

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

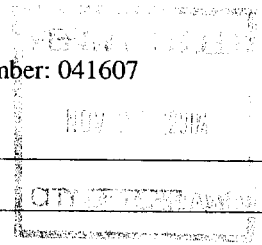
CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 041607

Please Read Application And Notes, If Any, Attached



This is to certify that Union Station Lmt Partnership M. Corp
has permission to commercial space with tenant
up
AT 966 Congress St 064 A001001

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 reported before this building or part thereof is occupied or 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. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature]
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: 04-1607	Issue Date:	CBL: 064 AOOIOOI
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Location of Construction: 966 Congress St	Owner Name: Union Station Lmt Partnership	Owner Address: 12 Brook St	Phone: (781)431-7060
Business Name:	Contractor Name: P.M. Construction	Contractor Address: 19 Industrial Park Road Saco	Phone: 2072827697
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B2

Past Use: commercial space	Proposed Use: commercial space with tenant fit-up	Permit Fee: \$708.00	Cost of Work: \$68,000.00	CEO District: 2
previous: retail	new retail - Arons	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group M Type: 2B	11/4/04
Proposed Project Description: commercial space with tenant fit-up	Signature: <i>[Signature]</i>		Signature: <i>[Signature]</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: dmm	Date Applied For: 10/25/2004	Zoning Approval
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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
date: <i>[Signature]</i> 11/1/04	date:	date: <i>[Signature]</i>

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

11/18/04 Froming okay AMC

12/07/04 okay to issue c/o ~~AMC~~



Certificate of Occupancy

LOCATION 1 Union Plz

CBL 064 A001002

Issued to St John Leasing Corp/P.M. Construction

Date of Issue 12/07/2004

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. 04-1607, **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

Arron's Furniture
Tenant fitup

APPROVED OCCUPANCY

Retail
Use Group M
Type 2B
IBC 2003

Limiting Conditions:

none

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.

AD
12/7/04

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation: 1001
Street Subdivision Lot #: 211

PROPERTY OWNERS NAME

Last: Robert A Connor First: Robert A

Applicant Name: Robert A Connor

Mailing Address of Owner/Applicant (if Different): 1001

2007-8492

PERMIT NO. 121204 FEE \$ 1136.00 If Double Fee Charged

Date Permit Issued: 12/2/04

Local Plumbing Inspector Signature: [Signature] L.P.I. # 2986

67 A 1

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit

Signature of Owner/Applicant

Date: 12/2/04

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules

Local Plumbing Inspector Signature

Date Approved: 12/10/04

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type Of Structure To Be Served:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> EI OTHER — SPECIFY <u>3</u></p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTYOWNER</p> <p>LICENSE # <u> </u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District</p> <p style="text-align: center; font-size: 2em;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center; font-size: 2em;">OR</p> <p>TRANSFER FEE [\$6.00]</p>		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
				Water Heater
		Other: Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
			5	Fixtures (Subtotal) Column 2
			5	Total Fixtures
			\$ 40	Fixture Fee
			\$	Transfer Fee
			\$	Hook-Up & Relocation Fee
			\$ 40	Permit Fee (Total)



Commercial Building Permit Application

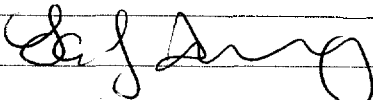
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Total Square Footage of Proposed Structure		Square Footage of Lot	
Assessor's Chart, Block & Lot Chart# <u>64</u> Block# <u>#</u> Lot# <u>1</u>		Owner: <u>Bob Connor</u>	Telephone: <u>781-431-7060</u>
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone: <u>QLOVTO, INC</u> <u>2940 McFarlane Rd, Suite 202</u> <u>Miami, Florida 33133</u> <u>(305)529-2341</u>	Cost Of Work: \$ <u>64,000</u> Fee: \$ <u>70800/00</u>
Current Specific use: <u>unoccupied retail space</u>			
Proposed Specific use: <u>retail - rent to own furniture</u>			
Project description: <u>tenant fit up</u>			
Contractor's name, address & telephone: <u>PM Construction Inc 19 Industrial Park Rd, Saco, ME 04072 207-282-7697</u>			
Who should we contact when the permit is ready: <u>Laura Turney</u>			
Mailing address: <u>PO Box 726 Saco, ME 04072</u>			
Phone: <u>207-282-7697</u>			

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections office, room 315 City Hall or call 874-8703

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 Officials 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: 	Date: <u>10-25-04</u>
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1607	Date Applied For: 1012512004	CBL: 064 AOOIOOI
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Location of Construction: 966 Congress St	Owner Name: Union Station Lmt Partnership	Owner Address: 12 Brook St	Phone: (781)431-7060
Business Name:	Contractor Name: P.M. Construction	Contractor Address: 19 Industrial Park Road Saco	Phone: (207) 282-7697
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	
Proposed Use: retail commercial space with tenant fit-up - Aaron's		Proposed Project Description: commercial space with tenant fit-up	

Dept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 11/01/2004
 Note: **Ok to Issue:**

- 1) Separate permits shall be required for any new signage.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building Status: Approved with Conditions Reviewer: Mike Nugent Approval Date: 11/04/2004
 Note: **Ok to Issue:**

- 1) NO HVAC equipment plans were submitted for review and are not a part of this permit. A separate permit is required for any such equipment.

Dept: Fire Status: Approved with Conditions Reviewer: Lt. MacDougal Approval Date: 11/03/2004
 Note: **Ok to Issue:**

- 1) fire extinguishers shall be provided in accordance with NFPA 10 standards
- 2) the fire alarm system shall be maintained to NFPA 72 standards
- 3) the sprinkler system shall be maintained to NFPA 13 standards



State of Maine
 Department of Public Safety
Construction Permit

Aarons



Reviewed
 for Barrier
 Free

14386

Sprinkled
Sprinkler Supervised

AARON'S FURNITURE

Located at: UNION STATION PLAZA
PORTLAND

Occupancy/Use: MERCANTILE CLASS B

Permission is hereby given to:

GEORTO, INC.
 2980 MCFARLANE ROAD
 SUITE 202
 MIAMI, FL 33133

to construct or alter the afore referenced building according to the plans hitherto filed with the Commissioner and now approved. No departure from application form/plans shall be made without prior approval in writing. This permit is issued under the provision of Title 25, Chapter 317, Section 2448 and the provisions of Title 5, Section 4594 - F.

Nothing herein shall excuse the holder of this permit for failure to comply with local ordinances, zoning laws, or other pertinent legal restrictions. Each permit issued shall be displayed/available at the site of construction.

This permit will expire at midnight on the 17th of April 2005

Dated the 18th day of October A.D. 2004

Michael P. Cantara

Commissioner

Copy-2 Architect

Comments:

PORT CITY DESIGN
 MARK SENGLMANN
 43 DEERING STREET
 PORTLAND, ME 041012211

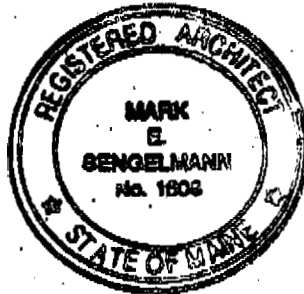


CITY OF PORTLAND
ACCESSIBILITY CERTIFICATE

Designer: MARK SENGELMANN FORT CITY DESIGN
Address of Project UNION STATION PLAZA, SE John's St.
Nature of Project ARON'S FURNITURE
TENANT FIT-UP
Date 10-27-04

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act.

(SEAL)



Signature: *Mark Sengelmann*
Title PRINCIPAL
Firm FORT CITY DESIGN
Address 43 DEERING ST
PORTLAND ME 04101
Telephone 761-9500



CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Rm 315
Portland, ME 04101

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Service

FROM: MARK SENNELMANN
FORT CITY DESIGN

RE: Certificate of Design

DATE: 10-27-04

These plans and/or specifications covering construction work on:

Tenant Fit-up Avon's Furniture
Union Station Plaza, St John's St

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code/1999 Fourteenth Edition, and local amendments.



Signature Mark Sengelmann

Title PRINCIPAL

Firm FORT CITY DESIGN

Address 43 DEERING ST
PORTLAND ME 04101

As per Maine State Law:

\$50,000.00 or more in new construction, repair, expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

PSM 6/20/04



CITY OF PORTLAND MAINE

389 Congress St., Rm 315

Portland, ME 04101

Tel. - 207-874-8704

Fax - 207-874-8716

TO: Inspector of Buildings City of Portland, Maine
Planning & Urban Development
Division of Housing & Community Services

FROM DESIGNER: MARK SENBELMANN
PORT CITY DESIGN

DATE: 10-27-04

Job Name: Amos's Furniture (Tenant Fit up)
Address of Construction: Union Station Plaza, St John's St

THE BOCA NATIONAL BUILDING CODE/1999 Fourteenth EDITION

Construction project was designed according to the building code criteria listed below:

Building Code and Year 1999 BOCA Use Group Classification(s) Manufactile

Type of Construction City 2C Bldg. Height Edg ± 25' Bldg. Sq. Footage _____

Seismic Zone NA Group Class B

Roof Snow Load Per Sq. Ft. NA Dead Load Per Sq. Ft. NA

Basic Wind Speed (mph) NA Effective Velocity Pressure Per Sq. Ft. NA

Floor Live Load Per Sq. Ft. NA CONC SLAB

Structure has full sprinkler system? Yes No _____ Alarm System? Yes No _____
Sprinkler & Alarm systems must be installed according to BOCA and NFPA Standards with approval from the Portland Fire Department.

Is structure being considered unlimited area building? Yes No _____

If mixed use, what subsection of 313 is being considered - 313.1.2 ~ Existing

List Occupant loading for each room or space, designed into this Project.

TOTAL 6236 SF
1386 SF @ 100 = 44 OCC Total load 45 OCCUPANTS
3850 SF @ 1000 = 4 OCC (Designers Stamp & Signature)

PSH 6/07/04

