Form # P 04 DISPL	AY THIS (	CARD O	N PRINCIPAL	FRONT/	AGE OF WORK
Please Read Application And Notes, If Any, Attached	C	BU	PERMIT		Permit Number: 100443
This is to certify that	e Springer Inc/R. P	. Morrisor	lders		
has permission toD	ivide existing law	office into	oms	PEP	RMIT ISSHED
ATA65 Congress St					A015001
provided that the p of the provisions of the construction, n this department.	of the Statute	s of Ma <b>n</b> e	or commution a and of the com buildings and s	nces of t	his/permit shall comply with all the City of Portland regulating and of the application on file in City of Portland
Apply to Public Works and grade if nature of such information.		give n befo ti lath	d writte permissi per his builling or province	nust bu rocured ereof is I-in. 2 D.	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED. Fire Dept	(202)			an	Me Barles J11/18 Director - Building & Inspection Services
Department N		ENALTY F	OR REMOVING T		Director - bolicing & inspection Services

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City of Portland, Main	ae - Build	ding or Use ]	Permi	t Application	Per	mit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703						10-0443			027 A	015001
Location of Construction: Owner Name:					Owner	Address:			Phone:	
465 Congress St Le Springer Inc			с		15 Meadow Ln					
Business Name:		Contractor Name	:		Contra	ctor Address:	-		Phone	
		R. P. Morrison	Builde	ers	270 H	Roosevelt Tra	uil Windhar	n	2078929418	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial					Zogen - S			
Past Use: Commercial / Office 9 7 4 6 Office / Divide into 2 rooms.		e existing law office 913 Floor		w/ca	\$90.00 DEPT: Z nolitions	Cost of Wor \$7,00 Approved Denied		<b>`</b> ^	Type:\B	
Proposed Project Description: Dívide existing law office into 2 rooms.					Signat	-	VITIES DIST	Signature RICT (P.A.	, -200 MB <u>3</u> D.) nditions	3 1(1/10 Denied
					Signat	ure:		Da	ite:	
Permit Taken By:	Date Ap 04/29	plied For: /2010				Zoning	Approva	ıl	_	
			Spe	cial Zone or Review	ws T	Zonia	g Appeal		Historic Pre	servation
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> </ol>		Shoreland		Variance			Not in Distr	C ict or Landmark		
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		🗌 Weiland		Miscellaneous			Does Not R	cquire Review		
<ol> <li>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</li> </ol>			FI 🗌 FI	ood Zone		Conditio	nal Use		Requires Re	view
			Subdivision			Interpretation			Approved	
			🗌 Si	te Plan			d		Approved w	/Conditions
PERMI	TISS	SUED	Maj Date:	Winon MM	n M	Date:		A Date:	Denied G GAI	knor we
AM	x 11 <sup>2</sup>	010	~	-> 5/4/	ID .			y.	pals	2 Terra
Ci	ity of Por	tland						-	•	

#### 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 - Buil	ding or Use Permit		Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04101 Tel: (	0	10-0443	04/29/2010	027 A015001		
Location of Construction:	Owner Name:		wner Address:	_	Phone:	
465 Congress St	Le Springer Inc		15 Meadow Ln			
Business Name:	Contractor Name:	C	ontractor Address:		Phone	
	R. P. Morrison Builders		270 Roosevelt Trai	(207) 892-9418		
Lessec/Buyer's Name	Phone:	P	ermit Type:		•	
	Alterations - Commercial					
Proposed Use:	<u> </u>	Proposed	Project Description:			
Office / Divide existing law office int	o 2 rooms. 9th floor	Divide	existing law office	into 2 rooms.		
Dept: Zoning Status: A	pproved with Conditions	Reviewer:	Marge Schmucka	l Approval Da	ite: 05/04/2010	
Note:					Ok to Issue: 🗹	
1) Separate permits shall be required	I for any new signage.					
<ol> <li>This permit is being approved on work.</li> </ol>	the basis of plans submitted.	Any deviati	ons shall require a	separate approval be	fore starting that	
Dept: Building Status: A Note:	approved with Conditions	Reviewer:	Jeanine Bourke	Approval Da	nte: 05/11/2010 Ok to Issue: 🗹	
<ol> <li>Separate permits are required for hood exhaust systems and fuel tar</li> </ol>						
<ol> <li>Application approval based upon and approrval prior to work.</li> </ol>	information provided by app	licant. Any o	leviation from app	roved plans requires	separate review	
Dept: Fire Status: A Note:	pproved with Conditions	Reviewer:	Ben Wallace Jr.	Approval Da	nte: 05/10/2010 Ok to Issue: 🗹	
1) A separate Suppression System P	armit is required for all new a	annession	waterne or sprinkle			
	-			_		
<ol> <li>A separate Fire Alarm Permit is required for new systems; or for work effecting more than 5 fire alarm devices; or replacement of a fire alarm panel with a different model.</li> </ol>						
<ol> <li>The Fire alarm and Sprinkler syst Compliance letters are required.</li> </ol>	ems shall be reviewed by a li	censed conti	actor[s] for code co	ompliance.		
4) All construction shall comply with	h NFPA 1 and 101.					

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### BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY) or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

#### IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



## **General 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 of any kind are accepted.

Location/Address of Construction: 465	CONGRESS ST. PORTZANO.	9TH FLOOR					
Total Square Footage of Proposed Structure/A		Number of Stories					
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 0.27 A 0.15	Applicant * <u>must</u> be owner, Lessee or Buy Name Address City, State & Zip	IVED					
Lessee/DBA (If Applicable) RICHARDSON, WHITMAN, LARGE ¢	Owner (if different from Applicant) MANAGED BY Dept. of Build Name BOULAS PROPER HILLY OF PO	ling hispections					
BADGER	Address City, State & Zip	C of O Fee: \$ Total Fee: \$					
If vacant, what was the previous use?	Number of Resident	tial Units					
Is property part of a subdivision?	If yes, please name						
Project description: EXISTING LAW OFFICE : DIVIOUS CORNER OFFICE INTO Z ROOMS · REMOVE 14 OF EXISTING WALL & BUILD NEW WALL TO EXPAND CONFERENCE · LOWER HEIGHT OF EXISTING PARTICLE FOR LIGHT,							
Contractor's name: R. P. MORRIS	ON BUILDERS						
Address: 270 RoosEvelt	TRAIL XX MON						
City, State & Zip WIHOHAM		Telephone: 892-9418					
Who should we contact when the permit is rea	dy: ROLAND MORRISON	Telephone: <u>C50-6888</u>					
Mailing address:ABOVE	·						

# Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work 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:	RU	P. Man	Date:	4-29-10	)

This is not a permit; you may not commence ANY work until the permit is issued



