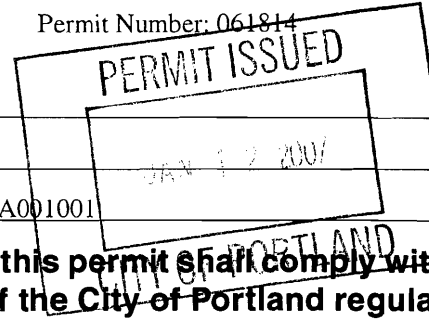


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

Permit Number: 061814



This is to certify that NH6 LR III LTD /Accor No America
has permission to Remodel Guest rooms for handicapped accessible
AT 1 RIVERSIDE ST L 266 A001001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of Maine 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 used or service is closed-in. 4
OUR NOTICES REQUIRED

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Greg Cass
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Jeanie Bouke 1/4/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|-----------------------|-------------------------------------|---------------------|
| Permit No: 06-1814 | Issue Date: PERMIT ISSUED | CBL: 266 A001001 |
|-----------------------|-------------------------------------|---------------------|

| | | | |
|---|---|---|----------------------|
| Location of Construction: 1 RIVERSIDE ST | Owner Name: NH6 LR III LTD | Owner Address: PO BOX 117508 | Phone: |
| Business Name: | Contractor Name: Accor North America | Contractor Address: 4001 International Pkwy Carrollton | Phone: 3122607107 |
| Lessee/Buyer's Name | Phone: | Permit Type: Alterations - Commercial | Zone: B-4 |

| | | | | |
|-----------------------------------|---|-------------------------|------------------------------|--------------------|
| Past Use: Commercial - Motel 6 | Proposed Use: Commercial - Motel 6- Remodel Guest rooms for handi-cap accessible | Permit Fee: \$570.00 | Cost of Work: \$55,000.00 | CEO District: 3 |
|-----------------------------------|---|-------------------------|------------------------------|--------------------|

| | | |
|---|--|--|
| Proposed Project Description: Remodel Guest rooms for handi-cap accessible | FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i> | INSPECTION: Use Group: <i>RI</i> Type: <i>SA</i> <i>IBC-2003</i> |
| | Signature: <i>Cree Carr</i> | Signature: <i>JMB 1/4/07</i> |

| | | |
|-----------------------------|---------------------------------|------------------------|
| Permit Taken By: Idobson | Date Applied For: 12/21/2006 | 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> | <p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/></p> <p>Date: <i>12/22/06</i></p> | <p>Zoning Appeal</p> <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 <p>Date:</p> | <p>Historic Preservation</p> <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 <p>Date:</p> |
|---|---|--|---|

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

02/09/07. Checked plumber/Ferris +
electrical for new Bathrooms + Handicap
Accessibility in various rooms. OK to close in
all. JmM.

See printout of inspection -
OK to close out.

ELECTRICAL PERMIT

City of Portland, Me.

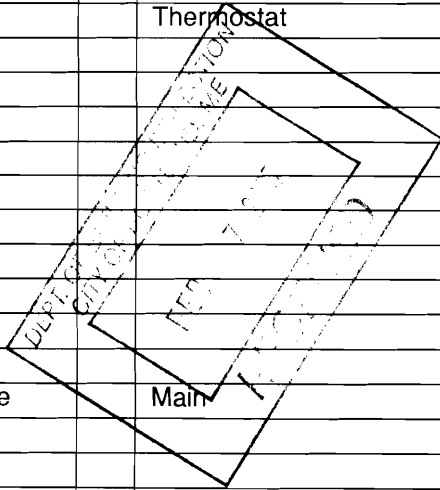


To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 2/7/07
 Permit # 2007-4107
 CBL# 206A1

LOCATION: Motel 6 Riverside St. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER _____
 TENANT _____ PHONE # _____

| | | | | | | | TOTAL EACH FEE | |
|-------------------|--------------|------------------|-----------|---------------|----------|-----------------|------------------------------|-------------------|
| OUTLETS | <u>25</u> | Receptacles | <u>30</u> | Switches | <u>7</u> | Smoke Detector | | .20 |
| FIXTURES | <u>21</u> | Incandescent | | Fluorescent | | Strips | | .20 |
| SERVICES | | Overhead | | Underground | | TTL AMPS <800 | | 15.00 |
| | | Overhead | | Underground | | >800 | | 25.00 |
| Temporary Service | | Overhead | | Underground | | TTL AMPS | | 25.00 |
| | | | | | | | | 25.00 |
| METERS | | (number of) | | | | | | 1.00 |
| MOTORS | | (number of) | | | | | | 2.00 |
| RESID/COM | | Electric units | | | | | | 1.00 |
| HEATING | | oil/gas units | | Interior | | Exterior | | 5.00 |
| | | | | | | | | |
| APPLIANCES | | Ranges | | Cook Tops | | Wall Ovens | | 2.00 |
| | | Insta-Hot | | Water heaters | | Fans | | 2.00 |
| | | Dryers | | Disposals | | Dishwasher | | 2.00 |
| | | Compactors | | Spa | | Washing Machine | | 2.00 |
| MISC. (number of) | | Others (denote) | | | | | | 2.00 |
| | | Air Cond/win | | | | | | 3.00 |
| | | Air Cond/cent | | | | Pools | | 10.00 |
| | | HVAC | | EMS | | Thermostat | | 5.00 |
| | | Signs | | | | | | 10.00 |
| | | Alarms/res | | | | | | 5.00 |
| | | Alarms/com | | | | | | 15.00 |
| | | Heavy Duty(CRKT) | | | | | | 2.00 |
| | | Circus/Carnv | | | | | | 25.00 |
| | | Alterations | | | | | | 5.00 |
| | Fire Repairs | | | | | | 15.00 | |
| | E Lights | | | | | | 1.00 | |
| | E Generators | | | | | | 20.00 | |
| PANELS | | Service | | Remote | | Main | | 4.00 |
| TRANSFORMER | | 0-25 Kva | | | | | | 5.00 |
| | | 25-200 Kva | | | | | | 8.00 |
| | | Over 200 Kva | | | | | | 10.00 |
| | | | | | | | TOTAL AMOUNT DUE | |
| | | | | | | | MINIMUM FEE/COMMERCIAL 55.00 | MINIMUM FEE 45.00 |



CONTRACTORS NAME Jeff's Electric MASTER LIC. # 17591
 ADDRESS 3 He 114 Avenue Cumberland LIMITED LIC. # _____
 TELEPHONE 879-7155 831-6875

SIGNATURE OF CONTRACTOR Jeffrey J. Sawyer