## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read

| Notes, if Any,   | CTION   |   |
|--|---|---|
| Attached   | PERMIT  | Permit Number: 031257   |
| This is to certify that City Of Portland/CCB   | , Inc.  |   |
| has permission to alterations to 2nd floor   | r transitation se ty adm stration of the  | space   |
| AT 947 Westbrook St  |   |   |
| provided that the person or person the provisions of the Statutes the construction, maintenance a this department. | ons, em or enteration exept<br>s of it ine and of the enterance   | 199 A001002 ing this permit shall comply with all es of the City of Portland regulating eres, and of the application on file in |
| Apply to Public Works for street line and grade if nature of work requires such information.                       | n dication inspect in must go and with a permit on procuble re this boding or at thereof is sed or of the R NOTICE IS REQUIRED. | A certificate of occupancy must be procured by owner before this building or part thereof is occupied.                          |
| OTHER REQUIRED APPROVALS   |   |   |
| Health Dept.   |   | $\sim \sim $                               |
| Appeal Board   |   | INV 1 H   |
| Other  |   | (1) - (1) (Vistoria)  |
| Department Name  | ENALTY FOR REMOVING THE   | Director - Building & Unipedition Synvices  |
| rı   | ENALTY FOR REMOVING THIS C  | ARD   |

|  | y of Portland, M                            |                 | _                     |                                       |  |                          | mit No:  | Issue Date:               | }         | CBL:           |               |  |
|--|---|-----------------|-----------------------|---------------------------------------|--|--------------------------|--|---------------------------|-----------|----------------|---------------|--|
| 389  | Congress Street, 0                          | 4101 Tel: (     | 207) 874-8703         | , Fax:                                | (207) 874-871                                  | 6                        | 03-1257  |                           |           | 199 A0         | 01002         |  |
| Location of Construction: Owner Name:  |   |                 |                       |                                       | Owner Address:                                 |                          |  |                           | Phone:    |                |               |  |
| 947 Westbrook St  Business Name:  Contractor Name  CCB, Inc.  Lessee/Buyer's Name  Phone:  |   |                 |                       | 389 Congress St                       |  |                          |  |                           |           |                |               |  |
|  |   | Contractor Name | :                     |                                       | Contractor Address: 65 Bradley Drive Westbrook |                          |  |                           | Phone     |                |               |  |
|  |   |                 |                       |                                       |  |                          |  |                           | 20746420  | 626            |               |  |
|  |   | Phone:          |                       |                                       | Permit Type:                                   |                          |  |                           |           | Zor            |               |  |
|  |   |                 |                       |                                       |  | Alterations - Commercial |  |                           |           |                | NO            |  |
| Past Use: Proposed Use:  |   | Proposed Use:   |                       |                                       | Permit Fee: Cost of Wor                        |                          | rk: CEO District:                              |                           |           |                |               |  |
| Jetport Jetport w/ alter transportation administration   |   |                 | erations to 2nd floor |                                       | \$84.00  |                          | \$6,32   | \$6,327.00 3              |           |                |               |  |
|  |   | •               |                       | FIRE DEPT:                            |  | Approved                 |  |                           | · ` ` ` ` |                |               |  |
|  |   | administration  | i office space        |                                       | ☐ Deni   |                          | Denied   | Use Gro                   | oup: R    | Туре:          |               |  |
|  |   |                 | Į.                    |                                       |  | ļ                        |  |                           | ļ         |                | 103           |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           | 10/8/          | 17/1          |  |
| 1  | osed Project Description                    |                 |                       |                                       |  |                          | Signature: Sign PEDESTRIAN ACTIVITIES BISTRICT |                           |           | ature: All I   |               |  |
| aite   | rations to 2nd floor t                      | ransportation   | security admini       | stration                              |  |                          |  |                           |           |                |               |  |
|  |   |                 |                       |                                       |  | PEDE                     | STRIAN ACTI                                    | ALLIES BISI               | RICT (F   | .A.D.) (       |               |  |
|  |   |                 |                       |                                       |  | Action                   | ı: Approv                                      | red 🗌 App                 | roved w/  | Conditions     | Denied        |  |
|  |   |                 |                       |                                       |  | Signat                   | ture:  |                           | •         | Date:          |               |  |
| Pern   | nit Taken By:                               | Date A          | pplied For:           |                                       |  |                          |  | Approva                   | .1        |                |               |  |
| kw   | •   |                 | 7/2003                |                                       |  |                          | Zoning   | Approva                   | II        |                |               |  |
| 1  | This permit applica                         | tion does not   | preclude the          | Special Zone or Reviews Zoning Appeal |  |                          | Historie Pres                                  | servation                 |           |                |               |  |
| This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.      Building permits do not include plumbing. |   |                 |                       |                                       | ☐ Variance                                     |                          |  | Not in District or Landma |           |                |               |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |
|  |   | Wetland         |                       | Miscellaneous                         |  |                          | Does Not Require Review                        |                           |           |                |               |  |
| 2. Building permits do not include plumbing, septic or electrical work.  |   |                 |                       |                                       |  | 1                        |  |                           |           |                |               |  |
| 3. Building permits are void if work is not started  |   | ☐ Flood Zone    |                       | Conditional Use                       |  |                          | Requires Review                                |                           |           |                |               |  |
| within six (6) months of the date of issuance.   |   |                 |                       | _                                     |  |                          |  |                           |           |                |               |  |
| False information may invalidate a building  |   | Subdivision     |                       | ☐ Interpretation                      |  | ĺ                        | ☐ Approved                                     |                           |           |                |               |  |
|  | permit and stop all                         | work            |                       |                                       |  | l l                      |  |                           | ļ         |                |               |  |
|  |   |                 |                       | ☐ Si                                  | te Plan  |                          | Approve  | xd.                       |           | Approved w/    | Conditions (  |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |
|  |   |                 |                       | Maj [                                 | Minor   MI                                     |                          | Denied   |                           | -         | Denied         | (             |  |
|  |   |                 |                       | Ó                                     | VIL  | 2                        |  |                           |           | كمسم           | $\overline{}$ |  |
|  |   |                 |                       | Date:                                 | 10/17/6  | 9                        | Date:  |                           | Da        | ate:           |               |  |
|  |   |                 |                       |                                       | 10101  |                          |  |                           |           |                |               |  |
|  |   |                 |                       |                                       | •  |                          |  |                           |           |                |               |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |
|  |   |                 |                       | _                                     |  |                          |  |                           |           |                |               |  |
|  |   |                 |                       |                                       | ERTIFICATI                                     |                          |  |                           |           |                |               |  |
| I her  | reby certify that I am                      | the owner of    | record of the na      | med pro                               | operty, or that the                            | e prop                   | osed work is                                   | authorized                | by the    | owner of reco  | rd and that   |  |
| inris  | ve been authorized by diction. In addition, | if a permit fo  | or work describe      | cation i                              | as nis authorized                              | agent                    | and I agree i                                  | the code off              | to all ap | plicable laws  | OI this       |  |
| shall  | have the authority to                       | enter all are   | as covered by su      | ich perr                              | application is is<br>nit at any reason         | iable h                  | our to enforc                                  | e the provi               | sion of   | the code(s) an | ndicable to   |  |
|  | permit.                                     |                 |                       |                                       |  |                          |  | p. 011                    |           |                | F             |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |
| SIC  | NATURE OF APPLICAN                          |                 |                       |                                       | ADDRES   | 2                        |  | D v data                  |           | DETO           | NE            |  |
| 3101   | WITORD OF ALTERCAN                          |                 |                       |                                       | ADDRES   | •                        |  | DATE                      |           | PHC            | ME.           |  |
|  |   |                 |                       |                                       |  |                          |  |                           |           |                |               |  |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

## 03-1251

## All Purpose 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: Por   | TlAND JETPORT - TSA OFF.  | ica SPACE-ZNR/LUC/  |  |  |  |
|---|---|---|--|--|--|
| Total Square Footage of Proposed Structure Existing CYSF Room   | ure Square Footage of Lot MA  |   |  |  |  |
| Tax Assessor's Chart, Block & Lot<br>Chart# Block# Lot#   | Owner: PORTLAND JETRORT  CITY OF PORTLAND   | Telephone:  |  |  |  |
| Lessee/Buyer's Name (If Applicable) TRANS PORTATION Sccrity Administration  | Applicant name, address & Cost Of Work: \$ 6327.  65 BRADIN DRIVE, WESTBROOK  Newell PORTER 464-2626 x227  Fee: \$ 77. 94 |   |  |  |  |
| Current use: TSA Office SPACE  If the location is currently vacant, what we approximately how long has it been vacant.  Proposed use: Compater Equipment description: | ant: NA   | 84.00<br>— owe \$6.06   |  |  |  |
| Project description: ENLAGE EXIST  Contractor's name, address & telephone:  Who should we contact when the permit is  Mailling address: 65 BRARIE  Westbrook          | CCB, Inc<br>Is ready: Newell Parter<br>Drive  | DEPT. OF BUILDING 4NSPECTION OF PORTLAND, ME  OCT - 7 2003  E G E I V E |  |  |  |
| We will contact you by phone when the previous the requirements before starting and a \$100.00 fee if any work starts before  | permit is ready. You must come in and provided with a Right Royleyer. A stop in   | ork order will be lesued  |  |  |  |

INFORMATION IN ORDER TO APROVE THIS PERMIT.

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: | Mund | top | Date: 10/6/03 |
|-------------------------|------|-----|---------------|
| •                       |      |     |               |

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall