

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3626

PROPERTY ADDRESS

Town Or Plantation: Portland

Street: 1841 Raymond Ave

Subdivision Lot #: 1841 Raymond Ave

PROPERTY OWNERS NAME

Last: SUBURY SOUTHERN MAINE
First: FRS.

Applicant Name: AFC Plumbing & Heating Inc.

Mailing Address of Owner/Applicant (if Different): 7 Thomas Dr. Westbrook, Me.

PORTLAND
Date Permit Issued: 8-13-88 PERMIT # 3,124 TOWN COPY FEE \$139.00 Double Fee Charged

Local Plumbing Inspector Signature: _____ L.P.I. # _____

Owner/Applicant Statement

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

Signature of Owner/Applicant: [Signature] Date: 8-1-88

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: _____ Date Approved: _____

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING	1. <input type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODIFIED RESIDENCE	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input checked="" type="checkbox"/> OTHER - SPECIFY: <u>3 b 71</u>	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>1212511</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2	Number	Column 1
		Type of Fixture		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		Bathub (and Shower)
		Floor Drain		Shower (Separate)
OR		Unnal	1	Sink
		Drinking Fountain		Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.	1	Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	1	Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Number of Hook-Ups & Relocations		Jet		Laundry Tub
	1	Other: <u>1-5-2</u>	1	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	7	Fixtures (Subtotal) Column 1
			3	Fixtures (Subtotal) Column 2
			2,11	Total Fixtures
			\$ 50.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 50.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(607) 255-3200

PROPERTY ADDRESS

Town Or Plantation: PORTLAND

Street: 1041 BRIGHTON AVE

Subdivision/Lot #: 1041 BRIGHTON AVE

PROPERTY OWNERS NAME

Last: CAVES First: EXTRAORDINAIRE

Applicant Name: THOMAS A KELLEY

Mailing Address of Owner/Applicant (if different): 301 1272 SCARBOROUGH

Caution: Permit Required

PORTLAND PERMIT # 3,069 TOWN COPY

Thomas A Kelley
Local Plumbing Inspector

L.R.I. # _____

Owner/Applicant Statement

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

Thomas A Kelley
Signature of Owner/Applicant Date _____

Caution: Inspection Required

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

[Signature]
Local Plumbing Inspector Signature Date Approved: NOV 20 1988

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFGD. HOUSING DEALER/MECHANIC
	4. <input checked="" type="checkbox"/> OTHER - SPECIFY: <u>PORT SHED</u>	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>015315</u>

SEP 16 1988

Number	Hook-Ups And Piping Relocation	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		Hose/bb / Silcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK-UP: to an existing subsurface wastewater disposal system.		Drinking Fountain		Wash Basin
			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 Cuspldor		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other _____		Water Heater
	Hook-Up Fee		Fixtures (Subtotal) Column 2	6	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE					
				18	

PERMIT # **001363**

CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: 1041 Associates

Address: 38 Preble St., Portland

LOCATION OF CONSTRUCTION 1041 Brighton Avenue

CONTRACTOR: Bailey Sign SUBCONTRACTORS: 774-2843

ADDRESS: 9 Thomas Drive, Col Westbrook Executive Park
Westbrook, Me 04092

Est. Construction Cost: _____ Type of Use: Hair Salon

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

_____ Conversion - Explain To erect sign (34 sq.ft.) as per plans.

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 _____
- 5. Bracing: Yes _____ No _____ Span(s) _____
- 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>November 7, 1988</u>	Subdivision: Yes / No _____
Inst'd Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$32.00</u>	

Ceiling:

- 1. Ceiling Joists Size: _____
- 2. Ceiling Strapping Size _____ Spacing _____
- 3. Type Ceilings: _____
- 4. Insulation Type _____
- 5. Ceiling Height: _____ Size NOV 7 1988

Roof:

- 1. Truss or Rafter Size _____
- 2. Sheathing Type _____
- 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. _____ Provided _____
Required Set-backs: Front _____ Back _____ Side _____

Review Required:

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

Permit Received By Nancy Crossman

Signature of Applicant [Signature] Date 11/7/88
Agent of Applicant

Signature of CEO _____ Date _____

Inspection Dates 2/10/89

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

Copyright ©

PERMIT # 936 CITY OF Portland BUILDING PERMIT APPLICATION MAP # LOTS

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

Owner: MURRY S. Fisher, Henderson
 Address: RFD 1 Box 754 GreenIsland, Maine
 LOCATION OF CONSTRUCTION: 1961 Fr. Place Avenue
 CONTRACTOR: Lord Construction SUBCONTRACTOR: 632-7290
 ADDRESS: Orrs Island

Est. Construction Cost: 15,000 Type of Use: Change of Use and Interior Renovations

Building Dimensions: L W Sq. Ft. # Stories Lot Size
 In Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Variant building for sandwich-shoppings and interior renovations as per plans
 COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only:
 # Of Dwelling Units # Of New Dwelling Units

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. Order Size:
 3. Lolly Column Spacing: Size: Spacing 16" O.C.
 4. Joists Size:
 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 Size Span(s)
 5. Bracing: Yes No
 6. Corner Posts Size
 7. Insulation Type Size
 8. Sheathing Type Size
 9. Siding Type Weather Exposure
 10. Necessary 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: 8-3-88 L. Wilson: S. J.
 Single Fee Letter
 City Code
 Time Made
 Estimated Cost 15,000
 Value of Structure
 Fee 100.00

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

Roof:
 1. Truss or Rafters Size
 2. Sheathing Type
 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: Square Footage
 3. Must conform to National Electrical Code and State Law.

Zoning:
 District: D-2 Street Frontage Req: Provided:
 Required Setbacks: Front Back Side Side

Permit Requirements:
 Zoning Board Approval: Yes No Date:
 Planning Board Approval: Yes No Date:
 Conditional Use: Variance: Site Plan: Subdivision:
 Other:
 Date Approved: 8-3-88

Permit Received By: L.L. G. [Signature]

Signature of Applicant: J.P. Collier [Signature] Date: 8-3-88

Inspection Date:

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3825

PROPERTY ADDRESS

Town Or Plantation: PORTLAND

Street: 1941 BRANTON AVE

Subdivision Lot #:

PROPERTY OWNERS NAME

Last: SUBWAY OF SOUTHERN MAINE

Applicant Name: ACE Plumbing Heating Inc.

Mailing Address of Owner/Applicant (If Different): 7 Thomas Dr Westbrook, Me.

PORTLAND
Date Permit Issued: 8-1-88

PERMIT # 3,124

TOWN COPY FEE: \$ 39.00

Local Plumbing Inspector Signature: _____ L.P.I. # _____

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: 8-1-88

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: _____ Date Approved: AUG 30 1988

PERMIT INFORMATION

<p>This Application is for</p> <p>1 <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2 <input type="checkbox"/> RELOCATED PLUMBING</p> <p>AUG 4 1988</p>	<p>Type Of Structure To Be Served:</p> <p>1 <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2 <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4 <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Sub Shop</u></p>	<p>Plumbing To Be Installed By:</p> <p>1 <input type="checkbox"/> MASTER PLUMBER</p> <p>2 <input type="checkbox"/> OIL BURNERMAN</p> <p>3 <input type="checkbox"/> MFG D HOUSING DEALER/MECHANIC</p> <p>4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5 <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>102251</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<p>HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District</p> <p>OR</p> <p>HOOK-UP to an existing subsurface waste-water disposal system</p>		Hose Bibb Sillcock		Bathub (and Shower)
		Floor Drain		Shower (Separate)
<p>PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures</p>		Urinal	1	Sink
		Drinking Fountain	3	Wash Basin
	1	Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Clothes Washer
<p>Number of Hook-Ups & Relocations</p>		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
<p>Hook-Up & Relocation Fee</p>	1	Other <u>Misc. Sink</u>	1	Water Heater
		Fixtures (Subtotal) Column 2	7	Fixtures (Subtotal) Column 1
			3	Fixtures (Subtotal) Column 2
			10	Total Fixtures
			\$ 30.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 30.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date June 6, 1988
 Receipt and Permit number 292/8

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 Avenue (Panda Gardens)
 OWNER'S NAME: 1041 Brighton Ave. Assoc. ADDRESS: _____

	FEE\$
OUTLETS:	
Receptacles _____ Switches <u>6</u> Plugmold _____ ft. TOTAL <u>1-30</u>	<u>3.00</u>
FIXTURES: (number of)	
Incandescent <u>52</u> Fluorescent <u>13</u> (not strip) TOTAL <u>52</u>	7.25 <u>8.50</u>
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes ..	
METERS: (number of)	
MOTORS: (number of)	
Fractional <u>2</u>	<u>1.00</u>
1 HP or over <u>3</u>	<u>3.00</u>
RESIDENTIAL HEATING:	
Oil or Gas (number of units)	
Electric (number of rooms)	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) <u>Gas</u>	<u>5.00</u>
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 <u>1</u> _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>1</u>	<u>1.50</u>
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioner Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under <u>X</u> <u>1</u>	<u>2.50</u>
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: 24.50

Rough-in, if possible

INSPECTION:

Will be ready on 6-7, 1988; or Will Call _____

CONTRACTOR'S NAME: Favreau's Elec. (Thomas Campbell)

ADDRESS: 37 Jordan Avenue, Brun., ME 0401.

TEL.: 725-2005

MASTER LICENSE NO.: 9169 **SIGNATURE OF CONTRACTOR:** _____

LIMITED LICENSE NO.: _____

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

ELECTRICAL INSTALLATIONS -

Permit Number 29110
Location 1041 Dwight Ave
Owner 1041 Dwight Ave
Date of Permit 6/18/88
Final Inspection 7/20/88
By Inspector [Signature]
Permit Application Register Page No. 37

INSPECTIONS: Service _____ by _____
Service called in _____
Closing-in 6/8/88 by [Signature]

PROGRESS INSPECTIONS: _____

DATE:	REMARKS
7/8/88	<p>Final for C of U</p> <p>Disconnect switch needed for ice machine</p> <p>✓ Slaps needed on liquid tight cable for work in coolers -</p> <p>✓ Branch panel need to be marked to show circuits controlled -</p> <p>✓ Sign needs disconnecting means to be able to be locked in the open position</p>
	<p>Emergency lights need circuit breaker lock installed</p> <p>Permit due for Air Conditions (Central unit)</p>
7/20/88	Final for C of U Completed -

LIABILE
COMPLETED
DATE 7/20/88



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date August 16, 1988
 Receipt and Permit number 19618

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 Avenue

OWNER'S NAME: Linda Henderson (Lessee) ADDRESS Route 24 Orr's Island

	FEES
OUTLETS:	
Receptacles switches <u>10</u> Plugmold <u> </u> ft. TOTAL <u>10-30</u>	<u>5.00</u>
FIXTURES: (number of)	
Incandescent <u> </u> Fluorescent <u>15</u> (not strip) TOTAL	<u>4.00</u>
Strip Fluorescent <u> </u> ft.	
SERVICES:	
Overhead <u> </u> Underground <u> </u> Temporary <u> </u> TOTAL amperes <u>100</u> ..	<u>3.00</u>
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 <u> </u> Over 20 kws <u> </u>	
APPLIANCES: (number of)	
Ranges <u> </u> Water Heaters <u> </u>	
Cook Tops <u> </u> Disposals <u> </u>	
Wall Ovens <u> </u> Dishwashers <u> </u>	
Dryers <u> </u> Compactors <u> </u>	
Fans <u> </u> Others (denote) <u> </u>	
TOTAL	<u>1.50</u>
MISCELLANEOUS. (number of)	
Branch Panels	
Transformers	
Air Conditioners Central Unit	
Separate Units (windows)	
Signs 20 sq ft and under <u>1</u>	<u>2.50</u>
Over 20 sq ft <u>1</u>	<u>5.00</u>
Swimming Pools Above Ground	
In Ground	
Fire/Burglar Alarms Residential	
Commercial	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under <u>1</u>	<u>1.00</u>
over 30 amps	
Circus, Fairs, etc.	
Alterations to wires	
Repairs after fire	
Emergency Lights, battery <u>3</u>	<u>1.50</u>
Emergency Generators	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DU
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE
	TOTAL AMOUNT DUE:
	<u>23.50</u>

INSPECTION:

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

CONTRACTOR'S NAME: Island Connections

ADDRESS: Box 633A So. Harpswell

TEL.: 833-5975

MASTER LICENSE NO.: 10635 SIGNATURE OF CONTRACTOR: _____

LIMITED LICENSE NO.: _____

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

ELECTRICAL INSTALLATIONS

Permit Number 9944
 Location 1411 1/2 Kingsport ave
 Owner Frank W. Henderson
 Date of Permit 8/16/88
 Final Inspection 9/16/88
 By Inspector J. J. [unclear]
 Permit Application Register Page No. 40

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-Ja 8/18/88 by AR [unclear]

PROGRESS INSPECTIONS: _____ / _____ / _____

DATE:	REMARKS:

9/16/88

PERMIT # 1239 TOWN OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Liberty Group 772-0548
 Address: 38 Preble Street, Portland, ME

LOCATION OF CONSTRUCTION 1041 Brighton A, Portland, ME

CONTRACTOR: Allied Construction SUBCONTRACTORS:
 ADDRESS: 208 Fore Street, Portland, ME 04104

Est. Construction Cost: \$9,500.00 Type of Use: Bakery

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain Alter from vacant space to bakery.

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: September 30, 1988 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost \$9,500 Permit Expiration: _____ Public _____
 Valuo Structure _____ Ownership: _____ Private _____
 Fee \$70.00

Ceiling: PERMIT ISSUED
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size OCT 7 1988
 5. Ceiling Height: _____

Roof: CITY OF PORTLAND
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 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: _____ 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 Nancy Grossman

Signature of Applicant Chire Dumaire Date 9-30-88
 FOR Allied Construction Co., Inc.

Signature of CEO _____ Date _____

Inspection Dates OK

PERMIT # 1114

CITY OF Portland BUILDING PERMIT APPLICATION

MAP # LOT#

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

Owner: **KX 1041 Associates**

Address: **38 Preble St., Portland**

LOCATION OF CONSTRUCTION **1041 Brighton Avenue**

CONTRACTOR: ****Bailey Sign** SUBCONTRACTORS: **774-2843**

ADDRESS: **9 Thomas Drive, Col. Westbrook Executive Park, Westbrook, Me**

Est. Construction Cost: **\$1500** Type of Use: **sub shop**

Is Proposed Use: **Seasonal** **Condominium** **Apartment**

Building Dimensions: **L** **W** **S** **H** **# Stories** **Lot Size**

Is Proposed Use: **Seasonal** **Condominium** **Apartment**

Conversion - Explain: **Erect 2 signs (30 sq. ft. each) as per plans.**

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: _____ Sides: _____
- 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. Joist Size: _____ Spacing: **16" O.C.**
- 5. Bridging Type: _____ Size: _____
- 6. Floor Sheathing Type: _____ Size: _____
- 7. Other Material: _____

Exterior Walls:

- 1. Studing Size: _____ Spacing: _____
- 2. No. windows: _____
- 3. No. Doors: _____
- 4. Header Sizes: _____ Spacing: _____
- 5. Bracing: Yes _____ No _____
- 6. Corner Posts Size: _____
- 7. Installation 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: _____ Spacing: _____
- 3. Wall Covering Type: _____
- 4. Fire Wall If required: _____
- 5. Other Materials: _____

White-Tax Assessor

Yellow-GPCOG

For Official Use Only

Date: **September 7, 1988** Submitter: Yes / No

Inside Firelands: _____ Name: _____

Blade Code: _____ Lot: _____

Time Limit: _____ Block: _____

Estimated Cost: _____ Permit Expiration: _____

Value Structure Fee: **\$37.00** Ownership: _____ Public/Private

- Roofing:**
- 1. Ceiling Joist Size: _____ Spacing: _____
 - 2. Ceiling Sheathing Size: _____
 - 3. Type Ceiling: _____ Size: _____
 - 4. Installation 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 Fixtures: _____
 - 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.

- 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 Agmt: _____ Spec. Exception _____
 - Other: (Explain) _____
- Date Approved: _____

Permit Received By: **Nancy Grossman**

Signature of Applicant: *Nancy Grossman* **9/7/88**

Signature of CEO: *as agent of owner* _____ Date: _____

Inspection Dates: _____ White Tag: **CEO** © Copyright GPCOG 1987

PERMIT # 1254 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: 1041 Associates

Address: 38 Preble St., Portland, 04101

LOCATION OF CONSTRUCTION: 1041 Brighton Avenue

CONTRACTOR: Bailey Sign SUBCONTRACTORS: 774-2843

ADDRESS: 9 Thomas Drive, Col. Westbrook Executive Park, Westbrook, Me 04092

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 To erect sign 2 1/2' x 12' (34 sq. ft.)

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE as per plan.

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: _____
- Joists Size: _____ Spacing 16" O.C.
- Bridging Type: _____ Size: _____
- Floor Sheathing Type: _____ Size: _____
- Other Materials: _____

Exterior Walls:

- Structuring 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: <u>1988 October 6, 1988</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 <input type="checkbox"/> Private <input type="checkbox"/>
Fee: <u>\$21.80</u>	

PERMIT ISSUED

Ceiling:

- Ceiling Joists Size: _____
- Ceiling Strapping Size: _____ Spacing: OCT 12 1988
- Type Ceilings: _____
- Insulation Type: _____ Size: _____
- Ceiling Height: City of Portland

Roof:

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

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: Nancy Grossman

Signature of Applicant: Radney A. Brown Date: 10/6/88

Signature of CEO: As agent of customer Date: _____

Inspection Dates: (2) KC



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 6 December, 1989
 Receipt and Permit number 00958

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 Avenue - ~~Alton Mills~~ OUBREW MILLS
 OWNER'S NAME: Liberty Group ADDRESS: 34 Preble Street

	FEES
OUTLETS:	
Receptacles <u>30</u> Switches <u>12</u> Plugmold _____ ft. TCTAL <u>42</u>	5.00
FIXTURES (number of)	
Incandescent _____ Fluorescent <u>9</u> (not strip) TOTAL	3.00
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead <u>200</u> Underground _____ Temporary _____ TOTAL amperes <u>200</u> ..	3.00
METERS (number of) <u>1</u>50
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 Cvens _____ Dishwashers	
Dryers _____ Compactors	
Fans _____ Others (denote)	
TOTAL <u>2</u>	3.00
MISCELLANEOUS: (number of)	
Branch Panels	
Transformers	
Air Conditioners Central Unit <u>HVAC</u>	5.00
Separate Units (windows)	
Signs 20 sq. ft. and under <u>1</u>	2.50
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 fire50
Emergency Lights, battery <u>1</u> Main Room	
Emergency Generators	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE.
	27.50
	TOTAL AMOUNT DUE:

INSPECTION:

Will be ready on XXXXX, 19 ; or Will Call _____

CONTRACTOR'S NAME: Young's Electric

ADDRESS: 25 Evergreen Drive Portland

TEL.: 797-0593

MASTER LICENSE NO. 02746

LIMITED LICENSE NO. _____

SIGNATURE OF CONTRACTOR:

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

ELECTRICAL INSTALLATIONS -

INSPECTIONS: Service 12-27-89 by SB
Service called in 12-27-89 - 11.05 AM
Closing-in 12/12/89 by [Signature]

PROGRESS INSPECTIONS: _____

Permit Number 00958
Location 1241 BRIDLEWOOD AVE
Owner LIBERTY GRASS ALUM MILLS
Date of Permit 12/6/89
Final Inspection 1-16-90
By Inspector [Signature]
Permit Application Register Page No 80

CODE
COMPLIANCE
COMPLETED
DATE 10-27-89/SB

DATE:	REMARKS
<u>12/12/89</u>	<u>Closing in for Sitetank -</u> <u>UNABLE TO SEE SERVICE EQUIP. ROOM.</u>
<u>1-16-90</u>	<u>CO - fixtures not clipped</u>

CODE
COMPLIANCE
COMPLETED
DATE 1-18-90

901874

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$35.00 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form

* Owner: Electrolux Phone # 878-8610
 Address: 1041 Brighton Ave. Portland 04102
 LOCATION OF CONSTRUCTION 1041 Brighton Ave.
 Contractor Leavitt & Parris Sub: _____
 P. O. Box 621 Scarborough, 00074 Phone # 883-4184
 Address: _____
 Est. Construction Cost: _____ Proposed Use: Tent sale
 _____ 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 have tent sale erect tent
weekends only Aug 24 to Sept. 14th 1990

For Official Use Only **PERMIT ISSUED**
 Date August 24, 1990 Subdivisor Name _____
 Inside Fire Limits _____ Lot SEP 10 1990
 Bldg Code _____ Ownership: _____ Public _____
 Time Limit _____ Estimated Cost _____
 City of Portland
 Zoning: B-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 _____
 Special Exception _____
 Other (Explain) OK WDA 7-29-90

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 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 _____ 00.25 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 _____
 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 Donald Glidden Date 8/24/90
 Signature of CEO William J. ... Date 7-6-90
 Inspection Dates _____

0001 .AS 8VA White-Tax Assessor Yellow-GPCOG White Tag-CEO [2] MPA 2 LOA P © Copyright GPCOG 1988

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 35.00

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

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

COMMENTS submitted 3 documents

Signature of Applicant *Donald F. [Signature]*

Date Aug 24, 1990

est. 1919

IN MAINE
1-800-433-6679



LEAVITT & PARRIS, INC.

448 Payne Road, P.O. Box 621
SCARBOROUGH, MAINE 04074
(207) 883-4184

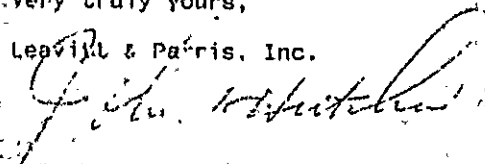
MANUFACTURERS OF CANVAS PRODUCTS
FOR HOME, INDUSTRY AND MARINE

To whom it may concern:

This is to certify that the tents supplied to Electrolux
are certified flame resistance that meets the requirements of the
California Fire Marshall, Underwriters Laboratory Test Flamibility
354-H and Government Spec. CCC-C-428A.

Very truly yours,

Leavitt & Parris, Inc.


John H. Hutchins III
President

RENTALS OF QUALITY TENTS AND COMPLETE ACCESSORIES
SERVICES FOR THE ENTIRE YEAR AND TRADE SHOW INDUSTRIES

1041 BRIGHTON AVE

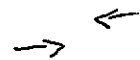
EXIT



TENT SPACE
20X20



← STOPS →



← STOPS →

EXIT

1041 BRIGHTON AVE -
871-8610
-ELECTROLUX-



Leavitt & Parris Inc.

P.O. BOX 621
448 PAYNE ROAD
SCARBOROUGH, MAINE 04074
(207) 883-4184

TOLL FREE IN ME ONLY
(800) 833-6679

Fax 883-7803

Leavitt & Parris Since 1919

August 23, 1990

BILL

TO: Electrolux Corp.
Malletta, GA

CONTRACT #/VOICE #
DATE ENDRG
SET UP DATE see below
TOTAL DAYS RENTED

SHIP

Electrolux Corp.
TO: 1041 Bridgton Avenue
Portland, ME 04103

SURFACE

DATE(S) OF EVENT see below

WRITTEN BY John Hutchins	CHECKED IN BY	CONTACT Don Glidden	EVENT
Jin Sickler			TAKE DOWN DATE
JOB PHONE 871-8610	DEPOSIT DUE	P.O. NO.	

QUANTITY	EQUIPMENT NUMBER	DESCRIPTION	MINIMUM CHARGE	RATES		AMOUNT
				ADDL WEEK	PER MONTH	
		Up: August 24th. pick-up August 27th. Up: August 31st. pick-up September 4th. Up: September 7th. pick-up September 10th. Up: September 14th pick-up September 17th.				\$ 175.00 per weekend
		20' x 20' tent with sidewall				
		Tents Chairs Tables Staging Dance Floor Lights Canopy Bar Extension Walkway Podium Misc.				
Customer to take-down. Crew to pick up the following Monday. (Tuesday following Labor Day.) (each time)						\$ 700.00
In case of cancellation deposit will be forfeit.						

LEAVITT & PARRIS USE ONLY

TENT CREW SETUP/DOWN

FOR (W) _____

SIGN _____

TRUCK _____

CREW _____

ATTENTION

CUSTOMERS RESPONSIBILITY

TO CHECK WITH

LOCAL MUNICIPALITY

CONCERNING PERMITS

REQUIRED FOR

TENT INSTALLATION.

GUARANTEE OF RENTAL AGREEMENT: I have read and hereby agree to the terms and conditions of this agreement.

X *John Sickler*

LEAVITT & PARRIS, PORTLAND, ME, HEREBY LEASES TO CUSTOMER AS SHOWN IN "BILL TO" HEREINAFTER "CUSTOMER" UPON THE TERMS AND CONDITIONS SET FORTH, THE ABOVE DESCRIBED PROPERTY.



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 6 Dec ember, 1989
 Receipt and Permit number 00949

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 Avenue - Casco Bay Vet
 OWNER'S NAME Liberty Group 772-0548 ADDRESS 34 Preble Street

	<u>GLEW</u>	FEES
OUTLETS:		
Receptacles <u>15</u> Switches <u>7</u> Plugmold _____ ft TOTAL <u>22</u>		3.00
FIXTURES: (number of)		
Incandescent _____ Fluorescent <u>10</u> (not strip) TOTAL <u>10</u>		3.00
Strip Fluorescent _____ ft.		
SERVICES:		
Overhead <u>100</u> Underground _____ Temporary _____ TOTAL amperes <u>100</u>		3.00
METERS: (number of) <u>1</u>50
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 unit) _____		
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 <u>1</u>	Others (denote) _____	
TOTAL <u>X 2</u>		3.00
MISCELLANEOUS: (number of)		
Branch Panels _____		
Transformers _____		
Air Conditioners Central Unit HVAC _____		5.00
Separate Units (windows) _____		
Signs 20 sq ft. and und. <u>1</u>		2.50
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 <u>1</u> Main Room50
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:	20.50

INSTRUCTION:
 Will be ready on _____, 19__; or Will Call XXXX
 CONTRACTOR'S NAME: Young's Electric
 ADDRESS: 25 Evergreen Drive Portland
 TEL.: 797-0593
 MASTER LICENSE NO.: 02746 SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: _____

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

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

Owner: 1041 Brighton Avenue Assoc. Phone # 772-1548
 Address: 38 Preble St., City 04101
 LOCATION OF CONSTRUCTION 1041 Brighton Avenue - Olan Mills
 Contractor: Bailey Sign, Inc. Sub _____
 Address: Col. Westbrook Executive Park Phone # 774-2343
West., ME 04092
 Est. Construction Cost _____ Proposed Use: Retail
 Past Use same
 # 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 24 S. F. sign flush to bldg., lighted,
non-flashing, as per plan.

For Official Use		PERMIT ISSUED	
Date	<u>Dec 27, 1989</u>	Name	<u>FEB 5 1990</u>
Inside Fire Limits	_____	Submittal	_____
Bldg Code	_____	Ownership	_____ Pub. _____
Time Limit	_____	City Of Portland	
Estimated Cost	_____	_____	
Zoning	<u>R-2 Business</u>		
Street Frontage Provided	_____	Back	_____ Side _____
Provided Setbacks: Front	_____	Back	_____ Side _____
Review Required:	_____		
Zoning Board Approval: Yes _____ No _____	Date: _____		
Planning Board Approval: Yes _____ No _____	Date: _____		
Conditional Use _____	Variance _____	Site Plan _____	Subdivision _____
Shoreland Zoning Yes _____ No _____	Floodplain Yes _____ No _____	_____	
Special Exception _____	_____		
Other (E-plat) _____	<u>OK W.D.A. 2-5-90</u>		

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 Tyr _____ 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 _____ Spacing _____
 2. Ceiling Strapping Size _____
 3. Type Ceilings: _____ Size _____
 4. Insulation Type _____
 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 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 Joyce M. Rinaldi

Signature of Applicant Eric Magnusson CONT. Date 12-27-89

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor

Yellow-GPCOG

White Tag-CEO

© Copyright GPCOG 1988

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$30.20 Zone _____ Map # _____ Lot# P
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Caaco Bay Ver. Hospital Phone # _____
 Address: 1041 Brighton Ave. Portland, Maine
 LOCATION OF CONSTRUCTION 1041 Brighton Ave.
 Contractor: Bailey Sign (MAIL PERMIT)
 Address: 9 Thomas Drive Westbrook Phone # 774-2843
 04092
 Est. Construction Cost _____ Proposed Use: Ver. Hospital
 _____ 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 261/2 by 12 ft. lighted sign
as per plans

For Official Use Only
 Date December 28, 1989 Subdiv. Name PERMIT SHEET
 Inside Fire Limits _____
 Bldg Code _____ Ownership _____
 Time Limit _____
 Estimated Cost _____
 Zoning: B-2 Business
 Street Frontage Provided: _____
 Provided Setbacks Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____
 Planning Board Approval: Yes _____ No _____
 Conditional Use: _____ Variance _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Flood _____
 Special Exception _____
 Other (Explain) OK WJD H 5-90

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: _____ Spacing 16" O.C.
 4. Joists Size: _____
 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 Ceiling _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height _____

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

Chimney:
 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 Rodney J. Bennett Date 12/28/89
as agent of owner

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor Yellow-GPCOG White Tag-CEO 187 © Copyright GPCOG 1988
Mrs Lowry

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$28.20 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form

Owner GalaxSea Cruises Phone # _____
 Address: 1041 Brighton Avenue Portland 04102
 LOCATION OF CONSTRUCTION 1041 Brighton Avenue
 Contractor Bailey Sign 9 Thomas Drive Col Westbrook Executive Park
 Address: Westbrook 04092 Phone # 774-2843
 Est. Construction Cost: _____ Proposed Use: _____
 Past Use: _____
 # Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion Illuminated
 Explain Conversion To erect 8 X 2 1/2 permanent wall mount cabinet sign
as per plan

For Official Use ONLY **ISSUED**
 Date 1/16/90 Subdivision: _____
 Inside Fire Limits _____ Name FEB 8 1990
 Bldg Code _____ Ownership: _____
 Time Limit _____ Estimated Cost _____
 Zoning: B-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 WDH 2-5-90

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 Ceiling: _____
- Insulation Type _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____ Span _____
- Sheathing Type _____ Size _____
- Roof Cover 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 Latini

Signature of Applicant Robert Rees Date 1/16/90

Signature of CEO _____ Date _____

Inspection Dates _____

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$28.20 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job Proper plans must accompany form

Owner GalaxSea Cruises Phone # _____
 Address 1041 Brighton Avenue Portland 04102
 LOCATION OF CONSTRUCTION 1041 Brighton Avenue
 Contractor Bailey S'gn 9 Thomas Dodge Col Westbrook Executive Park
 Address _____ Phone # 774-2843
 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 Aluminatec
 Explain Conversion To erect 8 X 2 1/2 permanent wall mount cabinet sign as per plan

For Official Use Only

Date 1/16/90 Subdivision _____
 Inside Fire Limits _____ **PERMIT ISSUED**
 Bldg Code _____ Ownership _____
 Time Limit _____ **FEB 5 1990** Public _____ Private _____
 Estimated Cost _____

Zoning: R-2 **City Of P**
 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) _____ 2-5-90

Foundation
 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. Bricking 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 _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height _____

Roof
 1. Truss or Rafter Size _____ OS. 8S _____ 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 _____
 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 _____ Date 1/16/90
 Signature of CEO _____ Date _____

Inspection Dates _____

PLAT PLAN

OK 2/5/90



FEE'S (Breakdown From Front)

Base Fee \$ 40.20

Subdivision F. _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

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

COMMENTS submitted drawing, consent form Insurance form on file

Signature of Applicant Robert Reed

Date 1/16/90

01/10/90 11:41

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED

TO BE ERECTED ON A BUILDING AT 1041 Brighton Avenue

IN PORTLAND, MAINE ^{1041 Brighton} Avenue Associates being the owner of the premises

at 1041 Brighton Avenue in Portland, Maine hereby gives consent to the erection of a certain sign owned by Galaxsea Cruises ^{1041 Brighton} Avenue Associates over the sidewalk or on the building from said premises as described in application to the Division of Inspection Services of Portland, Maine for a permit to cover the erection of said sign:

And in consideration of the issuance of said permit ^{1041 Brighton} Avenue Associates, owner of said premises, in event said sign shall cease to serve the purpose for which it was erected or shall become dangerous and in event the owner of said sign shall fail to remove said sign or make it permanently safe in case the sign still serves the purpose for which it was erected, hereby agrees for himself or itself, for his heirs, its successors, and his or its assigns, to completely remove said sign is in such condition and of order from him to remove it.

RECEIVED
JAN 16 1990
City of Building Inspection
Portland, Maine

In Witness whereof, the owner of said premises has signed this consent and agreement this 15th day of January 1990.

John P. Fallon III
Owner's signature

Eric Hoffman Sign Contractor
Lessee's signature
for lessee

COLORS/GRIPFLEX

PROCESS BLUE =
B/C, ART OUTLINE

GOLDEN YELLOW = 5. IN

WHITE = STARS, COPY
BOAT, WAVES



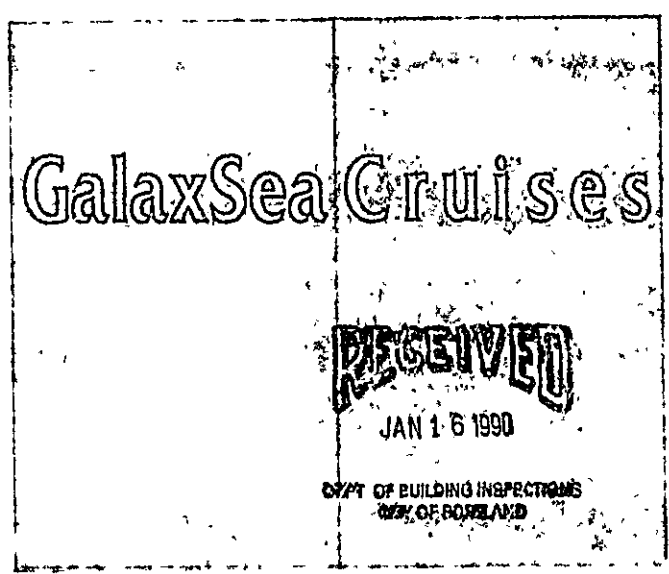
8' 0"

SCALE

FOR INFORMATION ONLY / 1-2-89

COLOR/VINYL

RECOMMEND WHITE
NEED CUSTOMER
APPROVAL



5' 0"

SCALE - 3/4" 1' 0"

WIN 1987 VINYL SET

XSEA
ISES

FRIZ
SIGNAL

CAP FRIZ 246 GUC 1/16/90



9 Thomas Drive
Col Westbrook Executive Park
Westbrook, ME 04092
774-2843
1 800 543-SIGN

SIGN SPECIFICATIONS		ILLUMINATED / NON-ILLUMINATED				LOCATION				DATE	
CABINET TYPE	SF	HEIGHT	LENGTH	WIDTH	RADIUS	MATERIAL	BALLAST	LAMPS	B.O.	SEAMS	COLOR
FACE 1	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE	MINUTE
BUILDING TYPE	ELEC. LOC.	MOUNTING		LOAD		SERVICING		MATERIAL		Color	
POLE COVER (inch)	HGT to BOT	MATERIAL		Color		SERVICING		Color		SERVICING	

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

Customer *CHERRY CO T*

Location *FRIZ*

Remarks

Revised	

Scale: $\frac{1}{8}'' = 1'$ Date *1/2/90*

Job/W.O.# Sheet *1* of *1*

(ACCEPTANCE SIGNATURE/DATE)

Project # *E 443* Drawing # *716 1*

PERMIT PRINT

FINAL MFG. PRINT
DATE *1/16/90*

CHERRY CO T
JANUARY 12, 1990
FRIZ

©COPYRIGHT

Permit # 7 City of Portland BUILDING PERMIT APPLICATION Fee \$30.20 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner Cnaco Bay Vet. Hospital Phone # _____
 Address: 1041 Brighton Ave. Portland, Maine
 LOCATION OF CONSTRUCTION 1041 Brighton Ave.
 Contractor: Bailey Sign (MAIL PERMIT)
 Address: 9 Thomas Drive Westbrook Phone # 774-2843
 Est. Construction Cost: _____ Proposed Use: Vet Hospital
 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 26x12 by 12 ft. int. lighted sign
on top of sign

For Official Use Only ISSUED
 Date December 28, 1989 Name _____
 Inside Fire Limits _____
 Bldg Code _____ Ownership: FEB 5 1990 Public _____ Private _____
 Time Limit _____
 Estimated Cost _____
City Of Portland
 Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) CK WJ H 2-5-90

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: _____ Size: _____
 3. Lally Column Spacing: _____ Spacing 16" O.C.
 4. Joists Size: _____ Size: _____
 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 _____ OS, OE _____
 2. Sheathing Type _____ Span _____
 3. Roof Covering Type _____ Size _____

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 _____
 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 Received By Latini
 Signature of Applicant _____ Date 12/28/89
 Signature of CEO _____ Date _____
 Inspection Dates _____

PLOT PLAN

N



[Handwritten scribble]

FEES (Breakdown From Front)

Base Fee \$ 30.20
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Inspection Record

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS Submitting plot plan, sign plan, consent form, and insurance information.

Signature of Applicant *Robyn L. Bean*
AGENT of owner

Date December 26, 1989



January 9, 1980

City of Portland
Code Enforcement
389 Congress Street
Portland, ME 04101
Attn: William Giroux

RE: Casco Bay Veterinary Clinic

Dear Mr. Giroux:

1041 Brighton Ave. Associates, the owners of the shopping center that houses the above mentioned establishment, informs us that the footage for that retail space is 30 ft., hence their decision to go with a 2"x6"x12' sign.

If you may have any further questions please feel free to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Eric A. Moynihan".

Eric A. Moynihan
Sales Manager

EAM:br

WORKSHEET TO ERECT SIGN OVER PUBLIC SIDEWALK — THIS IS NOT A PERMIT!

Portland, Maine, _____ 19 _____

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect the following described sign extending over a public sidewalk or street in accordance with the Building Code of the City of Portland, and the following specifications:

Location: 1041 Brighton Ave. Within Fire Limits? _____ Dist No _____

Owner of building to which sign is to be attached Liberty Group

Name and address of owner of sign Casco Bay Veterinary Clinic 1041 Brighton Ave.

Contractor's name and address Bailey Sign Inc. Telephone 774-5845

When does contractor's bond expire? 01-01-91 Coverage 2,000,000 liability

Information Concerning Building

No. stories _____ Material of wall to which sign is to be attached _____

Details of Sign and Connections

Building owner's consent and agreement filed with application _____

Electric? _____ Vertical dimension after erection _____ Horizontal _____

Weight _____ lbs. Will there be any hollow spaces? _____ Any rigid frame? _____

Material of frame _____ No. advertising faces _____, material _____

No. rigid connections _____ Are they fastened directly to frame of sign? _____

No. through bolts _____, Size _____, Location, top or bottom _____

No. gus _____, material _____, size _____

Minimum clear height above sidewalk or street _____

Maximum projection into street _____ Fee \$ _____

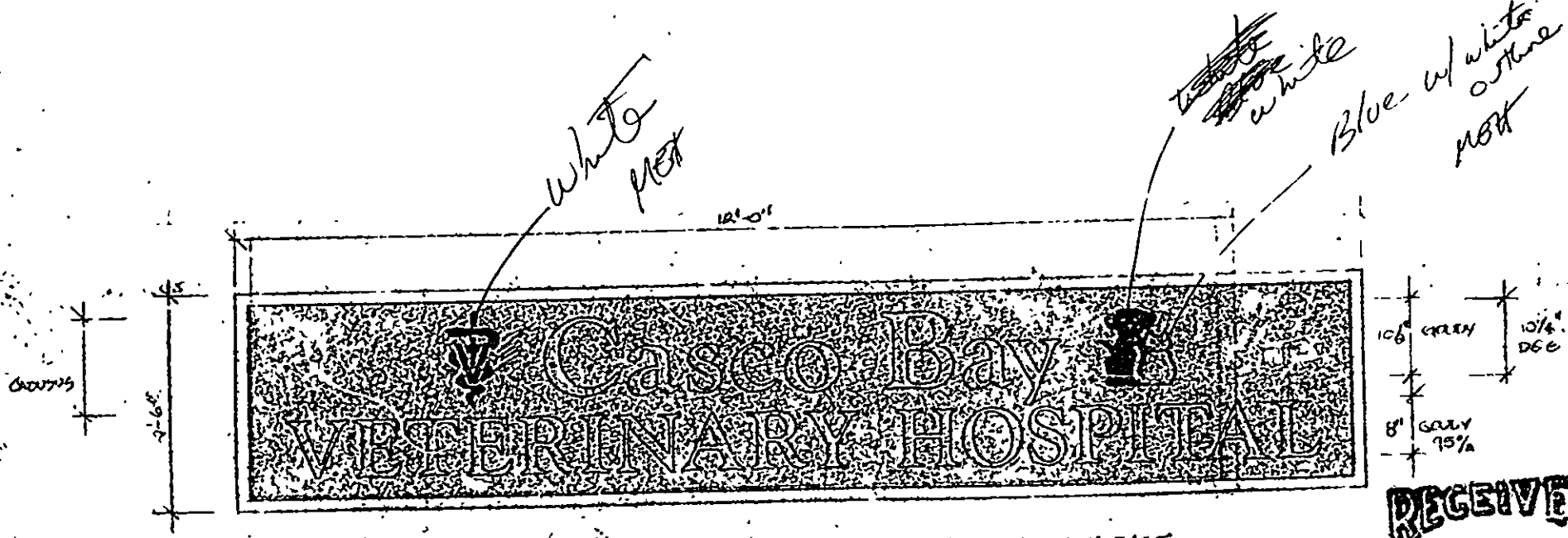
Signature of contractor _____

RECEIVED

DEC 28 1989

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

BAY SIGN
 9 Thomas Drive
 Co., Westport, Massachusetts
 Westport, MA 01986
 Tel: 617/891-1100

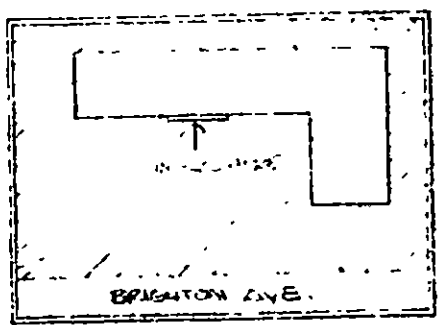


1 - 24" x 120" / G/F / INTERNALLY ILLUMINATED / SIGN, TEXT / LETTER FACE

RECEIVED
 DEC 28 1989

DEPT OF BUILDING INSPECTION
 CIVIL ENGINEER

DATE	LOCATION		RADIUS	MATERIAL	BALLAST	EQUIS	SIGN		MOUNTING	LOAD	SERVICING
	MARKETED	NON-MARKETED					LENGTH	WIDTH			



Plot Plan

COLORS / G/F FLEX

RADIUS AND DGS + BLACK
 CAT 5 BLACK OUTLINE WHITE CAT
 BACKGROUND 6 DUE TO MATCH SAFFRE BLUE VINYL
 CAT 1 - WHITE
 CABINET AND DETAINERS BRONZE

Customer **CASCO BAY VETERINARY**

Location **104 BRIGHTON AVE**

Remarks

Revised	12/17/89	R1 - LEAD CHAN
	12/19/89	R2 - LEAD CHAN

Scale **A: 1" = 1'-0"** Date **12/17/89**

Job/W.O.# _____ Sheet **1** of _____

SHERRY COLT
 TELEPHONE 111-1974
 100 S. WALLEY
 WESTPORT, MA 01986
 © COPYRIGHT

Project # **872333** Drawing # **01648**

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

Owner: 1041 Brighton Avenue Assoc. Phone # 772-0548
 Address: 38 Preble St., City 04101

LOCATION OF CONSTRUCTION 1041 Brighton Avenue - Olan Mills
Bailey Sign, Inc.

Contractor: _____ Sub: _____
 Address: Col. Westbrook Executive Park Phone # 774-2843
WEST., ME 04092
 Est. Construction Cost: _____ Proposed Use: retail

_____ Past Use: store

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 24 S. F. sign flush to bldg., lighted,
non-flashing, as per plan.

For Official Use Only
 Date Dec 27, 1989
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost _____
 Owner's Use: Public Private _____
 City of _____

Zoning: Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) OK with J-2-5-90

Foundations:
 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: _____ Spacing 16" O.C.
 4. Joists Size: _____
 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 Ceiling: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

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

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

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

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

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

Permit Received By Joyce M. Rinaldi

Signature of Applicant Eric Manahan Date 12-27-89

Signature of CEO _____ Date _____

Inspection Dates _____

PLOT PLAN

N



OK
Y

FEES (Breakdown From Front)

Base Fee \$ 29.80 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
 plain) _____
Late Fee \$ _____

Inspection Record

Type

Date

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

Signature of Applicant Eric Mangel For Owner Sign Contractor Date 12-27-89

WORKSHEET TO ERECT SIGN OVER PUBLIC SIDEWALK - THIS IS NOT A PERMIT!

Portland, Maine,

19

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect the following described sign extending over a public sidewalk or street in accordance with the Building Code of the City of Portland, and the following specifications

Location 1041 Brighton Ave. Within Fire Limits? _____ Dist No. _____

Owner of building to which sign is to be attached 1041 Brighton Ave. Assoc.-38 Preble St., City 04101

Name and address of owner of sign same b4092 _____

Contractor's name and address Bailey Sign, Inc.-Col. Westbrook Exe.Park, West. Telephone 774-2943

When does contractor's bond expire? Brooks Ins. \$10,000.00 - 8/4/1990 - Liability thru Bill Johnson
Agency in Lewiston-\$2,000,000.00.

Information Concerning Building

No. stories _____ Material of wall to which sign is to be attached _____

Details of Sign and Connections

Building owner's consent and agreement filed with application _____

Electric? _____ Vertical dimension after erection _____ Horizontal _____

Weight _____ lbs., Will there be any hollow spaces? _____ Any rigid frame? _____

Material of frame _____ No. advertising faces _____, material _____

No. rigid connections _____ Are they fastened directly to frame of sign? _____

No. through bolts _____, Size _____, Location, top or bottom _____

No. guys _____, material _____, Size _____

Minimum clear height above sidewalk or street _____

Maximum projection into street _____ Fee \$ _____

Signature of contractor

Eric A. Meyer - Bailey Sign

NOTICE: THIS SIGN IS BEING PAID FOR AND ERECTED BY OWNER, 1041 BRIGHTON AVE. ASSOC.

039

110
04



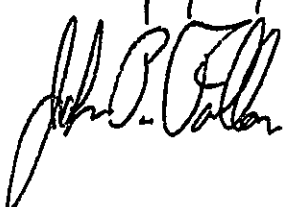
LIBERTY GROUP
REAL ESTATE DEVELOPMENT

12/28/89

Mr. Eric Moynihan
Bailey Sign
Westbrook, Maine

Dear Eric:

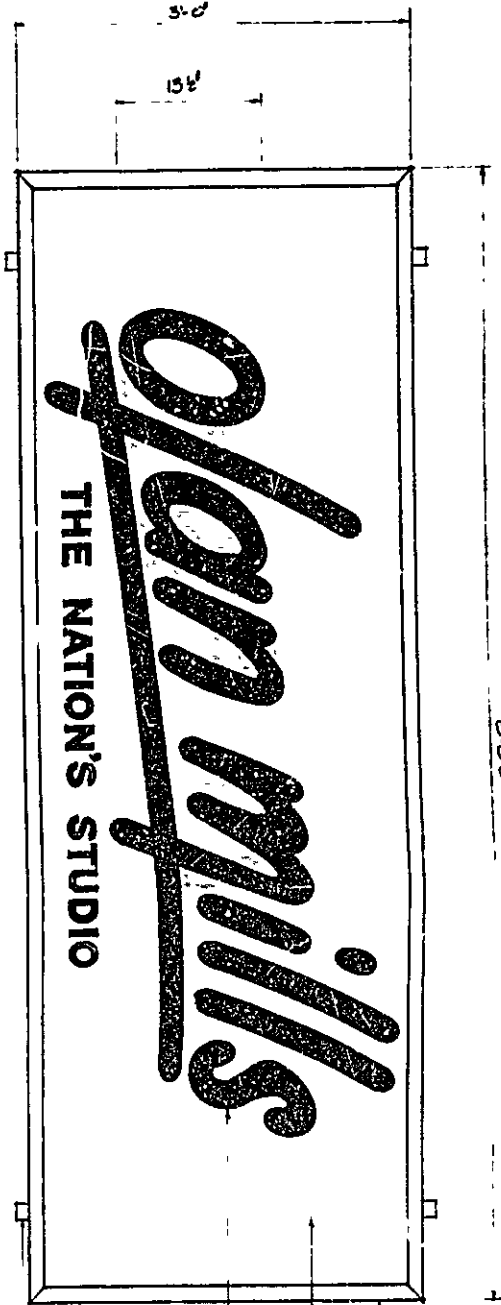
On behalf of the owners of 1041 Brighton Avenue,
I hereby authorize Bailey Sign to act as installer
of a 30" X 8' sign for Olan Mills

Sincerely yours,


RECEIVED

DEC 28 1989

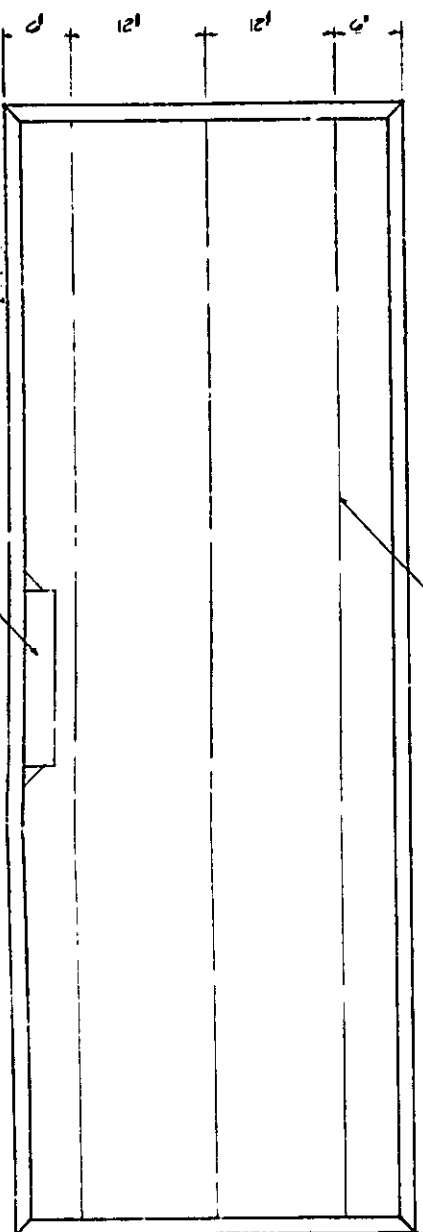
DEPT OF BUILDING INSPECTION
CITY OF PORTLAND



3/16" ALUMINUM SIGN MIRROR LUMINATED 7
 CANT FLUORESCENT LIGHTS OVER ALUM BRK
 SCALE 1/8"=1'-0"

3/16" EXTRUDED ALUM BRK
 WHITE PAIN FORMED BG
 BLUE EXTRUDED MESH
 OVER 4000000 (CALL CON)

MOUNTING BRACKETS



ELECTRICAL REQUIREMENTS
 3 MAGNIE AND TWO LIGHTS
 1 5000 BULB AND 20 AMPS
 NOTE ARE 15 AMP CIRCUIT REQUIRED

WORKING DRAWING
 SCALE 1/8"=1'-0"

1011 Brighton and
 ART MILLS STUDIOS
 COMPANY SIGN

DESIGNED BY	DATE
APPROVED BY	DATE
DATE: 11/79	



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 1041 Brighton Avenue

Date of Issue January 19, 1990

Issued to Liberty Group

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. 89-2389 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

entire

APPROVED OCCUPANCY

veterinary clinic

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

1/19/90 *K. J. Case*
(Date) Inspector

[Signature]
Inspector of Buildings

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

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

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

Owner: Liberty Group Phone # _____
 Address: 38 Preble Street 15 Pearl Alley Olney Circus
 LOCATION OF CONSTRUCTION: 11041 Brighton Ave
 Contractor: Paul Boullieu Sub: (Michael Hoff - 761-2870)
 Address: 82 Beckett St - 04101 (ask questions)
 Est. Construction Cost: 11,000 Proposed Use: office just a room
 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: interior ren. as per plan tenant fit up

For Official Use Only **PERMIT ISSUED**
 Date: Nov 16, 1989 Subdivision Name: NOV 30 - 1989
 Inside Fire Limits _____ Lot _____
 Bldg Code: 7-00 Ownership: CITY OF PORTLAND
 Time Limit _____ Estimated Cost: 11,000
 Zoning: B-2
 Street Frontage Provided: _____ Back _____ Side _____
 Provided Setbacks: Front _____
 Review Required: NO outdoor kernels
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board approval: Yes _____ No _____ Site Plan _____ Subdivision _____
 Conditional Use: _____ Variance _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain): OK WDA 11-27-89

Foundation:

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: _____ Spacing 16" O.C.
4. Joists Size: _____ Size: _____
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____
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 _____ Weather Exposure _____
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 Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____
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: _____
 Service Entrance Size: _____ Smoke Detector Required

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: _____ Square Foot _____
2. Pool Size: _____
3. Must conform to National Electrical Code and State La _____

Permit Received By Deborah Goode

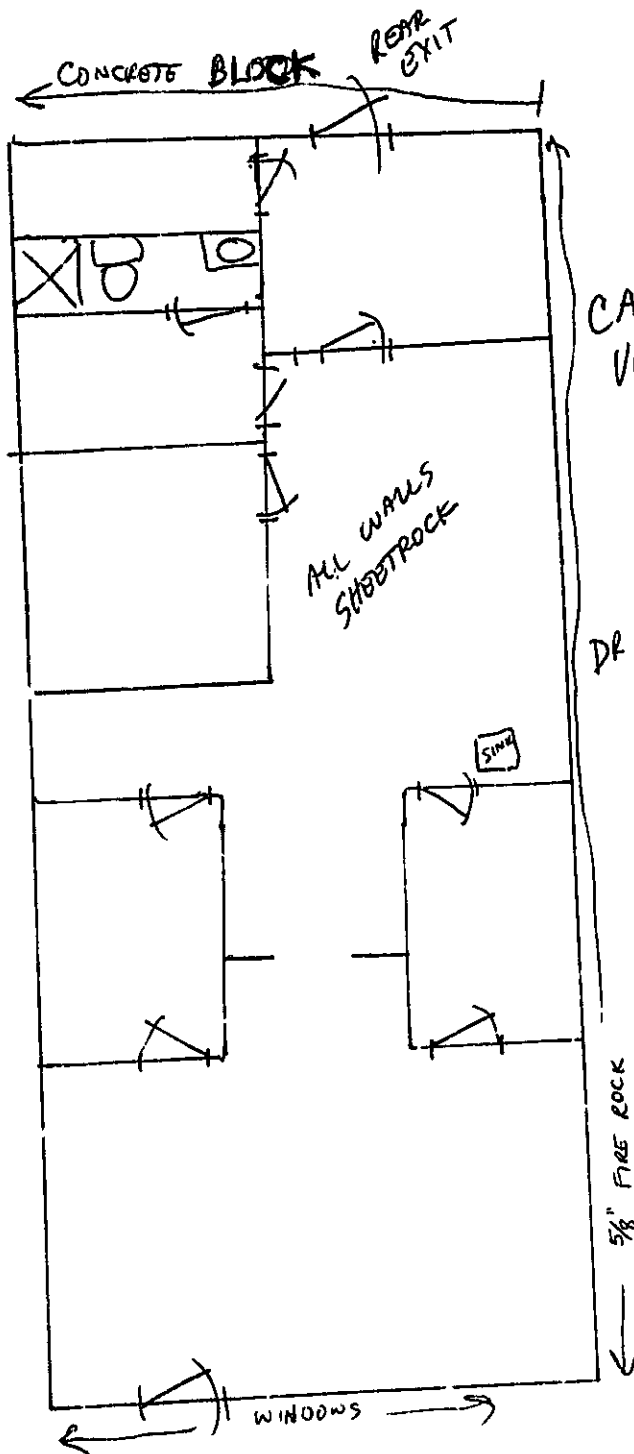
Signature of Applicant [Signature]

Signature of Inspector [Signature]

Inspection Date: _____

White-Tax Assessor Yellow-GPC White Tag-CEO

© Copyright G



CASCO BAY
VETERINARY
HOSPITAL

1041 BRIGHTON AVE
DR MICHAEL E. HOFF

1440 sq FT

RECEIVED
NOV 1 6 1989

NEW ENGLAND BUILDING INSPECTORS
CORPORATION



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

1041 Brighton Avenue

29 November 1989

Michael Huff
82 Beckett Street
Portland, ME 04101

Dear Mr. Huff:

Your application to do interior renovations has been reviewed and a permit is herewith issued subject to the following requirement(s):

1. Means of Egress to be in accordance with Section 24-2 of N.F.P.A. 101 Life Safety Code.
2. Portable fire extinguishers to be provided in accordance with Section 24-3.5.3 - see N.F.P.A. #10.
3. Means of Egress to be marked with illuminated exit signs in accordance with Section 5-10.
4. Exit access is not allowed through store rooms.

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

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

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Garroway, PFD

PLUMBING APPLICATION

PROPERTY ADDRESS
Town Or Plantation: Portland, Me.
Street Subdivision Lot #: 1091 BOSTON AVE
PROPERTY OWNERS NAME
Last: Liberty Group
Applicant Name: DANON REF
Mailing Address of Owner/Applicant (if Different): SEBON Rd Pub

PORTLAND 3751 9 TOWN COPY
Date: 1/24/90 L.P.L. # 011223
Local Plumbing Inspector Signature: _____
FEE: _____

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: 1/24/90

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: _____ Date Approved: JAN 24 1990

PERMIT INFORMATION

This Application is for
1. NEW PLUMBING
2. RELOCATED PLUMBING
JAN 4/90

Type Of Structure To Be Served:
1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY COMMERCIAL

Plumbing To Be Installed By:
1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER/MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER
LICENSE # 1262001

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District OR HOOK-UP: to an existing subsurface wastewater disposal system PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hose/bb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	- 1	Wash Basin
		Indirect Waste	- 1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
Number of Hook-Ups & Relocations				
Hook-Up & Relocation Fee				
		Fixtures (Subtotal) Column 2	- 3	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			- 3	Total Fixtures
			\$ 900.	Fixture Fee
			\$ -	Hook-Up & Relocation Fee
			\$ 900.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation: Portland
Street Subdivision Lot #: 1041 Bigelow Ave.

PROPERTY OWNERS NAME

Last: Liberty Group
Applicant Name: Daniel N. Bourque
Mailing Address of Owner/Applicant (if Different): Daniel Refrig
2500 R.D. Hub

PORTLAND 3730 TOWN COPY
Date: 12-8-89 License # 13100
L.P.L.O. # 123

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.
Daniel N. Bourque 12/8/89
Signature of Owner/Applicant Date

Caution: Inspection Required
I have inspected the installation authorized above and found it to comply with the Maine Plumbing Rules.
JAN 24 1990
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for:
1. NEW PLUMBING
2. RELOCATED PLUMBING
DEL 141989

Type Of Structure To Be Served:
1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY Commercial

Plumbing To Be Installed By:
1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER/MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER
LICENSE # 6001

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture		
	Number	Type of Fixture	Number	Type of Fixture	
<p>HOOK-UP, to public those cases where is not regulated at the local Sanitary District</p> <p>OR</p> <p>HOOK-UP, to an existing subsurface wastewater disposal system</p> <p>PIPING RELOCATION, of sanitary lines, drains, and piping without new fixtures.</p>	1	Hosebibb / Silcock		Bathtub (and Shower)	
	1	Floor Drain	1	Shower (Separate)	
		Urinal	1	Sink	
		Drinking Fountain	1	Wash Basin	
		Indirect Waste	1	Water Closet (Toilet)	
		Water Treatment Softener, Filter, etc	1	Clothes Washer	
		Grease/Oil Separator		Dish Washer	
		Dental Cuspidor		Garbage Disposal	
		Bidet		Laundry Tub	
		Other	1	Water Heater	
Number of Hook-Ups & Relocations	Fixtures (Subtotal) Column 2		9	Fixtures (Subtotal) Column 1	
Hook-Up & Relocation Fee	2	Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 1	
<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p>				1.1	Total Fixtures
				\$32.00	Fixture Fee
				\$	Hook-Up & Relocation Fee
				\$32.00	Permit Fee (Total)

Permit # 59 City of Portland BUILDING PERMIT APPLICATION Fee \$145.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form

Owner: 1041 Brighton Ave. Assoc. Phone # 772-0546
 Address: 25 Pearl Street, Portland, ME 04101 (contact person: Glen Gervais)
 LOCATION OF CONSTRUCTION 1041 Brighton Avenue
 Contractor: Liberty Group Sub. _____
 Address: 25 Pearl St., Portland, ME 04101 Phone # same as above

Est. Construction Cost: \$25,000.00 Proposed Use: travel agency
 Past Use: vacant
 # 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: Tenant fit-up Change of Use from vacant to travel agency with renovations. 2 sheets of plans.

For Official Use Only
PERMIT ISSUED
 Date: Jan. 4, 1990 Name: _____
 Inside Fire Limits: _____ Lot: JAN 20 1990
 Bldg Code: _____ Ownership: _____
 Time Limit: _____ Estimated Cost: \$25,000.00 City of Portland

Zoning: B-2 Zone
 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 _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain): DK WDA 1-25-90

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 Wall

- Studding Size _____ Spacing _____
- No. windows _____
- No. Doors _____
- Header Sizes _____ Spacing _____
- Bracing: Yes _____ No _____
- Corner Joists Size _____ Size _____
- Insulation Type _____ Size _____
- Sheathing Type _____ Size _____
- Siding Type _____ V. other Exposure _____
- Masonry Materials _____
- Me'l Materials _____

Interior Walls:

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

PERMIT ISSUED WITH LETTER

Ceiling:

- Ceiling Joists Size: _____
- Ceiling Strapping Size _____ Spacing _____
- Type Ceiling: _____ Size _____
- Insulation Type _____
- 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: _____ Square Footage _____
- Pool Size _____
- Must conform to National Electrical Code and State Law.

Permit Received By Joyce M. Rinaldi

Signature of Applicant Alan Duran Date 1/4/90

Signature of CEO Walter C. Gervais Date 1-17-90

Inspection Dates _____

2 Kathy Taylor

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

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CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 1041 Brighton Avenue

Issued to Liberty Group

Date of Issue January 19, 1990

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. 89-2951, 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

entire

APPROVED OCCUPANCY

photo studio

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

1/19/90
(Date)

[Signature]
Inspector

[Signature]
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 trustee for one dollar.

Permit # 01907 City of Portland BUILDING PERMIT APPLICATION Fee 60.00 Zone _____ Map # _____ Lot # _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: John Phallon Phone # 772-0548
 Address: 1041 Brighton Ave., Portland, Maine 04107
 LOCATION OF CONSTRUCTION (1041 Brighton Ave.) Bldg. 903 City of Portland
 Contractor: Mahaal E. Stouffer Subpa.
 Address: 5980 Harber Drive Harrisburg, Phone # 717-561-9831
 Est. Construction Cost: 7,800 Proposed Use: Photo Studio
 Past Use: New vacant space
 # 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 _____
 Ex. in Conversion To do interior finish work as per plans

For Official Use Only

Date December 14, 1989 Subdivision _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Ownership _____ Public _____
 Estimated Cost 7880 Private _____

Zoning: Street Frontage Provided: _____ Back _____ Side _____ Side _____
 Provided Setback: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: Variance _____ Sites Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) _____ **PERMIT ISSUED**

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

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

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

Interior Walls:
 1. Studding Size _____ Spacing _____
 2. Header Size _____ Sp _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

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

Roof: 00.00 Span _____ Size _____
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 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 oil 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 Latini

Signature of Applicant _____

Signature of CEO _____

Inspection Dates _____

PERMIT ISSUED 12/14/89
WITH LETTER