

Location of Construction: 2 Monument Square, 6th floor, Portland		Owner: Boulos Property Management		Phone: 207-874-0397		Permit No: <b>000608</b>	
Owner Address: 2 Monument Square, Portland		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name:		Address:		Phone:		Permit Issued: <b>JUN</b>	
Past Use: Office		Proposed Use: Office		COST OF WORK: \$45,000.00		PERMIT FEE: \$294.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <u>10</u> Type: <u>2B</u>	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Proposed Project Description: Tenant fit-out of 6th floor office space.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
				Signature: _____ Date: _____			
Permit Taken By: K		Date Applied For: June 5, 2000 G					

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..

\*\*PU 772-7222 Adam

**PERMIT ISSUED WITH REQUIREMENTS**

**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 authorized agent 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: June 5, 2000 PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**CITY OF PORTLAND**  
 ZONE: 10-3 CBL: 032-K-001  
 Zoning Approval: *[Signature]*  
 Special Zone or Review  
 Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**  
 Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

**PERMIT ISSUED WITH REQUIREMENTS** 1