

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 080441

034A B001901

This is to certify that CAPITAL LLC / WRIGHT MAN CONSTRUCTION
 has permission to Office "Drummond Woods" Law Firm 5th and 6th Floor tenant fit-up
 AT 84 MARGINAL WAY

provided that the person or persons who perform or supervise the construction 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 leased or occupied. **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. Craig Chaz
 Health Dept. _____
 Appeal Board _____
 Other _____
 Department Name

Jamie Douke 5/19/08
 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: 08-0441	Issue Date:	CBL: 034A B001001
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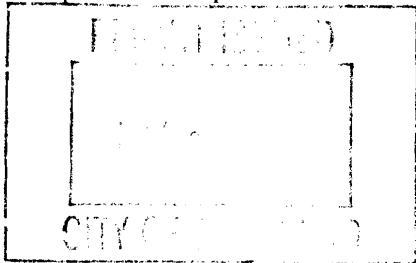
Location of Construction: 84 MARGINAL WAY	Owner Name: CAPITAL LLC	Owner Address: 50 PORTLAND PIER STE 400	Phone: 207-253-0533
Business Name:	Contractor Name: WRIGHT RYAN CONSTRUCTIO	Contractor Address: 10 DANFORTH STREET Portland	Phone: 2077733625
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone: B-7

Past Use: Commercial	Proposed Use: Commercial - Office "Drummomd Woodsum Law Firm" 5th and 6th Floor tenant fit-up	Permit Fee: \$16,145.00	Cost of Work: \$1,604,800.00	CEO District: 1
Proposed Project Description: Office "Drummomd Woodsum Law Firm" 5th and 6th Floor tenant fit-up		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: B Type: 2A IBC-2003	
		Signature: <i>Greg Carr</i>	Signature: <i>MM 5/19/08</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: lmd	Date Applied For: 04/30/2008	Zoning Approval		
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>5/11/08</i>	Date: _____	Date: _____



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
Department of Building Inspection

Certificate of Occupancy

LOCATION 84 MARGINAL WAY CBL 034A B001001

Issued to Atlantic Bayside Trust Llc /WRIGHT RYAN CONSTRUCTION Date of Issue 11/03/2008

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. 08-044, 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

Floors 5 & 6

APPROVED OCCUPANCY

Commercial Office Space
Use Group B
Type 2A
IBC 2003

Limiting Conditions:

Temporary Occupancy Certificate. This Certificate expires on November 30, 2008.

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.