ty of Portland, Maine	- Building or Use P	Permit	Application	Perm	uit No:	Issue Date:		CBL:	
? Congress Street, 04101	0				04-0130			114 A00	04001
ation of Construction:	Owner Name:	,1 u.X. (2			Address:			Phone:	
Surrenden St/Bedford St	University Of N	Maine		107 M	aine Ave			207-780-4	160
siness Name:	Contractor Name:			contrac	tor Address:			Phone	
'a	Granger Northe	ern, Inc.		<b>84</b> Mie	ddle St. Port	land		20777435	00
ssee/Buyer's Name	Phone:			Permit 7	Гуре:				Zone:
/a	n/a		-	Amer	ndment to Co	ommercial			
ast Use: Jacant \ Parking Lot	Proposed Use: Build New 32, for offices, clas	-	t. Building	Permit	i		: CI D.00   INSPECT	EO District: 3 ION:/	
	500+ seat lectu to permits #03-	re hall. A	Amendment			Denied	Use Groug /	HIA	Fype:
Proposed Project Description: Build new 32,285 sq. Ft. Build seat lecture hall. Amendment				Signatu PEDES Action:	TRIAN ACTI		Signature: RICT (P.A		Denied
				Signatu	ıre:		Γ	Date:	
Permit Taken By: gg	Date Applied For: 02113.12004				Zoning	Approva	1		
	<u></u>	Speci	ial Zone or Review	ws	Zonin	g Appeal		Historic Pres	ervation
<ol> <li>This permit application d Applicant(s) from meetin Federal Rules.</li> </ol>		Sho	reland		Variance	•	E	] Not in Distri	et or Landmark
2. Building permits do not i septic or electrical work.	include plumbing,	🗌 We	tland		Miscella	neous		] Does Not Re	quire Review
3. Building permits are void within <b>six</b> (6) months of the second secon		[] Floo	od Zone		Condition	onal Use		Requires Rev	view
False information may in permit and stop all work.	validate a building	📋 Sub	odivision		Interpretation			Approved	
		Site	e Plan		Approve	d		Approved w/	Conditions
		Maj [	] Minor [] MM		Denied		Ε	Denied	
		Date:			Date:		Dat	e:	

## 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

## **Commercial Building Permit Application**

Location/Address of Construction:	15 SURRE	ENDER ST. / BEI	DFORD ST.
Total Square Footage of Proposed Stru 32, 2-85 SF	cture	Square Footage of Lot 89,	,555 sf
Tax Assessor's Chart, Block & Lot Chart# Block# Lot 114 A OO	# SYSTE	UNINERSITY OF MAINE M 0% UNIVERSITY FHERN MAINE	Telephone: 7 OF 207 780 4160
Lessee/Buyer's Name (If Applicable)	CARO PO. E	t name, address & telephone: DL PO TTER BOX 9.300 LAND, ME 04104 207 ZZB B12	Cost Of Work: <u>SEE BEL</u> OW Fee: SEE BELOW
Current Specific use:			
Current Specific use: Proposed Specific use:500 +	SEAT LECT	URE HALL, OFF	ICES & CLASSROOMS
Proposed Specific use: <u>500 + s</u> Project description: THESE DRAWINGS P	EPICT TH	E HVAC WORK	THAT WILL BE
Proposed Specific use: <u>500 + 5</u> Project description: THESE DRAWINGS P PERFORMED UNDE	EPICT TH 2 PERMIT	E HVAC WORK = #04-0130 [S	THAT WILL BE SSUED 5-24-04,
Proposed Specific use: <u>500 + 5</u> Project description: THESE DRAWINGS P PERFORMED UNDER AND ARE SUBMIT	EPICT TH 2 PERMIT	E HVAC WORK = #04-0130 [S	THAT WILL BE SSUED 5-24-04,
Proposed Specific use: <u>500 + 5</u> Project description: THESE DRAWINGS P PERFORMED UNDE	EPICT TH 2 PERMIT TTED AS e: CONSIGN 4101 4101 it is ready: <u>CA</u>	E HVAC WORK T #04-0130 15 AN AMENDMEN 1 NORTHERN 207 774 3500	THAT WILL BE SSUED 5-24-04, T TO THAT 84 MIDDLE ST.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approvation 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 authonzed 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 authonzed 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.

Carol M. Pottes

Signature of applicant:

Date: 8-10-04

' 1 .

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

⊧#₽04	DISPLAY TI						WORK
Please Read						. 1 in 1	AND ALL TO THE AND
Notes, If Any, Attached				RMIT		Permit Num	er:1041134
his is to certify	that University Q	)f Maine/Consigl	nstructi				<u>SEP 67 2004 </u>
as permission	,	to permit # 0401	for HVA	work.			
T 15 Surrend					<b>G</b> 114 1	<u>4004001</u>	
	hat the person	or persons	mor	ation	epting	this permit	shall comply with all
of the prov	visions of the s ruction, mainte	Statutes of I	ine and	d of the	ances of	f the City o	f Portland regulating application on file in
this depar	rtment.					·	
	ublic Works for streif nature $d$ work renation.		ication h and wi re this I ed or d IR NOTI	n permis ding or th	must procu cherec ed-in. RED.	procured b	te of occupancy must be y owner before this build- thereof is occupied.
OTHE	REQUIRED APPROV	ALS					
Health Dept							
Appeal Board					ĊĊ	U L	lug 9/3/34
Other	Department Name						ng & Inspection Services
		PENAI	LTY FOR	REMOVING	THIS CAR	.D (	
					1		
	•						
					•		
			·				
		· .		1 - 1 <sup>- 1</sup> - 1			
		4 <sup>1</sup>					

ty	of Portland, Maine - Bu	uilding or Use P	Permi	t Application	Per	<b>mit No:</b> 04-1134	Issue Date:		CBL: 114 A0	04001
_	,									04001
cat	ion of Construction:	Owner Name:				r Address:			Phone:	
<u>5 S</u>	urrenden St	University Of N	Maine			Maine Ave			207-780-4	4160
sin	ess Name:	Contractor Name:				actor Address:			Phone .	50
/a		Consigli Const	ruction	L		-	are Suite 300	Portla	20774841	
esse	e/Buyer's Name	Phone:				t Type:			-	Zone:
√a		n/a			Am	endment to Co	ommercial			17
est	Jse:	Proposed Use:		-	Perm	it Fee:	Cost of Work:		O District:	-
Jac	ant / Parking Lot	Amendment to	permit	# 040130 /		\$30.00	\$30.0	00	2	
		Drawing for th			FIRE	DEPT:	Approved J	SPECTI		
		performed und	er pern	nit # 040130.				se Group	:	Type:
Prop	osed Project Description:					÷				
Am	endment to permit # 040130 fo	r HVAC work.			Signa	and the second se		ignature:		
					PEDE	STRIAN ACTI	VITIES DISTRI	СТ (Р.А	.D.)	
					Actio	on: Approv	red Approv	ved w/Co	nditions	Denied
					Signa	ature:		D	ate:	
Perm		Applied For:			-				/	
gg	08	/10/2004	<u> </u>						Historic Pres	
1.	This permit application does n	ot preclude the	Spo	ecial Zone or Revie	ws	Zonii	ng Appeal		Historic Pres	servation
	Applicant(s) from meeting app Federal Rules.			horeland			2		Not in Distri	ict or Landmärk
2.	Building permits do not includ septic or electrical work.	le plumbing,	- W	Vetland		Miscella	neous		] Does Not Re	equire Review
3.	Building permits are void if w within six (6) months of the da		F	lood Zone		Conditio	onal Use		Requires Re	view
	False information may invalid permit and stop all work		🗌 s	ubdivision		Interpre	tation		Approved	
			🗆 s	ite Pian		Approve	ed		Approved w	/Conditions
			Мај		R	Denied			] Denied	$\leq$
			Date:	N 8/10/	ÓĄ	Date:		Date	:	
				1. (	-					

## 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
		DATE	PHONE

	,		<b>ilding or Use Permit</b> (207) 874-8703, Fax: (2	07) 874-8716	Permit No:           04-1134	Date Applied For: 08/10/2004	CBL: 114 A004001
	of Construction:		Owner Name:		Owner Address:		Phone:
5 Surre	enden St		University Of Maine		107 Maine Ave		207-780-4160
siness N	lame:		Contractor Name:		Contractor Address:		Phone
a			Consigli Construction		50 Monument Squ	are Suite 300 Portla	(207) 748-4173
ssee/Buy	yer's Name		Phone:		Permit Type:		
a			n/a		HVAC		
-	Zoning	Status:	Approved	Reviewer	Marge Schmucka	• •	nte: 08/10/2004 Ok to Issue: ☑
Note:	Zoning Building		Approved Approved with Conditions		Marge Schmucka	Approval Da	Ok to Issue: 🗹

## Comments:

9/1/2004-mjn: Called Carol Potter w/ Fire Damper and Pump loading question...