City of Portland, Maine - Buil 389 Congress Street, 04101 Tel: (0			Pe	ermit No: 09-1328	Issue Date	e:	CBL: 032 K00	1001	
Location of Construction: 2 MONUMENT SQ 9th floor Dead R	Owner Name: ad Ri 800 NORTHERN CORP			Owner Address: 25 SOUTH SERVICE RD				Phone:	Phone:	
Business Name:	Contractor Name: Daigle Construction			Contractor Address: 234 Church Rd. Brunswick				Phone 2077251452		
Lessee/Buyer's Name	Phone:			Permit Type: Alterations - Commercial				Zone:		
Past Use: Commercial - Office		Proposed Use: Commercial - Office - Build offices and Knee walls 9th floor "Dead River"		Pern	nit Fee: Cost of Work: \$120.00 \$10,000.00			CEO District:		
				FIRE DEPT: Approved			NSPECTION: Use Group: Type			
Proposed Project Description: Build offices and Knee walls 9th floor "Dead River"					PEDESTRIAN ACTIVITIES DISTRIC					
				Signa	ature:			Date:		
	Applied For: 9/2009	Zoning Approval								
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoning Appeal			Historic Preservation			
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			Does Not Require Revie			
 Building permits are void if work is not started within six (6) months of the date of issuance. 			Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work		Subdivision		Interpretatio			Approved			
				Approved			Approved w/Condition			
		Maj [Mino MM		Denied			Denied		
		Date:			Date:		D	ate:		

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО

Location of Construction: 2 MONUMENT SQ 9th floor Dead Ri			Owner Address: 25 SOUTH SERVICE RD	Phone:		
2 MONUMENT SQ 9ut floor Dead Ki Business Name:			Contractor Address:	Phone		
Business Name:	Contractor Name: Daigle Construction		234 Church Rd. Brunswi	2077251452		
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Commercia	al		Zone:
Dept: Zoning Status: A	Approved	Reviewer:	Marge Schmuckal	Approval Dat	e: 11/2	20/2009
Note:					Ok to Issue	: 🗸
Dept: Building Status: A	Approved with Condition	s Reviewer:	Tammy Munson	Approval Dat		16/2009
 Note: Permit approved based on the pla 	ns submitted and review	ed w/owner/cor	ntractor with additional i		Ok to Issue	
noted on plans.				inormation us ag		
 Separate permits are required for a need to be submitted for approva 	• • •	•	arm or HVAC or exhaust	systems. Separa	te plans may	7
Dept: Fire Status: A	Approved with Condition	s Reviewer:	Ben Wallace Jr.	Approval Dat	e: 12/1	1/2009
Note:					Ok to Issue	: 🗸
1) The Fire alarm and Sprinkler syste Compliance letters are required.	ems shall be reviewed by	a licensed cont	ractor[s] for code complia	ance.		
2) All construction shall comply with	NFPA 101					

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SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
DEGRONGINI E DEDGON IN OUADCE OF WORK TH		DATE	DUO