

924017

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 25.00 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Portland Terminal Phone # 774-2084
Address: Benjamin Sawyer (Leasee) 81 Forest Ave Pld 04101
LOCATION OF CONSTRUCTION 199 1/2 Commercial St. (Benny's)
Contractor: self Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: 1499.00 Proposed Use: Rest w/deck
Past Use: Rest.
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 _____
Explicit Conversion: Const deck (20 X 32) to Restaurant
FOR TAKE-OUT

For Official Use Only
Date July 6, 1992
Subdivision: _____
Name: _____
Lot: _____
City of Portland
Owner: _____
Time Limit: _____
Estimated Cost: _____

Zoning: T-3b
Street Frontage Provided: _____
Provided Setbacks: Front _____ 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: WDA 7-14-92

HISTORIC PRESERVATION

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 _____ Action: _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:
Type: _____ Number of Fire Places _____

Heating:
Type of Heat: _____

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

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

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

Permit Received By _____ Date July 6, 1992

Signature of Applicant: Benjamin Sawyer

CEO's District: 3

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO 3 Mrs. Lowe

White - Tax Assessor

Foundation: (Minor site plan review 6/5/92)

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

Floors:
1. Sills Size: _____ Gills _____
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing: 16" I.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 _____

PERMIT ISSUED WITH LETTER

924395

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone _____ Map # _____ Lot # _____

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

Owner: Benjamin L. Sawyer Phone # 774-2084
 Address: 81 Forest Ave- Ptl'd, ME 04101
 LOCATION OF CONSTRUCTION 199 West Commercial St.
 Contractor: Owner Sub: (Benny's Landing)
 Address: _____ Phone # _____
 Est. Construction Cost: \$200 Proposed Use: Food take-out
 \$500 Past Use: food take-out
 # 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 enclose existing porch - & 2 doors

PERMIT ISSUED
 For Official Use Only
 Date 11/25/92
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost \$500
 Subdivision _____
 Name _____
 Ownership _____
 DEC - 4 1992
 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 (y: (Explain) W/O - 12-2-92

Foundations:
 1. Type of Soil: _____
 2. Foot 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 Ty _____ 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 nor Landmark
 Does not require review
 Requires review

Roof:
 1. Truss or Raftor Size _____ Spacing: _____
 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. Compliance with National Electrical Code and State Law.

PERMIT ISSUED
 WITH LETTER
 Signature of Applicant: Benjamin L. Sawyer Date 11/25/92
 CEO's District: _____

White - Tax Assessor

CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO [3] MRS. LOWE

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

December 3, 1992

Benjamin L. Sawyer
81 Forest Ave
Portland, ME 04101

Re: 199 W. Commercial St

Dear Mr. Sawyer,

Your application to enclose existing porch and two doors has been reviewed and a permit is herewith issued subject to the following requirements:

1. Floor on both sides of doorways shall be substantially level and shall have the same elevation on both sides for a distance at least equal to the width of widest leaf.
2. Guards and handrails shall be provided in accordance with Section 5-2.2.4.

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

Sincerely,

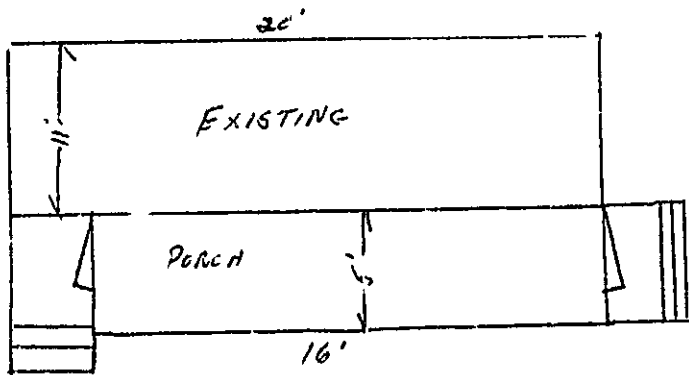

S. P. Hoffses
Chief of Inspection Services

cc: LT G. McDougall, Fire Prevention Bureau

JENNY'S LANDING
199 W C-M ST PORTLAND ME 04102

PORCH ENCLOSURE (SPASCHAL)

INSTALL 5 - ALUM COMBO WINDOWS
2 - " STORM DOORS



924017

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 25.00 Zone _____ Map # _____

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

Owner: Portland Terminal Phone # 174-2084

Address: Benjamin Sawyer (Lease) 81 Forest Ave Pld C4101

LOCATION OF CONSTRUCTION 19916 Commercial St. (Benny's)

Contractor: Self Sub: _____

Address: _____ Phone # _____

Est. Construction Cost: 1499.00 Proposed Use: Rest w/deck

Past Use: Rest.

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: Cons: deck (20 X 32) to ESKA Restaurant.

Foundation: _____

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

Floors: _____

1. Sills Size: _____ Sills must be anchored.
2. Chlrdr 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

For Official Use Only

Date: July 6, 1992

Inside Fire Limits _____

Bldg Code _____

Type Limit _____

Estimated Cost _____

Subdivision _____

Ownership: CITY OF PORTLAND

Private _____

PERMIT ISSUED

AUG 17 1992

Zoning: T-3b

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) 11/11/92 7-14-92

Celling: _____ HISTORIC PRESERVATION

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

Roof: _____

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

Chimneys: _____

1. Type: _____
2. Number of Fire Places: _____

Heating: _____

1. Type of Heat: 1? 1/2" Min. Sil. Low

Electrical: _____

1. Service Entrance Size: _____
2. 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: Mr. [Signature] Date: July 6, 1992

Signature of Applicant: [Signature] Date: July 6, 1992

CEO's District: 378

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

PERMIT ISSUED
WITH LETTER

3/11/92

PLOT PLAN

9/2 - nothing yet

9/27 - "

10/22 - "

12/30 - Nothing yet on large deck

11/23/93 work started on deck etc

7/24/94 work completed without final inspection.

N



FEES (Breakdown From Front)	Type	Inspection Record	
		Date	
Base Fee \$ _____	_____	____/____/____	____/____/____
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.

SIGNATURE OF APPLICANT

ADDRESS

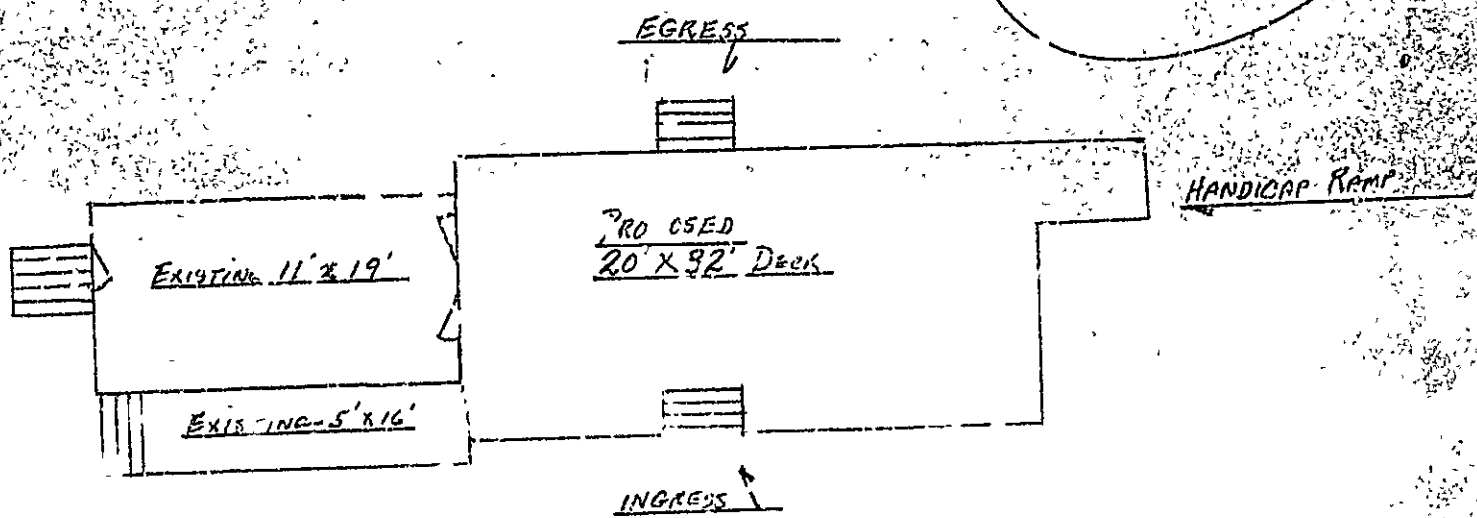
PHONE NO.

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

AMENDMENT FOR 20' X 32' DECK
BENNY'S LANDING
199 WEST COMMERCIAL ST

Per Order of
J. L. [unclear]
P.F.D.



WEST COMMERCIAL ST

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: Benn, 's (B. Sawyer) Phone # 774-2084
 Address: 81 Forest Ave. - Ptld, ME 04101
 LOCATION OF CONSTRUCTION: 199 West Commercial St.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: deck for take-out
 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: _____

MINOR SITE PLAN REVIEW

Foundations:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Sides _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other: _____

Floors:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Spacing 16" O.C.
 4. Joists Size: _____
 5. Bridging Type: _____
 6. Floor Sheathing Type: _____
 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: 6/5/92 Subdivision: _____
 Inside Fire Limits _____ Name _____
 Bltg Code _____ Lot _____
 Time Limit _____ Ownership: _____ Public _____ Private _____
 Estimated Cost _____

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

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ 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 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 if required Yes _____ No _____
 2. No. of Tubs or Showers _____
 3. No. of Fixtures _____
 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.

Permit Received By Louise E. Chase

Signature of Applicant Robert C. Sawyer Date 6-5-92
 CEO's District 1920 Robert Sawyer

CONTINUED TO REVERSE

Ivory Tag - CEO

White - Tax Assessor

PLOT PLAN

7/29/94 work done without final inspection

FEES (Breakdown From Front)		Type	Inspection Record	Date
Base Fee \$	_____	_____	_____	____/____/____
Subdivision Fee \$	_____	_____	_____	____/____/____
Site Plan Review Fee \$	300 -	_____	_____	____/____/____
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.

Robert E. Long
SIGNATURE OF APPLICANT

92 MUSSEY ST SO PORTLAND
ADDRESS

7672357
PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant Benny's (Benjamin Sawyer)

Date 6/5/92

Mailing Address 81 Forest Ave- Ptld, ME 04101

Address of Proposed Site 199 West Commercial St.

Proposed Use of Site construct deck for take-out food

Site Identifier(s) from Assessors Map: _____

Ac. of Site / Ground Floor Coverage 20,258 sq ft / 24'x32'

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: contact person : Benjamin Sawyer - 774-2084

City Dept. Review Due: _____

MINOR 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: SPAC. & BULK,
as applicable

	DATE	ZONE LOCATION	INTERIOR CORNER LOT	20 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	SQ. FT. 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:

W.A.S. 8-14-92

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant: Benny's (Benjamin Sawyer) Date: 6/5/92
 Mailing Address: 31 Forest Ave - Ptld, ME 04101 Address of Proposed Site: 193 West Commercial St.
 Proposed Use of Site: construct deck for take-out food Site Identifier(s) from Assessors Maps: _____
 Acreage of Site / Ground Floor Coverage: 20,258 sq ft / 24'x32' 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: contact person : Benjamin Sawyer - 771-2084
 Date Dept. Review Due: _____

MINOR SITE PLAN REVIEW

FIRE DEPARTMENT REVIEW

(Date Received) _____

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

REASONS: A hydrant must be within 500', as measured along the normal path of Fire Dept. Apparatus, off the building

(Attach Separate Sheet if Necessary)

6-8-92

[Signature]

SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Planning

Applicant: Benny's (Benjamin Sawyer) Date: 5/5/92
 Address: 81 Forest Ave- Ptld, ME 04101 Address of Proposed Site: 101 West Commercial St.
 Mailing Address: contract book for take-out food
 Proposed Use of Site: 24' x 32' Site Identifier(s) from Assessors Maps: _____
 Acreage of Site: _____ 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: contact person : Benjamin Sawyer - 774-2084

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 VIABILITY	COMPLIES WITH CITY PLAN
APPROVED												
APPROVED CONDITIONALLY												CONDITIONS SPECIFIED BELOW
DISAPPROVED												REASONS SPECIFIED BELOW

REASONS: _____

RECEIVED

JUN 0 8 1992

(Attach Separate Sheet if Necessary)

PORTLAND PLANNING OFFICE

Melodie A. Fitzpatrick 7/13/92

SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

**CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form**

*Melodie Esterberg
Planner*

Applicant: Benny's (Benjamin Sawyer) Date: 5/5/92
 Mailing Address: 81 Forest Ave - Portland, ME 04101 Address of Proposed Site: 199 West Commercial St.
 Proposed Use of Site: construct deck for take-out food Site identifier(s) from Assessor's Maps: _____
 Acreage of Site / Ground Floor Coverage: 20,258 sq ft / 24' x 3' Zoning of Proposed Site: _____
 Site Location Review (DEP) Requirements: () Yes () No Proposed Number of Floors: _____
 Board of Appeals Action Required: () Yes () No Total Floor Area: _____
 Planning Board Action Required: () Yes () No
 Other Comments: contact person: Benjamin Sawyer - 774-2084
 Date Dept. Review Due: _____

MINOR SITE PLAN REVIEW

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) _____

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	UTILIZATION	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)

RECEIVED

JUN 0 8 1992

PORTLAND PLANNING OFFICE

Melodie Esterberg 7/13/92
SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 19 West Commercial St		Owner: Guilford Transportation		Phone:	
Owner Address:		Leasee/Buyer's Name: Benny's 109 W. Commercial ST Portland, ME 04102		Business Name:	
Contractor Name: Self - Benny's		Address:		Phone: Jeff Morrison - 793-5221	
Past Use: Rest		Proposed Use: Same Temporary structure		COST OF WORK: \$ 900	
Proposed Project Description: Install temporary structure thru 31 OCT 1995		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		PERMIT FEE: \$ 25.00	
Permit Taken By: Mary Gresik		Date Applied For: 07 June 1995		INSPECTION: 4 Use Group Type Signature: [Signature] 6/6	

Permit No: **950612**

PERMIT ISSUED

Permit Issued:
JUN 14 1995

CITY OF PORTLAND

Zone: [Handwritten] CR
W.P.D.

Zone of App: [Handwritten] 1
SPR [Handwritten] 1
Shoreland [Handwritten] 1
 Wetlands [Handwritten] 1
 [Handwritten] 1

Aerial
 Miscellaneous
 Conditional
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: **6/15/95**
[Signature]

CEO DISTRICT **3**
A. SIMPSON

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

★ Jeff Morrison
39 High View Rd
Cape Elizabeth, ME 04107

will pick up

PERMIT ISSUED WITH LETTER

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 his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: [Signature] Jeff Morrison ADDRESS: DATE: 07 June 1995 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector