

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number 037 D023001

PERMIT ISSUED

DEC - 6 2006

CITY OF PORTLAND

This is to certify that 511 PLAZA LIMITED PARTNERSHIP (Hardy Pond Construction)

has permission to Interior renovations & add 2 rooms

AT 15 CASCO ST

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 work in progress must be stopped before this building or part thereof is 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. Jay Kelley P.F.D. 11/13/06

Health Dept. _____

Appeal Board _____

Other _____

Department Name _____

Jeanne Bouke 12/5/06
 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: 06-1641	Issue Date:	CBL: 037 D023001
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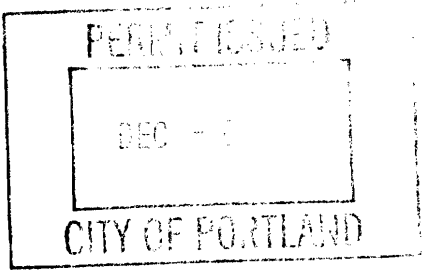
Location of Construction: 15 CASCO ST	Owner Name: 511 PLAZA LIMITED PARTNERS	Owner Address: 50 MILK ST 20TH FLOOR	Phone:
Business Name: Dawson, Smith, Purvis, Bassett Acc	Contractor Name: HardyPond Construction	Contractor Address: 1039 Riverside St Suite 11 Portland	Phone: 2077976066
Lessee/Buyer's Name	Phone: 207-874-0355	Permit Type: Alterations - Commercial	Zone: B-3

Past Use: Commercial/ Bank	Proposed Use: Commercial/ Office - Interior renovations & add 2 bathrooms,	Permit Fee: \$995.00	Cost of Work: \$90,000.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 3B	

Proposed Project Description: Interior renovations & add 2 bathrooms,	Signature: <i>JK PFD 11/13/06</i>	Signature: <i>JMB 12/5/06</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: <i>NET in PAD</i>		Date:

Permit Taken By: Idobson	Date Applied For: 11/07/2006	Zoning Approval
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1. This permit application does not 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..



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>5/19/06</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:
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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

Close In by M. Collins.

12-28-06 Final Insp - work complete -
OK for PO MM



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 15 CASCO ST

CBL 037 D023001

Issued to 511 PLAZA LIMITED PARTNERSHIP /HardyPond Constr Date of Issue 12/28/2006

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. 06-1641, 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

First Floor

APPROVED OCCUPANCY

Office
IBC 2003
Use Group B Type 3B

Limiting Conditions:

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.