

PLUMBING APPLICATION

PROPERTY ADDRESS:

Town Or Plantation: Portland Maine
 Street: 53 Baxter Bld
 Subdivision Lot #

PROPERTY OWNERS NAME:

Last: Stimpson Ass. First: Mark
 Applicant Name: Robert M. Leason
 Mailing Address of Owner/Applicant (if Different): Box 243 Vermont St Me.

Owner/Applicant Statement 011096
 I certify that the information submitted is correct to the best of my knowledge and understanding and that any falsification is reason for the Local Plumbing Inspector to deny a permit.
 Signature of Owner/Applicant: [Signature] Date: 11/12/87

PORTLAND PERMIT # 2,623 TOWN COPY

Date Permit Issued: 11/13/87 \$ 56 If Double Fee Charged

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

Caution: Inspection Required
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules. **DEC 2 1987**

Local Plumbing Inspector Signature: _____ Date Approved: _____

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 Bld.

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 # 15599

NOV 16 1987

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
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR	2	Urinal	1	Sink
		Drinking Fountain	10	Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	10	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups & Relocations		Other: _____	3	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	24	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			26	Total Fixtures
			\$46.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$51.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PERMIT # 1261 PORTLAND BUILDING PERMIT APPLICATION DATE 9/21/87 PERMIT ISSUED

I. GENERAL INFORMATION
Location/address of construction 53 Barber Boulevard
1. Owner's name Mark Stimson Assoc. Tel. 774-6141
Address 663 Washington Avenue
2. Lessee's name _____ Tel. _____
Address _____
3. Contractor's name EDS Incorporated Tel. 772-5367
Address 44 Oak Street 04101
4. Is this a legally recorded lot? yes _____ no _____

OCT 1 1987
City of Portland

II. DESCRIPTION OF WORK:

to make interior renovations

send permit at #3

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

IV. ZONE _____ Street frontage _____ Zoning board approval: no yes date _____
Setbacks: front _____ back _____ side _____ side _____ Planning board approval: no yes date _____

V. REVIEW REQUIRED: variance _____ other _____ Number of off-street parking spaces:
site plan _____ subdivision _____ shore _____ floodplain mgmt _____ enclosed _____ outdoors _____

VI. FEES:
base fee _____ other fees _____
subdivision fee _____ late fee _____
site plan review fee _____ TOTAL \$2,290

VII. DETAILS OF WORK

1. WATER SUPPLY: public private
2. SEWER: public private, type _____
3. HEAT: type _____ fuel _____
4. FOUNDATION: type _____
thickness _____ footing _____
5. ROOF: type _____ pitch _____
covering _____ load _____
6. PLUMBING: _____
SPRINKLER SYSTEM? yes no

7. ELECTRICAL: service entrance size _____
smoke detectors _____
9. FRAMING: floor joists _____ size _____ max. on center _____
ceiling joists _____ rafters _____
studs _____ wall studs _____

8. CHIMNEY: # flues _____
material _____ # fireplaces _____

10. If 1-story building w/masonry walls: wall thickness _____ height _____

11. BEDROOM WINDOWS height _____ width _____
sill height _____ egress window? yes no

VIII. OFFICE USE: TAX MAP # _____
LOT # _____
VALUE/STRUCTURE _____
PERMIT EXPIRATION _____
IX. NEW OR PHASED SUBDIVISION REFERENCE: Name _____
Lot _____
Block _____

CODE: _____ If other, explain _____ Seasonal Condominium Apartment

X. PROPOSED USE: 324-001-0005

XI. PAST USE: _____

XII. OWNERSHIP: PUBLIC PRIVATE

XIII. EST. CONSTRUCTION COST: 154,000 XIV. GR. SQ. FT. OF LOT BUILDING _____

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY: BEDROOMS
NEW DWELLING UNITS WITH: 1. BDRM 2. BDRMS 3. BDRMS
EXISTING DWELLING UNITS WITH: _____
XVI. # RESIDENTIAL UNITS: # NEW DWELLINGS _____
EXISTING DWELLINGS _____
TOTAL RESIDENTIAL UNITS _____

APPROVALS BY: DATE _____ MISCELLANEOUS
BUILDING INSPECTION - PLAN EXAMINER _____ Will work require disturbing of any tree on a public street?
ZONING: _____ Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?
C.E.O. _____
FIRE DEPT. _____

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical, and mechanicals.

District No. _____ XVII. SIGNATURE OF APPLICANT _____ PHONE # _____
TYPE NAME OF ABOVE William Smith for Mark Stimson 1 2 3 4

PERMIT # 901508 CITY OF Portland BUILDING PERMIT APPLICATION

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

MAP # _____ LOT# _____

Owner: RDS Construction
 Address: 53 Baxter Boulevard 772-5367
 LOCATION OF CONSTRUCTION: 53 Baxter Boulevard
 CONTRACTOR: XXXXXXXXXX SUBCONTRACTORS: _____
 ADDRESS: XXXXXXXXXX Mainas - P.O. Box 1090 86 Bridgeton Road

For Official Use Only	
Date: <u>11/18/87</u>	Sub-Division: Yes / No _____
Inside Fire Limits _____	Name _____
Blgd Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>535.00</u>	

Est. Construction Cost: _____ Type of Use: No. Windham 04062
 Past Use: business
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain to erect 1-1,000 gal. propane tank

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

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

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

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. 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 _____ 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 _____
 4. Other _____

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By Kandi Cote

Signature of Applicant Gary Luke Date 11/18/87

Signature of CEO Gary Luke Date 11/18/87

Inspection Dates _____

PERMIT # 001489 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimson

Address: 53 Baxter Blvd. 879-0770

LOCATION OF CONSTRUCTION 53 Baxter Boulevard

CONTRACTOR: Jet Line Services Inc. SUBCONTRACTORS: 1000 N. Main St.

ADDRESS: Box 180 Stoughton MA 09072 1-800-JET-LINE 4104

Est. Construction Cost: _____ Type of Use: _____

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Tank removal

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

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

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
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: <u>November 10, 1987</u>	Sub-division: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee _____	

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____ **PERMIT ISSUED**
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____ NOV 10 1987

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size City of Portland
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 Fix - res _____

Swimming Pools:

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

Zoning:

District _____ Street Frontage Req. _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception _____

Other (Explain) _____

Date Approved _____

Permit Received By Lynne Benoit

Signature of Applicant [Signature] Date 11/10/87

Signature of CEO [Signature] Date 11/12/87

Inspection Dates _____

JET-LINE SERVICES, INC.

Customer P.O. No. _____
 Customer EPA I.D. No. _____
 Contract No. (if any) _____

P.O. Box 180
 Stoughton, MA 02072
 1-800-JET-LINE

Date November 2, 1987
 Job No. 23165
 Prepared by Kevin M. Powell

CONTRACT INITIATION FORM

Person Authorizing Work <u>Mr. Bill Smith</u>	Position	BILL TO: Name <u>R.D.S. Construction Co.</u>
Customer/Company Name <u>R.D.S. Construction Company</u>		Company Name <u>R.D.S. Construction Co.</u>
Work Location-Address <u>53 Baxter Boulevard</u>		Address <u>44 Oak Street, Portland</u>
State <u>Portland, Maine 04101</u>	Zip Code	State <u>Maine</u> Zip Code <u>04103</u>
Telephone No. <u>871-9250</u>		Telephone No. <u>772-5367</u>

STATEMENT OF WORK

Jet Line Services to provide the necessary Labor and Equipment to cut, clean, transport and dispose of one (1) 1,000 gallon underground #2 oil storage tank. This is a Time and Materials job with charges made tal to portal and in accordance with Wage and Equipment Rates schedule acd July 1987 and attached hereto as Addendum #1. Other applicable charges are as follows:

5 Point soil sampling and analysis: \$150.

Liquid disposal of fuel oil other than gasoline: .46/gal.

Disposal of # 2 oil contaminated tank @ \$200.

It is understood that all excavation, backfilling and loading is by Maietta.

A 4.75 % Insurance adjustment charge will be added to the final invoice.

Federal/State Notification - Date: <u>11/2/87</u>	Time:	A.M. <input checked="" type="checkbox"/> P.M.	Person Notified: Agency: <u>Maine D.E.P.</u>	Agency Insp. Required? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Disposal Required Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Petroleum Waste <input checked="" type="checkbox"/> Chemical or Other Waste <input type="checkbox"/>	Liquid <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Sludge <input type="checkbox"/>	Bulk <input checked="" type="checkbox"/> Drums <input type="checkbox"/> Bags <input type="checkbox"/>	

Price: Contract T&M Amount: _____ Limit: _____ (See Rate Schedule)

Jet-Line Services shall exert its best technical efforts to perform and carry out in a satisfactory manner the services set forth in the statement of work, and in accordance with State and Federal regulations and good engineering practices. Unless specifically addressed in the above price, disposal costs are in addition to the contract price. All emergency response labor is charged at a 33 1/3% premium over published rates. State and Federal taxes, including the Massachusetts Hazardous Waste Transporter's Fee, if applicable, (\$0.092/gallon and/or \$0.0092/pound-801 CMR 4.00), are in addition to disposal prices. An insurance adjustment of 4.75% is applied to the total invoice unless specifically addressed in the above price. The terms and conditions on the reverse side are incorporated in, and made a part of, this agreement. No changes, alterations or amendments of the terms or conditions of this agreement are authorized or effective unless in writing and signed by an officer of Jet-Line Services, Inc.

Authorized Signature - Customer _____

Date _____

Authorized Signature - Jet Line Kevin M. Powell

Date 11/2/87

KEVIN M. POWELL - Sales Representative

PERMIT # ± 116 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stinson

Address: 53 Baxter Boulevard Portland 879-0770

LOCATION OF CONSTRUCTION 53 Baxter Boulevard

CONTRACTOR: Coyne Signs SUBCONTRACTORS: _____

ADDRESS: 84 Cove Street Portland, ME 772-4144

Est. Construction Cost: _____ Type of Use: Real estate brokers

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain 3 sets of letters 18" & 12" and 3 logos

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE 16" x 8'9" as per plans

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

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

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
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: <u>February 5, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration _____
Value/Structure Fee <u>44.80</u>	Ownership: _____ Public _____ Private _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing FEB 12 1988
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 _____
4. Other _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

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

Swimming Pools:

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

Zoning:

District: _____ Street Frontage Req. _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception _____

Other (Explain) _____

Date Approved _____

Permit Received By L. Benoit

Signature of Applicant Sandra L. Miller Date _____

Signature of CEO Sandra Miller Date _____

Inspection Dates _____

PERMIT # 1339 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimson & Richard Schweppe - 879-0770
 Address: 53 Baxter Blvd., Portland, ME 04101
 LOCATION OF CONSTRUCTION: 51 Baxter Blvd. - Tenant #1
 CONTRACTOR: R.D.S., Inc. 772-5367
 ADDRESS: 559 Congress St., Portland, ME 04101
 Est. Construction Cost: \$19,000.00 Type of Use: Offices
 Past Use: Insurance
 Building Dimensions L W Sq. Ft. # Stories Lot Size
 Is Proposed Use: Offices Seasonal Condominium Apartment
X Conversion - Explain change of use from insurance to two offices.

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

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 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: <u>October 21, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>\$19,000.00</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$115.00</u>	

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 _____
 3. Roof Covering Type _____
 4. Other _____

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By J. V. M. Rinaldi

Signature of Applicant [Signature] (RDS) for owner Date 10/21/88

Signature of CEO (B) BM Date _____

Inspection Dates _____

PERMIT # 001479 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimson and Richard Schweppe
 Address: 53 Baxter Blvd., Portland, 04101
 LOCATION OF CONSTRUCTION: 53 Baxter Blvd.
 CONTRACTOR: RDS, Inc. SUBCONTRACTORS: 772-5367
 ADDRESS: 559A Congress, Portland, Me 04101
 Est. Construction Cost: \$23,000 Type of Use: Office
 Past Use: _____
 Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain: Interior Penovations as per attached plans.

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

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 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: December 1, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Tree Limit: _____ Block _____
 Estimated Cost: 600 Permit Expiration: _____
 Value Structure: 135.00 Ownership: _____ Public _____ Private _____

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size DEC 7 1988
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____
 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 00.00

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

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

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt _____ Special Exception _____
 Other: (Explain) _____
 Date Approved: 12/1/88

Permit Received By: Nancy Grossman
 Signature of Applicant: _____ Date: 12/1/88
 Signature of CEO: _____ Date: 12-7-88

Inspection Dates: _____
 White-Tax Assessor _____ Yellow-GPCOG _____ White Tag-CEO _____
 © Copyright GPCOG 1987

PLOT PLAN



FEEES (Breakdown From Front)

Base Fee \$ 25.00
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ 110.00
(Explain) _____
Late Fee \$ _____

Type

Inspection Record

Date

Type	Inspection Record	Date
<u>FINAL</u>		<u>1 16 189</u>
_____	_____	<u>1 1</u>
_____	_____	<u>1 1</u>
_____	_____	<u>1 1</u>

COMMENTS OK. Send ... of O. to owners, same address.

Signature of Applicant

[Signature] Agent for owner

Date

12/1/88

PERMIT # 001333 CITY OF Portland BUILDING PERMIT APPLICATION MAP # LOT#

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

Owner: Mark Stimpson
 Address: 53 Baxter Blvd., PORTLAND
 LOCATION OF CONSTRUCTION: XXXXXXXXXX 53 Baxter Blvd.
 CONTRACTOR: Coyle Signs SUBCONTRACTORS: Call Nassar when ready - 772-4144
 ADDRESS: 92 Industrial Park Rd., Saco

For Official Use Only	
Date: <u>October 25, 1988</u>	Subdivision: Yes / No
Inside Fire Limits: _____	Name: _____
Blg Code: _____	Lot: _____
Time Limit: _____	Block: _____
Estimated Cost: _____	Permit Expiration: _____
Value: _____	Owner: <input type="checkbox"/> Public <input type="checkbox"/> Private

Est. Construction Cost: _____ Type of Use: XXXXXXXXX Commercial
 Past Use: _____
 Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain To erect ESSEX signs (28"x10') (42 sq. ft.) as
COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE per attached plan.
 Residential Buildings Only: _____ Also erecting 2 (28"x5')
 # Of Dwelling Units _____ # Of New Dwelling Units (27 42 sq. ft.) signs as
 per plans.

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 _____
 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 _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures 02, 25

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

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

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance: _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____ Special Exception _____
 Other (Explain) _____
 Date Approved OK W. J. Stimpson October 25, 1988

Permit Received By Nancy Grossman

Signature of Applicant Nassar Chanana Date 10-25-88

Signature of CEO _____ Date _____

Inspection Dates _____

88 - 25 31 White-Tax Assesor Yellow-GPCOG White Tag-CEO
 7711115 45 T19PA 2A AS Agent 29 Copyright GPCOG 1987
 OWNER: Mark Stimpson

B PERMIT # 001333 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimpson
 Address: 53 Baxter Blvd., Portland
 LOCATION OF CONSTRUCTION XXXXXXXXXX 53 Baxter Blvd.
 CONTRACTOR: Coyne Signs SURCONTRACTORS: Call Nassar when ready- 772-4144
 ADDRESS: 92 Industrial Park Rd., Saco

Est. Construction Cost: _____ Type of Use: XXXXXX Commercial
 Past Use: _____
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
Conversion - Explain To erect XXXXX signs (28"x10') (#2 sq-ft.) as

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE per attached plan.
 Residential Buildings Only: Also erecting 2 (28"x5')
 # Of Dwelling Units _____ # Of New Dwelling Units (XX 42 sq-ft.) signs as
 per plans.

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: <u>October 25, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$50.20</u>	

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceiling: _____
 4. Insulation Type _____ Size OCT 25 1988
 5. Ceiling Height: _____

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By Nancy Grossman

Signature of Applicant Nassar charana Date 10-25-88

Signature of CEO (B) BM Date _____

Inspection Dates _____



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date December 8, 1987
 Receipt and Permit number 22648

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: 53 Baxter Boulevard

OWNER'S NAME: Mark Stimpson ADDRESS: same

	FEES
OUTLETS:	
Receptacles _____ Switches <u>1</u> Plugmold _____ ft. TOTAL _____	3.00
FIXTURES: (number of)	
Incandescent _____ Flourescent _____ (not strip) TOTAL _____	
Strip Flourescent _____ ft. _____	
SERVICES:	
Overhead <u>2</u> Underground _____ Temporary _____ TOTAL amperes <u>400</u> ..	5.00
METERS: (number of) <u>2</u> ..	1.00
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/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	

INSTALLATION FEE DUE: _____
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b)
 TOTAL AMOUNT DUE: 10.00

INSPECTION:
 Will be ready on _____, 19__; or Will Call X
 CONTRACTOR'S NAME: Energy Elec
 ADDRESS: 296 Warren Avenue
 TEL.: 797-9340
 MASTER LICENSE NO.: 03270 SIGNATURE OF CONTRACTOR: _____
 LIMITED LICENSE NO.: _____

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

ELECTRICAL INSTALLATIONS —

Permit Number 22648

Location 533 Spring St. Aliso

Owner Michael J. Johnson

Date of Permit 12/8/87

Final Inspection 12/10/87

By Inspector D. J. Jones

Permit Application Register Page No. 19

INSPECTIONS: Service 200 amp by Russ
 Service called in 12-10-87
 Closing-in _____ by _____

PROGRESS INSPECTIONS: _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____

DATE:	REMARKS:
<u>5/5/88</u>	<u>Completed -</u>

CODE
 COMPLIANCE
 COMPLETED
 DATE 12/10/87

PERMIT # 001479 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimson and Richard Schweppe
 Address: XXXXXXXXXXXX 53 Baxter Blvd., Portland, 04101
 LOCATION OF CONSTRUCTION 53 Baxter Blvd.
 CONTRACTOR: RDS, inc. SUBCONTRACTORS: 772-5367
 ADDRESS: 559A Congress, Portland, Me 04101
 Est. Construction Cost: \$23,000 Type of Use: Office
 Past Use: _____
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Interior Renovations as per attached plans.

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

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 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: December 1, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: \$23,000 Permit Expiration: _____
 Valuation Structure _____ Ownership: _____ Public _____
 Fee: \$135.00 Private _____

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____ **PERMIT ISSUED**
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____ **DEC 7 1988**

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By Nancy Crossman

Signature of Applicant: [Signature] Date 12/1/88

Signature of CEO: [Signature] Date _____

Inspection Dates _____

PERMIT # 0001 CITY OF Portland BUILDING PERMIT APPLICATION Abmt 1700 1-88 MAP # _____ LOT# _____

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

Owner: Mark Stimson Associates

Address: 53 Baxter Boulevard

LOCATION OF CONSTRUCTION 53 Baxter Boulevard

CONTRACTOR: iDS Inc. SUBCONTRACTORS: Mail to: _____

ADDRESS: 44 Oak Street Portland 04101 772-5367

Est. Construction Cost: 40,000 Type of Use: Real Estate Broker

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Interior renovations to existing space

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

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

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
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 _____ 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: <u>February 17, 1988</u>	Subdivider: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>40,000</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>220</u>	

Ceiling: **PERMIT ISSUED**

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____ MAR 1 1988
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____ City of Portland

Roof:

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

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

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

Swimming Pools:

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

Zoning:

District: TE2 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: O.R. MacIsaac Feb 17 1988

Permit Received By L. Benoit

Signature of Applicant: [Signature] Date: _____

Signature of CEO: [Signature] Date: 2-29-88

Inspection Dates: _____

167 MA MACISAAC

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 220

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Inspection Record

Type	Date
2nd floor	3 19 88
1st floor rear	4 12 88
1st floor front	11 10 88

COMMENTS 11-10-88 ISSUE C.O.F.O.: OFFICE SPACE, ENTIRE BLDG.

Mail to: R.D.S. Inc.

44 Oak St.

Portland 04101

Signature of Applicant *W. Smith* Date _____

PERMIT # 001101 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimpson Associates
 Address: 53 Baxter Blvd., Portland, 04102
 LOCATION OF CONSTRUCTION 53 Baxter Blvd., 1st Floor
 CONTRACTOR: R.D.S. Inc. SUBCONTRACTORS: 772-5367
 ADDRESS: 559A Congress St., Portland, 04101

Est. Construction Cost: \$72,000 Type of Use: Office
 Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain Interior Renovations to Office space as per plans

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

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 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: September 7, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: 72,000 Permit Expiration: _____
 Value/Structure _____ Ownership: _____ Public _____ Private _____
 Fee: \$300.00

Coiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 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:
 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 _____

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

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

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

Permit Received By: Nancy Grossman

Signature of Applicant: [Signature] Date: 9/7/88

Signature of CEO: [Signature] Date: _____

Inspection Dates: _____

PERMIT # 1101 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Mark Stimpson Associates

Address: 53 Baxter Blvd., Portland, 04102

LOCATION OF CONSTRUCTION 53 Baxter Blvd., 1st Floor

CONTRACTOR: R.J.S. Inc. SUBCONTRACTORS: 772-5367

ADDRESS: 559A Congress St., Portland, 04101

Est. Construction Cost: \$72,000 Type of Use: Office

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Interior Renovations to Office space as per plans

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: # Of Dwelling Units _____ # Of New Dwelling Units _____

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 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: September 7, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: \$72,000 Permit Expiration: _____
 Value Structure _____ Ownership: _____ Public _____ Private _____
 Fee: \$380.00

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 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:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By Nancy Grossman

Signature of Applicant William R. Smith Date 9/7/88

Signature of CEO 6 Date _____

Inspection Dates _____

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation: Portland
Street Subdivision Lot #: 55 Baiter DWN
PROPERTY OWNERS NAME
Last: Kimmel First: Ken
Applicant Name: Gerard G Letellier Jr.
Mailing Address of Owner/Applicant (if Different): P.O. Box 1151 Bid. No. 04005

PORTLAND 3752 TOWN COPY
Date Permit Issued: 1/29/90 \$ 360.00 FEE Double Fee Charged
Gerard G Letellier Jr. L.P.I. # 11213
Local Plumbing Inspector Signature

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

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

MAR 14 1990
Date Approved

PERMIT INFORMATION

This Application is for
1. NEW PLUMBING
2. RELOCATED PLUMBING
JAN 4 / 90

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 # 06457

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	<u>0.1</u>	Sink
		Drinking Fountain	<u>0.4</u>	Wash Basin
		Indirect Waste	<u>0.4</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	<u>0.1</u>	Laundry Tub
Number of Hook-Ups & Relocations		Other: <u>Water Heater</u>	<u>0.3</u>	Water Heater
\$ Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	<u>1.3</u>	Fixtures (Subtotal) Column 1
			<u>0.0</u>	Fixtures (Subtotal) Column 2
			<u>1.3</u>	Total Fixtures
			\$ <u>36.</u>	Fixture Fee
			\$	Hook-Up & Relocation Fee
		\$ <u>36.</u>	Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 53 Baxter Boulevard

Issued to Mark Stimson Associates

Date of Issue April 26, 1988

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. 88/167, 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

Tenant Rental Area #4.

First Floor

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

U. J. ...
[Signature]

Date
4/26/88
[Signature]

Inspector

[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 # 001594

CITY OF Portland

BUILDING PERMIT APPLICATION

MAP #

LOT #

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

Owner: Marc Scrimson

Address: 53 Baxter Blvd.

LOCATION OF CONSTRUCTION: 53 Baxter Blvd.

CONTRACTOR: Coyne Sign SUBCONTRACTORS: 772-4144

ADDRESS: 92 Industrial Prkwy Saco 04072

Est. Construction Cost: 2,000 Type of Use: real estate

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

_____ Conversion - Explain free standing sign 5' x 8'

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil: _____

2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____

4. Foundation Size: _____

5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.

2. Girder Size: _____

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: <u>January 17, 1989</u>	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>52.00</u>	

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 _____

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 00 Yes No

2. No. of Tubs or Showers _____

3. No. of Flushes _____

4. No. of Lavatories _____

5. No. of Other Fixtures 31 per req US.

Swimming Pools:

1. Type: _____

2. Pool Size: _____ x _____ Square Footage _____

3. Must conform to National Electrical Code and State Law.

Zoning:

District: 1-2 Street Frontage Req.: _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception _____

Other (Explain) _____

Date Approved: _____

Permit Received By Deborah Coode

Signature of Applicant NASS Charman Date 1-17-89

Signature of CEO AS Agent for owner Date _____

Inspection Dates _____

Bill MacLean

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

© Copyright GPCOG 1987

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 25.00
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$.20 per sq. ft. (40 sq ft.) 8.00
(Explain) _____
Late Fee \$ _____

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

COMMENTS 2-15-89 Erected OK
~~_____

_____~~

Signature of Applicant Naseer Charani AS Agent For owner Date 1-17-89

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

Location of Construction: 53 Baxter Blvd		Owner: Back Bay Realty, Inc.		Phone:	Permit No: 960533
Owner Address:		Leasee/Buyer's Name: Mark Stimpson		Phone:	<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED JUN 12 1996 CITY OF PORTLAND </div>
Contractor Name: Center Line Construction, Inc.		Address: P.O. Box 1264 Ptld, ME 04104		Phone: 846-0042	
Fast Use: Office	Proposed Use: Same	COST OF WORK: \$ 775.00	PERMIT FEE: \$ 25.00	FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 30 BOC 4931
Proposed Project Description: Install to interior wall		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
Permit Taken By: Mary Greik		Date Applied For: 05 June 1996		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..					
<div style="border: 2px solid black; padding: 5px; transform: rotate(-5deg); display: inline-block;"> PERMIT ISSUED WITH LETTER </div>					
<p style="text-align: center;">CERTIFICATION</p> <p>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</p>					
SIGNATURE OF APPLICANT <i>[Signature]</i>		Richard Miller		ADDRESS:	DATE: 05 June 1996
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:	
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Gard-Inspector				CEO DISTRICT 5 <i>[Signature]</i>	

Zone: **B2** CBL: 112-E-007
 Zoning Approval: *[Signature]* 6/7/96
 Special Zone or Review:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

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

Action:
 Approved
 Approved with Conditions
 Denied

Date: *6/7/96*

[Signature]
 D. Andrews

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

Location of Construction: 53 Baxter Blvd		Owner: ack Bay Realty	Phone:	Permit No: 60947 PERMIT ISSUED SEP 26 1996 CITY OF PORTLAND
Owner Address:		Leasee/Buyer's Name: Mark Stimson 1st floor	Business Name:	
Contractor Name: Center Line Construction		Address: P.O. Box 1264 Ptld, ME 04104		Permit Issued: SEP 26 1996 CITY OF PORTLAND
Past Use: Office		Proposed Use: Same	Phone: 846-0042	
Proposed Project Description: Make Interior Renovations (1st floor)		COST OF WORK: \$ 1,900.00	PERMIT FEE: \$ 30.00	Zone: CBL: 112-E-007 Special Zone or Reviews: 16 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: Signature: <i>MM</i> Date: <i>9/25/96</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>OK - 9/25/96</i> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied
Permit Taken By: Mary Gresik		Date Applied For: 23 September 1996		

- 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.

CENTER LINE CONSTRUCTION, INC.
P.O. Box 1264 • Portland, Me. 04104
(207) 846-0042 • Fax (207) 846-0043

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed authorized by the owner to make this application as his authorized agent and I agree to c 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]

Richard L. Miller
Project Manager
Pager (207) 870-4888

SIGNATURE OF APPLICANT: Richard Miller ADDRESS: DATE: 23 September 1996 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector PHONE:

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

Action:
 Approved
 Approved with Conditions
 Denied

Date: *9/24/96*

DA.

CEO DISTRICT **5**
D. Jordan

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

Location of Construction: 53 Baxter Blvd		Owner: Back Bay Realty		Phone:	Permit No: 60948
Owner Address:		Leasee/Buyer's Name: Mark Stinson 1st floor		Phone:	Business Name:
Contractor Name: Center Line Construction		Address: P.O. Box 1264 Portland, ME 04104		Phone: 846-0042	
Past Use: Office		Proposed Use: Store		COST OF WORK: \$ 1,900.00	PERMIT FEE: \$ 30.00
Proposed Project Description: Make Interior Renovations (1st floor)		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Signature: <i>[Signature]</i> Date:	
Permit Taken By: Mary Gresik		Date Applied For: 23 September 1996			

PERMIT ISSUED
SEP 26 1996
CITY OF PORTLAND

Zone: **B-2** CBL: **112-E-007**
Zoning Approval:
[Signature]
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan major minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

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

Action:
 Approved
 Approved with Conditions
 Denied
Date: *1/24/96*

CEO DISTRICT **5**
[Signature]

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

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]* **Richard Miller** ADDRESS: DATE: **23 September 1996** 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

8/Nov/96 Work done
They are satisfied

COMMENTS

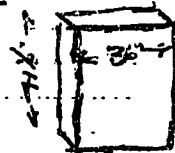
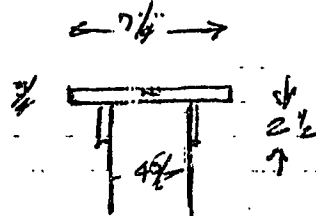
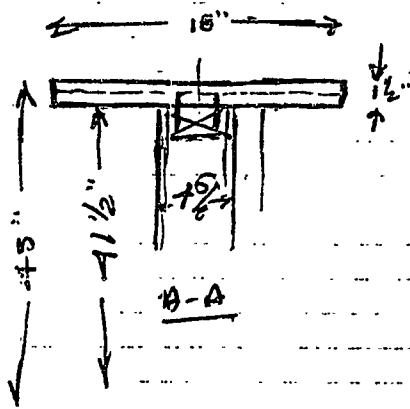
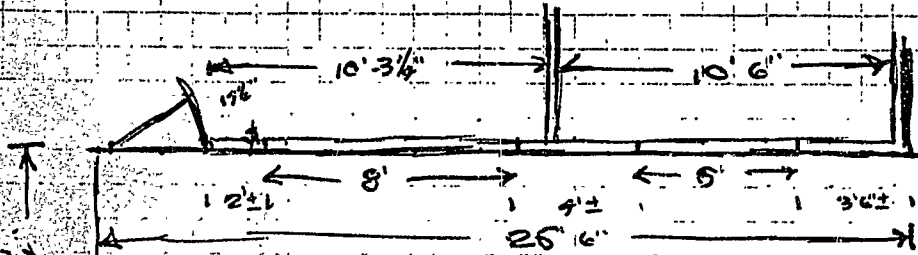
without Inspector TALKED with owner

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

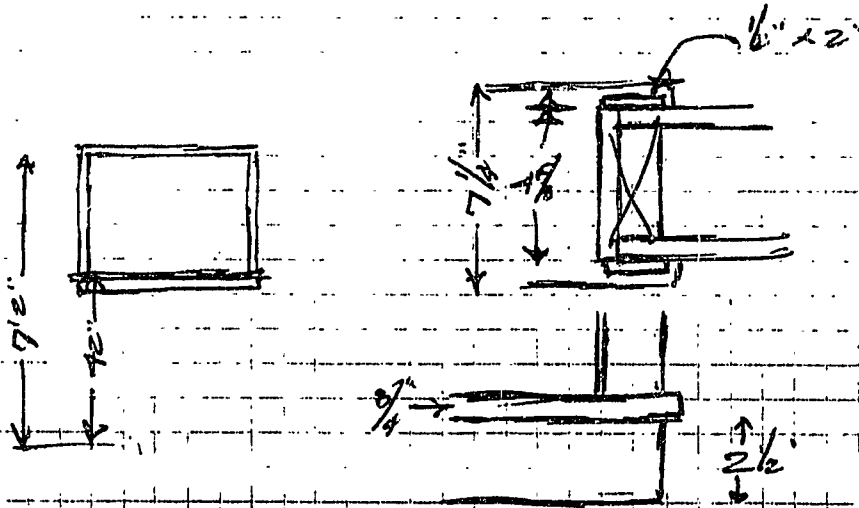
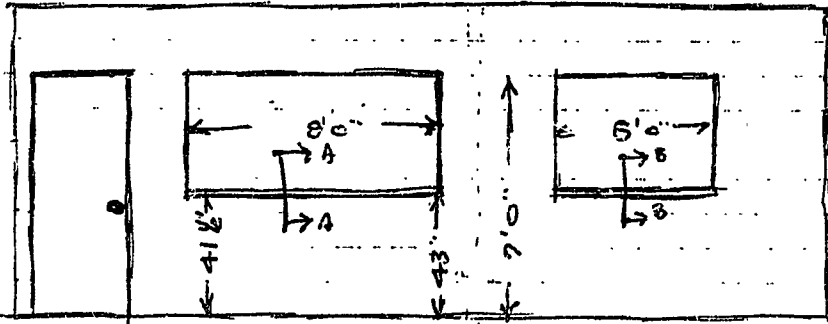
Mark Stone Books

7/13/96

Case?



Log. Fit

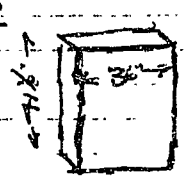
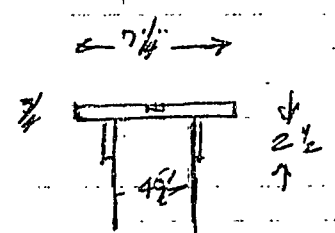
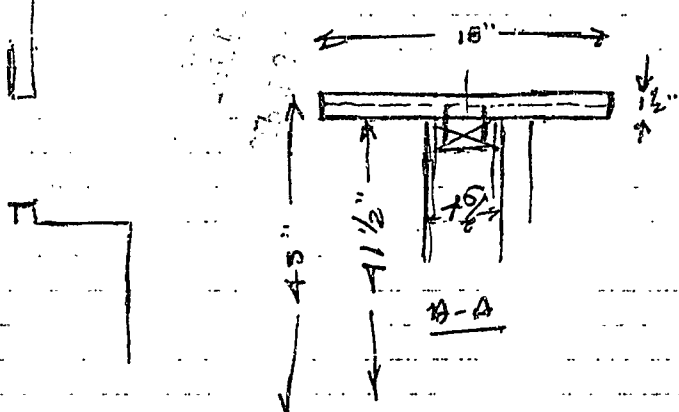
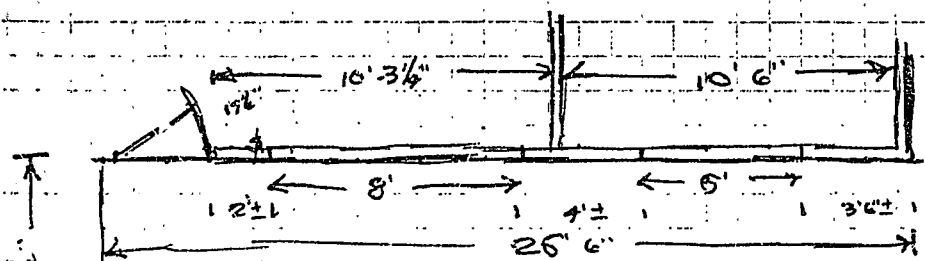


Rest. 100

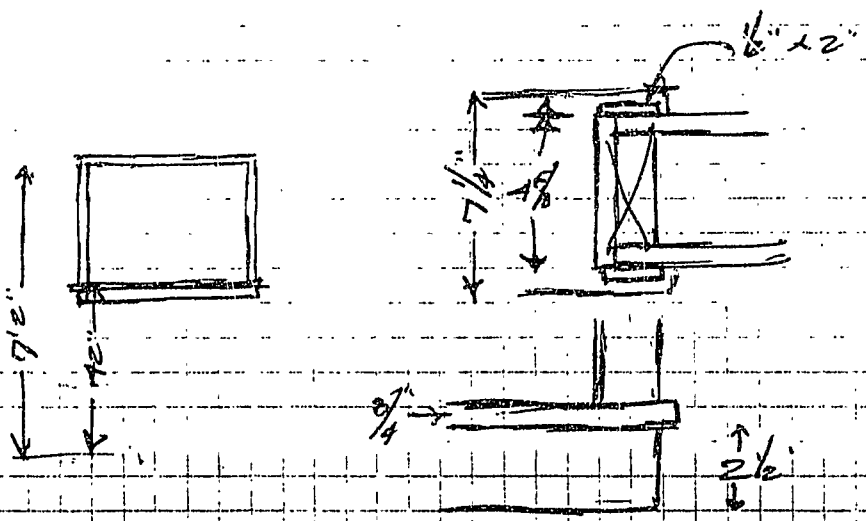
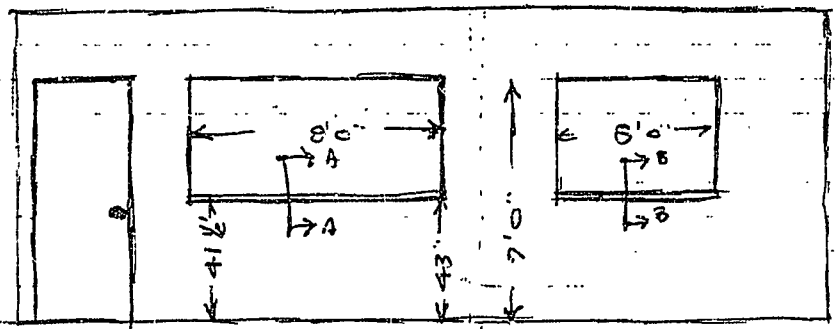
MARK ST. - BIRCH

7/13/56

2 cas?



207. FIT



207. FIT

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

Location of Construction: 53 Baxter Blvd.		Owner: Back Bay Realty, Inc.		Phone:	Permit No: 960533
Owner Address:		Leasee/Buyer's Name: Mark Stimpson		Phone:	BusinessName:
Contractor Name: Center Line Construction,		Address: P.O. Box 1264 Portland, ME 04104		Phone: 846-0042	
Past Use: Office		Proposed Use: Same		COST OF WORK: \$ 775.00	PERMIT FEE: \$ 25.00
Proposed Project Description: Install to interior wall		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: 3 Type: 3B 100 OR 43	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Signature: _____ Date: _____	
Permit Taken By: Mary Greak		Date Applied For: 05 June 1996			

PERMIT ISSUED
Permit Issued:
JUN 12 1996
CITY OF PORTLAND

Zone: **CBL** 112-E-007
Zoning Approval: *[Signature]* 6/7/96
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan major minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

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

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

CEO DISTRICT **5**
[Signature]

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]* **Richard Miller** ADDRESS: _____ DATE: **05 June 1996** 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

COMMENTS

9/1/06 Well was installed & is OK
as per plan
AMJ

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

June 11, 1996

Center Line Construction
P. O. Box 1264
Portland, Maine 04104

RE: 53 Baxter Boulevard

Dear Sir,

Your application to install an interior wall has been reviewed and a permit is herewith issued subject to the requirements listed below. This permit does not excuse the applicant from meeting applicable State and Federal laws.

This permit is being issued with the understanding that the proposed window has safety glazing.

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

Sincerely,

A handwritten signature in dark ink, appearing to read "P. Hoffses", written over the typed name.

P. Samuel Hoffses
Chief, Code Enforcement Division

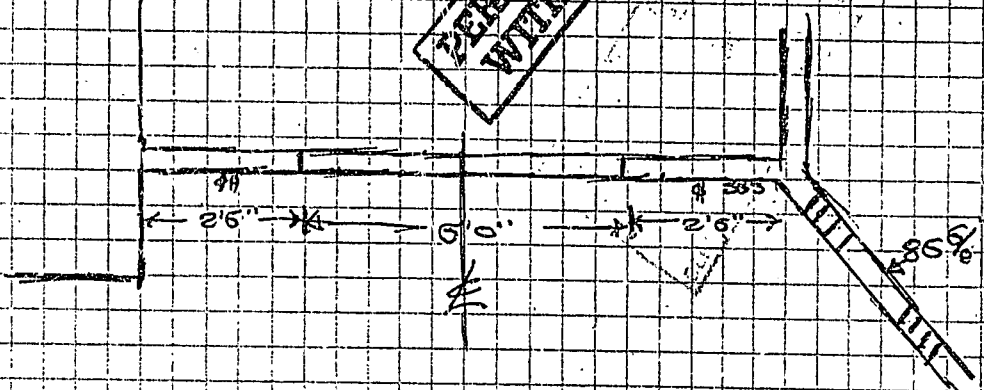
MARK STINSON REVISIONS

5/22/96

53 BOSTON BLVD.

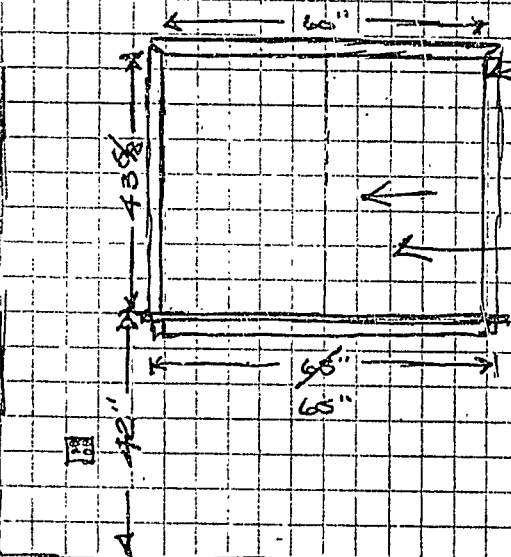
Const.

PERMIT ISSUED WITH LETTER



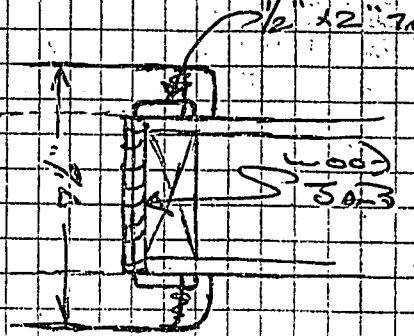
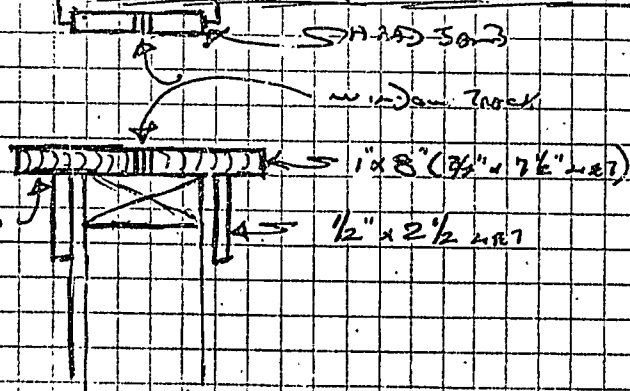
*PULL DOCK

Vinyl wall
 covering for
 POTENTIAL 24
 inch opening



STREET CURB OPENING

Glass
 sliding
 window
 1/4" PUTE





APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date December 10, 1987
 Receipt and Permit number 2265P

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: 53 Baxter Boulevard
 OWNER'S NAME: Mark Stimson ADDRESS: same

	FEES
OUTLETS:	
Receptacles <u>250</u> Switches <u>80</u> Plugmold _____ ft. TOTAL <u>330</u>	32.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent <u>340</u> (not strip) TOTAL <u>340</u>	36.00
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 <u>2</u>	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>2</u>	3.00
MISCELLANEOUS: (number of)	
Branch Panels	
Transformers	
Air Conditioners Central Unit <u>8</u>	5.00
Separate Units (windows)	
Signs 20 sq. ft. and under	
Over 20 sq. ft.	
Swimming Pools Above Ground	
In Ground	
Fire/Burglar Alarms Residential	
Commercial	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under	
over 30 amps	
Circus, Fairs, etc.	
Alterations to wires	
Repairs after fire	
Emergency Lights, battery	
Emergency Generators	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	76.00

INSPECTION:
 Will be ready on _____, 19__; or Will Call X
CONTRACTOR'S NAME: Energy Electric
ADDRESS: 296 Warren Avenue
TEL.: 797-9340
MASTER LICENSE NO.: 03270 **SIGNATURE OF CONTRACTOR:** [Signature]
LIMITED LICENSE NO.: _____

ELECTRICAL INSTALLATIONS

Permit Number 22658

Location 53 Riverside Blvd

Owner M. K. Johnson

Date of Permit 12/19/87

Final Inspection

By Inspector D. P. Green

Permit Application Register Page No. 19

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 11/30/87 by D. P. Green

PROGRESS INSPECTIONS: _____ / _____ / _____

1/2/88 / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

CODE
COMPLIANCE
COMPLETED
DATE _____

DATE:	REMARKS:
<u>1/13/88</u>	<u>Meter inspection - grounded circuit conductors and equipment grounding conductors are connected together in the meter enclosures on all 7 meters. There are not located near the service disconnect means as specified in Sec 250-61 exception #3.</u>
<u>1/19/88</u>	<u>Meters (5) may be placed this date.</u>
<u>1/28/88</u>	<u>Walls may be closed in - 1st floor</u>
<u>2/25/88</u>	<u>Final for C of C 2nd floor completed.</u>
<u>5/5/88</u>	
<u>9/9/88</u>	<u>1st floor walls may be closed in this date - Partially Partially shrouded before inspection</u>



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date Dec. 5, 1988

Receipt and Permit number 25840

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: 53 Baxter Blvd.

OWNER'S NAME: Mark Stimpson ADDRESS: 51 Baxter Blvd.

OUTLETS:	FEES
Receptacles <u>25</u> Switches <u>12</u> Plugmold _____ ft. TOTAL <u>37</u>	<u>5.00</u>
FIXTURES: (number of)	
Incandescent _____ Fluorescent <u>20</u> (not strip) TOTAL	<u>4.00</u>
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/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE: _____
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE: _____
	TOTAL AMOUNT DUE: <u>9.00</u>

INSPECTION: Will be ready on Dec. 5, 1988, 19; or Will Call _____
 CONTRACTOR'S NAME: Energy Elec
 ADDRESS: 296 Warren Ave
 TEL.: 797-9340
 MASTER LICENSE NO.: 03270 SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: _____

