



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 978 Forest Ave

CBL 143 A065001

Issued to Pickus Owen B/Sheridan Corporation

Date of Issue 07/01/2004

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. 04-0306 , 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

Second Floor-Tenant Space Only

APPROVED OCCUPANCY

Use Group B Type 5b
(Boca 1999)

Limiting Conditions:

This is a temporary c/o which will expire on 7/31/04. At that time all remaining work must be complete in order to issue a permanent c/o for the entire project as shown in the approved plans.

This certificate supersedes
certificate issued

Approved:

7/1/04
.....
(Date)

Jon Ruel
.....
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.

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

Permit No: 04-0128	Issue Date:	CBL: 143 A065001
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Location of Construction: 978 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St	Phone: <i>198579334</i> 207-857-9311
Business Name: n/a	Contractor Name: Sheridan Corporation	Contractor Address: PO Box 359 Fairfield	Phone: 2074539311
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Alterations - Commercial	Zone: <i>RP</i>

Past Use: Commercial	Proposed Use: Business / Upgrade of ADA access issues & fire rating of stair / exit corridor.	Permit Fee: \$1,419.00	Cost of Work: \$146,306.00	CEO District: 4
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FIRE DEPT:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:
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Proposed Project Description: Upgrade of ADA access issues & fire rating of stair / exit corridor - <i>interior renovations</i>	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
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Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions	<input type="checkbox"/> Denied
Signature:	Date:		

Permit Taken By: gg	Date Applied For: 02/13/2004	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 checked="" type="checkbox"/> MM <input type="checkbox"/> Date: <i>2/25/04</i>	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 checked="" 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:
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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 _____



04 0126

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.

Location/Address of Construction: 980 Forest Avenue		
Total Square Footage of Proposed Structure Existing Building		Square Footage of Lot n/a No change to the site
Tax Assessor's Chart, Block & Lot Chart# 143 Block# A Lot# 65	Owner: Dr. Owen B. Pickus c/o Maine Center for Healthcare 2 Chabot Street, Westbrook, Me.	Telephone: 857-9311
Lessee/Buyer's Name (If Applicable) n/a	Applicant name, address & telephone: The Sheridan Corporation P.O. Box 359 Fairfield, Me. 04937 Ken Lamoreaux, Dir. of Permitting (owner Agent)	Cost Of Work: \$146,306.00 Fee: \$1419.00
Current Specific use: Business Occupancy		
Proposed Specific use: Same		
Project description: Upgrade of ADA access issues & Fire rating of Stair/Exit corridor. Also miscellaneous Mechanical/Electrical upgrades. No new tenant fit-up at this time.		
email Mike Plans		
Contractor's name, address & telephone: The Sheridan Corporation, P.O. Box 359 453-2820-FAIR Fairfield, Me. 04937 (207) 453-9311		
Who should we contact when the permit is ready: Ken Lamoreaux, Director of Permitting 453-9311		
Mailing address:		
Phone:		

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.

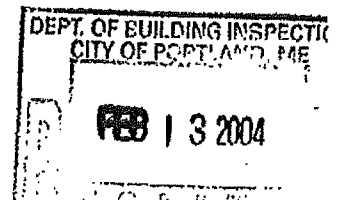
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code 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.

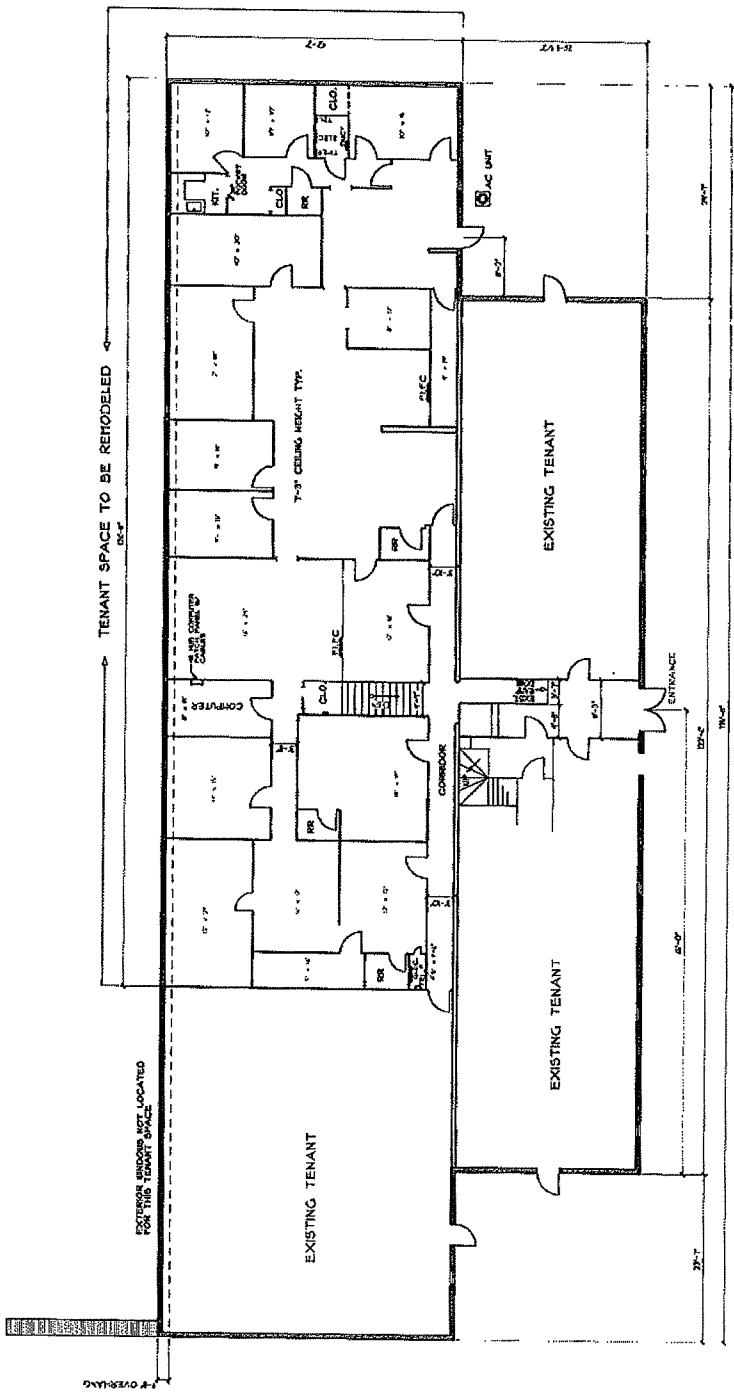
Signature of applicant: <i>Kenneth A. L...</i>	Date: 2/12/04
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

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

Base fee	\$30.00
\$146,000. x \$9.00 @ K	\$1,314.00
Certificate of Occupancy	\$75.00
Total	\$1,419

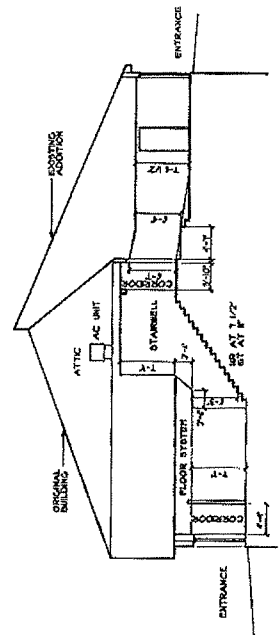




NOTE:
 FINISHES, BALLOONS, PLAN DEVELOPED FROM FIELD DIMENSIONS SHALL
 INDICATE VARY AND MAY NOT BE FULLY DEPICTED HERE.
 ROOM SIZES ARE INDICATED TO NEAREST FOOT
 ROOMS SHOWN REPRESENT FINISHED SIZE.

DATE: _____		REVISION: _____	
DESIGNED BY: _____	TYPE: _____	DATE: _____	BY: _____
CHECKED BY: _____	DATE: _____	DATE: _____	DATE: _____
APPROVED BY: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT NO: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT NAME: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT ADDRESS: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT CITY: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT STATE: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT ZIP: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT PHONE: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT FAX: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT E-MAIL: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT WEBSITE: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT SOCIAL MEDIA: _____	DATE: _____	DATE: _____	DATE: _____
PROJECT OTHER: _____	DATE: _____	DATE: _____	DATE: _____

Sheffield
 ARCHITECTS
 100 FOREST AVENUE
 PORTLAND, MAINE 04102
 TEL: 603.733.1111
 FAX: 603.733.1112
 WWW.SHEFFIELDARCHITECTS.COM



SECTION THROUGH EGRESS CORRIDOR