Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

В CTION

This is to certify thatA & M PARTNERS INC /A	M Partne Wood	
nas permission tointerior office demo- ceiling,	nting, de non-b ng inter walls JAN 3 0 2003	
NT .396 CONGRESS ST 2nd flr 201	032 \$001091	
provided that the person or persons,	m or ention epting this permit shall comply w	vith all

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provided that the person or persons. of the provisions of the Statutes of I the construction, maintenance and u this department.

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

ication insped n must h and w n permi n procu g ding or b re this t thered ed or o osed-in. IR NOTICE IS REQUIRED.

of buildings and sa

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

1/30/08

OTHER REQUIRED APPROVALS

Cease Fire Dept.

Health Dept.

Appeal Board

Other Department Name

ances of the City of Portland regulating

ctures, and of the application on file in

PENALTY FOR REMOVING THIS CARD

Cit	y of Portland, Maine	e - Buil	ding or Use	Permi	t Application	n F	Permit No:	Issue Date	:	CBL:		
•	Congress Street, 04101		•			- 1	08-0062			032 G0	01001	
Loca	ntion of Construction;		Owner Name:		<u> </u>	Owr	ner Address:	•		Phone:		
396 CONGRESS ST 2nd flr 201 A & M PAR'			A & M PART	NERS INC		120 EXCHANGE ST						
Busi	ness Name:		Contractor Name	ne:		Con	tractor Address:			Phone		
			A & M Partne	A & M Partners / Lou Wood			120 Exchange Street Portland			20745061	2074506128	
Lessee/Buyer's Name Phone:		Phone:	one:		Permit Type:			•	Zone: 2			
						De	emolitions - In	terior			ピン	
Past Use: Proposed Use:			Proposed Use:			Permit Fee: Cost of Work:			k:	CEO District:		
· ·		Commercial -	- Office - interior		\$50.00 \$2,500.0		00.00	0 1				
			office demo- ceiling, lighting, demo			Apploved		INSPE	SPECTION:			
			non-bearing interior walls		alls	Denied Us		Use Gr	re Group: B Type: Z TBC 2003			
							L_	_ Demed		<i> </i>	- 555	
									-	TBC 2	1005	
Prop	osed Project Description:		•			1			Ĉ	≤ 10	1	
inte	erior office demo- ceiling,	lighting,	, demo non-bear	ing inte	rior walls	Signature: Signature:						
						PEDESTRIAN ACTIVITIES DISTRICT (P.A.Ø.)			
						Act	ion: Appro	ved App	proved w	/Conditions Denjed		
										i	201	
				_		Sigi	nature: (4))	Date: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0 <u>U</u>	
	nit Taken By:		oplied For:			Zoning Approval						
ldc	obson	01/22	2/2008							T		
1.	This permit application of			Spe	cial Zone or Revie	ws	ws Zoning Appeal			Historic Preservation		
Applicant(s) from meeting applicable St		cable State and	Shoreland		☐ Variance			Not in District or Landmar				
	Federal Rules.											
2.	2. Building permits do not include plumbing,			Wetland			Miscellaneous			Does Not Require Review		
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			☐ Flood Zone		Conditional Use			Requires Review				
			a building	Subdivision		Interpretation			Approved			
	permit and stop an work.	••										
				L Si	te Plan		Approv	ed		Approved w/	Conditions	
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	reby certify that I am the over been authorized by the											
	diction. In addition, if a p											
	have the authority to ente											
	permit.		•	-	·			•		() 1	-	
SIGN	NATURE OF APPLICANT				ADDRESS	2		DATE		PHO	NE	
JIUI	MI ORL OF AFFLICANT				ADDRES	,		DATE		rHU	NE	
RES	PONSIBLE PERSON IN CHAR	RGE OF W	ORK, TITLE					DATE		PHO	NE	

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 08-0062 01/22/2008 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 032 G001001 Location of Construction: Owner Name: Owner Address: Phone: 120 EXCHANGE ST 396 CONGRESS ST 2nd flr 201 A & M PARTNERS INC Contractor Address: Business Name: Contractor Name: Phone A & M Partners / Lou Wood 120 Exchange Street Portland (207) 450-6128 Lessee/Buyer's Name Phone: Permit Type: Demolitions - Interior Proposed Use: Proposed Project Description: Commercial - Office - interior office demo- ceiling, lighting, demo interior office demo- ceiling, lighting, demo non-bearing interior non-bearing interior walls walls Status: Approved Reviewer: Marge Schmuckal 01/23/2008 Dept: Zoning Approval Date: Ok to Issue: Note: Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 01/30/2008 Note: Ok to Issue: 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process. 2) This is a demolition permit only. No other construction activity is allowed.

Reviewer: Capt Greg Cass

Approval Date:

01/23/2008

Ok to Issue:

Status: Approved with Conditions

1) All means of egress to remain accessible at all times

Dept: Fire

Note:

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.

	4					
Location/Address of Construction: 400	Concress Street 2007	1000 201				
Total Square Footage of Proposed Structure/Area Square Footage of Lot NA NA						
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	* Telephone:				
Chart# Block# Lot#	Name Arm Suchus, INC					
32 6	Address 20 Exdug Sr					
	City, State & Zip Polled, WG					
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of				
	Name 1 SAMR	Work: \$ 2,500,7107				
	Address	C of O Fee: \$				
	City, State & Zip	Total Fee: \$				
Current legal use (i.e. single family)	e					
If vacant, what was the previous use?	k .	The state of the s				
Proposed Specific use: Office						
Is property part of a subdivision? N/A	If yes, please name	0.710				
Project description: Interior office	Deuro Remove Celling Gr	ud + hles, Kennove				
Project description: Interior office Carpet, Remove highling,	Down interior Non-Be	a walls (see flu				
Closens						
Contractor's name: Arm Partines die.						
Address: BUExcher ST.						
City, State & Zip Parlled, We Telephone: 450-6/28						
Who should we contact when the permit is ready: Loud Telephone:						
Mailing address:						
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						
nay request additional information prior to the issuance of a permit. For further information or to download copies						
his form and other applications visit the Inspections Division on-line at www.portlandmaine.gov , or stop by the Inspections Division office, room 315 City Hall or call 874-8703.						
hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and						
hat I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable						
nws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's						
uthorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the code, applicable to this permit.						
novisions of the code, apprecion to this period.	1					
Signature:	Date: 1/17/18					
This is not a permit; you may not commence ANY work until the permit is issue						

