

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 070468

Please Read
Application And
Notes, If Any,
Attached

This is to certify that PS ONE REALTY LLC / Central Line Construction, Inc.
has permission to Interior office fit-up 10th floor
AT 1 PORTLAND SQ 038 B001007

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the 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 is procured before this building or part thereof is leased or occupied. **FOUR 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 Cross
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Jamie Bonke 6/7/07
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: 07-0468	Issue Date:	CBL: 038 B001007
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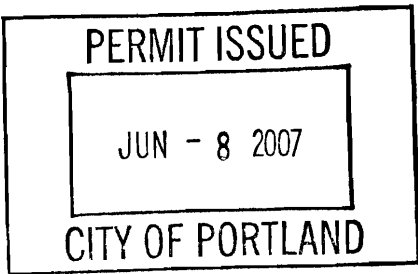
Location of Construction: 1 PORTLAND SQ	Owner Name: PS ONE REALTY LLC	Owner Address: ONE CITY CENTER 4TH FLOOR	Phone:
Business Name: Verrill & Dana	Contractor Name: Center Line Construction, Inc.	Contractor Address: P.O. Box 1264 Portland	Phone 2072336487
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B3

Past Use: Commercial Office 10th Floor <i>(Verrill Dana LLC)</i>	Proposed Use: Commercial Office 10th Floor - Interior office fit-up 10th floor	Permit Fee: \$2,020.00	Cost of Work: \$200,000.00	CEO District: 1
Proposed Project Description: Interior office fit-up 10th floor		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: <i>B</i> Type: <i>2A</i> <i>IBC-2003</i>	
		Signature: <i>Greg Cress</i> Signature: <i>AMB 6/7/07</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: Idobson	Date Applied For: 05/01/2007	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 <i>ABN</i>
Date: <i>5/17/07 ABN</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

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 June 21 07
 Permit # 07-4459
 CBL# 38 B 001

LOCATION: 1 PORTLAND SQUARE METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER _____
 TENANT Verril DANA - 10th Floor PHONE # _____

							TOTAL EACH FEE			
OUTLETS	<u>30</u>	Receptacles	<u>12</u>	Switches		Smoke Detector	<u>42</u>	.20	<u>8.40</u>	
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		
				<u>55</u>		TOTAL AMOUNT DUE				
						MINIMUM FEE/COMMERCIAL 35.00				
						MINIMUM FEE	35.00		35.00	

CONTRACTORS NAME B.H. MILLIKEN INC. MASTER LIC. # MC60016837
 ADDRESS 175 ANDERSON ST PORTLAND 04101 LIMITED LIC. # _____
 TELEPHONE 207-879-1877

SIGNATURE OF CONTRACTOR Robert A. Ricker #13262

rough in
 Inspector next wed

White Copy - Office • Yellow Copy - Applicant