

940016

Permit # 940016 City of Portland BUILDING PERMIT APPLICATION Fee 770 Zone 1/3/94 Map # Lot #
Please fill out any part which applies to job. Proper plans must accompany form. \$300 - minor site plan

Owner: Pratt-Abbott Cleaners Inc Phone #
Address: 4 Bell St- Ptld. ME 04103
LOCATION OF CONSTRUCTION: 4 Bell St.
Contractor: Wright-Ryan Const. Sub.
Address: 10 Danforth St- Ptld. ME Phone # 04102
Est. Construction Cost: 150,000 Proposed Use: Alterations/dry cleaning pickup
Past Use: office/HW alteration
of Existing Res. Units: # of New Res. Units:
Building Dimensions: L W Total Sq. Ft.
Stories: # Bedrooms: Lot Size:
Proposed Use: Seasonal Condominium Conversion
Explain Conversion: const addition appx 40'x45'

For Official Use Only
Date: 11/12/93 Subdivision:
Inlet Fire Limit: Zone:
Slag Code: Ownership:
Estimated Cost: 150,000 City of Portland
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):

Foundations:
1. Type of Soil: *** Minor Site plan review
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. Siding Size: Spacing
2. Window:
3. No. of Windows:
4. Header Size: 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. Siding Size: Spacing
2. Header Size: 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 load limit
3. Type Ceiling: Span not required
4. Insulation Type Size Require Review
5. Ceiling Height:

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

Chimneys:
Type: Number of Fire Places:

Heating:
Type of Heat:

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

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

Swimming Pools:
Type:
Pool Size:
3. Must conform to National Electrical Code

Signature of Applicant: Louise E. Chase Date: 11/12/93
Signature of Official: Brian Curvey
CEO's District: 6

PERMIT ISSUED WITH LETTERS

RECEIVED WITH LETTERS

White - Tax Assessor

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO 6 MM Brown

PLOT PLAN

Copy issued.

A. [Signature]

N
↑

FEES (Breakdown From Front)

Base Fee \$ _____

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

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

COMMENTS

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his 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. _____

Inspection Services
Samuel F. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

January 6, 1994

RE: 4 Bell St.- Portland

Wright-Pyan Construction
10 Danforth St.
Portland, ME 04102

Dear Sir:

Your application to construct an addition approximately 40' x 45' drive-thru canopy, has been reviewed and a permit is herewith issued subject to the following requirements:

No Certificate of Occupancy can be issued until all requirements of this letter are met.

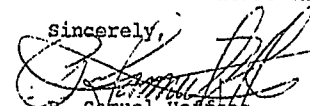
Site Plan Review Requirements
Inspection Services Approved William Giroux
Public Works Approved with conditions (see attached) Craig Carrigan PE
Planning Division Craig Carrigan, PE
Fire Department LT. Gaylen McDougal

Building & Fire Code Requirements

1. Portable fire extinguishers shall be provided per NFPA #10.
2. All exit signs, lights and means of egress lighting shall be done in accordance with Article 8 section and subsections 822.0 & 823.0 of the City's building code. (The BOCA National Building Code/1990)
3. Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection)
4. Precaution must be taken to protect concrete from freezing.
5. All construction and demolition debris must be disposed at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate of occupancy is issued or demolition permit is granted.

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

Sincerely,


S. F. Hoffses
Chief of Inspection Services

/el

cc: LT. Gaylen McDougal, Fire Prevention Bureau
William Giroux, Zoning Administrator
Craig Carrigan, PE, Development Review Coordinator

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form

Pratt-Abbott Cleaners, Inc. 11/12/93
 Applicant Date
 4 Bell St- Ptd, ME 04103 4 Bell St.
 Mailing Address (dry cleaning pick-up) Address of Proposed Site
 construct addition - appx 40'x45'

Proposed Use of Site Site Identifier(s) from Assessors Maps
 27,327 sq ft / appx 40'x45' (to existing structure)
 Acreage of Site / Ground Floor Coverage (alteration) Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors _____
 Board of Appeals Action Required: () Yes () No Total Floor Area _____
 Planning Board Action Required: () Yes () No

Other Comments: contact person : Brian Curley - 775-0443

Date Dept. Review Due: _____

Minor Site Plan review

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

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

Explanation _____

- Use complies with Zoning Ordinance — Staff Review Below

Zoning:
 SPACE & BULK,
 as applicable

COMPLIES

COMPLIES
 CONDITIONALLY

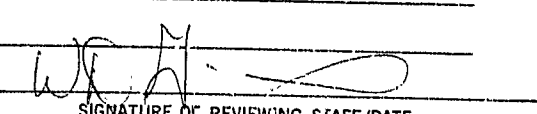
DOES NOT
 COMPLY

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. S+BLACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS

CONDITIONS
 SPECIFIED
 BELOW

REASONS
 SPECIFIED
 BELOW

REASONS: _____



SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

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

Processing Form

Applicant: Pratt-Abbott Cleaners, Inc. Date: 11/12/93
 Mailing Address: 4 Bell St - Portland, ME 04103 Address of Proposed Site: 4 Bell St.
 Proposed Use of Site: construct (dry cleaning pick-up) addition - appx 40'x45' Site Identifier(s) from Assessors Maps: _____
 Acreage of Site: 27,327 sq ft / Ground Floor Coverage: appx 40'x45' (to existing structure) (alteration of zoning of Proposed Site)
 Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors: _____
 Board of Appeals Action Required: () Yes () No Total Floor Area: _____
 Planning Board Action Required: () Yes () No
 Other Comments: contact person: Brian Curley - 775-0443
 Date Dept. Review Due: _____

Minor Site Plan review

FIRE DEPARTMENT REVIEW

(Date Received) _____

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

REASONS: _____

(Attach Separate Sheet If Necessary)

[Signature]
 SIGNATURE OF REVIEWING STAFF/DATE
 FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

Planning

Applicant: Pratt-Abbott Engineers, Inc. Date: 11/12/93
 Mailing Address: 4 Ball St. Portland, ME 04103 Address of Proposed Site: 4 Ball St.
 Proposed Use of Site: dry cleaning pickup Site Identifier(s) from Assessors Maps: _____
 Acreage of Site / Ground Floor Coverage: 27,327 sq ft / appx 40'x45' (to existing structure) (alteration of Proposed Site)
 Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors: _____
 Board of Appeals Action Required: () Yes () No Total Floor Area: _____
 Planning Board Action Required: () Yes () No
 Other Comments: contact person: Brian Curley - 775-0443
 Date Dept. Review Due: _____

Minor Site Plan review

PLANNING DEPARTMENT REVIEW

(Date Received) _____

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

	LOADING AREA	PARKING	CIRCULATION PATTERN	ACCESS	PEDESTRIAN WALKWAYS	SCREENING	LANDSCAPING	USE OF BULK STORAGE STRUCTURES	LIGHTING	CONFLICT WITH CITY PROJECTS	FINANCIAL CAPACITY	CHANGE SITE PLAN
APPROVED		/	/	/	/	/	/	/	/	N/A	/	
APPROVED CONDITIONALLY												
DISAPPROVED												

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

[Signature]

 SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

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

*Planning
C. Corrigan*
Date 11/12/93

Applicant Pratt-Abbott Cleaners, Inc.
 Mailing Address 4 Bell St- Portland, ME 04103
 Address of Proposed Site 4 Bell St.
 Proposed Use of Site construct addition - dry cleaning pick-up
 Site Identifier(s) from Assessors Maps _____
 Acreage of Site / Ground Floor Coverage 27,327 sq ft. / apprx 40'x45' (to existing structure)
 Zoning of Proposed Site _____
 Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors _____
 Board of Appeals Action Required: () Yes () No Total Floor Area _____
 Planning Board Action Required: () Yes () No
 Other Comments: contact person: Brian Curley - 775-0443
 Date Dept. Review Due: _____

Minor Site Plan Review

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"/>	CONDITIONS SPECIFIED BELOW
APPROVED CONDITIONALLY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	REASONS SPECIFIED BELOW	
DISAPPROVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

REASONS: SUBJECT TO CONDITIONS AS SPECIFIED IN THE APPROVAL LETTER

RECEIVED
 NOV 15 1993
 PORTLAND PLANNING OFFICE

[Signature] 11/3/94
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

Planning & Urban Development

Joseph E. Gray Jr.
Director

CITY OF PORTLAND

December 10, 1993

4 Bell St

Mr. Brian Curley
66 West Street
Portland, ME 04102

Re: Pratt-Abbott Cleaners, Inc.

Dear Mr. Curley:

On December 10, 1993 the Portland Planning Authority granted minor site plan approval for 4 Bell Street. The following condition applies specifically to this site:

1. That all construction activities within the City right-of-way be in accordance with city standards and that a final construction plan, with appropriate revisions to details, be submitted to the Parks and Public Works Materials Engineer prior to construction.

The approval is based on the submitted site plan. If you need to make any modifications to the approved site plan, you must submit a revised site plan for staff review and approval.

Please note the following provisions and requirements for all site plan approvals:

1. The site plan approval will be deemed to have expired unless work in the development has commenced within one (1) year of the approval or within a time period agreed upon in writing by the City and the applicant. A one year extension may be granted by this department if requested by the applicant in writing prior to the expiration date of the site plan.
2. A performance guarantee in a form acceptable to the City of Portland and an inspection fee equal to 1.7% of the performance guarantee will have to be posted before a building permit can be issued.
3. A defect guarantee, consisting of 10% of the performance guarantee, must be posted before the performance guarantee is released.

Permit # **040409** City of **Portland** BUILDING PERMIT APPLICATION Fee **35.00** Zone _____ Msp # _____
 Please fill out any part which applies to job. Proper plans must accompany form.

PERMIT ISSUED

Owner: **Pratt J.** Phone # _____
 Address: **1653 Forest Ave Ptd, ME 04103**

LOCATION OF CONSTRUCTION **XXXXXXXXXX** **1st Fall St**

Contractor: **Sprinkler Systems Inc. Sub.**
P.O. Box 1285 Lewiston, ME 04243-1285
 Address: _____ Phone # **782-0104**

Est. Construction Cost: **3000.00** Proposed Use: **Dry Cleaner w/sprinkler system**

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 **Install Sprinkler System as per plans**

For Official Use Only

Date: **10 May '94** Subdivision: _____
 Inside Fire Limits _____ Name: _____
 Pldg Code _____ Lot: **CITY OF PORTLAND**
 Time Limit _____ Ownership: _____
 Estimated Cost _____ Private _____

MAY 12 1994

Street Frontage Provided: _____
 Provided Setbacks: Front _____ Rear _____ 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 _____ Size(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. Tyon Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

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

Chimneys:
 Type: _____ Number of Fire Places _____
 Date: _____
 Signature: _____

Heating:
 Type of Heat: _____
 Signature: _____

Electrical:
 Service Entrances 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 **Use Group F-2 type**

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

Permit Received By **Mad. Osesik**

Signature of Applicant _____ Date **10 May '94**

City of Portland's District **6** Scott _____

White - Tax Assessor

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

PLOT PLAN

N



OKAR

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

COMMENTS

CERTIFICATION

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

SIGNATURE OF APPLICANT ADDRESS PHONE NO. 762-0104

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO.

BUILDING PERMIT REPORT

DATE 5/10/94
ADDRESS 4 Bell St.
REASON FOR PERMIT Sprinkler Installation
BUILDING OWNER Per. W. & D. H. H.
CONTRACTOR Sprinkler Co. Inc.
PERMIT APPLICANT Scott L. ...
APPROVED ✓ DENIED _____

CONDITIONS OF APPROVAL:

1. A 4" size fire department connection is required.
2. Any new sprinkler construction over 6 sprinkler heads needs to have State Fire Marshall approval.
3. Any renovations of sprinkler systems over 20 sprinkler heads need to have State Fire Marshall approval.
4. A sprinkler performance test shall be submitted to the Portland Fire Department after completion of sprinkler work.

940016

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 770 1/3/94 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form. \$300 - minor site plan

Owner: Pratt-Abbott Cleaners Inc Phone # _____
Address: 4 Bell St- Ptd, ME 04103
LOCATION OF CONSTRUCTION 4 Bell St.
Contractor: Wright-Ryan Const Sub.
Address: 10 Danforth St-Ptd, ME Phone # 04102
Est. Construction Cost: 150,000 Proposed Use: Alterations/dry cleaning pickup
Past Use: office/alteration
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 const addition appx 40'x45'
drive-inpu & canopy

For Official Use Only
Date 11/17/93 Subdivision: _____
Inside Fire Limits _____ Name: JAN 8 1994
Bldg Code _____ Lot: _____
Time Limit _____ Ownership: _____ Public _____ Private _____
Estimated Cost: 150,000
Street Frontage Provided: _____
Provide Setbacks: Front _____ Back _____ Side _____
Review Required: _____
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) _____
W.R. Ryan 1-4-94

Foundation:
1. Type of Soil: _____ **** Minor Site plan review
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 _____ Spacing: _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
Chimneys:
Type: _____ Number of Fire Places _____
Heating:
Type of Heat: _____
Electrical:
Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____
Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____
Swimming Pools:
1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

PERMIT ISSUED WITH LETTERS

Permit Received By Louise E. Chase
Signature of Applicant Brian Curley Date 11/12/93
CEO's District 6

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO 16 M.P. Brown

White - Tax Assessor

SPRINKLER SYSTEMS INC.
P.O. Box 1285
LEWISTON, ME 04243-1285

(207) 782-0104 FAX (207) 783-4865

Letter of Transmittal

TO CITY OF PORTLAND
RM 315 CITY HALL
PORTLAND, ME 04101

DATE	5-9-94	JOB NO.	94002 (SW)
ATTENTION			
RE	PRATT ABBOTT		
	FOREST AVENUE		
	PORTLAND, ME		

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
2c	5-9-94	1 of 1	SPRINKLER SHOP DRAWINGS
1	5-9-94	-	CHECK #1293 FOR \$35 PERMIT FEE

THESE ARE TRANSMITTED as checked below:

<input checked="" type="checkbox"/> For approval	<input type="checkbox"/> Approved as submitted	<input type="checkbox"/> Resubmit _____ copies for approval
<input type="checkbox"/> For your use	<input type="checkbox"/> Approved as noted	<input type="checkbox"/> Submit _____ copies for distribution
<input type="checkbox"/> As requested	<input type="checkbox"/> Returned for corrections	<input type="checkbox"/> Return _____ corrected prints
<input checked="" type="checkbox"/> For review and comment	<input checked="" type="checkbox"/> PLEASE RETURN PERMIT	
<input type="checkbox"/> FOR BIDS DUE _____		<input type="checkbox"/> PRINTS RETURNED AFTER LOAN TO US

REMARKS PLEASE FORWARD PLANS TO FIRE PREVENTION

THANK YOU
SLOTT E. GARLAND

COPY TO _____ SIGNED: Slott E. Garland PROJECT DESIGNER

If enclosures are not as noted, kindly notify us at once.

NICET III



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 11 May 94, 19____
 Receipt and Permit number 3048

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: 4 Bell St.
 OWNER'S NAME: Pratt Abbott ADDRESS: _____

OUTLETS: _____ FEES
 Receptacles 12 Switches 3 Plugmold _____ ft. TOTAL _____ 3.00

FIXTURES: (number of) _____
 Incandescent 4 Fluorescent 20 (not strip) TOTAL _____
 Strip Fluorescent _____ ft. _____ 4.80

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 _____
Wet 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 _____

Circuits, (air, etc.) _____
 All repairs to wires _____

Repairs after fire _____
 Emergency Lights, (battery) _____

Emergency Temperature _____ 1.00

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF "STOP ORDER" (\$04-16.1) DOUBLE FEE DUE: _____

TOTAL AMOUNT DUE: 15.00

INSPECTION: Will be ready on 5-13 AM, 19____; or Will Call _____

CONTRACTOR'S NAME: Associated Electric Jim Talbot

ADDRESS: P.O. Box 8247 Portland, ME 04103

PHONE: 883-5461

MAINE LICENSE NO.: 3048 SIGNATURE OF CONTRACTOR: Jim Talbot

LIMITED LICENSE NO.: _____

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

940217

Permit # 940217 City of Portland BUILDING PERMIT APPLICATION Fee \$114.²⁰ Zone _____ Map # _____ Lot# _____

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

Owner: Pratt-Abbott Dry Cng Phone # 797-4844
Address: 4 Bell St- Ptd, ME 04102

LOCATION OF CONSTRUCTION _____
Contractor: Bailey Sign Sub: 774-7 2843
Address: 9 Thomas Dr- Westbrook Phone # ME 04092

Est. Construction Cost: _____ Proposed Use: production/retail
Past Use: _____ w signs

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 four signs - 1 - 13'x8'

Foundation: _____
3 - 38'x3'

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

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

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

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

PERMIT ISSUED WITH LETTER

For Official Use Only

Date: 3/23/94

Inside Fire Limits: _____

Bldg Code: _____

Time Limit: _____

Estimated Cost: _____

Subdivision: _____

Name: _____

Lot: APR - 1 1994

Ownership: _____ Public: _____

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 _____

Show and Zoning Yes _____ No _____ Floodplain Yes _____ No _____

Special Exception _____

Other (Explain) 03-31-94

CEILING: _____ HISTORIC PRESERVATION

- Ceiling Joists Size: _____ Spacing _____ Not in District nor Landmark
- Ceiling Strapping Size _____ Spacing _____ Does not require review
- Type Ceilings: _____
- Insulation Type _____ Size _____ Requires Review
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____ Span _____ Action: Approved
- Sheathing Type _____ Size _____ Approved with Conditions
- Roof Covering Type _____ Date: 3/23/94

Chimneys:

Type: _____ Number of Fire Places _____ Signature: _____

Heating:

Type of Heat: Mr. Rowe

Electrical:

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

Plumbing:

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

Swimming Pools:

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

Permit Received By: Loise

Signature of Applicant: Rodney Date: 3/23/94

CEO District: 6

PERMIT ISSUED WITH LETTER

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO

White - Tax Assessor

MR. ROWE

PLOT PLAN

N

OK Allow

FEES (Breakdown From Front)

Base Fee \$ 114.20

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Inspection Record

Type	Date
<i>Not done yet AR</i>	<i>5/9/99</i>
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

CERTIFICATION

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

SIGNATURE OF APPLICANT _____ ADDRESS _____ PHONE NO. _____

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

April 1, 1994

RE: 4 Bell Street, Portland

Bailey Sign
9 Thomas Drive
Westbrook, Maine 04092

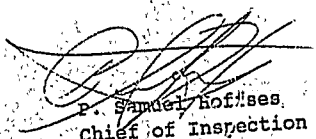
Dear Sir:

Your application to erect four signs total square feet not over 300 square feet, has been reviewed and a permit is herewith issued subject to the following requirement: This permit does not preclude the applicant from meeting applicable state and Federal laws.

The total area of all proposed signs will not exceed 300 square feet.

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

Sincerely,


S. P. Hoffses
Chief of Inspection Services

/el

cc: William Giroux, Zoning Administrator

940409

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 35.00 Zone _____ Map # _____ Lot# _____

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

PERMIT ISSUED

Owner: Pratt Abbott Phone # _____
Address: 1053 Forest Ave Ptd, ME 04103

LOCATION OF CONSTRUCTION XXXXXXXX 4 Bell St

Contractor: Sprinkler Systems Inc Sub.
Address: P.O. Box 1285 Lewiston, ME 04243-1285 Phone # 782-0104

Est. Construction Cost: 3000.00 Proposed Use: Dry Cleaner w/sprinkler system

of Existing Res. Units _____ # of New Res. Units _____
Past Use: _____

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

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion: Install Sprinkler System as per plans

For Official Use Only	
Date: <u>10 May '94</u>	Subdivision: <u>MAY 12 1994</u>
Inside Fire Limits: _____	Name: _____
Blgd Code: _____	Lot: _____
Title Limit: _____	Ownership: _____
Estimated Cost: _____	Public _____ Private _____

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: WPH (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 15" 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 _____ HISTORIC PRESERVATION
Not in District nor Landmark.
3. Type Ceilings: _____ Does not require review.
4. Insulation Type _____ Size _____ Requires Review.
5. Ceiling Height: _____

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 USE Group F-2 Type

Swimming Pools:

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

Permit Received By Mary Grest

Signature of Applicant [Signature] Date: 10 May '94

District 6 Scott Garland

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

[Signature]

White - Tax Assessor

940217

Permit # 940217 City of Portland BUILDING PERMIT APPLICATION Fee \$114.20 Zone _____ Map # _____ Lot# _____

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

Owner: Pratt-Abbott Dry Cng Phone # 797-4844
Address: 4 Bell St- Ptd, ME 04102

LOCATION OF CONSTRUCTION 4 Bell St.

Contractor: Bailey Sign Sub: 774-2843

Address: 9 Thomas Dr- Westbrook Phone # ME 04092

Est. Construction Cost: _____ Proposed Use: production/retail
Past Use: _____ W signs

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 four signs - 1 - 13'x8'

Foundation: 3 - 38'x3'
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 _____

DEPARTMENT OF PERMITS
CITY OF PORTLAND
Name: _____
Lot: _____

For Official Use Only
Date: 3/23/94
Inside Fire Limits: _____
Bldg Code: _____
Time Limit: _____
Estimated Cost: _____

Zoning:
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 _____ Subdivis _____
Shoreland zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain): WPA 703-31-94

Ceiling:
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____ Does not require _____
4. Insulation Type _____ Size _____ Requires Review _____
5. Ceiling Height: _____

Roof:
1. Truss or Rafter Size _____ Span Action: _____ Approved _____
2. Sheathing Type _____ Size _____ Approved _____
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 Louise E. Chase
Signature of Applicant Rodney L. Beem Date 3/23/94
CEO's District 6 Rodney Beem WITH LETTER

White - Tax Assessor

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO

[6] MR. ROWE