

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 071375

This is to certify that FIXED GEAR LLC / Corner the Building & Restoration
has permission to Change of use from Retail to Wholesale Office

AT 100 CONGRESS ST 016 D001001

provided that the person or persons who perform or supervise the work accepting this permit shall comply with all of the provisions of the Statutes of this State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procured before this building or part thereof is leased or occupied. **24 HOUR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Craig Chubb

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Handwritten Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

Permit No: 07-1375	Issue Date:	CBL: 016 D001001
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Location of Construction: 100 CONGRESS ST	Owner Name: FIXED GEAR LLC	Owner Address: 12 ATLANTIC ST	Phone:
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Business Name: Tom Landry Realestate	Contractor Name: Comerstone Building & Restoration	Contractor Address: 44 Coyle Street Portland	Phone: 2077759085
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Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B-1
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Past Use: Retail	Proposed Use: Commercial - Office " Tom Landry Realestate" Change of use from Retail to Realestate Office - add walls	Permit Fee: \$120.00	Cost of Work: \$10,000.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: SB
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Proposed Project Description:
Change of use from Retail to Realestate Office - add walls

Signature: *Craig Carr*
 Signature: *[Handwritten Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
 Action: Approved Approved w/Conditions Denied
 Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 11/06/2007	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/ conditions</i> Date: 11/27/07 <i>ABM</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ABM</i> Date: _____
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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
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 100 CONGRESS ST CBL 016 D001001

Issued to FIXED GEAR LLC /Cornerstone Building & Restoration Date of Issue 04/03/2008

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. 07-1375 , 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

Floor 1- Right Side

APPROVED OCCUPANCY

Business Use Real Estate Office
Use B
Type 5B
IBC 2003

Limiting Conditions:

This does not certify City of Portland Building Code compliance, only a change of use.

This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

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