Cit	y of Portland, Maine -	Building or Use Pe	rmit A	Application			Issue Dat	e:	CBL:		
	,	G				04-0445			032 I001	001	
Loca	ation of Construction:	Owner Name:			O	wner Address:	•		Phone:		
					100 Silver St						
		Contractor Nam	Contractor Name:			ontractor Address	Phone				
		Benchmark	Benchmark			50 Main St So. P	207874296	2078742963			
Less	see/Buyer's Name	Phone:	hone:			rmit Type:	•	Zone:			
					1	Alterations - Con	nmercial				
Past	t Use:	Proposed Use:		•	P	ermit Fee:	Cost of Wo	rk:	CEO District:	Ī	
Off	fice Space	_	demolish interior		\$381.00		\$40,0	40,000.00			
	1	_			F	RE DEPT:			CTION:		
				nce in 184 -				Use G	roup:	Type	
		above first floo	r			<u>L</u>	_ Dellied				
			Owner Name: Buckstar Llc 100 Silver St Contractor Name: Benchmark 650 Main St So. Portland Proposed Use: Office Space:demolish interior partitions in 180 and 188; expand bath for ADA compliance in 184- above first floor Permit Fee:								
Prop	posed Project Description:	'									
Rei	move walls in 180 and 188;	mplian	ce in 184	Signature: Si			Signatu	ignature:			
				PEDESTE			TRIAN ACTIVITIES DISTRICT (P.A				
						П	☐ Apı	proved w	//Condition		
		Date Applied For:									
kw	vd .					T					
1.	This permit application does not preclude the			ial Zone or Revi	ews				Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.									Not in Distri	Not in District or Landma	
2.	Building permits do not include plumbing, septic or electrical work.							Does Not Re	Does Not Require Revie		
3.	Building permits are void i within six (6) months of th										
False information may invalidate a building permit and stop all work											
									Approved w/Condition		
			Мај 🔲 👚 ММ								
				CERTIFICATION	ΟN						
I he	reby certify that I am the ow	ner of record of the na	med pro	operty, or that the	ne į	proposed work is	authorized	by the	owner of recor	d and that	
		all areas covered by su	ich peri	nit at any reaso	nał	ole hour to enfor	ce the prov	ision of	the code(s) ap	plicable	
to st	uch permit.										
SIG	NATURE OF APPLICAN			ADDRES	S		DATE	3	PI	НО	

DATE

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction	n:	Owner Name:		Owner Address:	Phone:		
178-188 Middle St		Buckstar Llc		100 Silver St			
Business Name:		Contractor Name:		Contractor Address:		Phone	
		Benchmark		650 Main St So. Portland	d	207874296	
Lessee/Buyer's Name		Phone:		Permit Type:	1		Zone:
			J l	Alterations - Commerci	al		
Dept: Zoning	Status:	Approved	Reviewer:	Marge Schmuckal	Approval Da	nte: 04/	/27/2004
Note:						Ok to Issue	e: 🗸
Dept: Building	Status:	Pending	Reviewer:	Mike Nugent	Approval Da	nte•	
Note:	Statust	r enam ₅		Winte Pugent	11pp10 van De	Ok to Issu	e: 🗆
110101							-
D (E'	G			1. M. D. 1	4 10	4 05	/02/2004
Dept: Fire	Status:	Approved	Reviewer:	Lt. MacDougal	Approval Da		03/2004
Note:						Ok to Issue	e: 💌
1 1 26 4 7	.1		CERTIFICATIO		. 11 4	C	1 1.1
have been authorized lurisdiction. In addition	by the owner to, if a permit for	of record of the named proto make this application a cor work described in the areas covered by such periods.	as his authorized application is iss	agent and I agree to contact, I certify that the cod	form to all appl e official's auth	icable laws o orized repres	of this sentative
SIGNATURE OF APPLIC	AN		ADDRESS		DATE	P	НО
RESPONSIBLE PERSON	IN CHARGE O	F WORK, TIT			DATE	P	НО