

# CERTIFICATION PLAN

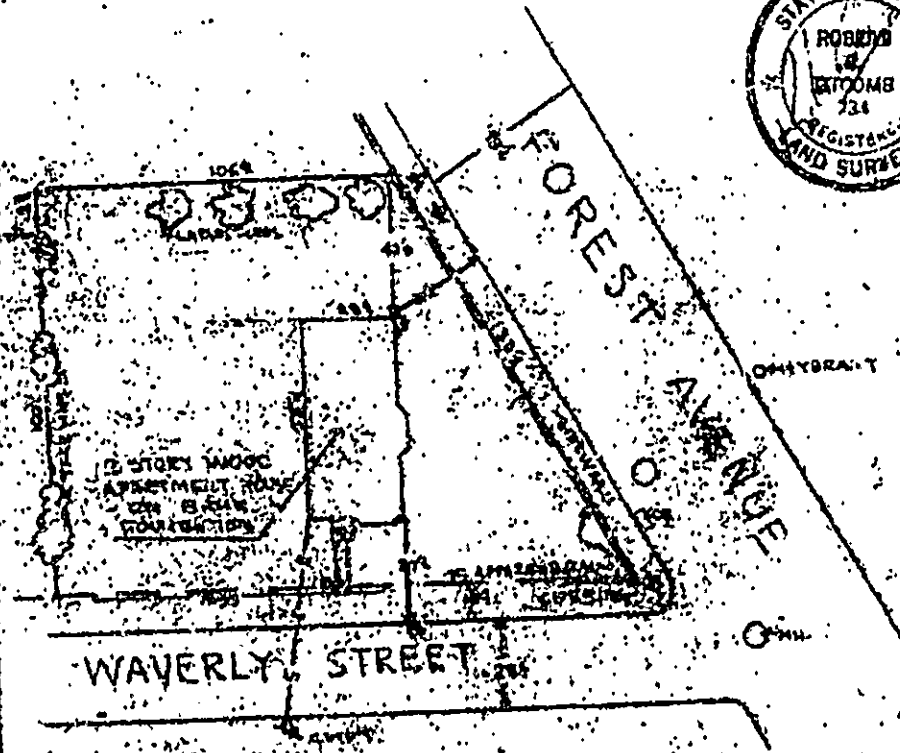
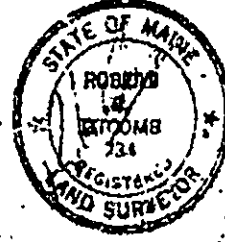
9 WAVERLY STREET  
PORTLAND,  
MAINE

No. 17.21

I hereby certify that the location, lot, and  
boundary lines on this plan were  
correctly shown on the last survey map in  
which the lot was shown. This  
map is a true and correct copy of the  
map on file in the office of the  
Register and Receiver.

BUYER: THOMAS E. & PATRICIA M. POWERS

SELLER: VINCENZO J. DEPAOLO



This plan was recorded upon an instrument which  
the parties have acknowledged.  
This plan applies only to the three parcels of lot 120  
described therein. This plan is not for recording.

Date \_\_\_\_\_ Seal \_\_\_\_\_  
Robert P. Tibcomb, Inc. Register and Receiver



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION

9 Waverly Street

Issued to Thomas Powers

Date of Issue November 23, 1957

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. 87/612', 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

Unit 9, Waverly Street

2 story duplex

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

11/23/57

(Date)

Inspector

*James V. Collins, Jr.*  
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.



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

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APPROVED OCCUPANCY

Unit 9, Waverly Street

2 story duplex

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

11-23-37

(Date)

*W. W. Adams*  
Inspector

*James F. Collins, Sr.*  
*[Signature]*  
Inspector of Buildings

*[Handwritten initials]*  
D. P. [unclear]

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.

924078

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$29.80 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

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

Owner: Seaborn Associates Phone # 878-2004

Address: 1050 Forest Ave- Ptid, ME 04103

LOCATION OF CONSTRUCTION 9 Waverly St.

Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_ Proposed Use: legal office w/ sign

\_\_\_\_\_ Past Use: legal office

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_

# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion erect sign - 6'x4'

Foundation: 146-B-10

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

Floor: \_\_\_\_\_ Sills must be anchored.

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

Exterior Walls

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

Interior Walls

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

White - Tax Assessor

**For Official Use Only**

Date 8/26/92 Subdivision \_\_\_\_\_

Inside Fire Limits \_\_\_\_\_ Name AUG 31 1992

Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_

Time Limit \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_

Estimated Cost \_\_\_\_\_

Street Frontage Provided: \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:

Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_

Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_

Special Exception \_\_\_\_\_

Other WDA-7-8-31-92 (Explain)

Ceiling: HISTORIC PRESERVATION

- 1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_
- 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ not in District nor tankless.
- 3. Type Ceiling: \_\_\_\_\_ Size \_\_\_\_\_ Does not require review.
- 4. Insulation Type \_\_\_\_\_
- 5. Ceiling Height: \_\_\_\_\_ Requires Review.

Roof: \_\_\_\_\_

- 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_
- 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved
- 3. Roof Covering Type \_\_\_\_\_ Approved with Conditions

Chimneys: \_\_\_\_\_

- Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date 8/26/92
- Heating: \_\_\_\_\_ Signature
- Type of Heat: \_\_\_\_\_

Electrical: \_\_\_\_\_

- Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_
- Plumbing: \_\_\_\_\_
- 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_
- 2. No. of Tubs or Showers \_\_\_\_\_
- 3. No. of Flushes \_\_\_\_\_
- 4. No. of Lavatories \_\_\_\_\_
- 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools: \_\_\_\_\_

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

Permit Received By Louise F. Chase

Signature of Applicant Thomas E. Powers Date 8/26/92

CEO's District \_\_\_\_\_

CONTINUED TO REVERSE SIDE 16 Rowe

Ivory Tag - CEO

924078

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$29.80 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Seaborn Associates Phone # 874-2004  
 Address: 1050 Forest Ave- Ptld, ME 04103  
 LOCATION OF CONSTRUCTION 9 Waverly St.  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: legal office w/ sign  
 Past Use: legal office  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion erect sign - 6'x4'

**For Official Use Only** **PERMIT ISSUED**  
 Date 8/26/92 Subdivided: \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit \_\_\_\_\_ Owner: \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other: WPA - 8-31-92

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

**Floors:**  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
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 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 Brapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

**Roof:**  
 1. Truss or Rafter Size \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Heating:**  
 Type of Heat: \_\_\_\_\_

**Electrical:**  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

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

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

Permit Received By Louise E. Chase  
 Signature of Applicant Thomas E. Powers Date 8/30/92  
 CEO's District 16  
 CONTINUED TO REVERSE SIDE 16 M. Rowe  
 Ivory Tag - CEO

White - Tax Assessor

PLOT PLAN

N



FEES (Breakdown From Front)		Inspection Record	Date
	Type		
Base Fee \$ <u>210.00</u>			/ /
Subdivision Fee \$ _____			/ /
Site Plan Review Fee \$ _____			/ /
Other Fees \$ _____			/ /
(Explain) _____			/ /
Late Fee \$ _____			/ /

COMMENTS

*1/28/92 OK AR*

CERTIFICATION

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

SIGNATURE OF APPLICANT

ADDRESS

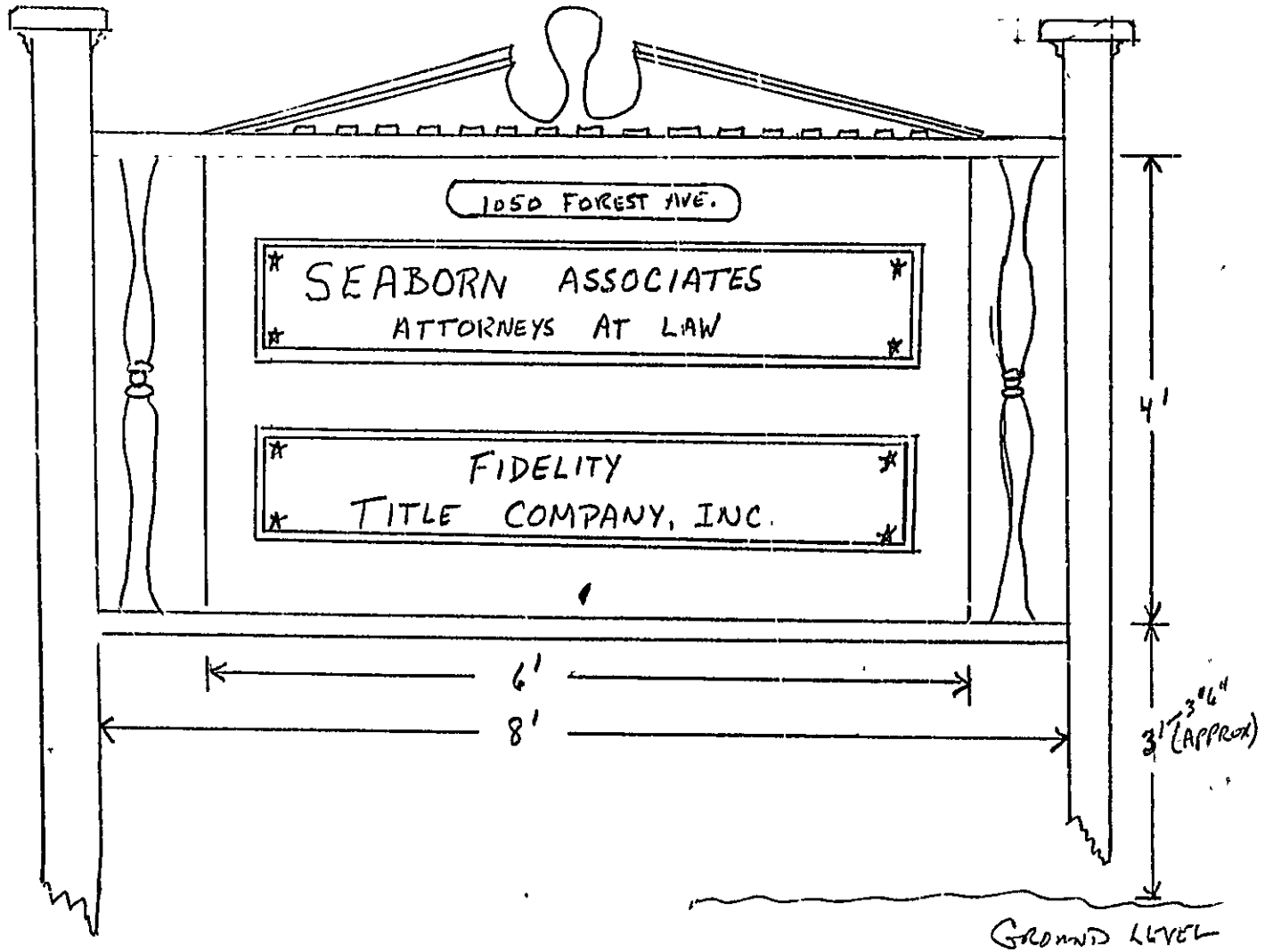
PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

*Thomas E. Jones*      *1850 FOREST AVE PORTLAND*      *678-2004*

34 SQ. FT TOTAL SIGNAGE



1050 FOREST AVE.

\* SEABORN ASSOCIATES \*  
\* ATTORNEYS AT LAW \*

\* FIDELITY \*  
\* TITLE COMPANY, INC. \*

6'  
8'

4'

3' 3/8" (APPROX)

GROUND LEVEL







A Division of Middlesex Mutual Assurance Company

# SMALL BUSINESS OWNERS POLICY DECLARATIONS

POLICY NO. 3497968

NUMBER NEW AGENCY Allen/Freeman/Moors #605 CODE NO.

Named Insured and Mailing Address (No., Street, Town, County, State, Zip No.)  
**Seaborn Associates**  
1050 Forest Avenue  
Portland, Maine 04103

Policy Period: 12:01 A.M. Standard Time at location of designated premises. 10/05/91 FROM 10/05/92 TO

The Named Insured is:  Individual  Partnership  Office Condominium Assoc.  
 Corporation  Joint Venture  Other

Described Premises: **Attorney's Office**  
Business of Insured:  
Same  
Consideration of the premium, insurance is provided to the named insured with respect to those premises described in the schedule below and with respect to those coverages and kinds of property for which a specific limit of liability is shown, subject to all the terms of this policy including forms and endorsements made a part hereof:

SECTION	COVERAGE	LIMIT OF LIABILITY					
		LOC. NO.	BLDG. NO.	LOC. NO.	BLDG. NO.	LOC. NO.	BLDG. NO.
PROPERTY	A. Buildings	\$		\$		\$	
	B. Business Personal Property	\$ 35,000		\$		\$	
	C1. Loss of Income -- Business Interruption: Actual loss sustained; not exceeding 12 consecutive months.						
	C2. Loss of Income -- Rents: Actual loss sustained; not exceeding 12 consecutive months.						
	D. Money & Securities: as specified in this policy.						
LIABILITY	E. Exterior Building Glass: as specified in this policy.						
	DEDUCTIBLE: \$ 250. Coverage A, B, D, E as specified in this policy.						
	INFLATION GUARD: % increase applicable each three month period.						
LIABILITY	COVERAGE	F. Broad Form Commercial General Liability: \$ 1,000,000 each occurrence.					
		The limit of liability with respect to the Completed Operations and Products hazards combined is an aggregate limit for all occurrences during the policy period. FIRE LEGAL LIABILITY: \$50,000 each occurrence.					
		G. Medical Payments: \$1,000 each person; \$10,000 each accident.					

Item 6. Optional Coverages: The following optional coverages are afforded under this policy only when designated by an "X" in the box(es) shown below:

Employer's Non-Ownership Automobile Liability Insurance  Employee Dishonesty \$10,000 each occurrence No. of Employees \_\_\_\_\_  Tenant Exterior Building Glass Tot. Linear Ft. \_\_\_\_\_

Item 7. Forms and Endorsements attached at inception, if any: 0161(11-85), MMA-BP-10(07-81), MMA-BP-11(01-90), 0753(07-88), 0174(06-87), 0196(08-89), 0728(01-87), IL0018(10/84), IL0913(1/82), IL0247(2-91).

Item 8. Mortgages (Name & Address):  
Item 9. Annual Premium: \$ 348.00  Agency Bill  Company Bill

RATING INFORMATION	CONSTRUCTION	PROTECTION CLASS	TERRITORY	BUILDING AREA	TENANT'S AREA	BUILDING CLASS CODE	CONTENTS CLASS CODE	BUILDING BASE RATE	CONTENTS BASE RATE	SCHED. CREDIT
Loc. 1	Frame	02	01		100US1		503C	INCL.	INCL.	INCL.

2-DEC-91 NK/JP

Countersigned by Allen Freeman agent

ORIGINAL