

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read  
Application And  
Notes, If Any,  
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 071521

This is to certify that ONE CITY CENTER ASSOCIATES LLC Remodeling Pa  
has permission to Remove and replace one non load bearing wall.

AT 1 CITY CTR 032 L002001

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 when permission is procured before this building or part thereof is altered or closed-in. 24 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. Greg Evans  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

1/3/08  
[Signature]  
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

JAN - 3 2008

**City of Portland, Maine - Building or Use Permit Application**

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

<b>Permit No:</b> 07-1521		<b>Issue Date:</b>		<b>CBL:</b> 032 L002001	
<b>Location of Construction:</b> 1 CITY CTR		<b>Owner Name:</b> ONE CITY CENTER ASSOCIATE		<b>Owner Address:</b> ONE CITY CENTER	
<b>Business Name:</b>		<b>Contractor Name:</b> DMC Remodeling & Painting /MJN		<b>Phone:</b> 871-1080	
<b>Lessee/Buyer's Name</b>		<b>Phone:</b>		<b>Contractor Address:</b> 59 Sanford Drive Suite 3 Gorham	
				<b>Phone</b> 2078711080	
		<b>Permit Type:</b> Alterations - Commercial		<b>Zone:</b> B-3	
<b>Past Use:</b> Commercial - Office space - Suite 100 (first floor)		<b>Proposed Use:</b> Commercial - Office space with alterations to non-load bearing wall.		<b>Permit Fee:</b> \$50.00	
				<b>Cost of Work:</b> \$2,750.00	
				<b>CEO District:</b> 1	
<b>Proposed Project Description:</b> Remove and replace one non-load bearing wall.		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: B Type: iB IBC 2003	
		Signature: <i>Greg Cross</i>		Signature: <i>[Signature]</i>	
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied			
		Signature: _____ Date: _____			
<b>Permit Taken By:</b> lmd		<b>Date Applied For:</b> 12/20/2007		<b>Zoning Approval</b>	
<ol style="list-style-type: none"><li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li><li>Building permits do not include plumbing, septic or electrical work.</li><li>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..</li></ol>		<b>Special Zone or Reviews</b>		<b>Zoning Appeal</b>	
		<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"/> MM <input type="checkbox"/> OK w/condition Date: 12/27/07		<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: _____	

JAN - 3 2008

**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 APPLICANT

ADDRESS

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE

**City of Portland, Maine - Building or Use Permit**

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

Permit No: 07-1521	Date Applied For: 12/20/2007	CBL: 032 L002001
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Location of Construction: 1 CITY CTR	Owner Name: ONE CITY CENTER ASSOCIATE	Owner Address: ONE CITY CENTER	Phone: ( ) 871-1080
Business Name:	Contractor Name: DMC Remodeling & Painting /MJ	Contractor Address: 59 Sanford Drive Suite 3 Gorham	Phone (207) 871-1080
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial - Office space with alterations to non-load bearing wall.	Proposed Project Description: Remove and replace one non-load bearing wall.
---------------------------------------------------------------------------------------	--------------------------------------------------------------------------------

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Ann Machado      **Approval Date:** 12/27/2007  
**Note:** **Ok to Issue:** ☒

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 01/03/2008  
**Note:** **Ok to Issue:** ☒

1) All penetrations between units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the required rating.

2) Separate permits are required for any electrical, plumbing, or HVAC systems.  
Separate plans may need to be submitted for approval as a part of this process.

**Dept:** Fire      **Status:** Approved      **Reviewer:** Capt Greg Cass      **Approval Date:** 12/27/2007  
**Note:** **Ok to Issue:** ☒



# General Building Permit Application

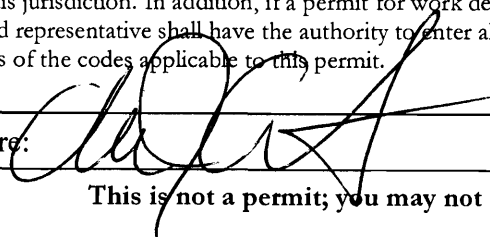
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>1 CITY CENTER SUITE 100</u>		
Total Square Footage of Proposed Structure/Area <u>EXISTING - 248,246 NO EXPANSION</u>		Square Footage of Lot <u>1.124 ACRES</u>
Tax Assessor's Chart, Block & Lot Chart# <u>32</u> Block# <u>L</u> Lot# <u>2</u>	Applicant * <u>must be owner, Lessee or Buyer</u> * Name <u>DIRIGO MANAGEMENT</u> Address <u>ONE CITY CENTER</u> City, State & Zip <u>PORTLAND, ME 04101</u>	Telephone: <u>207-871-1080</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>ONE CITY CENTER ASSOC. LLC</u> Address <u>ONE CITY CENTER</u> City, State & Zip <u>PORTLAND, MAINE 04101</u>	Cost Of Work: \$ <u>2,750</u> C of O Fee: \$ <u>NONE</u> Total Fee: \$ _____
Current legal use (i.e. single family) <u>OFFICE</u> If vacant, what was the previous use? <u>N/A</u> Proposed Specific use: <u>OFFICE</u> Is property part of a subdivision? <u>NO</u> If yes, please name <u>N/A</u> Project description: <u>INSTALL A MANDATE SECURITY - NON-SEPARATE WALL &amp; DOOR INSIDE OF SPACE AS PER PLAN</u>		
Contractor's name: <u>DMC - REMODELING</u> Address: <u>54 SANFORD DR. SUITE 3</u> City, State & Zip <u>CORHAM, MAINE</u> Telephone: <u>207-856 1838</u> Who should we contact when the permit is ready: <u>MIKE NUJENT</u> Telephone: <u>329-2354</u> Mailing address: <u>SAME AS DMC</u>		

**Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.**

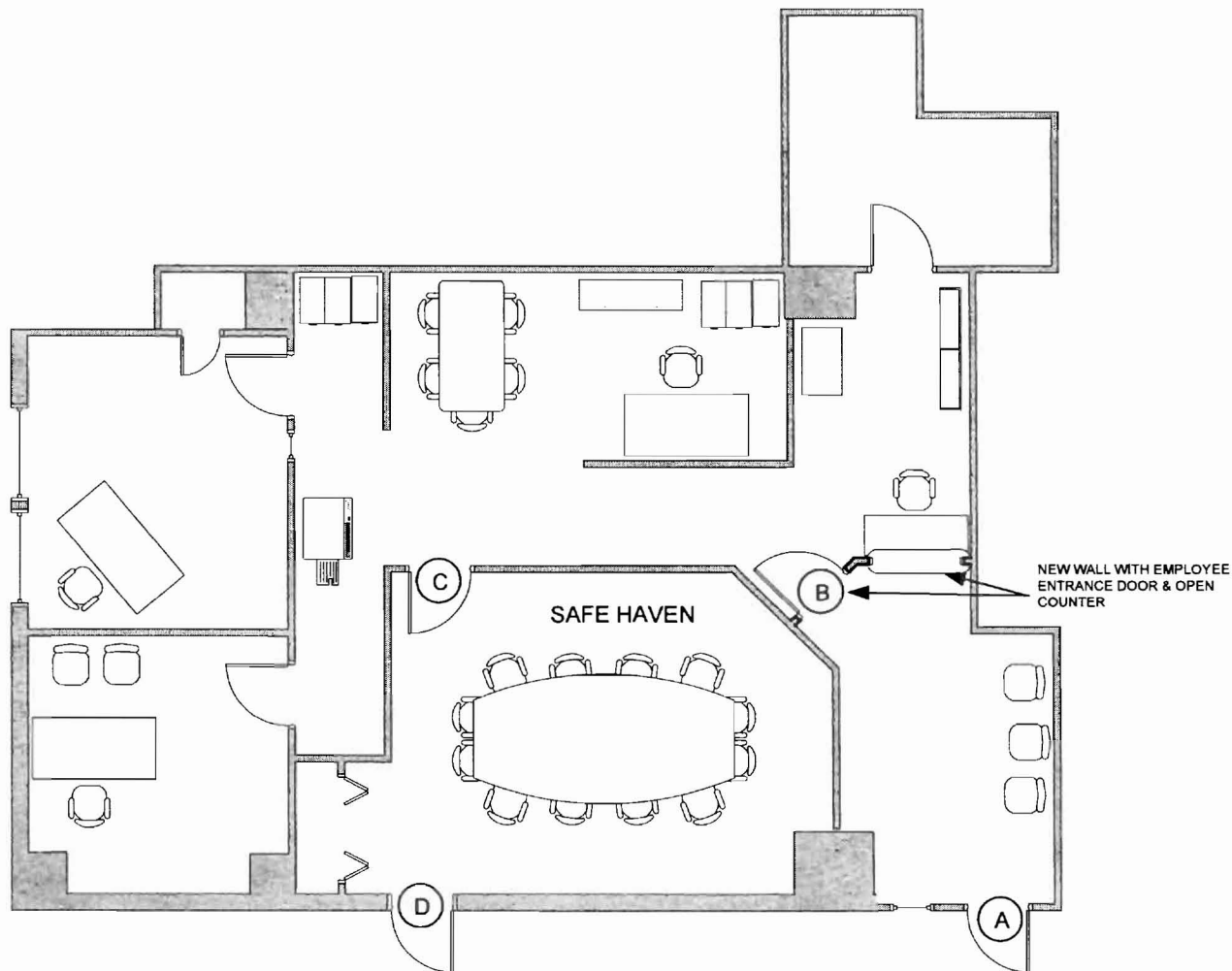
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: 

Date: 12/20/07

**This is not a permit; you may not commence ANY work until the permit is issued**



#### SECURITY DOOR LEGEND

- |                            |                                 |                            |
|----------------------------|---------------------------------|----------------------------|
| (A) PRIMARY SUITE ENTRANCE | (D) PERIMETER DOOR              | (G) STAFF ENTRANCE GATE    |
| (B) STAFF ENTRANCE         | (E) INTERIOR DOOR               | (H) HEAVY GLASS SUITE ENT. |
| (C) SAFE HAVEN DOOR        | (F) ALUMINUM FRAMED STORE FRONT |                            |

**SENATOR COLLINS**  
 PORTLAND, MAINE  
 ONE CITY CENTER,  
 STOP 23, 04101

## SIEMENS

Siemens Building Technologies, Inc.  
 Security Systems Division  
 201 Edison Park Drive  
 Gaithersburg, MD. 20878  
 Tel. (301) 944-6040  
 Fax: (301) 944-6097

#### SIEMENS PROPRIETARY INFORMATION

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#### REVISION:

no	date	by	description
J	01/10/07	EJB	Remove glass from recpt. counter
I	07/12/07	EJB	NEW SECURITY PLAN
H	04/12/07	EJB	Changed per site visit

drawn: ERIC B. checked: \_\_\_\_\_  
 approved: \_\_\_\_\_ date: 01/25/05

#### TITLE:

SENATOR COLLINS  
 PORTLAND OFFICE  
 GENERAL CONTRACTOR  
 FLOOR PLAN

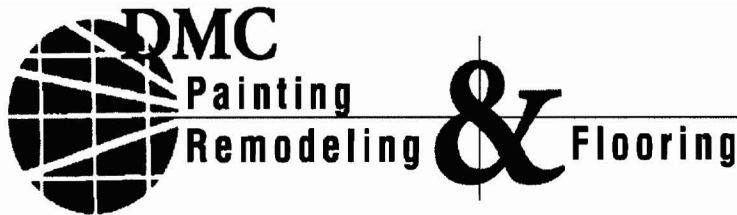
SCALE: 1/8" = 1'

DISCIPLINE: SECURITY

DRAWING NO:

SHEET 1 OF 1

FILENAME:



*A division of Dirigo Management Company*  
**59 Sanford Drive, Suite 3**  
**Gorham, Maine 04038**  
**(207) 856-1838 Fax (207) 856-9719**

**Date**            **December 17, 2007**

**To:**    **City of Portland Inspections Office**

**Project Name:** **Employee Entrance area alterations**

**Location:** **First Floor, One City Center. Portland, Maine**

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### **Job Description and Specifications**

We hereby submit specifications and bid for:

- Frame up a demising wall with customer access counter with soffit at ADA acceptable height as per plan dated 10/10/07. The wall will consist of 3 5/8 inch metal studs, spaced 16 inches on center, R-13 insulation in the cavities, 1/2 inch gypsum wall board. The wall and soffit will terminate below the existing suspended ceiling as per plan. The customer counter will be plywood covered with laminate. This proposal is based on standard priced laminate stock. Final color and texture to be chosen by client.
- Install a 3'0 x 6'8 Solid core wood office door (Oak finish), metal frames, hinges and hardware to match existing.
- Prime and paint newly constructed area to match existing
- Install vinyl cove base to match existing

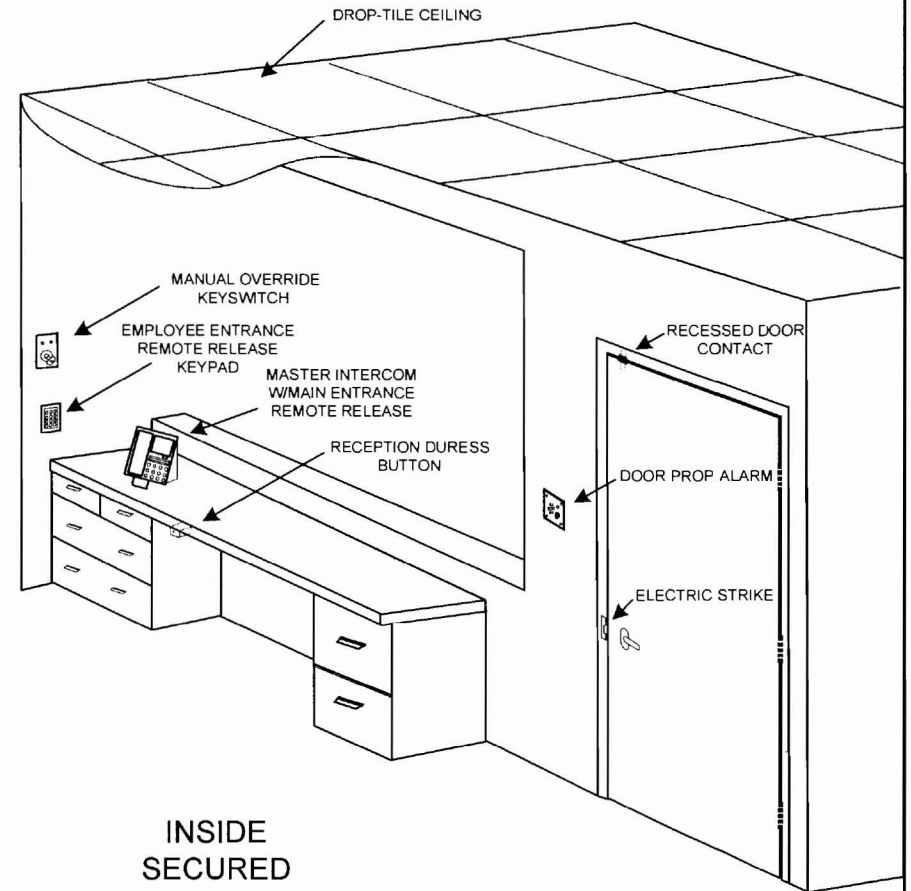
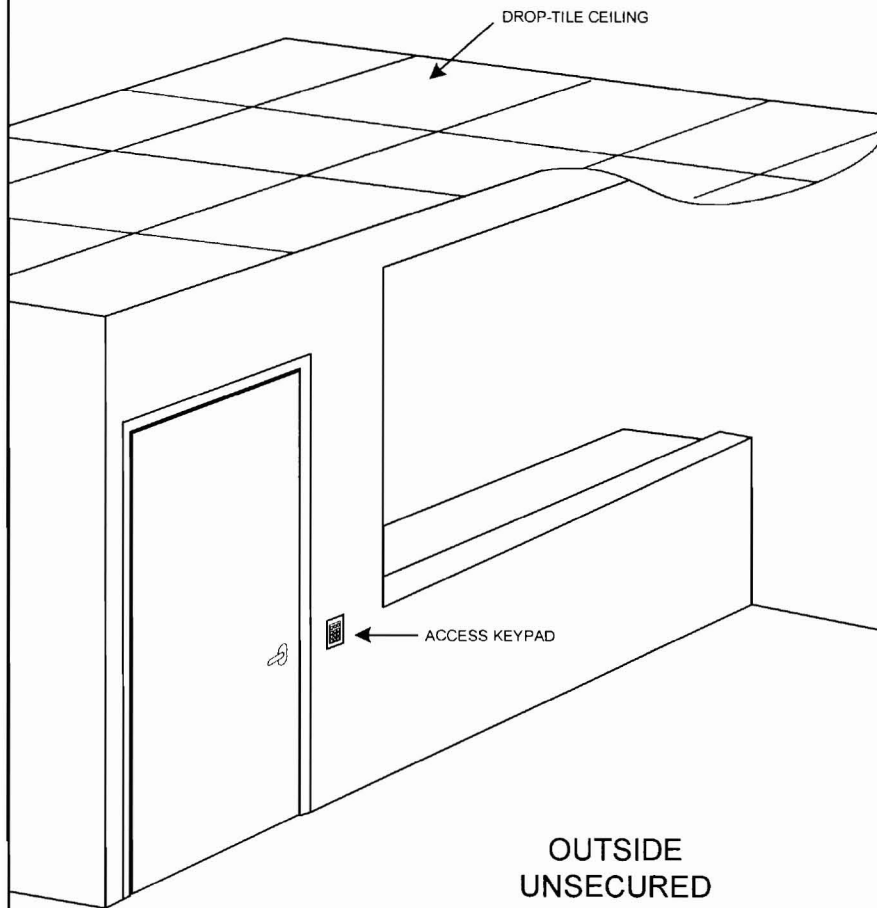
**Contracted Cost: \$2,750.00**

**Thanks! And Happy Holidays;**

**Mike Nugent**  
**Manager of Construction Services**

## EMPLOYEE ENTRANCE TYPICAL

NTS -NOT INTENDED AS BLUE PRINT  
THE CONTRACTOR WILL COMPLY WITH CODES, ORDINANCES,  
REGULATIONS, AND OTHER LEGAL REQUIREMENTS OF PUBLIC  
AUTHORITIES, WHICH BEAR ON THE PERFORMANCE OF WORK



**SIEMENS**  
Building  
Technologies

201 Edison Park Dr.  
Gaithersburg, MD. 20878  
(301) 987-1200

Date:	01/10/05
Drawn By:	EJB
Project:	US Senate Sergeant at Arms
Title:	Typical Door/Counter/Type "B" Door

EMPLOYEE ENTRANCE  
WITH OPEN COUNTER  
CONCEPTUAL  
DRAWING

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04/07/09 closed  
MP