

CITY OF PORTLAND
PERMITTING AND INSPECTIONS DEPARTMENT

389 Congress Street
Portland, Maine 04101

INVOICE OF FEES

Application No: 201602118	Applicant: HCRI FORE RIVER MEDICAL FACILITIES
CBL: 075 A005001	Location: 195 FORE RIVER PKWY
Invoice Date: 08/10/2016	Permit Type: Change of Use - Commercial

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$1,805.00		\$0.00		\$1,805.00	On Receipt

First Billing

Previous Balance	\$0.00
-------------------------	---------------

Fee Description	Qty	Fee/Deposit Charge
Certificate of Occupancy	1	\$100.00
Change of Use First \$1000	1	\$25.00
Change of Use Add'l \$1000	1	\$1,680.00
		\$1,805.00
Total Current Fees:	+	\$1,805.00
Total Current Payments:	-	\$0.00
Amount Due Now:		\$1,805.00

Detach and remit with payment

CBL 075 A005001
Bill To: HCRI FORE RIVER MEDICAL FACILITIES LLC
550 HERITAGE DR STE 200
JUPITER, FL 33458

Application No: 201602118
Invoice Date: 08/10/2016
Invoice No: 59267
Total Amt Due: \$1,805.00
Payment Amount:

Make checks payable to the *City of Portland*, ATTN: Permitting and Inspections, 3rd Floor, 389 Congress Street, Portland

[Pay On-Line at http://portlandmaine.gov/550/Inspections](http://portlandmaine.gov/550/Inspections)