Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

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This is to certify that ____STONE COAST PROPERT

SLLC /S Coast Propertie

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of buildings and

has permission to _____Suite 428 4th floor - Remov ____)' of nor uctura

046 D03100

NOV 15 2007

Permit Number 1714 ISSUED

ances of the City of Portland regulating

ctures, and of the application on file in

epting this permit shall comply with all

AT -603 CONGRESS ST

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and l this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication finspe n mus n and w en permi bn proce re this ldina or rt there ed or osed-in/ JR NO HOLE IS MEQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. Appeal Board Other _ Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, M	aine - Buil	ding or Use l	Permi	t Application	└ │ *	rermit No:	Issue Date	•	CBL:	
389 Congress Street, 0	4101 Tel: (2	207) 874-8703	, Fax:	(207) 874-8710	5 L	07-1408			046 D0	31001
Location of Construction:		Owner Name:				ner Address:			Phone:	_
603 CONGRESS ST		STONE COAS		PERTIES LL		2 HIGH ST ST	E 320			
Business Name:		Contractor Name				tractor Address:	'. 220 P	.1 1	Phone	
Lagge / Duventa Nama		Stone Coast Pr	ropertie	S T		2 High Street Si	lite 320 Po	rtland	20763252	Zone:
Lessee/Buyer's Name		Phone:				mit Type: Iterations - Com	mercial			Zone:
Past Use:		Proposed Use:	- <u></u>]			Cost of Wor	<u> </u>	CEO District:	
Commercial Office - Sui	te 428 4th	Commercial O	office - 9	Suite 428 4th	1 61	\$30.00	\$1,00	1	2	
floor		floor - Remove 1/2 wall			FIF	RE DEPT:	Approved Denied	INSPEC Use Gro	CTION;	Type:
Proposed Project Description Suite 428 4th floor - Rer		on structural 1/2	wall		_	nature: DESTRIAN ACTIV	VITIES DIST	Signatu	Jab.	15/07
					Act	ion: Approv	ed 🗌 App	oroved w/	Conditions	Denied
Permit Taken By:	Date An	oplied For:			Sig	7 oning	Approva		Date:	
ldobson	1	5/2007				Zoning	Approva	6.1		
This permit applicat	ion does not	preclude the	Spe	cial Zone or Review	vs	Zonin	g Appeal		Historic Pres	servation
Applicant(s) from m Federal Rules.	-	•	☐ Sh	oreland		☐ Variance			Not in Distri	ct or Landma
2. Building permits do septic or electrical v	-	olumbing,	□ w	etland		Miscellar	neous	1	Does Not Re	
3. Building permits are within six (6) month	s of the date	of issuance.	☐ Flo	ood Zone		Condition	nal Use		Requires Rev	view
False information m permit and stop all v		a building	☐ Su	bdivision	oΥ	[Interpreta	ition		Approved	
		7	Sit	te Plan Tribu	rk	_ Approved	i		Approved w/	Conditions (
PERMITIS	SLIED		Мај [Minor MM		Denied			Denied	
MCV 15			Date.	MR 11/15)	07	Date:		Da	ate: JMB	
CITY OF FO	STLAND		į	/						
	.1	1 64	_	ERTIFICATIO					0	
I hereby certify that I am I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to	make this appli r work described	cation a	as his authorized application is is:	age suec	ent and I agree to I, I certify that t	o conform he code off	to all ap icial's a	plicable laws uthorized repr	of this esentative
SIGNATURE OF APPLICAN	Γ			ADDRESS			DATE		РНО	NE
RESPONSIBLE PERSON IN (CHARGE OF W	ORK, TITLE					DATE	<u>.</u>	РНО	 NE

Permit No: CBL: Date Applied For: City of Portland, Maine - Building or Use Permit 07-1408 11/15/2007 046 D031001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Owner Address: Phone: **603 CONGRESS ST** STONE COAST PROPERTIES LL 142 HIGH ST STE 320 **Business Name:** Contractor Name: Contractor Address: Phone 142 High Street Suite 320 Portland **Stone Coast Properties** (207) 632-5244 Lessee/Buyer's Name Phone: Permit Type: Alterations - Commercial **Proposed Project Description:** Proposed Use: Commercial Office - Suite 428 4th floor - Remove 20' of non Suite 428 4th floor - Remove 20' of non structural 1/2 wall structural 1/2 wall Dept: Zoning Status: Approved with Conditions Reviewer: Jeanine Bourke 11/15/2007 **Approval Date:** Ok to Issue: Note: 1) This approves work on the 4th floor suite 428 only, continue to be office space 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. 11/15/2007 Dept: Building **Status:** Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** Note: Ok to Issue: 1) This approves minor work removing of 1/2 walls for a new tenant, and electrical work 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process. Dept: Fire **Status:** Approved with Conditions Reviewer: Jeanine Bourke 11/15/2007 **Approval Date:**

Ok to Issue:

Note:

1) All construction shall comply with NFPA 101

General 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:	3 Congress Sti	reet Suite 426
Total Square Footage of Proposed Structure	/Area Square Footage of Lot	
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Bu	yer* Telephone:
Chart# Block# Lot#	Name Stone Coast Proper	772-15-40
196 2	Address 142 High St.	, ,,,
	City, State & Zip Portland Ma	inc
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
1114	Name D/A	Work: \$ 1,000
10/1	Address	C of O Fee: \$
· .	City, State & Zip	Total Fee: \$ 30,00
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? Project description: Pemare Road With 3/g drywail Coulding Contractor's name: Contractor's name: Store Address: Address: Mailing address: Seme Please submit all of the information	If yes please name If yes please name If yes please name If 20 of WAII Consist, India piping or structual For Tilso Exite 320 Einle eady: Perry Glidden	_ Telephone: Telephone: <u>632 - 5244</u> 7
	he automatic denial of your permit	
n order to be sure the City fully understands the nay request additional information prior to the his form and other applications visit the Inspec- Division office, room 315 City Hall or call 874-8703	issuance of a permit. For further informatio ctions Division on-line at www.portlandmainc.go	on or to download copies of
hereby certify that I am the Owner of record of the nat I have been authorized by the owner to make the laws of this jurisdiction. In addition, if a permit for we uthorized representative shall have the authority to rovisions of the codes applicable to this permit.	is application as his/her authorized agent. I agro work described in this application is issued, I cert	ee to conform to all applicable ify that the Code Official's
Signature: Popo All y	Date: ///5/07	
This is not a permit; you ma	ay not commence ANY work until the pe	ermit is issue

603 Congress Suite 428

PRO 2000 grade Block garning – consider future full height glazing in this wall remove all low walls remove woll REMOUE SHELVE remove counterblock opening remove shelves

existing wall to be removed
existing wall to remain

TILSON TECHNOLOGY
DEMOLITION/CONSTRUCTION PLAN
11/1 2 / 57

1/4"=1'=0" NOT TOSIALE

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 ///9/07
Permit # 2007 41871
CBL# 044 - D031

Incandescent Fluorescent Strips .20	NANT			PHONE #			
FIXTURES					TOTAL	EACH	FEE
SERVICES	OUTLETS	10	Receptacles	Switches	Smoke Detector	.20	
Description		-					
Overhead	FIXTURES		Incandescent	Fluorescent	Strips	.20	
Overhead							
Temporary Service	SERVICES				l .	ŀ	
METERS			Overhead	Underground	>800	25.00	
METERS					771 41100	05.00	
METERS	Temporary Service		Overhead	Underground	TIL AMPS		
MOTORS						l .	
RESID/COM			1 ` '				
Interior			1 ` ′ ′			1	
APPLIANCES				fort and an	- Fut-vian	i	
Insta-Hot			•	1		1	
Dryers	APPLIANCES	ļ		1 ' 1		J	
Compactors Spa Washing Machine 2.00				1	1	1	
Others (denote) 2.00						i	
MISC. (number of)			1	- Spa	Washing Machine	i .	
Air Cond/cent	MICC (muse beyor)	-	1 ' 1			1	
HVAC EMS Thermostat 5.00	WISC. (number of)		1 1		Pools	i .	
Signs			! i	EMS		1	
Alarms/res 5.00 Alarms/com 15.00 Heavy Duty(CRKT) 2.00 Circus/Carnv 7.9 25.00 Alterations 15.00 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 5.00 Over 200 Kva 10.00 MINIMUM FEE/COMMERCIAL 55.00 MINIMUM FEE 45.00 DONTRACTORS NAME TOWN Y COUNTY MASTER LIC. # LIMITED LIC. #				LIVIO		į.	
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Circus/Carnv			l I			1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	270,27
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E Generators 20.00			· · · · · · · · · · · · · · · · · · ·				-/-
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ONTRACTORS NAME TOLUNG COUNTY MASTER LIC. # 45.00 MINIMUM FEE 45.00 MASTER LIC. # 46.64 LIMITED LIC. #		 				8.00	
ONTRACTORS NAME TOWN + Country MASTER LIC. # 45.00 DDRESS MINIMUM FEE 45.00 MINIMUM FEE 45.00 MINIMUM FEE 45.00 MINIMUM FEE 45.00			Over 200 Kva			10.00	
ONTRACTORS NAME TOLUNT COUNTRY MASTER LIC. # 4604 LIMITED LIC. #					TOTAL AMOUNT DUE		
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