

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 070397

Please Read Application And Notes, If Any, Attached

This is to certify that MINA BUILDING LLC / Nathan Hawkes
has permission to Tenant fit-up for floors 2, 3 and Commercial office space
AT 10 CITY CTR 032 P017001

PERMIT ISSUED
MAY 10 2007
CITY OF PORTLAND

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State 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 procured before this building or part thereof is placed 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. Cree, Class
Health Dept. _____
Appeal Board _____
Other _____
Department Name

[Signature] 5/8/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

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

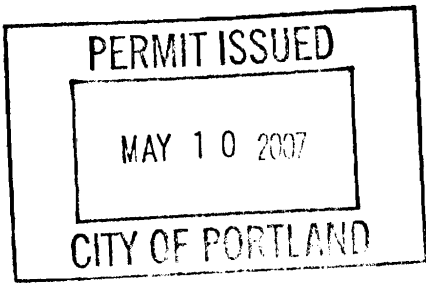
Permit No: 07-0397	Issue Date:	CBL: 032 P017001
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Location of Construction: 10 CITY CTR	Owner Name: MINA BUILDING LLC	Owner Address: 9 BAYVIEW TER	Phone:
Business Name:	Contractor Name: Nathan Hawkes	Contractor Address: 105 Spring Street Westbrook	Phone 2079392905
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B-3

Past Use: Commercial - Office	Proposed Use: Commercial - Office - Tenant fit-up for floors 2, 3 & 4 Commercial office space	Permit Fee: \$1,040.00	Cost of Work: \$101,570.00	CEO District: 1
Proposed Project Description: Tenant fit-up for floors 2, 3 & 4 Commercial office space		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 3B IBC 2003	
		Signature: <i>[Signature]</i>		
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) <i>NOT 1st floor</i>		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature: _____ Date: _____		

Permit Taken By: ldobson	Date Applied For: 04/17/2007	Zoning Approval		
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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"/> MM <input type="checkbox"/> Date: <i>5/17/07</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: _____
	Signature: <i>[Signature]</i>		



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

06/18/07 - Go over drawings w/ Greg Shinkens ~~1:30~~
- service entrance need electrical
engineered plans ~~1:30~~

06/19/07

- 3rd Floor close - in alley ~~1:30~~
- committed Greg Shinkens about stamped drawings for ~~new~~ service entrance ~~1:30~~
(1:30 PM)



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 10 CITY CTR

CBL 032 P017001

Issued to MINA BUILDING LLC /Nathan Hawkes

Date of Issue 08/28/2007

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. 07-0397, 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

2nd, 3rd & 4th Floors

APPROVED OCCUPANCY

Commercial Office Space
Use Group B
Type 3B
IBC 2003

Limiting Conditions:

none

**This certificate supersedes
certificate issued**

Approved:

.....
(Date) *Inspector*

.....
Inspector of Buildings

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.

ELECTRICAL PERMIT

City of Portland, Me.

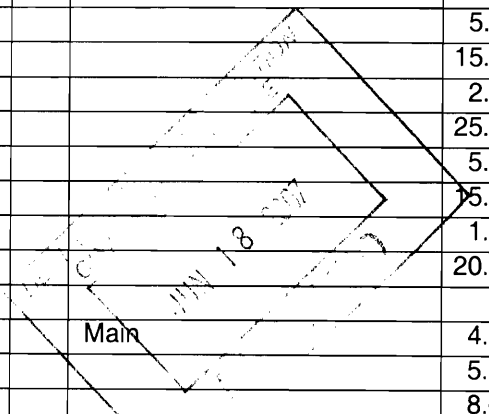


To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date _____
 Permit # 2007-4436
 CBL# 32-P-17

LOCATION: 10-12-City- METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER _____
 TENANT _____ PHONE # _____

							TOTAL EACH FEE		
OUTLETS	<u>61</u>	Receptacles	<u>16</u>	Switches		Smoke Detector	.20	<u>15.40</u>	
FIXTURES		Incandescent	<u>36</u>	Fluorescent		Strips	.20	<u>7.20</u>	
SERVICES		Overhead		Underground		TTL AMPS <800	15.00		
		Overhead		Underground		>800	25.00		
Temporary Service		Overhead		Underground		TTL AMPS	25.00		
							25.00		
METERS		(number of)					1.00		
MOTORS		(number of)					2.00		
RESID/COM		Electric units					1.00		
HEATING		oil/gas units		Interior		Exterior	5.00		
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00		
		Insta-Hot		Water heaters		Fans	2.00		
		Dryers		Disposals		Dishwasher	2.00		
		Compactors		Spa		Washing Machine	2.00		
		Others (denote)					2.00		
	MISC. (number of)		Air Cond/win					3.00	
		Air Cond/cent				Pools	10.00		
		HVAC		EMS		Thermostat	5.00		
		Signs					10.00		
		Alarms/res					5.00		
		Alarms/com					15.00		
		Heavy Duty(CRKT)					2.00		
		Circus/Carnv					25.00		
		Alterations					5.00		
		Fire Repairs					5.00		
		E Lights	<u>10</u>				1.00	<u>10</u>	
		E Generators					20.00		
PANELS		Service	<u>2</u>	Remote		Main	4.00	<u>8</u>	
TRANSFORMER		0-25 Kva					5.00		
		25-200 Kva					8.00		
		Over 200 Kva					10.00		
							TOTAL AMOUNT DUE		
							MINIMUM FEE/COMMERCIAL	55.00	
							MINIMUM FEE	45.00	



CONTRACTORS NAME R.M. Pearson, Inc MASTER LIC. # MC60019291
 ADDRESS 232 OSSIPPEE TRAIL, Gorham, ME LIMITED LIC. # _____
 TELEPHONE 207-839-3223 04038

SIGNATURE OF CONTRACTOR Robert M. Pearson

1359

ELECTRICAL PERMIT City of Portland, Me.

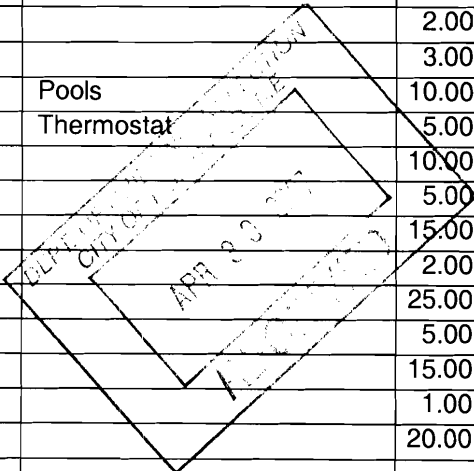


To the Chief Electrical Inspector, Portland Maine:
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 4/30/07
Permit # 2007-4296
CBL# 32717

LOCATION: 10-12 CITY CENTER METER MAKE & # _____
CMP ACCOUNT # _____ OWNER _____
TENANT CURRY COPY PHONE # _____

						TOTAL EACH FEE	
OUTLETS	Receptacles		Switches	Smoke Detector		.20	
	<u>3</u>		<u>1</u>				
FIXTURES	Incandescent		Fluorescent	Strips		.20	
			<u>1</u>				
SERVICES	Overhead		Underground	TTL AMPS <800		15.00	
	Overhead		Underground	>800		25.00	
Temporary Service	Overhead		Underground	TTL AMPS		25.00	
						25.00	
METERS	(number of)					1.00	
MOTORS	(number of)					2.00	
RESID/COM	Electric units					1.00	
HEATING	oil/gas units		Interior	Exterior		5.00	
APPLIANCES	Ranges		Cook Tops	Wall Ovens		2.00	
	Insta-Hot		Water heaters	Fans		2.00	
	Dryers		Disposals	Dishwasher		2.00	
	Compactors		Spa	Washing Machine		2.00	
	Others (denote)					2.00	
MISC. (number of)	Air Cond/win					3.00	
	Air Cond/cent			Pools		10.00	
	HVAC		EMS	Thermostat		5.00	
	Signs					10.00	
	Alarms/res					5.00	
	Alarms/com					15.00	
	Heavy Duty(CRKT)					2.00	
	Circus/Carnv					25.00	
	Alterations					5.00	
	Fire Repairs					15.00	
	E Lights					1.00	
	E Generators					20.00	
PANELS	Service		Remote	Main		4.00	
TRANSFORMER	0-25 Kva					5.00	
	25-200 Kva					8.00	
	Over 200 Kva					10.00	
						TOTAL AMOUNT DUE	
						MINIMUM FEE/COMMERCIAL	55.00
						MINIMUM FEE	45.00



CONTRACTORS NAME R.M. PEARSON, INC MASTER LIC. # MS 60004439
ADDRESS 232 OSSIPEE TRAIL LIMITED LIC. # _____
TELEPHONE 839-3223

SIGNATURE OF CONTRACTOR Robert M. Pearson # 1323

ELECTRICAL PERMIT

City of Portland, Me.



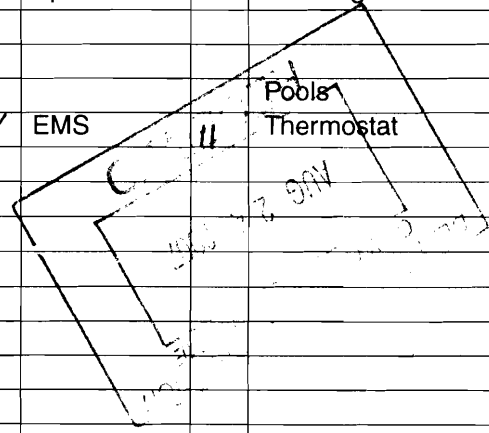
To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 8/24/07
 Permit # 12007-4624
 CBL# 32 P17

LOCATION: 12 City Ctr Pld Me METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER John Mina
 TENANT Curry Printing PHONE # 772-5897

TOTAL EACH FEE

OUTLETS	Receptacles	Switches	Smoke Detector		
					.20
FIXTURES	Incandescent	Fluorescent	Strips		.20
SERVICES	Overhead	Underground	TTL AMPS <800		15.00
	Overhead	Underground	>800		25.00
Temporary Service	Overhead	Underground	TTL AMPS		25.00
					25.00
METERS	(number of)				1.00
MOTORS	(number of)				2.00
RESID/COM	Electric units				1.00
HEATING	oil/gas units	Interior	Exterior		5.00
APPLIANCES	Ranges	Cook Tops	Wall Ovens		2.00
	Insta-Hot	Water heaters	Fans		2.00
	Dryers	Disposals	Dishwasher		2.00
	Compactors	Spa	Washing Machine		2.00
	Others (denote)				2.00
MISC. (number of)	Air Cond/win				3.00
	Air Cond/cent		✓ Pools		10.00
	✓ HVAC	✓ EMS	Thermostat		5.00
	Signs				10.00
	Alarms/res				5.00
	Alarms/com				15.00
	Heavy Duty(CRKT)				2.00
	Circus/Carnv				25.00
	Alterations				5.00
	Fire Repairs				15.00
	E Lights				1.00
	E Generators				20.00
PANELS	Service	Remote	Main		4.00
TRANSFORMER	0-25 Kva				5.00
	25-200 Kva				8.00
	Over 200 Kva				10.00
					TOTAL AMOUNT DUE
					MINIMUM FEE 35.00
					MINIMUM FEE/COMMERCIAL 45.00



CONTRACTORS NAME HVAC Services Inc MASTER LIC. # 945 PNT 2634
 ADDRESS 73 Bradley drive Westbrook LIMITED LIC. # _____
 TELEPHONE 207 854-4822

SIGNATURE OF CONTRACTOR *Robert C. Fisher*

ELECTRICAL PERMIT City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 8-24-07
Permit # 2007-4625
CBL# 32P17

LOCATION: 10-12 CITY CENTER (MUNA BLDG) METER MAKE & # _____
CMP ACCOUNT # _____ OWNER _____
TENANT _____ PHONE # _____

					TOTAL EACH FEE	
OUTLETS		Receptacles		Switches	Smoke Detector	.20
FIXTURES		Incandescent		Fluorescent	Strips	.20
SERVICES		Overhead		Underground	TTL AMPS <800	15.00
		Overhead		Underground	>800	25.00
Temporary Service		Overhead		Underground	TTL AMPS	25.00
						25.00
METERS	X	(number of)	4		(NOT CMP TYPE)	1.00
MOTORS		(number of)			(E-motor - D-motor style)	2.00
RESID/COM		Electric units				1.00
HEATING		oil/gas units		Interior	Exterior	5.00
APPLIANCES		Ranges		Cook Tops	Wall Ovens	2.00
		Insta-Hot		Water heaters	Fans	2.00
		Dryers		Disposals	Dishwasher	2.00
		Compactors		Spa	Washing Machine	2.00
		Others (denote)				2.00
MISC. (number of)		Air Cond/win				3.00
		Air Cond/cent			Pools	10.00
		HVAC		EMS	Thermostat	5.00
		Signs				10.00
		Alarms/res				5.00
		Alarms/com				15.00
		Heavy Duty(CRKT)				2.00
		Circus/Carnv				25.00
		Alterations				5.00
		Fire Repairs				15.00
	E Lights				1.00	
	E Generators				20.00	
PANELS		Service	X	Remote	Main	4.00
TRANSFORMER		0-25 Kva				5.00
		25-200 Kva				8.00
		Over 200 Kva				10.00
					TOTAL AMOUNT DUE	
					MINIMUM FEE/COMMERCIAL	55.00
					MINIMUM FEE	45.00

CONTRACTORS NAME R.M. Pearson Inc MASTER LIC. # MS60004434
ADDRESS 232 OSSIPEE TRAIL LIMITED LIC. # _____
TELEPHONE Gorham, Me. 04038

SIGNATURE OF CONTRACTOR Robert M. Pearson H 1423

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	Portland
Street	1000 1/2
Subdivision Lot #	1000 1/2

PROPERTY OWNERS NAME

Last: _____ First: _____

Applicant Name: _____

Mailing Address of Owner/Applicant (If Different): _____

PORTLAND PERMIT # 10295 TOWN COPY

Date Permit Issued: 5/3/07 \$ 42 If Double Fee Charged

Local Plumbing Inspector Signature: *Chet...* L.P.I. # 10169

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: _____ Date: 7/3/07

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: _____ Date Approved: 7/3/07

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # 10295
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain	0	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		Bidet		Laundry Tub
		Other: _____	1	Water Heater
	3	Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
			0	Fixtures (Subtotal) Column 2
			0	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE