

930550

Permit # 930550 City of Portland BUILDING PERMIT APPLICATION Fee \$25 Zone RP Map # \_\_\_\_\_ Lot# \_\_\_\_\_

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

Owner: Pleasant Day Nursery Phone # 878-2089  
 Address: 970 Forest Ave- Ptd, ME 04103  
 LOCATION OF CONSTRUCTION: 595 Brighton Ave.  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # child/care center  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: XXXXXXXXXXXX  
 Past Use: medical office bldg  
 # 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 chase of use - from medical office bldg

**For Official Use Only**

Date 5/18/93 Subdivision \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name JUN 20 1993  
 Bldg Code \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_

**CITY OF PORTLAND**

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 \_\_\_\_\_ 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: prop owner: Pen Bay Med Ctr  
 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: \_\_\_\_\_

Ceiling: \_\_\_\_\_  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceiling: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

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

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

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

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

Plumbing: \_\_\_\_\_  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of 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.

\* Mail permit: Richard Lerman  
 Exterior Walls: 16 William St- Ptd 04103  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

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

Permit Received By Louise E. Chase  
 Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of CEO Richard D. Lerman Date 6/18/93  
 Inspection Dates \_\_\_\_\_

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

Location of Construction: 595 Brighton Ave/6 Columbia Rd		Owner: Coyle, Richard	Phone: 637-980/854-0050	Permit No: 341090
Owner Address: P.O. Box 285 Limington, ME 04049		Leasee/Buyer's Name:	Phone:	Business Name:
Contractor Name: TBA		Address:		Phone:
Past Use: Medical Office	Proposed Use: Medical Office w/lat Reno	COST OF WORK: \$ 0.000.	PERMIT FEE: \$ 50.00	<b>PERMIT ISSUED</b> OCT 11 1994 CITY OF PORTLAND Zoning Approval:
Proposed Project Description: Make Interior Renovations as per plans		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 5B Signature: [Signature]	
		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 Coyle		Date Applied For: 06 Oct 94		

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..

- 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

**PERMIT ISSUED WITH REQUIREMENTS**

**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: Richard Coyle ADDRESS: \_\_\_\_\_ DATE: 06 Oct 94 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

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: [Signature]

CEO DISTRICT 4  
M.M. Coyle

COMMENTS

1/9/96 Work Completed & Closed w/o call P

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

BUILDING PERMIT REPORT

DATE: 11/OCT/94 Address 595 BRIGHTON AVE,

REASON FOR PERMIT: TO MAKE INTERIOR RENOVATIONS

BLDG. OWNER: Richard Coyne

CONTRACTOR: " " APPROVED:

PERMIT APPLICANT: X/10 X/12 DENIED:

CONDITION OF APPROVAL OR DENIAL:

1. Before concrete for foundation is placed, approvals from Public Works and Inspection Service must be obtained. ( a 24 hour notice is required prior to inspection).
2. Precaution must be taken to protect concrete from freezing.
3. It is strongly recommended that a register land surveyor check all foundation forms before concrete is placed.
4. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hr., including fire doors with selfclosers.
5. Each apartment shall have access to (2) separate, remote and approved means of egress. A single exit is acceptable when its exits directly from the apartment to the building exterior with no communications to other apartment units.
6. The boiler shall be protected by enclosing with one (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An indication shut-off valve shall be installed in an accessible locations between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 sq. ft. per sprinkler.
7. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of special knowledge or separated tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118mm) above the floor. All egress or rescue windows from sleeping room must have minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm) and a minimum net clear opening of 5.7 sq.ft.
8. This permit does not preclude the applicant from obtaining any license needed from the City Clerk's office.

9. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code 919.3.2 (BOCA National Building Code 1993), and NFPA 101 Chapter 18 & 19. (smoke detectors shall be installed and maintained at the following locations):

1. In the immediate vicinity of bedrooms;
2. In all bedrooms;
3. In each story within a dwelling unit, including basements.

10. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1993)

11. Guardrails & Handrails - A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Group 42", except Use Group R which is 36". In occupancies in Use Group A, B, H-4, I1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

\*12. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10, section & subsections 1023. & 1024.0 of the City's building code. (The BOCA National Building Code/1993)

13. Stair construction in Use Group R-3 & R-4 is a minimum of 9" tread and 8-1/4" maximum rise.

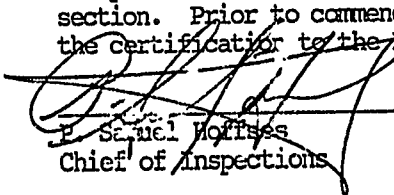
14. Headroom in habitable space is a minimum of 7'6".

15. The minimum headroom in all parts of a stairway shall not be less than 80 inches.

16. 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.

17. Section 25-135 of the Municipal Code for the City of Portland states "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".




18. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

  
P. Samuel Hoffes  
Chief of Inspections

\*1. Portable fire extinguishers shall be provided in accordance w/NFPA #10

/dmr 01/14/94 (redo w/additions)

LEGEND:

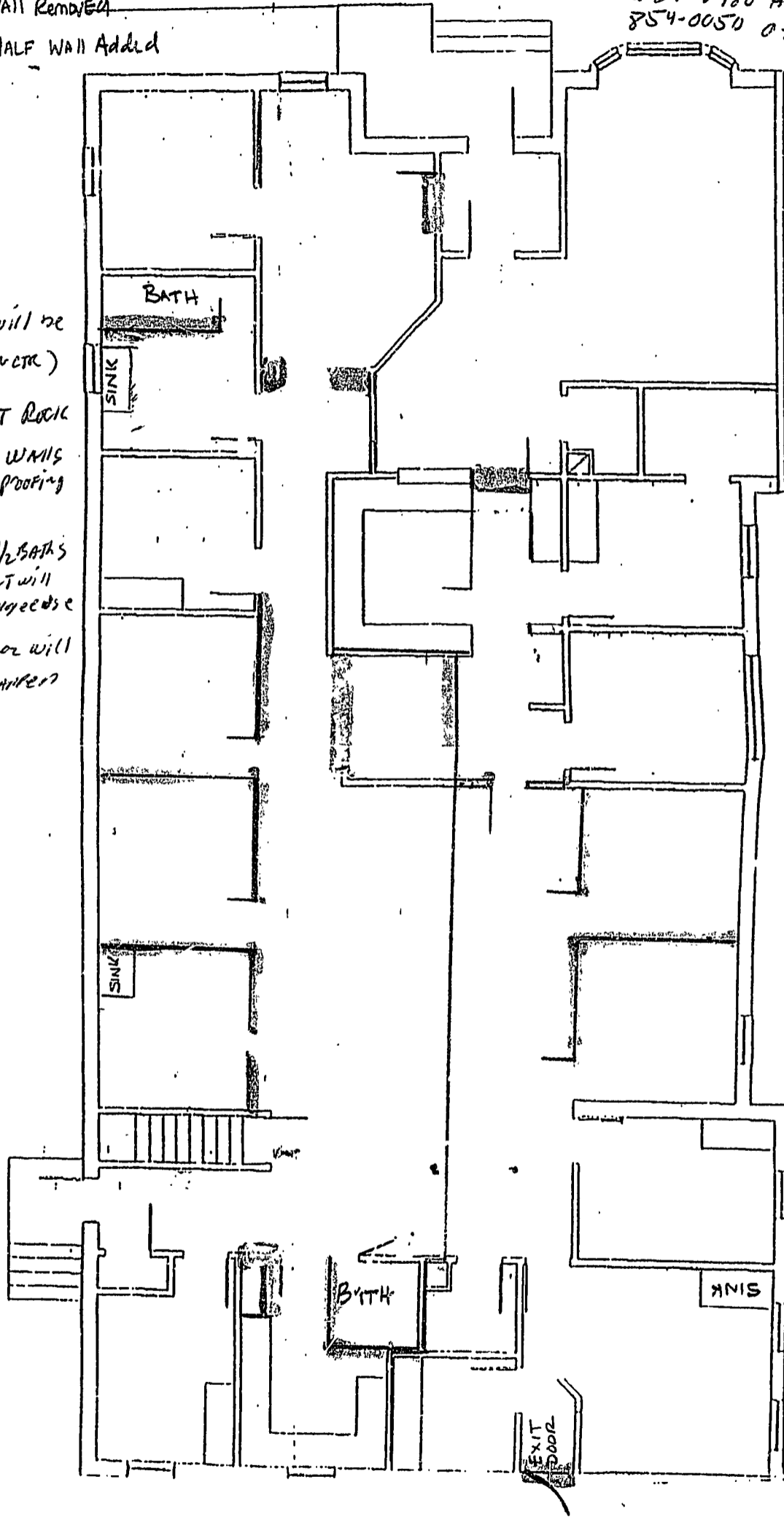
-  WALL Added
-  WALL REMOVED
-  HALF WALL Added

595 BRIGHTON AVE  
LAYOUT of PROPOSED Changes

OWNER  
RICHARD S. COYDE  
PO-Box 285  
LIMESTON, ME 04049  
637-2980 HOME  
854-0050 OFF

All walls will be  
2x4 (16" on ctr.)  
5/8" sheet rock  
INSULATED WALLS  
FOR SOUND PROOFING

The two 1/2 BATHS  
one to front will  
be full size  
one to rear will  
be handicapped  
ABC

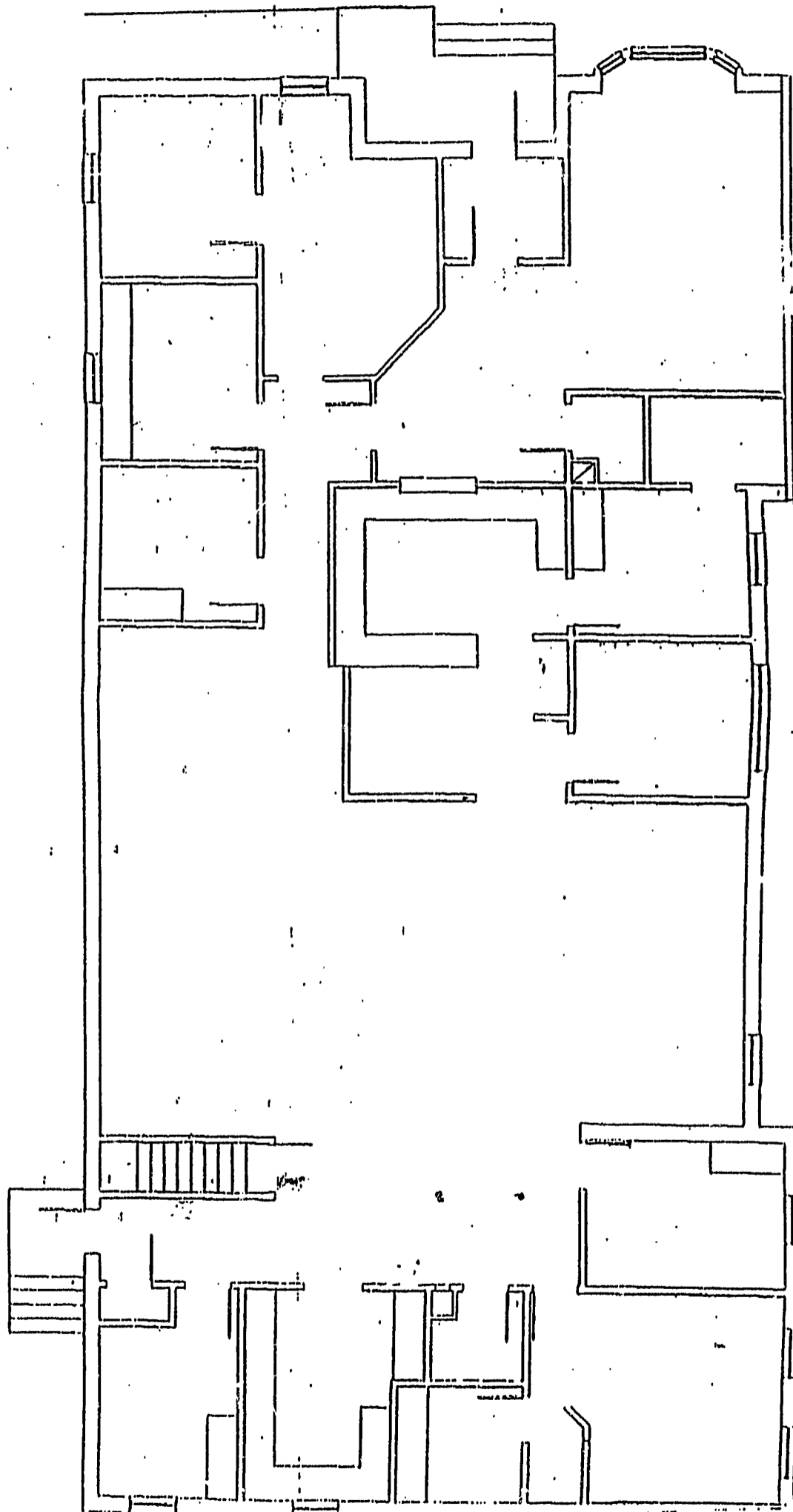


595 Brighton Ave  
LAYOUT AS FS

OWNER Richard & Coyne  
P.O. BOX 275  
LIMINGTON, Me,  
04049

637-2980 Home  
854-0050 OFF

FRONT OF Bldg.

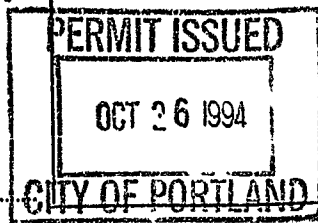


941172



FILL IN AND SIGN WITH INK  
APPLICATION FOR PERMIT FOR  
HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 25 Oct 94



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 595 Brighton Ave Use of Building Prof Office No. Stories 1 New Building Existing " " Name and address of owner of appliance Richard Coyne Installer's name and address Tim Darling P & H 40 Read St 04103 Telephone 773-9525

General Description of Work

To install Gas Fired forced hot water system

IF HEATER, OR POWER BOILER

Location of appliance Basement Any burnable material in floor surface or beneath? no If so, how protected? Kind of fuel? Natural Gas Minimum distance to burnable material, from top of appliance or casing top of furnace 60" From top of smoke pipe 24" From front of appliance 10' From sides or back of appliance 10' Size of chimney flue 4" Other connections to same flue None If gas fired, how vented? Power vented Rated maximum demand per hour 142,000 Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories? Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? Type of floor beneath burner Size of vent pipe Location of oil storage Number and capacity of tanks Low water shut off Make No. Will all tanks be more than five feet from any flame? How many tanks enclosed? Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath? If so, how protected? Height of Legs, if any Skirting at bottom of appliance? Distance to combustible material from top of appliance? From front of appliance From sides and back From top of smokepipe Size of chimney flue Other connections to same flue Is hood to be provided? If so, how vented? Forced or gravity? If gas fired, how vented? Rated maximum der and per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Tim Darling Master Plumber 07160 Cost of Work: 4,000. = 40.00 Permit Fee  
1. 1 1/2" PIPING  
2. 1 1/4" VENT PIPE  
3. Kind of heat  
4. Name, rigidity & support  
5. Name & Label  
6. Remote control  
7. High limit control  
8. Main water control  
9. Low limit control  
10. High limit switch  
11. Piping support & anchors  
12. Valves in piping  
13. Tank  
14. Tank  
15. Tank  
16. Tank  
17. Tank  
18. Tank  
19. Tank  
20. Tank

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining theret are observed?

CS 300  
INSPECTION FILE APPLICANT'S ASSESSOR'S COPY  
Signature of Installer



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

Location of Construction: 595 Brighton Ave		Owner: Richard Coyne		Phone:		Permit No: <b>961240</b>	
Owner Address: 122x21x12x20x51x1xR11d1xME104103		Lease/Buyer's Name: Jeffrey C Cole		Phone: 772-1013		Business Name:	
Contractor Name: - lessee address		Address: 86 Vannah Ave- Ptd ME 04103		Phone: appeal fee \$50		Permit Issued: DEC 26 1996	
Past Use: physicians office		Proposed Use: infant & toddlers center for up to 12 children		COST OF WORK: \$		PERMIT FEE: \$ 25	
Proposed Project Description: conditional use appeal /change use		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: E Type: 2L BOCA96		Zone: CBL: 184-B-3 RP	
		Signature:		Signature:		Zoning Approval: conditional - AS permit is required for A Special Zone or Reviews: <input type="checkbox"/> Shoreland New sign <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan map <input type="checkbox"/> minor <input type="checkbox"/> mm	

Permit Taken By: L Chase Date Applied For: 11/19/96

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..

**PERMIT ISSUED WITH REQUIREMENTS**

APPEAL SUSTAINED 12/12/96

**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] ADDRESS: \_\_\_\_\_ DATE: 12-16-96 PHONE: \_\_\_\_\_  
 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved 12/12/96  
 Denied

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

Action:  
 Approved  
 Approved with Conditions  
 Denied  
 Date: 12/17/96

CEO DISTRICT [Signature]  
A. Tower

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

APPLICATION FOR PERMIT

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....

ZONING LOCATION ..... PORTLAND, MAINE .. Jan. 21, 1986

VOID

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION ... 587 Brighton Avenue
1. Owner's name and address Rosemont Market - same Fire District #1 [ ] #2 [ ]
2. Lessee's name and address Telephone 773-7812
3. Contractor's name and address Maine Mobile Message - 17 Elm St. Telephone 829-3569

Proposed use of building variety store Gorham No. of sheets
Last use same No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$

FIELD INSPECTOR - Mr. Appeal Fees \$
Base Fee 10.00
Late Fee
TOTAL \$

To set 4' x 8' temporary portable sign to be used from Jan. 21, to Feb. 21, 1986 1st time for sign this year.

Stamp of Special Conditions

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

DETAILS OF J.F.A. WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber - Kind Dressed or full size? Corner posts Sills
Size Girder Columns under gunders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters 1st floor 2nd 3rd roof
On centers: 1st floor 2nd 3rd roof
Maximum span: 1st floor 2nd 3rd roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE
BUILDING INSPECTION - PLAN EXAMINER
ZONING
BUILDING CODE:
Fire Dept.:
Health Dept.:
Others:

MISCELLANEOUS

Will work require disturbing of any tree on a public street?
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

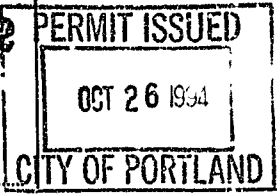
Name of Applicant Tim Olmsted for Maine Mobile Message
Phone # same
Name of above Tim Olmsted for Maine Mobile Message
Address

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY



FILL IN AND SIGN WITH INK

941172



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 25 Oct 94

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 595 Brighton Ave Use of Building Prof Office No. Stories 1 New Building Existing "
Name and address of owner of appliance Richard Coyne
Installer's name and address Tim Darling P & H 40 Read St 04103 Telephone 773-9525

General Description of Work

To install Gas Fired forced hot water syates

IF HEATER, OR POWER BOILER

Location of appliance Basement Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? Natural Gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 60"
From top of smoke pipe 24" From front of appliance 10' From sides or back of appliance 10'
Size of chimney flue 4" Other connections to same flue none
If gas fired, how vented? Power vented Rated maximum demand per hour 142,000
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks - furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Tim Darling Master plumber 07160
Cost of work: 4,000. 40.00 Permit fee
Amount of fee enclosed?

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

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

Location of Construction: 595 Brighton Ave/6 Columbia Rd		Owner: Richard Coyne	Phone: 637-2980/854-0050	Permit No: <b>941090</b>
Owner Address: Box 285 Limington, ME 04049		Leasee/Buyer's Name:	Business Name:	Permit Issued: <b>PERMIT ISSUED</b>
Contractor Name: TBA	Proposed Use: Medical Office w/Int Reno	COST OF WORK: \$ 6,000.	PERMIT FEE: \$ 50.00	<b>OCT 11 1994</b>
Past Use: Medical Office		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: 50 Signature: [Signature]	<b>CITY OF PORTLAND</b>
Proposed Project Description: Make Interior RENovations as per plans		Signature: [Signature]	Signature: [Signature]	Zoning Approval: [Signature]
Permit Taken By: Mary Czesik	Date Applied For: 06 Oct 94	<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		

- 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.

**PERMIT ISSUED WITH REQUIREMENTS**

**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: Richard Coyne ADDRESS: \_\_\_\_\_ DATE: 06 Oct 94 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

**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: 10/7/94

CEO DISTRICT **4**

M.A. Carroll



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date October 11, 1994  
 Receipt and Permit number 5768

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: 595 Brighton Ave.  
 OWNER'S NAME: Commercial Prop ADDRESS: 100 Silver St. 04101

<b>OUTLETS:</b>	<b>FEES</b>
Receptacles <u>4</u> Switches <u>2</u> Plugload _____ ft. TOTAL <u>6</u> .....	1.20
<b>FIXTURES:</b> (number of)	<u>60</u>
Incandescent _____ Fluorescent <u>2</u> (not strip) TOTAL <u>2</u> .....	.60
Strip Fluorescent _____ ft .....	_____
<b>SERVICES:</b>	
Overhead _____ Underground <u>1</u> Temporary _____ TOTAL amperes <u>200</u> ..	15.00
<b>METERS:</b> (number of) <u>1</u> .....	_____
<b>MOTORS:</b> (number of)	
Fractional _____ .....	_____
1 HP or over _____ .....	_____
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) _____ .....	_____
Electric (number of rooms) _____ .....	_____
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____ .....	_____
Oil or Gas (by separate units) _____ .....	_____
Electric Under 20 kws _____ Over 20 kws _____ .....	_____
<b>APPLIANCES:</b> (number of)	
Ranges _____	Water Heaters _____
Cook Tops _____	Disposals _____
Wall Cvens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
<b>TOTAL</b> .....	_____
<b>MISCELLANEOUS:</b> (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 _____ .....	_____
	<b>INSTALLATION FEE DUE:</b> _____
<b>FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT</b> .....	<b>DOUBLE FEE DUE:</b> _____
<b>FOR REMOVAL OF A "STOP ORDER" (304-16.f)</b> .....	<b>TOTAL AMOUNT DUE:</b> <u>17.80</u>

**INSPECTION:**  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call x  
**CONTRACTOR'S NAME:** Everything, Elec.  
**ADDRESS:** P. O. Box 10927 Portland  
**TEL.:** 774-3067  
**MASTER LICENSE NO.:** 15768 **SIGNATURE OF CONTRACTOR:** \_\_\_\_\_  
**LIMITED LICENSE NO.:** \_\_\_\_\_

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

