

912985

Call Samantha George at 780-4631 and will pick up.

Permit # 912985 City of Portland BUILDING PERMIT APPLICATION Fee 575.00 Zone Map # Lot #

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

Owner: University of So. Maine Phone # 780-4631
 Address: 96 Falmouth St. Portland, Maine 04103
 LOCATION OF CONSTRUCTION Befforhand Brighton Ave.
 Contractor: Leavitt & Perriess Sub: Redford + Brighton Aves
 Address: 448 Pavn Rd. Scarborough, Me. Phone # 883-4184
 Est. Construction Cost: Proposed Use: Welcome Fest.
 Past Use:
 # of Existing Res. Units # of New Res. Units
 Building Dimensions L W Total Sq. Ft.
 # Stories: # Bedrooms Lot Size:
 Is Proposed Use: Seasonal Condominium Conversion
 Explain Conversion to erect 40 X 80 foot tent from Sept. 6, 1991
to Sept. 2, 1991 as per plan

For Official Use Only

Date August 27, 1991 Subdivision:
 Inside Fire Limit: Name:
 Block Code: Ownership:
 Time Limit:
 Estimated Cost:

PERMIT ISSUED
SEP 3 1991
CITY OF PORTLAND

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

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

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

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

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

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

Ceiling:
 1. Ceiling Joists Size:
 2. Ceiling Strapping Size Spacing Not in District nor Law/Code
 3. Type Ceilings: Does not require review.
 4. Insulation Type Size Require/Review.
 5. Ceiling Height: 00.20

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

Chimneys:
 Type: Number of Fire Places Date:

Heating:
 Type of Heat:

Electrical:
 Service Entrance Size: Smoke Detector Required Yes No

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

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

Permit Received By Latin
 Signature of Applicant Samantha George Date 8/27/91
 CEO's District 5 MR. WING

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO

White - Tax Assessor

PERMIT ISSUED
WITH LETTER

PLOT PLAN

N
▲



FEES (Breakdown From Front)

Base Fee \$ 35.00

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

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

COMMENTS Plot plan and certificate of flameproof submitted

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 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.

Samantha Reese 96 Falmouth St. Portland Me. 780-4631

SIGNATURE OF APPLICANT ADDRESS PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO.

Inspection Services
Samuel P. Hoffses
Chief



CITY OF PORTLAND

Planning and Urban Development
Joseph E. Gray Jr.
Director

September 3, 1991

Leavitt & Parriss
448 Payne Rd
Scarborough, ME

Re: University of Southern Maine

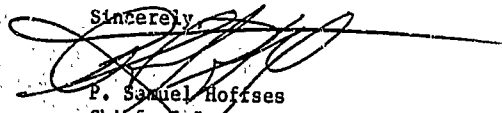
Dear Sir:

Your application to erect a 40X80 tent from September 6, 1991 thru September 9, 1991 has been reviewed and a permit is herewith issued subject the following requirements:

1. Approval is for an opensided tent with no seats inside. Any other use will require submission of a floor plan for review.

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

Sincerely,


P. Samuel Hoffses
Chief of Inspection Service

cc: Lt W. Garroway, PFD

est. 1919



LEAVITT & PARRIS, INC.

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

MANUFACTURERS OF CANVAS PRODUCTS
FOR HOME INDUSTRY AND MARINE

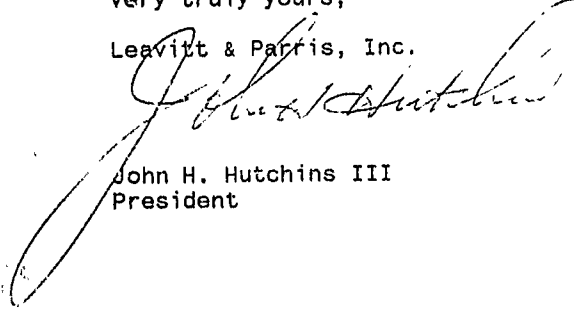
IN MAINE
1-800-833-6679

To whom it may concern:

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

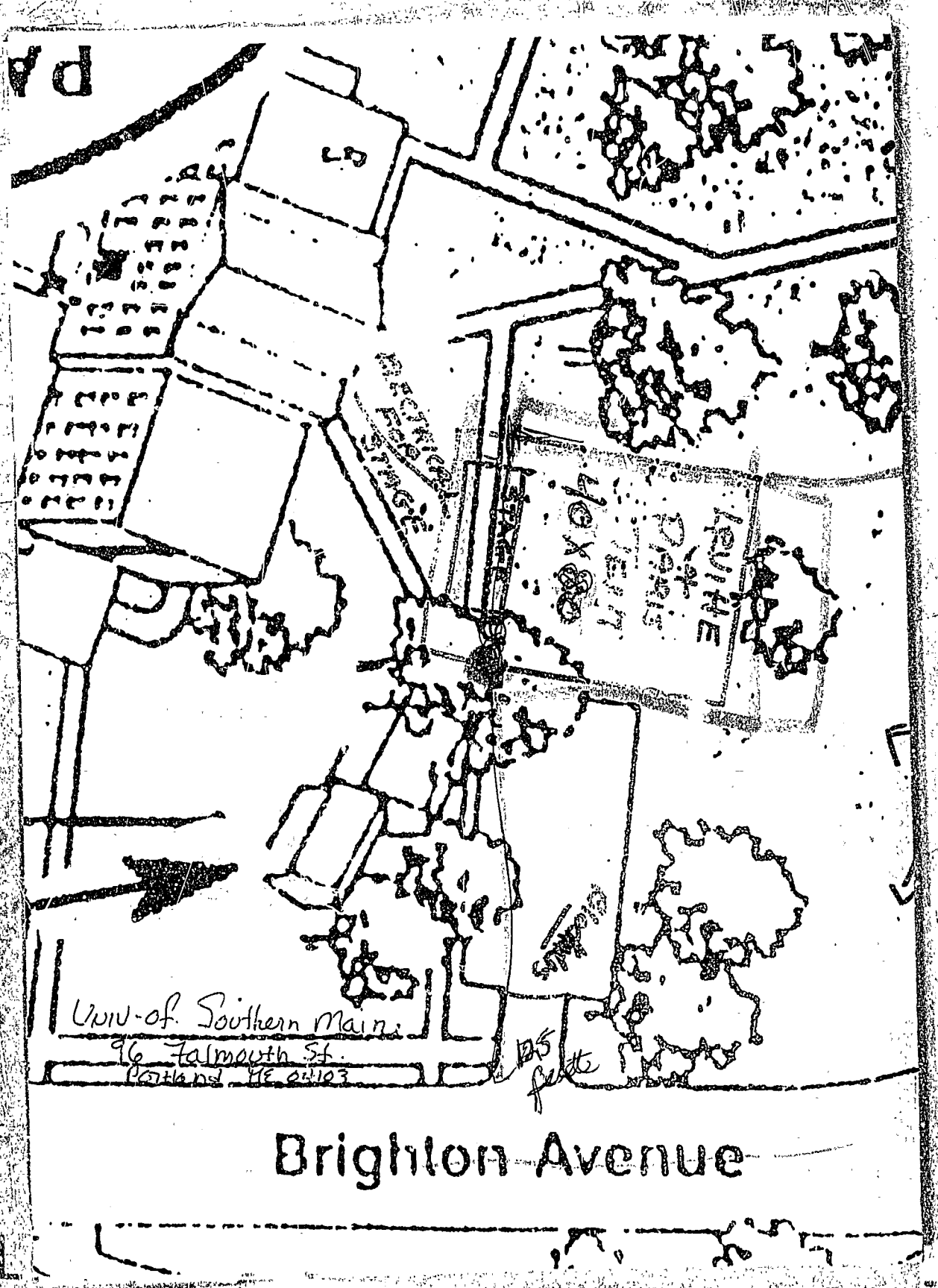
Very truly yours,

Leavitt & Parris, Inc.


John H. Hutchins III
President

RENTORS OF QUALITY TENTS, CANOPIES AND COMPL.
SERVICES FOR THE ENTERTAINMENT, PROMOTION, AND TR.

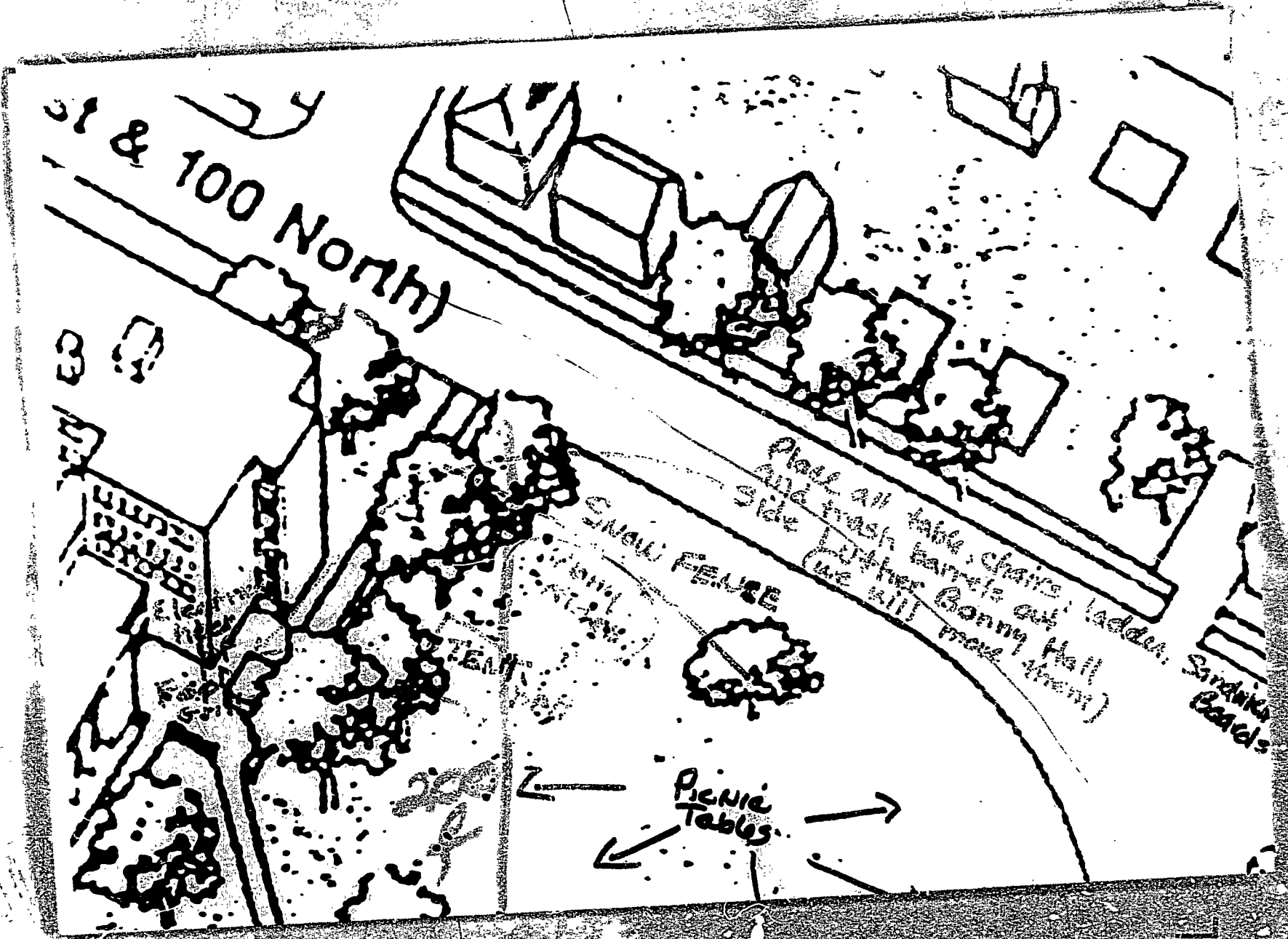
ACCESSORIES
SHOW INDUSTRIES



Brighton Avenue

Univ. of Southern Maine
96 Falmouth St.
Portland ME 04103

125 feet



St & 100 North

SAND FENCE

Place all table, chairs, ladders, and trash barrels on this side (Leave Bonny Hall (we will move them))

Picnic Tables

Sardine Beds

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3328

PROPERTY ADDRESS

Town Or Parish: **BRAND MAINE**

Street: **BEDFORD STREET**

PROPERTY OWNER'S NAME

UNIV. SO. MAINE - CLERKSON BLDG

Last: _____ First: _____

Applicant Name: **The Gerber Co, INC**

Mailing Address of Owner (Applicant if Different): **Box 6662 WOODFORD ST FORTLAND, MAINE 04101**

FORTLAND PERMIT # **2,114** TOWN COPY

[Signature] **APPROVED**

APPLICANT'S SIGNATURE

[Signature]

DATE _____

FEE _____ **Service Fee** _____ **Charge** _____

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and I understand that my installation is subject to the local plumbing regulations and to any permit.

[Signature] **3/11/87**

Date of Owner/Applicant

Caution: Inspection Required

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

MAY 11 1988

Local Plumber's Inspector's 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 CITY **Commercial**

Plumbing To Be Installed By:

1 MASTER PLUMBER

2 OIL BURNERMAN

3 AFGD HOUSING DEALER/MECHANIC

4 PUBLIC UTILITY EMPLOYEE

5 PROPERTY OWNER

PERM SE # **00072**

Number	Hook-Ups And Piping Relocation	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	2	Hosebibb Sillcock		Bath Tub (and Shower)
		10	Floor Drain		Shower (Separate)
		4	Urinal	12	Sink
	HOOK-UP to an existing subsurface wastewater disposal system	4	Drinking Fountain	17	Wash Basin
			Indirect Waste	17	Water Closet (Toilet)
			Water Treatment Softener, Filter, etc		Clothes Washer
	PIPING RELOCATION of sanitary fixtures, drains, and piping without new fixtures		Grease Or Separator		Dish Washer
			Dental Cupido		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)	7	Other Case Drains	1	Water Heater
\$	Hook-Up Fee		Fixtures (Subtotal) Column 2	47	Fixtures (Subtotal) Column 1
				47	Fixtures (Subtotal) Column 2
				74	Total Fixtures
				\$104	
				\$104	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant USM Parking Expansion

Mailing Address _____

Proposed Use of Site _____

Acreage of Site / Ground Floor Coverage _____

Date Aug 5, 2016
 Address of Proposed Site Bancroft Street Parking

Site Identifier(s) from Assessors Maps _____

Zoning of Proposed Site R-5

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

Board of Appeals Action Required () Yes () No

Planning Board Action Required () Yes () No

Proposed Number of Floors _____

Total Floor Area _____

Other Comments: _____

Date Dept. Review Due: _____

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

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

Explanation _____

Use complies with Zoning Ordinance Staff Review Below

Zoning: SPACE & BULK, as applicable

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

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: _____

SIGNATURE OF REVIEWING STAFF DATE _____

REASON: _____

REASON: _____

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

Processing Form

Applicant VSM Parking Expansion

Date Aug 5, 1986

Mailing Address _____

Address of Proposed Site _____

Proposed Use of Site _____

Site Identifier(s) from Assessors Maps _____

Acreage of Site / Ground Floor Coverage _____

Zoning of Proposed Site _____

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

Proposed Number of Floors _____

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

Total Floor Area _____

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

FIRE DEPARTMENT REVIEW

(Date Received) _____

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

REASONS: _____

(Attach Separate Sheet if Necessary)

James P. [Signature]
 SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY 7-26-87

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant City of Portland, Maine Date _____
Mailing Address Ken Lewis at Balford St. Address of Proposed Site _____
Proposed Use of Site Height Expansion Site Identifier(s) from Assessors Maps _____
Acreage of Site / Ground Floor Coverage _____ Zoning of Proposed Site _____
Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors _____
Board of Appeals Action Required: () Yes () No Total Floor Area _____
Planning Board Action Required: () Yes () No
Other Comments: _____
Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW

(Date Received) _____

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

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

REASONS: _____

(Attach Separate Sheet if Necessary)

[Signature] 9/88

SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant VSM Parking Lot Expansion

Date Aug 5, 1986

Mailing Address _____

Address of Proposed Site _____

Proposed Use of Site _____

Site Identifier(s) from Assessors Maps _____

Acreage of Site / Ground Floor Coverage _____

Zoning of Proposed Site _____

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

Proposed Number of Floors _____

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

Total Floor Area _____

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) _____

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER	
APPROVED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
APPROVED CONDITIONALLY										<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		CONDITIONS SPECIFIED BELOW
DISAPPROVED																REASONS SPECIFIED BELOW

REASONS: 1) that a hydrobrake with a peak flow rate of two cubic feet per second (C.F.S.) be installed in the parking lot catch basin.
 2) V.S.M. shall be responsible for plowing and maintenance of the remaining portion of Grand St.
 (Attach Separate Sheet if Necessary)
 3) Curb and sidewalk work along Winslow St and Bedford St. shall be done in accordance with City standards and under Public Works supervision

Dale J. May 10/28/86
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

KEITH FRENCH & ASSOCIATES
 Landscape Architects
 424 Fore Street
 PORTLAND, MAINE 04101

Phone 774-4656

LETTER OF TRANSMITTAL

TO Phil Meyer
Portland Planning Dept

DATE	7/28/86	JOB NO.
ATTENTION		
	USM Parking Expansion - Bedford Street	

WE ARE SENDING YOU Attached Under separate cover via _____ the following items:

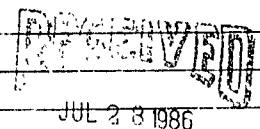
Shop drawings Prints Plans Samples Specifications
 Copy of letter Change order _____

COPIES	DATE	NO.	DESCRIPTION
6	7/28/86		sets - layout, materials, grading, & utilities
1			drainage calculations - Planting Plan
1			lighting levels in footcandle
1			light fixture catalog cuts

THESE ARE TRANSMITTED as checked below:

For approval Approved as submitted Resubmit _____ copies for approval
 For your use Approved as noted Submit _____ copies for distribution
 As requested Returned for corrections Return _____ corrected prints
 For review and comment _____
 FOR BIDS DUE _____ 19____ PRINTS RETURNED AFTER LOAN TO US

REMARKS For Planning Dept Review



JUL 28 1986

DEPT. OF BUILDING INSPECTIONS
 CITY OF PORTLAND

COPY TO _____ SIGNED: William Seaman

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3326

PROPERTY ADDRESS

Town Or Plantation: Portland

Street: Bedford ST

Subdivision Lot #

PROPERTY OWNERS NAME

University of Southern Me

Applicant Name: Warren Mechanical, Inc.

Billing Address of Owner/Applicant (If Different): P.O. 149 Westbrook, Me

PORTLAND PERMIT # 474 TOWN COPY

Date Permit Issued: DEC 1, 84

FEE \$ _____

L.P.I. # _____

Amelia J. Gaudin
Local Plumbing Inspector

Owner/Applicant Statement

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

Thomas Melician 5-30-84
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.

Thomas Melician Local Plumbing Inspector Signature
DEC 26 1984 Date Approved

PERMIT INFORMATION

This Application is for:

1. NEW PLUMBING
2. RELOCATED PLUMBING
JUN 4 1984
JUL 10 1984

Type Of Structure To Be Served:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY: Campus Center

Plumbing To Be Installed By:

1. MASTER PLUMBER
2. OIL BURNERMAN
MFG'D. HOUSING DEALER/MECHANIC
3. PUBLIC UTILITY EMPLOYEE
4. PROPERTY OWNER
LICENSE # 0,2,3,4,5

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
JUL 18 1984	HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Silcock		Bathtub (and Shower)
JUL 24 1984		14	Floor Drain		Shower (Separate)
AUG 15 1984		2	Urinal	1	Sink
AUG 24 1984	HOOK-UP: to an existing subsurface disposal system.	NOV 21 1984	Drinking Fountain	6	Wash Basin
			Indirect Waste	10	Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
			Grease/Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
			Bidet		Laundry Tub
			Other: _____	8	2
	Hook-Ups (Subtotal)		Fixtures (Subtotal) Column 2	19	Fixtures (Subtotal) Column 1
	Hook-Up Fee			27	Fixtures (Subtotal) Column 2
				43	Total Fixtures
				\$.	Fixture Fee
				\$.	Hook-Up Fee
				\$ 73.	Permit Fee (Total)

OCT 29 1984
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE
NOV 1 1984

NOV 15 1984

LISTED

BEST

VLU POWERFLOOD® FLOODLIGHT

Vertical Burning Lamp Listed in GEA-107B1

PAGE C3

ORDERING INFORMATION

Dark Bronze Cat. No. (Less Lamp)	Volts	Watt/Lamp	Ballast Type	NEMA Beam Type H x V	Nat. Wt. Lbs.
WITH TRUNNION (With PE Receptacle and Shorting Cap)²					
C251N601	250/400	400-Watt Lucalox ¹	Auto-Reg		43
C251N508	480	400-Watt Lucalox	Auto-Reg		48
C251N513	480	250-Watt Lucalox			40
C251N200	***	400-Watt Metal Halide or Mercury	Auto-Reg	(7x7 mercury)	41
C251N205	480				
C251N001	-	-	None	-	24
WITH TRUNNION (With PE Receptacle Connected Same Voltage as Ballast)					
C251N538	***	400-Watt Lucalox	Auto-Reg	7x6	48
537	480				
C251N550	***	250-Watt Lucalox	Auto-Reg		
549	480				
C251N033	***	400-Watt Metal Halide or Mercury	Auto-Reg	(7x7 mercury)	41
032	480				
C251N003	-	-	None	-	24
WITH TRUNNION (Without PE Receptacle)					
C251N532	***	400-Watt Lucalox	Auto-Reg	7x6	48
531	480				
C251N544	***	250-Watt Lucalox	Auto-Reg		
543	480				
C251N027	***	400-Watt Metal Halide or Mercury	Auto-Reg	(7x7 mercury)	41
026	480				
C251N021	-	-	None	-	24
BALLAST TRAY ONLY (For Units with or without PE Receptacle)					
C253N001	***	250/400-Watt Lucalox ²	Auto-Reg	-	19
C253N002	***	400-Watt Metal Halide or Mercury	Auto-Reg	-	17

NOTES

- *** Unit permits customer selection of any one of the four voltages 120/208/240/277.
- ¹ See page C1 for beam spread degrees/NEMA type designations
- ² Order PE Control separately. (See page E18)
- ³ Unit permits customer selection of either 250 or 400 watts
- ⁴ Cannot be converted to slipfitter in field

MOUNTING See page C2.

RECOMMENDED POLES See page C2.



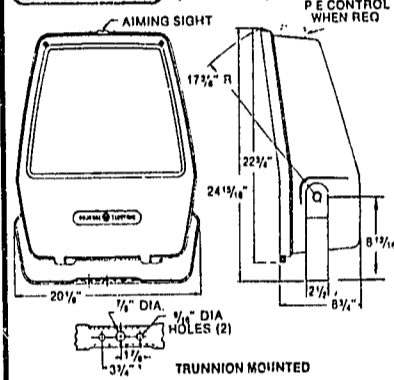
SPECIFICATION CHECK

- ✓ Heavy-duty, corrosion resistant fiberglass reinforced polyester housing.
- ✓ Sealed and activated charcoal filtered
- ✓ Heavy-gauge galvanized steel trunnion
- ✓ Corrosion-resistant hardware
- ✓ Built-in aiming sight
- ✓ Removable ballast tray
- ✓ Hydroformed aluminum reflector
- ALGLAS® finish

PRODUCT INNOVATIONS

- Available in multivolt and multiwatt for maximum flexibility for many applications with one luminaire.
- Easily removable ballast tray permits changing from one light source to another without buying an entire new fixture and allows stocking of one item to cover a large range of voltages, wattages, and light sources.

SIMENSIONS (In inches)



OPTIONS

- Instant On/Aux. Lighting Automatic switched quartz available in listed ratings
- Knuckle type slipfitter with concealed wiring for 1 Ø through 2 3/8 OD pole top tenon (Specify)
- Knuckle type slipfitter with concealed wiring for 3 Ø OD pole top tenon only. (Specify)
- Fusing (Not available with multivolt)
- Top Trunnion
- Mag-Reg. Lucalox ballast
- Single 120, 208, 240, 277 voltages available in all wattages.

MIN. QTY.

- 5
- 5
- 5
- 5
- 5
- 5

ACCESSORIES

- Slipfitter for trunnion type⁴
 - Gray color C258Q057
 - Dark Bronze color C258Q109
- LEXAN® polycarbonate resin vandal shield C246Q028
- Top visor C246Q029
- Top and two side visors C246Q030
- Wire guard C246Q031

PHOTOMETRIC DATA

Watts	Lamp	NEMA Beam Type H x V	Curve Number
200 through 400	Lucalox	7x6	35-176588
400	Metal Halide	7x6	35-176589
	Phosphor Mercury	7x7	35-176590

Data subject to change without notice. The catalog numbers, options and modifications shown on this page are UL listed, unless otherwise noted. Registered Trademark of General Electric Company.

RECEIVED

JUL 28 1966

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

B

PERMIT ISSUED

FEB 10 1987

APPLICATION FOR CERTIFICATE OF OCCUPANCY FOR USE OF PREMISES Of Portland

Portland, Maine 1-22-87

Location Bedford Street Zone R-5

To the INSPECTOR OF BUILDINGS, Portland, Maine

The undersigned hereby applies for a certificate of occupancy to allow the use of the above named premises for 135 car parking lot as set forth on the attached site plan (made by Keith French Assoc. whose address is 424 Fore Street) to show compliance with the Zoning Ordinance according to the intended use and the zone in which the property is located; and in accordance with the following pertinent information:

Owner (name, address and phone number) University of Maine - Falmouth St., Port. 96

Lessee (name, address and phone number) _____

If proposed use to be accessory to a building or other use on this lot? _____
If so, what is use of building or other use University of Maine students

If off-street parking is sought, what is proposed maximum number of vehicles to be parked-passenger cars? 135, commercial vehicles? _____

Have you secured on the site plan the written approval of existing and proposed entrances to and exits from the premises for vehicles over public sidewalks by the Traffic Engineer (Dept. of Public Works?) yes
And, if access to the premises is available from more than one street, have you secured similar approval by the Planning Board? Only one access

Have you shown on the site plan the true location of all trees on the public street along the frontage of the premises (both streets if a corner lot?) yes

Do you propose to remove or disturb any tree on a public street? _____
If so, have you secured on the site plan the written approval of the Director of Parks and Recreation? _____

Signature of Owner _____

By _____
(duly authorized thereto)

\$100.00 Fee

THIS IS NOT A CERTIFICATE OF OCCUPANCY

To:

COMMENCING the above proposed use of the premises would be IN VIOLATION of the Zoning Ordinance unless a Certificate of Occupancy is first procured from the Department of Building Inspection.

However, improvement of the premises according to the site plan and the above application may now proceed without further authorization, but subject to the conditions indicated below--notice of readiness for final inspection to be given to this department when the premises have been placed in compliance with the requirements:-

(Date) 1/11/87

[Signature]
Inspector of Buildings

Fee: _____
6

[Signature]
file

PLOT PLAN

N



FEES (Breakdown From Front)
 Base Fee \$ 520.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS 2 sets of prints and specs submitted

12/91 Demo - in progress interior
1-29-92 Reinspected work in progress
12/92

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.

Edward [Signature]
SIGNATURE OF APPLICANT ADDRESS PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO.

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

October 29, 1991

Ledgewood Inc.
P O Box 8107
Portland, ME 04104

re: 96 Falmouth St. (old Johnson Supply building)

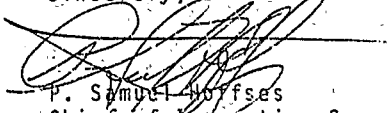
Dear Sir:

Your application to demolish the interior of the building at 96 Falmouth St has been reviewed, and a permit is herewith issued subject to the following requirements:

1. This permit is being issued with the understanding that you implement all applicable sections of Article 30 of the City's building code - 1990 BOCA National Building Code.
2. Article 30 of the Fire Prevention Code shall be complied with, including permit for cutting and welding, and fire watching for at least thirty minutes after welding or cutting operations have been completed.
3. Provide minimum of temporary standpipe fire protection- with handlines and nozzles until new system is installed
4. See attached Demolition Building Permit requirements.

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

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Garroway, P.F.D.

lec