

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

Location of Construction:		Owner:		Phone:		Permit No: <b>000059</b>	
Owner Address:		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		Permit Issued: FEB 11 2003	
Past Use:		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$ 30.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: A3 Type: 20 600-96	
				Signature:		Signature: <i>Huffman</i>	
Proposed Project Description:				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/>			
Permit Taken By:				Date Applied For:			
				Signature: _____ Date: _____			

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..

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

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

**PERMIT ISSUED WITH REQUIREMENTS**

Zone: CBL: *2003*

Zoning Approval.

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:

Approved  
 Approved with Conditions  
 Denied

Date \_\_\_\_\_

**PERMIT ISSUED WITH REQUIREMENTS**

CEQ DISTRICT

'COMMENTS'

2/2/00 Inspection of Temporary facility w/mike Collins. New walls closed in at bathroom/locker room area. walls non-bearing. Toilet facilities intact. There is also a set of wash sinks in women's with pro vent (mechanical). As of 2/2/00 Lt. Mac has not done Life Safety. JB  
2/7/00 MAC inspected JB

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 275 Marginal Way CBL 023-A-003

Issued to Linda Cardente

Date of Issue 2/8/00

**It is to certify** that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 000059, 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

Middle Section Known As "Sec A" 7,350 Sq.Ft.  
Green Area AS Par Plan Submitted

APPROVED OCCUPANCY

Temporary Sales And Fitness Center  
Use Group A-3  
Type 2B  
BOCA 96'

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

2/4/00  
(Date)

*Linda Cardente*  
Inspector

*Samuel J. [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.

02/07/00  
MAD

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
01/20/00

PRODUCER  
HRW Insurance Agency of MA Inc  
Caddell & Byers  
One Industrial Avenue  
Lowell, MA 01851

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

### INSURERS AFFORDING COVERAGE

INSURED  
Planet Fitness Center of Maine, Inc.  
DBA Planet Fitness  
275 Marginal Way  
Portland, ME 04101

INSURER A Hanover Insurance Co.  
INSURER B  
INSURER C  
INSURER D  
INSURER E

### COVERAGES

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

NSR LTS	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<input type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  <input type="checkbox"/> GEN AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PER <input checked="" type="checkbox"/> POLICY	BINDER 127874	12/23/99	12/23/00	EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/OPR AGG \$Included
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SOLE OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
	<input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS LIABILITY				TWO STATE STATUTORY LIMITS OTHER PER EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
	<input type="checkbox"/> OTHER				

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
 Re: 275 Marginal Way, Portland, ME  
 City of Portland is Additional Insured with regard to General Liability coverage - banner at 275 Marginal Way, Portland, ME

CERTIFICATE HOLDER	ADDITIONAL INSURED, INSURER LETTER	CANCELLATION
City of Portland Building Department Portland, ME		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES AUTHORIZED REPRESENTATIVE <i>Ronald A. Jaeger</i>

# CARDENTE PROPERTIES

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34 Diamond Street, Portland, Maine 04101

Phone (207) 775-5677 • Fax (207) 773-0066 • e-mail: cardprop@maine.rr.com

January 21,2000

David Caddell  
Code Enforcement Officer  
City of Portland

Mr. Caddell:

Please be advised that Planet Fitness Centers has leased a portion of the property located at 34 Diamond Street/275 Marginal Way and are hereby authorized to do construction work on the property.

If you have any questions, please contact Douglas Cardente on Monday, January 24,2000.

Sincerely,



Sandy Alexander  
Administrative Asst.

**THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE**

**PERMIT IS ISSUED**

**Building or Use Permit Pre-Application**

**Attached Single Family Dwellings/Two-Family Dwelling**

**Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the information below for a Building or Use Permit.

**NOTE\*\*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 of any kind are accepted.**

Location/Address/Construction (include Portion of Building): *275 Marginal Way*

Total Square Footage of Proposed Structure: *7,000*

Owner: *LINDA (Account)*

Tax Assessor's Chart, Block & Lot Number: *Chart# 023 Block# A Lot# 003*

Owner's Name (If Applicable): *DAVID LAIRD (Subdiv)*

Cost of Work: *\$ 30*

Proposed Project Description: (Please be as specific as possible) *Art U vacant to Temporary Sales/Workout center*

Contractor's Name, Address & Telephone: *Temporary Sales/Workout Center*

Current Use: *Temporary Sales/Workout Center*

Proposed Use: *Temporary Sales/Workout Center*

Rec'd By: *WPS*

Section A of Plans

1) A Copy of Your Deed or Purchase and Sale Agreement

2) A Copy of your Construction Contract, if available

3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/Framing details (including porches, decks w/railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: *David Laird*

Date: *1-21-00*

Building Permit Fee: \$30.00 for the 1st \$1000 cost plus \$6.00 per \$1,000.00 construction cost thereafter.

Additional Site review and related fees are attached on a separate addendum.

DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME

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