

Peering Ice Cream.



I-2 INDUSTRIAL ZONE

APPLICATION FOR PERMIT

PERMIT ISSUED 00263
MAR 29 1963
CITY OF PORTLAND

Class of Building or Type of Structure Installation
Portland, Maine, March 29, 1963

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 240-296 St. John Street Within Fire Limits? _____ Dist. No. _____
 Owner's name and address Deering Ice Cream, 184 St. John St. Telephone _____
 Lessee's name and address _____ Telephone _____
 Contractor's name and address Ballard Oil & Equip. Co., 135 Marginal Way Telephone 2-1991
 Architect _____ Specifications _____ Plans yes No. of sheets 1
 Proposed use of building Store No. families _____
 Last use _____ " _____ No. families _____
 Material _____ No. stories 1 Heat _____ Style of roof _____ Roofing _____
 Other buildings on same lot _____
 Estimated cost \$ _____ Fee \$ 5.00

General Description of New Work

To install air conditioning system as per plans

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** Ballard Oil & Equip. Co.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____
 Has septic tank notice been sent? _____ Form notice sent? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
 Framing Lumber—Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____
 Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet:
 Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
 If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:
OK 3/29/63 - agf

Miscellaneous

Will work require disturbing of any tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes
Deering Ice Cream Co.
Ballard Oil & Equip. Co.

CS 301

INSPECTION COPY

Signature of owner By: [Signature]

P.

NOTES

id- 2-6-3 Completed as per plan JRE

X

Permit No. 63/263
 Location 240-296th St. W. 4
 Owner Fleming Dr. Curran
 Date of permit 3/29/63
 Notif. closing-in
 Inspn. closing-in
 Final Notif.
 Final Inspn.
 Cert. of Occupancy issued
 Staking Out Notice
 Form Check Notice



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, January 7, 1963

PERMIT ISSUED 00023 JAN 7 1963 CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location 240-296 St. John St. Use of Building Ice Cream Shop No. Stories 1 New Building Existing
Name and address of owner of appliance Deering Ice Cream Corp., 84 St. John St.
Installer's name and address Ballard Oil & Equipment Company 135 Marginal Way Telephone 2-1991

General Description of Work

To install Oil-fired commercial hot water heater.

IF HEATER, OR POWER BOILER

Location of appliance 1st fl. rear Any burnable material in floor surface or beneath? none
If so, how protected? Kind of fuel? oil
Minimum distance to burnable material, from top of appliance or casing top of furnace 3'
From top of smoke pipe goes to rear and connects with metalbestos chimney From sides or back of appliance 1'
Size of chimney flue 8" metalbestos-existing Other connections to same flue none
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

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

IF COOKING APPLIANCE

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

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? (\$2.00 for one heater, etc., \$1.00 additional for each additional heater, etc., in same building at same time.)

APPROVED:

OK 1-7-63 [Signature]

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

CS 300

INSPECTION COPY

Signature of Installer

[Signature: T. Gardner Ballard]

AM

NOTES

Approved

Date of permit

Owner

Location

Permit No.

63/23

240-396

1/2/63

1/2/63

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1-8-63

Completed

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FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, December 14, 1932

PERMIT ISSUED DEC 14 1932 01674 CITY OF PORTLAND MAINE

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location 266 St. John Street Use of Building Ice Cream Shop No. Stories 1 New Building Existing
Name and address of owner of appliance Deering Ice Cream Corp., 2 184 St. John St.
Installer's name and address Portland Gas Light Co., 5 Temple St. Telephone

General Description of Work

To install gas-fired # CB-20 Vulcan Hart Charr. Broiler
102 Caloric Hot plate

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to burnable material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

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

IF COOKING APPLIANCE

Location of appliance 1st floor Any burnable material in floor surface or beneath? no
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? no Distance to combustible material from top of appliance? 2'
From front of appliance 4' From sides and back 3' From top of smoke pipe
Size of chimney flue Other connections to same flue
Is hood to be provided? yes If so, how vented? thru roof Forced or gravity? 35,000
If gas fired, how vented? thru roof Rated maximum demand per hour 35,000

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Both appliances set on stainless steel tables
Hood vent by Patten Gill Ross Co Permit 62/1375

Amount of fee enclosed? 3.00 (\$2.00 for one heater, etc., \$1.00 additional for each additional heater, etc., in same building at same time.)

APPROVED:

O.K. 12-14-32 [Signature]

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

Portland Gas Light Co.

Signature of Installer By: [Signature]

CS 300

INSPECTION COPY

PA

NOTES

1-8-63 Completed *RP*
X

Permit No. *62/1674*
Location *266 St. Paul St.*
Owner *De Witt Lee Green Corp*
Date of permit *1/14/62*
Approved _____

Large ruled area for notes, divided into two columns by a vertical line.



APPLICATION FOR PERMIT

Class of Building or Type of Structure Sign

Portland, Maine, December 7, 1962

PERMIT ISSUED
DEC 13 1962
CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 240-296 St. John Street Within Fire Limits? _____ Dist. No. _____
 Owner's name and address Samuel Poorvu, 209 Washington St., Boston Telephone _____
 Lessee's name and address Dearing Ice Cream, 184 St. John Street Telephone _____
 Contractor's name and address Coyne Sign Co., 145 St. John St. Telephone _____
 Architect _____ Specifications _____ Plans yes No. of sheets 1
 Proposed use of building I.e. Cream Store No. families _____
 Last use _____ " _____ No. families _____
 Material _____ No. stories 1 Heat _____ Style of roof _____ Roofing _____
 Other buildings on same lot _____
 Estimated cost \$ _____ Fee \$ 2.00

General Description of New Work

To erect electric roof sign ^{11x20'} as per plan
Non-flashing

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** Coyne Sign Co.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____
 Has septic tank notice been sent? _____ Form notice sent? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
 Framing Lumber—Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____
 Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
 Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
 If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

J. E. M.

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Coyne Sign Co.

CS 301

INSPECTION COPY

Signature of owner By: *J. E. M.*

J.M.

NOTES

1-8-63 Completed *BP*

(Faint, mostly illegible text)

APPROVED BY:

DATE: _____

SIGNATURE: _____

Permit No. 621116618

Location 240-32nd St. N.Y.C.

Owner Deer Island Park

Date of permit 1/12/63

Notif. closing-in _____

Insps. closing-in _____

Final Notif. _____

Final Inspn. _____

Cert. of Occupancy issued _____

Staking-Out Notice _____

Form Check-Notice _____

100



1-2 INDUSTRIAL ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure Roof sign

Portland, Maine, November 20, 1962

PERMIT ISSUED

01557

NOV 20 1962

CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 240-296 St. John Street Within Fire Limits? _____ Dist. No. _____

Owner's name and address _____ Telephone _____

Lessee's name and address Deering Ice Cream Co., 184 St. John St. Telephone _____

Contractor's name and address Coyne Sign Co., 195 St. John St. Telephone _____

Architect _____ Specifications _____ Plans YES No. of sheets 1

Proposed use of building _____ No. families _____

Last use _____ No. families _____

Material _____ No. stories _____ Heat _____ Style of roof _____ Roofing _____

Other buildings on same lot _____

Estimated cost \$ _____ Fee \$ 2.00

General Description of New Work

To erect roof sign 8'x12' as per plan

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** Coyne Sign Co.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____

Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____

Has septic tank notice been sent? _____ Form notice sent? _____

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Kind of roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____

Framing Lumber—Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____

Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage:

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

E. E. M.

Miscellaneous

Will work require disturbing of any tree on a public street? NO

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

Coyne Sign Co.

CS 301

INSPECTION COPY

Signature of owner By: *J. J. Coyne*

PH 7

Permit No. 6811557
 Location 240-296 W. Elm St.
 Owner Deering Ice Cream Co.
 Date of permit 11/23/62
 Notif. closing-in _____
 Inspn. closing-in _____
 Final Notif. _____
 Final Inspn. _____
 Cert. of Occupancy issued _____
 Staking Out Notice _____
 Form Check Notice _____

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APR 9, 1987

BUILDING PERMIT APPLICATION **Portland**

APPLICANT WILL OBTAIN ALL PERMITS 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: 184 St. John St. - 1st floor
Owner or lessee's name: Deering Ice Cream Tel: 77-2127
Address: same

Contractor's name: F. W. Cunningham & Sons Tel: 713 0246
Address: P. O. Box 1140 04104

Subcontractors: _____

APR 29 1987

City Of Portland

| | |
|----------------|-------------|
| TYPE OF USE | CONDOMINIUM |
| STORY | |
| NEIGHBORHOOD | |
| DATE FORBIDDEN | |

VI. DESCRIPTION OF WORK:

To make interior renovations to office as per plans.
1 sheet of plans. send permit to 1 2 04104

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

| | | | |
|-----------------------|----------------------|----------------------|--------------|
| CONSTRUCTION | REPAIRS | ALTERATIONS | NEW BUILDING |
| RESIDENTIAL BUILDINGS | COMMERCIAL BUILDINGS | INDUSTRIAL BUILDINGS | OTHER |
| NEW | REPAIR | ALTERATION | OTHER |
| REPAIR | ALTERATION | OTHER | OTHER |
| ALTERATION | OTHER | OTHER | OTHER |
| OTHER | OTHER | OTHER | OTHER |

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:
DISTRICT: _____ STREET FRONTAGE: _____
SETBACKS: front _____ back _____ side _____
ZONING BOARD APPROVAL: no yes (date) _____
PLANNING BOARD APPROVAL: no yes (date) _____

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

XVI. SIGNATURE OF FIELD INSPECTOR (CED): _____ **DATE:** _____

XVII. FEES:
base fee: _____
subdivision fee: _____
site plan review fee: _____
other fees: _____
late fee: _____
TOTAL: 145.00

XVIII. SPACE FOR FIGURING / ADDITIONAL COMMENTS:

| | |
|--|--|
| 1. WATER SUPPLY <input checked="" type="checkbox"/> public <input type="checkbox"/> private | 8. CHIMNEY type _____ # fireplaces _____ material _____ |
| 2. SEWER <input type="checkbox"/> public <input checked="" type="checkbox"/> private | 9. FRAMING: floor joists _____ size _____ max. on centers _____ |
| 3. HEAT type _____ fuel _____ | ceiling joists _____ rafters _____ studs _____ wall studs _____ |
| 4. FOUNDATION type _____ thickness _____ footing _____ | 10. If 1-story building w/ masonry walls: wall thickness _____ height _____ |
| 5. ROOF type _____ pitch _____ covering _____ rad _____ | 11. BEDROOM WINDOWS height _____ width _____ sill height _____ egress window? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 6. PLUMBING # tubs _____ # showers _____ # lavatories _____ # laundry tubs _____ # flush _____ # other _____ | |
| 7. ELECTRICAL service _____ size _____ # smoke detectors _____ | |
| NUMBER OF OFF-STREET PARKING SPACES: enclosed _____ outdoors _____ | |

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office
Green - Applicant
Yellow - CED
Pink - Tax Assessor
Gold - GPCOG

PERMIT TO INSTALL PLUMBING 246-297

1908

PERMIT NUMBER

Date Issued 8-29-62
 Installation For: Deering Ice Cream Shop
 Name of Bldg. Deering Ice Cream Shop
 Owner's Address: Union Station Shopping Ctr.
 Plumber: Scribner & Iverson, Inc. Date: 8-29-62

By J. P. Welch
 PORTLAND PLUMBING INSPECTOR

APPROVED FIRST INSPECTION

Date SEP. 5 1962

by JOSEPH E. WELCH

APPROVED FINAL INSPECTION

Date Feb. 4 1963

by JOSEPH E. WELCH

- TYPE OF BUILDING
 COMMERCIAL
 RESIDENTIAL
 SINGLE
 MULTI FAMILY
 NEW CONSTRUCTION
 REMODELING

| NO. | REPL | PROPOSED INSTALLATIONS | NUMBER | FEE |
|-----|------|-------------------------------------|--------|---------|
| 4 | | SINKS | 4 | \$ 8.00 |
| | | LAVATORIES | | |
| | | TOILETS | | |
| | | BATH TUBS | | |
| | | SHOWERS | | |
| 5 | | DRAINS (floor) | 5 | 4.40 |
| 1 | | HOT WATER TANKS | 1 | .60 |
| | | TANKLESS WATER HEATERS | | |
| | | GARBAGE GRINDERS | | |
| 1 | | SEWING TANKS Soda Fountain | 1 | .60 |
| 1 | | HOUSE SEWERS Dishwasher | 1 | .60 |
| | | ROOF LEADERS (Conn. to house drain) | | |

PORTLAND HEALTH DEPT. PLUMBING INSPECTION TOTAL ▶ \$14.20

REMODELING PORTLAND HEALTH DEPT. PLUMBING INSPECTION TOTAL ▶ \$ 2.00

REMODELING PORTLAND HEALTH DEPT. PLUMBING INSPECTION TOTAL ▶ \$ 8.00

PERMIT TO INSTALL PLUMBING

Date Issued 11-20-62 Address St. John Street
 PORTLAND PLUMBING INSPECTOR Installation For: Union Station Center PERMIT NUMBER
 Owner of Bldg. Sam Poorvu 3008
 Owner's Address: Boston, Massachusetts
 Plumber. Sam Burokoff Date: 11-20-62

| By | APPROVED FIRST INSPECTION | NEW | | REPL | PROPOSED INSTALLATIONS | NUMBER | FEE |
|---|---------------------------|-----|--|------|-------------------------------------|--------|---------|
| | | | | | | | |
| By <u>J. P. Welch</u> | APPROVED FIRST INSPECTION | | | | SINKS | | |
| | | | | | LAVATORIES | | |
| Date <u>Nov 21, 1962</u> | APPROVED FINAL INSPECTION | | | | TOILETS | | |
| | | | | | BATH TUBS | | |
| By <u>JOSEPH P. WELCH</u> | APPROVED FINAL INSPECTION | | | | SHOWERS | | |
| | | | | | DRAINS | | |
| Date <u>Nov 21-1962</u> | APPROVED FINAL INSPECTION | | | | HOT WATER TANKS | | |
| | | | | | TANKLESS WATER HEATERS | | |
| By <u>JOSEPH P. WELCH</u> | APPROVED FINAL INSPECTION | | | | GARBAGE GRINDERS | | |
| | | | | | SEPTIC TANKS | | |
| By | APPROVED FINAL INSPECTION | | | | HOUSE SEWERS | 1 | \$ 2.00 |
| | | | | | ROOF LEADERS (Conn. to house drain) | | |
| TYPE OF BUILDING <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> SINGLE <input type="checkbox"/> MULTI FAMILY <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> REMODELING | | | | | | TOTAL | \$ 2.00 |

PORTLAND HEALTH DEPT. PLUMBING INSPECTION

REMODELING

PORTLAND HEALTH DEPT. PLUMBING INSPECTION

TOTAL \$ 8.00

PERMIT TO INSTALL PLUMBING

1598

PERMIT NUMBER

Date Issued 6-29-62
 PORTLAND PLUMBING INSPECTOR

Address St. John Street
 Installation For: Union Station Shopping Center
 Owner of Bldg. Sam Poorvu
 Owner's Address: Boston, Massachusetts
 Plumber: P. Reiben & Company Date: 6-29-62

By J. P. Welch

APPROVED FIRST INSPECTION

Date SEP. 6 1962

By JOSEPH P. WELCH

APPROVED FINAL INSPECTION

Date SEP. 6 1962

By JOSEPH P. WELCH

- By
- TYPE OF BUILDING
 - COMMERCIAL
 - RESIDENTIAL
 - SINGLE
 - MULTI FAMILY
 - NEW CONSTRUCTION
 - REMODELING

| NEW | REPL | PROPOSED INSTALLATIONS | NUMBER | FEE |
|-----|------|-------------------------------------|--------|---------|
| | | | | |
| | | SINKS | | |
| | | LAVATORIES | | |
| | | TOILETS | | |
| | | BATH TUBS | | |
| | | SHOWERS | | |
| | | DRAINS | | |
| | | HOT WATER TANKS | | |
| | | TANKLESS WATER HEATERS | | |
| | | GARBAGE GRINDERS | | |
| | | SEPTIC TANKS | | |
| | 4 | HOUSE SEWERS | 4 | \$ 8.00 |
| | | ROOF LEADERS (Conn. to house drain) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

PORTLAND HEALTH DEPT. PLUMBING INSPECTION

TOTAL ▶ \$ 8.00



APPLICATION FOR PERMIT

Class of Building or Type of Structure Ventilation

Portland, Maine, October 18, 1962

NEW TISSOT
47375
OCT 22 1962
CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 240-296 St. John St. Within Fire Limits? _____ Dist. No. _____

Owner's name and address Samuel Poorvu, 209 Washington St., Boston Telephone _____

Lessee's name and address Deering Ice Cream Co., 184 St. John St. Telephone _____

Contractor's name and address Pettengill Ross Co., 57 Cross St. Telephone 2-6223

Architect _____ Specifications _____ Plans yes No. of sheets 1

Proposed use of building Ice Cream Store No. families _____

Last use _____ No. families _____

Material _____ No. stories _____ Heat _____ Style of roof _____ Roofing _____

Other buildings on same lot _____

Estimated cost \$ _____ Fee \$ 5.00

General Description of New Work

To install forced ventilation for grille as per plan

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** Pettengill Ross Co.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____

Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____

Has septic tank notice been sent? _____ Form notice sent? _____

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Kind of roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____

Framing Lumber—Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____

Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

Miscellaneous

Will work require disturbing of any tree on a public street? no

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

Pettengill Ross Co.

CS 301

INSPECTION COPY

Signature of owner By: H. E. Barbours

P.H.

NOTES

1-8-63 Completed

[Handwritten signature]

Permit No. 6211371
 Location 240-296th St
 Owner *[Handwritten name]*
 Date of permit 1-8-63
 Notif. closing-in
 Inspn. closing-in
 Final Notif.
 Final Inspn.
 Cert. of Occupancy issued
 Staking Out Notice
 Form Check Notice

Multiple horizontal lines for notes and data entry.

April 9, 1987

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

0 APPLICANT: **FILL OUT 1 - 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 184 St. John St. - 1st floor

Owner or lessee's name: Deering Ice Cream Tel. 772-2827
Address same

Contractor's name F. W. Cunningham & Sons Tel. 773-0246
Address P. O. Box 1140 04104

Subcontractors: _____ **PERMIT ISSUED**

APR 20 1987

City Of Portland

| | |
|--|--|
| II. NEW SUBDIVISION OR EXISTING LOT REFERENCE | |
| Name | |
| Lot | |
| Block | |
| Block & lot Reg./fees | |
| Date recorded | |

| | | | | |
|---------------------------|--|---|--------------------------------------|------------------------------------|
| III. PROPOSED USE: | CODE: <u>124</u> <u>office</u> <input type="checkbox"/> other <u>explain</u> | Seasonal <input type="checkbox"/> | Condominium <input type="checkbox"/> | Apartment <input type="checkbox"/> |
| IV. PAST USE: | <u>same</u> | | | |
| V. OWNERSHIP: | <u>PUBLIC</u> (Federal/State/Local government) | <u>PRIVATE</u> (Individual/corp./nonprofit) | | |

VI. DESCRIPTION OF WORK:

To make interior renovations to office as per plans.
1 sheet of plans. send permit to # 2 04104

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

| | | |
|---|---|--|
| VIII. EST. CONSTRUCTION COST: _____ | IX. GRASS/IMP. OF LAND: _____ | BUILDING: _____ |
| X. RESIDENTIAL BUILDINGS ONLY: | BEDROOMS: | XI. RESIDENTIAL UNITS: |
| <input type="checkbox"/> NEW DWELLING UNITS WITH | <input type="checkbox"/> 1 BDRM <input type="checkbox"/> 2 BDRMS <input type="checkbox"/> 3 BDRMS | <input type="checkbox"/> NEW DWELLINGS |
| <input type="checkbox"/> EXISTING DWELLING UNITS WITH | | <input type="checkbox"/> EXISTING DWELLINGS |
| | | <input type="checkbox"/> NEW RESIDENTIAL UNITS |

XII. SIGNATURE OF APPLICANT: F. W. Cunningham & Sons _____ DATE: APR 20 1987

DO NOT WRITE BELOW THIS LINE

| | |
|--|-------------------------|
| XIII. ZONING: | XIV. OFFICE USE: |
| DISTRICT _____ STREET FRONTAGE _____ | TAX MAP # _____ |
| SETBACKS: front _____ back _____ side _____ | LOT # _____ |
| ZONING BOARD APPROVAL: no <input type="checkbox"/> yes <input type="checkbox"/> (date) _____ | VALUE/STRUCTURE _____ |
| PLANNING BOARD APPROVAL: no <input type="checkbox"/> yes <input type="checkbox"/> (date) _____ | PERMIT EXPIRATION _____ |

XV. CONDITIONAL USE: variance _____ site plan _____ subdivision _____ shore and flood/drain 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 145.00

XVIII. SPACE FOR FIGURING / ADDITIONAL COMMENTS:

James V. Collins, Sr.

| | |
|---|---|
| 1. WATER SUPPLY <input checked="" type="checkbox"/> public <input type="checkbox"/> private | 8. CHIMNEY * flues * fireplaces |
| 2. SEWER <input type="checkbox"/> public <input checked="" type="checkbox"/> private, type | material |
| 3. HEAT type fuel | 9. FRAMING: floor joists |
| 4. FOUNDATION type | size max. on centers |
| thickness footing | ceiling joists |
| 5. ROOF type pitch | rafters |
| covering load | studs |
| 6. PLUMBING * tubs * showers | wall studs |
| * lavatories * laundry tubs | |
| * flushes * other | |
| SPRINKLER SYSTEM? <input type="checkbox"/> yes <input type="checkbox"/> no | 10. If 1-story building w/ masonry walls: |
| 7. ELECTRICAL service entrance size | wall thickness height |
| * smoke detectors | |
| NUMBER OF OFF-STREET PARKING SPACES: | 11. BEDROOM WINDOWS |
| enclosed outdoors | height width sill height |
| | egress window? <input type="checkbox"/> yes <input type="checkbox"/> no |

PLOT PLAN/DETAILS OF WORK ON REVERSE

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

18 MA. TRU



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 10, 19 87
 Receipt and Permit number D 09265

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: 184 St. John St.
 OWNER'S NAME: Deering Ice Cream ADDRESS: same

| | FEES |
|--|-------------------------------|
| OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>31-60</u> | 5.00 |
| FIXTURES: (number of) Incandescent _____ Fluorescent <u>22x</u> (not strip) TOTAL <u>1-10</u> | 3.00 |
| Strip Fluorescent _____ ft. | |
| SERVICES: Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ .. | |
| METERS: (number of) _____ | |
| MOTORS: (number of) Fractional _____ | |
| 1 HP or over _____ | |
| RESIDENTIAL HEATING: Oil or Gas (number of units) _____ | |
| Electric (number of rooms) _____ | |
| COMMERCIAL OR INDUSTRIAL HEATING: Oil or Gas (by a main boiler) _____ | |
| Oil or Gas (by separate units) _____ | |
| Electric Under 20 kws _____ Over 20 kws _____ | |
| APPLIANCES: (number of) | |
| Ranges _____ | Water Heaters _____ |
| Cook Tops _____ | Disposals _____ |
| Wall Ovens _____ | Dishwashers _____ |
| Dryers _____ | Compactors _____ |
| Fans _____ | Others (denote) _____ |
| TOTAL | |
| MISCELLANEOUS: (number of) | 1.00 |
| Branch Panels <u>1</u> | |
| Transformers _____ | |
| Air Conditioners Central Unit _____ | |
| Separate Units (windows) _____ | |
| Signs 20 sq. ft. and under _____ | |
| Over 20 sq. ft. _____ | |
| Swimming Pools Above Ground _____ | |
| In Ground _____ | |
| Fire/Burglar Alarms Residential _____ | |
| Commercial _____ | |
| Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ | |
| over 30 amps _____ | |
| Circus, Fairs, etc. _____ | |
| Alterations to wires _____ | |
| Repairs after fire _____ | |
| Emergency Lights, battery _____ | |
| Emergency Generators _____ | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT | INSTALLATION FEE DUE: _____ |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) | DOUBLE FEE DUE: _____ |
| | TOTAL AMOUNT DUE: <u>9.00</u> |

INSPECTION: Will be ready on 4-14-87, 19 87; or Will Call _____
 CONTRACTOR'S NAME: ABC Electric
 ADDRESS: 56 Clinton St.
 TEL.: 775-0903
 MASTER LICENSE NO.: 3294 SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: _____

901800

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$10. Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: FOE -#565 (Eagles) Phone # 773-1520
Address: 265 Valley St; Ptd, ME 04101 B.Lambert
LOCATION OF CONSTRUCTION 265 Valley St. 1st St. (Dm. St.)
Contractor: Consolidated Environmental Services
Address: 205 Lincoln St. So. Ptd Phone # ME 04106
Est. Construction Cost: _____ Proposed Use: COMM w/o tank
Past Use: COMM

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 ABANDONMENT AND FILL-IN of tank site

For Official Use Only
Date: 8/14/90
Subdivision: _____ Name: _____
Inside Fire Limits: _____ Lot: AK 24 1000
Bldg Code: _____ Ownership: _____
Time Limit: _____ Estimated Cost: _____
PERMIT ISSUED
City Of Portland

Foundation: _____ (1000-gln tank)
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 _____
10. Masonry Materials _____ Weather Exposure _____
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: _____
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

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

Permit Received By Louise E. Chase
Signature of Applicant: _____ Date 8/14/90
Signature of CEO: _____ Date 8-22-90
Inspection Dates _____

902199

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$85.00 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: The Portland Eagles Phone # 874-2755
Address: P.O. Box 565 Portland, Maine 04104
LOCATION OF CONSTRUCTION 184 St. John St.
Contractor: Sentry Protective Sys Sub: _____
Address: 536 Riverside St. 04103 Phone # 797-7799

For Official Use Only PERMIT ISSUED
Date September 4, 1990 Subdivision _____
Inside Fire Limits _____ Name DEC 7 1990
Bldg Code _____ Lot _____
Time Limit _____ Ownership: City Of Portland
Estimated Cost: \$12,664.90
Street Frontage Provided: Zone on Mt. Esc 51170
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)

Est. Construction Cost: 12,664.90 Proposed Use: Club room with bar/kitchen
Past Use: _____
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion to install burglar/fire alarm system
AS PER 2 sheets of plans

Foundation:
1. Type of Soil: _____
2. Setbacks - 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: _____
Historic Preservation
Not in District or landmark
Does not require review
Requires Eavestrough

Roof:
1. Truss or Rafter Size 00.28 Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
Action: _____ Approved _____
Approved with Conditions _____
Denied _____

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

Heating:
Type of Heat: _____

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

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

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

Permit Received By Latini
Signature of Applicant _____ Date 9/4/90

Signature of CEO _____
Inspection Dates _____
PERMIT ISSUED
WRITE LETTER

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ ~~85.00~~ 85.00

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

| Type | Inspection Record | Date |
|-------|-------------------|----------------|
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |

COMMENTS 2 sheets of plants

Nov 30th / 90 Alarm systems tested, approved by F.D.

12/27/90 with Insp. of Association with exterior and interior

12/17/90 Alarm systems completed total of operating throughout the building

Signature of Applicant

Michelle Storzio

Date

Sept 4, 1990

CITY OF PORTLAND, MAINE
ZONING BOARD OF APPEALS



MERRILL S. SELTZER
Chairman

JOHN C. KNOX
Secretary

ERIC J. GOUVIN
THOMAS F. JEWELL
PA. M. JOHNSON
DEWEY MARTIN, JR.
MICHAEL E. WESTOFT

December 7, 1990

Sentry Protective Systems
536 Riverside Street
Portland, ME 04103

Re: 184 St. John St., Portland, ME. (Eagles)

Dear Sir:

Your application to install burglar/fire alarm systems at 184 St. John St. has been reviewed and a permit is herewith issued subject to the following requirements(s):

No certificate of occupancy can be issued until all requirements of this letter are met.

1. All required Fire Alarm Systems shall have the capability of "Zone Disconnect" via switches or key pad program provided the method is approved by the Fire Prevention Bureau.
2. All remote annunciators shall have a visible "trouble" indicator along with the Fire Alarm "Zone" indicators.
3. Any Master Box connected to the Municipal Fire Alarm System shall have a supervised Municipal Disconnect Switch.
4. Alarm Box shall be provided and a key to the Fire Alarm Control Panel placed inside.
5. A smoke detector shall be located at the top of the elevator shaft.

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

Sincerely,

P. Samuel Hoff
Chief of Inspection Services

cc: Lt. Garroway PFD

dla

002199

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$85.00 Zone _____ Map # _____ Lot# _____

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

Owner: The Portland Eagles Phone # 874-9755
 Address: P.O. Box 565 Portland, Maine 04104
 LOCATION OF CONSTRUCTION 184th St. Johnst.
 Contractor: Sentry Protective Sys Sub.: _____
 Address: 536 Riverside St. 04103 Phone # 797-7799
 Est. Construction Cost: 12,664.90 Proposed Use: Club room with bar/kitchen
 Past Use: _____
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion to install burglar/fire alarm system
as per 2 sheets of plans

PERMIT ISSUED

For Official Use Only

Date September 4, 1990 Subdivision: _____
 Name DEC 7 1990
 Inside Fire Limits _____ Lot _____
 Bldg Code _____ Ownership: City Of Portland
 Time Limit _____ Private _____
 Estimated Cost \$12,664.90

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

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

Floor:
 1. Joist Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Spacing: _____ 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 _____ Action: Approved
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____

Chimney:
 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 Latini
 Signature of Applicant Michael Latini Date 9/4/90
 Signature of CEO Michael Latini
 Inspection Dates _____



HISTORIC PRESERVATION

1. In Historic District or Landmark.
 2. Does not require review.
 3. Requires Review.

8 MR. IRVING

PLUMBING APPLICATION

PROPERTY ADDRESS:
Town or City: PORTLAND
Street: 184 ST JOHN ST
Subdivision Lot #

PROPERTY OWNERS NAME:
Last: KAYLES First: PORTLAND

Applicant Name: WYBACS PLUMBING
Mailing Address of Owner/Applicant (If Different): 158 ST JOHN ST PORTLAND ME 04102

PORTLAND 3977 TOWN COPY

Date Permit Issued: 09.10.90 \$ 161.00 FEE Charged Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 01103

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 9/10/90

Caution: Inspection Required

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

Local Plumbing Inspector Signature: _____ Date Approved: JUL 12 1991

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 EASYC'S 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 # LV1618

SEP 11 1990

| Hook-Up & Piping Relocation Maximum / Hook-Up | Column 2 Type of Fixture | | Column 1 Type of Fixture | |
|--|-----------------------------|--|-----------------------------|------------------------------|
| | Number | Type of Fixture | Number | Type of Fixture |
| <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> | | Hosebibb / Sillcock | | Bathtub (and Shower) |
| | 9 | Floor Drain | | Shower (Separate) |
| | 2 | Urinal | 3 | Sink |
| | | Drinking Fountain | 7 | Wash Basin |
| | | Indirect Waste | 6 | Water Closet (Toilet) |
| | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | | Grease/Oil Separator | 1 | Dish Washer |
| | | Dental Cuspidor | 1 | Garbage Dis. |
| | | Bidet | | Laundry Tub |
| | | Other: <u>GLASS WASHER</u> | 1 | Water Heater |
| Number of Hook-Ups & Relocations | 1 | Fixtures (Subtotal) Column 2 | 19 | Fixtures (Subtotal) Column 1 |
| Hook-Up & Relocation Fee | 12 | Fixtures (Subtotal) Column 2 | 12 | Fixtures (Subtotal) Column 1 |
| SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE | | | | |
| | | | 31 | Total Fixtures |
| | | | \$ 61.00 | Fixture Fee |
| | | | \$ | Hook-Up & Relocation Fee |
| | | | \$ 61.00 | Permit Fee (Total) |

901946

Major site Plan review

Permit # 901946 City of Portland BUILDING PERMIT APPLICATION Fee \$350 - Zone _____ Map # _____ Lot# 874-9763
Please fill out any part which applies to job. Proper plans must accompany form. (9/7/90 \$1220. - building permit)

Don Scott

Fraternal Order of Eagles Phone # 773-9448
 Address: 265 Valley St; Ptld, ME 04102 (CALL FOR PICK-UP)
 LOCATION OF CONSTRUCTION 184 St. John St.
 Contractor: Owner Sub.: _____
 Address: _____ Phone # _____
 Est. Construction Cost: 240,000. Proposed Use: Commercial
 Past Use: 9/7/90 - Lodge Hall
 # of Existing Res. Units _____ # of New Res. Units Vacant Industrial
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion CHANGE OF USE - from vacant industrial building parking for 75 cars to Lodge Hall

For Official Use Only PERMIT ISSUED
 Date: 4/12/90 Subdivision: _____ Name: _____
 Inside Fire Limits: _____ Lot: SEP 28 1990
 Bldg Code: _____ Ownership: _____ Public _____
 Time Limit: _____
 Estimated Cost: 240,000. City of Portland
 Zoning: _____
 Street Frontage Provided: _____ Back _____ Side _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) EXCISE 9-11-90

MAJOR SITE PLAN REVIEW
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 9/7/90 James Ashey
 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 Raftar 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 Louise Chase
 Signature of Applicant Norman Gray
 Signature of CEO James Ashey
 Inspection Dates _____
PERMIT ISSUED WITH LET

White-Tax Assessor Yellow-GPCOG White Tag -CEO [8] MR. JAY © Copyright

913316

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$31.40 Zone _____ Map # _____

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

PERMIT ISSUED

Owner: Eagles #535 Phone # _____
Address: 184 St. John St; Ptld, ME 04102

LOCATION OF CONSTRUCTION 184 St. John Sst

Contractor: Sign Design Co Sub: 799-2000

Address: 743 Broadway; So Ptld Phone # ME 04106

Est. Construction Cost: _____ Proposed Use: frat bld w 2 signs

_____ Past Use: frat bldg

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

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

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion erect two signs - each one 2'x8'

Date 12/1 3/91 For Official Use Only
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost _____

Subdivision: _____
 Name _____
 Lot _____
 Ownership: _____
 Private _____

DEC 18 1991
 CITY OF PORTLAND

Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other _____ (Explain) WNA 12-17-91

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: _____
 6. _____

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

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

Heating:
 Type of Heat: _____

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

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

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

Permit Received By Louise E. Chase

Signature of Applicant R. Roger Flannery Date 13 Dec 91

CEO's District 3 Roger Flannery

CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO [3] Mrs. Louise

White - Tax Assessor



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date Sept. 20, 19 90
 Receipt and Permit number 01599

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: 184 St. John St.
 OWNER'S NAME: F.-O. E. Eagles ADDRESS: same FEES

| | | | | | |
|-----------------------------------|--|-----------------------|-----------------------------------|------------------------------|-------------|
| OUTLETS: | Receptacles _____ | Switches _____ | Plugmold _____ | ft. TOTAL <u>31-60</u> | <u>5.00</u> |
| FIXTURES: (number of) | Incandescent _____ | Flourescent _____ | (not strip) TOTAL <u>30</u> | <u>5.00</u> | |
| | 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) _____ | _____ | | | |
| APPLIANCES: (number of) | Electric Under 20 kws _____ | Over 20 kws _____ | _____ | | |
| | Ranges _____ | Water Heaters _____ | _____ | | |
| | Cook Tops _____ | Disposals _____ | _____ | | |
| | Wall Ovens _____ | Dist.washers _____ | _____ | | |
| | Dryers _____ | Compactors _____ | _____ | | |
| | Fans _____ | Others (denote) _____ | _____ | | |
| | TOTAL _____ | _____ | | | <u>4.00</u> |
| MISCELLANEOUS: (number of) | _____ | | | | |
| | Branch Panels <u>4</u> _____ | _____ | | | |
| | Transformers _____ | _____ | | | |
| | Air Conditioners Central Unit _____ | _____ | | | |
| | Separate Units (windows) _____ | _____ | | | |
| | Signs 20 sq. ft. and under _____ | _____ | | | |
| | Over 20 sq. ft. _____ | _____ | | | |
| | Swimming Pools Above Ground _____ | _____ | | | |
| | In Ground _____ | _____ | | | |
| | Fire/Burglar Alarms Residential _____ | _____ | | | |
| | Commercial _____ | _____ | | | |
| | Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ | _____ | | | |
| | over 30 amps _____ | _____ | | | |
| | Circus, Fairs, etc. _____ | _____ | | | |
| | Alterations to wires _____ | _____ | | | |
| | Repairs after fire _____ | _____ | | | |
| | Emergency Lights, battery _____ | _____ | | | |
| | Emergency Generators _____ | _____ | | | |
| | FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT _____ | INSTALLATION FEE DUE: | _____ | | |
| | FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____ | DOUBLE FEE DUE: | _____ | | |
| | | TOTAL AMOUNT DUE: | <u>14.00</u> | | |

INSPECTION: Will be ready on 9/21/90, 1990; or Will Call _____
 CONTRACTOR'S NAME: Corey Elec.
 ADDRESS: 184 Read St. Portland, Maine 04103
 TEL.: 775-1380
 MASTER LICENSE NO.: 3630
 LIMITED LICENSE NO.: _____
 SIGNATURE OF CONTRACTOR: Richard D. Corey

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

ELECTRICAL INSTALLATIONS —

Permit Number 01599

Location 184 St Johns St

Owner EOB Electricals

Date of Permit 9-20-90

Final Inspection 12-3-90

By Inspector PRD

Permit Application Register Page No. 91

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 9-21-90 by SB

PROGRESS INSPECTIONS: 10-24-90 FC / _____

10-29-90 SB / _____

_____ / _____

_____ / _____

_____ / _____

_____ / _____

DATE:

REMARKS:

12-3-90

Final / CO - - partial

Partial



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date September 4, 1990
 Receipt and Permit number 01554

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: 184 St. John St.
 OWNER'S NAME: Eagles of Portland ADDRESS: P.O. Box 565 Portland 04104

| | |
|---|-------------------------------|
| OUTLETS: | FEES |
| Receptacles _____ | |
| Switches _____ | |
| Plugmold _____ ft. TOTAL _____ | |
| 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 _____ | Water Heaters _____ |
| Cook Tops _____ | Disposals _____ |
| Wall Ovens _____ | Dishwashers _____ |
| Dryers _____ | Compactors _____ |
| Fans _____ | 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 _____ | 5.00 |
| In Ground _____ | |
| Fire/Burglar Alarms Residential _____ | |
| Commercial <input checked="" type="checkbox"/> _____ | |
| Heavy Duty Outlet, 220 Volt (such as welders) 30 amps and under _____ | |
| over 30 amps _____ | |
| Circus, Fairs, etc. _____ | |
| Alterations to wires _____ | |
| Repairs after fire _____ | |
| Emergency Lights, battery _____ | |
| Emergency Generators _____ | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT | INSTALLATION FEE DUE: _____ |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____ | DOUBLE FEE DUE: _____ |
| | TOTAL AMOUNT DUE: <u>5.00</u> |

INSPECTION: Will be ready on _____, 19__; or Will Call _____
 CONTRACTOR'S NAME: Sentry Protective Systems
 ADDRESS: 536 Riverside St. Portland, Maine
 TEL.: 797-7799
 MASTER LICENSE NO.: _____
 LIMITED LICENSE NO.: LTD electrician #15395 SIGNATURE OF CONTRACTOR: Michel Durigo

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

ELECTRICAL INSTALLATIONS -

Permit Number 01554

Location 184 St. John

Owner BRAGLES & PANTLAW

Date of Permit 9-4-90

Final Inspection 12-3-90

By Inspector SRB

Permit Application Register Page No. 95-

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: 10-29-90 SRB / _____

_____/_____
_____/_____
_____/_____
_____/_____
_____/_____

DATE:

REMARKS:

10-29-90

checked per Sontky telephone call --
they are using regular cable --
call on back-notification then that building
is CLASS B place of assembly --
metallic systems requires

12-3-90

Final / Co - - partial

013281 013281

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$30. Zone _____ Map # _____ Lot# _____

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

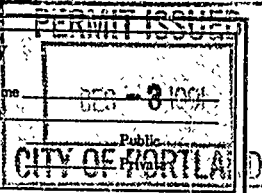
Owner: Portland Eagles Phone # 773-9449
 Address: 184 St John St, Pld, ME 04102
 LOCATION OF CONSTRUCTION: 184 St John St.
 Contractor: owner Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed User: W&M temp sign
 Past User: _____
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories _____ # Bedrooms _____ Lot Size: _____
 Is Prop. set Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: erect temp sign - 10/1/91 to 12/31/91

For Official Use Only

Date: 11/25/91 Subdivision: _____
 Inside Fire Limit's: _____ Name: _____
 Bldg Code: _____ Lot: _____
 Time Limit: _____ Ownership: _____
 Estimated Cost: _____

Zoning: R-2
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other: W&M - 12-3-91



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. Ldg 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 _____ Action _____ Approved
 2. Sheathing Type _____ Size _____ Action _____ Approved with Conditions
 3. Roof Covering Type _____

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

Heating:
 Type of Heat: _____

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

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

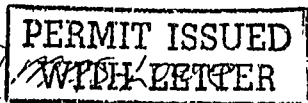
Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By: Louise E. Chase

Signature of Applicant: James Ashy Date: 11-26-91

CEO's District: 30 James Ashy

CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO 131



White - Tax Assessor

919316

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$31.40 Zone _____ Map # _____ Lot# _____

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

Owner: Eagles #535 Phone # _____
Address: 184 St. John St; Ptl'd, ME 04102

LOCATION OF CONSTRUCTION 184 St. John Sst

Contractor: Sign Design Co Sub: 799-2000

Address: 743 Broadway; So Ptl'd Phone # ME 04106

Est. Construction Cost: _____ Proposed Use: frat bldg w 2 signs

_____ Past Use: frat bldg

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

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

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion erect two signs - each one 2' x 8'

PERMIT ISSUED
DEC 18 1991
CITY OF PORTLAND

For Official Use Only
Date 12/23/91 Subdivision: _____
Inside Fire Limits _____ Name _____
Bldg Code _____ Lot _____
Time Limit _____ Ownership _____
Estimated Cost _____

Zoning: _____
Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other WNA 12-17-91 (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 _____

White - Tax Assessor

Ceiling:

1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____ Spacing _____ Not in District nor Landmark.
3. Type Ceilings: _____ Size _____ Does not require review.
4. Insulation Type _____
5. Ceiling Height: 9' 1 1/2" Requires Review.

Roof:

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

Chimneys:

Type: _____ Number of Fire Places _____ Date: _____
Square Footage: _____

Heating:

Type of Heat: Gas, Low

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.

Louisee F. Chase

Permit Received By

Signature of Applicant W. Power Flannery Date 13 Dec 91

JEO's District 3 Roger Flannery

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature] Mrs. Lowe

PLOT PLAN

1/2/92 - Completed SL



| FEES (Breakdown From Front) | | Type | Inspection Record | Date |
|-----------------------------|-------|------|-------------------|------|
| Base Fee \$ | 51.40 | | | / / |
| Subdivision Fee \$ | | | | / / |
| Site Plan Review Fee \$ | | | | / / |
| Other Fees \$ | | | | / / |
| (Explain) | | | | / / |
| Late Fee \$ | | | | / / |

COMMENTS

CERTIFICATION

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

13 Dec 91

SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

ACORD. CERTIFICATE OF INSURANCE

PRODUCER

ISSUE DATE (MM/DD/YY)

12/12/91

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

TURNER BARKER INSURANCE
157 Fox Street
Portland, ME 04101

COMPANIES AFFORDING COVERAGE

CO/LE

SUB-CODE

COMPANY LETTER **A**

USF & G

COMPANY LETTER **B**

USF & G

COMPANY LETTER **C**

COMPANY LETTER **D**

COMPANY LETTER **E**

INSURED

FRATERNAL ORDER OF EAGLES #565
184 St. John Street
Portland, ME 04102

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 | | | | |
| | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | GENERAL AGGREGATE \$2,000,000 |
| | CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. | | | | PRODUCTS-COMP/OPS AGGREGATE \$2,000,000 |
| A | OWNER'S & CONTRACTOR'S PROT. | 1MP12642567300 | 11/28/91 | 11/28/92 | PERSONAL & ADVERTISING INJURY \$1,000,000 |
| | | | | | EACH OCCURRENCE \$1,000,000 |
| | | | | | FIRE DAMAGE (Any one fire) \$50,000 |
| | | | | | MEDICAL EXPENSE (Any one person) \$5,000 |
| | | | | | COMBINED SINGLE LIMIT |
| | | | | | BODILY INJURY (Per person) |
| | | | | | BODILY INJURY (Per accident) |
| | | | | | PROPERTY DAMAGE |
| | | | | | EACH OCCURRENCE \$1,000,000 |
| | | | | | AGGREGATE \$1,000,000 |
| | | | | | STATUTORY |
| | | | | | (EACH ACCIDENT) |
| | | | | | (DISEASE—POLICY LIMIT) |
| | | | | | (DISEASE—EACH EMPLOYEE) |
| | EXCESS LIABILITY | | | | |
| | <input checked="" type="checkbox"/> OTHER THAN UMBRELLA FORM | TBD | 11/28/91 | 11/28/92 | |
| | WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY | | | | |
| | OTHER | | | | |

RECEIVED

DEC 13 1991

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

Fraternal Club

DSPT. OF BUILDING CITY OF PORTLAND

CERTIFICATE HOLDER

Roger Flannery
Sign Design
743 Broadway
S. Portland, ME 04106

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

(Signature)

ACORD 15-S (3/88)

©ACORD CORPORATION 1988

RECEIVED

DEC 13 1991

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE
ERECTED ON A BUILDING AT 184 St. John St.
IN PORTLAND, MAINE Eagles #565 being the owner of the premises
at 184 St. John St. in Portland, Maine hereby gives consent to the
erection of a certain sign owned by Eagles #565 over the
~~public 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 erection of said sign:

And in consideration of the issuance of said permit Eagles #565,
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 within ten days of notice from said
Inspector of Buildings that 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 13th day of Dec 1991.

James W. Ashez G.M.

03/25/88

913009
 Permit # _____ 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: Fraternal Order of Eagles Phone # 773-1143
 Address: 184 St. John St; Ptd #565 ME 04102

 LOCATION OF CONSTRUCTION 184 St. John St.

 Contractor: HESA Sub: _____

 Address: Wash Ave; Ptd, ME Phone # _____

 Est. Construction Cost: 1300. Proposed Use: non-profit org
non-profit W 3

 Past Use: org

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

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

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

 Explain Conversion erect three awnings - 3'x5' = 3'x5' = 3'x10'
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: _____ Spacing 16" O.C.
4. Joists Size: _____
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

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

Interior Walls:

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

White - Tax Assessor

| | | |
|------------------------------|-----------------------------|--|
| For Official Use Only | | PERMIT ISSUED SEP 11 1991 CITY OF PORTLAND |
| Date: <u>3/29/91</u> | Subdivision: _____ | |
| Inside Fire Limits: _____ | Bldg Code: _____ | Owner: _____ |
| Time Limit: _____ | Estimated Cost: <u>1300</u> | |

 Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required:

- Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) WN 9-10-91

HISTORIC PRESERVATION**Ceiling:**

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

Roof:

1. Truss or Rafter Size _____ Span _____ Action: _____ Approved
2. Sheathing Type _____ Size _____ Approved with Conditions
3. Roof Covering Type _____ Date: 3/29/91

Chimneys:

- Type: _____ Number of Fire Places _____ Signature: _____

Heating:

- Type of Heat: _____

Electrical:

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

Plumbing:

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

Swimming Pools:

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

 Permit Received By Louise E. Chase

 Signature of Applicant James Ashby Date 3/29/91
James Ashby

 CEO's District B Mrs. Howe

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

PLOT PLAN

N
▲

FEES (Breakdown From Front)
Base Fee \$ 35-
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

| Type | Inspection Record | Date |
|-----------------------------|-------------------|---------------------|
| <i>Drawings in place OK</i> | | <i>10 1 19 1971</i> |
| <i>in plan</i> | | / / |
| | | / / |
| | | / / |
| | | / / |
| | | / / |

COMMENTS

CERTIFICATION

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

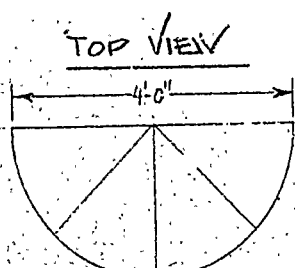
SIGNATURE OF APPLICANT

ADDRESS

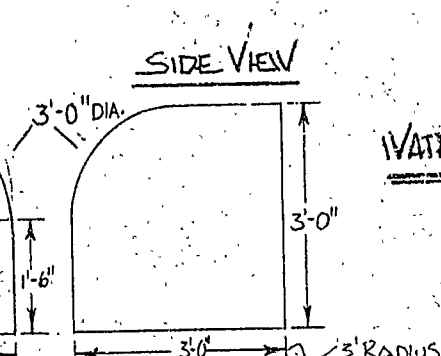
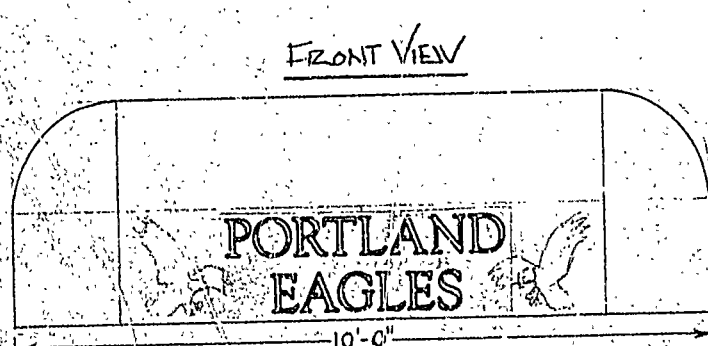
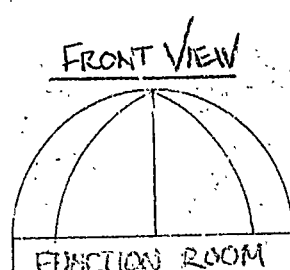
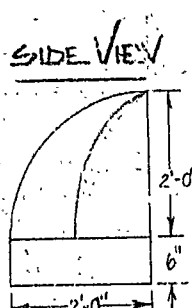
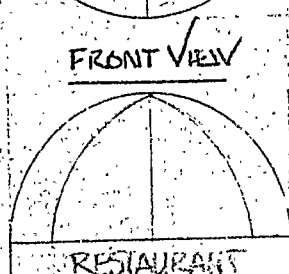
PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.



DOME STYLE



WATERFALL STYLE

| | | | |
|---|-----------------|---|--|
| <p>Designed for:</p> <p>PORTLAND EAGLES</p> | <p>Location</p> | <p>DRAWING SPECIFICATIONS ACCEPTED BY</p> | <p>This design is the All production & reserved by N.E.S. for your personal displayed outside exhibited in any</p> |
|---|-----------------|---|--|

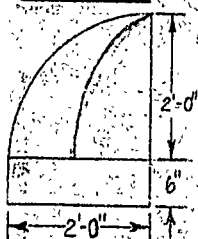
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

AUG 29 1991

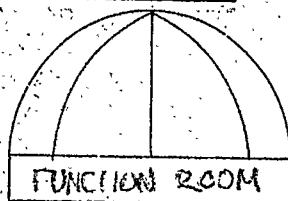
RECEIVED

DOME STYLE

SIDE VIEW



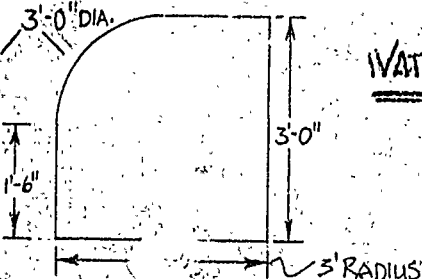
FRONT VIEW



FRONT VIEW



SIDE VIEW



WATERFALL STYLE

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

AUG 29 1991

RECEIVED

N.E.S.A.

- new england signs & awnings
- new england screenprinting & apparel
- new england specialty advertising

56 Warren Ave. Portland, ME 04103

Quality signs • Creative Awnings

DATE 8-19-91

SCALE 1/2" = 1'-0"

DRAWN BY

SHAWN JENNINGS

DRAWING NUMBER

ONE

Location

DRAWING SPECIFICATIONS
ACCEPTED BY

This design is the property of N.E.S.A.
All production & duplication rights are
reserved by N.E.S.A. This drawing is
for your personal use and is not to be
displayed outside of your organization or
exhibited in any fashion.

Document #18
Date: 8/30/91

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN No.

F31.02

ISSUED BY
Unitex East
311 Roosevelt Avenue
P.O. Box 346
Pawtucket, RI 02860

Date work performed

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

FOR New England Specialty Advertising AT _____

CITY _____ STATE ME 04038

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 registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric used _____ Reg No F31.02

The Flame Retardant Process Used _____

(will or will not)

Be Removed By Washing

Product Code: UARED

We hereby certify this to be a true copy of the original "CERTIFICATE OF FLAME RESISTANCE" issued to us, "original copy" of which has been filed with the California State Fire Marshal.

Signed _____

By _____

RECEIVED

AUG 29 1991

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN No.

GA-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 below have been flame-retardant treated (or are inherently nonflammable)

FOR _____ ADDRESS _____
CITY _____ STATE _____

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



(a) The articles described below 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 below 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.

Name of Applicator or Production Superintendent

JOHN BOYLE & COMPANY, INC.

By

Walter Conise
Specialty Products Manager

SOLD TO:

NEW ENGLAND SPEC ADV 4
AWNING DESIGNS
56 WARREN AVENUE
PORTLAND
ME 04103

CONTROL#--> 05622
ORDER#--> 31300
INVOICE#--> 274600
MFG DATE--> 10-07-70
QUANTITY--> 9.00

STYLE-----> 622
DESCRIPTION--> 61"
REGISTER NO.--> F-121.4
CALENDAR NO.-->

Sell Certified Flame-Retardant Fabrics By BOYLE

Your product will meet the rigid specifications of the California Fire Marshal.

FLAMETEST II®
PROTEC®

BIMINI FLAMETEST®
ULTRA FAB®

WIDE TRAILER FABRIC
PATIO®

FLAMETEST®
SURFMATE®

JOHN BOYLE & COMPANY AND DISTRIBUTORS





Underwriters Laboratories Inc.®

NEW ENGLAND SPECIALTY ADVERTISING
MR T HOLMSTED
56 WARREN AVE
PORTLAND ME 04103.

Jim Ashie
RECEIVED

AUG 2 9 1991

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

Your most recent listing is shown below. Please review this information and report any inaccuracies to the UL Engineering staff member who handled your Assignment.

UXYT
Signs

March 21, 1991

NEW ENGLAND SPECIALTY ADVERTISING,
PORTLAND ME 04103

E137843 (M)

56 WARREN AVE

LOOK FOR LISTING MARK ON PRODUCT

666930001

Underwriters Laboratories Inc.®

F110191274
112

For information on placing an order for UL Listing Cards in a 3 x 5 inch card format, please refer to the enclosed ordering information.

UNDERWRITERS LABORATORIES INC.

An independent, not-for-profit organization testing for public safety

333 Plingsten Road
Northbrook, Illinois 60062-2096, USA
708/272-8800
Telex: 6502543343
FAX No. (708) 272-4129

1285 West Whitman Road
Melville, L.I., New York 11747-3081, USA
516/271-8200
Telex: 6852015
FAX No. (516) 271-8259

1655 Scott Blvd.
Santa Clara, California 95050-4169, USA
408/985-2400
Telex: 164219
FAX No. (408) 296-0256

12 Laboratory Drive
P.O. Box 13095
Research Triangle Park,
North Carolina 27709-3095, USA
919/549-1400
Telex: 4937028
FAX No. (919) 549-1842

912838

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$35.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Portland Eagles Phone # _____
 Address: 184 St. John Street, Portland
 LOCATION OF CONSTRUCTION 184 St. John Street
 Contractor: *Jim Ashey Sub: _____
 Address: 184 St. John St. Phone # 772-1789
 Est. Construction Cost: _____ Proposed Use: Parking lot w/tent
 Past Use: Parking lot
 # 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 a 10' x 20' tent (one day - 7/20/91)

For Official Use Only
 Date 7-16-91 Subdivision _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ of _____
 Time Limit _____ Ownership _____
 Estimated Cost N/A Public _____
 CITY OF PORTLAND

Zoning: D-2
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other _____ (Explain) _____

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 _____ Spacing _____
 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: _____
 Action: _____ Approved _____
 Approved with Conditions _____

Roof:
 1. Truss or Rafters Size _____ Span _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 Date: 7/16/91
 Signature: [Signature]

Chimneys:
 Type: _____ Number of Fire Places _____
 Signature: [Signature]

Heating:
 Type of Heat: _____

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

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

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

Permit Received By Kate Barker
 Signature of Applicant Shaun Geisinger Date 7-16-91
 Signature of CEO [Signature] Date _____

Inspection Dates _____
 White Tax Assessor _____ Yellow-GPCOG _____ White Tag -CEO 15

PERMIT ISSUED WITH REQUIREMENTS

© 1988 Right EP/COG 1988

PLOT PLAN

N



FEES (Breakdown From Front)

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

| Type | Inspection Record | Date |
|-------|-------------------|----------------|
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |

COMMENTS

~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~
~~_____~~

Signature of Applicant Shawn Heisinger

Date 7-16-91

BUILDING PERMIT REPORT

DATE: 7-18-91

PERMIT ISSUED
WITH REQUIREMENTS

ADDRESS: 184 St John St

REASON FOR PERMIT: erect a temporary 10' x 20' tent
7-20-91

BUILDING OWNER: Portland Englee

CONTRACTOR: Jim Asby - Everett + Peris Inc

PERMIT APPLICANT Shawn Geisinger

APPROVED: Yes DENIED

CONDITION OF APPROVAL OR DENIAL:

1. The Easement from the building may not be blocked in any way by either the tent and its supports or by furnishing under the tent

est. 1919

IN MAINE
1-800-833-6679



LEAVITT & PARRIS, INC.

448 Payne Road, P.O. Box 621
SCARBOROUGH, MAINE 04074
(207) 883-4184

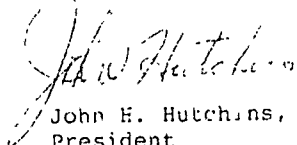
MANUFACTURERS OF AVANT PRODUCTS
FOR THE ENTERTAINMENT, PROMOTION, AND TRADE SHOW INDUSTRIES

To whom it may concern:

This is to certify that the tents supplied to Portland Eagles #205
are certified flame resistance that meets the requirements of the
California Fire Marshall, Underwriters Laboratory Test Flamibility
354-H and Government Spec. CCC-C-428A.

Very truly yours,

LEAVITT & PARRIS, INC.


John H. Hutchins, III
President

RENTORS OF QUALITY TENTS, CANOPIES AND COMPLETE ACCESSORIES
SERVICES FOR THE ENTERTAINMENT, PROMOTION, AND TRADE SHOW INDUSTRIES

for 3000 sq ft
Building

Entrance

10'
30'
TENT off Building 10' x 20'

Driveway

Parking
Spaces

SPRINT 10th Street

Pratt Drive

Portland Estates
565
Phot Plan
TENT 20' x 20'
Levitt & Harris



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

September 26, 1990

Fraternal Order of Eagles
265 Valley Street
Portland, ME 04102

RE: 184 St. John Street

Dear Sir:

Your application to change of use from vacant Industrial building to lodge hall has been reviewed and a permit is herewith issued subject to the following requirement(s).

No certificate of occupancy can be issued until all requirements of this letter are met.

Site Plan Review Requirements

Fire Department - Approved - Lt. Garroway
Inspection Services - Approved - B. Giroux
Public Works - Approved - S. Harris
Planning Division - Approved, that a guardrail be placed along the northern property line of the parking lot. - S. Greene

Building & Fire Code Requirements

1 through 21 of the attached requirements.

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

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

cc: P. Niehoff - Public Works Department
S. Harris - Public Works Department
Lt. Garroway - Portland Fire Department
S. Greene - Planning Division
W. Giroux - Zoning Codes Enforcement Officer

Building Permit Report

Date: September 24, 1990

Address: 184 St. John Street

Reason for permit: Change of use from vacant industrial building to lodge hall - place of assembly.

Building Owner: Fraternal Order of Eagles

Contractor: Owner

Permit Applicant: Norman Gray

Approved: xxx Denied: _____

Conditions of Approval:

1. All required Fire Alarm Systems shall have the capability of "Zone Disconnect" via switches or key pad program provided the method is approved by the Fire Prevention Bureau.
2. All remote annunciators shall have a visible "trouble" indicator along with the Fire Alarm "Zone" indicators.
3. Any Master Box connected to the Municipal Fire Alarm System shall have a supervised Municipal Disconnect Switch.
4. Doors opening into stair well enclosures shall be of at least 1 hour fire protection rating and shall swing in the direction of exit travel.
5. Stair well enclosures and other vertical openings shall be of 1 hour fire protection rated resistance construction.
6. Ramps shall comply with Section 5-2.5 of the N.F.P.A. 101 Life Safety Code.
7. Door hardware shall be in accordance with Section 8-2.2.2.3 and 5-2.1.7. N.F.P.A..
8. First floor front left two offices must be provided with a second means of egress.
9. All rails and guards shall be in accordance with the requirements of Section 5-2.2.6 N.F.P.A..
10. All stairs shall be in accordance with the requirements of 5-2.2 of N.F.P.A..
11. A floor plan showing arrangement of tables, chairs, and other furnishings shall be submitted to Fire Prevention Bureau prior to the final inspection.

12. Illumination of means of egress including the exterior exit discharge areas shall be in accordance with Section 5-8 N.F.P.A..
13. Emergency lighting shall be provided in accordance with Section 5-9 N.F.A..
14. Marking of means of egress shall be in accordance with the requirements of section 5-10 N.F.P.A..
15. Platform construction shall be in accordance with Section 8-3.2.1.2 N.F.P.A..
16. Concealed spaces shall be protected in accordance with N.F.P.A. #13 Section 4-4.4 N.F.P.A..
17. Kitchen plans to be submitted for further review Reference N.F.P.A. #96
18. Provide further information and plans on elevator and elevator control room.
19. Interior finish shall be in accordance with Section 8-3.3 N.F.P.A..
20. Detection, Alarm, and Communication Systems shall be in accordance with Section 8-3.4 N.F.P.A..
21. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

4/12/90

Fraternal Order of Eagles

Applicant: 265 Valley St; Portl 1, ME 04102

184 St. John St.

Date

Mailing Address

Address of Proposed Site

commercial

Site Identifier(s) from Assessors Maps

Proposed Use of Site

Zoning of Proposed Site

3/4 acre

Acres of Site / Ground Floor Coverage

Site Location Review (DEP) Required: () Yes () No

Proposed Number of Floors _____

Board of Appeals Action Required: () Yes () No

Total Floor Area _____

Planning Board Action Required: () Yes () No

-- PARKING FOR 75 CARS--

Other Comments: _____

Date Dept. Review Due: _____

MAJOR SITE PLAN REVIEW

FIRE DEPARTMENT REVIEW

(Date Received) _____

| | ACCESS TO SITE | ACCESS TO STRUCTURES | SUFFICIENT VEHICLE TURNING ROOM | SAFETY HAZARDS | HYDRANTS | SIAMOSE CONNECTIONS | SUFFICIENCY OF WATER SUPPLY | OTHER | |
|------------------------|----------------|----------------------|---------------------------------|----------------|----------|---------------------|-----------------------------|-------|----------------------------|
| APPROVED | | | | | | | | | |
| APPROVED CONDITIONALLY | | | | | | | | | CONDITIONS SPECIFIED BELOW |
| DISAPPROVED | | | | | | | | | REASONS SPECIFIED BELOW |

REASONS: _____

(Attach Separate Sheet if Necessary)

4-18-90

SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form

Fraternal Order of Eagles
 Applicant

265 Valley St; Portland, ME 04102
 Mailing Address

commercial
 Proposed Use of Site

3/4 acre /
 Acreage of Site / Ground Floor Coverage

4/12/90
 Date

184 St. John St.
 Address of Proposed Site

Site Identifier(s) from Assessors Maps _____

Zoning of Proposed Site _____

Site Location Review (DEP) Required: () Yes () No

Board of Appeals Action Required: () Yes () No

Planning Board Action Required: () Yes () No

Proposed Number of Floors _____

Total Floor Area _____

Other Comments: --- PARKING FOR 75 CARS---

Date Dept. Review Due: _____

MAJOR SITE PLAN REVIEW

BUILDING DEPARTMENT SITE PLAN REVIEW
 (Does not include review of construction plans)

- Use does NOT comply with Zoning Ordinance
- Requires Board of Appeals Action
- Requires Planning Board/City Council Action

Explanation _____
 Use complies with Zoning Ordinance — Staff Review Below

Zoning: **SPACE & BULK,**
 as applicable

| | DATE | ZONE LOCATION | INTERIOR OR CORNER LOT | 40 FT. SETBACK AREA (SEC. 21) | USE | SEWAGE DISPOSAL | REAR YARDS | SIDE YARDS | FRONT YARDS | PROJECTIONS | HEIGHT | LOT AREA | BUILDING AREA | AREA PER FAMILY | WIDTH OF LOT | LOT FRONTAGE | OFF-STREET PARKING | LOADING BAYS |
|------------------------|------|---------------|------------------------|-------------------------------|-----|-----------------|------------|------------|-------------|-------------|--------|----------|---------------|-----------------|--------------|--------------|--------------------|--------------|
| COMPLIES | | | | | | | | | | | | | | | | | | |
| COMPLIES CONDITIONALLY | | | | | | | | | | | | | | | | | | |
| DOES NOT COMPLY | | | | | | | | | | | | | | | | | | |

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: [Handwritten Signature]

SIGNATURE OF REVIEWING STAFF, _____
 BUILDING DEPARTMENT—ORIGINAL

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Steve Harris

Fraternal Order of Eagles

4/12/90

Applicant
265 Valley St; Portland, ME 04102

Date

Mailing Address

184 St. John St.
Address of Proposed Site

commercial

Proposed Use of Site

Site Identifier(s) from Assessors Maps

3/4 acre /

Acreage of Site / Ground Floor Coverage

Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No

Proposed Number of Floors _____

Board of Appeals Action Required: () Yes () No

Total Floor Area _____

Planning Board Action Required: () Yes () No

Other Comments: --- PARKING FOR 75 CARS---

Date Dept. Review Due: _____

MAJOR SITE PLAN REVIEW

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) _____

| | TRAFFIC CIRCULATION | ACCESS | CURB CUTS | ROAD WIDTH | PARKING | SIGNALIZATION | TURNING MOVEMENTS | LIGHTING | CONFLICT WITH CITY CONSTRUCTION PROJECT | DRAINAGE | SOIL TYPES | SEWERS | CURBING | SIDEWALKS | OTHER | |
|------------------------|---------------------|--------|-----------|------------|---------|---------------|-------------------|----------|---|----------|------------|--------|---------|-----------|-------------------------|----------------------------|
| APPROVED | | | | | | | | | | | | | | | | CONDITIONS SPECIFIED BELOW |
| APPROVED CONDITIONALLY | | | | | | | | | | | | | | | | |
| DISAPPROVED | | | | | | | | | | | | | | | REASONS SPECIFIED BELOW | |

REASONS: _____

(Attach Separate Sheet if Necessary)

Steve Harris 9/7/90

SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

CITY OF PORTLAND, MAINE
 SITE PLAN REVIEW
 Processing Form

Planning Dept

Fraternal Order of Eagles Date 4/12/90

Applicant 265 Valley St; Portland, ME 04102 Address of Proposed Site 184 St. John St.

Mailing Address commercial Site Identifier(s) from Assessors Maps _____

Proposed Use of Site 3/4 acre Zoning of Proposed Site _____

Acreage of Site / Ground Floor Coverage _____

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors _____

Board of Appeals Action Required: () Yes () No Total Floor Area _____

Planning Board Action Required: () Yes () No

Other Comments: --- PARKING FOR 75 CARS---

Date Dept. Review Due: _____

MAJOR SITE PLAN REVIEW

PLANNING DEPARTMENT REVIEW

(Date Received) _____

- Major Development — Requires Planning Board Approval: Review Initiated
- Minor Development — Staff Review Below

| | LOADING AREA | PARKING | CIRCULATION PATTERN | ACCESS | PEDESTRIAN WALKWAYS | SCREENING | LANDSCAPING | SPACE & BULK OF STRUCTURES | LIGHTING | CONFLICT WITH CITY PROJECTS | FINANCIAL CAPACITY | CHANGE IN SITE PLAN |
|------------------------|--------------|---------|---------------------|--------|---------------------|-----------|-------------|----------------------------|----------|-----------------------------|--------------------|---------------------|
| APPROVED | ✓ | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| APPROVED CONDITIONALLY | | ✓ | | | | | | | | | | |
| DISAPPROVED | | | | | | | | | | | | |

REASONS: That a guardrail be placed along the northern property line of the site parking lot.

(Attach Separate Sheet If Necessary)

Subl 7-4-90
 SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY



STATE OF MAINE
DEPARTMENT OF PUBLIC SAFETY
OFFICE OF STATE FIRE MARSHAL
AUGUSTA

FIRE SPRINKLER SYSTEM

CONSTRUCTION PERMIT

No 034

Permission is hereby given to: Project Title: Portland Eagles Club
D.O.R. Fire Protection Systems Occupancy: Assembly
P. O. Box 231 Type of System: 13
Saco, ME 04072 License #: 026

At (give address) 184 St. John Street

In the city (or town) of Portland

According to plans hitherto filed with the Commissioner and now approved.

Such plans bear File No. 034, and no departure from such plans shall be made without prior approval in writing.

This permit will expire at midnight on March 18, 1991

This permit is issued under the provisions of Title 32, Chapter 20, Section 12004-I.

Nothing herein shall excuse the holder of this permit for failure to comply with local ordinances, zoning laws, or other pertinent legal restrictions.

Dated the 19th day of Sept. A.D., 1990.

Commissioner

All plans for construction of or alteration to fire sprinkler systems shall prominently display the fire sprinkler system contractor's license number, as well as the responsible managing supervisor's certification number and the name and address of the person to install the fire sprinkler system. Each permit issued shall be displayed prominently at the site of construction. Within 30 days of the completion of a new fire sprinkler system or an addition to an existing fire sprinkler system, a fire sprinkler system contractor shall provide to the State Fire Marshal a copy of the permit signed by the certified responsible managing supervisor representing that the fire sprinkler system has been installed according to specifications of the approved plan to the best of the supervisor's knowledge, information, and belief.

FEE: \$65.00

001946

Permit # 001946 City of Portland **BUILDING PERMIT APPLICATION** Fee \$350. Zone 200 Map # 204-9735 Lot# 204-9735

Please fill out any part which applies to job. Proper plans must accompany form. (9/7/90 1220. - building permit)

Owner: Fraternal Order of Eagles Phone # 773-9143
 Address: 265 Willey St; Ptd, ME 04102 (CALL FOR PICK-UP)
 LOCATION OF CONSTRUCTION: 33rd St, John St
 Contractor: Owner Sub:
 Address: _____ Phone # _____
 Est. Construction Cost: 240,000. Proposed Use: Commercial
 Past Use: 9/7/90 - Lodge Hall
 # of Existing Res. Units _____ # of New Res. Units Vacant Industrial Building
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: CHANGE OF USE - from vacant industrial building parking for 75 cars - to lodge hall

For Official Use Only
 Date: 4/12/90 Subdivision Name: **PERMIT ISSUED**
 Inside Fire Limits: _____ Lot: _____
 Bldg Code: _____ Ownership: SEP 26 1990 Private
 Time Limit: _____
 Estimated Cost: 240,000 City of Portland
 Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back E Side _____
 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) CR 1220-9-11-90

MAJOR SITE PLAN REVIEW
 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 9/16 90
 2. Header Sizes _____ Span(s) James Ashey
 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: 02C
 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 Louise Chase
 Signature of Applicant James Ashey Date 4-12-90
 Signature of CEO Norman Gray
 Inspection Dates _____
PERMIT ISSUED WITH LETTER

09-21-90 White-Tax Assessor Yellow-GPCOG White Tag-CEO © Copyright GPCOG 1988

PLOT PLAN

6/27/91 - Sidewalk work started!

N



FEES (Breakdown From Front)

Base Fee \$ _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ 350 _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type

Inspection Record

Date

| Type | Date |
|-------|----------------|
| _____ | ____/____/____ |
| _____ | ____/____/____ |
| _____ | ____/____/____ |
| _____ | ____/____/____ |
| _____ | ____/____/____ |

COMMENTS

9/27/90 - Interior renovation work started - some extent
11/30/90 - Many inspections were made during the renovations work. A letter
of C. O. G. is being issued (conditional) to the completion of the
entire building, to be approved by the fire dept. No fire or public
activity is allowed on the premises.
6/24/91 - Interior work incomplete.

Contractor has called for inspections throughout the renovation work.
also, called for fire dept. approval as the work progressed.

Signature of Applicant

[Signature]

Date 4-13-91

CITY OF PORTLAND, MAINE
MEMORANDUM

TO: Sam Hoffses, Chief of Inspection Services
FROM: W. Paul Niehoff, Materials Engineer *WPN*
DATE: December 7, 1990
SUBJECT: Eagles Site Plan on St. John Street

Sam, it is my understanding that the Eagles Club on St. John Street has obtained a certificate of occupancy for their building. If this is not the case, please let me know. If they do have a certificate of occupancy, I would like to know why I wasn't contacted prior to the issuance of the C. O.

It is my understanding that the ordinance (copy attached) does not allow issuance of a C. O. temporary or otherwise unless all the work required in the City's right of way has been completed.

I would like to keep the lines of communication open between departments so we can work this type of situation out to everyone's satisfaction.

Please call me if you'd like to discuss this further.

WPN/jmd

pc: N. Daniels, Assistant City Manager
B. Ringrose, City Engineer
W. Boothby, Deputy City Engineer
N. Burns, Corporation Counsel