Form # P 04 DISPLAY THIS CARD ON PRINCIPA	L FRONTAGE OF WORK
Please Read Application And Notes, If Any, Attached	TLAND PERMIT ISSUED CTION Permit Numb
This is to certify that A & M PARTNERS LLC /I Wood	CITY OF PORTLAND
has permission to Tenant fit-up for suites 206 . 05	
AT 59 WASHINGTON AVE	L 013 I043001
of the provisions of the Statutes of the and of the the the construction, maintenance and the of buildings and this department.	
Apply to Public Works for street line         g n and we en permission           and grade if nature of work requires         the re this solding or entry	h processA certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire DeptArt Kelley. P.f.D. 10/28/05 Health Dept Appeal Board	Cu Cu A
other Department Name	Director - Building & Inspection Services
PENALTY FOR REMOVING	

Location of Construction:	4101 Tel: (207) 874-8703 Owner Name:			Address:		γ	Phone:	
				EXCHANG	Builden Antonia			
			Contra Port	ictor Address:	<u> </u>	)F P(	) RTPAND	
				t Type:				Zone:
	,		Alte	rations - Co	mmercial			84
Past Use:	Proposed Use:	<b></b>	Permi		Cost of Wo	r <b>k</b> :	CEO District:	4
Commercial		Tenant fit-up for		\$1,029.00		1.00	1	
	suites 2	Flor DOG ONI	FIRE	DEPT:	Approved		ECTION: froup:	Type: *)6
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Proposed Project Description	" and f			VIK-	28/00		- Λ.XY	Jugar
Tenant fit-up for suites 2		TUOY	Signat	ure 2.r.	101-1	Signa	ture: My	My
					IVITIES DIS	TRICT		g
	-		PEDE	STRIAN ACT			· · (	
			PEDES Action	STRIAN ACT			(P.A.D.)	Denied
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Permit Taken By:	Date Applied For:		PEDES Action	STRIAN ACT		proved v	/Conditions	Denied
<b>Permit Taken By:</b> ldobson		Special Zone or Re	PEDES Actior Signat	STRIAN ACT 1: Appro- ture: Zoning	wed Ap	proved v	/Conditions	
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## CERTIFICATION

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

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
	112211200	22	11101.12
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

<b>City of Portland, Maine - Bu</b> 389 Congress Street, 04101 Tel:	(207) 874-8703, <b>Fax:</b> (2	207) 87	4-8716	Permit No: 05-1575	Date Applied For: 10/27/2005	CBL: 013 I043001
Location of Construction:	Owner Name:			Wher Address:		Phone:
59 WASHINGTON AVE	A & M PARTNERS LL	.C		120 EXCHANGE	ST	
Business Name:	Contractor Name:		0	Contractor Address:		Phone
	A & M Partners / Lou W	Vood		120 Exchange Stre	et Portland	(207) 450-6128
Lessee/Buyer's Name	Phone:		P	ermit Type:		
				Alterations - Com	mercial	
Proposed Use:			Proposed	Project Description:		
Commercial/ Tenant fit-up for suites	206		Tenant	fit-up for suites 20	6	
Dept:       Zoning       Status:         Note:       1)       This permit is being approved or work.	Approved with Conditions			Marge Schmucka		Ok to Issue:
2) Separate permits shall be require	d for any new signage.					
Dept: Building Status:	Approved	Rev	viewer:	Mike Nugent	Approval Da	
Note:						Ok to Issue: 🔽
-	Approved	Rev	viewer:	Jay Kelley	Approval Da	
Note:						Ok to Issue:
1) Maintain all life safety requirement	ents NFPA72, 13					

## All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or **user** charges **on** any property within the City, payment arrangements must be made before permits **d** any kind are accepted.

Total Cause Footgan of Proposed Str	75 Washing TON ANE 2 Floor Sute Contractor
Total Square Footage of Proposed Str FRIERICE REACHTERIN'S	
	Owner: ATM PARTNERS LLC Telephone: Luchu
Tax Assessor's Chart, Block & LotChart#Block#Lot#	Wher: MAPPINT MER AND TELEPHONE: ALL MIL
	ROEXCHITISE = 7. 450-6128 POETLAND, Me OHIOI 450-6128
Lessee/Buyer's Name (If Applicable)	
NA	Applicant name, address & $cost Of$ telephone: Sittin $\mathbf{E} \rightarrow \mathbf{H}_{ij}$ , $\mathbf{H}_{ij}$ , Work: $\$ \leq \mathbf{J}_{ij} cl_{ij}$
	Fee: \$
Current use: VACAST	
If the location is currently vacant, what	at was prior use:KA66
Approximately how long has it been	vacant: <u>Ayrs</u>
Proposed use: OFFI SPACE	,
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Contractor's name, address & telepho	one: Nom PARINERS, HIL
Who should we contact when the pe	
Who should we contact when the pe Mailing address:	ermitis ready: <u>ACLE (1000) 450-&amp;/a-</u>
vidning address.	ermit is ready: <u>hear (1000) 450-&amp;/a-</u>
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We will contact you by phone when t	ermit is ready: $h car (1000) 750 \cdot 8/a$ - the permit is ready. You must come in and pick up the permit and ng any work, with a Plan Reviewer, <b>A</b> stop work order will be issued
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We will contact you by phone when t eview the requirements before startin and a \$100.00 fee if any work starts be	ermit is ready: $h car (1000) 750 \cdot 8/a$ - the permit is ready. You must come in and pick up the permit and ng any work, with a Plan Reviewer, <b>A</b> stop work order will be issued
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If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4<sup>th</sup> floor of City Hall

204