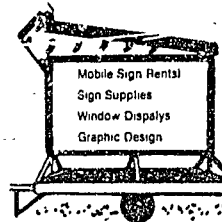


Maine Mobile Message
17 Elm Street
Gorham, Maine 04038
Tel. (207) 839-3569



Peter Wentworth

Friends & Trends

Westgate Shopping Ctr. 1372

Portland, ME 04104

Phone # 761-4448

Congress St.

Westgate Shopping Ctr.



① Sign is 7' from road.

② Sign does not block view
from surrounding roads

RECEIVED

APR 1 0 1986

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

May 13, 1986

RE: 1372 Congress Street

Manager
Friends & Trends
1372 Congress Street
Portland, Maine 04102

Gentlemen:

Please be advised that your permit for a temporary 4 X 8 mobile sign has expired for this year. The City of Portland allows these signs for 3 30-day periods per calendar year, and you have used up this allowance. This sign must be removed immediately.

Thank you for your cooperation.

Sincerely,

Kathleen A. Taylor
Code Enforcement Officer

KAT/el

cc: Maine Mobile Message, 17 Elm Street, Gorham, ME 04038
P. Samuel Hoffses, Chief of Inspection Services

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION 000402

APR 14 1986

ZONING LOCATION B-1 PORTLAND, MAINE April 10, 1986 City Of Portland

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 1372 Congress St. Fire District #1 [] #2 []
1. Owner's name and address Friends & Trends - same Telephone 761-4448
2. Lessee's name and address Telephone
3. Contractor's name and address Me. Mobile Message- 17 Elm St. Gorham Telephone 839-3509

Proposed use of building retail - card & gift shop No. of sheets
Last use same No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ Appeal Fees \$

FIELD INSPECTOR-Mr. @ 775-5451 Base Fee 10.00
Late Fee
TOTAL \$

To set 4' x 8' temporary portabel sign to be used from APRIL 10 to May 10, 1986. And time for sign this year last

Stamp of Special Conditions

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? NO Is any electrical work involved in this work? NO
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 girders 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: A. N. W. J. T. 4/11/86
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?

Signature of Applicant Tim Olmsted Phone # same
Type Name of above Message Tim Olmsted for Me. Mobile 1 [] 2 [] 3 [] 4 []
Other and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

[Signature] Ms Taylor

1/22/2/22
2/25/3/25
4/10 - 5/10

NOTES

5/30/10 - Expired - removed.

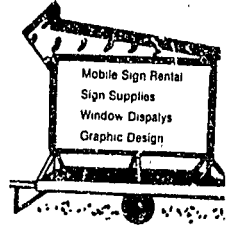
Permit No. 86/492
Location 1376 Longwood Rd.
Owner S. M. White - Alameda
Date of permit 4-10-86
Approved V. H. - 86
Dwelling *[Signature]*
Garage
Alteration

~~[Large crossed-out area containing multiple horizontal lines]~~

Peter Wentworth

Friends & Trends

Maine Mobile Message
17 Elm Street
Gorham, Maine 04038
Tel. (207) 839-3569



Congress St.

Westlake
Shopping
Ctr.



① Sign is 7' from road.

② Sign does not block view
from surrounding roads

RECEIVED

JAN 22 1986

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP 000093

B.O.C.A. TYPE OF CONSTRUCTION

JAN 31 1986

ZONING LOCATION B-1 PORTLAND, MAINE .. Jan. 22, 1986

City Of Portland

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 1372 Congress Street - Westgate Shopping Ctr. Fire District #1 , #2

1. Owner's name and address Friends & Trends - same Telephone .. 761-4448

2. Lessee's name and address Telephone

3. Contractor's name and address Me. Mobile Message-17 Elm St. Gorham Telephone 839-3569

Proposed use of building .. retail - gift shop No. of sheets

Last use same No. families

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ Appeal Fees \$

FIELD INSPECTOR—Mr. Base Fee 10,00

@ 775-5451

Late Fee

TOTAL \$

To set 4' x 8' temporary portable sign to be used from Jan. 22 to Feb. 22, 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 NEW 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 girders 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: O.K. 9/2/86 J.P. 1/22/86
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?

Signature of Applicant Tim Olmsted Phone # ... same ...
Type Name of above .. Tim Olmsted for 1 2 3 4
Me. Mobile Message Other
and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

[8] M. Taylor

Permit No. 86/93

Location 137/2 Longways Rd.

Owner J. M. M. & J. M. M.

Date of permit 1-22-86

Approved 1-30-86

Dwelling *Keep open*

Garage

Alteration

NOTES

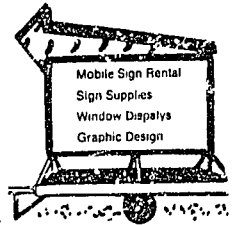
2/3 - in place

(This section is crossed out with a diagonal line)

(This section is crossed out with a diagonal line)

Maine Mobile Message

17 Elm Street
Gorham, Maine 04038
Tel. (207) 839-3569



Peter Wentworth

Friends & Trends

1372 Congress St

Tel # 761-4448

Congress St.

Westlake
Shopping
Ctr.



- ① sign is 7' from road.
- ② sign does not block view from surrounding roads.

RECEIVED

FEB 25 1986

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

APPLICATION FOR PERMIT

PERMIT ISSUED

FEB 25 1986

B.O.C.A. USE GROUP
 B.O.C.A. TYPE OF CONSTRUCTION **00182**
 ZONING LOCATION **B-1** PORTLAND, MAINE Feb. 25, 1986

City Of Portland

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 **1372 Congress St.**
 1. Owner's name and address **Friends & Trends - same** Fire District #1 #2
 Telephone **761-4448**
 2. Lessee's name and address **Me. Mobile Messagew 17 Elm St.** Telephone **839-3569**
 3. Contractor's name and address **Go: iam** No. of sheets
 No. families
 Proposed use of building **retail gift shop** Roofing
 Last use **same** Style of roof
 Material No. stories Heat
 Other buildings on same lot
 Estimated contractual cost \$
 FIELD INSPECTOR—Mr. **@ 775-5451** Appeal Fees \$
 Base Fee **10.00**
 Late Fee
 TOTAL \$

To set 4' x 8' temporary portable sign to be used from Feb. 25 to March 25, 1986 2nd time 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 NEW 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 Kind of heat fuel
 No. of chimneys Material of chimneys of lining Corner posts Sills
 Framing Lumber—Kind Dressed or full size? 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 height?
 If one story building with masonry walls, thickness of walls?

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?

MISCELLANEOUS

Will work require disturbing of any tree on a public street? **no.**
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? **yes.**
 APPROVALS BY: DATE
 BUILDING INSPECTION—PLAN EXAMINER
 ZONING: **O.K. M. J. T. 2/25/86**
 BUILDING CODE:
 Fire Dept.:
 Health Dept.:
 Others:

Signature of Applicant **Tim Olmsted** Phone # **same**
 Type Name of above **Tim Olmsted for**
Me. Mobile Messagew Other
 and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

[2] *[Signature]* **Power**

Permit No. 86/182
Location 13712 Longwood Rd.
Owner H. W. ...
Date of permit 2-25-56
Approved 2-25-56
Dwelling Single
Garage
Alteration

NOTES

4/23 Expired II

Large ruled area for notes, mostly blank with a diagonal line.



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

November 4, 1986

RE: 1360 Congress Street

Mr. Ralph Hutchinson
Bailey Sign Co.
9 Thomas Drive
Westbrook, Maine 0402

Dear Mr. Hutchinson:

This is in reference to a request for a building permit for a sign for Mortt's Shoe Outlet at 1360 Congress Street.

We need the following information regarding this sign permit:

- a. Linear feet of frontage for Mortt's in Westgate; and
- b. Consent form signed by Shaw's Realty Co. to authorize the sign for the building. (See enclosed form).

Please obtain the above information for this office prior to the issuance of the sign permit.

Sincerely,

Warren J. Turner
Zoning Enforcement Inspector

/el

cc: P. Samuel Hoffses, Chief of Inspection Services
Kevin Carroll, Code Enforcement Officer

APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION B-1 PORTLAND, MAINE Nov. 4, 1936

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

I, 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 specific conditions:

- LOCATION 1360 Congress Street - Mortt, s Shoe Outlet
1. Owner's name and address Shaw, s Realty - Me. Mall Plaza
2. Lessee's name and address
3. Contractor's name and address Bailey, Sign. Co. 9 Thomas Drive, West

Proposed use of building shoe retail. Last use same. Material No. stories Heat Style of roof Roofing. Other buildings on same lot. Estimated contractual cost \$

FIELD INSPECTOR-Mr. [Signature] Appeal Fees \$ Base Fee \$ Late Fee \$ TOTAL \$

To erect 3' x 20' sign in front of building as per plans. 1 sheet of plans

send permit ot # 3 04092

Stamp of Special Conditions

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

DETAILS OF NEW 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 girders 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?

Signature of Applicant Ralph Hutchinson Phone # same
Type Name of above Ralph Hutchinson for Bailey Sign Co. 1 2 3 4
Other and Address

PERMIT # 1003 PORTLAND BUILDING PERMIT APPLICATION DATE 8/16/87

PERMIT ISSUED
AUG 11 1987
City Of Portland

I. GENERAL INFORMATION
 Location/address of construction 1362 Congress Street
 1. Owner's name Nutra System Weight Center Tel. 773-1845
 Address same 04101 Tel. _____
 2. Lessee's name _____
 Address _____ Tel. _____
 3. Contractor's name NEOPA
 Address 17 Elm Street, Gortham 04038 Tel. 839-3569
 4. Is this a legally recorded lot? yes _____ no _____

II. DESCRIPTION OF WORK:

temporary 4' x 8' sign 1st time 1 month

III. BUILDING DIMENSIONS: length _____ width _____ square footage _____ height _____ #stories _____
 IV. ZONE _____ Street frontage _____ Zoning board approval: no yes date _____
 Setbacks: front _____ back _____ side _____ side _____ Planning board approval: no yes date _____
 V. REVIEW REQUIRED: variance _____ other _____ Number of off-street parking spaces:
 site plan _____ subdivision _____ shore _____ floodplain mgmt _____ enclosed _____ outdoors _____
 VI. FEES:
 base fee _____ other fees _____
 subdivision fee _____ late fee _____
 site plan review fee _____ TOTAL \$10.00

VII. DETAILS OF WORK

1. WATER SUPPLY: public private
 2. SEWER: public private, type _____
 3. HEAT: type _____ fuel _____
 4. FOUNDATION: type _____ thickness _____ footing _____
 5. ROOF: type _____ pitch _____ covering _____ load _____
 5. PLUMBING: SPRINKLER SYSTEM? yes no
 7. ELECTRICAL: service entrance size _____ # smoke detectors _____
 8. CHIMNEY: # flues _____ material _____ # fireplaces _____
 9. FRAMING: floor joists _____ size _____ max. on center _____
 ceiling joists _____ rafters _____
 studs _____ wall studs _____
 10. If 1-story building w/masonry walls: wall thickness _____ height _____
 11. BEDROOM WINDOWS height _____ width _____ sill height _____ egress window? yes no

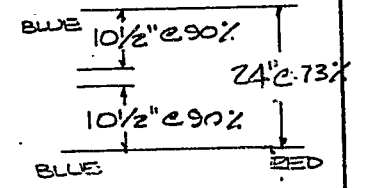
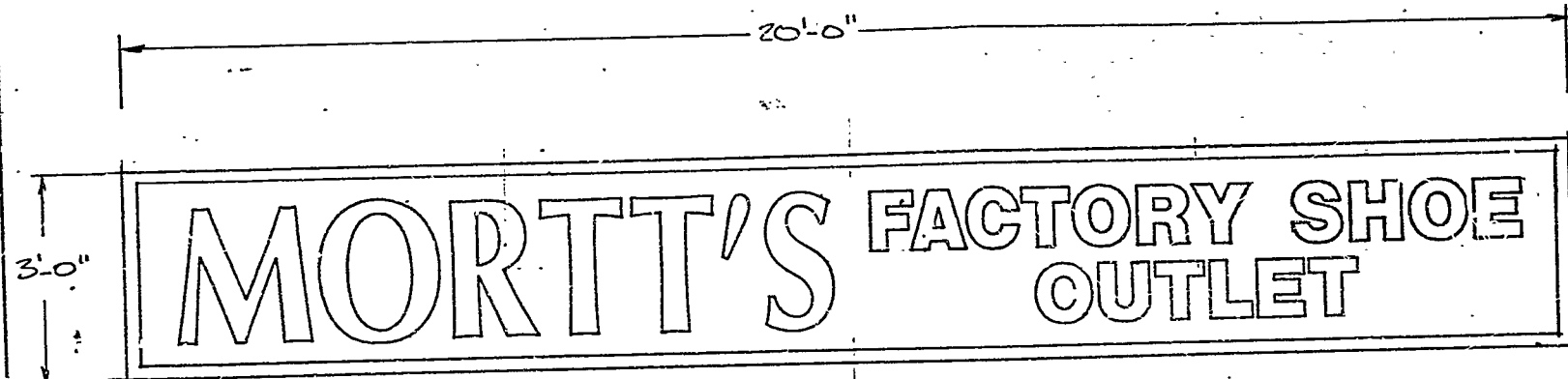
VIII. OFFICE USE:
 TAX MAP # _____
 LOT # _____
 VALUE/STRUCTURE: _____
 PERMIT EXPIRATION: _____
 CODE: _____ if other, explain _____
 PROPOSED USE: temporary sign
 XI. PAST USE: _____
 XII. OWNERSHIP: _____ PUBLIC _____ PRIVATE _____
 XIII. EST. CONSTRUCTION COST: _____
 XIV. GR. SQ. FT. OF LOT BUILDING: _____
 XV. NEW OR PHASED SUBDIVISION REFERENCE:
 Name _____
 Lot _____
 Block _____
 Seasonal Condominium Apartment

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE
 XV. RESIDENTIAL BUILDINGS ONLY:
 # NEW DWELLING UNITS WITH: 1 BDRM. _____ 2 BDRMS _____ 3 BDRMS _____
 # EXISTING DWELLING UNITS WITH: _____
 XVI. RESIDENTIAL UNITS:
 # NEW DWELLINGS _____
 # EXISTING DWELLINGS _____
 TOTAL RESIDENTIAL UNITS _____

APPROVALS BY: _____ DATE _____
 BUILDING INSPECTION - PLAN EXAMINER _____
 ZONING: _____
 C.E.O. _____
 FIRE DEPT. _____
 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?

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

District No. 2
 XVII. SIGNATURE OF APPLICANT: [Signature] PHONE # _____
 TYPE NAME OF ABOVE: John Christian, INC. Nutra Systems 1 2 3 4
 White-GPCOG Green - Applicant Yellow - Assessor Pink - Office File Gold - Field Inspector



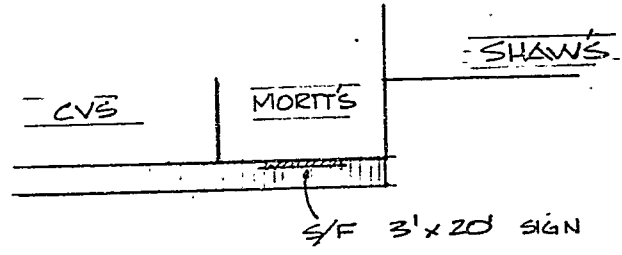
SCALE: 1/2" = 1 FT.

S/F BELT,
BLDG. MOUNT


MORTT'S SHOE FACTORY OUTLET
PORTLAND, ME.

RECEIVED
NOV - 4 1986

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND



— PLOT PLAN / NOT TO SCALE
© WESTGATE
SHOPPING CENTER

 Bailey Sign 9 Thomas Drive Col. Westbrook Executive Park Westbrook, ME 04092	
Revised	
Remarks	S/F BELT
Customer	MORTT'S
Location	PORTLAND, ME
Scale	1/2" / FT.
Date	7-25-86
Job #	
Sheet	1 of 1

Westgate Shopping Ctr
— PROPOSAL # 1
1360 Congress St.

This design is the exclusive property of Bailey Sign Incorporated, and all rights to its use or reproduction are reserved. ©COPYRIGHT

SMITH & S

JUN 10 1987

City Of Portland

I. GENERAL INFORMATION

Location/address of construction 1372 Congress Street
 1. Owner's name NEOPA Tel. 839-3569
 Address 17 Elm Street, Gorham 04038
 2. Lessee's name Friends and Trends Tel. 761-4448
 Address same
 3. Contractor's name owner Tel. 666
 Address _____
 4. Is this a legally recorded lot? yes _____ no _____

II. DESCRIPTION OF WORK:

To put up temporary sign for 6/6 to 7/5 1st time
 permit to NEOPA

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

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

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

VI. FEES:
 base fee _____ other fees _____
 subdivision fee _____ late fee 10.00
 site plan review fee _____ TOTAL _____

VII. DETAILS OF WORK

1. WATER SUPPLY: <input type="checkbox"/> public <input type="checkbox"/> private	7. ELECTRICAL: service entrance size _____ # smoke detectors _____	8. CHIMNEY: # flues _____ material _____ # fireplaces _____
2. SEWER: <input type="checkbox"/> public <input type="checkbox"/> private, type _____	9. FRAMING: floor joists _____ size _____ max on center _____ ceiling joists _____ rafters _____ studs _____ wall studs _____	
3. HEAT: type _____ fuel _____	10. If 1-story building w/masonry walls: wall thickness _____ height _____	11. BEDROOM WINDOWS height _____ width _____ sill height _____ egress window? yes <input type="checkbox"/> no <input type="checkbox"/>
4. FOUNDATION: type _____ thickness _____ footing _____		
5. ROOF: type _____ pitch _____ covering _____ load _____		
6. PLUMBING: SPRINKLER SYSTEM? yes <input type="checkbox"/> no <input type="checkbox"/>		

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

CODE _____ If other, explain _____ Seasonal Condominium Apartment

X. PROPOSED USE _____

XI. PAST USE _____

XII. OWNERSHIP: PUBLIC PRIVATE

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

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

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

APPROVALS BY: _____ DATE _____
 BUILDING INSPECTION - PLAN EXAMINER _____
 ZONING: _____
 C.E.O. _____
 FIRE DEPT. _____

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? _____

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

District No. _____	XVII. SIGNATURE OF APPLICANT <u>[Signature]</u> PHONE # _____
	TYPE NAME OF ABOVE <u>Allen Davidson for NEOPA</u> 1 2 3 4

White - GPCOG Green - Applicant Yellow - Assessor Pink - Office File G.c.d - Field Inspector

8 MB 7/1/87

PERMIT # 7120 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Nutri-System
 Address: 136 Congress St., Portland, Me 04104

** Call when ready*

LOCATION OF CONSTRUCTION: same
 CONTRACTOR: Covne Signs SUBCONTRACTORS: 282-1400
 ADDRESS: 52 Industrial Park Rd, XX Saco, Me 04072

Est. Construction Cost: \$1,400 Type of Use: sign/commercial bldg

Building Dimensions: 1 Stories: _____ Lot Size: _____

Proposed Use: _____ Condominium: _____ Apartment: _____

Completion: Explain Direct Sign: 48 sq ft, as per plan
 COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only
 # of Dwelling Units: _____ # of New Dwelling Units: _____

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

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

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. Windows _____
 3. No. Doors _____
 4. Eave Sizes _____ Spant(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 Size _____ Spant(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other materials _____

187 Irving

White-Tax Assessor Yellow-GPCOG White Tag -CEO

For Official Use Only

Date: June 15, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: \$1,400 Permit Expiration: _____
 Value of Structure _____ Ownership: _____ Public _____
 Fee: \$34.50 Private _____

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceiling: _____
 4. Insulation Type: _____
 5. Ceiling Height: _____ Size: 12' 0"

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By: Nancy L. Dzema

Signature of Applicant: [Signature] Date: 6-15-88

Signature of CEO: _____ Date: _____

Inspection Date: _____

PERMIT # 463 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # 1079

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

Owner: Westgate Plaza
 Address: 1372 Congress Street
 LOCATION OF CONSTRUCTION: 1372 Congress Street
 Lessee: of Maine Inc
 CONTRACTOR: C.B. Sullivan Co. SUBCONTRACTORS: _____
 ADDRESS: PO Box 546 Manchester NH 03105 (603)624-4752

Est. Construction Cost: 50 Type of Use: BEHX Beauty supply

Past Use: Card Shop

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Change of use from card shop to beauty supply

COMPL Y ONLY IF THE NUMBER OF UNITS WILL CHANGE /renovations (removing one wall)
 Residential Buildings Only: _____
 # Of Dwelling Units: _____ # Of New Dwelling Units: _____

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

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

Exterior Walls:
 1. Siding 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 Size _____ Span(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

For Official Use Only

Date: April 25, 1988 Subdivided: Yes / No _____
 Inside Fire Limits _____ Name _____
 Blg Code _____ Loc _____
 Time Limit _____ Block _____
 Estimated Cost: 50 Permit Expiration _____
 Value/Structure _____ Ownership: _____ Public _____ Private _____
 Fee: 30

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

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

Chimneys:
 Type: _____ Number of Fire Places: _____

Heating:
 Type of Heat: _____

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

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

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

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

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

Permit Received By Lynne Benoit

Signature of Applicant Don Micheau Date 4/25/88

Signature of CEO Don Micheau Date _____

Inspection Dates _____

PERMIT # 000706 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Nutri-System *+ call when ready*

Address: 1362 Congress St., Portland, Me 04104

LOCATION OF CONSTRUCTION same

CONTRACTOR: Coyne Signs SUBCONTRACTORS: 282-2400

ADDRESS: 92 Industrial Park Rd, NE Saco, Me 04072

Est. Construction Cost: \$1,400 Type of Use: sign/commercial bldg

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Erect sign 48 sq ft, as per plan

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

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

Foundation:

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

Floor:

- Sills Size: _____ Sills must be anchored.
- Girder Size: _____
- Lally Column Spacing: _____ Size: _____ Spacing 16" O.C.
- Joists Size: _____ Size: _____
- 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 _____

For Official Use Only

Date: June 15, 1988 Subdivision: Yes / No _____

Inside Fire Limits _____ Name _____

Bldg Code _____ Lot _____

Time Limit _____ Block _____

Estimated Cost: \$1,400 Permit Expiration: _____ Public _____ Private _____

Value/Structure _____ Ownership: _____

Fee: \$34.60

Ceiling:

- Ceiling Joists Size: _____ Spacing _____
- Ceiling Strapping Size _____
- Type Ceilings: _____
- Insulation Type _____
- Ceiling Height: _____

PERMIT ISSUED

Roof:

JUN 16 1988

- Truss or Rafter Size _____ Span _____ Size _____
- Sheathing Type _____
- Roof Covering Type _____ City Of Portland
- Other _____

Chimneys: Type _____ Number of Fire Places _____

Heating: Type of Heat: _____

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

Plumbing:

- Approval of soil test if required Yes 20 No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- No. of Other Fixtures 02.0

Swimming Pools:

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

Zoning: District R-1 Street Frontage Req.: _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required: Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt _____ Special Exception _____

Other (Explain) _____

Date Approved O.R. John Turner June 15, 1988

Permit Received By Nancy L. Dzema

Signature of Applicant [Signature] Date 6-15-88

Signature of CEO _____ Date _____

Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$25.00 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$9.50 _____
(Explain) _____
Late Fee \$ _____

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

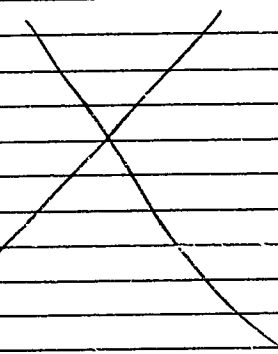
COMMENTS

Placed as per plan

Signature of Applicant

R. M. Chanani

Date



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

Owner: Cumberland Electronics
 Address: 1364 Congress Street
 LOCATION OF CONSTRUCTION 1364 Congress Street ✓
 CONTRACTOR: NESA SUBCONTRACTORS: _____
 ADDRESS: 17 Elm Street Gorham ME 04038 839-3569
 Est. Construction Cost: _____ Type of Use: Retail

Past Use: _____
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain Erect temp. sign from May 19, 1988 to June 1988

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

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

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

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

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

For Official Use Only

Date: May 20, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost _____ Permit Expiration: _____
 Value/Structure _____ Ownership: _____ Public _____ Private _____
 Fee 10

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

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

Zoning:
 District B-1 Street Frontage Req. _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt _____ Special Exception _____
 Other: _____ (Explain) _____
 Date Approved May 23, 1988

Permit Received By Lyvne Benoit

Signature of Applicant _____ Date 5/20/88

Signature of CEO Tim Oimsted Date 5/20/88

Inspection Dates _____

[Handwritten signature]

New England Specialty Advertising

17 Elm Street

Gorham, ME 04038

TEL # 839-3569

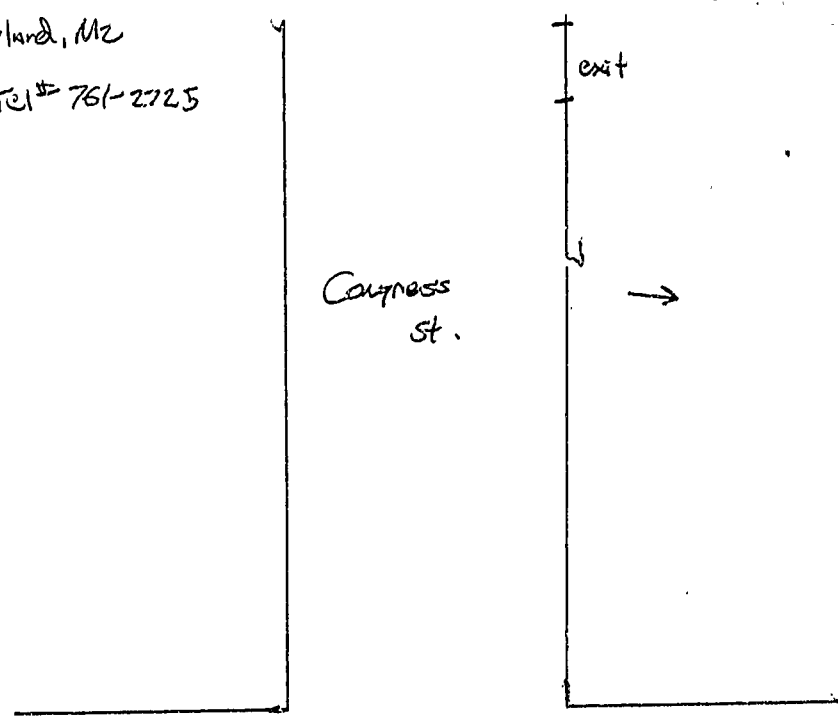
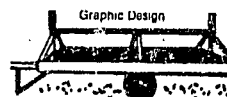
Cumberland Electronics

1364 Congress St.

Portland, ME

TEL # 761-2725

Tel. (207) 839-3569



- ① Sign is 7' from road
- ② Sign does not block view from surrounding roads

RECEIVED
MAY 20 1988
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

FROM: SHAW'S CORP 378-3916

6. 9. 1988 20:54

P. 1



shaw's

SHAW'S SUPERMARKETS, INC.
140 LAUREL STREET
POST OFFICE BOX 600
EAST BRIDGEWATER, MA 02333 U.S.A.

TELEPHONE: 617-378-7211
FAX #: 617-378-3916

ATTENTION: Mr. Peter Murphy

COMPANY: Coyne Signs

FAX NUMBER: 207-284-9181

DATE: June 10, 1988

NUMBER OF PAGES EXCLUDING THIS COVER SHEET TWO

SPECIAL INSTRUCTIONS TO FAX OPERATOR:

FROM: J. Baranowski EXT. 316
M. Seager 293

RECEIVED

JUN 15 1988

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

P. 2

6. 9. 1988 20:55

FROM SHRAUS CORP 378-3916

JUN 15 1988

W.O. NO. _____ DEMAG-12

CONCRETE
BLDG. WHITE
WOOD/CONC. RED
REF. PMS #200
CAS/REF. GREEN
GRIP-GARD, S&W
FENCE GRAY

CONCRETE INSPECTIONS
CITY OF PORTLAND

GRAY, RED-GARD
#381
WHITE
RED-PMS #200

12'-0"

2'-5" REF.

4'-0"

11'-5" 14"

5'-2"

OPTION B (4' x 12') WHITE REF. PMS #200

ELEVATION

(1) S/E INTERNAL ULTD. SIGN;
FASCIA MOUNTED / ON CANOPY
EXTRUDED ALUM. CABINET
SPRAYED KEVAN FACE 3/16" CLEAR
SPECIAL PMS COLOR MATCH

SCALE: 3/4" = 1 FT.

FIELD VERIFY!

MOUNTING DETAIL
SCALE: 1/4" = 1 FT.

CANOPY STRUCTURE

DATE: 13 MAY 88
NAME AS NOTED
DRAWN BY KSMIT
DESIGNED BY
DRAWING NUMBER B-1251
SHEET 1 OF

DESIGNED FOR: NUTRI/SYSTEM
LOCATION: 1262 CONGRESS ST., PORTLAND, MAINE

THIS DESIGN IS THE PROPERTY OF THE BOARD
FOR ALL INSPECTIONS AND REVISIONS FOR PROJECTS
RECEIVED BY THE BOARD OFFICE
ALL PRICES & QUANTITIES ARE FOR INFORMATION
USE AND IS NOT TO BE USED TO OBTAIN YOUR
ORDINATION OR EXPEND IN NEW FLORIDA

DESCRIPTION	DATE	LOCATION
BY PROJECT		
BY CONTRACTOR		
BY ARCHITECT		
BY ENGINEER		
BY INSPECTOR		
BY OWNER		

D.K. O'Brien
D. O'Brien
Shaw's Realty Trust
6-9-88

PERMIT # 01388 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Cumberland Electronics

Address: 1364 Congress Street

LOCATION OF CONSTRUCTION REAR SIDE

CONTRACTOR: N.O.P.A. SUBCONTRACTORS: _____

ADDRESS: 17 Elm Street Foxham, ME 04038

Est. Construction Cost: _____ Type of Use: Temp. sign, 10/26-11/25

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain _____

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

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

Floor:

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

Exterior Walls:

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

Interior Walls:

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

For Official Use Only	
Date: <u>10/26/87</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
For _____	

Ceiling:

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

PERMIT ISSUED

OCT 27 1987

Roof:

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

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

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

Swimming Pools:

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

Zoning:

District B-1 Street Frontage Req: _____ Provided Side _____ Side _____

Required Setbacks: Front _____ Back _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt: _____ Special Exception _____

Other (Explain) _____

Date Approved: _____

Permit Received By L. Benoit

Signature of Applicant [Signature] Date 10/26/87

Signature of CEO _____ Date _____

Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)

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

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

COMMENTS

Placed & removed as stated

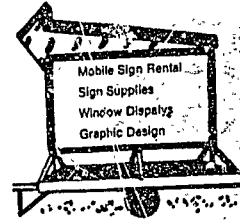
Signature of Applicant: *[Signature]*

Date _____

Peter Wentworth

Maine Mobile Message

17 Elm Street
Gorham, Maine 04038
Tel. (207) 839-3569

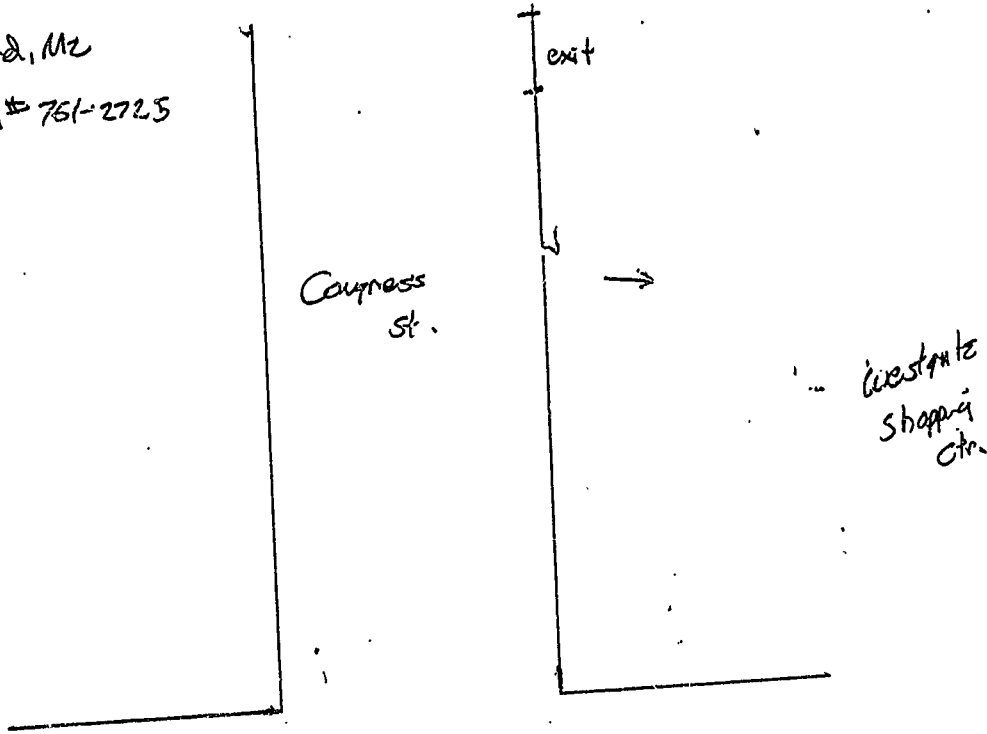


Comberland Electronics

~~133~~ 1364 Congress St.

Portland, ME

Tel # 761-2725



- ① Sign is 7' from road
- ② Sign does not block view from surrounding roads

PERMIT # 000463 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Wesgate Plaza
 Address: 1372 Congress Street
 LOCATION OF CONSTRUCTION 1372 Congress Street
 Lessee: _____ of Maine Inc.
 CONTRACTOR: C.B. Sullivan Co. SUBCONTRACTORS: _____
 ADDRESS: PO Box 546 Manchester NH 03005 (603)624-4752

Est. Construction Cost: 50 Type of Use: Beauty supply
 Past Use: Card Shop
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain Change of use from card shop to beauty supply

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

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

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

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

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

For Official Use Only

Date: Apr 1 25, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: 50 Permit Expiration: _____
 Value/Structure _____ Ownership: _____ Public _____ Private _____
 Fee: 30

PERMIT ISSUED

MAY 9 1988

City Of Portland

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

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

Zoning:
 District: B-1 Street Frontage Req.: _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____ Special Exception _____
 Other (Explain) _____
 Date Approved: Apr 29, 1988

Permit Received By Lynne Bencit
 Signature of Applicant: _____ Date 4/25/88
 Signature of CEO: FRB _____ Date 5/5/88
 Inspection Dates _____

PLOT PLAN



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

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

COMMENTS
5/11/88 - Completed as per plan, ~~per~~
11/29/88 - Final -

Signature of Applicant *Don Michael*

Date

C.B. Sullivan
1372 Congress

↓
100'

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

APR 28 1988

RECEIVED

RECEIVED

APR 28 1988

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

Bathroom

Bathroom

Storage

Front Door

35'

Back Door

35'

7' opening

PR1

Permit # 175 City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Nutti-Systems (mail permit) Phone # 773-1845
 Address: 1362 Congress St. Portland

LOCATION OF CONSTRUCTION 1362 Congress St.

Contractor: New Eng. Spec. Adv. Sub: _____

Address: 1109 Forest Ave. Port Phone # 878-8644

Est. Construction Cost: _____ Proposed Use: _____
 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 Temp. Sign February 20, 1990 to March 20, 1990
2nd of year

For Official Use Only	
Date <u>March 12, 1990</u>	Subdivision _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Ownership: _____ Public _____
Estimated Cost _____	Private _____
Zoning: <u>B-2</u>	Street Frontage Provided: _____
Review Required:	Provided Setbacks: Front _____ Back _____ Side _____
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) <u>OK UN 2/20/90 3-15-90</u>

Foundation:

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

Ceiling:

- Ceiling Joists Size: _____ Spacing _____
- Ceiling Strapping Size: _____
- Type Ceilings: _____
- Insulation Type: _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size: _____ Span _____
- Sheathing Type: _____ Size _____
- Roof Covering Type: _____

Floor:

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

Chimneys: _____ Type: _____ Number of Fire Places _____

Heating: _____ Type of Heat: _____

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

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 _____

Plumbing:

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

Swimming Pools:

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

Interior Walls:

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

Permit Received By Latini

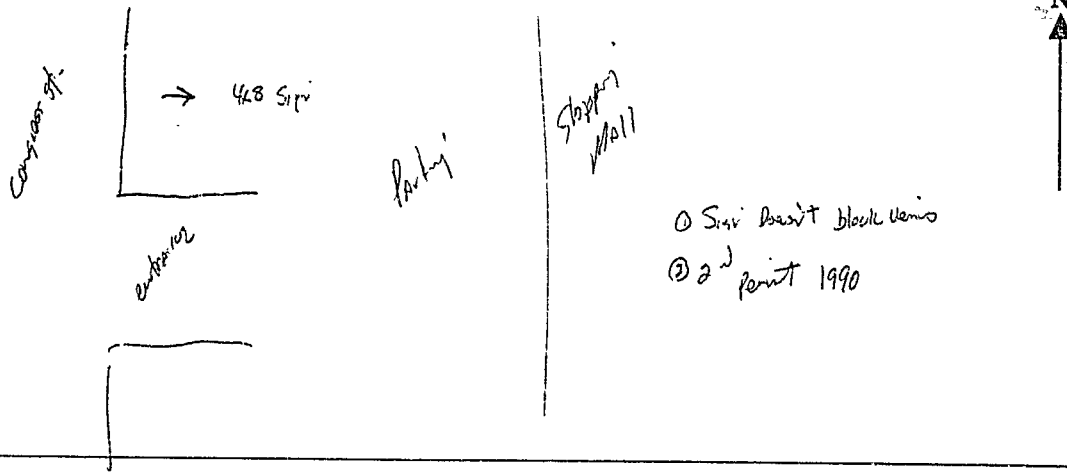
Signature of Applicant [Signature] Date 3/12/90

Signature of CEO Tim Olmsced Date _____

Inspection Dates _____

[Signature]

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 10.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS

Temp. sign.

Sign being removed MCM

Signature of Applicant [Signature]

Date 3/12/90

MAR 09 '90 14 12

ASSORD. CERTIFICATE OF INSURANCE

ISSUE DATE: 3/9/90

PRODUCER

ALEXANDER & ALEXANDER INC.
225 Public Ledger Building
Philadelphia, PA 19106

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

CODES SUB-CODES

COMPANY LETTER A Travelers Indemnity Ins. Co.

INSURED

COMPANY LETTER B Travelers Indemnity Ins. Co.

1612 The Wood Group
~~Old Bath Road~~
~~Zayre Store~~ 53 Baxter Blvd
~~Brunswick, ME 04011~~ Portland, ME 04101

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
	GENERAL LIABILITY				GENERAL AGGREGATE \$ 5,000
X	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMPOS AGGREGATE \$
A X	CLAIMS MADE OCCUR	TJ-CLMC-2011 792-A-89	7/31/89	7/31/90	PERSONAL & ADVERTISING INJURY \$
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 2,000*
					FIRE DAMAGE (ANY & EVERY) \$
					MEDICAL EXPENSE (ANY & EVERY) \$
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				BODILY INJURY (PER PERSON) \$
	ALL OWNED AUTOS				BODILY INJURY (PER OCCURR) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				BOTH OCCURRENCE \$
	OTHER THAN UMBRELLA FORM				AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY
	OTHER				EACH OCCURRENCE (DISEASE-POLICY) \$
B	Property	TND-2011 791-A-89	7/31/89	7/31/90	EACH OCCURRENCE (DISEASE-EACH EMPLOYEE) \$

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES, RESTRICTIONS, SPECIAL ITEMS: Pertaining to Nutri/System Center #1541 located 1362 Congress Street, Westgate Shopping Center, Portland, ME. the Certificate Holder is Named as Additional Insured.

New England Specialty Advertising
1109 Forrest Avenue
Portland, ME 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

ALEXANDER & ALEXANDER INC.

MAR 09 '90 14:32

ISSUE DATE 3/9/90

ADDENDUM CERTIFICATE OF INSURANCE

ISSUE DATE 3/9/90

PRODUCER

ALEXANDER & ALEXANDER INC.
225 Public Ledger Building
Philadelphia, PA 19106

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT INTEND TO EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

CODES

800-6000

COMPANY LETTER A Travelers Indemnity Ins. Co.

INSURED

COMPANY LETTER B Travelers Indemnity Ins. Co.

1612 The Wood Group
Old Bath Road
~~Zayre Plaza~~ 53 Baxter Blvd
Brunswick, ME 04011 Portland, ME

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
	GENERAL LIABILITY				GENERAL AGGREGATE \$ 5,000
X	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMMODS AGGREGATE \$
A X	CLAIMS MADE OCCUR	TJ-CLMC-2011 792-A-89	31/89	7/31/90	PERSONAL & ADVERTISING INJURY \$
	OWNER & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 2,000*
					FIRE DAMAGE (Any & to) \$
					MEDICAL EXPENSE (Any one person) \$
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				BODILY INJURY (Per person) \$
	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				EACH OCCURRENCE \$
	OTHER THAN UMBRELLA FORM				AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY \$ (EACH ACCIDENT) \$ (DISEASE-POLICY LIMIT) \$ (DISEASE-EACH EMPLOYEE)
	OTHER				
B	Property	TND-2011 791-S-89	7/31/89	7/31/90	\$ 75,000 per primary center \$ 50,000 per satellite center \$ 20,000 flood & earthquake

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS: Pertaining to Nutri/System Center #1541 located 1362 Congress Street, Westgate Shopping Center, Portland, ME, the Certificate Holder is Named as Additional Insured.

CERTIFICATE HOLDER

New England Specialty Advertising,
1109 Forrest Avenue
Portland, ME 04101

IF SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OF LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ALEXANDER & ALEXANDER INC.

Permit # 167 City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Neutri-Systems (MAIL PERMIT) Phone # _____
 Address: 1362 Congress St. Portland (Westgate)
 LOCATION OF CONSTRUCTION 1362 Congress St.
 Contractor New Eng. Spec. Adver. Sub: _____
 Address: 1109 Forest Ave. Port. 04103 Phone # 878-8844
 Est. Construction Cost: _____ Proposed Use: _____
 _____ 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 4 X 8 temp. sign as per plan
1/15/90 2/14/90

For Official Use Only
 Date: 1/31/90 Subdivision: _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Owr. ship: _____ Public _____
 Estimated Cost _____ Private _____
 Zoning: F-2
 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): OK W/ A - 3-15-90

Foundation:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other: 7

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

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: _____

Roof:
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 3. Roof Covering Type _____
Chimneys:
 Type: _____ Number of Fire Places _____

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 _____

Heating:
 Type of Heat: _____
Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

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

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

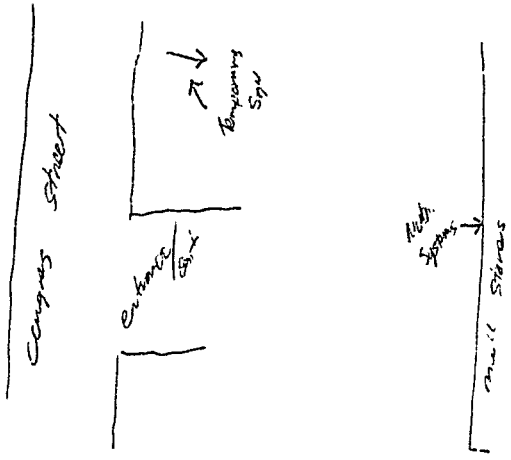
Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Tarin
 Signature of Applicant Tim Olmsted Date 1/31/90
 Signature of CEO _____ Date _____

Inspection Dates _____

PERMIT ISSUED
 MAR 15 1990
 City of Portland

PLOT PLAN



FEES (Breakdown From Front)
 Base Fee \$ 10.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS

To erect sign as per plan

Sign still up permit renewed MCM

Signature of Applicant *[Handwritten Signature]*

Date 1/31/90



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 1352 Congress St.

Issued to Shaw's Supermarket/Nutri System

Date of Issue 2/26/90

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. R9/2857, 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

Rear of Building

Interior Renovations

Limiting Conditions:

This certificate supersedes
certificate issued

Approved

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Permit # 2867 City of Portland BUILDING PERMIT APPLICATION Fee _____ Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: <u>Shaw's Supermarket</u> Phone # <u>773-0211</u>	For Official Use Only PERMIT ISSUED Date: <u>Nov 13, 1989</u> Name: <u>11-27-1989</u> Subdivision: _____ Lot: _____ Owner: _____ Public _____ City of Portland
Address: <u>PO Box 356 SoPtld 04106</u>	
LOCATION OF CONSTRUCTION # <u>1362 Congress Street (Nutri. sys.)</u>	Building Fire Limits: _____ Bldg Code: _____ Time Limit: _____ Estimated Cost: <u>145,000</u>
Contractor: <u>Langford & Low</u> Sub: <u>797-5141</u>	Zoning: _____ Street Frontage Provided: _____ Provided Setbacks: Front _____ Back _____ Side _____ Review Required: <u>No increase in building footprint</u> 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) <u>OK W/L 11-27-89</u>
Address: <u>PO Box 248 Warren Ave</u> Phone # <u>Ptld 04104</u>	
Est. Construction Cost: <u>25,000</u> Proposed Use: <u>commercial</u>	
_____ 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 <u>interior renovations as per 2 sets const plan</u>	

Foundation:

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

Floor:

- Sills Size: _____ Sills must be anchored.
- Girder Size: _____
- Lally 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 _____

Ceiling:

- Ceiling Joists Size: _____
- Ceiling Strapping Size _____ Spacing _____
- Type Ceilings: _____
- Insulation Type _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____ Span _____
- Sheathing Type _____ Size _____
- Roof Covering Type _____

Chimneys:

- Type: _____ Number of Fire Places _____

Heating:

- Type of Heat: _____

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:

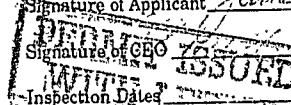
- Type: _____
- Pool Size: _____ x _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By Deborah Goode

Signature of Applicant James C. Langford Date 11-13-89

Signature of CEO _____ Date 11-27-89

Inspection Dates _____



White-Tax Assessor Yellow-GPCOG

White Tag-CEO R

© Copyright GPCOG 1988

FLOT PLAN

N



FEES (Breakdown From Front)

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

Type

Inspection Record

Date

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

COMMENTS

1/29/90 ~~Alert~~ Told to remove deadbolt @ top of rear door which defeats purpose of panic hardware

2/15/90 Suren told to remove cover from panel 15 & remove clothes from closet

3/15/90 C of O issued MM

Signature of Applicant

Date



1045 sq
VACANT
SPACE

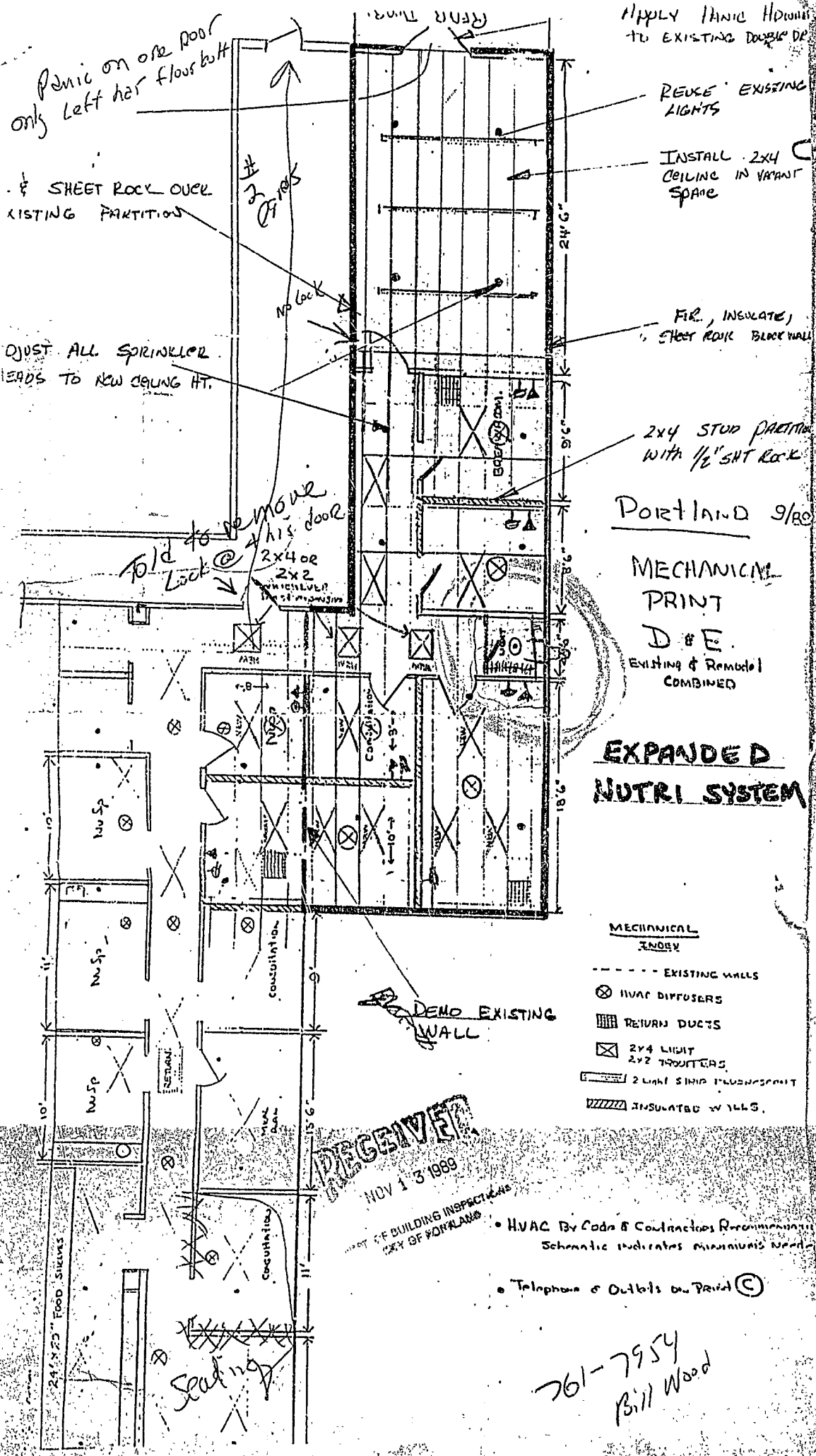
EXISTING
NUTRI SYSTEM

RECEIVED

NOV 13 1989

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

NUTRI SYSTEMS
SHAW'S WESTGATE
11-13-89



Apply PANIC HARDWARE TO EXISTING DOUBLE DR

REMOVE EXISTING LIGHTS

INSTALL 2x4 CEILING IN VARIANT SPACE

FIR, INSULATE, SHEET ROCK BLOCK WALL

2x4 STUD PARTITION WITH 1/2" SHEET ROCK

Portland 9/80

MECHANICAL PRINT

D & E. EXISTING & REMODEL COMBINED

EXPANDED NUTRI SYSTEM

- MECHANICAL ENERGY**
- EXISTING WALLS
 - ⊗ HVAC DIFFUSERS
 - ▢ RETURN DUCTS
 - ⊠ 2x4 LIGHT 2x2 TRUSTERS
 - ▬ 2 LIGHT SIMILAR FURNISHMENT
 - ▨ INSULATED WALLS

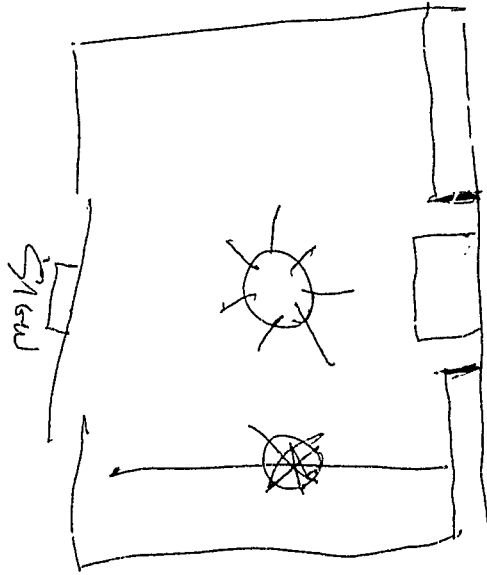
DEGENVET
NOV 13 1989

OFFICE OF BUILDING INSPECTION
CITY OF PORTLAND

- HVAC By Code & Contractors Recommendation
- Schematic indicates minimums needed
- Telephone & Outlets on Print ©

761-7954
Bill Wood

NO COMPUTERS
NO HELPERS
SIGN ON DOOR
MUST BE LISTED





CITY OF PORTLAND, MAINE

309 CONGRESS STREET
PORTLAND, MAINE 04101
(207)874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

1362 Congress Street

29 November 1989

Langford & Low
PO Box 248 Warren Avenue
Portland ME 04104

Dear Sir:

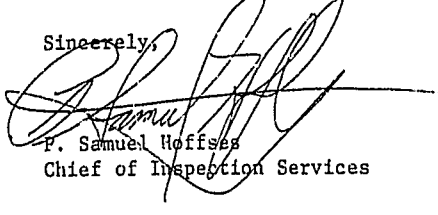
Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

1. Provide (2) two separate and remote means of egress in accordance with N.F.P.A. 101 Section 25-2.4, 2.5, 2.6, 2.7.
2. Illumination of means of egress in accordance with Section 25-2.8 sec 5-8.
3. Emergency lighting in accordance with Section 25-2.9 sec. 5-9.
4. Exit marking in accordance with Section 25-2.10 sec. 5-10.
5. Existing sprinkler system to be maintained in operations and to be modified as needed, in accordance with N.F.P.A. #13, to provide full protection in spaces to be renovated or sub-divided.
6. Portable fire extinguishers to be provided in accordance with N.F.P.A. #10.

No certificate of occupancy can be issued until all requirements of this letter.

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, PFD

Permit # 167 City of Portland **BUILDING PERMIT APPLICATION** Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Neutri-Systems (MAIL PERMIT) Phone # _____
 Address: 1362 Congress St. Portland (Westgate)
 LOCATION OF CONSTRUCTION 1362 Congress St.
 Contractor: New Eng. Spec. Adver. Sub.
 Address: 1109 Forest Ave. Port. 04103 Phone # 878-8844
 Est. Construction Cost: _____ Proposed Use: _____
 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 4 X 8 temp. sign as per plan
1/15/90 - 2/14/90

For Official Use Only	
Date <u>1/31/90</u>	Subdivision: _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Ownership: _____ Public _____ Private _____
Estimated Cost _____	
Zoning: <u>B-2</u>	
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) _____	
<u>OK W.D. 15-3-75-90</u>	

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

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

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

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

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

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

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.

Permit Received By L. L. Linn

Signature of Applicant [Signature] Date 1/31/90

Signature of CEO Tim Olmsted Date _____

Inspection Dates _____

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

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M.A. Mitchell

Permit # 175 City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Nuti-Systems (mail permit) Phone # 773-1845

Address: 1362 Congress St. Portland

LOCATION OF CONSTRUCTION 1362 Congress St.

Contractor: New Eng. Spec. Adv. Sub: _____

Address: 1109 Forest Ave. Port Phone # 878-8844

Est. Construction Cost: _____ Proposed 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 Temp. Sign February 20, 1990 to March 20, 1990

2nd of year

Foundation:

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

Floor:

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

Exterior Walls:

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

Interior Walls:

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

For Official Use Only

Date March 12, 1990 Subdivision: _____
Inside Fire Limits _____ Name: _____
Bldg Code _____ Lot: _____
Time Limit _____ Ownership: _____ Public _____
Estimated Cost _____ Private _____

Zoning: B-2 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) OK W.D. 2/20/90 3-23-90

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 9" x 9" 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.

Permit Received By Latini

Signature of Applicant [Signature] Date 3/12/90

Signature of CEO Tim Olmsted Date _____

Inspection Dates _____

White-Tax Assessor Yellow-GPCOG

White Tag - CEO

© Copyright GPCOG 1988
[Signature]

7300211
 Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Gumberland Electronics (PERMIT) Phone # 761-2725
 Address: 1364 Congress St. Portland
 LOCATION OF CONSTRUCTION 1364 Congress St.
 Contractor New Eng. Spec. Adver. Sub: _____
 Address: 1109 Forest Ave. Portland 04103 Phone # 878-8844
 Est. Construction Cost: _____ Proposed Use: _____
 _____ 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 4 X 8 temp. sign as per plan 1/5 to 2/5/90

For Official Use Only
 Date January 31, 1990 Subdivision _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Ownership: _____
 Time Limit _____ Estimated Cost _____
PERMIT ISSUED
 City of Portland

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: 1 _____ 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 _____
 6. 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 _____
 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 req as per spec 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.

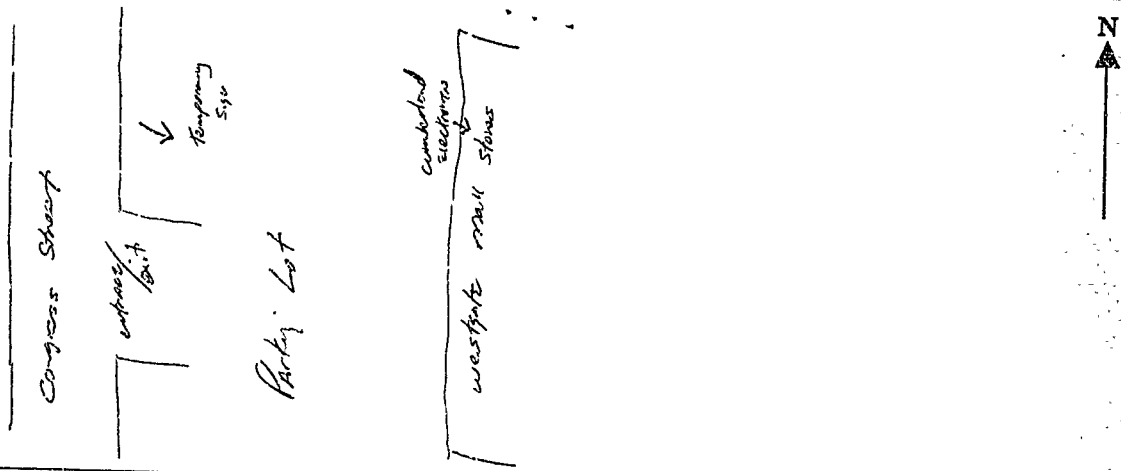
Permit Received By Latini
 Signature of Applicant [Signature] Date 1/31/90

Signature of CEO _____ Date _____

Inspection Dates _____

PLOT PLAN

- ① Sign is 10' from road
- ② Decent block views from exit
- ③ 1st time 1990



FEES (Breakdown From Front)

Base Fee \$ 10.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS Temp. sign as per plan.

Expired MM

Signature of Applicant [Signature]

Date 1/31/90

CERTIFICATE OF INSURANCE

This is to certify that

- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
 STATE FARM GENERAL INSURANCE COMPA

has in force for

Stuart Johnson Name of Pol
DBA Cumberland Electronics Address of Pol
Westgate Shopping Center

location of operations

1364 Congress St.
Portland, ME 04102

*Ted, (also talk to me)
 Talk to Jennifer
 Babcock on Cert of
 Insurance for Sign
 Posters. John*

the following coverages for the periods and limits indicated below.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	LIMITS OF LIABILITY
TBA	<input checked="" type="checkbox"/> Comprehensive General Liability	02/01/90 01/01/91	<input type="checkbox"/> Dual Limits for: <ul style="list-style-type: none"> BODILY INJURY Each Occurrence \$ _____ Aggregate \$ _____
	<input type="checkbox"/> Manufacturers' and Contractors' Liability		
	<input type="checkbox"/> Owners', Landlords' and Tenants' Liability		<input type="checkbox"/> PROPERTY DAMAGE <ul style="list-style-type: none"> Each Occurrence \$ _____ Aggregate \$ _____
The above insurance includes (applicable if indicated by <input checked="" type="checkbox"/>) <ul style="list-style-type: none"> <input type="checkbox"/> PRODUCTS-COMPLETED OPERATIONS <input type="checkbox"/> OWNERS' OR CONTRACTORS' PROTECTIVE LIABILITY <input type="checkbox"/> CONTRACTUAL LIABILITY <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> BROAD FORM COMPREHENSIVE GENERAL LIABILITY 			<input checked="" type="checkbox"/> Combined Single Limit for <ul style="list-style-type: none"> BODILY INJURY AND PROPERTY DAMAGE Each Occurrence \$ <u>1,000,000</u> Aggregate \$ <u>2,000,000</u>
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	CONTRACTUAL LIABILITY LIMITS (If different than above)
	<input type="checkbox"/>		BODILY INJURY
	<input type="checkbox"/>		PROPERTY DAMAGE
	<input type="checkbox"/>		Each Occurrence \$ _____
	<input type="checkbox"/>		Aggregate \$ _____
	EXCESS LIABILITY		<input type="checkbox"/> Combined Single Limit for: <ul style="list-style-type: none"> BODILY INJURY AND PROPERTY DAMAGE Each Occurrence \$ _____ Aggregate \$ _____
	<input type="checkbox"/> Umbrella		
	<input type="checkbox"/> Other		
	<input type="checkbox"/> Workers Compensation and Employers Liability		Part 1 STATUTORY Part 2 BODILY INJURY <ul style="list-style-type: none"> Each Accident \$ _____ Disease-Each Employee \$ _____ Disease-Policy Limit \$ _____

*Aggregate not applicable if Owners', Landlords' and Tenants' Liability Insurance excludes structural alterations, new construction or demolition.
 THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

RECEIVED
 MADE 7 1990

NAME AND ADDRESS OF PARTY TO WHOM CERTIFICATE IS ISSUED
 Portland City Hall
 ATTN: Mark Mitchell
 389 Congress St.
 Portland, ME 04101

Date 03/23/90
 Signature of Authorized Representative Dwight M. O'Neil

Title

Permit # 37721 City of Portland **BUILDING PERMIT APPLICATION** Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Cumberland Electronics (PERMIT) Phone # 761-2725
 Address: 1364 Congress St. Portland 04103
 LOCATION OF CONSTRUCTION # 1364 Congress St.
 Contractor: New Eng. Spec. Adver. Sub.
 Address: 1109 Forest Ave. Portland 04103 Phone # 878-8844
 Est. Construction Cost: _____ Proposed Use: _____
 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 4 X 8 temp. sign as per plan 1/5 to 2/5/90

For Official Use Only	
Date <u>January 31, 1990</u>	Subdivision: PERMIT ISSUED
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Ownership: <u>MAR 29 1990</u>
Estimated Cost _____	Private _____
Zoning: <u>B-1</u>	City Of Portland
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) <u>OK WAH 3-28-90</u>	

Foundation:

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

Floor:

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

Exterior Walls:

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

Interior Walls:

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

Ceiling:

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

Roof:

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

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.

Permit Received By Latini

Signature of Applicant Tim O'Connell Date 1/31/90
 Tim O'Connell

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

18 Mr. M. K. P. C.

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900242

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____

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

Owner: Cumberland Electronics (MAIL PERMIT)

Address: 1372 Congress St. Portland, Maine 04102

LOCATION OF CONSTRUCTION: 1372 Congress St.

Contractor: New Engl. Spec. Adv. Sub.

Address: 85 Weeks Rd. Gorham Maine 04038

Est. Construction Cost: _____ Proposed Use: warehouse retail

_____ 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 Temp sign 4/4/90 to 5/4/90

For Official Use Only

Date April 4, 1990 Subdivision: PERMIT ISSUED

Inside Fire Limit: _____ Name: _____

Wdg Code: _____ Ownership: Public

Tire Limit: _____ Estimated Cost: _____

City Of Portland

Zoning: R-2

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) OK LUN A - 4-3-90

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. Jolly 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 28' 0"

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 NO 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 _____ Squares Footage _____

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

Permit Received By L. J. IntSignature of Applicant Shawn Jennings Date 4/4/90

Signature of CEO _____ Date _____

Inspection Dates _____

0001 A 1179A

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

18

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Wm. Mitchell

PLOT PLAN

N
▲

FEES (Breakdown From Front)
Base Fee \$ 10.00 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

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

COMMENTS temporary sign from 4/4/90 to 5/4/90

^{4/11/90}
Sign is up and has been for over 6^{mo}

MCLW

Signature of Applicant

Agent For NE SA Shawn Jennings

Date

April 4, 1990

Chimberland Elec.
1872 Congress St.

← Temporary Sign
↓

- ① Sign is 8' from roadway
- ② Sign does not block views from entrances or exit
- ③ 2nd time 1990

Parking
lot

RECEIVED
APR 04 1990
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

Mail

Chimberland
Electric

900242

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$10.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Cumberland Electronics (MAIL PERMIT)
 Address: 1372 Congress St. Portland, Maine 04102
 LOCATION OF CONSTRUCTION 1372 Congress St.
 Contractor: New Engl. Spec. Adv. Sub.
 Address: 85 Weeks Rd. Gorham Maine 04038
 Est. Construction Cost: _____ Proposed Use: wholesale retail
 _____ 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 Temp sign 4/4/90 to 5/4/90

For Official Use Only		Subdivision	Name
Date	<u>April 4, 1990</u>		
Inside Fire Limits	_____		
Bldg Code	_____		
Time Limit	_____		
Estimated Cost	_____		
Zoning:	<u>B-2</u>		
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)	<u>ok w/d 4-5-90</u>		

Foundation:

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

Floor:

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

Exterior Walls:

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

Interior Walls:

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

Ceiling:

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

Roof:

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

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.

Permit Received By Latini

Signature of Applicant Shawn Jennings Date 4/4/90

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor

Yellow-GPCOG

White Tag -CEC

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M. Mitchell

Permit # 193 City of Portland BUILDING PERMIT APPLICATION Fee \$10. Zone _____ Map # _____ Lot# _____

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

Owner: Rod Lowell Phone # 778-3611

Address: Forest Ave - Pld

LOCATION OF CONSTRUCTION 1374 Congres..

Contractor: Lee Wilson & Sons Sub: _____

Address: BOX 1020 - Westbrook, ME 04092 Phone # _____

Est. Construction Cost: _____ Proposed Use: vacant lot

Past Use: vacant lot

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 removal of 500-gallon fuel tank

For Official Use Only	
Date <u>2/5/90</u>	Subdivision: _____
Inside Fire Limits _____	Name _____
Bldg Code _____	PERMIT ISSUED
Time Limit _____	Ownership: _____ Public _____ Private _____
Estimated Cost _____	FEB 6 1990
Zoning: <u>R-2</u>	City of Portland
Street Frontage Provided: _____	Side _____
Provided Setbacks: Front _____	
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 _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

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

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 Fixtures _____
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 CRASE

Signature of Applicant Donald Wilson Date 2/5/90

Signature of CEO _____ Date _____

Inspection Dates _____

White - Tax Assessor Yellow - GPCOG

White Tag - CEO © Copyright GPCOG 1988

PLOT PLAN

N
▲

FEES (Breakdown From Front)		Type	Inspection Record	Date
Base Fee \$	10.			/ /
Subdivision Fee \$				/ /
Site Plan Review Fee \$				/ /
Other Fees \$				/ /
(Explain)				/ /
Late Fee \$				/ /

COMMENTS

2/14/90 Tank appears to be removed mem

Signature of Applicant

Ronald Wilson

Date

2/6/90

BUILDING PERMIT REPORT

DATE: 2-6-90

ADDRESS: Congress St + Westland St B-2 Zone

REASON FOR PERMIT: Remove an underground tank -

product unknown

BUILDING OWNER: P.R.H. Abbott

CONTRACTOR: Les Wilson

PERMIT APPLICANT: Les Wilson

APPROVED: Kox DENIED: ---

CONDITION OF APPROVAL OR DENIAL:

① Tank removal work shall be in accordance with Appendix "J" of ~~D.E.P.~~ D.E.P. Chap't 691 Regulations.

② No cutting to be done on site. All cutting to be done at an approved tank disposal site.

**** WAIVER FROM THE REQUIREMENT THAT NOTICE OF ABANDONMENT BY REMOVAL OF AN UNDERGROUND OIL TANK BE FILED TEN DAYS PROPER TO REMOVAL ****

Due to exceptional circumstances the Department of Environmental Protection grants a waiver to the ten day filing period for abandonment by removal of the listed underground tanks, provided that the owner or operator meets the following conditions:

1. A written notice of removal is filed with the Department and local fire department within one day of receiving this waiver.
2. The Department is kept advised of removal plans and schedule so that a department representative can observe the removal of the tank(s) and the excavation from which the tank(s) was/were removed.

Tank(s) owned by:

Name Pratt Abbott Phone # 774-1611

Mailing Address 1374 Congress st Town Portland

Located at:

Name Pratt Abbott Phone # 774-1611

Address 1374 Congress st Town Portland

Reason for Waiver: Leaking underground storage tank discovered during construction

List Tanks below:

Registration #	Size	Location on Site (Describe or Diagram)
	500 gal ?	Parallel to side walk approx 15' away corner of Congress + Westland

Planned Date of Removal : 2/6/90

This waiver is granted on 2/6/90 by _____ (Date)

Sheryl Smith, a copy of which is (Department of Environmental Protection Representative)

presented to Les Wilson & Sons (Name of individual receiving the copy)

FBWAIVER 8/87

WHITE - ENFORCEMENT COPY GREEN - INVESTIGATORS COPY BLUE - TANK OWNERS COPY

Permit # City of Portland **BUILDING PERMIT APPLICATION** Fee \$10. Zone Map # Lot#

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

Owner: Rod Lowell Phone # 774-6611
 Address: Forest Ave - Ptld
 LOCATION OF CONSTRUCTION 1374 Congress
 Contractor: Les Wilson & Sons Sub.:
 Address: Box 1028 - Westbrook, ME 04092 Phone #
 Est. Construction Cost: Proposed Use: vacant lot
 Past Use: vacant lot
 # 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 removal of 500-gallon fuel tank

For Official Use ONLY

Date 2/6/90 Subdivision **PERMIT ISSUED**
 Inside Fire Limits: Name
 Bldg Code: Ownership: Public
 Time Limit: Private
 Estimated Cost: **City Of Portland**

Zoning: B-2
 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): WDA 2-6-90

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 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
3. Type Ceilings:
4. Insulation Type Size
5. Ceiling Height:

Roof:

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

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.

Permit Received By Louise Chase

Signature of Applicant Ronald Wilson Date 2/14/90

Signature of CEO Date

Inspection Dates

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

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WDA 2-6-90

PERMIT # 002117 CITY OF Portland BUILDING-PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Pratt Abbott, Inc. 797-8574

Address: P.O. Box 1120 Portland, Maine 04104

LOCATION OF CONSTRUCTION Westgate Shopping Ctr. 1376 Congress St.

CONTRACTOR: Wilson SUBCONTRACTORS: _____

ADDRESS: Warren Avenue Westbrook, Maine

Est. Construction Cost: \$10.00 Type of Use: Cleaning/Laundry

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartm. at _____

Conversion: Explain To remove 1 2000 gal. #2 fuel tank

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

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

Floor:

1. Sills Size: _____ Sill's 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. Corfler 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 _____

0801 .01 vml

White-Tax Assesor

Yellow-GPCOG

White Tag - CEO

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For Official Use Only

Date: <u>May 16, 1989</u>	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$10.00</u>	

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size MAY 24 1989
5. Ceiling Height: _____

Roof:

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

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes No

Plumbing:

1. Approval of soil test if required 00.0 Yes No
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

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

Zoning:

District _____ Street Frontage Req. _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes No Date: _____

Planning Board Approval: Yes No Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception _____

Other (Explain) _____

Date Approved: _____

Permit Received By Latini

Signature of Applicant [Signature] Date 5/16/89

Signature of CEO _____ Date _____

Inspection Dates _____

1127 WOS TR-1100

PLOT PLAN

N



FEES (Breakdown From Front)
 Base Fee \$ 10.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS

① 1/23/80 MCM Tank in Zone for MANAGER - MCM

Signature of Applicant

Robert J. Lujan Jr.

Date

May 16, 1989

Maine Department of Environmental Protection
 Bureau of Oil & Hazardous Materials Control
 State House Station #17
 Augusta, Maine 04333
 Telephone: 207-289-2651
 Attn: Tank Removal Notice

7/88

NOTICE OF INTENT
 TO ABANDON (REMOVE) AN
 UNDERGROUND OIL STORAGE FACILITY

PLEASE TYPE OR PRINT IN INK:

Name of Facility Owner: Pratt-Abbott Inc
 Mailing Address: P.O. Box 1160 Telephone No.: 7974544
 City: Portland, MAINE State: _____ Zip Code: 04102
 Contact Person (name, address & telephone no.): Pat Lowell
 Name of Facility: Pratt-Abbott Registration No.: 8730
 Facility Location: 1994 Congress St Portland, ME

1. Identify the tanks at this location which are to be removed:

Tank Number	Age of Tank (Years)	Tank Size (Gallons)	Type of Product Most Recently Stored
A. 1	13	2000	Fuel Oil
B.			
C.			
D.			

2. Directions to Facility (be specific):

Southgate Shopping Center
Congress St. Portland, ME

3. Is tank(s) used for the storage of Class I liquids (e.g. gasoline, jet fuel)? Yes ___ No (IF YES, REMOVAL OF THE TANK MUST BE UNDER THE DIRECTION OF A CERTIFIED TANK INSTALLER OR PROFESSIONAL FIREFIGHTER.)

4. Name and telephone number of contractor who will do the tank removal: Les Wilson 1 Son 8544583

Certified Tank Installer Certification Number & Name (if applicable):
N/A

Professional Firefighter Yes ___ No ___ (Affiliation: _____)

5. Expected date of removal: JUNE 1, 1989

I hereby provide Notice that I intend to properly abandon the underground oil storage facility as described above.

Date: 5/8/89

Pat Lowell Representative
 Signature of Tank Owner or Operator

Pat Lowell Representative
 Printed Name and Title

THIS FORM MUST BE FILED WITH THE DEPARTMENT AND LOCAL FIRE DEPARTMENT 10 DAYS PRIOR TO REMOVAL

Mail original and yellow copy to DEF; pink copy to fire dept.; retain gold copy