City of Portland, Maine - Building or Use Permit Application								CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 87					5	10-1336			375 A0	23001
Location of Construction: Owner Name:					Owner Address:		Phone:			
94 AUBURN ST Unit#108 OAKPOINT L			LC		88 ROUND HILL RD # 2					
Business Name: Contractor N		Contractor Name	ne:		Contractor Address:			Phone		
Regan &		Regan & Com	z Company		106 Merrill Road Gray			2073293441		
Lessee/Buyer's Name Phone:		Phone:	Phone:		Permit Type:			•	Zone:	
					Alterations - Commercial					
Past	Use:	Proposed Use:			Permit Fee: Cost of Work:		CEO District:			
Cor	nmercial Office	Commercial O	Commercial Office - add wall to			\$270.00	\$25,00	00.00	0 5	
		make 2 offices		-	FIRE	DEPT:	Approved	INSPEC	CTION:	
		& paint add 2	¾ walls	5			Denied	Use Gro	oup:	Type:
Prop	osed Project Description:									
add	wall to make 2 offices & k	citchenette carpet & pai	0		5		Signature:			
					PEDESTRIAN ACTIVITIES DISTRICT (P.			<b>P.A.D.</b> )		
					Action: Approved Appro		oroved w/	ed w/Conditions Denied		
					Signature:			Date:		
Perm	iit Taken By:	Date Applied For:			Zoning Approval					
ldo	bson	10/25/2010	Zoning Approva							
1.	1. This permit application does not preclude the Applicant(s) from meeting applicable State and		Special Zone or Reviews		Zoning Appeal			Historic Preservation		
			Shoreland		Variance			Not in District or Landmark		
	Federal Rules.									
2.	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Review		
3.	*		Flood Zone			Conditional Use			Requires Review	
False information may invalidate a building permit and stop all work		Subdivision		Interpretation		Approved				
			Site Plan		Approved		Approved w/Conditions			
			Maj [	Minor MM		Denied			Denied	
		Date:			Date:		Da	ate:		

## 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

Location of Construction:	Owner Name:		ner Address:	Phone:			
94 AUBURN ST Unit#108	OAKPOINT LLC		ROUND HILL RD #				
Business Name:	Contractor Name:		Contractor Address:		Phone		
	Regan & Company	10	6 Merrill Road Gray		2073293441		
Lessee/Buyer's Name	Phone:		mit Type:	Zone:			
		A	lterations - Commerci	al			
Dept: Zoning Status: A Note:	Approved with Condition	s <b>Reviewer:</b> N	Aarge Schmuckal	Approval Da	te: 10/25/201 Ok to Issue: ☑		
1) This property shall remain offices. Any change of use shall require a separate permit application for review and approval.							
<ol> <li>This permit is being approved on work.</li> </ol>	-						
<b>Dept:</b> Building <b>Status:</b> A	Approved with Condition	s <b>Reviewer:</b> J	eanine Bourke	Approval Da	te: 11/09/201	0	
Note:				(	Ok to Issue: 🗹		
1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.							
<ol> <li>Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.</li> </ol>							
and approrval prior to work.	1	11 ,		i pluits lequiles	separate review		
	Approved with Condition		Capt Keith Gautreau	Approval Da	-	$\overline{0}$	
				Approval Da	-		
Dept: Fire Status: A	Approved with Condition	s <b>Reviewer:</b> C		Approval Da	te: 11/03/201		

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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE