

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 030861

This is to certify that 245 Commercial St Partners/ L. S. Co

has permission to Addition of Rest Rooms and Walls to Interior

AT 245 Commercial St 038 F006001

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 written permission procured before this building or part thereof is laid out or closed-in.
HOURS 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. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature] 7/8/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

Permit No: 03-0861	Issue Date:	CBL: 038 F006001
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Location of Construction: 245 Commercial St	Owner Name: 245 Commercial St Partners	Owner Address: 245 Commercial St	Phone: 772-4997
Business Name:	Contractor Name: D. J. S. Construction	Contractor Address: P.O. Box 1413 Scarborough	Phone: 2078830391
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Commercial	Zone: B3

Past Use: Office Space/Commercial	Proposed Use: Office Space/Commercial	Permit Fee: \$255.00	Cost of Work: \$25,700.00	CEO District: 1
Proposed Project Description: Addition of Rest Rooms and Walls to Interior		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: VA 2/3/03	
		Signature: <i>[Signature]</i>		

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: <i>[Signature]</i> Date: 7/24/03	
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Permit Taken By: gad	Date Applied For: 07/17/2003	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>OK [Signature]</i> 7/24/03	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 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: <i>Any Extension work requires separate permit</i>
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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.

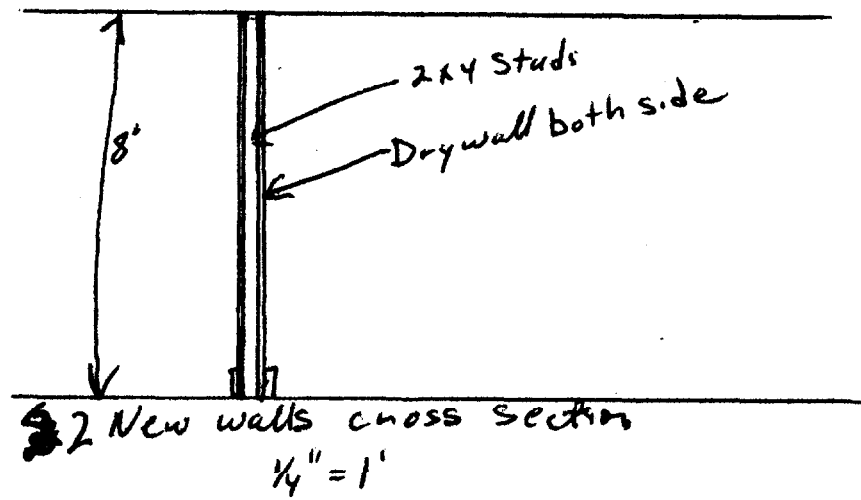
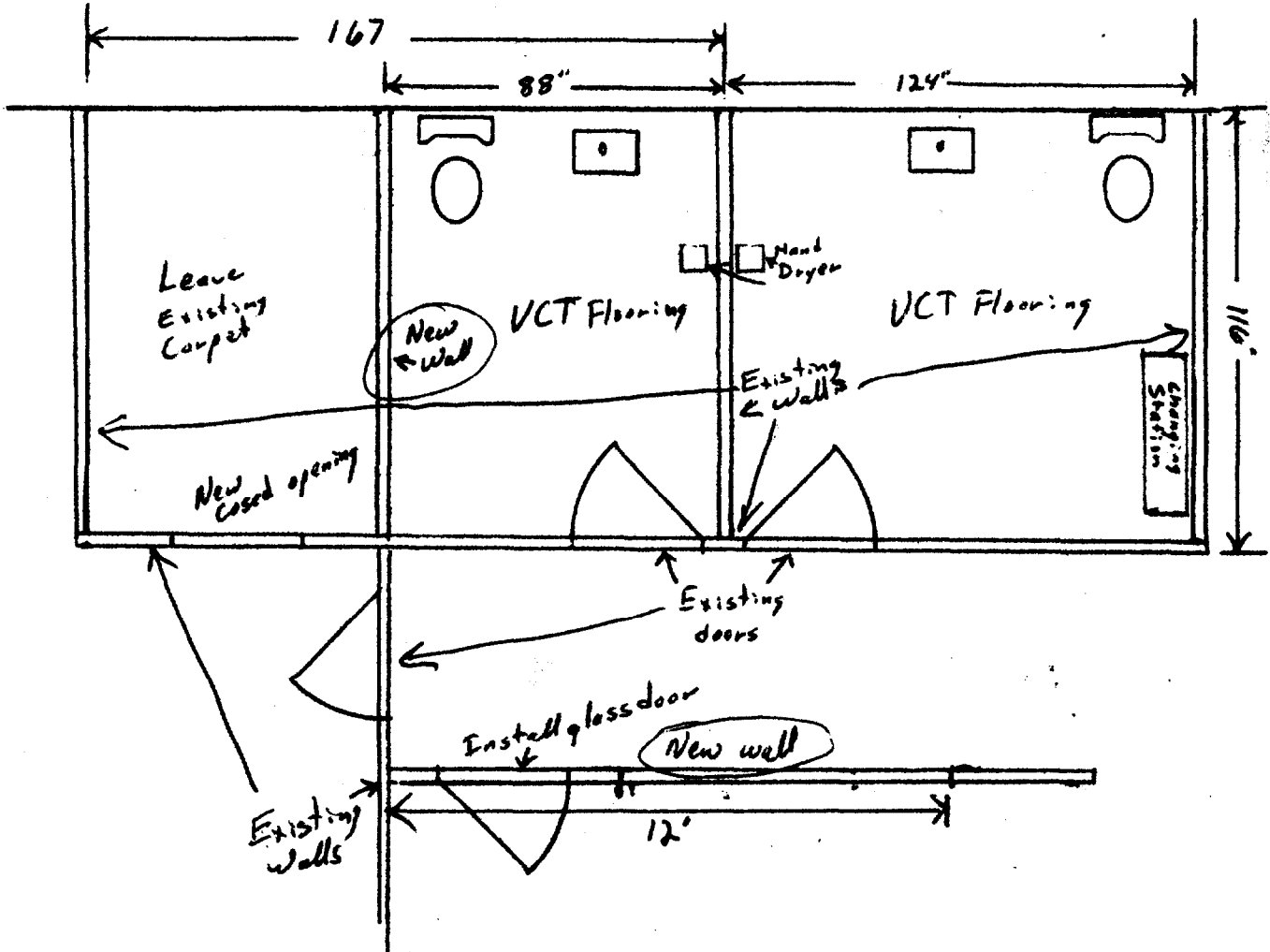
 SIGNATURE OF APPLICANT ADDRESS DATE PHONE

 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

D.J.S. CONSTRUCTION

BUILDING & REMODELING
P.O. BOX 1413
SCARBOROUGH, MAINE 04070
(207) 883-0391

Floor plan $\frac{1}{4}'' = 1'$



D.J.S. CONSTRUCTION

BUILDING & REMODELING
P.O. BOX 1413
SCARBOROUGH, MAINE 04070
(207) 883-0391

Explanation of project.

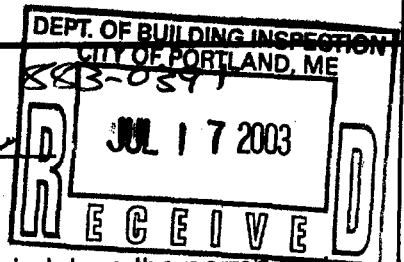
Use existing conference rooms and renovate into 2 public bathrooms. Use only plan to build 2 short interior walls to complete this and use all existing walls and doors.

03-0861

All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>245 Commercial St.</u>		
Total Square Footage of Proposed Structure <u>Within existing</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>038</u> Block# <u>F</u> Lot# <u>006</u>	Owner: <u>245 Commercial St. Partners LP</u>	Telephone: <u>772-4994</u>
Lessee/Buyer's Name (if Applicable) <u>Convention + Visitors Bureau</u>	Applicant name, address & telephone: <u>245 Commercial St.</u>	Cost Of Work: <u>\$25,700.-</u> Fee: \$ <u>255.00</u>
Current use: <u>Office</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>adding public bathrooms & walls</u>		
Project description: _____		
Contractor's name, address & telephone: <u>D.J.S. Construction</u>		
Who should we contact when the permit is ready: <u>Donald Simoneau</u>		
Mailing address: <u>P.O. Box 1413 Scarborough, Me. 04076</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>883-0391</u>		



IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>Donald Simoneau</u>	Date: <u>July 16, 2003</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall