

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED
Permit Number: Q51694
FEB 10 2006
CITY OF PORTLAND

This is to certify that 1039 Riverside Llc /Patco Construction
has permission to New 10,000 sq ft Pre-engineered building w/ office lab & production space
AT 1039 Riverside St 331 A001001

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 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 procured before this building or part thereof is leased or occupied. 48 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. Greg Cass 12-7-06
Health Dept.
Appeal Board
Other Department Name

Signature of 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: 05-1694	Issue Date: FEB 10 2006	CBL: 331 A001001
Owner Address: 340 Fore St	CITY OF PORTLAND	
Contractor Address: 1293 Main St Sanford	207-327-5574	
Lessee/Buyer's Name	Phone:	Permit Type: Commercial
		Zone: C1

Location of Construction: 1039 Riverside St	Owner Name: 1039 Riverside Llc
Business Name:	Contractor Name: Patco Construction
Lessee/Buyer's Name	Phone:

Past Use: Commercial Condo's	Proposed Use: New 10,000 sq ft Pre-engineered building w/ offices, lab & production space
Proposed Project Description: New 10,000 sq ft Pre-engineered building w/ offices, lab & production space	

Permit Fee: \$6,558.00	Cost of Work: \$718,000.00	CEO District: 5
FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>Need to Review Lab Process</i>	INSPECTION: Use Group: <i>3</i> Type: <i>2B</i> <i>2/10/06</i>	
Signature: <i>Corey Carr</i>	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Idobson	Date Applied For: 11/18/2005	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 checked="" type="checkbox"/> Site Plan <i>2005-0152</i> Maj <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/> Date:	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 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

03/24/06. Underground plumbing - test
on + taking off - all pipes OK - OK to
Buchanan - Spoke to John of BSA who
said that Kevin Carroll & Jennine Burke
did previous setbacks & building inspection
through not on permit or in Register?

Tom M

07/18/06 above ceiling insp. okay } ~~1144~~

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: York

Street Subdivision Lot #: 1039 1/2 J. S. St.

PROPERTY OWNERS NAME

Last: Bioprocessing First: Thomas

Applicant Name: Thomas Mark Cup

Mailing Address of Owner/Applicant (If Different): 1111 York Ave. York ME 04106

Date Permit Issued: 3/23/06 \$ 2040.00 If Double Fee Charged

Thomas Mark Cup
Local Plumbing Inspector Signature

L.P.I. # 0744

331 A 001

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant

Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Rec/production</u>	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>11118</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock		Bathtub (and Shower)
	5	Floor Drain		Shower (Separate)
	1	Urinal	14	Sink
		Drinking Fountain	3	Wash Basin
	1	Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: <u>Map Drains</u>	1	Water Heater
TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	29	Fixtures (Subtotal) Column 1
			11	Fixtures (Subtotal) Column 2
			33	Total Fixtures
				Fixture Fee
				Transfer Fee
			Hook-Up & Relocation Fee	
			Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

214.00