

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$33.40 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job Proper plans must accompany form

Owner: Mrs. Susan T. Goldberg Phone # _____
 Address: 138 St. John St

LOCATION OF CONSTRUCTION 138 St. John St.

Contractor: Coyne Signs Sub: _____
 Address: 92 Industrial Road Saco 04073 Phone # 7724144

Est. Construction Cost: _____ Proposed Use: restaurant

of Existing Res. Units _____ # of New Res Units _____
 Building Dimensions L _____ W _____ Total Sq Ft _____
 # Stories _____ # Bedrooms _____ Lot S. _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion to exist 6 x 7 pole sign as per plan

For Official Use Only
PERMIT ISSUED
 Date February 8, 1990 Subdivision _____
 Inside Fire Limit _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Owner 12 1990 Public _____ Private _____
 Estimated Cost _____
 City Of Portland
 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 (Explain) _____
 CEK with 2-9-90

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

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

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header 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 Joist Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

Roof:
 1. Trues 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 _____
 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 _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Latini

Signature of Applicant Nasser Chanani Date 2/8/90

Signature of CEO _____ Date _____
 Inspection Dates _____

February 8 1990 White-Tax Assesor Yellow-GPCOG White Tag -CEO

Copyright GPCOG 1988
 107 with Mitchell

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 33.40
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS Insurance form, consent form, and sketch submitted

Sign in place MEM 4/17/90

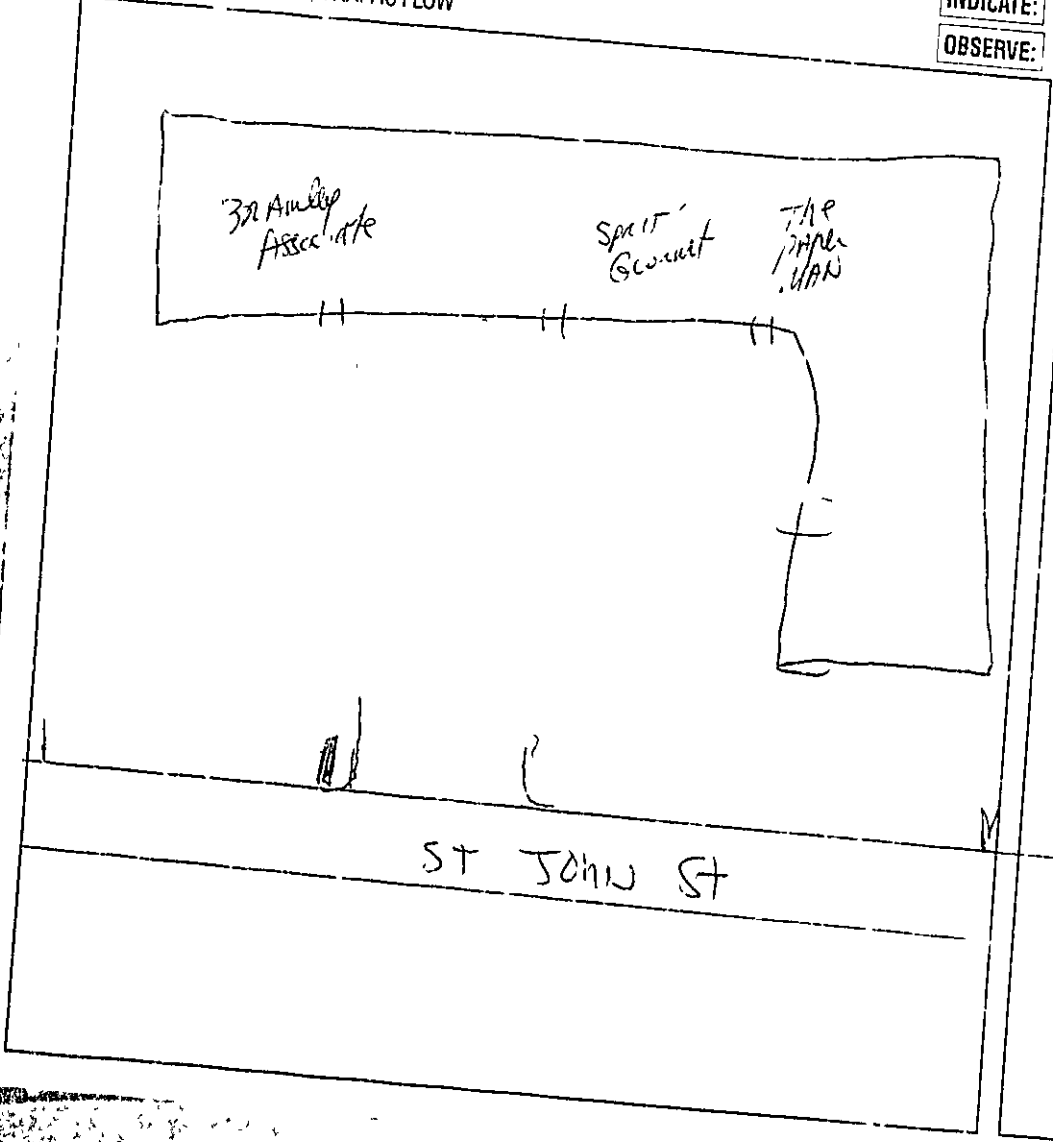
Signature of Applicant Nasser Chanaani
AS Agent For Owner

Date February 8, 1990

PLOT PLAN / WALL CROSS SECTION for MOUNTING & WIRING

SHOW ALL: PROPERTY LINES, BUILDINGS, SIDEWALKS, DRIVEWAYS
DESIGNATE: STREETS, TRAFFIC FLOW

INDICATE: PERTINENT INFO TO CODE, SIGN LOCATION
OBSERVE: HIGH VOLTAGE (10' Rule) ON STREET / TO BUILDING



WALL CROSS SECTION
will have less than
1# of signage for
each foot of
building frontage

RECEIVED
FEB 08 1990
DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED TO BE ERECTED ON A BUILDING AT 138 St. John Street IN PORTLAND, MAINE Susan T. Goldberg being the owner of the premises at 138 St. John Street in Portland, Maine hereby gives consent to the erection of a certain sign owned by Branche Associates over the sidewalk or on the building from said premises as described in application to the Division of Inspection Services of Portland, Maine for a permit to cover the erection of said sign:

And in consideration of the issuance of said permit Susan T. Goldberg, 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 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 7th day of February 1990.

Susan T. Goldberg
Owner's signature

Lessee's signature

RECEIVED
FEB 08 1990
DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

RST
05/09/89

THIS IS THE
PRODUCER
FRED. S. JAMES & CO. OF ME., INC
TWO MONUMENT SQUARE
PORTLAND, MAINE 04101

MAINE BONDING CO.

05/01/89

12 01

07/01/89

1369
DATE TIME
X 12 01 89
1000V

CODE

INSURED

SUSAN T. GOLDBERG
185 CALEB STREET
PORTLAND, MAINE 04102

PROPERTY AND LIABILITY

138 - 154 ST. JOHN STREET
PORTLAND, MAINE

PROPERTY
BASIC BROAD SPECIAL

SPECIAL FORM WITH NORMAL
EXCLUSIONS FLOOD AND
EARTHQUAKE

300,000 1,000 100

GENERAL LIABILITY
COMMERCIAL GENERAL LIABILITY
OWNERS & CONTRACTORS
PROTECTION

GEN. BLDG. ACQUISITION \$ 2,000
PERSONAL & AUTOMOBILE INJURY \$ 1,000
ACCIDENTS \$ 1,000
PERSONAL & AUTOMOBILE FILES \$ 50
ADDITIONAL EXPENSE \$

AUTOMOBILE
LIABILITY
NON/OWNED
HURED
GARAGE

RETRO DATE FOR CLAIMS MADE
ALL VEHICLE

AUTO PHYSICAL DAMAGE
COLLISION DED.
DTC DED.

ALL VEHICLE

EXCESS LIABILITY
UMBRELLA FORM
OTHER THAN UMBRELLA FORM

RETRO DATE FOR CLAIMS MADE

WORKER'S COMPENSATION
AND
EMPLOYERS' LIABILITY

STATE AMOUNT \$
OTHER
FACULTY
AGGREGATE
SELF-INSURED
RETENTION
SITUTORY
\$ (EACH ACCIDENT)
\$ (DISEASE POLICY LIMIT)
\$ (DISEASE EACH EMPLOYEE)

SPECIAL CONDITIONS

OTHER COVERAGE

RECEIVED
FEB 08 1990
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

state & zip

LOSS PAYEE
ADDITIONAL INSURED
FRED. S. JAMES & CO. OF ME., INC.
AUTHORIZED REPRESENTATIVE
By *Richard T. James*

PERMIT # 0007E4 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: J&B Discount
 Address: 138 St. John St., Portland
 LOCATION OF CONSTRUCTION 138 St. John St.
 CONTRACTOR: New England Spec. Ad SUBCONTRACTORS: 835-5579
 ADDRESS: 17 Elm St., Gorham

For Official Use Only

Date: June 30, 1988 Subdivision: Yes / No /
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost _____ Permit Expiration: _____
 Value/Structure _____ Ownership: _____ Public _____ Private _____
 Fee: 10.00

Est. Construction Cost: _____ Type of Use: Temporary Sign
 Part Use: _____
 Building Dimensions L _____ W _____ Sq Ft _____ # Stories _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
Errecting temporary sign (4' x 8') lighted
 Conversion - Explain from 7/1/88 to 8/1/88.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only:
 # Of Dwelling Units _____ # Of New Dwelling Units _____

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

Floors:
 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 _____ Spac(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 Ceiling: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat _____

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

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

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

Zoning:
 District R2 Street Frontage Req. _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____ Special Exception _____
 Other: _____ (Explain) _____
 Date Approved: June 29, 1988

Permit Received By: _____

Signature of Applicant: _____ Date: _____

Signature of CEO: _____ Date: _____

Inspection Dates: _____

PLOT PLAN



FEE'S (Breakdown From Front)
Base Fee \$ 10.00
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Lots Fee \$ _____

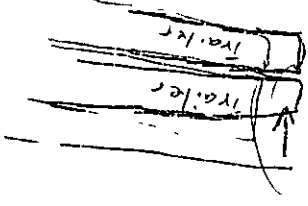
Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS *7/13/88 on location*

Signature of Applicant _____

Date _____

J+B Discount



Entrance

5th JOHN ST.

4x8 Arrow sign
8 ft from road
next to entrance

RECEIVED

JUN 3 0 1968

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

Things to do..TODAY

1983	
JANUARY	JULY
S M T W T F S	S M T W T F S
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
FEBRUARY	AUGUST
S M T W T F S	S M T W T F S
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
MARCH	SEPTEMBER
S M T W T F S	S M T W T F S
4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
APRIL	OCTOBER
S M T W T F S	S M T W T F S
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
MAY	NOVEMBER
S M T W T F S	S M T W T F S
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
JUNE	DECEMBER
S M T W T F S	S M T W T F S

Completed

- 1
- 2
- 3
- 4
- 5
- 6



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date October 17, 1988
 Receipt and Permit number 20191

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: <u>138 St. John Street</u>	ADDRESS: <u>same</u>	FEE:
OWNER'S NAME: <u>Bryan Goldberg</u>		
OUTLETS: Receptacles <u>22</u> Switches <u>2</u> Plugmold _____ ft. TOTAL <u>24</u>		3.00
FIXTURES: (number of) Incandescent <u>5</u> Fluorescent <u>12</u> (not strip) TOTAL <u>17</u>		3.70
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 _____ Cook Tops _____ Wall Ovens _____ Dryers _____ Fans _____	Water Heaters _____ Disposals _____ Dishwashers _____ Compactors _____ Others (denote) _____	
TOTAL _____		
MISCELLANEOUS: (number of) Branch Panels _____ Transformers _____ Air Conditioners Central Unit _____ Separate Units (windows) _____ Signs 20 sq. ft. and under _____ Over 20 sq. ft. _____ Swimming Pools Above Ground _____ In Ground _____ Fire/Burglar Alarms Residential _____ Commercial _____ Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ over 30 amps _____ Circus, Fairs, etc. _____ Alterations to wires _____ Repairs after fire _____ Emergency Lights, battery _____ Emergency Generators _____		
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>3.70</u>	

INSPECTION: Will be ready on Seabee, 1988; or Will Call XX
 CONTRACTOR'S NAME: Gabbe Electric
 ADDRESS: 200 Anderson St. Portland,
 TEL.: _____
 MASTER LICENSE NO.: 3014
 LIMITED LICENSE NO.: _____
 SIGNATURE OF CONTRACTOR: [Signature]

INSPECTOR'S COPY — WHITE

PLEASE CALL WHEN READY AND WILL PICKUP Nassar 772-4144

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$33.40 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job Proper plans must accompany form

Owner Mrs. Susan T. Goldberg Phone # _____
 Address 138 St. John St.
 LOCATION OF CONSTRUCTION 138 St. John St.
 Contractor Coyne Signs Sub. _____
 Address 92 Industrial Road Saco 04078 Phone # 7724144
 Est. Construction Cost _____ Proposed Use restaurant
 Past Use _____
 # of Existing Res Units _____ # of New Res Units _____
 Building Dimensions L _____ W _____ Total Sq Ft _____
 # Stories: _____ # Bedrooms _____ Lot Size _____
 Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion to erect 6 X 7 POLL sign as per plan

For Official Use Only

PERMIT ISSUED

Date February 8, 1990
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost _____

Subdivision Name _____
 Lot _____
 Ownership: FEB-19-1990 Public
 Private

City of Portland

Zoning: B-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) WDA SP 2-9-90

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

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

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

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

Ceiling:
 1. Ceiling Joists Size _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceiling _____
 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 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 Latani

Signature of Applicant Nassar, Harvini Date 2/8/90

Signature of CEO Nassar, Charani AS Agent for owner Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

Copyright GPCOG 1988
MAR. MITCHELL

PERMIT # 601113 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.
 ISSUE PERMIT TO: Bramble Associates - 167 Frances St. (Port.)
 Owner: Susan T. Goldberg - 775-6403 (0410)

For Official Use Only

Date: September 8, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lct _____
 Time Limit _____ Block _____
 Estimated Cost: 211,000.00 Permit Expiration: _____ Public _____
 Value/Structure _____ Ownership: _____ Private _____
 Fee: \$270.00

Address: 185 Caleb St., Portland, ME 04102 (761-9615)

LOCATION OF CONSTRUCTION: 130-140 St. John St.

CONTRACTOR: J. Goduti Assoc. SUBCONTRACTORS: 739-3105

ADDRESS: 43 Fairlawn Ave., So. Portland, Maine 04106

Est. Construction Cost: \$40,000.00 Type of Use: Wholesale/retail

Past Use: Wholesale/retail

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

Is Proposed Use: Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain: Interior renovations, as per plan and

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE: change wood block supports to concrete piers tapered

Residential Buildings Only: # Of New Dwelling Units _____

Foundation: 1. Type of Soil: _____ 2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____ 4. Foundation Size: _____ 5. Other _____

Floor: 1. Sills Size: _____ Sills must be anchored.

2. Girder Size: _____ Size: _____ 3. Lally Column Spacing: _____ Spacing 16" O.C.

4. Joists Size: _____ Size: _____ 5. Bridging Type _____ Size _____

6. Floor Sheathing Type: _____ Size _____ 7. Other Material: _____

Exterior Walls: 1. Studding Size _____ Spacing _____

2. No. windows _____ 3. No. Doors _____ Span(s) _____

4. Header Sizes _____ Yes _____ No _____ 5. Bracing _____

6. Corner Posts Size _____ Size _____ 7. Insulation Type _____ Size _____

8. Sheathing Type _____ Size _____ Weather Exposure _____ 9. Siding Type _____

10. Masonry Materials _____ 11. Metal Materials _____

Interior Walls: 1. Studding Size _____ Spacing _____

2. Header Sizes _____ Span(r) _____ 3. Wall Covering Type _____

4. Fire Wall if required _____ 5. Other Materials _____

Ceiling: 1. Ceiling Joists Size: _____ Spacing _____

2. Ceiling Strapping Size _____ 3. Type Ceilings: _____

4. Insulation Type _____ 5. Ceiling Height: _____

Roof: 1. Truss or Rafter Size _____

2. Sheathing Type _____ 3. Roof Covering Type _____

4. Other _____ Chimneys: _____ 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 _____

2. No. of Tubs or Showers _____ 3. No. of Flushes _____

4. No. of Lavatories _____ 5. No. of Other Fixtures _____

Swimming Pools: 1. Type: _____ Square Footage _____

2. Pool Size: _____ 3. Must conform to National Electrical Code and State Law.

Zoning: District I-2 Street Frontage Req: _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____ Ide _____

Review Required: Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception: _____

Other: _____ (Explain) _____ Date Approved: 10/Sept/88

Permit Received By: George M. Rinaldi Date _____

Signature of Applicant: _____ Date: _____

Signature of CEO: _____ Date: _____

Inspection Date: _____

White Tag - CEO _____ Yellow-GPCOG _____

PERMIT ISSUED
 SEP 19 1988
 City Of Portland

PERMIT ISSUED
 WITH LETTER
 © Copyright GPCOG 1987

PLOT PLAN

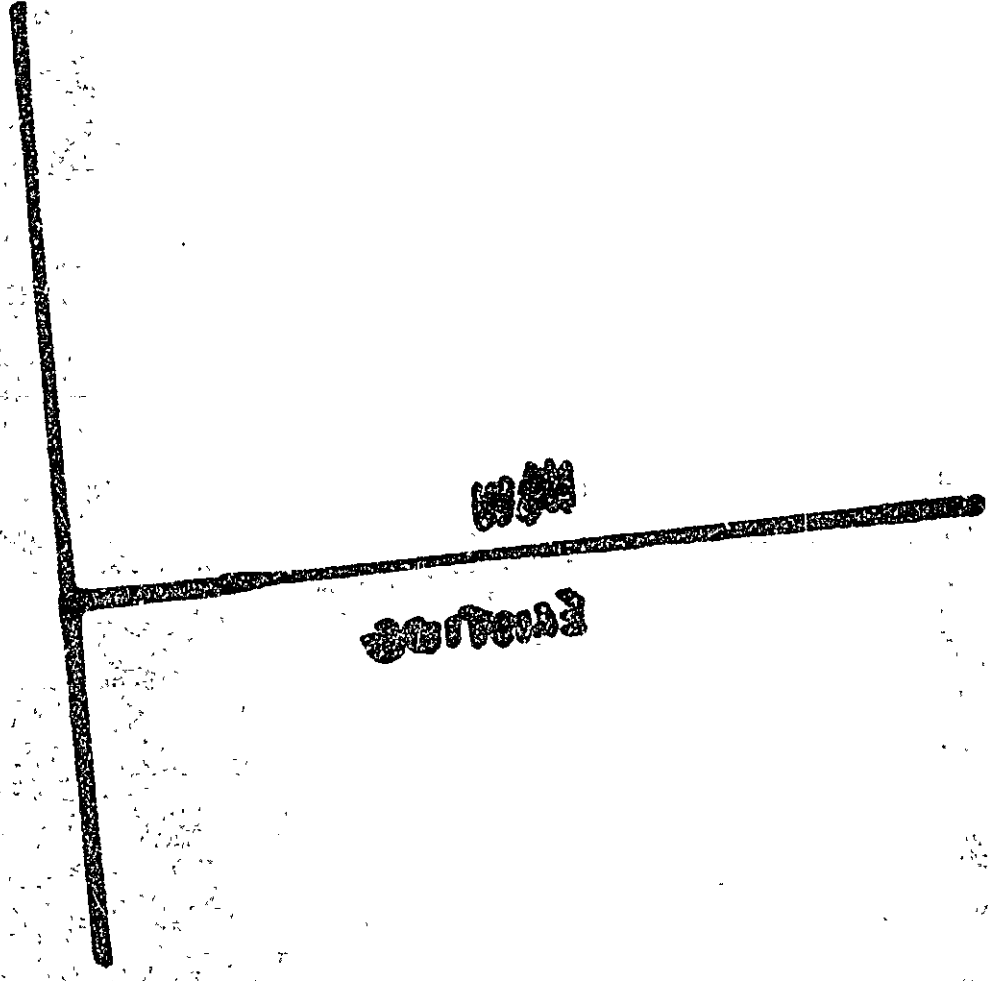


FEES (Breakdown From Front)
Base Fee \$ 220.00 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

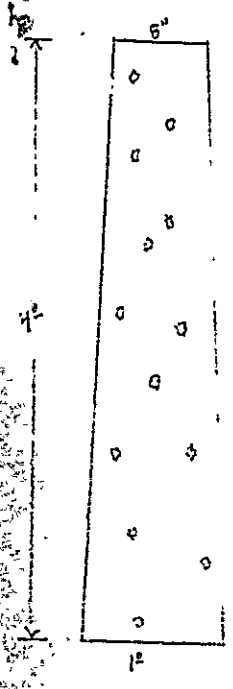
COMMENTS

Signature of Applicant _____ Date _____

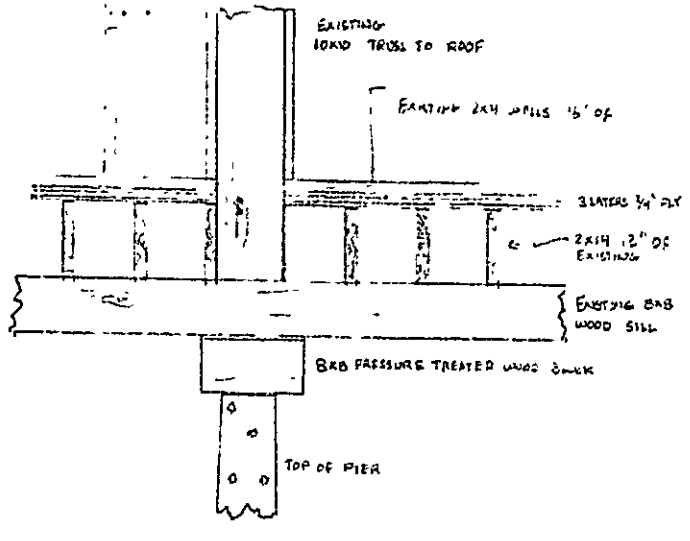


Energie

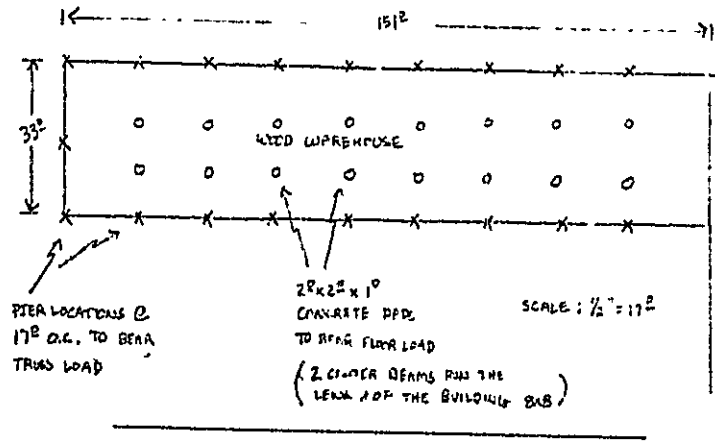
Wahl



SCALE: 1" = 1'
 TAPERED CONCRETE PIER
 12" x 12" AT BASE
 6" x 6" AT TOP
 4' BELOW GRADE



SCALE: 1/2" = 1'



PIER LOCATIONS @
 17" O.C. TO BEAR
 TRUSS LOAD

2" x 2" x 10"
 CONCRETE PIER
 TO BEAR FLOOR LOAD
 (2 CENTER BEAMS RUN THE
 LENGTH OF THE BUILDING SILL)

SCALE: 1/2" = 1'

GODDARD RESOR.
 43 FAIRLAWN AVE
 6 PORTLAND, ME 04106
 799-2105
 RENOVATIONS TO 138-141
 ST JOHN ST., PORTLAND
 FOUNDATION DETAILS
 9/8/88

RECEIVED
 SEP 9 1988

DEPT OF BUILDING INSPECTIONS
 CITY OF PORTLAND

Susan Goldburg
 Bramley Assoc

138 ST JOHN ST



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

September 12, 1988

RE: 138-140 St. John St.

Bermie Associates
167 Frances St.
Portland, Maine 04102

Dear Sir:

Your application to make interior renovations and to change wood floor supports to concrete has been reviewed and a permit is herewith issued subject to the following requirements:

1. The floor system must be designed for a minimum uniformity distributed live load.
2. The wall between the warehouse and offices must be a minimum of a one(1) hour fire-rated wall.

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

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

March 13, 1990

The Paper Center
140 St. John Street
Portland, ME 04102

Re: 140 St. John Street.

Dear Sir:

Please be aware that a permit from this department is required before mounting or displaying signage in front of your place of business. When making application, you must submit a plot plan, proposed sign drawings, proof of insurance and written authority from the owner of the building your business occupies.

Thank you for your cooperation.

Sincerely,

Mark Mitchell
Code Enforcement Officer (8)

MM/jmr



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date June 27, 1989, 19
 Receipt and Permit number 00465

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: 142 St. John St.

OWNER'S NAME: Brian Goldberg ADDRESS _____

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>31 to 60</u>	5.00
FIXTURES: (number of)	
Incandescent <u>XX</u> Fluorescent <u>19</u> (not strip) TOTAL <u>21</u>	4.10
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead <u>XX</u> Underground _____ Temporary _____ TOTAL amperes <u>200</u> ..	3.00
METERS: (number of) <u>1</u>50
MOTORS (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____ Water Heaters _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL _____	
MISCELLANEOUS: (number of)	
Branch Panels <u>1</u>	1.00
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarm Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
INSTALLATION FEE DUE: _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE: _____	13.60

INSPECTION: _____ or 72 hrs
 Will be ready on June 27, PM, 1989; or Will Call _____
 CONTRACTOR'S NAME: Hanson Elec
 ADDRESS: P.O. Box 359 Hollis Me
 TEL: _____
 MASTER LICENSE NO.: _____ SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: 07759

PERMIT # 002087 **TOWN OF Portland, ME BUILDING PERMIT APPLICATION** MAP # _____ LOT# _____

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

Owner: Susan T. Goldberg
 Address: 1-138 St. John St., Portland, 04102
 LOCATION OF CONSTRUCTION: 142 St. John St.
 CONTRACTOR: J. Goduty Assoc. SUBCONTRACTORS: 799-3105
 ADDRESS: 43 Fairlawn Avenue, S. Portland
 Est. Construction Cost: \$15,000 Type of Use: Gourmet Food Store

For Official Use Only

Date: May 25, 1989
 Inside Fire Limits: _____
 Bldg Code: _____
 Time Limit: _____
 Estimated Cost: \$15,000
 Value/Structure: _____
 Fee: \$95.00

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

Past Use: Furniture Discount Store
 Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: Seasonal Condominium _____ Apartment _____
 Is Proposed Use: Change use to Gourmet Food Store with interior renovations and adding 2 windows and adding 7 more of plans submitted.
 Conversion - Explain _____
COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only: # Of New Dwelling Units _____
 # Of Dwelling Units _____

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

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

City Of Portland

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

Chimneys: Type: _____ Number of Fire Places: _____
 Heating: Type of Heat: _____
 Electrical: Service Entrance Size: _____ Smoke Detector Required: Yes _____ No _____
 Plumbing: 1. Approval of soil test if required _____
 2. No. of Tubs or Showers: _____
 3. No. of Flushes: _____
 4. No. of Lavatories: _____
 5. No. of Other Fixtures: _____

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

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

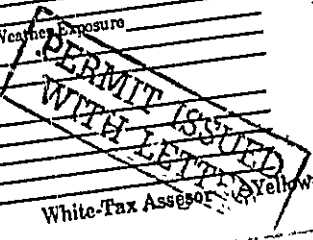
Zoning: District: I-2 Street Frontage Req.: _____
 Required Setbacks: Front _____ Back _____ Provided _____ Side _____

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

Review Required: Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____
 Other: _____ (Explain) _____
 Date Approved: 5-16-89

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

Permit Received By: Nancy Crossman Date: 5/15/89
 Signature of Applicant: [Signature] Date: 5-15-89
 Signature of CEO: [Signature] Date: _____



Inspection Dates: _____
 White Tag - CEO: _____
 Yellow Tag - GPCOG: _____

© Copyright GPCOG 1987

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 25.00 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ 70.00 _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /
_____	_____	/ /

COMMENTS

Signature of Applicant David L. Holding as agent for owner Date 5/5/89

CITY OF PORTLAND, MAINE

389 CONGRESS STREET
PORTLAND MAINE 04101
(207) 874-8301



DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
May 16, 1989

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Ms. Susan T. Goldberg
138 St. John Street
Portland, Maine 04102

Re: 142 St. John Street

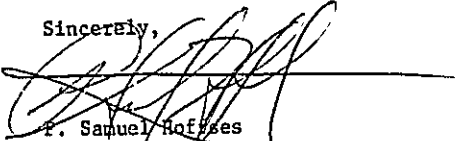
Dear Ms. Goldberg:

Your application to change the use to Gourmet Food Store has been reviewed and a permit is herewith issued subject to the following requirements:

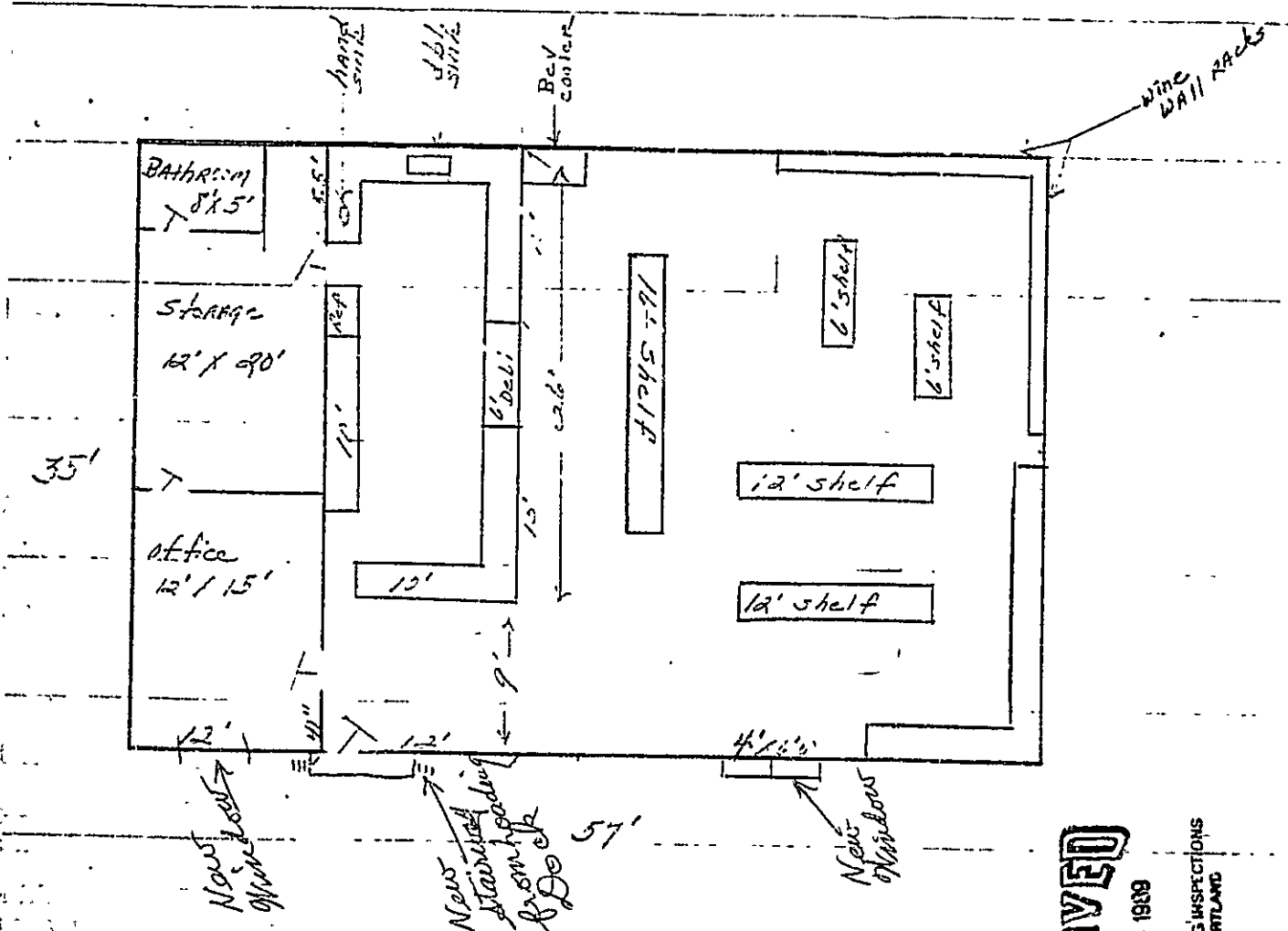
- 1.) Storage area to be separated from other parts of building by Fire Barriers having a fire resistance rating of not less than 1 hour with all openings therein protected by 3/4 fire protection rated doors with hydraulic self closers.
- 2.) Portable fire extinguisher to be provided in accordance with N.F.P.A. #10.

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

Sincerely,


P. Samuel Hoffses
Chief, Inspection Services

cc: Lt. Garroway



1 square = 1'

The Spirited Gourmet
 142 St John St.

RECEIVED

MAY 16 1989

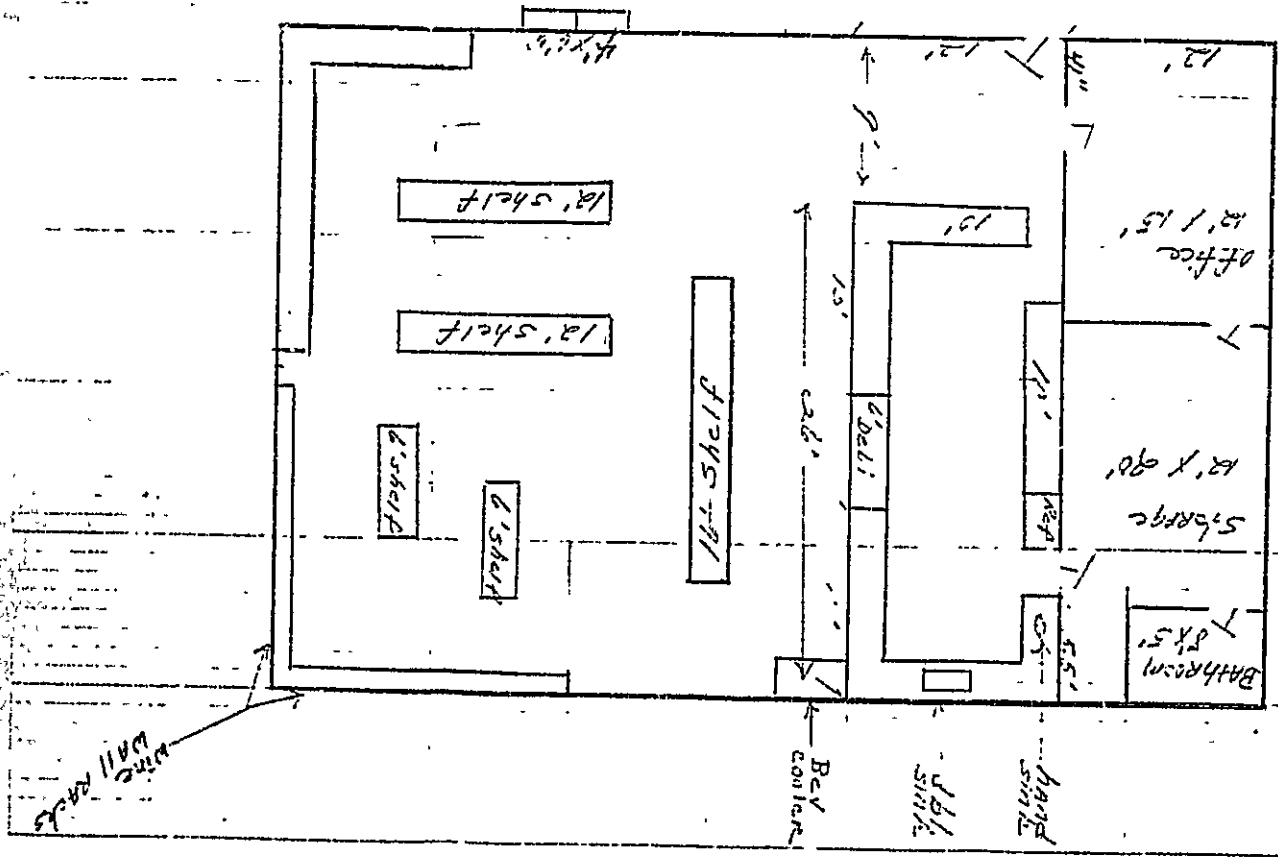
DEPT. OF BUILDING INSPECTIONS
 CITY OF PORTLAND

The Spirited Gourmet
142 S Main St

RECEIVED
MAY 16 1989
DEPT. OF INSPECTING INSPECTIONS
CITY OF PORTLAND

1 square = 1'

57'



CITY OF PORTLAND, MAINE

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



DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

142 St. John Street

May 9, 1989


Ms. Susan T. Goldberg
138 St. John Street
Portland, Maine 04102

Dear Ms. Goldberg:

This is in reference to your application for a building permit for a change of use to Gourmet Food Store with interior and exterior renovations, at 142 St. John Street in the I-2 Industrial Zone.

Additional information concerning your floor plan and the placement of the stairway, and details concerning what exterior and interior alterations will be involved are requested. Please furnish additional information to assist this office in the review of your building permit application.

Sincerely,


William D. Giroux
Zoning Enforcement Officer

cc: P. Samuel Hoffses, Chief, Inspections Services
Fred Williams, Code Enforcement Officer
Warren J. Turner, Administrative Assistant

*See attached
Plot Plan*

PLUMBING APPLICATION

PROPERTY ADDRESS
Town Or Plantation: Portland
Street Subdivision Lot #: 144 S. 11th St.
PROPERTY OWNERS NAME
Last: G. L. ... First: ...
Applicant Name: Kevin M. P. ...
Mailing Address of Owner/Applicant (If Different): ...

Caution: Permit Required
Plumbing shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the work.

PORTLAND 3787 TOWN COPY
Date Permit Issued: 12.13.90 \$ 15.00 FEE Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # ...

Owner/Applicant Statement
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.
Signature of Owner/Applicant: [Signature] Date: ...

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: [Signature] Date Approved: MAR 12 1996

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 OFFICE

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 # 42512E

Hook-Up & Piping Relocation Maximum of 1 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)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	3	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater <u>on demand</u>
Number of Hook-Ups & Relocations	Fixtures (Subtotal) Column 2		5	Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee			0	Fixtures (Subtotal) Column 2
			5	Total Fixtures
			\$15.	Fixture Fee
			\$	Hook-Up & Relocation
			\$15.	Permit Fee (Total)

TOWN COPY

MAIL PERMIT TO BRAMLIE ASSOC.

138 St. John St. Portland, Maine 04102

Permit # 71 City of Portland

BUILDING PERMIT APPLICATION Fee \$30.00 Zone _____ Map # _____ Lot# _____

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

Owner: Susan T. Goldberg Phone # 774-6403

Address: 185 Caleb St. Portland, Maine

LOCATION OF CONSTRUCTION 150 St. John St. Portland 04102

Contractor: J. Goduti Assoc. Sub: _____

Address: 43 Fairlawn Ave. So. Port 04106 Phone # 799-3105

Est. Construction Cost: \$2,000 Proposed Use: Temp. Campaign Headqts. Zoning: L-2 Zone

Past Use: vacant-before wholesale-retail

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 do interior renovations to accommodate Temp. Campaign Headquarters

Foundation:

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

Floor:

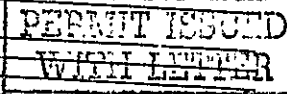
- 1. Sills Size: _____ Sills must be anchored.
- 2. Girder Size: _____
- 3. Lally Column Spacing: _____ Size: _____
- 4. Joists Size: _____ Spacing 16" O.C.
- 5. Bridging Type: _____ Size: _____
- 6. Floor Sheathing Type: _____ Size: _____
- 7. Other Material: _____

Exterior Walls:

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

Interior Walls:

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



For Official Use Only

Date: January 25, 1990

Inside Fire Limits: _____

Bldg Code: _____

Time Limit: _____

Estimated Cost: _____

PERMIT ISSUED

Name: _____

Lot: _____

Ownership: Public

FEB 8 1990

City of Portland

City Office

AR. 7/27/89

June 31, 1990

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) _____

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

Permit Received By Latini

Signature of Applicant Brian Goldberg Date 5/25/90

Signature of Eric McLeod Date 1-20-90

Inspection Dates _____

White Tag - CEO

© Copyright GPCOG 1988

10 Hugh Irving

White-Tax Assessor

Yellow-GPCOG



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 140 St. John St.

Date of Issue 3/12/90

Issued to Bramble Assoc.

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. _____, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

right corner

office space

Limiting Conditions:

This certificate supersedes
certificate issued

Approved: *[Signature]*

(Date) _____ Inspector

SPD

[Signature]
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Permit # 01 City of Portland **BUILDING PERMIT APPLICATION** Fee \$30.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form

Owner: Susan I. Goldberg Phone # 774-6433
 Address: 185 Caleb St. Portland, Maine
 LOCATION OF CONSTRUCTION: 150 St. John St. Portland 04102
 Contractor: J. Coduti Assoc. Sub: _____
 Address: 43 Fairlawn Ave. Po. Port 04106 Phone # 799-3105
 Est. Construction Cost: \$2,000 Proposed Use: Temp. Campaign headqrs. Zoning: _____
 Past Use: vacant-before wholesale-retail
 # 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 do interior renovations to accommodate Temp. Campaign Headquarters

For Official Use Only

Date January 25, 1990 Subdivision: _____
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost _____

PERMIT ISSUED

FEB 2 1990

City Of Portland

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 _____

Floors:
 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. Masonr. 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 _____ 00 CF
 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. Approved for use of _____
 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 Larini

Signature of Applicant Susan I. Goldberg Date 5/125/90

Signature of CEO _____ Date _____

Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 30.00
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS Submitting two sets of floor plans

Signature of Applicant *Mark E. [Signature]*

Date January 25, 1990



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

February 1, 1990

Brian Goldberg
c/o Bramlie Assoc.
138 St. John St.
Portland, ME 04102

Re: 150 St. John Street

Dear Sir:


Your application to do interior renovations to accommodate temporary campaign headquarters at 150 St. John St. has been reviewed and a permit is herewith issued subject to the following requirements:

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

1. Means of egress shall be marked in accordance with Section 5-8 of the N.F.P.A. 101 Life Safety Code.
2. Portable fire extinguisher shall be provided in accordance with Section 7-7.4.1. See N.F.P.A. #10.

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

Sincerely,


Marge Schmuckal
Assistant Chief of Inspection Services

lec

BUILDING PERMIT REPORT

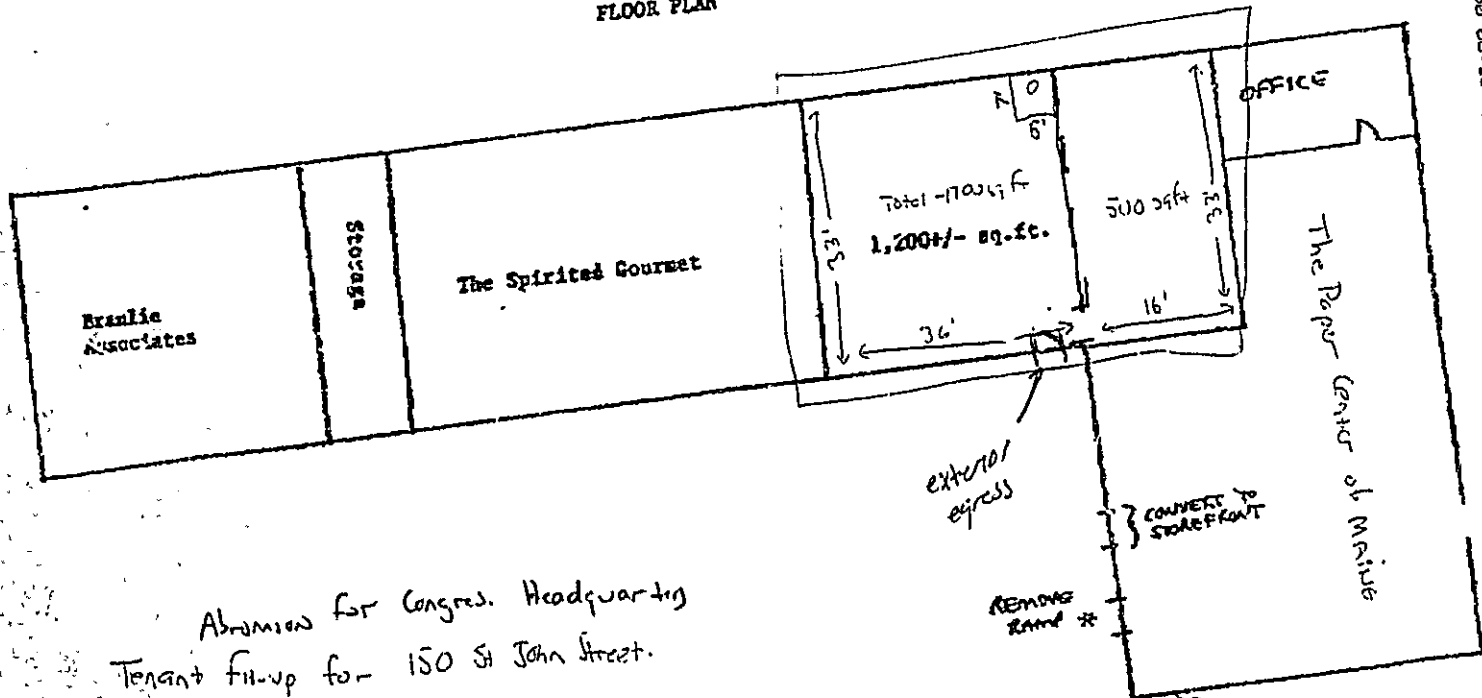
DATE: 1-30-90
ADDRESS: 150 St. John St
REASON FOR PERMIT: Temporary Construction
BUILDING OWNER: Susan T. Goldley
CONTRACTOR: T. Goldley Assoc
PERMIT APPLICANT: Bruce T. Goldley
APPROVED: PAH DENIED: >
CONDITION OF APPROVAL OR DENIAL:

- ① ~~Emergency lighting shall be provided in accordance with Section 5-9 of the N.F.P.A. 101 Life Safety Code.~~
- ④ Means of egress shall be marked in accordance with Section 5-8 of the N.F.P.A. 101 Life Safety Code.
- ② Portable fire extinguisher shall be provided, in accordance with Section 7-7.4.1 see N.F.P.A #10

EXHIBIT C

138-154 ST. JOHN STREET
FLOOR PLAN

PLAN OF 50' x 11' CENTER PARCELS FROM
01/28/1990 08:15 FROM



Abandon for Congres. Headquarters
 Tenant fit-up for - 150 St John Street.
 Add bathroom
 Add 100 amp electric service

ST. JOHN STREET

building - sprinkled throughout

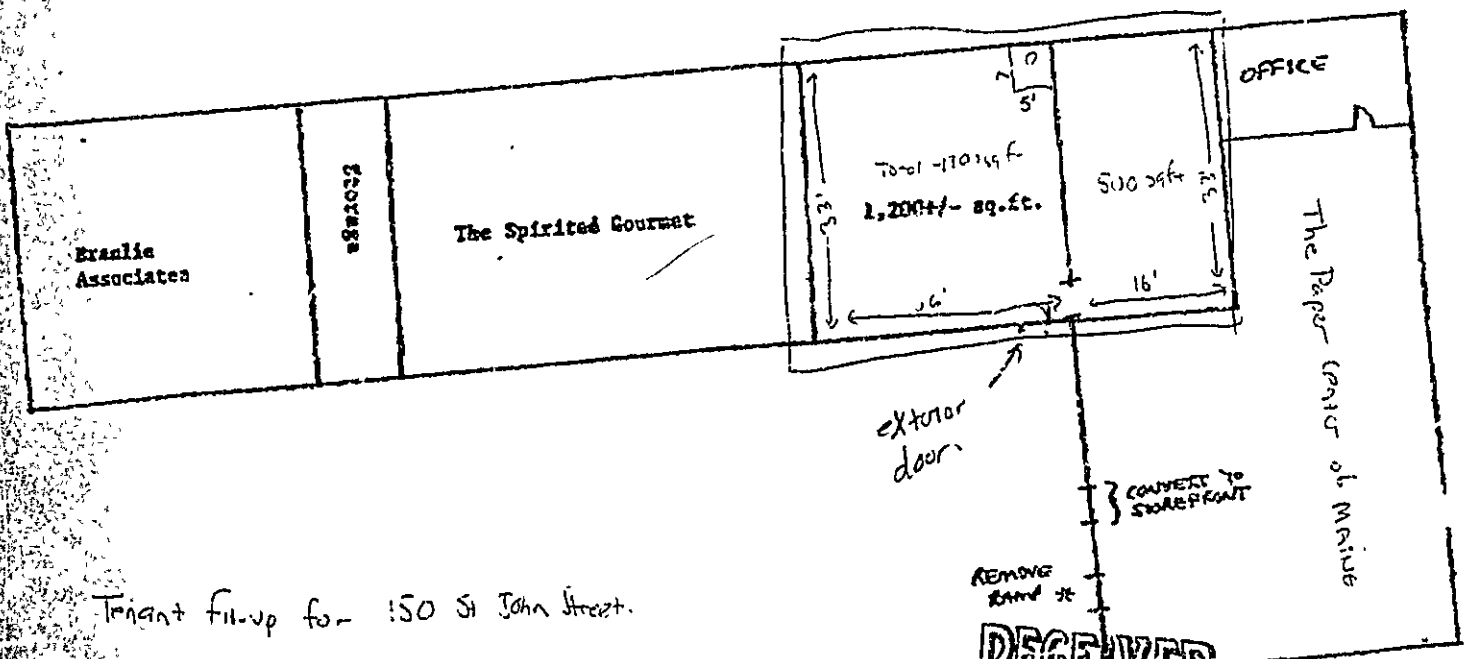
RECEIVED

9 5 1990
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

EXHIBIT C

138-154 ST. JOHN STREET

FLOOR PLAN



Tenant fill-up for 150 St John Street.

- Add bathroom
- Add 100 Amp electric service

ST. JOHN STREET

Building sprinkled throughout.

REMOVE WALL
CONVERT TO STOREFRONT
RECEIVED

JAN 25 1990

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

JAN 05 '90 17:11 CENTURY RAINCOPIER
01/08/1990 09:15 FROM

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$105.00 Zone _____ Map # _____ Lot # _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan T. Goldberg Phone # 774-6403
 Address: 185 Caleb St; Ptld, ME

LOCATION OF CONSTRUCTION 154 St. John Street

Contractor: J. Goduti Assoc. Sub. _____
 Address: 43 Fairlawn St; So. Ptld Phone # 799-3105

Est. Construction Cost: \$17,000 Proposed Use: wholesale distribution Zoning: _____
 Past Use: retail-whole furniture, etc.

of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: Tenant fit up.

For Official Use Only

PERMIT ISSUED

Date 1/19/90 Sub. _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot # 2 Ownership: Public
 Time Limit _____ City Portland
 Estimated Cost \$17,000 Private _____

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: Brian Goldberg, c/o Bramble Assoc., 138 St. John St. Portland, ME 04102

- Type of Soil: _____
- Set Backs - Front _____ Rear _____ Side(s) _____
- Footings Size: _____
- Foundation Size: _____
- Other: _____

- Floor:
- Sills Size: _____ Sills must be anchored.
 - Girder Size: _____
 - Lally Column Spacing: _____ Size: _____
 - Joists Size: _____ Spacing 16" O.C.
 - Bridging Type: _____ Size: _____
 - Floor Sheathing Type: _____ Size: _____
 - Other Material: _____

- Exterior Walls:
- Studding Size _____ Spacing _____
 - No. windows _____
 - No. Doors _____
 - Header Sizes _____ Span(s) _____
 - Bracing: Yes _____ No _____
 - Corner Posts Size _____
 - Insulation Type _____ Size _____
 - Sheathing Type _____ Size _____
 - Siding Type _____
 - Masonry Materials _____ Weather Exposure _____
 - Metal Materials _____

- Interior Walls:
- Studding Size _____ Spacing _____
 - Header Sizes _____ Span(s) _____
 - Wall Covering Type _____
 - Fire Wall if required _____
 - Other Materials _____

- Roof:
- Ceiling Joist Size _____
 - Ceiling Strapping Size _____ Spacing _____
 - Type Ceilings _____
 - Insulation Type _____ Size _____
 - Ceiling Height: _____

- Chimneys:
- Truss or Rafter Size _____ Span _____
 - Sheathing Type _____ Size _____
 - Roof Covering Type _____

Heating: _____
 Type: _____ Number of Fire Places _____
 Type of Heat: _____

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

- Plumbing:
- Approval of soil test if required: Yes _____ No _____
 - No. of Tubs or Showers _____
 - No. of Flushes _____
 - No. of Lavatories _____
 - No. of Other Fixtures _____

Swimming Pools:

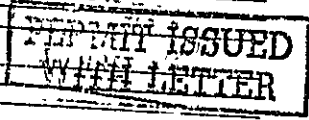
- Type: _____
- Pool Size: _____ x _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By: Louise Chase

Signature of Applicant: Brian L. Goduti Date: 1/19/90
 Signature of CEO: William L. Goduti Date: 1-30-90

Inspection Dates: _____
 White Tag - CEO

8 Mark Mitchell White-Tax Assessor Yellow-GPCOG





CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 154 St. John Street

Issued to Susan T. Goldberg

Date of Issue 3/1/90

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. _____, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Interior renovations

Mercatile

Limiting Conditions:

This certificate supersedes
certificate issued

Approved: *[Signature]*
3/2/90
(Date) *[Signature]* Inspector

[Signature]
Inspector of Buildings

Notice: This certificate certifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Permit # _____ City of Port Lant **BUILDING PERMIT APPLICATION** Fee: 105.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan L. Goldberg Phone # 774-3407
 Address: 185 Caleb St; Ptld, ME

LOCATION OF CONSTRUCTION 154 St. John Street

Contractor: J. Condufi Assoc. Sub: _____

Address: 43 Fairlawn St; So. Ptld Phone # 790-3105

Est. Construction Cost: \$17,000 Proposed Use: wholesale distribution

of Existing Res. Units _____ Past Use: retail-wholesale furniture, etc.

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

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Tenant fit up.

For Official Use Only

Date: 1/19/90 Submittal Name: _____

Inside Fire Limits: _____

Blgd Code: _____

Time Limit: _____

Estimated Cost: 17,000

Ownership: Public

Permit Issued: FEB 2 1990

City of Port Lant

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)

MAIL TO: Brian Goldberg, c/o Bramlie Assoc., 138 St. John St. Calais, ME 04102

- 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: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

- Exterior Walls:**
1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____
 5. Bracing: Yes _____ No _____ Span(s) _____
 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 _____

- 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 _____
 2. No. of Tubs or Showers _____ Yes _____ No _____
 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: MAIRIE CHASE

Signature of Applicant: Susan L. Goldberg Date: 1/19/90

Signature of GEO: [Signature] Date: 1/24

Inspection Dates: _____

8 MARK MASHAM White-Tax Assessor Yellow-GPCOG

White Tag CEO © Copyright GPCOG 1988

PLOT PLAN

N



FEES (Break down From Front)

Base Fee \$ 105.00 _____
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

3/2/90 Issued C/O okd for walls (per wall)
 Made add railings to ramp & increase guard height + ballister
 per m

Signature of Applicant

Brian L. Haddy

Date

1/17/90



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

February 2, 1990

Susan T. Goldberg
185 Caleb St.
Portland, ME 04102

Re: 154 St. John Street

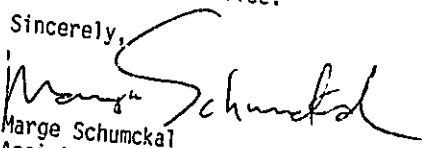
Dear Madam:

Your application to create tenant fit-up and go from retail/wholesale furniture to wholesale distribution at 154 St. John Street has been reviewed and a permit is herewith issued subject to the following requirements:

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

The ramping shown on your plan must meet the standards set forth in A N S I Standard A117, including a maximum slope of not more than 1:12. Ramping clear width, railings and platforms also must comply under this section.

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

Sincerely,

Marge Schumckal
Assistant Chief of Inspection Services

cc: Brian Goldberg
c/o Bramlie Assoc.
138 St. John St.
Portland, ME 04102

RECEIVED

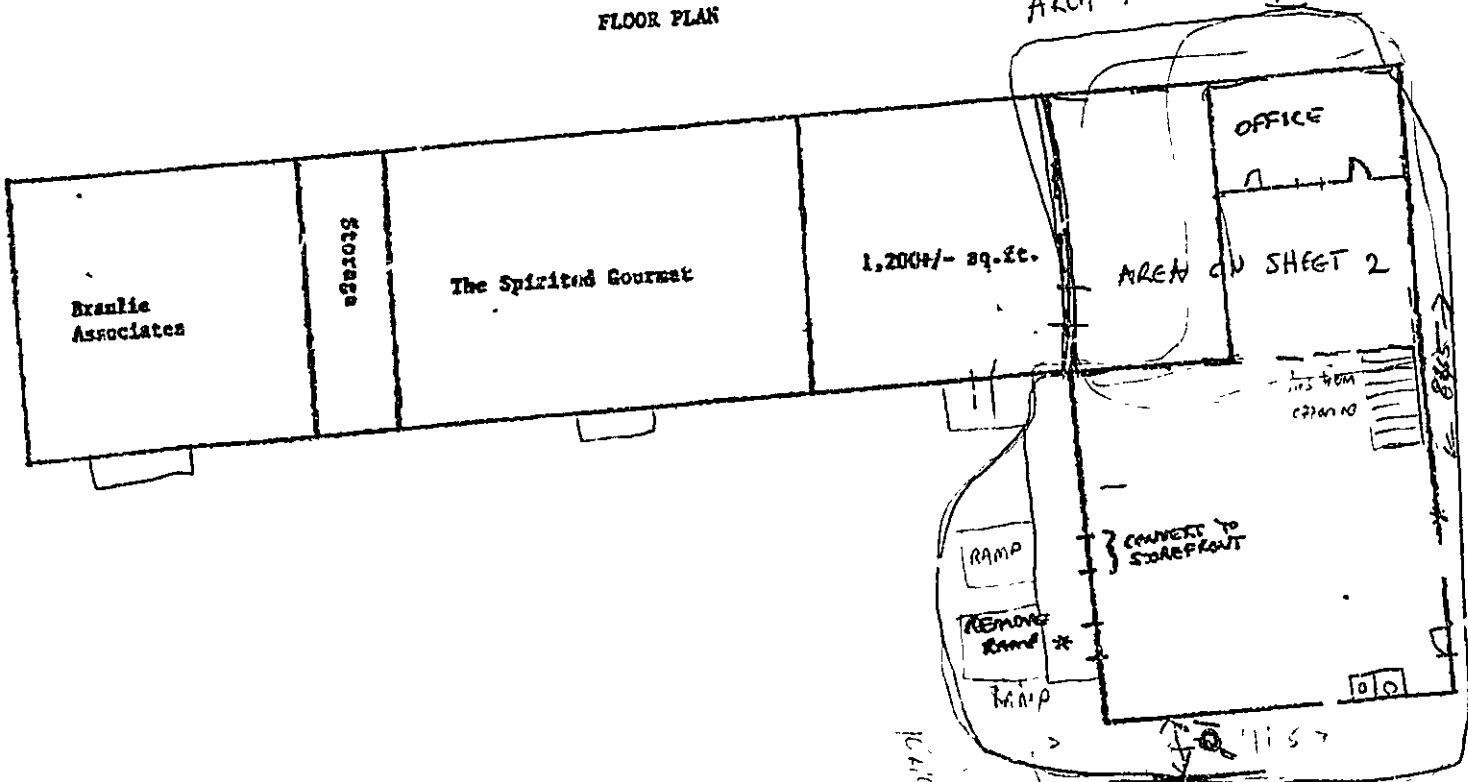
JAN 19 1990

EPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

EXHIBIT C

138-154 ST. JOHN STREET

FLOOR PLAN



JAN 09 '90 17:11 CENTURY RANDOLPH, WA
01/09/1990 09:15 FROM

P. 10

4" Firematic Alarm
Wet System. throughout.

ST. JOHN STREET

CONVERT 10'12" doorway into
double entrance str. e. area doorway

154 St. John St

47'6"

50'

WINDOW
5'1" x 1'1"

sprinkler
heads

WINDOW
5'1" x 2'9"

16'

ceil approx 30 x 10 = 420 sq ft

blerglass
window

60 feet to exit

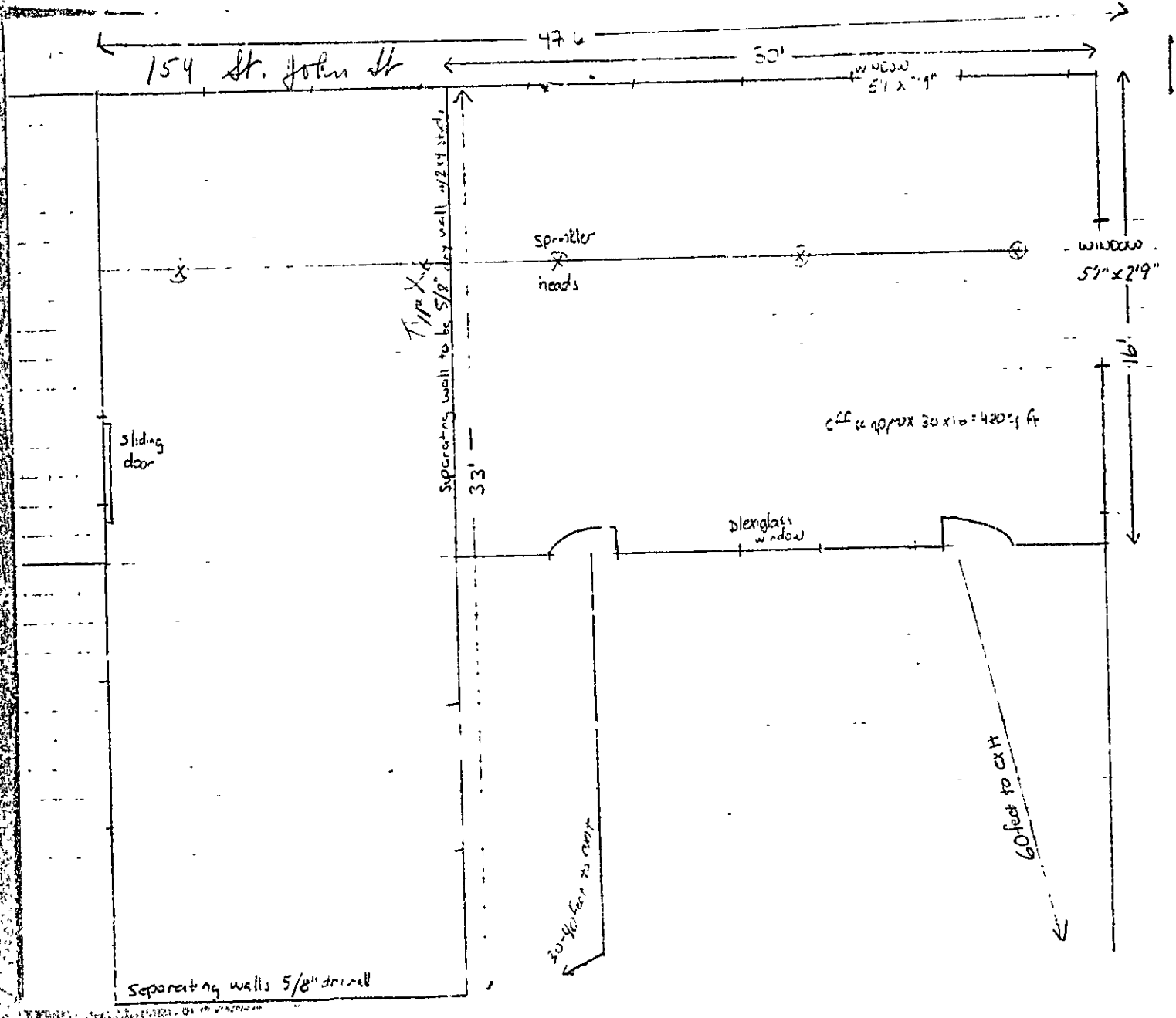
sliding
door

Typical
separating wall to be 5/8" drill

33'

20-40 feet to entry

Separating walls 5/8" drill



RECEIVED

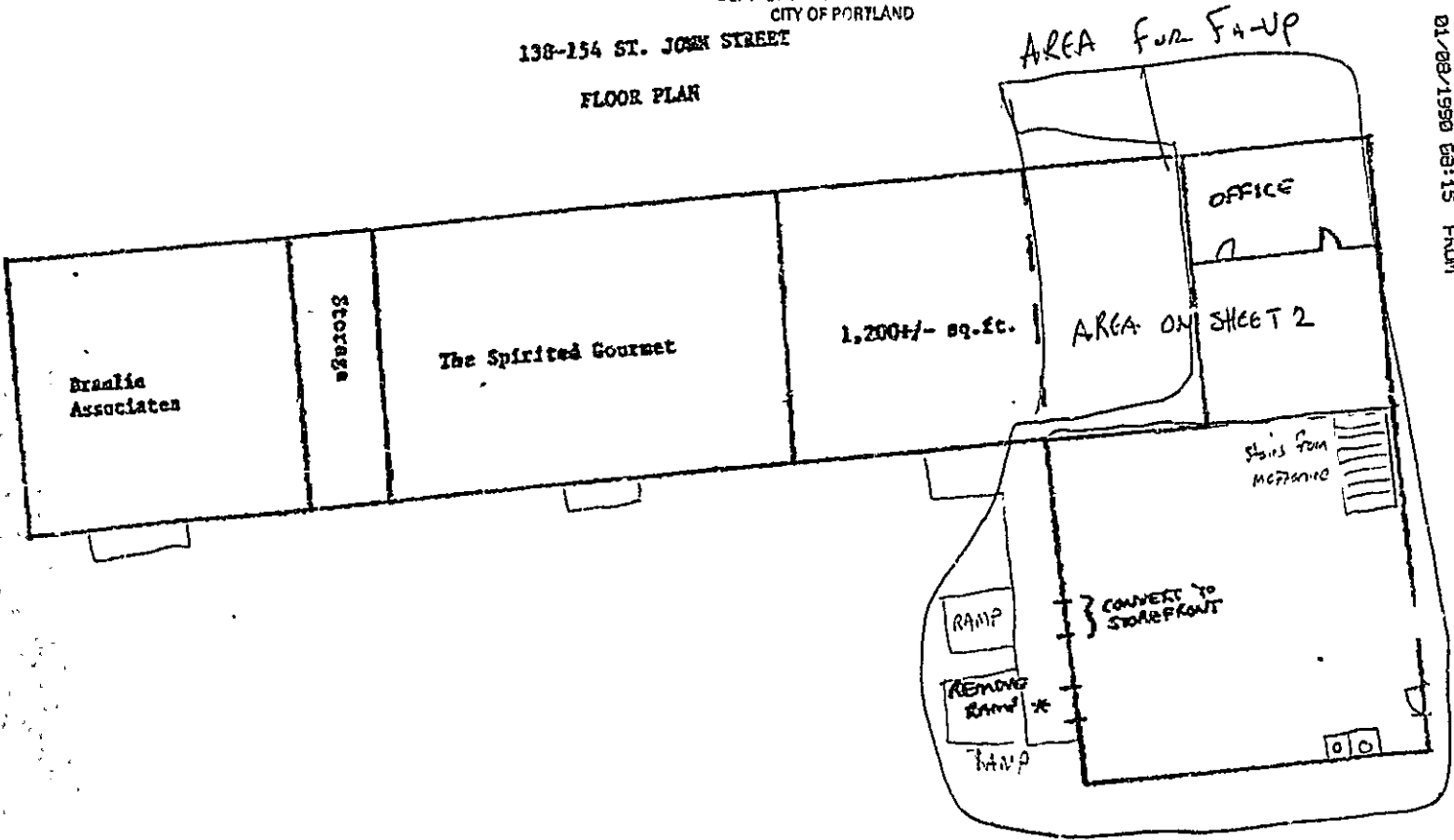
JAN 19 1990

EXHIBIT C

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

138-154 ST. JOHN STREET

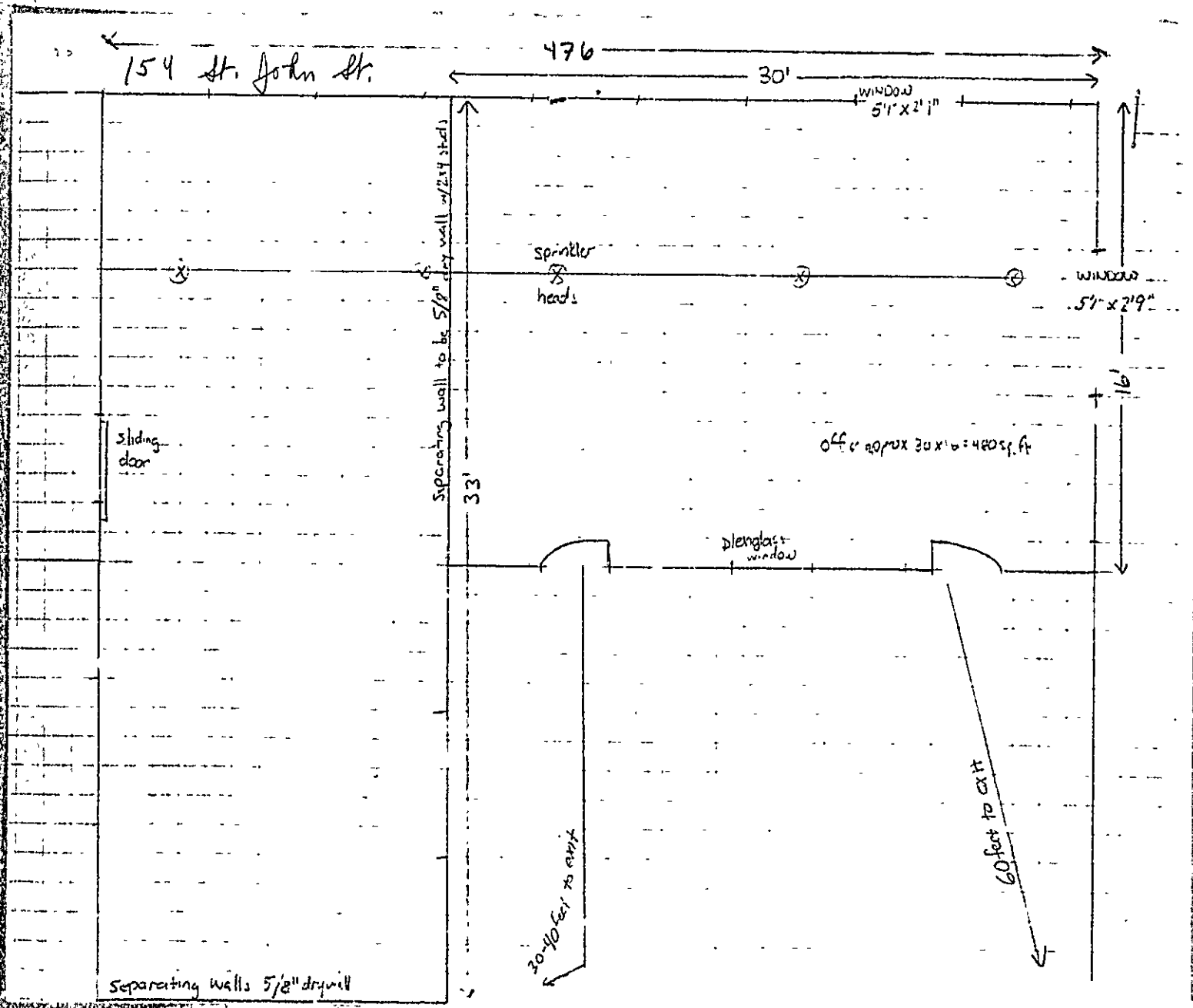
FLOOR PLAN



4" Firematic Alarm
Web System. throughout.

ST. JOHN STREET

JAN 09 1990 17:11 CENTURY RECORDS/PH/11
01/08/1990 08:15 FROM



154 St. John St.

476

30'

WINDOW
5'1" x 2'1"

Separating wall to be 5/8" drywall

33'

sprinkler
heads

WINDOW
5'1" x 2'9"

sliding
door

off approx 30 x 16 = 480 sq. ft.

glass
window

30-40 feet to exit

60 feet to exit

Separating walls 5/8" drywall

16'

912859

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$20. Zone _____ Map # _____ Lot# _____

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

Owner: Susan Goldberg Phone # 871-1812

Address: 138 St. John St; Ptd, ME 04102

LOCATION OF CONSTRUCTION 138 St. John St.

Contractor: Les Wilson & Sons Sub.: 854-4583

Address: Box 1028; Westbrook, ME Phone # 94098

Est. Construction Cost: _____ Proposed Use: commercial w/o tank zoning: _____

_____ Past Use: commercial

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 Remove two tanks at two pits

PERMIT ISSUED

For Official Use Only

Date 7/23/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost _____

Subdivision _____

Name _____

City of Portland

Ownership _____

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 _____ 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:

Services 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 Issued By Louise E. Chase

Signature of Applicant [Signature] Date 7/23/91

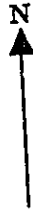
Signature of CEO [Signature] Date 7-23-91

Inspection Dates _____

PERMIT ISSUED WITH REQUIREMENTS

PLOT PLAN

05



FEES (Breakdown From Front)

Base Fee \$ 20-

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

Signature of Applicant Ron Wilson Agent For Owner

Date 7/23/01

BUILDING PERMIT REPORT

DATE: 7-23-91

ADDRESS: _____

REASON FOR PERMIT: Underground Tank Removal ~~Installation~~

1- 550 gal fuel oil 1- 275 fuel oil

BUILDING OWNER: Susan T. Goldberg

CONTRACTOR: Lee Wilson & Sons

PERMIT APPLICANT: Ron Wilson

APPROVE: AS ~~DENIED~~

CONDITION OF APPROVAL OR DENIAL:

- ✓ (1) All underground tank removal and/or installation shall be done in accordance with Department of Environmental Protection Regulations Chapter 691
- ✓ (2) No cutting of tanks on site. Cutting of tanks to be done at an approved tank disposal site.
- ✓ (3) Fire Dispatcher must be notified 48 hours in advance of removal and/or transportation of tanks.

Maine Department of Environmental Protection
 Bureau of Oil & Hazardous Materials Control
 State House Station #17, Augusta, Maine 04333
 Telephone: 207-289-2651
 Attn: Tank Removal Notice

copy

NOTICE OF INTENT
 TO ABANDON (REMOVE) AN
 UNDERGROUND OIL STORAGE FACILITY

Name of Facility Owner: ~~Barbara Lee Arace~~ Susan F. Goldberg
 Mailing Address: 138 St. John St Telephone No: 891 1812
 City: Portland State: ME Zip Code: 04102
 Contact Person (name, address & telephone no.): Brian Goldberg
 Name of Facility: SAME AS ABOVE Registration No.: 4101
 Facility Location: CAMP A. ABERN

1. Identify the tanks at this location which are to be removed:

	Tank Number	Age of Tank (Years)	Tank Size (Gallons)	Type of Product Most Recently Stored
A.	1	N/A	500	FUEL OIL
B.	2	N/A	275	FUEL OIL
C.				
D.	Have located an additional tank on property (275 gallons)			

PERMIT ISSUED WITH REQUIREMENTS
 PERMIT ISSUED WITH REQUIREMENTS

Directions to Facility (be specific):

Block up from Congress Street heading East

3. Is tank(s) used for the storage of Class I liquids (e.g. gasoline, jet fuel)? Yes ___ No (IF YES, REMOVAL OF THE TANK MUST BE UNDER THE DIRECTION OF A CERTIFIED TANK INSTALLER OR PROFESSIONAL FIREFIGHTER.)

4. Name and telephone number of contractor who will do the tank removal: 1st Wilson & Sons 8544583

Certified Tank Installer Certification Number & Name (if applicable):
N/A

Professional Firefighter Yes ___ No (Affiliation: _____)

Expected date of removal: 8/23/91

I hereby provide Notice that I intend to properly abandon the underground oil storage facility as described above.

Date: 7/23/91

Ronald Wilson Rep.
 Signature of Tank Owner or Operator

Ronald Wilson Rep.
 Printed Name and Title

THIS FORM MUST BE FILED WITH THE DEPARTMENT AND LOCAL FIRE DEPARTMENT 30 DAYS PRIOR TO REMOVAL - RETURN POSTCARD WHEN TANK(S) HAS BEEN REMOVED.

Mail original and yellow copy to DEP; pink copy to fire dept.; retain gold copy



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 6/5/91 19
 Receipt and Permit number 8944

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: 138 St. John St.
 OWNER'S NAME: Jerome Goldberg ADDRESS: _____ FEES

OUTLETS: Receptacles 4 Switches 6 Plugmold _____ ft. TOTAL 10 2.00

FIXTURES: (number of) Incandescent 10 Fluorescent _____ (not strip) TOTAL 10 2.00
 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 1 Others (denote) _____

TOTAL 1 2.00

MISCELLANEOUS: (number of) Branch Panels _____
 Transformers _____
 Air Conditioners Central Unit _____
 Separate Units (windows) _____
 Signs 20 sq. ft. and under _____
 Over 20 sq. ft. _____
 Swimming Pools Above Ground _____
 In Ground _____
 Fire/Burglar Alarms Residential _____
 Commercial _____
 Heavy Duty Outlets, 20 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: 15.00

INSPECTION: Will be ready on _____, 19__; or Will Call X
 CONTRACTOR'S NAME: Michael Major
 ADDRESS: Box 3649 ; Ptd
 TEL: 772-4362 SIGNATURE OF CONTRACTOR: Michael Major
 MASTER LICENSE NO.: #08944
 LIMITED LICENSE NO.: _____

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



APPLICATION FOR PERM.IT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 5/1/91, 19__
 Receipt and Permit number 02028

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: 138 St. John St.
 OWNER'S NAME: Bramlie Assoc ADDRESS: same

	FEES
OUTLETS:	
Receptacles <u>6</u> Switches <u>2</u> Plugmold _____ ft. TOTAL <u>8</u>	1.60
FIXTURES: (number of)	
Incandescent _____ Fluorescent <u>2</u> (not strip) TOTAL <u>2</u>40
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)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Blrglar 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

FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE:

TOTAL AMOUNT DUE: 15.00

minimum fee

INSPECTION:
 Will be ready on now, 19__; or Will Call _____

CONTRACTOR'S NAME: Major Electric Co

ADDRESS: 124 Noyes St; Ptd

TEL: 772-4362

MASTER LICENSE NO. Michael Major 78944 SIGNATURE OF CONTRACTOR: _____

LIMITED LICENSE NO.: _____

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

912859

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$20 Zone _____ Map # _____ Lot# _____

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

Owner: Susan Goldberg Phone # 871-1812

Address: 138 St. John St; Ptd, ME 04102

LOCATION OF CONSTRUCTION 138 St. John St.

Contractor: Les Wilson & Sons Sub: 854-4583

Address: Box 1028; Westbrook, ME Phone # 04098

Est. Construction Cost: _____ Proposed Use: commercial w/o tanks

_____ Past Use: commercial

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 Remove two tanks at two pits

For Official Use

Date 7/23/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost _____

Subdivision _____

Ownership _____

PERMIT ISSUED

JUL 26 1991

CITY OF PORTLAND

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.D.P. (Explain) _____

Foundations:

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

Floors:

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

Exterior Walls:

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

Interior Walls:

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

Ceiling:

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

Roof:

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

Chimney:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

- Approval of soil test if required Yes _____ No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- 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 [Signature] Date 7/23/91

Signature of CEO _____ Date _____

Inspection Dates _____

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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012502

Permit # 012502 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.

Applicant: Susan E. Goldberg Phone # 371-1812
 Address: 133 St. John St; Peld, ME 04102
 LOCATION OF CONSTRUCTION 133 St. John St. (Tralia Assoc)
 Contractor: J. Goduti Assoc Sub: _____
 Address: 13 Fairlawn Ave; So Peld Phone # ME 04105
 Est. Construction Cost: \$2000 Proposed Use: business office
 Past Use: business office
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: interior renovations - first floor

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 APR 23 1991
 CITY OF PORTLAND

For Official Use Only
 Date: 4/9/91
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost: 2000
 Zoning: INDUST-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): OK with A-22-91

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 _____ Not in District nor landmark
 3. Type Coatings: _____
 4. Insulation Type _____ Size _____ Requires Review
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____ Span _____ Action: AS Approved.
 2. Sheathing Type _____ Size _____ Approved with Conditions
 3. Roof Covering Type _____
 Date: 4/9/91
 Sign: [Signature]

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 E. Chase
 Signature of Applicant [Signature] Date 4/9/91
 Signature of CEO [Signature] Date 4/22/91
 Inspection Dates _____

White-Tax Assessor Yellow-GPCOG White Tag CEO **MR. IRVING** © Copyright GPCOG 1988

PLOT PLAN

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FEEES (Breakdown From Front)

Base Fee \$ 30-

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS 4/24/91 - on: Framing completed, access to sprinkler plan, pipe provided - 2nd floor - all the work progress in progress. Monthly - will be called when the 1 year work is completed - 2nd & 3rd Inspections completed during the renovation work. 7/8/91 - Final inspection - Work completed as per code plan. Egress lights in place & operability.

Signature of Applicant _____

Date _____

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 138 St John St

PROPERTY OWNERS NAME

Last: Goldberg First: Susan

Applicant Name: John Scott

Mailing Address of Owner/Applicant (If Different): 9 Colburn Rd

PORTLAND

Date Permit Issued: 1/6 2/27/92

427

TOWN COPY

FEE Charged

Local Plumbing Inspector Signature: [Signature]

L.P.I. #

Chief Plumbing Inspector

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: _____

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: [Signature] Date Approved: 3/27/92

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 _____

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 # 1076521

Hook-Up & Piping Relocation Maximum of 1 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>		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	01	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc	01	Clothes Washer
<p>PIPING RELOCATION, of sanitary lines, drains, and piping without new fixtures</p>		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups Relocations		Other: _____		Water Heater
\$ Hook Up & Relocation Fee		Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			\$ 6	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 6	Permit Fee (Total)

TOWN COPY.