Location of Construction: Owner: October corp c/o Boulos PropertPhone: Permit No: 871-1290 511 Congress Street lst Floor Management **Owner** Address: Lessee/Buyer's Name: Phone: BusinessName: 1290 000481 One Canal Plaza, 5th Floor Portland, ME 04101 Oxford Networks N/A N/A Permit Issued: Phone: 207-576-4068 (h) 207-897-6111 Contractor Name: Address: cell: 18 Boyscout Pd, ME 04753 Alex Castonguay **COST OF WORK: PERMIT FEE:** . 15 Past Use: Proposed Use: \$ 40,000 \$ 264.00 **INternet** Service FIRE DEPT. Approved **INSPECTION:** VAcant office space Use Group: B Type: 23 Provider □ Denied CBL:037-D-002 Zone:,, P. Ne SOAU OFFICE SPACE Signature: AAMT Signature: Zoning Proposed Project Description: Approvak PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) wi Action: Approved Special Zone or Review Office Fit Up Approved with Conditions: □ Shoreland Denied □ Wetland □ Flood Zone Signature: □ Subdivision Date: □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: 5-2-00 UB Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □Approved tion may invalidate a building permit and stop all work.. Denied PERMIT ISSUED WITH REQUIREMENTS **Please Call Scott 462-4984 **Historic Preservation** □ Not in District or Landmark For Pick Up Does Not Require Review □ Requires Review Action: Chang CERTIFICATION □ Appoved ~ V~ 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 □ Approved with CM Denied Se 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 Date areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit PERMIT ISSUED PERMIT ISSUED CEQIDISTRICT 2 ub 5 - 2 - 00ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: White–Permit Desk Green–Assessor's Canary–D.P.W. Pink–Public File Ivory Card–Inspector

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716