

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

Processing Form

City of Portland Barron Center - 774-2623 - Anthony Forgione March 20, 1990

Applicant Brighton Date
 1145 Brighton Ave., Portland, ME 04102 1145 Brighton Avenue

Mailing Address Nursing Facility Address of Proposed Site
 269-B-41

Proposed Use of Site 23,000 S.F. / 27,000.00 S.F. Site Identifier(s) from Assessors Maps
 R-5

Acres of Site / Ground Floor Coverage Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors 1 fl. each

Board of Appeals Action Required: () Yes () No Total Floor Area 23,000.00 S.F.

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

FIRE DEPARTMENT REVIEW

(Date Received) _____

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

Site Plan Review

REASONS: _____

(Attach Separate Sheet if Necessary)

4-12-90

William C. ...

SIGNATURE - REVIEWING STAFF / DATE

FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant City of Portland Barron Center - 174-2623 - Anthony Perricone Date March 20, 1990
1145 Brighton Ave., Portland, ME 04102
 Mailing Address XXXXXXXXXX
Nursing Facility Address of Proposed Site 145 Brighton Avenue
 Proposed Use of Site 269-11-41
122,000 S.F. / 23,000.00 S.F. Site Identifier(s) from Assessors Maps
 Acreage of Site / Ground Floor Coverage R-5
 Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors 1 fl. each
 Board of Appeals Action Required: () Yes () No Total Floor Area 23,000.00 S.F.
 Planning Board Action Required: () Yes () No

Other Comments _____
 Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW

(Date Received) _____

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

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

CONDITIONS SPECIFIED BELOW
 REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

[Signature] 10/25/90
 SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

City of Portland Barron Center - 774-2623 - Anthony Forcione
 Applicant: 1145 Brighton Ave., Portland, ME 04102 1145 Brighton Avenue Date: March 20, 1990
 Mailing Address: Nursing Facility Address of Proposed Site: 269-B-41
 Proposed Use of Site: 123,900 S.F. / 23,000.00 S.F. Site Identifier(s) from Assessors Maps: R-5
 Acreage of Site / Ground Floor Coverage: _____ Zoning of Proposed Site: _____

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors 1 fl. each
 Board of Appeals Action Required: () Yes () No Total Floor Area 23,000.00 S.F.
 Planning Board Action Required: () Yes () No

Other Comments: _____
 Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) _____

| | TRAFFIC CIRCULATION | ACCESS | CURB CUTS | ROAD WIDTH | PARKING | SIGNALIZATION | TURNING MOVEMENTS | LIGHTING | CONFLICT WITH CITY CONSTRUCTION PROJECT | DRAINAGE | SOIL TYPES | SEWERS | CURBING | SIDEWALKS | OTHER |
|------------------------|---------------------|--------|-----------|------------|---------|---------------|-------------------|----------|---|----------|------------|--------|---------|-----------|-------|
| APPROVED | ✓ | | | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | | | ✓ | ✓ | |
| APPROVED CONDITIONALLY | | ✓ | | | | | | | | | | ✓ | | | ✓ |
| DISAPPROVED | | | | | | | | | | | | | | | |

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: Access for construction expected to be off Hula Ave,
any damage to city r/w to be repaired at contractors
expenses. Prior to sewer work ^{and storm sewer} contact paid roadoff
to coordinate connections.

(Attach Separate Sheet if Necessary)


Stephen K. Harris 2-20-91
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

Ballon Center
- Brighton Ave

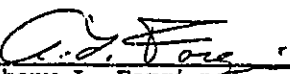
CITY OF PORTLAND, MAINE
MEMORANDUM

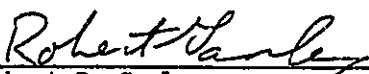
Date: 10/23/90

To: Joseph Gray, Dir. Planning & Urban Dev.
From: Tony Forgiore, Hospital Administration 
Subj: BC II Site Plan Approval

On May 8, 1990, the Planning Board approved the BC II site plan. In lieu of a performance guarantee covering the site improvements, a letter from the City Manager was requested. The letter is required before a building permit will be issued. Please consider this that letter.

This is to certify that funding for the site improvements for the approved site plan has been authorized and approved.


Anthony L. Forgiore


Robert B. Ganley
City Manager

Pc: Anita LaChance, Asst. City Mgr.
John Zocchi, Architect
✓ Sam Hoffses, Chief Building Inspections
Bob O'Bradovich, Dir. Maintenance
File - BC II

Ms. Davis
C-172
\$

CITY OF PORTLAND, MAINE
MEMORANDUM

TO: Bill Giroux, Inspections

DATE: 10/17/90

FROM: Mark Green, Assistant City Manager

SUBJECT: Waiver of Permit Fees for Barron Center II

Please waive all City permit fees for Barron Center II. Bob O'Bradovich from the Barron Center will be contacting you. Thank you.

MG/pp

cc: Bob O'Bradovich, Barron Center



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 10/26/92, 19__
 Receipt and Permit number 2436

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 1041 Brighton Ave- (Pine Tree Shopping Ctr Parking Lot)
 OWNER'S NAME Ko/ Bank ADDRESS: _____

| | - A T M - | FEES |
|--|--------------------------|--------------|
| OUTLETS: | | |
| Receptacles <u>11</u> Switches <u>1</u> Plugmold _____ ft. TOTAL <u>11</u> | | <u>2.20</u> |
| FIXTURES: (number of) | | |
| Incandescent _____ Fluorescent <u>2</u> (not strip) TOTAL <u>2</u> | | <u>.40</u> |
| Strip Fluorescent _____ ft | | |
| SERVICES: | | |
| Overhead _____ Underground <u>X</u> temporary _____ TOTAL amperes <u>100</u> .. | | <u>15.00</u> |
| METERS: (number of) <u>1</u> | | <u>1.00</u> |
| MOTORS: (number of) | | |
| Fractional _____ | | |
| 1 HP or over _____ | | |
| RESIDENTIAL HEATING: | | |
| Oil or Gas (number of units) _____ | | |
| Electric (number of rooms) _____ | | |
| COMMERCIAL OR INDUSTRIAL HEATING: | | |
| Oil or Gas (by a main boiler) _____ | | |
| Oil or Gas (by separate units) _____ | | |
| Electric Under 20 kws _____ Over 20 kws _____ | | |
| APPLIANCES: (number of) | | |
| Ranges _____ | Water Heaters _____ | |
| Cook Tops _____ | Disposals _____ | |
| Wall Ovens _____ | Dishwashers _____ | |
| Dryers _____ | Compactors _____ | |
| Fans _____ | Others (denote) _____ | |
| TOTAL | | |
| MISCELLANEOUS: (number of) | | |
| Branch Panels _____ | | |
| Transformers _____ | | |
| Air Conditioners Central Unit _____ | | |
| Separate Units (windows) <u>1</u> | | <u>3.00</u> |
| Signs 20 sq. ft. and under _____ | | |
| Over 20 sq. ft. _____ | | |
| Swimming Pools Above Ground _____ | | |
| In Ground _____ | | |
| Fire/Burglar Alarms Residential _____ | | |
| Commercial _____ | | |
| Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ | | |
| over 30 amps _____ | | |
| Circus, Fairs, etc. _____ | | |
| Alterations to wires _____ | | |
| Repairs after fire _____ | | |
| Emergency Lights, battery _____ | | |
| Emergency Generators _____ | | |
| | INSTALLATION FEE DUE: | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT | DOUBLE FEE DUE | |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) | | |
| | TOTAL AMOUNT DUE: | <u>21.60</u> |

INSPECTION:
 Will be ready on _____, 19__; or Will Call X
CONTRACTOR'S NAME: Anthony Mancini Inc
ADDRESS: 179 Sheridan St- Portland
TEL: 774-5829
MASTER LICENSE NO.: #02436 **SIGNATURE OF CONTRACTOR:** _____
LIMITED LICENSE NO.: _____

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

980191

Permit # _____ City of _____ BUILDING PERMIT APPLICATION Fee \$25. Zone _____ M _____ Lot# _____
 Enclosed any part which applies to job Proper plans must accompany form

Owner Moropoly, Inc. Phone # 773-3333
 Address Box 357-Ptld, ME 04112
 LOCATION OF CONSTRUCTION 1041 Brighton Ave- Store #2
 Contractor _____ Sub (Q Club)
 Address _____ Phone # _____
 Est. Construction Cost \$750 Proposed Use billiards club
 Past Use hobby shop
 # of Existing Res Units _____ # of New Res Units _____
 Building Dimensions L _____ W _____ Total Sq Ft _____
 # Stories _____ # Bedrooms _____ Lot Size _____
 Is Proposed Use Seasonal _____ Condition _____ Conversion _____
 Explain Conversion Change of Use- from hobby shop to billiards

For Official Use Only
 Subdivisor Name MAR 17 1993
 Date 3/15/93
 Inside Fire Limits _____
 Pldg Code _____ Ownership: _____ Public _____ Private _____
 Time Limit _____
 Estimated Cost _____

Zoning: Street Frontage Provided _____ Back _____ 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) W.D. - 3-16-93

2/4 D 1 - with minor alterations CLUB Ceiling

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

Floor:
 1. Sills Size _____ Sills must be anchored.
 2. Girder Size _____ Size _____
 3. Lally Column Spacing _____ Spacing @ O.C. _____
 4. Joists Size _____ Size _____
 5. Bridging Type _____ Size _____
 6. Floor Heating 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 _____ Size _____
 7. Insulation Type _____ Size _____
 8. Heating Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Material _____
 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 _____

HISTORIC PRESERVATION
 Not in District nor Landmark.
 1. Ceiling Joists Size _____ Spacing _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings _____ Size _____
 4. Insulation Type _____
 5. Ceiling Height _____

Roof:
 1. Trusses or Rafter Size _____ Span _____ Action _____ Approved _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____ Date 3/15/93
 Signature _____

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

Permit Received By Louise E. Chase

Signature of Applicant _____ Date 3/15/93

Signature of CEO _____

Inspection Dates _____

White-Tax Assesor _____ Yellow-GPCOG _____ White Tag -CEO 4



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 27 1993
 Receipt and Permit number 5768

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 1041 Brighton Ave.

OWNER'S NAME: Monopoly ADDRESS: Dara St.

| | FEES |
|--|--------------|
| OUTLETS: | |
| Receptacles _____ Switches _____ Plugmola _____ ft. TOTAL <u>8</u> | <u>1.60</u> |
| FIXTURES: (number of) | |
| Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>2</u> | <u>.40</u> |
| Strip Fluorescent _____ ft. | |
| SERVICES: | |
| Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ .. | |
| METERS: (number of) _____ | |
| MOTORS: (number of) | |
| Fractional _____ | |
| 1 HP or over _____ | |
| RESIDENTIAL HEATING: | |
| Oil or Gas (number of units) _____ | |
| Electric (number of rooms) _____ | |
| COMMERCIAL OR INDUSTRIAL HEATING: | |
| Oil or Gas (by a main boiler) _____ | |
| Oil or Gas (by separate units) _____ | |
| Electric Under 20 kws _____ Over 20 kws _____ | |
| APPLIANCES: (number of) | |
| Ranges _____ Water Heaters <u>1</u> _____ | |
| Cook Tops _____ Disposals _____ | |
| Wall Ovens _____ Dishwashers _____ | |
| Dryers _____ Compactors _____ | |
| Fans _____ Others (denote) _____ | |
| TOTAL <u>1</u> | <u>2.00</u> |
| MISCELLANEOUS: (number of) | |
| Branch Panels <u>1</u> | <u>4.00</u> |
| Transformers _____ | |
| Air Conditioners Central Unit _____ | |
| Separate Units (windows) _____ | |
| Signs 20 sq. ft. and under _____ | |
| Over 20 sq. ft. _____ | |
| Swimming Pools Above Ground _____ | |
| In Ground _____ | |
| Fire/Burglar Alarms Residential _____ | |
| Commercial _____ | |
| Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ | |
| over 30 amps _____ | |
| Circus, Fairs, etc. _____ | |
| Alterations to wires _____ | |
| Repairs after fire _____ | |
| Emergency Lights, battery _____ | |
| Emergency Generators _____ | |
| INSTALLATION FEE DUE: | <u>8.00</u> |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: | |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) | |
| TOTAL AMOUNT DUE: MIN | <u>15.00</u> |

INSPECTION:

Will be ready on _____, 19__ ; or Will Call X

CONTRACTOR'S NAME: Everything Elec.

ADDRESS: 93 Atlantic St. Portland 04101

TEL: 774-3067

MASTER LICENSE NO.: _____ SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: 15768 *Michael Delli*

Applicant: *Allied Construction Co.* Date: *Nov. 10, 1987*
Address: *1041 Brighton Ave.* (formerly *Nicely's*)
Assessors No.: *Market*

CHECK LIST AGAINST ZONING ORDINANCE

Date -
Zone Location - *B-2 Business*
Interior or corner lot - *Interior*
Use - *Proposed Retail Building*
Sewage Disposal - *City*
Rear Yards - *20'* *10' required when abutting Residence Zone*
Side Yards - *10'*
Front Yards - *60'*
Projections -
Height - *One story*
Lot Area - *109,473*
Building Area - *24,150 sq. ft.*
Area per Family - *NA*
Width of Lot - *255'*
Lot Frontage - *240' on Brighton Ave.*
Off-street Parking - *113 Parking spaces* *101 required*
Loading Bays - *One bay required*
Site Plan - *Approved 11/5/87*
Shoreland Zoning - *NA*
Flood Plains - *NA*

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

| | | | | |
|---|---|--|---|---|
| Location: 1041 Brignton Ave Owner Address: | | Owner: <u>Soley</u> | Phone: <u>773-3333</u> | Permit No: 960191 |
| Contractor Name: <u>Charles Randall</u> Past Use: <u>Video Store</u> | | Lease/Buyer Name: <u>Tux Shop</u> Address: <u>146 Pettingill St</u> | Phone: <u>879-4980</u> Business Name: <u>879-0247</u> | PERMIT ISSUED Permit Issued: 2253 CITY OF PORTLAND |
| Proposed Use: <u>Retail</u> | | COST OF WORK: <u>\$5,000.00</u> | PERMIT FEE: <u>\$45.00</u> | |
| Proposed Project Description: <u>Change of Use - with interior renovation as per plans</u> | | FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: <u>M</u> Type: <u>2A</u> Signature: <u>[Signature]</u> | Zone: <u>CBL</u> Zoning Approval: <u>[Signature]</u> <u>3/20/96</u> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm |
| Permit Taken By: <u>Victoria A. Dover</u> | Date Applied For: <u>March 18, 1996</u> | | Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied | |

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

*Call Todd when ready
797-9976
879-4000*

PERMIT ISSUED WITH LETTER

CERTIFICATION

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

SIGNATURE OF APPLICANT: Todd Walker ADDRESS: 1 Halls Hill Road, Walmouth 04105 DATE: 3/18/96 PHONE: 797-9976

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEC DISTRICT: [Signature]
K Carroll

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS

Town or Municipality: Portland, ME

Street Subdivision Lot #: 1041 B. Hwy

PROPERTY OWNERS NAME

Last: Stacy First: Joe

Applicant Name: Timothy S. Stacy

Mailing Address of Owner/Applicant (if different): 10 Road St, Portland ME 04103

PORTLAND 4786 TOWN COPY

Date Rec'd: 1/25/93 \$ 120.00 FEE Public Fee Charged

Local Plumbing Inspector Signature: [Signature] License # 21124

Owner/Applicant Statement

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

Signature of Owner/Applicant: [Signature] Date: _____

Caution: Inspection Required

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

Local Plumbing Inspector Signature: [Signature] Date Approved: 5/12/93

PERMIT INFORMATION

This Application is for:

1 NEW PLUMBING
2 RELOCATED PLUMBING

Type Of Structure To Be Served:

1 SINGLE FAMILY DWELLING
2 MODULAR OR MOBILE HOME
3 MULTIPLE FAMILY DWELLING
4 OTHER - SPECIFY Br. Rm.

Plumbing To Be Installed By:

1 MASTER PLUMBER
2 OIL BURNER MAN
3 MFG'D. HOUSING DEALER/MECHANIC
4 PUBLIC UTILITY EMPLOYEE
5 PROPERTY OWNER

LICENSE # 0271601

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | Number | Column 2 Type of Fixture | Number | Column 1 Type of Fixture |
|--|--------|---|--------|------------------------------|
| HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. | | Hosebibb / Silcock | | Bathtub (and Shower) |
| | | Floor Drain | | Shower (Separate) |
| OR | | Urinal | | Sink |
| | | Drinking Fountain | | Wash Basin |
| HOOK-UP to an existing surface wastewater disposal system. | | Indirect Waste | | Water Closet (Toilet) |
| | | Water Treatment, Softener, Filter, etc. | | Clothes Washer |
| PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures. | | Grease/Oil Separator | | Dish Washer |
| | | Dental Cuspidor | | Garbage Disposal |
| Number of Hook-Ups & Relocations | | Bidet | | Laundry Tub |
| | | Other: _____ | | Water Heater |
| Hook-Up & Relocation Fee | | Fixtures (Subtotal) Column 2 | 0.11 | Fixtures (Subtotal) Column 1 |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Fixtures (Subtotal) Column 1: _____

Fixtures (Subtotal) Column 2: _____

Total Fixtures: _____

Fixtures Fee: _____

Hook-Up & Relocation Fee: _____

Permit Fee (Total): \$205

TOWN COPY

minimum fee

030357 930357

Permit # 030357 City of Portland BUILDING PERMIT APPLICATION Fee \$34.60 Zone _____ Map # _____ Lot# _____

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

Owner: Monopoly, Inc. Phone # 773-3333
 Address: Box 367- DTS Ptd, ME 04112
 LOCATION OF CONSTRUCTION 1041 Brighton Ave.
 Contractor: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: retail mail w sign Zoning: B-2
 Past Use: retail mall
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion erect sign - 16'x3'

For Official Use Only

Date 5/7/93 Subdivision _____
 Install Fire Limits _____ Name MAY 13 1993
 Bldg Code _____ Lot _____
 Time Limit _____ Ownership: _____ Public _____ Private _____
 Estimated Cost _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other: WDA - 7 5-7-93
HISTORIC PRESERVATION

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

Floors:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 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 Material: _____

Ceiling:
 1. Ceiling Joists Size: _____ Not in District nor Landmark.
 2. Ceiling Strapping Size _____ Spacing _____ Does not require review.
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____ Requires Review.
 5. Ceiling Height: _____
Roof:
 1. Truss or Rafter Size _____ Span _____ Approved with Conditions.
 2. Sheathing Type _____ Size _____ Denied.
 3. Roof Covering Type _____ Date: 5-7-93
Chimneys:
 Type _____ Number of Fire Places _____ Signature: P.L. Meyer
Heating:
 Type of Heat _____
Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____
Plumbing:
 1. Approval of soil test if required Yes _____ No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____
Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

Permit Received By Louise E. Chase
 Signature of Applicant _____ Date 5/7/93
 Signature of CEO Joseph Soley Date _____
 Inspection Dates _____

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

Applicant Allied Construction Co., Inc Date May 14, 1987
 Mailing Address 208 Fore St 772-2823 Address of Proposed Site 1041 Brighton Avenue
 Proposed Use of Site retail bldg Site Identifier(s) from Assessors Maps _____
 Acreage of Site 2.3 acres / Ground Floor Coverage 24,150 sq. ft. Zoning of Proposed Site B-2
 Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors 1
 Board of Appeals Action Required: () Yes () No Total Floor Area 24,150 sq. ft.
 Planning Board Action Required () Yes () No
 Other Comments: _____
 Date Dept. Review Due: _____

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

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

Explanation _____
 Use complies with Zoning Ordinance — Staff Review Below

| Zoning: SPACE & BULK, as applicable | DATE | ZONING LOCATION | INTERIOR OR CORNER LOT | 40 FT SETBACK AREA (SEC. 21) | USE | SEWAGE DISPOSAL | REAR YARDS | SIDE YARDS | FRONT YARDS | PROJECTIONS | HEIGHT | LOT AREA | BUILDING AREA | AREA P R FAMILY | WIDTH OF LOT | LOT FRONTAGE | OFF-STREET PARKING | LOADING BAYS | CONDITIONS SPECIFIED BELOW | REASONS SPECIFIED BELOW |
|-------------------------------------|------|-----------------|------------------------|------------------------------|-----|-----------------|------------|------------|-------------|-------------|--------|----------|---------------|-----------------|--------------|--------------|--------------------|--------------|----------------------------|-------------------------|
| COMPLIES | | | | | | | | | | | | | | | | | | | | |
| COMPLIES CONDITIONALLY | | | | | | | | | | | | | | | | | | | | |
| DOES NOT COMPLY | | | | | | | | | | | | | | | | | | | | |

REASONS: _____

[Signature]
 SIGNATURE OF REVIEWING STAFF/DATE 5/21/87

BUILDING DEPARTMENT—ORIGINAL

COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant Allied Construction Co., Inc.

Date May 14, 1987

Mailing Address 7th Floor St. 772-3888

Address of Proposed Site 1041 12th Portland Avenue

Proposed Use of Site retail store

Site Identifier(s) from Assessors Maps B-2

Acres of Site 2.2 acres / Ground Floor Coverage

Zoning of Proposed Site B-2

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

Proposed Number of Floors 1

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

Total Floor Area 24,156 sq. ft.

Planning Board Action Required () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW

(Date Received)

Major Development — Requires Planning Board Approval: Review Initiated

Minor Development — Staff Review Below

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

REASONS: _____

(Attach Separate Sheet if Necessary)

Maurice C. Meade 9/15/87

SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

★
P
M
C
A
I
C

CITY OF PORTLAND, MAINE
Department of Parks and Public Works

SUBDIVISION / SITE DEVELOPMENT

COST BREAKDOWN OF IMPROVEMENTS TO BE COVERED BY PERFORMANCE GUARANTEE

Name of Project 1041 Brighton Avenue DATE October 28, 1987
 Address / Location 1041 Brighton Avenue, Portland, ME
 Developer Allied Construction Co., Inc.
 Form of Performance Guarantee Performance Bond Letter of Credit
 Type of Development - Subdivision Site Plan (Major / Minor)

| ITEM | QUANTITY | UNIT COST | SUBTOTAL | COMPLETED |
|---|------------------|-----------|-----------|-----------|
| 1. STREET/SIDEWALK: | | | | |
| Road | | | | |
| Granite Curbing | 330 l.f. | | 8,100 | |
| Sidewalks | 400 l.f. | | 4,800 | |
| Esplanades | 400 l.f. | | 2,000 | |
| Monuments | | | | |
| Street Lighting | | | | |
| Other | Close Island Gap | | 1,000 | |
| 2. SANITARY SEWER: | | | | |
| Manholes | | | | |
| Piping | | | | |
| Connections | | | | |
| Other | | | | |
| 3. STORM DRAINAGE | | | | |
| Manholes | 2 each | | 1,000 | |
| Catch Basins connections | 3 each | | 1,500 | |
| Piping | 220 l.f. | | 4,400 | |
| Detention Basin | 1 ea. | | 5,000 | |
| Other | Street Repair | | 2,400 | |
| 4. SITE LIGHTING | | | | |
| 5. EROSION CONTROL | | | | |
| 6. RECREATION AND OPEN SPACE AMENITIES | | | | |
| 7. LANDSCAPING | | | | |
| | | | \$ 17,000 | |

MISCELLANEOUS

TOTAL AMOUNT OF PERFORMANCE GUARANTEE \$ 50,200
 YTD \$ 851.40

Approved [Signature]
 Approved [Signature]

7-11-10-1-1

040255

Permit # 040255 City of Portland BUILDING PERMIT APPLICATION Fee 25.00 Zone _____ Map # PERM 139 Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form + 50.00 Related Fee

Owner Monopoly INC. Joseph Soley Phone # 773-3333
Address: P.O. Box 367 DTS Ptd, ME 04112-0367
LOCATION OF CONSTRUCTION 1041 Brighton Ave
Contractor: self Sub _____
Address: _____ Phone # _____
Est. Construction Cost: 932.00 Proposed Use: Comm Retail w/int renc Zoning: _____
Pas Use: Comm Retail
of Existing Re. Units _____ # of New Res Units _____
Building Dimensions L _____ W _____ Total Sq Ft _____
Stories: _____ # Bedrooms _____ Lot Size _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion Make Interior Renovations as per plans

For Official Use Only
Date 5 April 1994 Subdivision _____
Inside Fire Limits _____
Blg Code _____ Owners: _____ Public _____
Time Limit _____ Private _____
Estimated Cost _____
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 WDA 21-7-94 (Explain)

274-D-001
Foundations:
1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____
Floors:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing _____ Size _____
4. Joists Size: _____ Spacing 16" O C
5. Bridging Type: _____ Size _____
6. Floor Sheathing Type _____ Size _____
7. Other Material: _____

Ceiling: HISTORIC PRESERVATION
1. Ceiling Joists Size _____ Spacing _____ not in district nor landmark
2. Ceiling Strapping Size _____ Spacing _____ Does not require review
3. Type Ceilings: _____ Size _____ Requires review
4. Insulation Type _____
5. Ceiling Height _____
Roof:
1. Truss or Rafter Size _____ Span Action Approved
2. Sheathing Type _____ Size _____ Approved with conditions
3. Roof Covering Type: _____
Chimneys:
Type _____ Number of Fire Places _____ Date 4/19/94
Signature _____
Heating:
Type of heat _____
Electrical:
Service Entrance Size _____ Smoke Detector Required Yes _____ No _____
Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No of Tubs or Showers else Group M
3. No of Flushes _____
No of Lavatories _____ Type 3-B
5. No of Other Fixtures _____
Swimming Pools:
1. Type _____
2. Pool Size _____ Square Footage _____
3. Must conform to National Electrical Code and State Law

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 _____
10. Masonry Materials _____
11. Metal Materials _____
Interior Walls:
1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire W-11 required _____
6. Other Materials _____

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

Permit Received By Mary G. Ask
Signature of Applicant MONOPOLY INC Date 5 Apr 94
Signature of Applicant Joseph Soley CEO District _____

White - Tax Assessor

Ivory Tag - CEO

CONTINUED TO REVERSE SIDE

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

| | | | | | | |
|--|--|---|--|---|--|--|
| Location of Construction: 1041 Brighton Ave | | Owner Monopoly, Inc. | | Phone. | | Permit No. 060950 PERMIT ISSUED APR 6 1996 CITY OF PORTLAND |
| Owner Address: | | Leasee/Buyer's Name Head Hunter II School of Hair Design | | Business Name | | |
| Contractor Name: Augie Favazza | | Address | | Phone 772-2591 | | Permit Issued: APR 6 1996 CITY OF PORTLAND |
| Past Use: Video Rental/Retail | | Proposed Use Hair Dressing School | | COST OF WORK: \$ 130,000 21,000. | | |
| | | | | PERMIT FEE: \$ 130.00 | | Zone. CBL: B-2 Zoning Approval: <i>needs sep. sign permit</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm C |
| | | | | FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied | | |
| Proposed Project Description Change Use w/Int Renovations | | Signature | | INSPECTION: Use Group: <i>B Type 1B</i> Signature: <i>[Signature]</i> | | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____ |
| | | | | Signature: _____ Date: _____ | | |
| Permit Taken By: Mary Gresik | | Date Applied For 10 April 1996 | | | | |

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules
2. Building permits do not include plumbing, septic or electrical work
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work

X Call Augie for P/U at 772-2591 or 772-5133

PERMIT ISSUED WITH LETTER

CERTIFICATION

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

Augie Favazza
SIGNATURE OF APPLICANT: *Augie Favazza* ADDRESS: *26 Forest Ave Portland Me* DATE: *10 August 1996* PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____

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

CEO C

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical code and the following specification.

Date 11 April 1996

LOCATION: 1041 Brighton Ave


Permit # 4371

OWNER Monopoly, Inc./Head Hunter II ADDRESS _____

| OUTLETS | | | | TOTAL EACH FEE | | |
|---|-------------------------|-------------|-----------------|-------------------|-------|-------|
| FIXTURES | Receptacles (number of) | Switches | Smoke Detector | 150 | 20 | 30.00 |
| | incandescent | fluorescent | | 20 | 20 | 4.00 |
| | fluorescent strip | | | | 20 | |
| SERVICES | Overhead | | TTL AMPSTO | 800 | 15.00 | |
| | Underground | | | 800 | 15.00 | |
| TEMPORARY SERV | Overhead | | AMPS OVER | 800 | 25.00 | |
| | Underground | | | 800 | 25.00 | |
| METERS | (number of) | | | | 1.00 | |
| MOTORS | (number of) | | | | 2.00 | |
| RESID/COM | Electric units | | | | 1.00 | |
| HEATING | oil/gas units | | | | 5.00 | |
| APPLIANCES | Ranges | Cook tops | Wall Ovens | | 2.00 | |
| | Water heaters | Fans | Dryers | 1 | 2.00 | 10.00 |
| | Dishwasher | Compactors | Others (denote) | | 2.00 | |
| MISC. (number of) | Air Cond/win | | | | 3.00 | |
| | Air Cond/cent | | | | 10.00 | |
| | Signs | | | | 5.00 | |
| | Pools | | | | 10.00 | |
| | Alarms/res | | | | 5.00 | |
| | Alarms/com | | | | 15.00 | |
| | Heavy Duty | | | | 2.00 | |
| | Outlets | | | | 25.00 | |
| | Circus/Camv | | | | 5.00 | |
| | Alterations | | | | 15.00 | |
| | Fire Repairs | | | | 1.00 | |
| | E Lights | | | | 20.00 | |
| | E Generators | | | | 4.00 | 4.00 |
| | Panels | | | | 5.00 | |
| | TRANSFORMER | 0-25 Kva | | | 8.00 | |
| | 25-200 Kva | | | 10.00 | | |
| | Over 200 Kva | | | | | |
| | | | | TOTAL AMOUNT DUE | | |
| MINIMUM FEE/COMMERCIAL 35.00 | | | | MINIMUM FEE 25.00 | | |
| INSPECTION: Will be ready _____ or will call XXXX | | | | 48.00 | | |

CONTRACTORS NAME Pace Electric Russ Dionne
 ADDRESS 152 Lewiston Rd Gray, ME
 TELEPHONE 657-3621
 MASTER LICENSE No. 4371
 LIMITED LICENSE No. _____
 SIGNATURE OF CONTRACTOR [Signature]

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

| | | | | | |
|--|-------------------------------------|---|---|---|-----------------|
| Location of Construction 1041 Brighton Ave | | Owner Joe Soley | Phone | Permit No. 960447 | |
| Owner Address: - lessee 1041 Brighton Ave - Pt 1 ME | | Leasee/Renter's Name The Tux Shop | Phone: 879-4000 | Business Name | |
| Contractor Name: 04102 | | Address | | Phone | |
| Past Use: | Proposed Use: retail w temp sign | COST OF WORK: \$ | PERMIT FEE: \$ 10 | PERMIT ISSUED MAY 23 1996 CITY OF PORTLAND Zone: CBL: B-2 Zoning Approval Special Zone <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan | |
| | | FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group Type | | |
| | | Signature | Signature | | |
| Proposed Project Description erect temporary sign 5/17/96 to 6/17/96 | | PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) | | <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review | |
| | | Action | Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/> | | |
| Permit Taken By L Chase | | Date Applied For 5/17/96 | | Signature | |
| 1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules 2. Building permits do not include plumbing, septic or electrical work 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work | | | | | |
| PERMIT ISSUED WITH LETTER | | | | | |
| CERTIFICATION | | | | | |
| I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. | | | | | |
| SIGNATURE OF APPLICANT  | | ADDRESS 1041 Brighton Ave | DATE 5/17 | PHONE 879-4000 | Date 5/20/96 |
| RESPONSIBLE PERSON IN CHARGE OF WORK TITLE Manager | | | PHONE D. Andrews | | |
| White-Permit Desk Green-Assessor's Canary-D.P.W Pink-Public File Ivory Card-Inspector | | | | | |
| | | | | GEO DISTRICT 4 K. Carroll | |

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

| | | | | | |
|---|--|---|--|---|---|
| Location of Construction: 1041 Brighton Ave. | | Owner Monopoly Inc. | | Phone: | Permit No: 960443 |
| Owner Address: | | Leasee/Buyer's Name: Head Hunter School of Hair Design | | Phone: 828-3700 | Business Use: |
| Contractor Name: Burr Signs | | Address: 10 Buttonwood Drive, S. Portland | | Phone: 799-1183 | <div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED MAY 23 1996 CITY OF PORTLAND </div> |
| Past Use: Retail | | Proposed Use: Retail-Tech School with sign | | COST OF WORK: \$ | |
| Proposed Project Description: Erect 3 - 2' x 6' signs wall mount | | Signature: | | FIRF DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: <i>211</i> Type: <i>211</i> |
| Permit Taken By: Vicki Dover | | Date Applied For: 5/18/96 | | Signature: | DATE: |

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules
- Building permits do not include plumbing, septic or electrical work
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work

U. L. AH 708009
AH 708010

Mail permit to Burr Signs

CERTIFICATION

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

Craig Currier 5/17/96
SIGNATURE OF APPLICANT: Craig Currier ADDRESS: DATE: PHONE:
Burr Signs
RESPONSIBLE PERSON IN CHARGE OF WORK TITLE: PHONE:

White-Perm't Desk Green-Assessor's Canary-DPW Pink-Public File Ivory Card-Inspector

Zone: CBL:
B-21

Zoning Approval
02-5/21/96
Special Zone or Review
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan major minor mm

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denial

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

Action:
 Approved
 Approved with Conditions
 Denied

Date: *5/20/96*

D. Anderson
CEO DISTRICT **4**
K. Carroll

930191

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Prop. plans must accompany form.

Owner: MONOPOLI, INC. Phone # 773-3337
 Address: Box 367-Ptld. ME 04112
 LOCATION OF CONSTRUCTION 1041 Brighton Ave- Store #2
 Contractor: _____ Sub: (Q Club)
 Address: _____ Phone # _____
 Est. Construction Cost: \$750 Proposed Use: billiards club
 Past Use: hobby shop
 # 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 - Change of Use - from hobby shop to billiards

For Official Use Only

Date: 3/15/93 Submitter: _____
 Issued Fire Order: _____ Name: MAR 17 1993
 Bldg Code: _____ Owner: _____ Public _____
 Time Limit: _____ Estimated Cost: _____

Zoning:
 Street Frontage Provided: _____
 Provided Setback: Front _____ Back _____ Side _____
Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Etc Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other: (explain) W.P.A. 3-16-93

Foundation: 274 0 1 - with #4 cor alterations
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor: _____
 1. Sills Size: _____ Substrate to 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: _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law

PERMIT ISSUED WITH LETTER
 Signature of CEO: White E. Chase Date: 3/15/93
 Signature of GPC: _____ Date: _____
 Inspection Dates: _____

White Tax Assessor Yellow-GPCOG White Tag CEO
 Copyright GPCOG 1988

PLOT PLAN



| FEES (Breakdown From Front) | | Type | Inspection Record | Date |
|-----------------------------|------------|------|-------------------|------|
| Base Fee \$ | <u>25-</u> | | | / / |
| Subdivision Fee \$ | | | | / / |
| Site Plan Review Fee \$ | | | | / / |
| Other Fees \$ | | | | / / |
| (Explain) | | | | / / |
| Late Fee \$ | | | | / / |

COMMENTS

1

Signature of Applicant MONOPOLY, Inc by: [Signature] Date 3/15/97

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 16, 1993

RE: 1041 Brighton Avenue - Store #2 (Q-Club)

Monopoly Inc.
Bo 367
Portland, ME 04112

Dear Sir:

Your application for change of use from hobby shop to billiards with minor alterations has been reviewed and a permit is herewith issued subject to the following requirements:

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

1. Panic hardware and fire exit hardware required on all exit doors. Section 8-2.2.2.3 as per NFPA 101
2. Plans drawn to scale showing arrangement of furnishings and equipment shall be submitted to the Portland Fire Department. Section 8-2.5.10.1
3. Means of egress shall be illuminated. Section 8-2.8 NFPA 101
4. Emergency lighting shall be provided. Section 8-2.9 NFPA 101
5. Means of egress shall have signs with back-up. Section 8-2.10 NFPA 101

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

Sincerely,



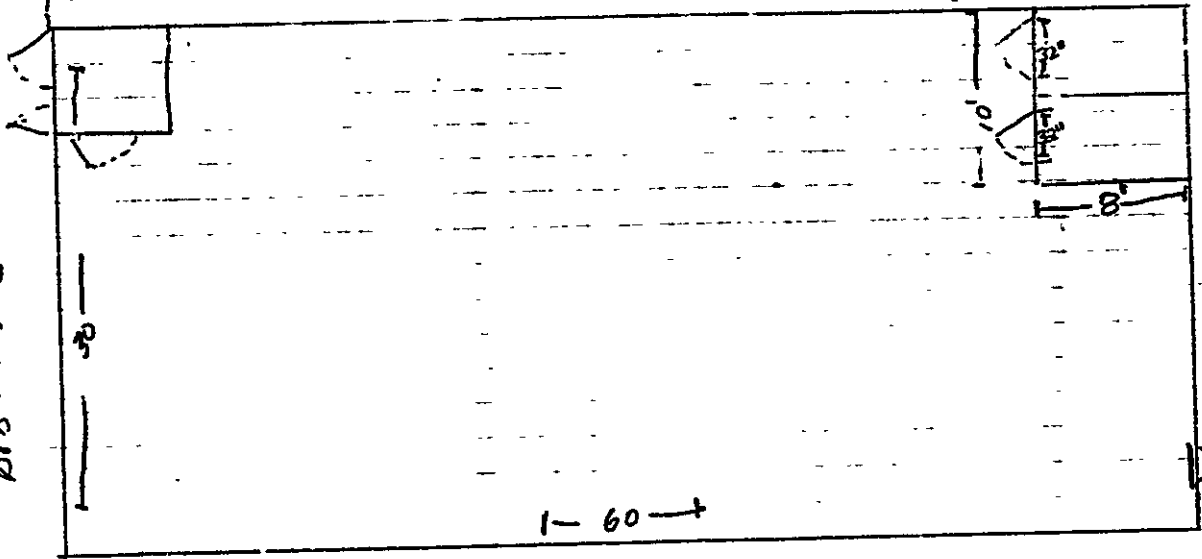
P. Samuel Hoffses
Chief of Inspection Services

/el

cc: LT G. MacDougall, Fire Prevention Bureau

Brighton Ave

Area
Change



Tables
Extending

BUILDING PERMITS
ST. KEVIN'S

PROPOSE (2)
HANDICAPPED
ACCESSIBLE
BATHROOMS

LOCATION
1041 BRIGHTON AVE.
Q CLUB BILLIARD

MONRODY INC
P.O. Box 367
PORTLAND ME 04112
J.L. SICILY - PRES.
773-3333

COST \$300 LABOR + MAT.
NOT incl. plumb.
incl. plumb. \$1800

1041 BRIGHAM 2
AVENUE
DRIVENWAY

MONOPOLY, INC
PO 367 DT
FORT LAMAR, MO 64240
(202) 932-3235

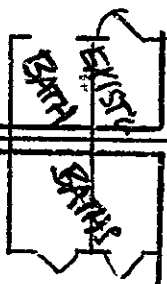
20'

REAR DOOR

30'

109

EXISTING PIZZA CHEF
GOURMET



20'
EXIST'G
GLASS

30'
EXIST'G
GLASS

20'
STORE #1

30'
STORE #2

EXISTING RETAIL
FULLY FINISHED
VAT FLOORING
TILE CEILING
HEAT & LITES COMPLETE

4 CHANGE OF
USE FROM:
HOBBY SHOPPE
TO Q CLUBS
B+W LIC
FILED 2/15/93

60'
EXISTING CAKE STORE

ENTRANCE
SPR #3



Q CLUBS 1041 BRIGHAM AV

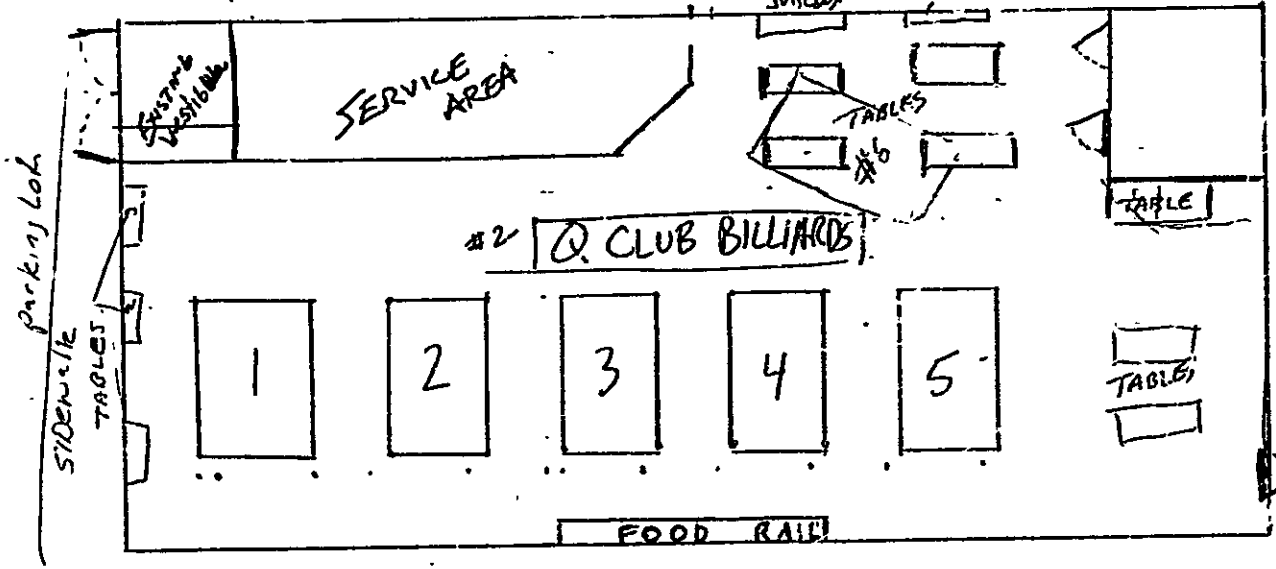
PARKING

1/8"=1' 3/5/93

PARKING

← BRIGHTON AVE SIDE #1 CHEF PIZZA

60' X 30'



1041 BRIGHTON AVE
 #2
 Q CLUB BILLIARDS
 40
 MONOPOLY IN
 PO BOX 367 PORTLAND
 OREGON
 J.L. SALEY PRES.
 (503) 773-3333
 REAR DOOR

#3 CAVES EXTRAORDINARY

BEERS - WINE App.
+ ENTERTAIN

% JULIO + SALES

POOL TABLE #6 IS OPTIONAL
TABLES CAN EASILY BE REDISTRIBUTED

930357

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$34.60 Zone _____ Map # _____ Lot# _____

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

Owner: MONODOLY, INC. Phone # 773-3333
 Address: Box 367- DTS Ptld, ME 04112
 LOCATION OF CONSTRUCTION 1041 Brighton Ave.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: retail mall + sign
 Past Use: retail mall
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq Ft _____
 # Stories: _____ # Bedrooms _____ Lot Size _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: erect sign - 16'x3'

For Official Use Only

Date: 5/7/93 Subdivision: _____
 Inside Fire Limits: _____ Name: NOV 13 1993
 Bldg Code: _____ Ownership: _____
 Time Limit: _____
 Estimated Cost: _____

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) 5-11-93

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

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

Exterior Walls:
 1. Studing 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. Studing 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 _____
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 3. Roof Covering Type _____
 Date: 5-7-93

Chimneys:
 Type: _____ Number of Fire Places: _____
 Signature: R. C. Barry

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: _____
 3. Must comply with _____ Electrical Code and _____

Permit # 930357 Issued by F. Chase
 Signature: [Signature] Date: 5/7/93

Signature: [Signature] Title: CEO
 Inspection Dates: _____

White-Tax Assesor _____ Yellow-GPCOG _____ White Tag-CEO _____
 Copyright GPCOG 1988

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

5/11/93 White-Tax Assesor Yellow-GPCOG White Tag-CEO [Signature] Copyright GPCOG 1988

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 39,60
Subdivision Fee \$ _____
State Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

| Type | Inspection Record | Date |
|-------|-------------------|----------------|
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |

COMMENTS

Signature of Applicant *[Signature]*

Date 5/7/93

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

May 13, 1993

RE: 1041 Brighton Ave.

Monopoly, Inc.
Box 367 DTS
Portland, Me 04112

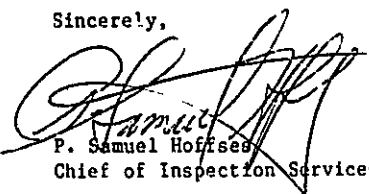
Dear Sir:

Your application to erect lighted sign 16" X 3" has been reviewed and a permit is herewith issued subject to the following requirement:

This permit is being issued with the understanding that the proposed sign bears a UL Label.

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

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

/el

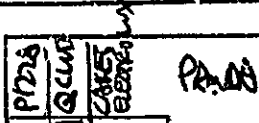
5/7/93



TAFT ROAD

BURGER KING

RETAIL MALL (PRIVATE)



FIRST PLAN

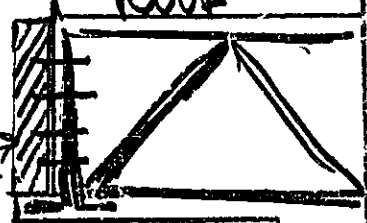
1041 BRIGHAM

BRIGHAM AVENUE

MONOPOLY, INC
PO 367 DTJ
PTD ME 04112
(201) 773-3333

J.L. SOLEY
PRES & OWNER
ROOF

FACE
EXISTING -
BAILEY SIGN

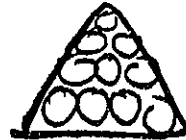


CROSS SECTION 1
SHOWING 6"
SIGN LEDGE
REINFORCED W/ 6x6
ANGLE STEEL X 3/8"
ATTACHED TO 60" STEEL JOIST

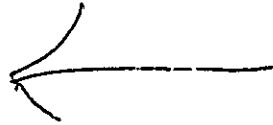
FACE



CLUB BILLIARDS



16'0± X 38" HIGH SIGN EXISTING (201) 773-2843
BY BAILEY SIGN & TRUSS OR CAL WESTBROOK 04092
EXISTING SIGN - NEW FACE
BOLTED TRUSS W 9" X 3/4" DOUB X 9 BOLT



May 6, 1983

Hobby Center
1041 Brighton Ave.
Portland, ME

Dear Joe,

Bailey Sign manufactured the signs at your location in 1988 for the Liberty Group.

Bailey Sign is a U.L. manufacturer and has been since June of 1989 which is when the City of Portland implemented this requirement.

If your sign doesn't have a U.L. label then it would have been prior to 1989.

If I can be of any further assistance, please do not hesitate to call.

Sincerely,

A handwritten signature in cursive script that reads "Ralph Hutchinsch". The signature is written in dark ink and is positioned above the typed name and title.

Ralph Hutchinsch
Vice President

8758

City of Portland BUILDING PERMIT APPLICATION Fee 35 Zone Map Lot#

Call Mgmt c/ooulos Co. Phone # 871-1293

City Center Field OF CONSTRUCTION 1041 Brighton Ave. (Pizza Chef Gourme Steve Lefrueque Sub: 04084

720A Cape Rd Standish, ME Phone # 827-642-2167

Cost: \$3,000 00 Proposed Use: Interior renovations Zoning: RETAIL

Res. Units # of New Res. Units

Dimensions L W Total Sq. Ft.

Bedrooms Lot Size

Seasonal Condominium Conversion Interior renovations

Type of Soil

Backs - Front Rear Side(s)

Footings Size

Foundation Size

Other

Call E. Connell for pick-up

Sills Size: 292-2060 Sills must be anchored.

Order Size

Column Spacing

Joists Size Spacing 16" O.C

Trussing Type Size

Roof Sheathing Type Size

Roof Sheathing Material

Roof Sheathing

Roof Sheathing

Roof Sheathing

Roof Sheathing

Roof Sheathing

For Official Use Only Date 6/5/92 Subdivision JUN - 9 1992 Name CITY OF PORTLAND

Street Frontage Provided: Provided Setbacks: Front Back Side Side Review Required: Zoning Board Approval: Yes No Date: Planning Board Approval: Yes No Date: Conditional Use Variance Site Plan Subdivision Shoreland Zoning Yes No Floodplain Yes No Special Exemption Other (Explain)

Ceiling: HISTORIC PRESERVATION

- 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 Action: 2. Sheathing Type Size 3. Roof Covering Type

Chimneys:

Heating:

Electrical:

Plumbing:

Swimming Pools:

Permit Received By J. FORG

Signature of Applicant Elinor Connell Date 6/5/92

CEO's District

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN

N



Done w/out Insp.

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

COMMENTS

CERTIFICATION

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

Eleanor Council *670 White's Bridge Rd Standish, ME* *842-2060*
 SIGNATURE OF APPLICANT ADDRESS PHONE NO

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO

FRONT

20'

Door
3'6"

CONTRACTOR
STEVE LABRECQUE

COUNTER 17'

7'

3'6"

09'

10'

1041 BRIGATON AVE
OWNER - RELOU MONT
APPLICANT:
CANNEX ENTERPRISES
D/B/A PIZZA CHEF
GARDNER PIZZA

EXISTING
BATHROOM

BACK

(EXISTING
3' x 1' door)

928761
 Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$50.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

 Owner: Recoll Mgmt Co. Phone # 874-8333X 5300
 Address: 1041 Brighton Ave
 LOCATION OF CONSTRUCTION 1041 Brighton Ave. Ptld
 Contractor: Boulos Prop Mgt Co Sub: _____
 Address: 2 City Ctr Ptld Phone # 871-1290
 Est. Construction Cost: 57,000.00 Proposed Use: comm. bldg w/ interior renov
 Past Use: comm. bldg
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion comm bldg. w/ interior renovations

| | | |
|--------------------------|----------------------|------------------|
| For Official Use Only | | PERMIT ISSUED |
| Date <u>5/29/92</u> | Subdivision _____ | |
| Inside Fire Limits _____ | Name _____ | JUN - 9 1992 |
| Bldg Code _____ | Ownership: _____ | |
| Time Limit _____ | Estimated Cost _____ | CITY OF PORTLAND |

 Zoning: Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) W.A. 706-3-92

 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 _____ Weath. * 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 _____ Spun _____ Action: Approved
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 Date: 5/29/92

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

 Received By J. Fogg
 Signature of Applicant Holly Stief
 CEO's District: 4
PERMIT ISSUED WITH LETTER
PERMIT ISSUED WITH LETTER

 CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO 4 MA Carroll

White - Tax Assessor

PLOT PLAN

N



Done w/out Insp.

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

| Type | Inspection Record | Date |
|-------|-------------------|----------------|
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |
| _____ | _____ | ____/____/____ |

COMMENTS

CERTIFICATION

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

Halley Stuy
SIGNATURE OF APPLICANT

ADDRESS

PHONE NO

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

Inspection Services
Samuel P. Hoffes
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

June 9, 1992

Boulos Property Management Co.
2 City Center
Portland, ME 04101

Re: 1041 Brighton Ave

Dear Sir,

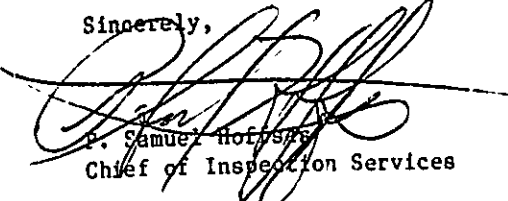
Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

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

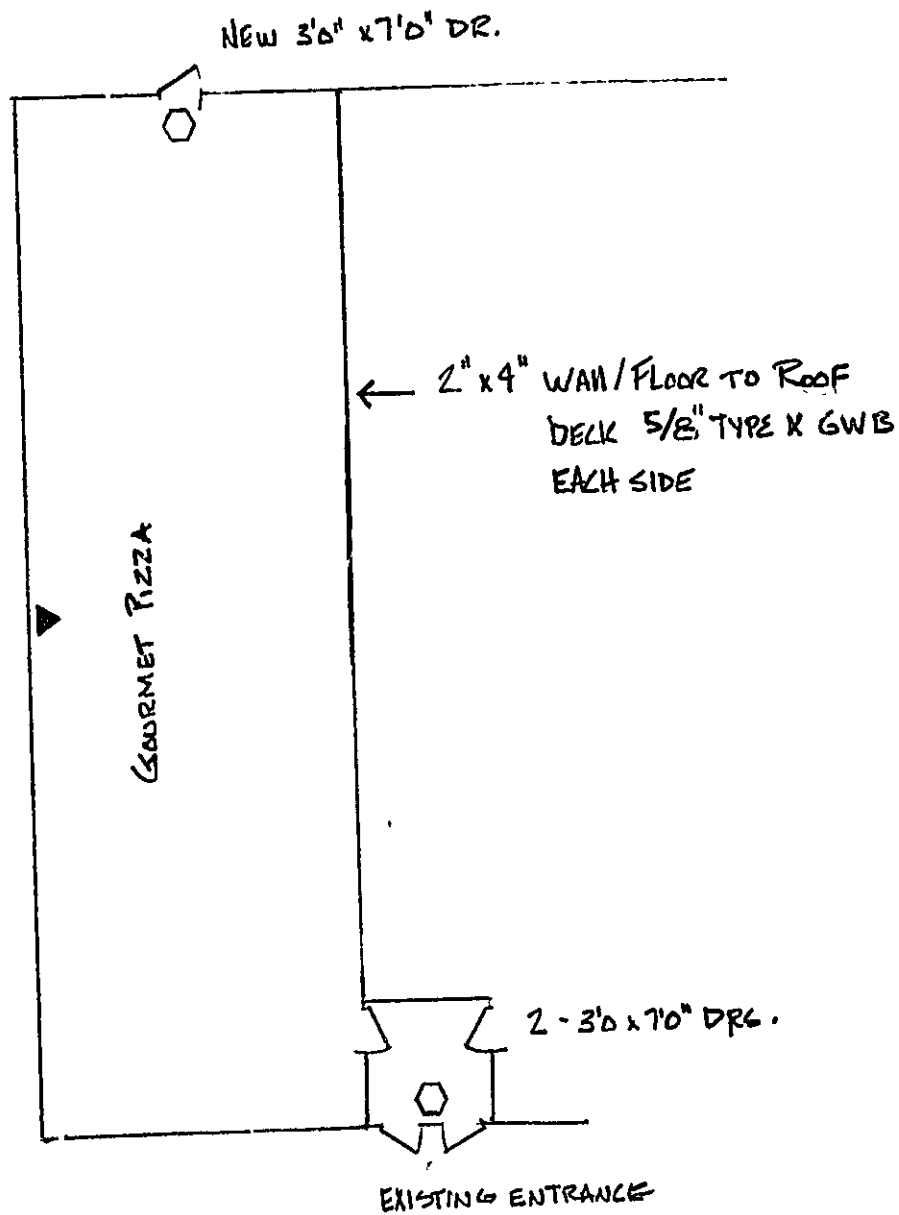
1. An additional exit sign shall be provided at front exit inside the space.
2. A portable fire extinguisher shall be provided in accordance with N.F.P.A. #10.
3. A hood/duct system and extinguishing system shall be provided for all commercial cooking appliances that may create smoke or grease laden vapors. Approval of plans shall be separate by separate permit. Ref. N.F.P.A. #96.
4. A floor plan of actual tenant space must be submitted before final occupancy permit can be issued.
5. The tenant separation wall shall extend from top of the floor assembly below to the underside of the floor/roof slab a deck above or to the fire resistance rated floor/ceiling or roof ceiling assembly above, and shall be attached thereto.

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

Sincerely,


S. P. Hoffes
Chief of Inspection Services

cc: LT W. Garroway, Fire Prevention Bureau

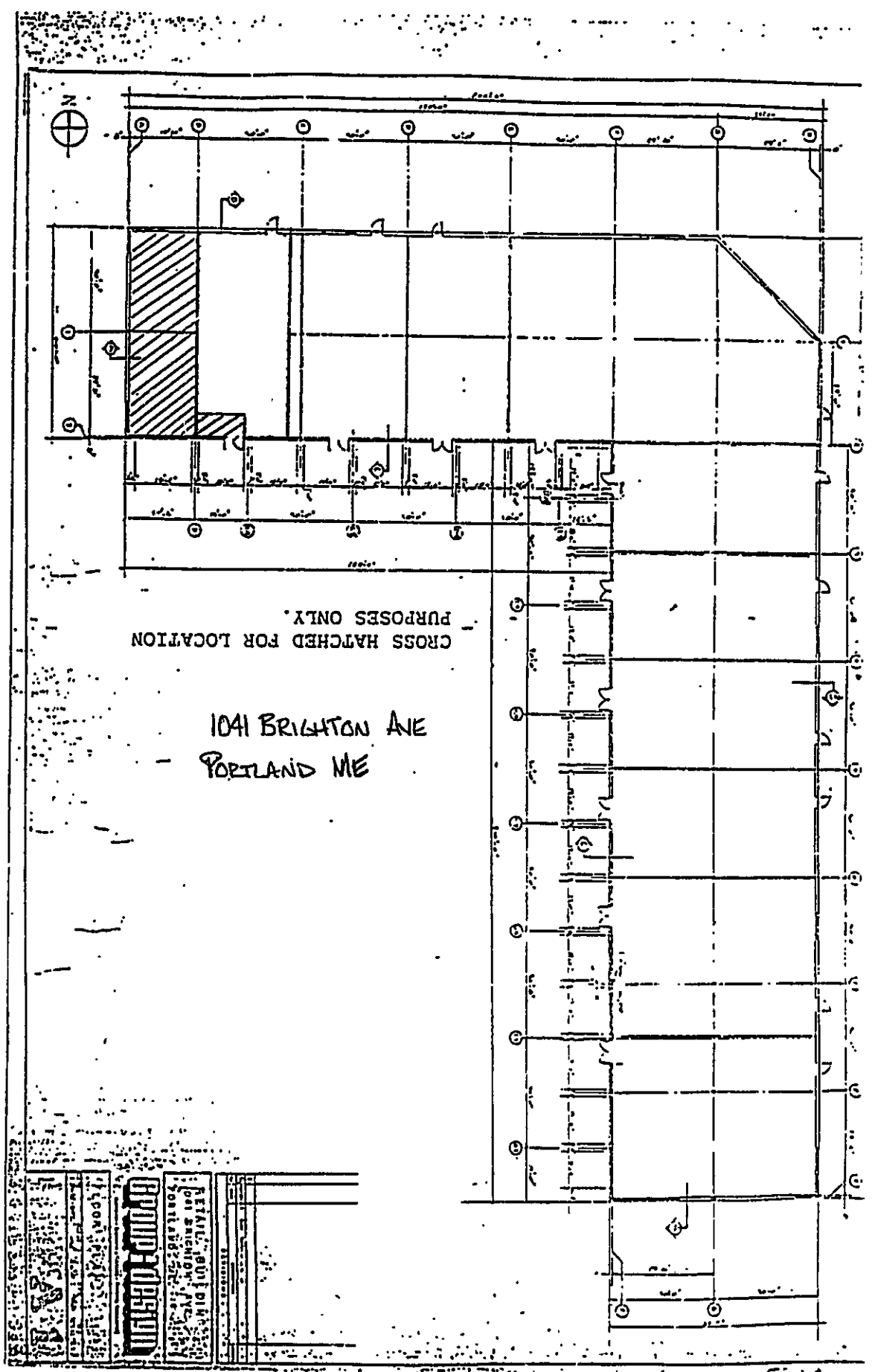


- EXIT SIGNAGE AT EACH EXIT ◯
- EMERGENCY LIGHTING ▶

— CONTRACTORS —

DOOR (REAR) - HLI
 DOORS (FRONT) - PORT. GLASS
 WALL/GWB - STAVE LABREQUE
 ETEL - SEABEE

1041 BRIGHTON AVE PORTLAND ME
 OWNER - RELOH MGMT CORP
 APPLICANT/AGENT ISOLIOS PROF MGT LO
 811-1290



1041 BRIGHTON AVE
 PORTLAND ME

CROSS HATCHED FOR LOCATION
 PURPOSES ONLY.

BRIDGE DESIGN
 1000 BRIGHTON AVE
 PORTLAND ME 04103
 RETAIL STORE DESIGN
 1041 BRIGHTON AVE
 PORTLAND ME 04103
 TEL: 555-1234
 FAX: 555-5678
 WWW.BRIDGEDESIGN.COM

923849

Permit # 923849 City of Portland

BUILDING PERMIT APPLICATION Fee 1.00 Zone Map # Lot #

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

Owner: Pizza Chef Gourmet Pizza Phone # 772-2226

Address: 1041 Brighton Ave

LOCATION OF CONSTRUCTION 1041 Brighton Ave

Contractor: Rockwell-Burr Sub:

Address: 184 Read St. 04103 Phone # 761-3039

Est. Construction Cost: Proposed Use: Retail w/sign

Part Use: Retail

of Existing Res. Units # of New Res. Units

Building Dimensions L W Total Sq. Ft.

Stories # Bedrooms Lot Size

Is Proposed Use: Seasonal Condominium Conversion

Explain Conversion: Erect Sign (12 X 2 1/2)

Foundation:

1. Type of Soil:
2. Set Backs - Front Rear Side(s)
3. Footing 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

White - Tax Assessor

PERMIT ISSUED

For Official Use Only

Date June 22, 1992 Subdivision:

Inside Fire Limits:

Bldg Code:

Time Limit: Ownership:

Estimated Cost:

JUN 29 1992

CITY OF PORTLAND

Zoning: Street Frontage Provided:

Provided Setbacks: Front Back Side

Review Required:

Zoning Board Approval: Yes No Date:

Planning Board Approval: Yes No Date:

Conditional Use: Variance Site Plan Subdivision

Shoreland Zoning Yes No Floodplain Yes No

Special Exception

Other W.A. - 7-26-92 (Explain)

Ceiling:

1. Ceiling Joists Size: **HISTORIC PRESERVATION**
2. Ceiling Strapping Size Spacing North District not Land
3. Type Ceilings: Does not require review
4. Insulation Type Size
5. Ceiling Height: Requires Review

Roof:

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

Chimneys: Type: Number of Fire Places Date:

Heating: Type of Heat: Oil / Gas

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 Mary Greak

Signature of Applicant [Signature] Date June 22, 1992

CEO's District Gray Carrier

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO [Signature]

PLOT PLAN

N



Done w/out Insp.

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

COMMENTS

CERTIFICATION

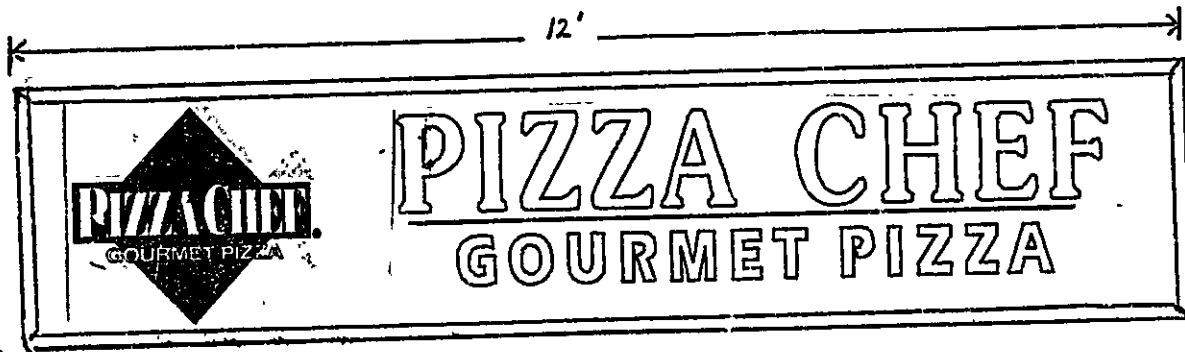
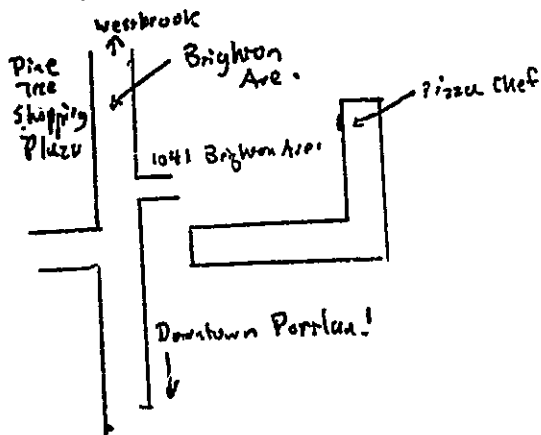
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition,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

Craig R. Cannon *Kathleen Barr* *761-3939*
 SIGNATURE OF APPLICANT ADDRESS PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK TITLE PHONE NO.

rockwell burt

PLOT PLAN



COLOES:

Sign Cabinet: Bronze
Background: Translucent White
Logo: Red and Green Translucent
Letters: Red Translucent
Rule: Green Translucent

SF = 30

X

FAX (207) 761-3339 (ask for EXT. #103)
184 Reed St.
Portland, ME 04103

CERTIFICATE OF INSURANCE

ISSUE DATE 05/10/92

INSURED NAME
 100 WILLOW ST
 PORTLAND, ME
 ZIP CODE

 ADDRESS
 PIZZA CAMP GYM
 100 WILLOW ST
 PORTLAND, ME
 ZIP CODE

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

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER A ACTA LIFE & CAS
- COMPANY LETTER B MET
- COMPANY LETTER C
- COMPANY LETTER D
- COMPANY LETTER E

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAME FOR THE POLICY WITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO THE DATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DELETED HEREIN IS SUBJECT TO ALL THE PROVISIONS, AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY OTHER CLAIMS.

| TYPE | RANGE | POLICY NUMBER | POLICY EFF. DATE | POLICY EXPIR. DATE | COVERAGE | AMOUNT |
|---|--|---------------|------------------|--------------------|--|--|
| GENERAL LIAB (X) COMM (X) CLAIM (X) GEN (X) | GENERAL LIABILITY (X) OCCUR (X) CONTRACTOR'S PROT. | PEN 785 | 05/09/92 | 05/09/93 | GENERAL AGGREG. PRODUCTS-COMP/OP AND PERSONAL & ADJ INEACH OCCURRENCE FIRE DAMAGE (ANY CAUSE) MED. EXPENSE (ANY CAUSE) | \$ 2,000,000 \$ 2,000,000 \$ 1,000,000 \$ 1,000,000 \$ 1,000,000 |
| AUTOMOBILE (X) AUTO (X) ALL (X) SEVERE (X) HIRED (X) NON-RES (X) GAR. | CITY | PENDING | 05/07/92 | 05/07/93 | COMBINED SINGLE LIMIT | \$ 1,200,000 |
| ACCESS (X) (X) (X) | MESELLA FORK | | | | EQUILY INJURY PROPERTY DAMAGE | \$ 1,000,000 |
| VERA R S (X) (X) | CATION | PENDING | 05/11/92 | 05/11/93 | (X) STATUTORY DISEASE POLICY EACH ACCIDENT DISEASE-EACH EMPLOYE | \$ 100,000 \$ 500,000 \$ 100,000 |

DESCRIPTION OF LOCATIONS OF THE SPECIAL TYPES
 NON'L INSURED: CITY OF PORTLAND, 89 COMMERCE ST., PORTLAND, ME 04101

CANCELLATION
 SHOULD ANY OF THE ABOVE MENTIONED POLICIES BE CANCELLED FOR THE REASON OF THE INSURED'S FAILURE TO PAY PREMIUMS, THE ISSUING COMPANY WILL FURNISH TO THE POLICY HOLDER BY FIRST CLASS MAIL, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPROVE NO LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 ARLENE MARIE O'NEIL

Arlene Marie O'Neil