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: One City Center 3rd

OWNER'S NAME: Perfect Touch ADDRESS:

	FEES
OUTLETS:	
Receptacles 18 Switches 5 Plugmold ____ ft. TOTAL 1-30	3.00
FIXTURES: (number of)	
Incandescent 37 Flourescent 1 (not strip) TOTAL 38	5.80
Strip Flourescent ____ ft.	
SERVICES:	
Overhead x Underground ____ Temporary ____ TOTAL amperes 60	3.00
METERS: (number of) 1	.50
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 x Over 20 kws ____	5.00
APPLIANCES: (number of)	
Ranges ____ Water Heaters 1	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans 1 Others (denote) ____	
TOTAL 2	3.00
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
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 1	5.00
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under 1	1.00
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires ____	
Repairs after fire ____	
Emergency Lights, battery 1	.50
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:	29.80

INSPECTION:

Will be ready on April 11, 1986; or Will Call ____

CONTRACTOR'S NAME: E. S. Boulos Co.

ADDRESS: 40 Circus Time Rd., S.P. 04106

TEL.: 772-3706

MASTER LICENSE NO.: 3291

LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: [signature] E.S. Boulos Co.

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 86 4646

Location 1 Bit Butte

Owner Gaston & Drick

Date of Permit 4-11-86

Final Inspection

By Inspector

Permit Application Register Page No. 116

INSPECTIONS: Service 60 Amp by Russ

Service called in

Closing-in 4/14/87 hw

PROGRESS INSPECTIONS:

4-14-86

1/20/87

DATE:	REMARKS:

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

1/20/87 DR

Date July 24, 1986

Receipt and Permit number U 24352

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: 1 City Center

OWNER'S NAME: Parrots ADDRESS: 2nd Floor

	FEES
OUTLETS:	
Receptacles 12 Switches 4 Plugmold ____ ft. TOTAL 16	3.00
FIXTURES: (number of)	
Incandescent 80 Flourescent 15 (not strip) TOTAL 95	11.50
Strip Flourescent ____ ft.	
SERVICES:	
Overhead 1 Underground ____ Temporary ____ TOTAL amperes 100	3.00
METERS: (number of) 1	.50
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 3 Over 20 kws ____	5.00
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
Air Conditioners Central Unit 1	5.00
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 2	1.00
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:	32.00

INSPECTION:

Will be ready on ____, 19__; or Will Call XX

CONTRACTOR'S NAME: E. S. Boulos Co.

ADDRESS: 40 Circus Time Road, South Portland

TEL.: 772-3705

MASTER LICENSE NO.: 3291

LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: Albert Hodgkins E.S.B. Co.

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS—

Permit Number 24352

Location Alecity Center

Owner Partoots

Date of Permit 7/24/86

Final Inspection 1/20/87

By Inspector D. R. Russo

Permit Application Register Page No. 116

INSPECTIONS: Service 100 Amp by D.R.R

8/8/86 Service called in to CMP. 11:00 AM

Closing-in 8.5.86 by Russo

PROGRESS INSPECTIONS: 8/5/86 / /

8/8/86 / /

1/20/87 / /

/ /

/ /

/ /

DATE	REMARKS:
8/8/86	Rough-in & Service Completed.
1/20/87	Final for C of O.

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

2/25/87 DK

Date Jan. 22, 19 87

Receipt and Permit number D 09950

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: 1 City Center - 4th floor

OWNER'S NAME: Fisher Group ADDRESS: Troy, N. Y.

	FEES
OUTLETS:	
Receptacles 29 Switches 9 Plugmold ~~x38x~~ TOTAL 38	5.00
FIXTURES: (number of)	
Incandescent ~~x~~ Flourescent 38 (not strip) TOTAL 38	4.80
Strip Flourescent ____ ft.	
SERVICES:	
Overhead x Underground ____ Temporary ____ TOTAL amperes 60	3.00
METERS: (number of) 1	
MOTORS: (number of)	.50
Fractional ____	
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels 1	
Transformers 1	1.00
Air Conditioners Central Unit ____	2.00
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:	~~xx~~ 16.30

INSPECTION:

Will be ready on ____, 19__; or Will Call xx

CONTRACTOR'S NAME: ~~Aladdin Elec~~

ADDRESS: ~~631 FOrest Ave.~~

TEL.: ~~773-2296~~

MASTER LICENSE NO.: ~~3295~~

LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: Wayne Clewes

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS —

Permit Number 09450

Location 1 City Center

Owner Fraker Group

Date of Permit 1/22/87

Final Inspection 2/25/87

By Inspector [illegible]

Permit Application Register Page No. 137

INSPECTIONS: Service 60 amp 2/12/87 by Russo

Service called in

Closing-in 1/27/87 by Russo

PROGRESS INSPECTIONS: 1/27/87 / /

2/12/87 / /

2/25/87 / /

/ / /

/ / /

/ / /

DATE:	REMARKS:
1/27/87	walls may be closed in offices
2/25/87	Completed for C. of O.

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

CODE COMPLIANCE COMPLETED 2/25/87 DK

Date Jan. 22 1987

Receipt and Permit number D 09951

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: 1 City Center - 4th Floor

OWNER'S NAME: Maine Mortgage ADDRESS: same

	FEES
OUTLETS: Receptacles ___ Switches ___ Plugmold ___ ft TOTAL 25	3.00
FIXTURES: (number of) Incandescent ___ Flourescent 11 (not strip) TOTAL ___	3.10
Strip Flourescent ___ ft.	
SERVICES: Overhead ___ Underground ___ Temporary ___ TOTAL amperes 60	3.00
METERS: (number of) 1	.50
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)	1.00
Branch Panels 1	2.00
Transformers 1	
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:	12.60

INSPECTION:

Will be ready on ___, 19__; or Will Call xx

CONTRACTOR'S NAME: Aladdin Elec

ADDRESS: 631 Forest Ave

TEL.: 773-2296

MASTER LICENSE NO.: 3295

LIMITED LICENSE NO.: ___

SIGNATURE OF CONTRACTOR: Wayne Clowes

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 09951

Location [illegible]

Owner [illegible]

Date of Permit 1/24/87

Final Inspection 2/25/87

By Inspector [illegible]

Permit Application Register Page No. 137

INSPECTIONS: Service 60 Amp / by [illegible]

Service called in 2/6/87

Closing-in 1/21/87 by [illegible]

PROGRESS INSPECTIONS: 1/21/87 / /

1/27/87 / /

2/25/87 / /

/ /

/ /

/ /

DATE:	REMARKS:
1/21/87	Panel cannot be located in the
	Clothes Closet.
2/25/87	Completed for C of O.

0321

PERMIT # ..... BUILDING PERMIT APPLICATION **Portland** 4-2-87 Previous permit # .....

APPLICANT FILL OUT I - XVIII AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION

Location/address of construction 1 City Center (8th Fl)

Owner or lessees name Burton Fisher

Address 8th Floor - 1 City Center 04101 Tel. 775-3155

Contractors name Tyler Construction

Address 1 City Center 8th Fl 04101 Tel 775-3155

Subcontractors:

PERMIT ISSUED

APR 13 1987

City Of Portland

II. NEW SUBDIVISION OR EXISTING LOT REFERENCE

Name

Lot

Block

Bk. & pg. Reg./deeds

Date recorded

III. PROPOSED USE: CODE: if other* explain 3240 - Offices Seasonal Condominium Apartment

IV. PAST USE: vacant space

V. OWNERSHIP: PUBLIC (Federal/State/local government) PRIVATE (individual/corp/non-profit) X

VI. DESCRIPTION OF WORK: Change of Use from vacant space to offices, as per plans.

ISSUE PERMIT TO CONTRACTOR

VII. BUILDING DIMENSIONS: length ____ width ____ square footage ____ height ____ #stories ____

VIII. EST. CONSTRUCTION COST: $46,000.00

IX. TOT. SQ. FT. OF LAND ____ BUILDING ____

X. RESIDENTIAL BUILDINGS ONLY: # BEDROOMS

NEW DWELLING UNITS WITH 1 BDRM 2 BDRMS 3 BDRMS

EXISTING DWELLING UNITS WITH

XI. RESIDENTIAL UNITS:

NEW DWELLINGS

EXISTING DWELLINGS

NET RESIDENTIAL UNITS

XII. SIGNATURE OF APPLICANT DATE 4/2/87

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:

DISTRICT ____ STREET FRONTAGE ____

SETBACKS: front ____ back ____ side ____ side ____

ZONING BOARD APPROVAL: no ☐ yes ☐ (date)

PLANNING BOARD APPROVAL: no ☐ yes ☐ (date)

XIV. OFFICE USE:

TAX MAP #

LOT #

VALUE/STRUCTURE

PERMIT EXPIRATION

XV. CONDITIONAL USE: variance ____ site plan ____ subdivision ____ shore and floodplain mgmt ____ special exception ____ other ____ (explain) ....

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) ..... DATE .....

XVII. FEES:

base fee .....

subdivision fee .....

site plan review fee .....

other fees .....

late fee .....

TOTAL ....227.50.....

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:

1. WATER SUPPLY ☐ public ☐ private
2. SEWER ☐ public ☐ private, type
3. HEAT type fuel
4. FOUNDATION type thickness footing
5. ROOF type pitch covering load
6. PLUMBING # tubs # showers # lavatories # laundry tubs # flushes # other

SPRINKLER SYSTEM? ☐ yes ☐ no

7. ELECTRICAL service entrance size # smoke detectors

NUMBER OF OFF-STREET PARKING SPACES: enclosed outdoors

8. CHIMNEY # flues #fireplaces material
9. FRAMING: floor joists size max. on centers

ceiling joists

rafters

studs

wall studs

10. If 1-story building w/ masonry walls wall thickness height
11. BEDROOM WINDOWS height width sill height egress window? ☐ yes ☐ no

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office
Green - Applicant
Yellow - CEO
Pink - Tax Assessor
Gold - DPLOG

0355 April 15, 1987

PERMIT # ..... BUILDING PERMIT APPLICATION **Portland** Previous permit # .....

APPLICANT FILL OUT I - XVIII AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION

Location/address of construction 1 City Center - 1st floor

Owner or lessee's name Tyler Const. Troy Tyler ~~Rafferty & Moore~~ Tel

Address Lessee - Jerry LaJoy

Contractor's name Tyler Construction Tel 775-3155

Address 4th floor - 1 City Center

Subcontractors:

PERMIT ISSUED APR 16 1987 City Of Portland

II. NEW SUBDIVISION OR EXISTING LOT REFERENCE

Name

Lot

Block

Bk. & pg. Reg./ deeds

Date recorded

CODE: If other, explain: Seasonal Condominium Apartment

III. PROPOSED USE: 228 - baking & sale of muffins

IV. PAST USE: vacant

V. OWNERSHIP: PUBLIC (Federal/State/local government) ind PRIVATE (individual/corp/nonprofit)

VI. DESCRIPTION OF WORK:

Change of use from vacant to muffin shop (bake and sale of) alterations, no structural changes. as per plans. 5 sheets of plans.

VII. BUILDING DIMENSIONS: length width square footage height #stories

VIII. EST. CONSTRUCTION COST: 20,000.00 IX. GR. SQ. FT. OF LAND BUILDING

X. RESIDENTIAL BUILDINGS ONLY: # BEDROOMS 1 BDRM 2 BDRMS 3 BDRMS

NEW DWELLING UNITS WITH

EXISTING DWELLING UNITS WITH

XI. # RESIDENTIAL UNITS:

NEW DWELLINGS

EXISTING DWELLINGS

NET RESIDENTIAL UNITS

XII. SIGNATURE OF APPLICANT [signature] DATE 4-15-87

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:

DISTRICT STREET FRONTAGE

SETBACKS: front back side side

ZONING BOARD APPROVAL: no ☐ yes ☐ (date)

PLANNING BOARD APPROVAL: no ☐ yes ☐ (date)

XIV. OFFICE USE:

TAX MAP #

LOT #

VALUE/STRUCTURE

PERMIT EXPIRATION

XV. CONDITIONAL USE: variance site plan subdivision shore and floodplain mgmt special exception other (explain)

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) DATE

XVII. FEES:

base fee

subdivision fee

site plan review fee

other fees 120.00

ch of use 25.00

late fee

TOTAL 145.00

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:

1. WATER SUPPLY ☒ public ☐ private
2. SEWER ☐ public ☒ private, type
3. HEAT type fuel
4. FOUNDATION type
   thickness footing
5. ROOF type pitch
   covering load
6. PLUMBING # tubs # showers
   # lavatories # laundry tubs
   # flushes # other
   SPRINKLER SYSTEM? ☐ yes ☐ no
7. ELECTRICAL service entrance size
   # smoke detectors

NUMBER OF OFF-STREET PARKING SPACES:
enclosed outdoors

8. CHIMNEY # flues #fireplaces
   material
9. FRAMING floor joists
   size max. on centers
   ceiling joists
   rafters
   studs
   wall studs
10. If 1-story building w/ max. 8' walls
    wall thickness
11. BEDROOM WINDOWS
    height width sill height
    egress window? ☐ yes ☐ no

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office

Yellow - CEO

Pink - Tax Assessor

Gold - GPCOG

10

B 1358

PERMIT # ..... BUILDING PERMIT APPLICATION **Portland** April 15, 1987

Previous permit #. .....

APPLICANT FILL OUT I - XVIII AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION

Location/address of construction 1 City Center - 2nd floor

Owner or lessees name Tim Swan- Swans, Jewelry

Address same Tel

Owner of bldg. - Fisher Gropp - Troy, NH. Y.

Contractor's name Tyler Construction

Address 4th floor - 1 City center Tel 775-3155

Subcontractors:

PERMIT ISSUED

APR 17 1987

City of Portland

II. NEW SUBDIVISION OR EXISTING LOT REFERENCE

Name

Lot

Block

Bk. & pg. Reg./ deeds

Date recorded

III. PROPOSED USE: CODE 327- retail (If other*: explain) Seasonal Condominium Apartment

IV. PAST USE: vacant

V. OWNERSHIP: PUBLIC (Federal/ State/ local government) ind PRIVATE (individual/corp/nonprofit)

VI. DESCRIPTION OF WORK:

Change of use from vacant to retail jewelry with alterations, no structural changes as per plans. 4 sheets of plans.

VII. BUILDING DIMENSIONS: length width square footage height #stories

VIII. EST. CONSTRUCTION COST: 50,000 **IX. GR. SQ. FT. OF LAND** BUILDING

X. RESIDENTIAL BUILDINGS ONLY: 1 BEDROOMS 1 BDRM 2 BDRMS 3 BDRMS

* NEW DWELLING UNITS WITH
* EXISTING DWELLING UNITS WITH

XI. # RESIDENTIAL UNITS:

* NEW DWELLINGS
* EXISTING DWELLINGS
NET RESIDENTIAL UNITS

XII. SIGNATURE OF APPLICANT DATE

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:

DISTRICT STREET FRONTAGE

SETBACKS: front back side side

ZONING BOARD APPROVAL: no ☐ yes ☐ (date)

PLANNING BOARD APPROVAL: no ☐ yes ☐ (date)

XIV. OFFICE USE:

TAX MAP #

LOT #

VALUE/STRUCTURE

PERMIT EXPIRATION

XV. CONDITIONAL USE: variance site plan subdivision shore and floodplain mgmt special exception other (explain)

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) DATE

XVII. FEES:

base fee

subdivision fee

site plan review fee

other fees: change use 25.00; 270.00

late fee

TOTAL 295.00

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:

1 WATER SUPPLY ☐ public ☐ private

2 SEWER ☐ public ☐ private, type

3. HEAT type fuel

4 FOUNDATION type thickness footing

5. ROOF type pitch covering load

6. PLUMBING * tubs * showers * lavatories * laundry tubs * flushes * other

SPRINKLER SYSTEM? ☐ yes ☐ no

7. ELECTRICAL service entrance size * smoke detectors

NUMBER OF OFF-STREET PARKING SPACES: enclosed outdoors

8 CHIMNEY * flues * fireplaces material

9 FRAMING floor joists size max on centers

ceiling joists

rafters

studs

wall studs

10 If 1-story building w/ masonry walls. wall thickness height

11. BEDROOM WINDOWS height width sill height

egress window? ☐ yes ☐ no

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office

Yellow - CEO

Pink - Tax Assessor

Gold - GPCOG

10

CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 1 City Center

Issued to The Fisher Group, Date of Issue January 23, 1986

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. 83-713, 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
entire	parking garage

Limiting Conditions:

This certificate supersedes certificate issued 11/8/85

Approved:

1/23/86 (Date) Kathleen A. Taylor Inspector

James P. Colfer Sect.

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.

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

MARCH 3, 1988

NELSON RARITIES, INC.
BOX 543
PORTLAND, ME 04112

RE: ONE CITY CENTER

DEAR SIR:

YOUR APPLICATION TO CHANGE OF USE FROM CONSTRUCTION OFFICE TO RETAIL AND WHOLESALE OFFICE HAS BEEN REVIEWED AND A PERMIT IS HEREWITH ISSUED SUBJECT TO THE FOLLOWING REQUIREMENT:

THE BUILDING FIRE ALARM SYSTEM SHALL BE EXTENDED TO INCLUDE THIS AREA.

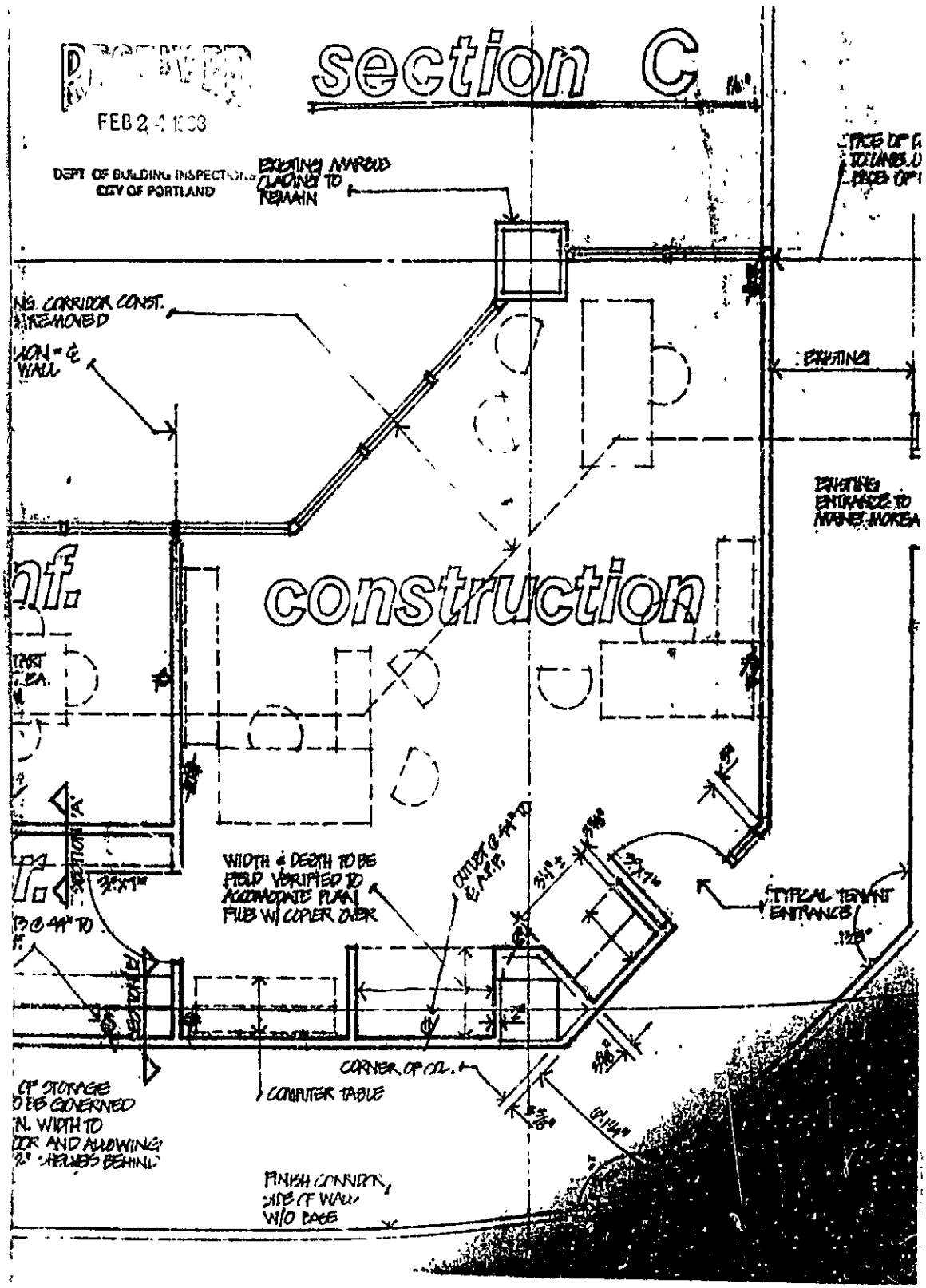
IF YOU HAVE ANY QUESTIONS REGARDING THIS REQUIREMENT, PLEASE DO NOT HESITATE TO CONTACT THIS OFFICE.

SINCERELY,

P. SAMUEL HOFFSES
CHIEF, INSPECTION SERVICES

PSH:TJY

CC: LT. J. COLLINS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FEB 2 4 1983
DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND
EXISTING MARBLE CLADDING TO REMAIN
CORRIDOR CONST. REMOVED
NON-℄ WALL
EXISTING
EXISTING ENTRANCE TO MAINE MORSE
construction
WIDTH & DEPTH TO BE FIELD VERIFIED TO ACCOMODATE PLAN FILE W/ COPIER OVER
TYPICAL TENANT ENTRANCE
COMPUTER TABLE
CORNER OF COL.
FINISH CORRIDOR SIDE OF WALL W/O BASE

PERMIT # 00017 **CITY OF** Portland **BUILDING PERMIT APPLICATION** **MAP #** _____ **LOT #** _____

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

Owner: One City Center Associates

Address: One City Center, Portland, ME 775-4482

LOCATION OF CONSTRUCTION One City Center

Lessee:

CONTRACTOR: Nelson Rarities, In SUBCONTRACTORS:

ADDRESS: Box 453 Portland, ME 04112 775-3150

Est. Construction Cost: _____ Type of Use: Retail/Wholesale

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment

_____ Conversion - Explain Change of use from constructi a office to retail/wholesale business office no 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 February 24, 1988 Subdivision: Yes / No

Inside Fire Limits Name _____

Bldg Code _____ Lot _____

Time Limit _____ Block _____

Estimated Cost _____ Permit Expiration _____

Value/Structure _____ Ownership _____ Public

Yes 25 _____ Private

(PERMIT RECEIVED)

MAR 3 1988

City of Portland

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 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 [illegible] Feb. 25, 1988

Permit Received By L. Benoit

Signature of Applicant [signature] Date 2/25/88

Signature of CEO FRB [signature] Date [illegible]

PERMIT ISSUED WITH LETTER

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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PLOT PLAN

N

FEES (Breakdown From Front)

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

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 3/3/88 C of O ok. AC

Signature of Applicant Malcolm Log **Date** 2-24-88

PERMIT # 000541 CITY OF _____ BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: A.G. Associates

Address: One City Center

LOCATION OF CONSTRUCTION One City Center

CONTRACTOR: Me. Bay Canvas SUBCONTRACTORS: _____

ADDRESS: 977 Brighton Avenue, Ptld, Me.

Est. Construction Cost: 1410.00 Type of Use: Canopy - Repair

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

_____ Conversion - Explain _____

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 1.26.88 Subdivision: Yes / No

Inside Fire Limits _____ Name _____

Bldg Code _____ Lot _____

Time Limit _____ Block _____

Estimated Cost 1410.00 Permit Expiration: _____

Value/Structure _____ Ownership: _____ Public _____

Fee 25.00 _____ Private _____

PERMIT ISSUED

MAY 18 1988

City Of Portland

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 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) Approved PLM 5-13-88

Date Approved Bd. of Appeals Feb. 26, 1988

Permit Received By _____

Signature of Applicant _____ Date _____

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag-CEO

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PLOT PLAN

N

FEES (Breakdown From Front)

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

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 1/89 Done. AR

Signature of Applicant D-16-1 **Date**

Certificate of Flame Resistance

REGISTERED FLAME RETARDANT

REGISTERED APPLICATION CONCERN No.

A-217

ISSUED BY

JOHN BOYLE & COMPANY, INC.
SALISBURY ROAD
STATESVILLE, NC 28677

704-872-8151

Date treated or manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR A.G. ASSOCIATES ADDRESS ONE CITY CENTER

CITY PORTLAND STATE MAINE

Certification is hereby made that: (Check "a" or "b")

☑ (a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____

Method of application _____

☐ (b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric or material used _____ Reg. No. _____

The Flame Retardant Process Used WILL NOT Be Removed By Washing

JOHN BOYLE & COMPANY, INC.

JOHN BOYLE & COMPANY, INC.
Name of Applicator or Production Superintendent

By Nick Albergo
Title

ESTIMATE - CONTRACT

SOLD TO: Lou Ascanio/Dantes
DEL. ADDRESS One City Center
Portland, Me.
MAIL ADDRESS

Dave Gaind ano
2 Halls Hill
W. Falmouth
878-2533

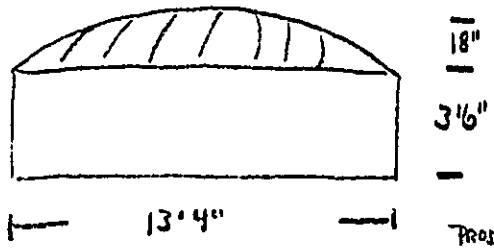
W.O. #
JOB #
DATE 2/16/88
EST. DEL. DATE 3 Weeks
HOME PHONE
BUS. PHONE 878-2870
FRAME STYLE Welded Canopy
FABRIC & COLOR UltraFab/Green
FABRIC STYLE #

13'4" x 3'6" x 2' Entrance Canopy fabricated & installed.

Frame made from 1" and 3/4" galvanized steel tubing. Bent, welded and painted.

Fabric is Boyle's Pineneedle green ultraFab polyester, flame retardant.

Art work to say Groceria Dante's Catering on face... Dante's 18" high in script, Groceria & Catering 9" high in print. Art work to be submitted.



PROJECTION AT MID POINT 2'.
MOUNTED 8½' OFF SIDEWALK.

ITEM:	ESTIMATE
AS ABOVE	$1375.00
TAX	35.00
ESTIMATE TOTAL	$1410.00
LESS DEPOSIT	500.00
DUE UPON INSTALLATION	$910.00

CONTRACT AGREEMENT

Maine Bay Canvas, Inc. agrees to sell, deliver and install to the Buyer, and the Buyer agrees to purchase and accept from Maine Bay Canvas, Inc. the above described goods or property, subject to and upon the terms and conditions hereof expressed. Any alteration or deviation from specifications involving extra costs will become an additional charge over and above the quote.

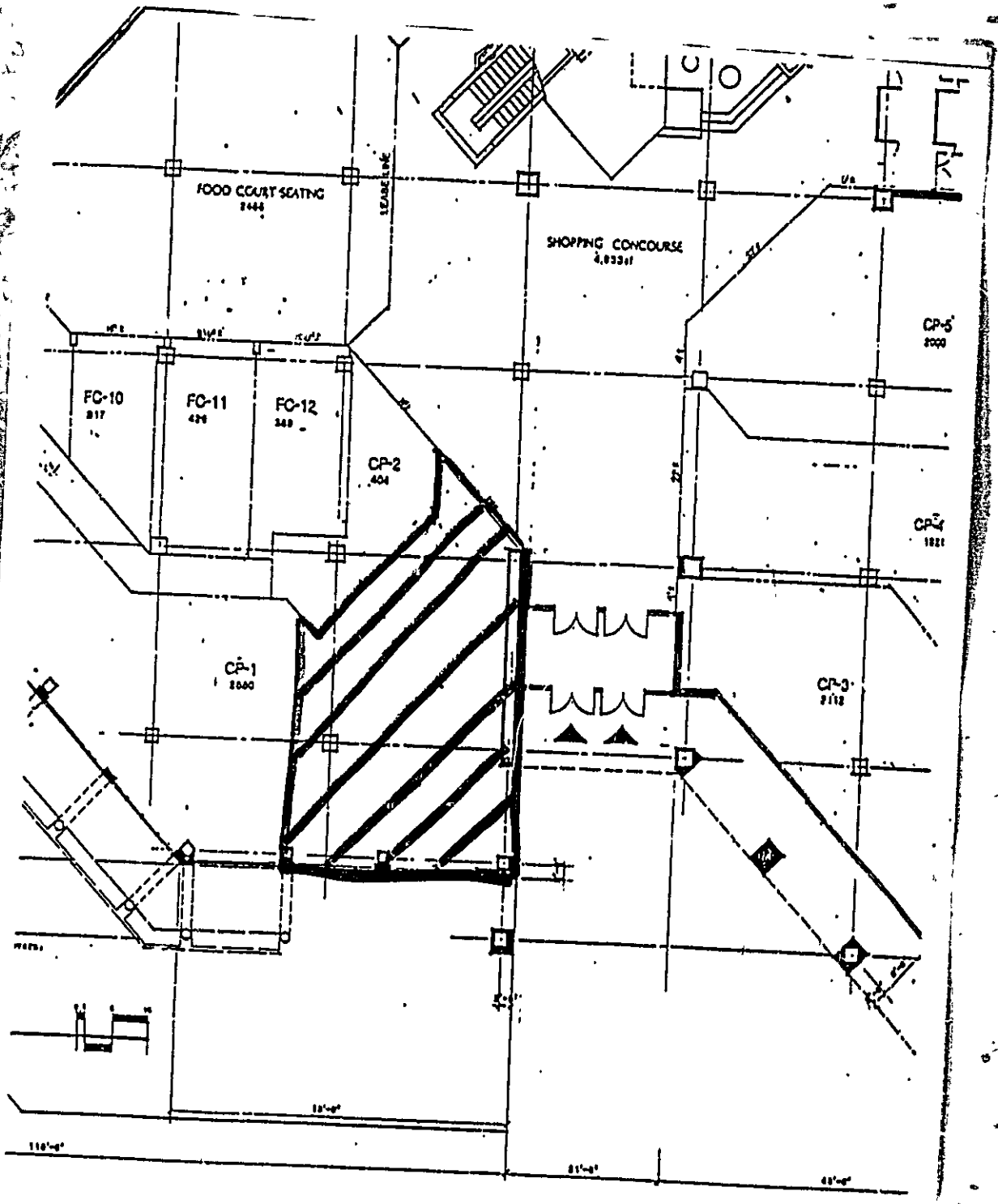
Until the said total balance is paid in full and all of the conditions hereof are fully performed title to and ownership of the property purchased under this contract shall be and remain the property of Maine Bay Canvas, Inc.

No cancellations will be accepted after work has started, or on special order merchandise. Delivery dates shown are approximate unless otherwise stated.

Estimates do not include applicable taxes.

BUYER
SELLER Ronald B Cole

Maine Bay Canvas
977 Brighton Ave.
Portland, Maine
207-774-2261


FOOD COURT SEATING
SHOPPING CONCOURSE
FC-10
FC-11
FC-12
CP-2
CP-1
CP-3
CP-4
CP-5

PERMIT # .000730 CITY OF _____ BUILDING PERMIT APPLICATION MAP #_____ LOT# _____

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

For Official Use Only

Date _____ Inside Fire Limits _____ Bldg Code _____ Time Limit _____ Estimated Cost _____ Value/Structure _____ Fee $61.20

Subdivision: Yes / No Name _____ Lot _____ Block _____ Permit Expiration: _____ Ownership: _____ Public _____ Private

Owner: The Fisher Group

Address: Troy, New York (Previously Northstar Bank)

LOCATION OF CONSTRUCTION 1 City Center (Fleet Bank)

CONTRACTOR: NeoKraft Signs SUBCONTRACTORS: 772-1544

ADDRESS: 686 Main St., Lewiston, ME 04240

Est. Construction Cost: _____ Type of Use: bank

Past Use: same

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment

_____ Conversion - Explain To erect 2 ground level signs flush to bldg. 56 sq. ft.

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 _____

Ceiling:

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

PERMIT ISSUED JUN 23 1988 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 _____

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) Highway OK Plan 6-21-88

Date Approved D.R. Hirshman June 17, 1988

Permit Received By Joyce M. Pinaldi

Signature of Applicant [signature] F.C. Fred Fink Date _____

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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10 Arthur Rowe

Portland
One City Center

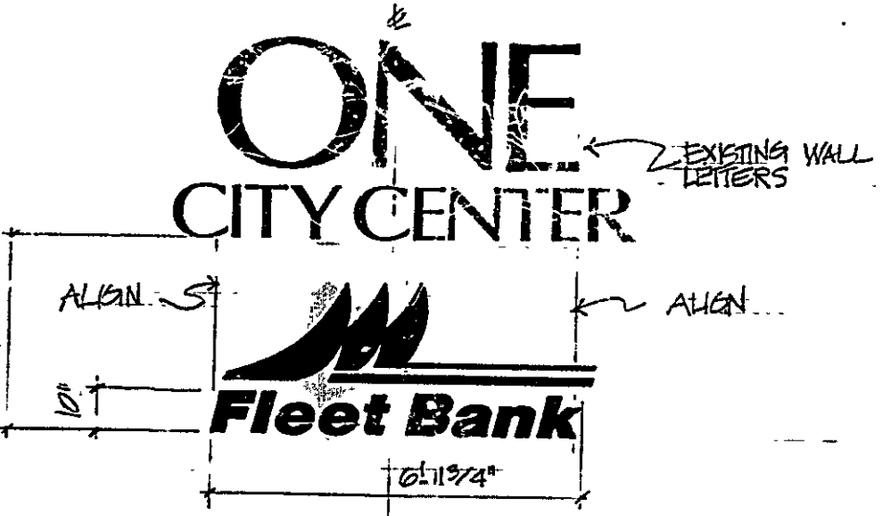
EXISTING
WALL LETTERS.

NeoKraft

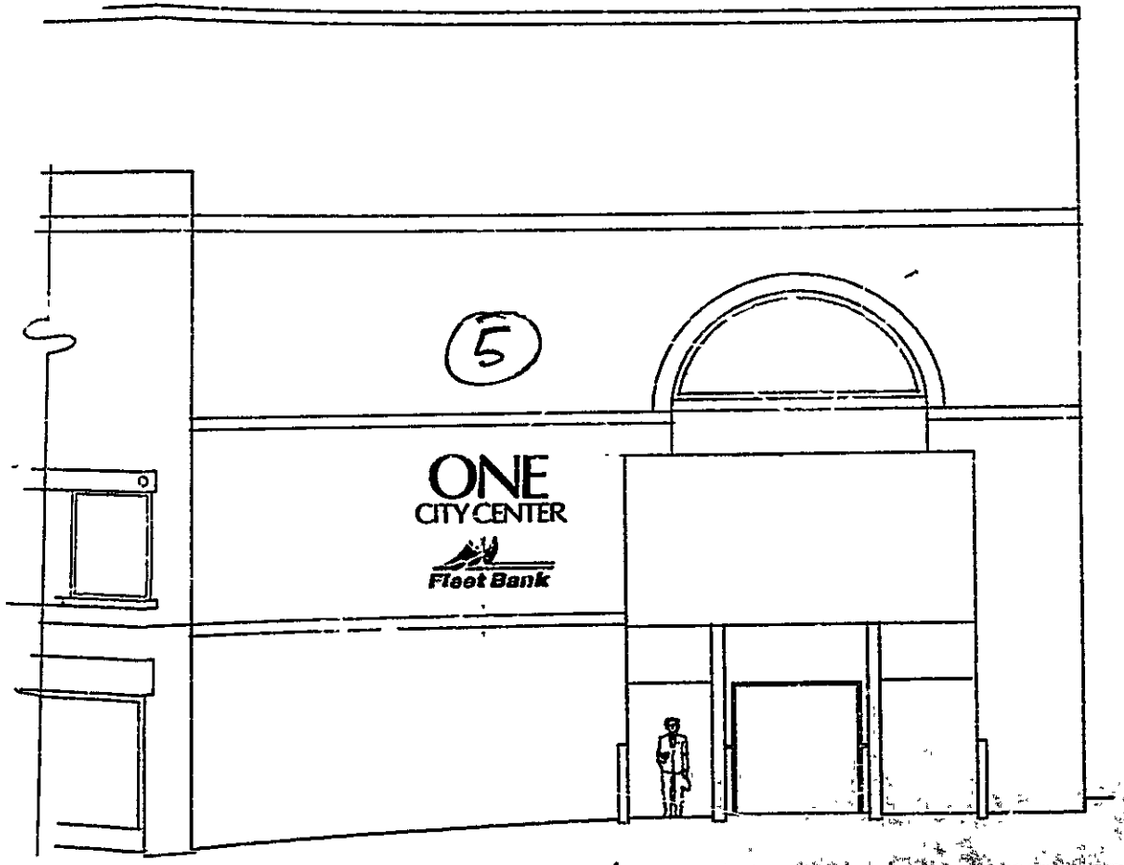
Manufacturers of Interior and Exterior Signage
NeoKraft Signs Inc.
686 Main Street
Lewiston, Maine 04240
(207) 782-8654

Vincent Lobozzo
President

Portland 772-1544
Or Toll Free In-state
1-800/338-2258



COPY LAYOUT—BACKLIGHTED WALL LETTERS
SCALE 3/8"=1'-0"



TEMPLE ST. ELEVATION SHOWING LOCATION OF WALL LETTERS
SCALE 1/8"=1'-0"

NeoKraft
Manufacturers of Interior and Exterior Signage
NeoKraft Signs Inc.
686 Main Street
Lewiston, Maine 04240
(207) 782 9654

Job Name: FLEET BANK
Job Location: ONE CITY CENTER, PORTLAND, ME
Drawing Title: PARTIAL BLDG. ELEV. and COPY LAYOUT (TEMPLE ST. ELEV.)
Drawing No.: 1 of 2
Date: JUNE 14, 1998

MONUMENT SQ. ELEVATION
SHOWING LOCATION OF BACK LIGHTED WALL LETTERS
SCALE 1/8" = 1'-0"

NeoKraft
Manufacturers of Interior and Exterior Signs
Neokraft Signs Inc.
696 Main Street
Lewiston, Maine 04240
(207) 782-0834

Job Name / Job Location: FLEET BANK ONE CITY CENTER, PORTLAND ME
Drawing Title: PARTIAL BLDG ELEV (MONUMENT SQ.)
Drawing No. 2 of 2
Date JUNE 14, 1996

CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 1 City Center

Issued to 24 City Center Assoc. Date of Issue March 22, 1990

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. 002941, 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
2nd floor	Beauty Salon

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:
3/22/1990
(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 # 002911 City of Portland **BUILDING PERMIT APPLICATION** Fee $105.00 Zone _____ Map # _____ Lot# _____

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

Owner: 24 City Center Assoc. Phone # _____

Address: 24 City Center, Portland, ME

LOCATION OF CONSTRUCTION 1 City Center - 2rd. Fl.-Moore

Contractor: Loring Builders, Inc. Sub. _____

Address: 545 Shore Rd., Cape Eliz., ME 04107 Phone # 767-3655

Est. Construction Cost: $17,000.00 Proposed Use: Beauty Salon

Past Use: none

# 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: Tenant Fit-up-Change of Use from vacant to Beauty salon, one set of plans.

For Official Use Only

Date: December 11, 1999

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost: $17,000.0.

Subdivision: Name _____ Lot _____

Ownership: _____ Public _____ Private

Zoning: B-3

Street Frontage Provided: _____

Proposed 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) _____

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: _____

PERMIT ISSUED DEC 20 1999 00.201 City Of Portland

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 _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By: Joyce M. Ruinaldi

Signature of Applicant: [signature] for owner Date 12/4/89

Signature of CEO: [signature] Date 12-17-89

PERMIT ISSUED WITH LETTER

Inspection Date _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

© Copyright GPCOG 1988

10/MR. DRVIDY

PLOT PLAN

N

FEES (Breakdown From Front)		Inspection Record Type	Date
Base Fee $	105.00		/ /
Subdivision Fee $			/ /
Site Plan Revie v Fee $			/ /
Other Fees $			/ /
(Explain)			/ /
Late Fee $			/ /

COMMENTS 2nd Inspect - 1-26-90 - Progressing as per plans - May be completed by next wk. J. Alvarado
Dwelling - 20

Signature of Applicant [signature] - Contractor

For Owner

Date 12/11/89

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

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

1 City Center - 2nd floor, Amore

20 December 1989

Loring Building Inc
545 Shore Road
Cape Elizabeth ME 04107

Dear Sir:

Your application to do tenant fit-up (beauty shop) has been reviewed and a permit is herewith issued subject to the following requirements:

1. Sprinkler protection is to be provided in accordance with Section 30-8 of N.F.P.A. 101 Life Safety Code and N.F.P.A. #13 Ordinary Hazard (Group 1).

2. A fire alarm system in accordance with Section 26-4 shall be installed and all components shall be U.L. listed as compatable with the building system.

3. A portable fire extinguisher shall be provided in accordance with N.F.P.A. #10.

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

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

Sincerely,

P Samuel Hoffses
Chief of Inspection Services

cc: Lt Garroway, Fire Prevention Bureau

/bm

Please make out a C of O. for
1 City Ct - 2nd flr, Ampre -
~~Entire~~ area - ~~[illegible]~~ use Beauty Salon

Send one copy to 24 City Center Association
~~24~~ City Ct

Send a copy to Loring Builders Inc -
add is on permit

F

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

June 12, 1990

Mr. John Rice
One City Center, c/o Dante's
Portland, ME 04101

Dear Mr. Rice:

During a recent routine health inspection of your establishment, I noticed a number of conduit cables running along the floor.

This condition is a violation of Articles 300, 370, 333 and 210 of the National Electric Code 1990. The cables constitute a shock hazard to the work place and personnel.

I urge you to address this problem as soon as possible.

Sincerely,

Mark Mitchell
Code Enforcement Officer

cc: P. Samuel Hoffses, Chief of Insp. Services
Wally Garroway, Lt., Fire Prevention Bureau
Sven Borglund, Chief Electrical Inspector

MM/jmr

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 1/25/90, 19__
Receipt and Permit number 01059

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: One City Center
OWNER'S NAME: Brenda Bronden ADDRESS: same

	FEES
OUTLETS:	
Receptacles ____ Switches ____ Plugmold ____ ft. TOTAL ____	
FIXTURES: (number of)	
Incandescent ____ Flourescent ____ (not strip) TOTAL ____	
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary to Permanent ____ TOTAL amperes 100	3.00
METERS: (number of) ____	
MOTORS: (number of)	
Fractional ____	
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
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:	6.00

INSPECTION: appt
Will be ready on set-up, 19__; or Will Call ____
CONTRACTOR'S NAME: Andrew Casparius
ADDRESS: Cumberland, ME
TEL.: 829-6555
MASTER LICENSE NO.: # 04852
LIMITED LICENSE NO.: ____
SIGNATURE OF CONTRACTOR: Andrew P. Casparius

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

ELECTRICAL INSTALLATIONS

Permit Number 0165-90

Location 1 City Center

Owner Brenda Brouillard

Date of Permit 1-25-90

Final Inspection

By Inspector

Permit Application Register Page No. 82

INSPECTIONS: Service ✓ by Freeman

Service called in

Closing-in by

PROGRESS INSPECTIONS: / / /

/ /

/ /

/ /

/ /

/ /

CODE COMPLIANCE COMPLETED

DATE 12/26/90 BB

DATE:	REMARKS:

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date Jan 5, 1990
Receipt and Permit number 01009

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: One City Center.

OWNER'S NAME: Brenda Brooen ADDRESS:

	FEES
OUTLETS: Receptacles 20 Switches 10 Plugmold ____ ft. TOTAL 30	3.00
FIXTURES: (number of) Incandescent ____ Flourescent 10 (not strip) TOTAL ____	3.00
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 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:	6.00
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	6.00

INSPECTION:
Will be ready on 1/5/90, 19__; or Will Call ____

CONTRACTOR'S NAME: Joy's Electric

ADDRESS: 70 Hillside Ave. Cumberland me

TEL.: 829-6555

MASTER LICENSE NO.: 04852

LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: Joseph P. Coppens

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 01009

Location One City Center

Owner Brenda Bradsen

Date of Permit 1-5-90

Final Inspection

By Inspector

Permit Application Register Page No 81

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 1-8-90 by _____

PROGRESS INSPECTIONS: 1-8-90 / _____ / _____

CODE COMPLIANCE COMPLETED DATE 2-2-90

DATE:	REMARKS:
1-8-90	BK wiring RT OK
	Existing electric closet — 30 KVA transf 480V
	primary fuse with side cable from
	"T" box no pri sw/ secondary 120/208
	panel 30 circuits —
1-9-90	sent letter

CITY OF PORTLAND, MAINE

Department of Building Inspection

Certificate of Occupancy

LOCATION One City Center, second floor - Fleet Bank

Issued to One City Center Assoc. - Fisher Group Date of Issue 1/26/00

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. 002195, 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
offices, second floor	second floor change of use from jewelry store to offices

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

PERMIT # [illegible] TOWN OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT#_____

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

Owner: One City Center Assoc. The Fisher Group - 775-4482

Address: 1 City Center, Portland, ME 04401

LOCATION OF CONSTRUCTION 1 City Center - 2nd. Floor - Fleet Bank

CONTRACTOR: ~~XXXXXXX~~ J.A. Languet Const. Co. SUBCONTRACTORS: 775-1772

ADDRESS: 22 Monument Square, Suite ~~500~~ 405, Portland, ME 04101

Est. Construction Cost: $45,000.00 Type of Use: office space

Past Use: ~~XXXXX~~ Jewelry store

Building Dimensions L____ W____ Sq. Ft.____ # Stories:____ Lot Size:_____

Is Proposed Use:_____ Seasonal_____ Condominium_____ Apartment_____

Conversion - Explain — Change of Use from jewelry store to offices, per 2 sheets of 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:_____
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 Nov. 29, 1989
Inside Fire Limits_____
Bldg Code_____
Time Limit_____
Estimated Cost $45,000.00
Value/Structure_____
Fee $245.00

Subdivision: Yes / No
Name_____
Lot_____
Block_____
Permit Expiration:_____
Ownership_____ Public
_____ 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 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 12-11-89

OK

Permit Received By Joyce M. Rinaldi

Signature of Applicant [illegible] (CONT. for owner) Date 11/29/89

Signature of CEO [illegible] Date 12-5-9

Inspection Dates_____

PERMIT ISSUED WITH LETTER

NOT WITHIN SHORELAND ZONING

White-Tax Assesor Yellow-GPCOG White Tag -CEO

© Copyright GPCOG 1987

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 245.00
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 3 Inspections
1-26-90 - Completed as per plans

Signature of Applicant Marvin M Jacks / CONTRACTOR FOR OWNER Date 11/29/89

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

Date: 11 December, 1989

Address: J. A. Languet Construction Company
22 Monument Square, Suite 405
Portland, Maine 04101

RE: Second Floor, Fleet Bank

Dear Sir:

Your application to change the use from jewelry store to offices has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all r 'rements of this letter are met.

1. Emergency lighting to be provided in accordance with Section 5 - 9 of N. F. P. A. 101 Life Safety Code.
2. Marking of means of egress shall be in accordance with Section 5 - 10.
3. Automatic fire detection to be provided in accordance with N.T.P.A., N.F.P A. 72 A, N.F.P.A. 72 E & 72 F. Plans to be reviewed by separate permit. All fire alarm equipment to be U. L. listed as compatible with existing fire alarm systems in the building.
4. Sprinkler system protection to be in accordance with N.F.P.A. #13 with distribution of sprinkler heads to comply with coverages for light hazard occupancies.

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

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Garroway, P.F.D.

lec

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

January 9, 1990

One City Center Associates
One City Center, Fourth Floor
Portland, ME 04101

To Whom It May Concern:

During a routine inspection of a wiring system being installed by Andy's Electric of Cumberland, Maine for Brenda Broden on the third level of One City Center it was found that the service for this area is a temporary type. I have already notified the electrician that this service shall be brought up to the N E C Code requirements, plus reminding your officers of this action. If there are any questions, please call this office.

Very Truly Yours,

Sven Borglund
Chief Electrical Inspector SB

cc: Sam Hoffses
W. Garroway
Hugh Irving
Andy's Electric
File

lec

902152

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $370 Zone _____ Map # _____ Lot# _____

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

Owner: MXRXM MCI Tellcomm. Phone # _____

Address: One City Ctr; 4th fl - Ptld, ME

LOCATION OF CONSTRUCTION One City Ctr - 4th floor

Contractor: F. W. Cunningham Sub. Cons 773-0246

Address: 85 West Commercial St Phone # Ptld, ME 04104

Est. Construction Cost: _____ Proposed Use: offices- comm

Past Use: vacant space

# 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 - 4th floor

For Official Use Only

Date 10/30/90

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 70,000

Subdivision: _____

Name _____

Lot _____

Ownership: _____ Public _____ Private

PERMIT ISSUED NOV 27 1990 City Of Portland

Zoning: B-3

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) OK WRY 11-20-90

HISTORIC PRESERVATION

Not in District nor Landmark.

Does not require review.

Required review.

Action: ___ Approved. ___ Approved with Conditions ___ Denied.

Date: _____

Signature: _____

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. Lelly Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

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

Interior Walls:

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

Ceiling:

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

Roof:

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

Chimneys:

Type _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

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 Louise E. Chase

Signature of Applicant _____ Date _____

Signature of CEO Susan [illegible] PERMIT ISSUED WITH LETTER 11-18-90

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

© Copyright GPCOG 1988

10 MA. Mitchell

CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION One City Center ; 11th floor

Issued to Guy Gannett, Inc.

Date of Issue 1/26/90

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. 002126 , 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
11th floor	offices

Limiting Conditions:

This certificate supersedes certificate issued:

Approved:

(Date) Inspector

Asst. 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 # 002128 TOWN OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Guy Gannett

Address: PO Box 1460, Portland 04104

LOCATION OF CONSTRUCTION 1 City Center, 11th Floor

CONTRACTOR: Keeley Construction SUBCONTRACTORS: 773-8499

ADDRESS: PO Box 1074, 04104 (Scott Joslin)

Est. Construction Cost: $110,000 Type of Use: offices

Past Use:

Building Dimensions L____ W____ Sq. Ft.____ # Stories:____ Lot Size:____

Is Proposed Use: ____ Seasonal ____ Condominium ____ Apartment

____ Conversion - Explain tenant fit up. 2 sets of plans submitted.

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 12, 1989

Inside Limits ____

Bldg Code ____

Time Limit ____

Estimated Cost $110,000

Value/Structure ____

Fee $570.00

Subdivision: Yes / No

Name ____

Lot ____

Block ____

Permit Expiration: ____

Ownership: ____ Public ____ Private

Ceiling:

1. Ceiling Joists Size: ____
2. Ceiling Strapping Size ____ Spa
3. Type Ceilings ____
4. Insulation Type ____ Size ____
5. Ceiling Height ____

PERMIT ISSUED
MAY 25 1989
City Of Portland

Roof:

1. Truss or Rafter Size ____ Span ____
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 00.242

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) ____

OK Date Approved 5-25-89

Permit Received By Nancy Grossman

Signature of Applicant ____ (AS AGENT FOR OWNER) Date ____

FPE

Signature of CEO ____ Date 5-22-89

Inspection Dates ____

White-Tax Assessor Yellow-GPCOG Pink-Applicant 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 $ 545.00
(Explain)
Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 1-25-1990. Several inspections made during the renovation. Completed as per plans. — F.D. Approved

Signature of Applicant [signature] (AS AGENT FOR OWNER) Date

PLUMBING APPLICATION

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

3rd floor

PROPERTY ADDRESS

Town Or Plantation	Portland
Street Subdivision Lot #	1 City Center, Monroe

PROPERTY OWNERS NAME

Last:	First: Brenda
Applicant Name:	Peter L. Waldorf
Mailing Address of Owner/Applicant (If Different)	16 Jordan Ave, Portland

Caution: Permit Required

PORTLAND 3761 TOWN COPY

Date Permit Issued 1/9/90 $ 6 FEE

Local Plumbing Inspector Signature L.P.I. #

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.

Peter L. Waldorf 1/10/90

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.

JAN 10 1990

Local Plumbing Inspector Signature Date Approved

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 Commercial

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 # 02161

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

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	One City Center
Street Subdivision Lot #	Portland Me

PROPERTY OWNERS NAME

One City Center — 1 mf/Floor Flat Bank
Last First

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

Caution: Permit Required

Plumbing shall not be installed until a Permit is attached here by

PORTLAND 3738 TOWN COPY

Date 12/5/89 $ 16 FEE ☐ Double Fee Charged

Local Plumbing Inspector Signature L.P.I. #

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 12-5-89

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 JAN 10 1990 Date Approved

PERMIT INFORMATION

This Application Is for

1. ☐ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

DEC 1 1989

Type Of Structure To Be Served:

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER - SPECIFY Bank

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 # 96018

DEC 22 1989

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

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

HHE-211 Rev. 9/86

TOWN COPY

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	Portland
Street Subdivision Lot #	1 City Center

PROPERTY OWNERS NAME

The Bay Club

Last First

Applicant Name	Wm Mc[illegible]
Mailing Address of Owner/Applicant (If Different)	[illegible]

PORTLAND PERMIT # 3,372 TOWN COPY

Date Permit Issued: 1/18/89 $ 19.00 FEE Double Fee Charged

Local Plumbing Inspector Signature [illegible]

L.P.I. # 1212 3

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 1/13/89

Caution: Inspection Required

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

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

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 Health Club

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 # 01523

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	2	Hoseblib / Sillcock		Bathtub (and Shower)
	17	Floor Drain	14	Shower (Separate)
OR	2	Urinal		Sink
HOOK-UP to an existing subsurface wastewater disposal system	3	Drinking Fountain	11	Wash Basin
		Indirect Waste	6	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	2	Clothes Washer
PIPING RELOCATION, of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	1	Laundry Tub
Number of Hook-Ups & Relocations	2	Other: Map Basin	2	Water Heater
$ Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	36	Fixtures (Subtotal) Column 1
			26	Fixtures (Subtotal) Column 2
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			62	Total Fixtures
			$ 92.00	Fixture Fee
			$	Hook-Up & Relocation Fee
			$ 92.00	Permit Fee (Total)

Page 1 of 1
HHE-211 Rev. 9/86

TOWN COPY

PERMIT # 002126 TOWN OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT#_____

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

Owner: Guy Gannett

Address: PO Box 1460, Portland 04104

LOCATION OF CONSTRUCTION 1 City Center, 11th Floor

CC ITRACTOR: Keeley Construction SUBCONTRACTORS: 773-8499

ADDRESS: PO Box 1074, 04104 (Scott Joslin)

Est. Construction Cost: $110,000 Type of Use: offices

Past Use:

Building Dimensions L____ W____ Sq. Ft.____ # Stories:____ Lot Size:____

Is Proposed Use:_____ Seasonal_____ Condominium_____ Apartment

_____ Conversion - Explain tenant fit up. 2 sets of plans submitted.

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 May 12, 1989
Inside Fire Limits
Bldg Code
Time Limit
Estimated Cost $110,000
Value/Structure
Fee $570.00

Subdivision: Yes / No
Name
Lot
Block
Permit Expires
Ownership: _____ Private

PERMIT ISSUED
MAY 25 1989
City Of Portland

Ceiling:

1. Ceiling Joists Size: Spacing
2. Ceiling Strapping Size
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 Subdivision
Shore and Floodplain Mgmt. Special Exception
Other (Explain)
Date Approved

Permit Received By Nancy Grossman

Signature of Applicant [signature] (AS AGENT FOR OWNER) Date

Signature of CEO Date

Inspection Dates 10 48

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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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

June 2, 1989

RE: Dante's Restaurant, 1 City Center

Walter Pochebit
844 Stevens Avenue
Portland, Maine 04103

Dear Mr. Pochebit:

This letter is written to document a phone conversation we had today regarding Dante's Restaurant at 1 City Center. The Food Service License was issued on April 5, 1988, having as a stipulation that a proper hood and venting system be installed above the gas range.

We do not have a copy of the Certificate of Occupancy in our files but the practice is that it is issued the same day or prior to the issuance of the food service license.

Sincerely,

Arthur Rowe
Code Enforcement Officer

/el

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 5/28 19 86
Receipt and Permit number D 25837

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: One City Center

OWNER'S NAME: Paine Webber ADDRESS: same

	FEES
OUTLETS:	
Receptacles 54 Switches 18 Plugmold ____ ft. TOTAL 72	7.20
FIXTURES: (number of)	
Incandescent ____ Flourescent 66 (not strip) TOTAL ____	9.60
Strip Flourescent 32 ft.	
SERVICES:	
Overhead 1 Underground ____ Temporary ____ TOTAL amperes 60	3.00
METERS: (number of) 1	.50
MOTORS: (number of)	
Fractional ____	
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
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 1	5.00
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under 1	1.00
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:	29.30

INSPECTION:

Will be ready on ____, 19__; or Will Call xx

CONTRACTOR'S NAME: E. S. Boulos Co.

ADDRESS: 40 Circus Time Rd. So Ptld

TEL.: 772-3706

MASTER LICENSE NO.: 3291 SIGNATURE OF CONTRACTOR: James C. Brown

LIMITED LICENSE NO.: ____

INSPECTOR'S COPY — WHITE

ELECTRICAL INSTALLATIONS —

Permit Number _____

Location City Center

Owner _____

Date of Permit _____

Final Inspection _____

By Inspector _____

Permit Application Register Page:No. _____

INSPECTIONS: Service _____ by _____

Service ca d in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: 5/30/86 / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

CODE COMPLIANCE COMPLETED DATE _____

DATE:	REMARKS:
5/30/86	Called to close in walls -

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date April 11, 1986
Receipt and Permit number D26443

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: One City Center

OWNER'S NAME: Giovi's Pizza ADDRESS:

	FEES
OUTLETS:	
Receptacles 20 Switches 4 Plugmold ____ ft. TOTAL 1-30	3.00
FIXTURES: (number of)	
Incandescent 17 Flourescent 2 (not strip) TOTAL 19	3.90
Strip Flourescent ____ ft.	
SERVICES:	
Overhead x Underground ____ Temporary ____ TOTAL amperes 60	3.00
METERS: (number of) 1	.50
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 x Over 20 kws ____	5.00
APPLIANCES: (number of)	
Ranges 1 Water Heaters 1	
Cook Tops 1 Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL 3	4.50
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
Air Conditioners Central Unit 1	5.00
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 2	1.00
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:	28.90

INSPECTION:

Will be ready on April 11, 1986; or Will Call -x-

CONTRACTOR'S NAME: E. S. Boulos Co.

ADDRESS: 40 Circus Time Rd., S.P. 04106

TEL.: 772-3706

MASTER LICENSE NO.: 3291 SIGNATURE OF CONTRACTOR: E.S. Boulos Co,

LIMITED LICENSE NO.:

INSPECTOR'S COPY — WHITE

ELECTRICAL INSTALLATIONS

Permit Number 26443

Location 1 Gilbert

Owner Jesus Quiza

Date of Permit 4-11-86

Final Inspection

By Inspector

Permit Application Register Page No. 109

INSPECTIONS. Service 5/2/86 by [illegible]

Service called in

Closing-in by

PROGRESS INSPECTIONS: 4-14-86, 5-2-86,

CODE COMPLIANCE COMPLETED DATE

DATE:	REMARKS:

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date April 11, 19 86
Receipt and Permit number D26446

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: One City Center 9
OWNER'S NAME: Great Northern Paper / ADDRESS:

	FEES
OUTLETS:	
Receptacles 129 Switches 74 Plugmold 80 ft. TOTAL 203	~~19.30~~
FIXTURES: (number of)	
Incandescent 9 Flourescent 334 (not strip) TOTAL 343	~~36.30~~
Strip Flourescent 110' ft.	~~5.20~~
SERVICES: 480 Volt - 3-phase 4 wire	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes 200	~~3.00~~
METERS: (number of) 1	~~.50~~
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 1 / Water Heaters 2	
Cook Tops ____ / Disposals ____	
Wall Ovens ____ / Dishwashers ____	
Dryers ____ / Compactors ____	
Fans ____ / Others (denote) ____	
TOTAL 3	~~4.50~~
MISCELLANEOUS: (number of)	
Branch Panels 4	~~4.00~~
Transformers 2	~~4.00~~
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 ____	~~5.00~~
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 4	~~2.00~~
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:	~~87.00~~

INSPECTION:
Will be ready on ____, 19__: or Will Call X

CONTRACTOR'S NAME: E. S. Boulos Co.
ADDRESS: 40 Circus Time Rd. So. Port
TEL.: 772-3706
MASTER LICENSE NO.: 3291
LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: A. Hodgkins E.S. Boulos Co.

INSPECTOR'S COPY — WHITE

ELECTRICAL INSTALLATIONS—

Permit Number 26 446

Location 1 City Center

Owner Great Northern Hotel

Date of Permit 4-11-86

Final Inspection

By: Inspector

Permit Application Register Page No. 110

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: _____ / _____ / _____

4-14-86 / _____ / _____

_____ / _____ / _____

_____ / CODE

_____ / ~~COMPLIANCE~~

_____ / ~~COMPLETED~~

DATE _____

DATE:	REMARKS:

Freeport Commercial

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 5/12/86, 19__
Receipt and Permit number D 25779

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: One City Center

OWNER'S NAME: Peter Schinelly ADDRESS: Yarmouth

Churchill's Restaurant, basement

	FEES
OUTLETS:	
Receptacles ____ Switches ____ Plugmold ____ ft. TOTAL 30-60	5.00
FIXTURES: (number of)	
Incandescent 30 Flourescent 20 (not strip) TOTAL ____	7.00
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes 200	3.00
METERS: (number of) 1	.50
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 20 Over 20 kws ____	5.00
APPLIANCES: (number of)	
Ranges 1 / Water Heaters 1 1	
Cook Tops ____ / Disposals ____	
Wall Ovens ____ / Dishwashers 1	
Dryers ____ / Compactors ____	
Fans ____ / Others (denote) ____	
TOTAL 3	4.50
MISCELLANEOUS: (number of)	
Branch Panels 1	1.00
Transformers 1	2.00
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 1	.50
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:	28.50

INSPECTION:

Will be ready on outlets now, 19__; or Will Call ____

CONTRACTOR'S NAME: Corey Electric

ADDRESS: 184 Read St.

TEL.: 775-1380

MASTER LICENSE NO.: 3630 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: ____

INSPECTOR'S COPY — WHITE

ELECTRICAL INSTALLATIONS

Permit Number

Location *I-City Center*

Owner

Date of Permit

Final Inspection

By Inspector

Permit Application Register Page No

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: _____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

CODE COMPLIANCE COMPLETED

DATE _____

DATE:	REMARKS:
5/29/86	Fireman insp-ed