

Location of Construction: 2 Monument Sq		Owner: Equitable Life Assurance		Phone:	
Owner Address:		Leasee/Buyer's Name: Sapient Corp.		Phone:	
Contractor Name: Caron Building Corp		Address: 36 Pleasant St Watertown, MA		Phone: 02172 617-926-1182	
Past Use: Office		Proposed Use: Same		<b>COST OF WORK:</b> \$ 55,000.00 <b>PERMIT FEE:</b> \$ 295.00 <b>FIRE DEPT.</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <b>INSPECTION:</b> Use Group: 0 Type: 2B Signature: <i>BOCA 9/6/96</i> Signature: _____ Date: _____	
Proposed Project Description: Make Interior Renovations (4th Floor)				<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: _____ Date: _____	
Permit Taken By: Mary Gresik		Date Applied For: 26 December 1996			

Permit No: **961264**

**PERMIT ISSUED**

**DEC 31 1996**

**CITY OF PORTLAND**

Zoning: **B-3** CBL: 032-K-001

Zoning Approval: *OK 12/27/96*

**Special Zone or Reviews:**

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: *12/30/96*

*D. Andrew's*

CEO DISTRICT **2**

*A. Rowe*

1. This permit application doesn't 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..

Debris to be hauled by Pick-Up

*Call for pick up*

**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 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]*  
 SIGNATURE OF APPLICANT: Sam Amato ADDRESS: \_\_\_\_\_ DATE: 26 December 1996 PHONE: \_\_\_\_\_

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

**COMMENTS**

1/16/97

Framing OK. a base

**Inspection Record**

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION *1111 1/2*

Issued to *1111 1/2* Date of Issue *11/11/11*

**This is to certify** that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. *1111 1/2*, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

*11/11/11*  
-----  
(Date) *Inspector*

*Inspector*  
-----  
*Inspector of Buildings*

*11/11/11*  
Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.