

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED

Permit Number 041830

DEC 27 2004

CITY OF PORTLAND

This is to certify that Avalon Commercial Properties, Inc / DM Building & Contracting

has permission to Demolish center wall to create workstation create opening between rooms 5 & 6, create new window with glass door a

AT 1685 Congress St Portland, OR 97219 A013001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State of Oregon 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 when permission is procured 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. _____

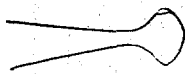
Appeal Board _____

Other _____

Department Name

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: 04-1830	Issue Date: DEC 27 2004	Permit No: 219 A013001
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Location of Construction: 1685 Congress St	Owner Name: Avalon Commercial Properties Llc	Owner Address: 771 10th Ave
Business Name:	Contractor Name: DMC Painting & Contracting	Contractor Address: One City Center 4th Floor CITY OF PORTLAND 080
Lessee/Buyer's Name	Phone:	Permit Type: Zone: RP/CT
Past Use: Commercial - <i>offices</i>	Proposed Use: <i>DR</i> Commercial demolish center wall, create opening between rooms & create window	CEO District: 3 <i>RR2</i>
		Use Group: <i>B</i> Type: <i>5A</i>
		Signature: <i>[Signature]</i>
		Signature: <i>[Signature]</i>
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature: Date:

Permit Taken By: dmartin	Date Applied For: 12/15/2004	Zoning Approval		
<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>		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 type="checkbox"/> MM <input type="checkbox"/> Date: <i>12/21/04</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: <i>[Signature]</i>

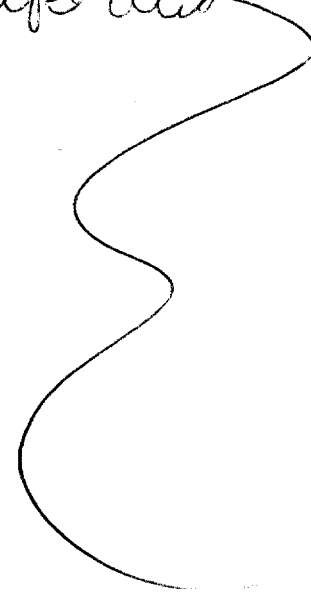
CERTIFICATION

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

2/16/05 - Final for creating open space for
Physical therapy office - w/ Mike Collins - no issues
for Building or Electrical Dept - OK to proceed
Jamm

Clearcut



CBLH 219-A-13
permit # 04-1830

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: 5 Congress St. - 1st floor

Total Square Footage of Proposed Structure NA Square Footage of Lot NA

Tax Assessor's Chart, Block & Lot Chart# <u>219</u> Block# <u>A</u> Lot# <u>013</u>	Owner: <u>Qualon LLC c/o Drago Mgmt Co. One City Center</u>	Telephone: <u>207-871 1080</u>
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Lessee/Buyer's Name (If Applicable) <u>Health South</u>	Applicant name, address & telephone: <u>Al Knight Drago Mgmt Co. One City Center</u>	Cost Of Work: <u>\$10,000</u> Fee: <u>111</u>
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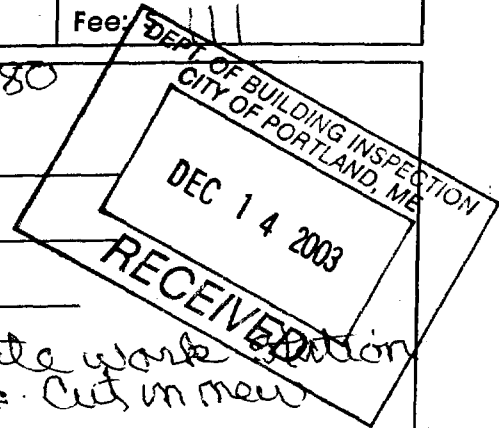
Current use: Office 871-1080

If the location is currently vacant, what was prior use: ---

Approximately how long has it been vacant: ---

Proposed use: office

Project description: Demo center offices to create work areas. Cut opening between rooms 5 & 6. Cut in new window to kitchen area.



Contractor's name, address & telephone: DMC. Painting + Remodeling - One City Center - 4th floor - 871-1080
 Who should we contact when the permit is ready: Al Knight
 Mailing address: Same as applicant
 Phone: 871-1080

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE 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: Al Knight & Le Date: 12-7-04

This is not a permit, you may not commence ANY work until the permit is issued

Specifications for Construction Health South Stroudwater Crossing Portland, Maine

December 6, 2004

Carpentry:

- ▶ Demo all interior offices as shown on plan. Leave existing reception wall, door, and glass intact. Leave @ 5' of right hand wall and cap end with new drywall.
- ▶ Patch all affected areas and prep for painting.
- ▶ Construct @ 12' of new post form countertop behind reception wall from corner to doorway. Countertop to be supported with wood triangular gussets.
- ▶ In rooms 5 & 6, create a 6' wide opening in adjoining wall. Create a soffit so no ceiling work will have to be done.
- ▶ Cut in a new small window to the left of the entrance to the kitchenette area as shown on plan.

Electrical:

- ▶ Remove all lighting and wiring needed for demo of interior area. Re-install lights once new ceiling is installed. Re-install emergency lighting to meet code.

Sprinklers:

- ▶ Install sprinkler drops to new ceiling height and install new heads as needed to meet all codes.

HVAC:

- ▶ Rework ducting in new ceiling as needed to adequately heat and cool the new open area.

Paint:

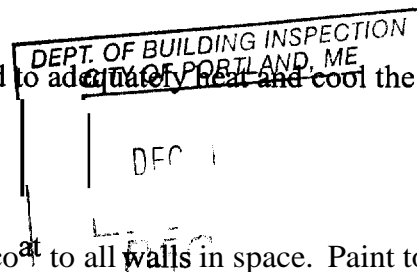
- ▶ Prime all new work and then apply one coat to all walls in space. Paint to be similar in color to existing and in an latex eggshell washable finish.

Flooring:

- ▶ Remove all carpet in the interior spaces. Carpet in exterior offices to remain. Install new carpet chosen by tenant from owner's building standard carpet books.

Plumbing:

- ▶ Remove all fixtures in restroom and cap off pipes below floor level. Remove raised portion of floor in restroom.



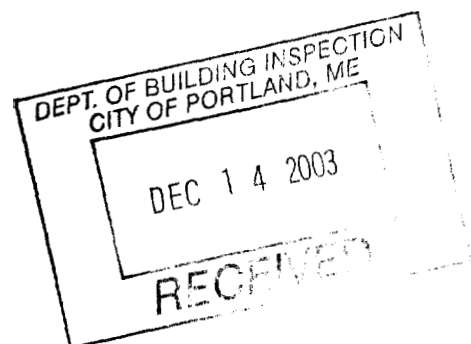
Ceilings:

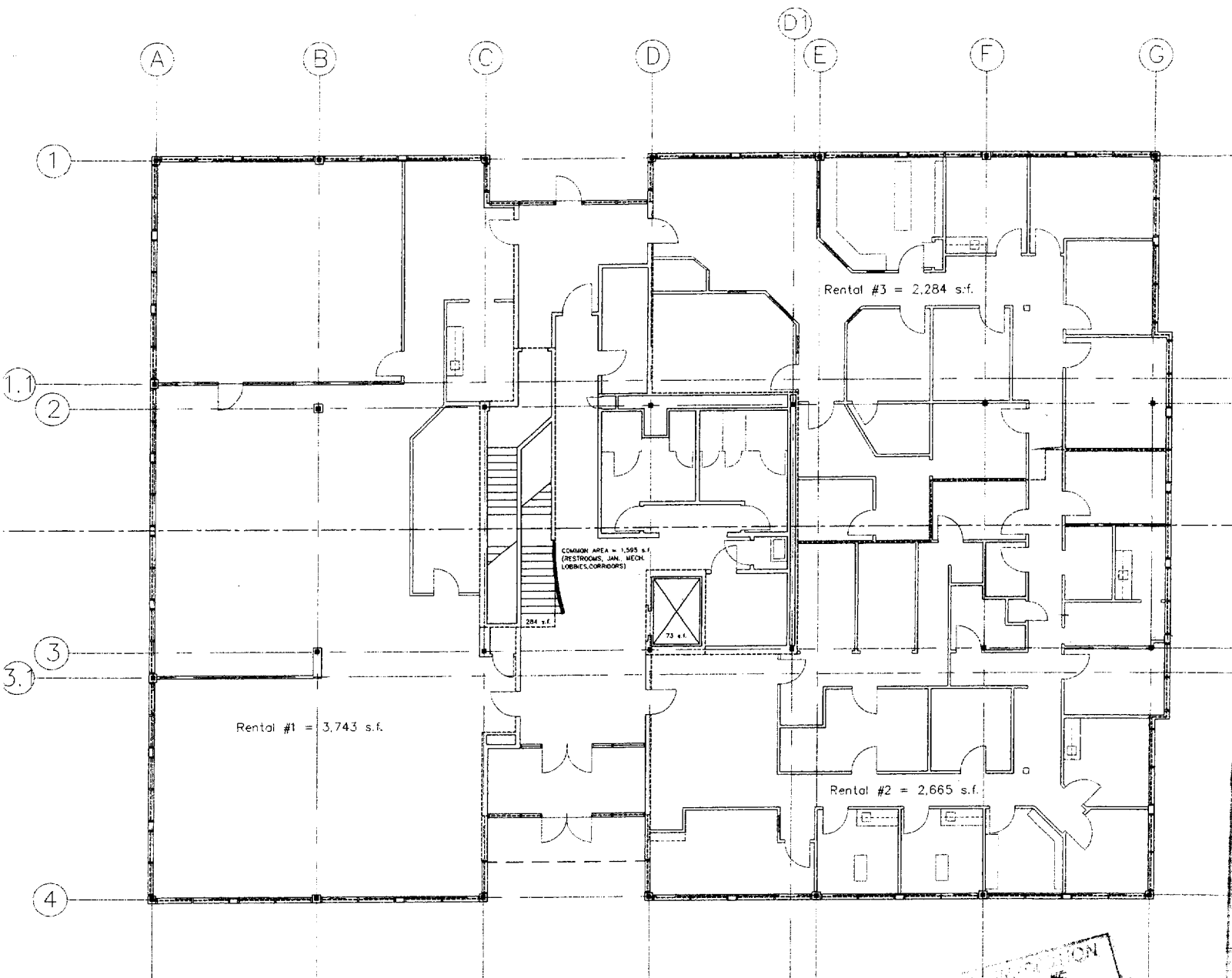
- ▶ Remove ceilings in area of demo. Replace with new ceiling matching existing.

Locks:

- ▶ Re-key Suite door.

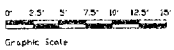
NOTE: ALL TRADES TO BE RESPONSIBLE FOR THEIR OWN DAILY CLEANUP AND DESPOSAL OF TRASH AND DEBRIS.



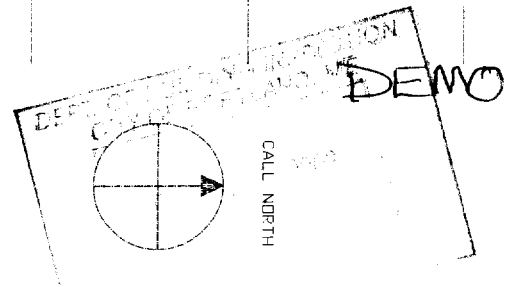


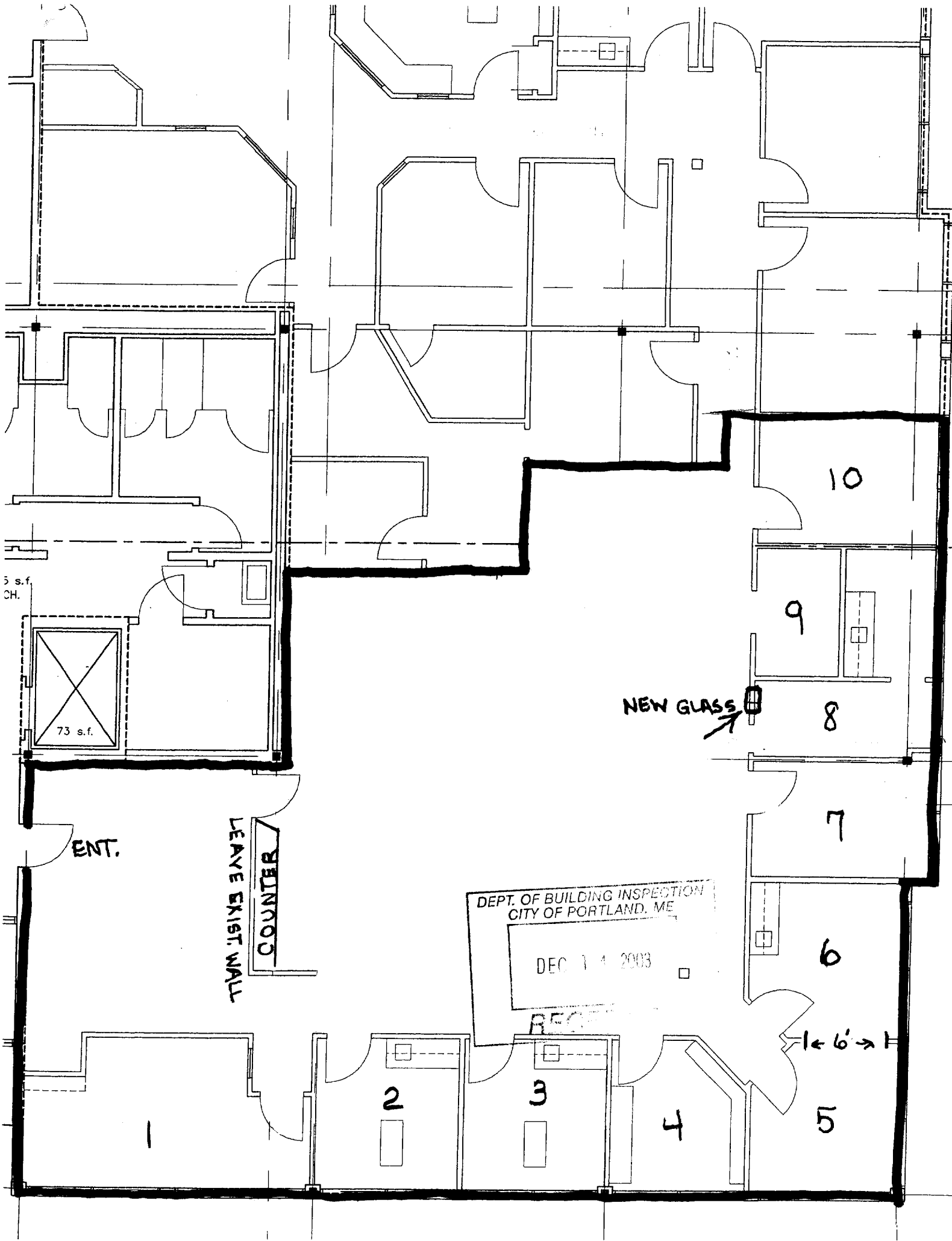
FIRST FLOOR PLAN -- ARCHITECTURAL

SCALE: 1/8" = 1'-0"



Graphic Scale





5 s.f.
CH.

73 s.f.

ENT.

LEAVE EXIST. WALL
COUNTER

NEW GLASS

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME

DEC 14 2003

RECEIVED

6'

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December 6, 2004

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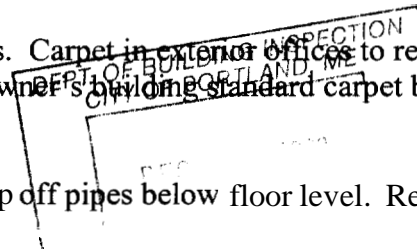
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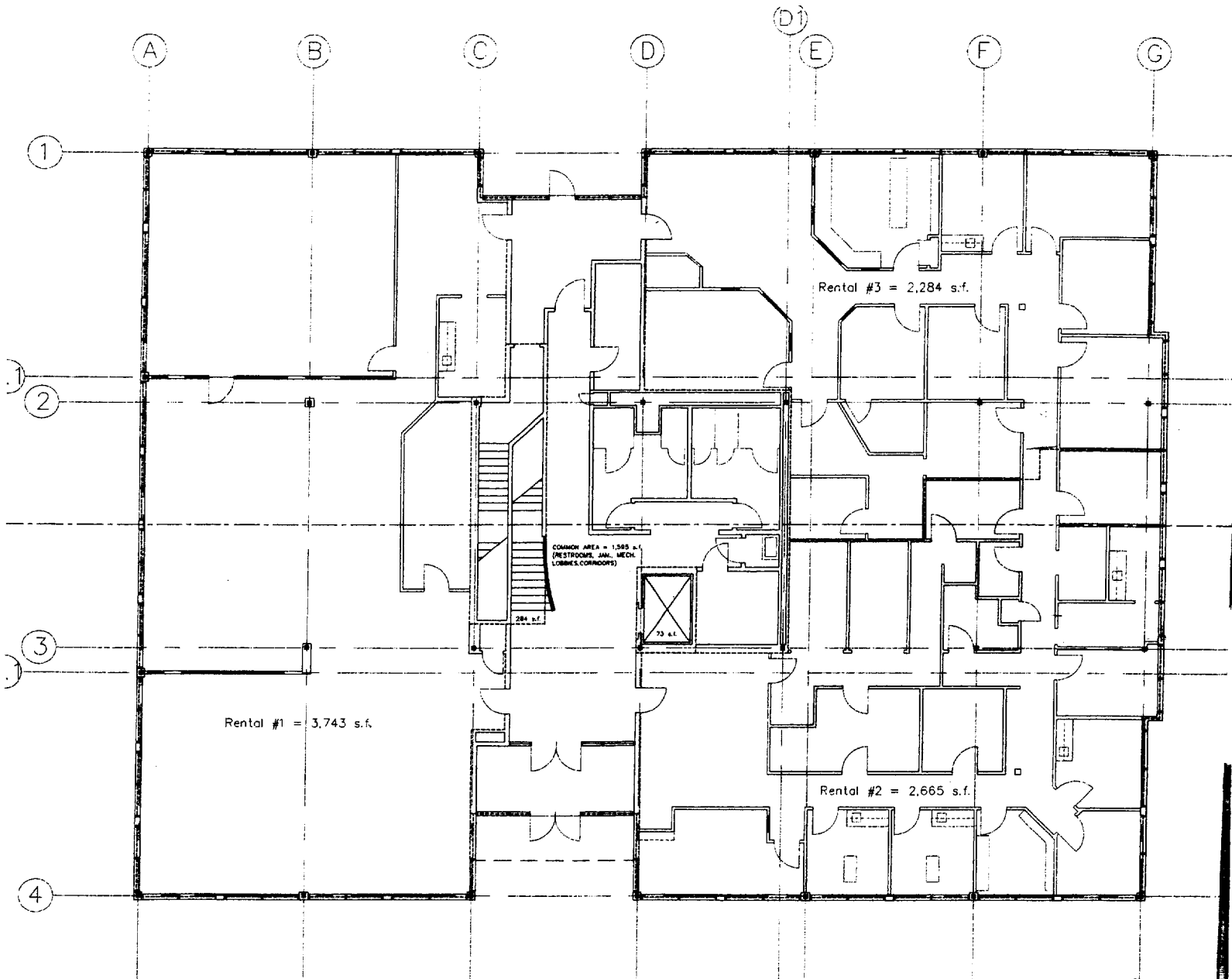
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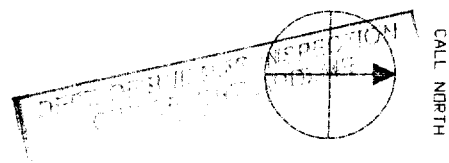
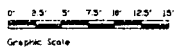
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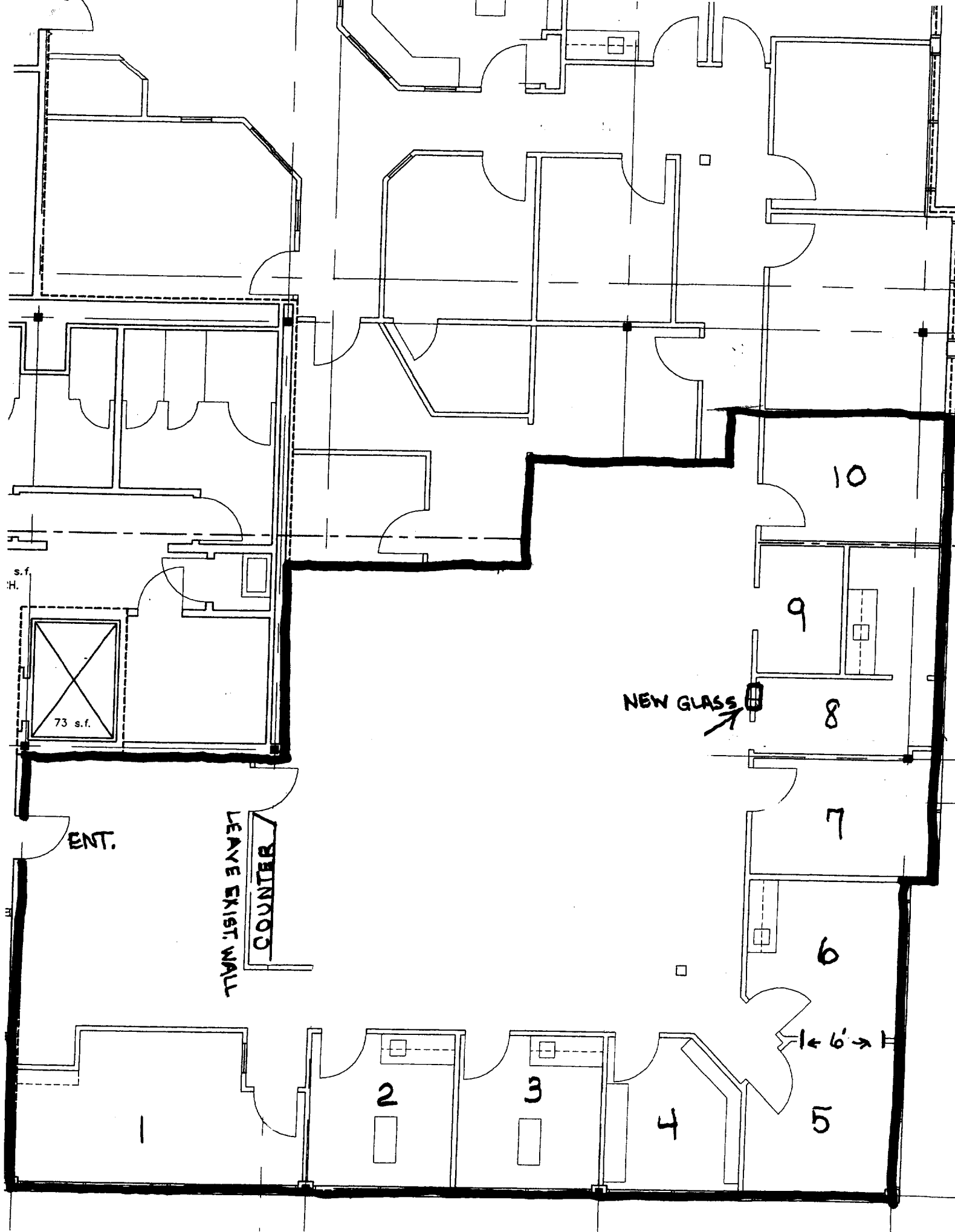


FIRST FLOOR PLAN — ARCHITECTURAL

SCALE: 1/8" = 1'-0"



DEMO



s.f.
H.

73 s.f.

ENT.

LEAVE EXIST. WALL
COUNTER

NEW GLASS

10

9

8

7

6

5

2

3

4

1<6'>1'

City of Portland, Maine - Building or Use Permit

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

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Business Name:	Contractor Name: DMC Painting & Contracting	Contractor Address: One City Center 4th Floor Portland	Phone: (207) 871-1080
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial demolish center wall, create opening between rooms & create window	Proposed Project Description: Demolish center wall to create workstation, create opening between rooms 5 & 6, create new window to kitchen area
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Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 12/22/2004
Note: **Ok to Issue:**

1) Non structural renovations

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Lt. MacDougal **Approval Date:** 12/21/2004
Note: **Ok to Issue:**

- 1) the fire alarm system shall be maintained to NFPA 72 standards
- 2) the sprinkler system shall be maintained to NFPA 13 standards