DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And	CITY	OF PORTL		PERMIT ISSUED	
Notes, If Any, Attached		PERMIT	Permit N	umber: 051472 OCT 1 9 2005	
This is to certify thatEL has permission toTel		MPAN mark		CITY OF PORTLAND	<u> </u>
provided that the p	erson or persons.	m or ation	29 E001001	nit shall comply with	n all

provided that the person or persons, and or leave ation and epting this permit shall comply with all of the provisions of the Statutes of I line and of the ances of the City of Portland regulating the construction, maintenance and up of buildings and substances, 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.

n fication inspect in must generally in permit on procuble re this ding or at thereoder in the permit of the permi

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

~	IRED APPROVA	ALS	10-	-05	-
Fire Dept. Weg	CHARYS	TFD	10-	-01	
Health Deptl					
Appeal Board					
Other					
	rtment Name				

Grector - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, N 389 Congress Street,		0		* *	11	rmit No -05	472	PERM	ti 199		29 E0	01001
Location of Construction:		Owner Name:	, 1 ax.	(201) 014-01		r Addre	_			Dis		
130 MIDDLE ST		ELC LIMITE	DLIAB	ILITY COMP		IILK S	1	OCT	192	2005	inc.	
Business Name:		Contractor Name		TETT COM			ddress:			Pho	ne	<u> </u>
		Benchmark			1		1 '	AstA-OK	DUD.			600
Lessee/Buyer's Name		Phone:		Γ		t Type:		ATT VI	run	LUMIN		Zone:
					Alte	ration	ıs - Cor	nmercial				53
Past Use:		Proposed Use:		J	Perm	it Fee:		Cost of Wo	rk•	CEO Di	strict:	1
Commercial		Commercial/	Tenant I	Fit-up/ new			36.00		00.00	CEO D.	1	
		doors at entrai			FIRE	DEPT		Approved		ECTION:		<u> </u>
		j	tund	Doors			L	Denied	Use G	Group: T	3	Туре: 26
Proposed Project Description	<u> </u>				4					10/	X	A
Tenant Fit-up/ new doc							N ACT	VITIES DIS	Signat		luy	Cul
					Actio		Appro			v/Conditio	ns 🗍	Denied
					Signa	ture:				Date:		
Permit Taken By:	Date Ap	oplied For:				Z	oning	Approv	al			
ldobson	10/12	2/2005						, 11				
1. This permit applica	ation does not	preclude the	Spe	cial Zone or Revi	ews		Zoni	ng Appeal		Histo	ric Pres	ervation
Applicant(s) from Federal Rules.			☐ Sh	oreland			Varianc	e		Not	in Distric	ct or Landmar
2. Building permits d septic or electrical		olumbing,	🗆 w	etland Miscellaneous		aneous		_ Does	Not Red	quire Review		
3. Building permits a within six (6) mont	ths of the date	of issuance.	☐ Flood Zone		Conditional Use				uires Rev	iew		
False information in permit and stop all	-	a building	[_] Su	ıbdivision			Interpre	tation		App	roved	
			Sin	te Plan			Approve	ed		App	oved w/0	Conditions
			Maj [Minor MN			Denied		ŀ	Deni	ed	
			OK	- TU						A	pu	
			Date:	10/14	27	Date:			I	Date:		-
				, , , , (1	y ec	Han	Sepon
									(e	Min.	ε> Τ	400m
									1	- Keri	s An	-kff
									6.	c () •-		
			C	ERTIFICATI	ON							
hereby certify that I an												
have been authorized b	y the owner to	make this appli	ication a	as his authorize	d ageni	and I	agree	to conform	to all a	pplicabl	e laws	of this
jurisdiction. In addition	, if a permit fo	r work described	d in the	application is i	ssued,	I certii	fy that	the code o	fficial's	authoriz	ed repr	esentative
shall have the authority to such permit.	o emer all are	as covered by st	си регп	un at any reaso	naoie h	our to	entore	te the prov	vision of	i ine cod	c(s) app	piicable to
SIGNATURE OF APPLICAN	NT			ADDRES	S			DAT	 E		PHO	NE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE			_			DAT			PHO	NF.

•			ilding or Use Permi (207) 874-8703, Fax: (6	Permit No: 05-1472	Date Applied For: 10/12/2005	CBL: 029 E00100)1
		04101 161:	, ,	(201) 814-811				<u>ļ</u>	
	of Construction:		Owner Name:			wner Address: 0 MILK ST		Phone:	
	IDDLE ST			ELC LIMITED LIABILITY COMP 20					
Business Name:			Contractor Name:		Co	ontractor Address:		Phone	
			Benchmark		3	4 Thomas Dr. We	estbrook	(207) 591-760)()
Lessee/Buyer's Name			Phone:		Pe	ermit Type:		•	
					L	Alterations - Com	mercial		
Proposed	Use:			Propos	ed :	Project Description:			
Comme floor	ercial/ Tenant F	Fit-up/ new doo	ors (interior) at entrance -	- 2nd Tena	nt I	Fit-up/ new doors	at entrance		
Dept:	Zoning	Status:	Approved	Reviewer	:	Marge Schmucka	l Approval Da	ite: 10/14/20	005
Note:	C							Ok to Issue:	⋥
Dept:	Building	Status:	Approved	Reviewer	:	Mike Nugent	Approval Da	_	_
Note: Dept:	Fire Excellent Life	Status:		Reviewer		Cptn Greg Cass	Approval Da		005
7,000		•	in means of egress.						

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 of any kind are accepted.

Location/Address of Construction: (30	MINDLE ST 2ND FLO	OOR
Total Square Footage of Proposed Structu	re Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: 130 Lunted Lianlity (42 Market ST.	Co. Telephone: 774 - 1000
Lessee/Buyer's Name (If Applicable) Pursy Powers CPA 5 775-3496	Applicant name, address & telephone: Beactmark, 34 7ttom45 PRWE WESTREDOK	Cost Of Work: \$ 35,000 Fee: \$ 336
Current use: OFFICE If the location is currently vacant, what wa	s priorusa: OFFICE (SAME T	ENNAME
Proposed use: Construct New Project description:	nt:	Elling this
Contractor's name, address & telephone:	BENCHMARK (MBOVE) 52 5	91-7600
Who should we contact when the permit is Mailing address: We will contact you by phone when the pereview the requirements before starting and a \$100.00 fee if any work starts before	ermit is ready. You must come in and p y work, with a Plan Reviewe. Assiop w	bick up the permit and cirk order will be issued
THE REQUIRED INFORMATION IS NOT INCLU	DED IN THE SUBMISSIONS THE PERMIT WILL	LE BE AUTOMATICALLY

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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 of applicant:	Daniel O	fraull	Berchuste	Date:	10-12-05	
	,		/			

This is NOT a permit, you may not commence ANY work until the permit is issued.

If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



CITY OF PORTLAND BUILDING CODE CERTIFICATE 389 Congress St., Room 315 Portland, Maine 04101

ТО:	Inspector of Buildings City of Portland, Maine Department of Planning & Urban Development Division of Housing & Community Service
FROM:	Michael R. Charek
RE:	Certificate of Design
DATE:	10/10/05
These plan	ns and / or specifications covering construction work on:
Purd	y Powers Office Renovations - 2nd Floor, Middle St, Portland ME 04101
130	Middle St, Portland ME 04101
Have been	designed and drawn up by the undersigned, a Maine registered Architect/
d to the brief, in a	EAL) Signature: CHAREK Title: Pongpal
	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
As per Ma	sine State Law Firm: Michael Cherch Architect
\$50,000.00 expansion,	or more in new construction, repair addition, or modification for r Structures, shall be prepared by a Address: 25 Hartley St Portland, ME 04103

registered design Professional.

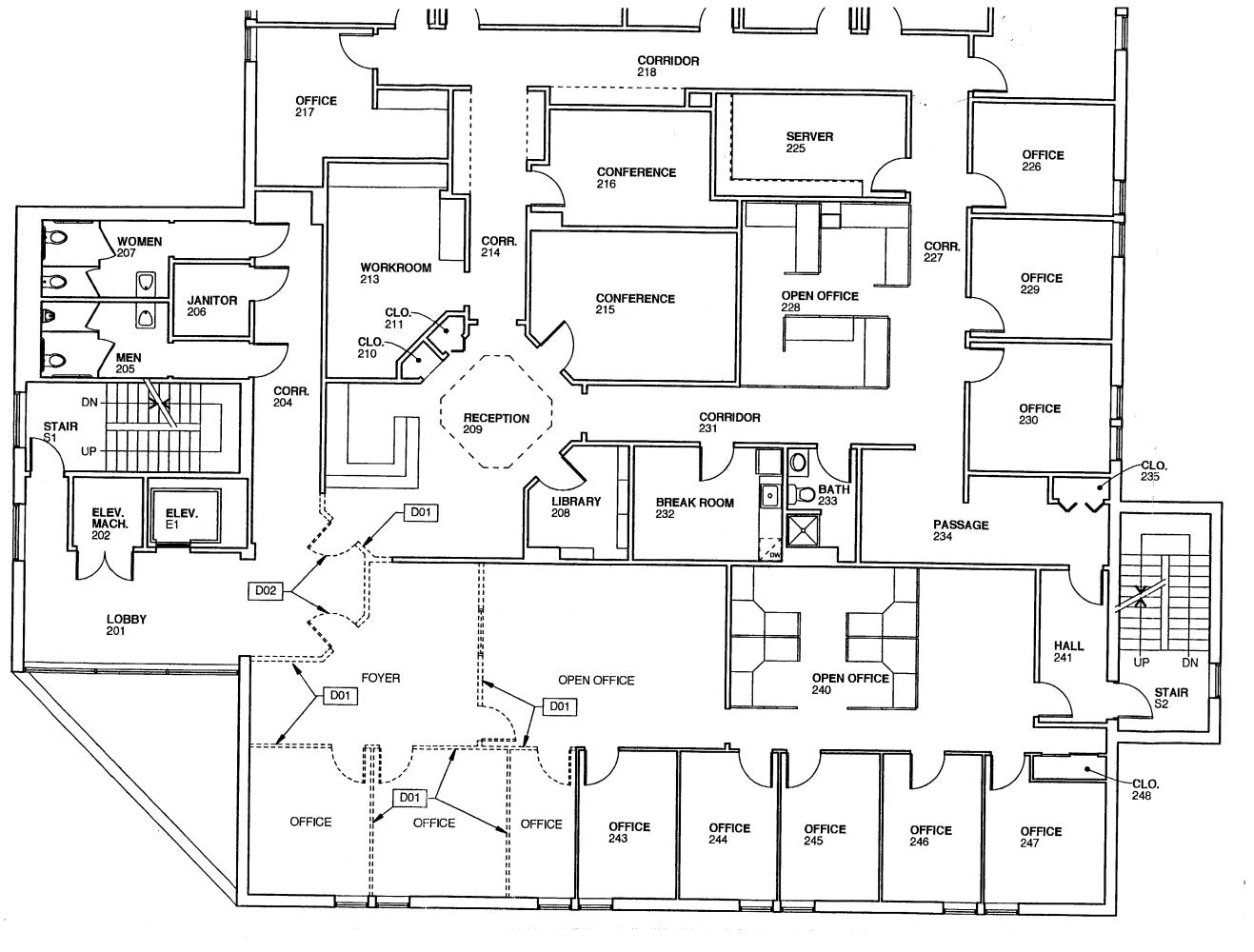


CITY OF PORTLAND BUILDING CODE CERTIFICATE 389 Congress St., Room 315 Portland, Maine 04101

ACCESSIBILITY CERTIFICATE

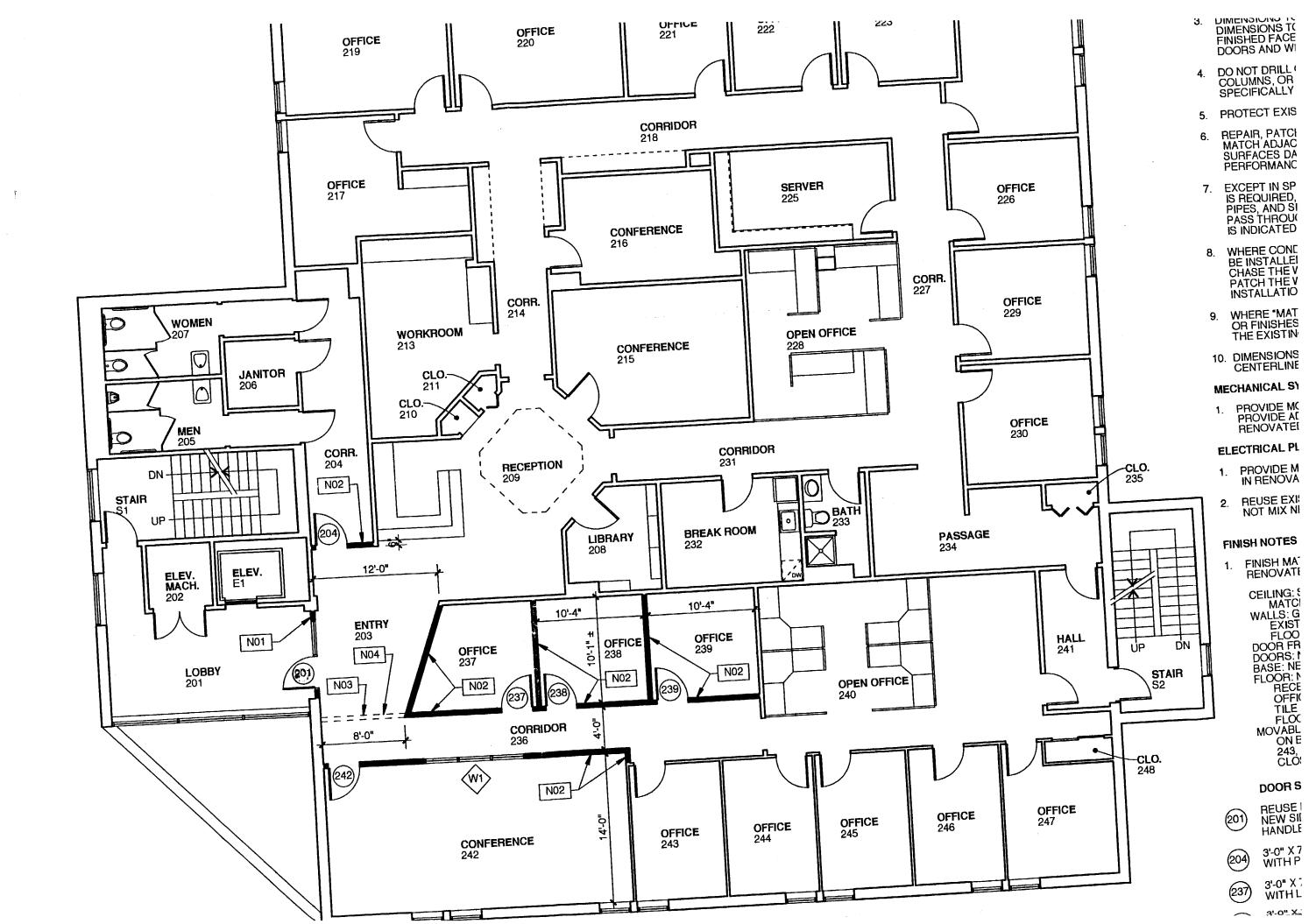
Designer:	Tichael F. Charek
Address of Project: _	130 Middle St, Portland 04/01
Nature of Project:	Renovation of existing 2nd
	floor office space.
have been designed	to the best of his knowledge agrees that sions covering the proposed construction work as described above in compliance with applicable referenced standards found in the Law and Federal Americans with Disability Act.
	Signature: Llu Ol
	Title: Principal
(SEAL)	Firm: Michael Charele Architects
(SEAL) STERED ARCH STERED ARCH CHAPEN	Address: 25 Hartley St
R. CHAREK Ma. 1174	Portland, ME 04103
	Phone: 761-0556

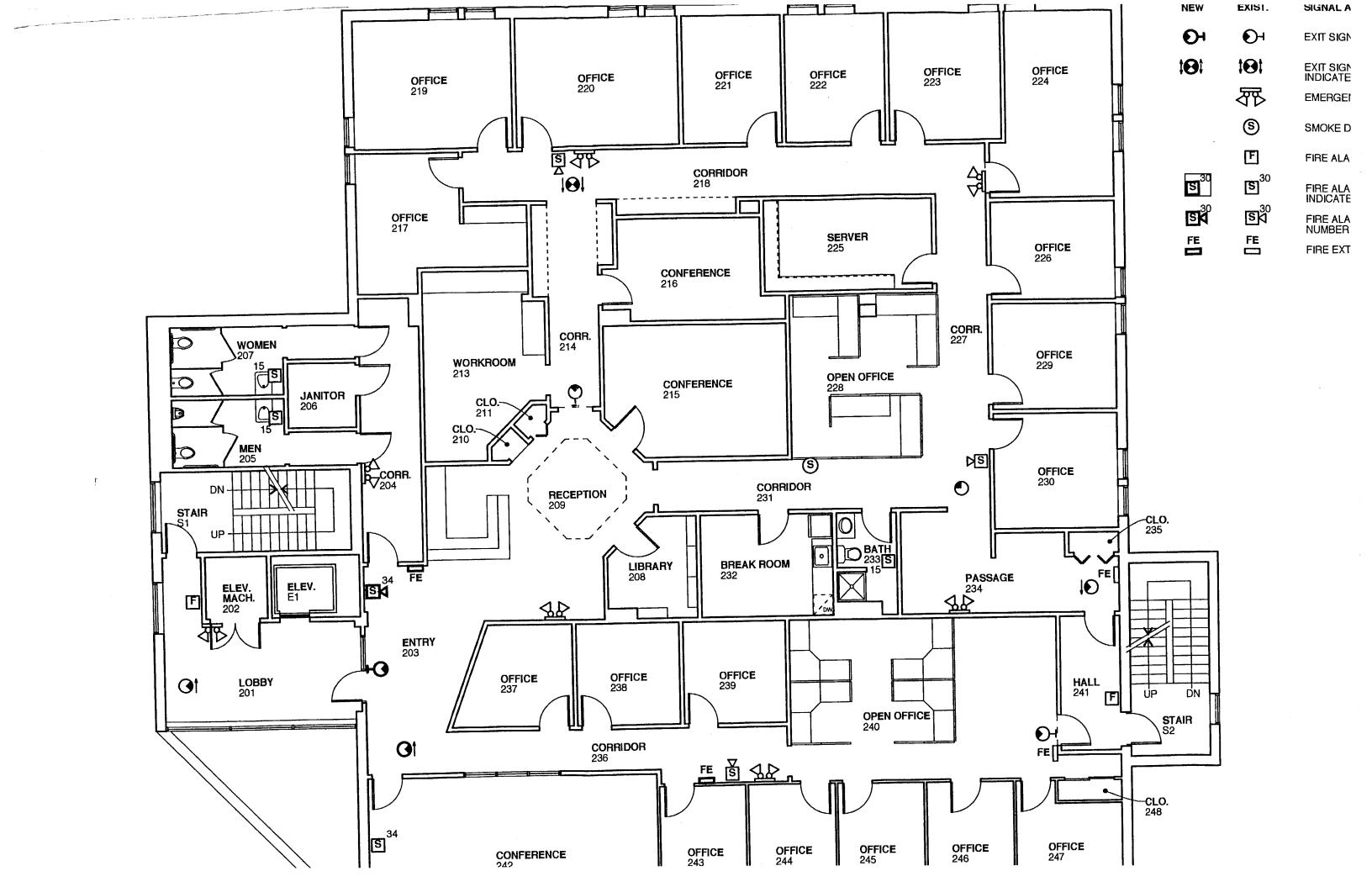
FROM DESIGNER: Michael R.	Charek
DATE: 10/10/05	
Job Name: Purdy Powers	Office Removitions
Address of Construction: 130 middle	
To the best of my	
Construction project was designed according	
Building Code and Year 1BC 20.3 Use Gro	oup Classification(s) B
	Hing - believed to be 11B)
Will the Structure have a Fire suppression system in Accordance	
Is the Structure mixed use? Ho if yes, separated or non sep-	
Supervisory alarm system? Geotechnical/Soils report r	
STRUCTURAL DESIGN CALCULATIONS Submitted for all structural members	Live load reduction (1603.1.1, 1607.9, 1697.10)
(106.1, 106.1.1)	Roof live loads (1808.1.2, 1807.11)
DESIGN LOADS ON CONSTRUCTION DOCUMENTS (1803)	Roof snow loads (1603.1.3, 1808)
Uniformly distributed floor live loads (1603.1.1, 1607)	Ground snew load, Pg (1608.2)
Elear Area I lea	If P _g > 10 pst, flat-roof snow load, P _f (1808.3)
TOOL Alea Ose	If Pg > 10 psf, snow exposure factor, Cs (Table 1608.3.1)
	if P _g > 10 psf, snow load importance factor, I _e (Table 1604.5)
£ 5	Roof thermal factor, Ct (Table 1608.3.2)
1 3 4	Sloped roof snowload, P. (1606.4)
2 3 3	Seismic design category (1616.3)
Wind loads (1603.1.4, 1609)	Basic seismic-force-resisting system
Design option utilized (1609.1.1, 1609.6)	(Table 1617.6.2)
Basic wind speed (1609.3)	Response modification coefficient, R, and deflection amplification factor, C _d (Table 1617.6.2)
Building category and wind importance factor, I _w (Table 1604.5, 1609.5)	Analysis procedure (1616.6, 1617.5)
Building category and which importance factor, Iw (Table 1604.5, 1609.5) Wind exposure category (1609.4)	Design base shear (1617.4, 1617.5.1)
internal pressure coefficient (ASCE 7)	Flood loads (1603.1.6, 1612)
Component and cladding pressures (1609.1/.1, 1609.6.2.2)	Flood hazard area (1612.3)
Main force wind pressures (1609.1.1,	Elevation of structure
P 2 3 1609.6.2.1)	Other loads
Earthquake dealgn data (1603.1.5, 1614 - 1623)	Concentrated loads (1607.4)
Design option utilized (1814.1)	Partition loads (1607.5)
Selsmic use group ("Category") (Table 1604.5, 1616.2)	Impact loads (1607.8)
Spectral response coefficients, Sps & Sp1 (1615.1)	Misc. loads (Table 1607.6, 1607.8.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)
Site class (1615.1.5)	



- DEMOLISH INTERIOR PARTITIONS, FLOO SYSTEMS, AND BUILDING COMPONENTS REMOVED.
- 2. BEFORE CUTTING OR REMOVING STRUC COMPONENTS, EXPOSE AFFECTED ARE STRUCTURE FOR INSPECTION BY THE A
- 3. PROTECT PORTIONS OF BUILDING ADJAI AFFECTED BY SELECTIVE DEMOLITION. DEMOLITION UNTIL TEMPORARY DUST F INSTALLED AND APPROVED BY OWNER.
- REMOVE AND LEGALLY DISPOSE OF DEN MATERIALS OFF- SITE.
- 5. ASBESTOS AND HAZARDOUS MATERIALS REMOVAL WORK IS NOT PART OF THIS C
- SUBMIT FOR APPROVAL SELECTIVE DEM INCLUDING SCHEDULE AND METHODS FOR CONTINUING UTILITY SERVICE.
- 7. COMPLY WITH GOVERNING CODES AND I EXPERIENCED WORKERS.
- ADJACENT AREAS OF THE WORK WILL B OWNER DURING SELECTIVE DEMOLITION
- 9. DO NOT DAMAGE BUILDING ELEMENTS AI INDICATED TO REMAIN. ITEMS OF SALVA INCLUDED ON SCHEDULE OF SALVAGE IT RETURNED TO OWNER MAY BE REMOVED STRUCTURE. STORAGE OR SALE OF ITEL SITE IS PROHIBITED.
- 10. CEASE OPERATIONS IF PUBLIC SAFETY C STRUCTURES ARE ENDANGERED. PERFO CORRECTIVE MEASURES UNTIL OPERATI CONTINUED PROPERLY.
- 11. CONTRACTOR WILL BE RESPONSIBLE FOI SECURITY AND WEATHER PROTECTION T CONSTRUCTION.
- 12. ITEMS TO BE REMOVED FROM SITE BY CC

 - A. PORTIONS OF BUILDING AS NOTED
 B. SELECTED PARTITIONS AS NOTED.
 C. MISCELLANEOUS ITEMS OF EXISTING
 - AS NOTED.
- 13. ITEMS TO REMAIN IN PLACE AND PROTEC
 - A. ALL ITEMS NOT SCHEDULED TO BE RE
- 14. ITEMS TO BE SALVAGED FOR REINSTALLA PROJECT:
 - A. EXISTING DOORS AND FRAMES AS NO







CITY OF PORTLAND, MAINE

Department of Building Inspections

			_	20
		_		
Received from				
Location of Work				
Cost of Construction	\$			
Permit Fee	\$	-		
Building (IL) Plui	mbing (I5)	Electrical (I	2) Site	Plan (U2)
Other		_		
CBL:				
Check #:		Total C	ollected	\$

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy