Cit	ty of Portland, Ma	aine - Buil	ding or Use l	Permi	t Application	n   1	Permit No:	Issue Date	:	CBL:		
389	Congress Street, 04	4101 Tel: (2	207) 874-8703	, Fax: (	(207) 874-871	6	10-0473			032 E00	05001	
Location of Construction: Owner Name:						Owner Address:				Phone:		
45	EXCHANGE ST		45 EXCHANGE STREET LLC			1 CITY CENTER						
Busi	iness Name:		Contractor Name:			Contractor Address:				Phone		
			Pella Windows & Doors Inc			45 Fondi Road Haverhill				80086698	8008669886	
Lessee/Buyer's Name Phone:						Permit Type:				•	Zone:	
						Replacement windows						
Past Use: Proposed Use:						Permit Fee: Cost of Work:			k:	CEO District:		
Co	mmercial - retail & of	ffices	Commercial -	Commercial - retail & offi			\$190.00	\$16,14	14.00	) 1		
			Install 6 replacement wi		windows no	FIRE DEPT:		Approved	INSPE	CTION:		
			structural					Denied	Use G	roup:	Type:	
								_ =				
Prop	posed Project Description:											
Ins	stall 6 replacement wir	idows no stri	uctural							gnature:		
							DESTRIAN ACT	IVITIES DIST	TRICT (	(P.A.D.)		
						Act	tion: Appro	ved App	proved w	/Conditions	Denied	
						Sig	nature:			Date:		
Permit Taken By: Date Applied For:			oplied For:			Zoning Approval			.1			
	obson	05/05/2010		Zomng	Approva	11						
1	This parmit applicati	ation does not preclude the Special Zone or Reviews		ws	Zoning Appeal			Historic Preservation				
<ol> <li>This permit application does not Applicant(s) from meeting appli Federal Rules.</li> </ol>		•	Shoreland		☐ Varianc	Variance		Not in District or Landmark				
2. Building permits do not include properties or electrical work.			plumbing,	Wetland			Miscellaneous			Does Not Require Review		
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				Flood Zone		Condition	Conditional Use		Requires Review			
				Subdivision Site Plan		Interpre	Interpretation		Approved	Approved		
						Approved			Approved w/Conditions			
				Maj Minor MM			Denied			☐ Denied		
				Date:			Date:			Date:		
that this repa	ereby certify that I am I have been authorize jurisdiction. In additi resentative shall have to e(s) applicable to such	ed by the own ion, if a perm the authority	ner to make this nit for work desc	amed pr applica cribed in	tion as his author the application	he p orize n is i	ed agent and I a ssued, I certify	agree to con that the co	form to de offic	all applicable cial's authorized	laws of	
CIC	MATURE OF APPLICANT	r			A DDDEC	C		T) A ITT	,	DITO	NIE.	
SIGNATURE OF APPLICANT					ADDRESS		DATE		L.	PHONE		

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Business Name:	Contractor Name:		Contractor Address:		Phone					
	Pella Windows & Doors	s Inc	45 Fondi Road Haverh	ill	8008669886					
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:					
			Replacement windows	1						
Dept: Historic Stat	us: Approved with Conditions	Reviewer:	Deborah Andrews	Approval Da	ite: 05/07/2010					
Note:					Ok to Issue: 🗹					
* Glass to be clear with no	ame to match those installed on w low-e coating. Market Street facade to be repla			date.						
Dept: Zoning State	us: Approved with Conditions	Reviewer:	Marge Schmuckal	Approval Da	te: 05/05/2010 Ok to Issue: ✓					
1) ANY exterior work requires	s a congrete review and approve	al thru Uistorio	Procognition This prop		<u> </u>					
District.	s a separate review and approva	ii uiiu iiistorie	rreservation. This prop	erty is located w	iumi an instoric					
2) This property shall remain a retail on the ground floor and office above Any change of use shall require a separate permit application for review and approval.										
3) This permit is being approv work.	ed on the basis of plans submitt	ted. Any devia	tions shall require a sep	arate approval b	efore starting that					
Dept: Building Stat	us: Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	ite: 05/20/2010					
Note:					Ok to Issue: 🗹					
1) Application approval based and approrval prior to work		applicant. Any	deviation from approve	ed plans requires	separate review					
•	us: Approved with Conditions	Reviewer:	Ben Wallace Jr.	Approval Da						
Note:					Ok to Issue:					
1) All construction shall comp	ly with NFPA 1 and 101.									
Comments:										
5/7/2010-gg: received permit fr	om historic on 05/07/10. /gg									
	CE	CRTIFICATIO	)N							
I hereby certify that I am the ow that I have been authorized by the this jurisdiction. In addition, if a representative shall have the authorde(s) applicable to such permi	ne owner to make this application a permit for work described in the hority to enter all areas covered	on as his autho the application	rized agent and I agree t is issued, I certify that t	to conform to all he code official's	applicable laws of authorized					

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE