

PERMIT ISSUE

AUG 18 2003

CITY OF PORTLAND

Form # P04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING & INSPECTION PERMIT

Permit Number: 030868

This is to certify that October Corporation/Payton Line Corp
has permission to Tenant Fit - Up/ Alteration to existing office Space for a Computer Room
AT 2 Canal Plaza 032 1033001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, 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.

Notification of inspection must be given and work on permit in progress before this building or part thereof is closed or enclosed-in. 48 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept AMC
Health Dept.
Appeal Board
Other _____
DepartmentName

[Signature] 8/18/03
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

12/08/03

Completed.

A handwritten signature in cursive script, appearing to read 'M. Curran', followed by a long horizontal line extending to the right.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0888	Issue Date: 7/21/03	CBL: 032 I033001
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Location of Construction: 2 Canal Plaza	Owner Name: October Corporation	Owner Address: One Canal Plaza 5th Floor	Phone: 8 71-1290
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Business Name:	Contractor Name: Payton Maine Corp.	Contractor Address: 75 Market Street Portland	Phone: 12077727222
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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B3
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Past Use: Office Space/Commercial	Proposed Use: Office Space/Commercial	Permit Fee: \$471.00	Cost of Work: \$49,612.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: B Type: 2B Signature: [Signature]	
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Tenant Fit - Up/ Alteration to existing office Space for a Computer Room <i>basement</i>	Signature: [Signature]	Signature: [Signature]
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Permit Taken By: gad	Date Applied For: 07/21/2003	Zoning Approval	
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MMS <input type="checkbox"/> Date: <i>7/29/03</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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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 authorizehagent 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