Permit to: Tom Woodruff PO Box 9715-240 Port 04104

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $28.00 Zone _____ Map # _____ Lot # _____

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

Owner: John Macgower Phone # 883-2892

Address: 262 Payne Rd. Scarboro

LOCATION OF CONSTRUCTION Custom House Wharf 900538

Contractor: Henri Cignoux Sub: _____

Address: P.O. Box 10395 Portland, Maine 04101

Est Construction Cost: _____ Proposed Use: _____

Past Use: _____

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion to erect 42" X 56" sign as per plan

For Official Use Only

Date June 16, 1990

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost _____

Subdivision: _____

Name _____

Lot _____

Ownership: Public _____ Private _____

PERMIT ISSUED

JUN 21 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) _____

Site Walk - 6-20-90

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. _____ Size _____
4. Insulation Type _____
5. Ceiling Height: _____

Roof:

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

Chimneys:

Type _____ Number of Fire Places _____

Heating:

Type of Heat. _____

Electrical:

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

Plumbing:

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

Swimming Pools:

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

Permit Received By Latini

Signature of Applicant Tom Woodruff Date June 19, 1990

Signature of CEO _____ Date _____

Inspection Dates _____

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White-Tax Assesor Yellow-GPCOG White Tag -CEO

17 Min. Adder

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 28.00
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

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

COMMENTS submitted proof of insurance consent form drawing plot plan

7-9-90 - NP

Signature of Applicant

Date June 19, 1990

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY) 06/07/90 Kris

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

PRODUCER

C.H. Baker Co.
835 Forest Ave.
Portland, Maine 04103

CODE SUB-CODE

INSURED

Henri Gigneux
dba Henri Gigneux Boatwright
P.O. Box 10395
Portland, Maine 04101

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A Maine Bonding and Casualty 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)	ALL LIMITS IN THOUSANDS
	GENERAL LIABILITY				GENERAL AGGREGATE $300,—
	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OPS AGGREGATE $
X	CLAIMS MADE X OCCUR.	BZX07541643	10/21/89	10/21/90	PERSONAL & ADVERTISING INJURY $300,—
A	OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE $300,—
					FIRE DAMAGE (Any one fire) $50,—
					MEDICAL EXPENSE (Any one person) $5,—
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT $
	ANY AUTO				BODILY INJURY (Per person) $
	ALL OWNED AUTOS				BODILY INJURY (Per accident) $
	SCHEDULED AUTOS				PROPERTY DAMAGE $
	HIRED AUTOS				EACH OCCURRENCE $ / AGGREGATE $
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				
	OTHER THAN UMBRELLA FORM				STATUTORY
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				$ (EACH ACCIDENT)
					$ (DISEASE—POLICY LIMIT)
					$ (DISEASE—EACH EMPLOYEE)
	OTHER				

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DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

Verify Liability Coverage.

CERTIFICATE HOLDER

City of Portland
389 Congress Street - Room 315
Portland, Maine 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

Kris Neal

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WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED TO BE ERECTED ON A BUILDING AT Custom House Wharf IN PORTLAND, MAINE Proprietors of Custom House Wharf being the owner of the premises at Commercial St. in Portland, Maine hereby gives consent to the erection of a certain sign owned by Palawan Services, Inc. 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:

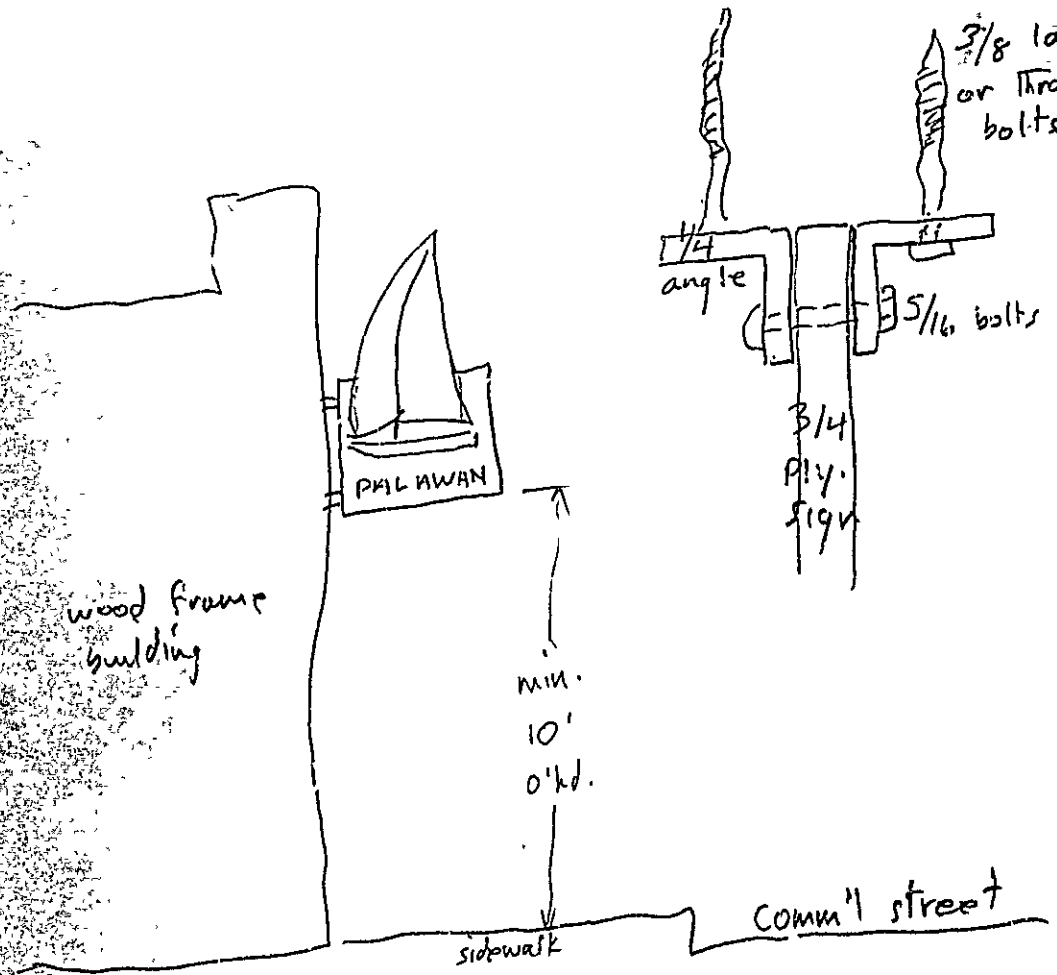
And in consideration of the issuance of said permit _____, owner of said premises, in event said sign shall cease to serve the purpose for which it was erected or shall become dangerous and in event the owner of said sign shall fail to remove said sign or make it permanently safe in case the sign still 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 17th day of May 1990.

John V Sharpe for Proprietors of C H W
Owner's signature

Thomas A. Woodruff
Lessee's signature

RECEIVED JUN 19 1990



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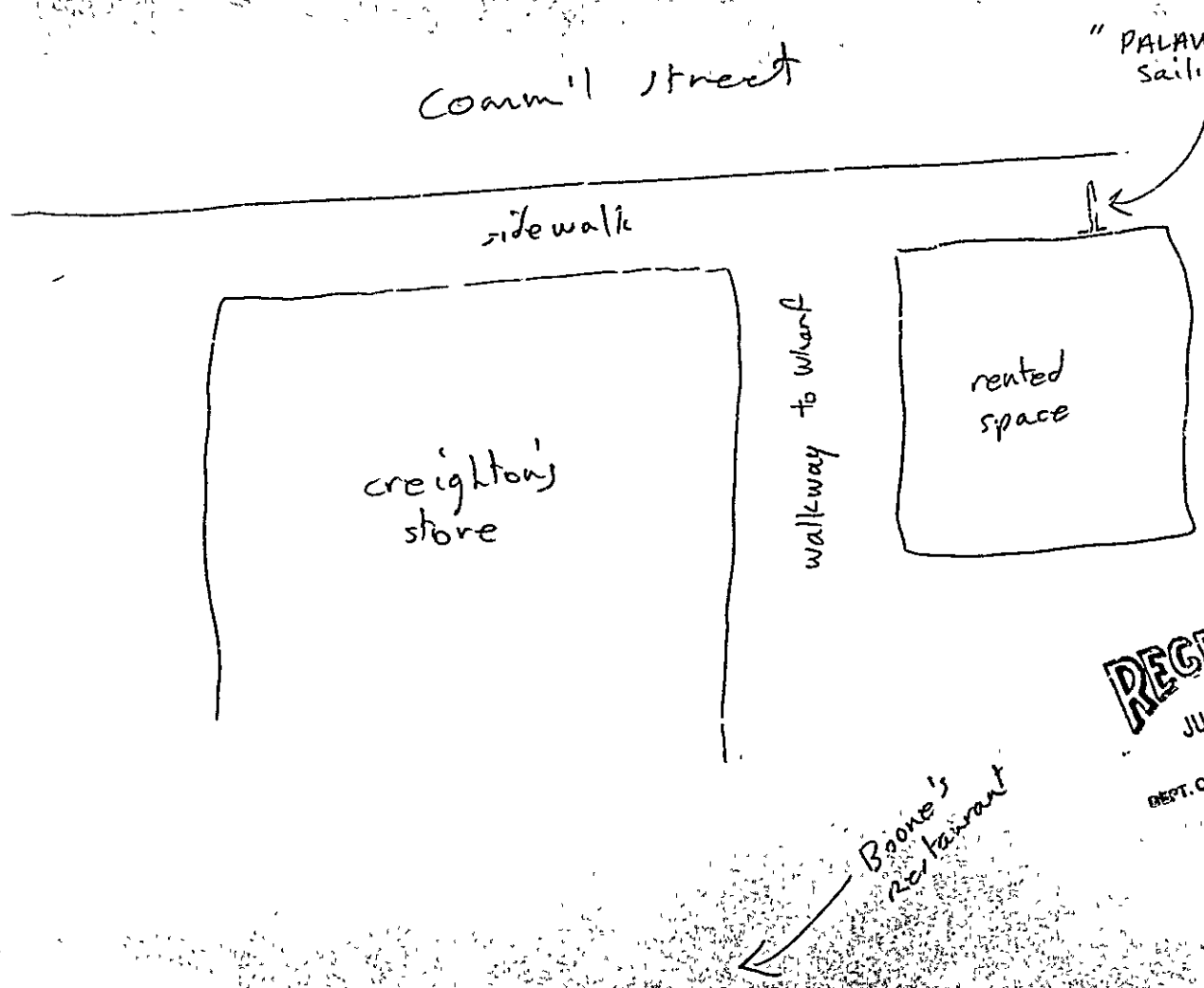
CITY OF PORTLAND



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DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY): 11/3/89

PRODUCER

Brooks Insurance Agency
PO Box 307 DTS
Portland
Maine 04112

CODE SUB-CODE

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

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A: Commercial Union Ins Co.
COMPANY LETTER B:
COMPANY LETTER C:
COMPANY LETTER D:
COMPANY LETTER E:

INSURED

Harry T. Adams
PO Box 272
Scarborough
Maine 04074

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)	ALL LIMITS IN THOUSANDS	
A X	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR. OWNER'S & CONTRACTOR'S PROT.	CM R151234	12/6/89	12/6/90	GENERAL AGGREGATE	$ 1,000,—
					PRODUCTS-COMP/OPS AGGREGATE	$ none
					PERSONAL & ADVERTISING INJURY	$ 500,—
					EACH OCCURRENCE	$ 500,—
					FIRE DAMAGE (Any one fire)	$ 50,—
					MEDICAL EXPENSE (Any one person)	$ 5,—
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				COMBINED SINGLE LIMIT	$
					BODILY INJURY (Per person)	$
					BODILY INJURY (Per accident)	$
					PROPERTY DAMAGE	$
	EXCESS LIABILITY OTHER THAN UMBRELLA FORM				EACH OCCURRENCE $	AGGREGATE $
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY	
					$	(EACH ACCIDENT)
					$	(DISEASE—POLICY LIMIT)
					$	(DISEASE—EACH EMPLOYEE)
	OTHER					

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DEPT. OF BUILDING INSP.
CITY OF PORTLAND

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

Certificate Holder is also Additional Insured

CERTIFICATE HOLDER

Proprietors of Custom House Wharf
c/o John MacGowan
262 Payne Road
Scarborough, Maine 04074

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: Stephen W Carey

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WORKSHEET TO ERECT SIGN OVER PUBLIC SIDEWALK — THIS IS NOT A PERMIT!

Portland, Maine, April 25 1990

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect the following described sign extending over a public sidewalk or street in accordance with the Building Code of the City of Portland, and the following specifications:

Location Custom House Wharf Within Fire Limits? _____ Dist. No. _____

Owner of building to which sign is to be attached John Macgowan

Name and address of owner of sign Palawan Services, Inc, Box 9715, Portland 04104

Contractor's name and address Henri Gigroux Boatwright Telephone 775-4338

When does contractor's bond expire? 10/21/90

Information Concerning Building

No. stories 1 Material of wall to which sign is to be attached wood Frame & Plaster

Details of Sign and Connections

Building owner's consent and agreement filed with application _____

Electric? No Vertical dimension after erection 56" Horizontal 42"

Weight 25 # lbs., Will there be any hollow spaces? No Any rigid frame? No

Material of frame _____ No. advertising faces 2, material Plywood

No. rigid connections 2 Are they fastened directly to frame of sign? yes

No. through bolts 4, Size 3/8", Location, top or bottom Top & bottom

No. guys 2, material cable, Size 1/4" cab

Minimum clear height above sidewalk or street 10'

Maximum projection into street 4' Fee $ _____

Signature of contractor _____

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JUN 19 1990
DEPT OF BUILDING INSPECTION
CITY OF PORTLAND

874-8300
x 8695
Warren Turner
Bill Giroux

775-7

CY 8704

Pick place
Sam Hofses

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date October 30, 1987
Receipt and Permit number 22301

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: Cumberland Wharf - Waterfront of Maine

OWNER'S NAME: Waterfront of Maine ADDRESS: same

	FEES
OUTLETS: Receptacles x Switches x Plugmold ____ ft. TOTAL 1-30	3.00
FIXTURES: (number of) Incandescent ____ Flourescent ____ (not strip) TOTAL ____	
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 ____ Ovens ____ Water Heaters ____ Disposals ____ Dishwashers ____ Compactors ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of) Branch Panels 1 - 200 amp. sub panel	1.00
Transformers ____	
Air Conditioners Central Unit ____	
Separate Units (windows) ____	
Signs 20 sq. ft. and under ____	
Over 20 sq. ft. ____	
Swimming Pools Above Ground ____	
In Ground ____	
Fire/Burglar Alarms Residential ____	
Commercial ____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____	
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires ____	
Repairs after fire ____	
Emergency Lights, battery ____	
Emergency Generators ____	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	5.00 Min.

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

CONTRACTOR'S NAME: Guy M. Maiorano - M & M Elec.

ADDRESS: 16 Cheverus Road, Cape Eliz., Me

TEL.: 767-2411

MASTER LICENSE NO.: 02774

LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: Guy Maiorano

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS —

Permit Number 2251

Location Cumberland County

Owner City of Fayetteville

Date of Permit 11/30/87

Final Inspection

By Inspector D. Pence

Permit Application Register Page No. 15

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: ____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

DATE:	REMARKS:
2/7/88	Permit expired

PERMIT # 1361 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

For Official Use Only

Date 10/20/87
Inside Fire Limits _____
Bldg Code _____
Time Limit _____
Estimated Cost 20,000
Value/Structure _____
Fee $120.00

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

Owner: Cumberland Cold Storage

Address: Commercial Street

LOCATION OF CONSTRUCTION Commercial Street/Cumberland Wharf

CONTRACTOR: High Tech Fire SUBCONTRACTORS: _____

ADDRESS: Protection, P.O. Box 1511 Auburn 04210 786-2224

Est. Construction Cost: 20,000 Type of Use: commercial building

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain to erect sprinkler system

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

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

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

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

PERMIT ISSUED
OCT 22 1987
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 _____ 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 Kandi Cote

Signature of Applicant _____ Date _____

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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10 - Rowe