

Permit # 0311 City of Portland BUILDING PERMIT APPLICATION Fee Zone Map Lot #
Please fill out any part which applies to job. Proper plans must accompany form.

Owner Philip L. Loring Phone 772-4436 Agent
Address 18 W. Patton St., Portland, ME 04103
LOCATION OF CONSTRUCTION 670 Commercial Street
Sub
Address 670 Commercial St., Portland, ME 04103 Phone 439-3728
Est. Construction Cost Proposed Use Painting
Past Use Tile Store
of Existing Res. Units # of New Res. Units
Building Dimensions L W Total Sq. Ft.
Stories # Bedrooms Lot Size sq. ft.
Is Proposed Use: Seasonal Condominium Conversion
Explain Change of Use from tile store to painting.

For Official Use Only
Date April 19, 1990
Inside Fire Ladder
Bldg Code
Name Limit
Estimated Cost
Zoning:
Street Frontage Provided:
Provided Setbacks: Front Back Side Side
Review Required:
Zoning Board Approval: Yes No Date:
Planning Board Approval: Yes No Date:
Conditional Use Variance File Plan Subdivision
Shoreland Zoning Yes No Floodplain Yes No
Special Exception
Other (Explain): OK (See Plans) 4-17-90

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

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

Exterior Walls:
1. Studding Size Spacing
2. No. of Windows
3. No. of Doors
4. Header Sizes Span(s)
5. Bridging: 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 Joist Size:
2. Ceiling Strapping Size Spacing
3. Type Ceiling:
4. Insulation Type Size
5. Ceiling Height:

Roof:
1. Truss or Rafter Size Spacing
2. Sheathing Type Size
3. Roof Covering Type

Chimney:
Type: Number of 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. Rendall
Signature of Applicant Philip L. Loring Date 4-19-90
Signature of GEO Robert L. Loring Date 4-24-90
Inspection Dates

White-Tax Assessor Yellow-GPCOG White Tag-CEO 157 © Copyright GPCOG 1988

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 25.00
 Subdivider Fee \$
 Site Plan Review Fee \$
 Other Fee \$
 (Exp. air.)
 Late Fee \$

Inspection Record

Type	Date
	5-17-90

COMMENTS

(Conf. Order)

9/6/90

Applicant *Mr. Philip L. Luce for owner*

Date *17 APR 90*

0311
Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fees \$200.00 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Ralph Loering Phone # 772-3398 Agent
Address: 18 Mt. Vernon St., Boston, MA 02108
LOCATION OF CONSTRUCTION: 270 Concord St.
Proposed Use: Tattooing
Address: 3 Leach Rd., Eliot, ME 03903 Phone # 439-7728
Est. Construction Cost: _____ Past Use: Tile Store
of Existing Res. Units: _____ # of New Res. Units: _____
Building Dimensions: _____ Total Sq. Ft.: _____
Stories: _____ # Bedrooms: _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion: Change of use from tile store to tattooing.

For Official Use Only	
Date: <u>April 19, 1990</u>	Subdivision: _____
Inside Fire Lines: _____	Name: _____
Blk. Code: _____	Lot: <u>APR-80-157</u>
Town Limit: _____	Ownership: _____
Estimated: _____	City of Portland
Zoning: <u>B-2</u>	Street Frontage Provided: _____
Review Required:	Provided Setbacks: Front _____ Back _____ Side _____
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: <u>OK W.D. 4-27-90</u>	

Foundations:
1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Sides _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other: _____
Floors:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size _____
4. Joist Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size _____
6. Floor Sheathing Type: _____ Size _____
7. Other Material: _____
Exterior Walls:
1. Studding Size: _____ Spacing _____
2. No. Windows: _____
3. No. Doors: _____
4. Header Size: _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Joist Size: _____
7. Insulation Type: _____ Size _____
8. Sheathing Type: _____ Size _____
9. Siding Type: _____ Weather Exposure _____
10. Finish Materials: _____
11. Other Materials: _____
Interior Walls:
1. Studding Size: _____ Spacing _____
2. Header Size: _____ Span(s) _____
3. W.D. Covering Type: _____
4. Other: _____
5. Other Materials: _____

Ceilings:
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size: _____
3. Type Ceilings: _____
4. Insulation Type: _____ Size _____
5. Ceiling Height: _____
Roofs:
1. Truss or Rafter Size: _____ Spacing _____
2. Sheathing Type: _____ Size _____
3. Roof Covering Type: _____
Chimneys:
Type: _____
Roofing:
Type of Heat: _____
Electrical:
Service Entrance Size: _____ Smoke Detector Required: Yes _____ No _____
Plumbing:
1. Approval of all tests required: Yes _____ No _____
2. No. of Toilets: _____
3. No. of Sinks: _____
4. No. of Lavatories: _____
5. No. of Other Fixtures: _____
Swimming Pools:
1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.
Permit Received By: Joyce M. Ringold
Signature of Applicant: [Signature] Date: 19 APR 90
Signature of [Signature] Date: 4-21-90
Inspection Dates: _____

White Tax Assessor Yellow-CPCOG

White Tag-CFO

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670-676 Congress St.
see - 181-183 State St.