City of Portland, Maine - Buil	U			Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (•	, Fax: (207) 874-8		2014-00006		038 B001001
Location of Construction: 1 PORTLAND SQ (6th floor) RREEF AME CORP Z4		RICA REIT III	Owner Address: PO BOX 4900 DEPT 207 SCOTTSDALE , AZ 85261			Phone:
Business Name: Contractor N		me:		actor Address:	Phone	
LIH Corp	Monaghan Woodworks Inc. agarcia@mwoodworks.com		100 Commercial St. Suite 212 Portland ME 04102			and (207) 775-2683
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
Helen Champagne	(207) 772-8800		Alterations - Commercial			В3
Past Use:	Proposed Use:		Perm	emit Fee: Cost of Work:		CEO District:
Bank 1st floor with offices above Bank 1st floor		with offices above	th offices above \$1,520.00 \$150,000.0 INSPECTION:		00.00 2	
Proposed Project Description:						
fit up existing office space for new te	- new interior					
office partitions, new ceiling & millw	PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Approved Approved		P.A.D.) ed w/Conditions Denied			
	Signature:			Date:		
	oplied For: 3/2014					
This permit application does not preclude the		Special Zone or Reviews		Zonir	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		☐ Shoreland		☐ Variance	e	Not in District or Landma
2. Building permits do not include septic or electrical work.	☐ Wetland		Miscella	ineous	Does Not Require Review	
3. Building permits are void if work within six (6) months of the date	Flood Zone		Condition	onal Use	Requires Review	
False information may invalidate a building permit and stop all work		☐ Subdivision ☐ Site Plan		☐ Interpret	tation	Approved
	Approve			ed	Approved w/Conditions	
	Maj Minor MM		☐ Denied		Denied	
	Date:		Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his authored in the application	at the fized a is issu	proposed work in a gree and I agree and I certify that	to conform to a	all applicable laws of this al's authorized representative
SIGNATURE OF APPLICANT		ADDRESS			DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE