				PEMITISSAED				
City of Portland, Mai		1011	rmit No:	Issue Date:	CL:	1 8		
389 Congress Street, 041	01 Tel: (207) 874-870	03, Fax: (207) 874-8'	716	04-0231	MAR 2 3	2 2004 401 A 0)05001	
Location of Construction: Owner Name:				Owner Address:		Phone:		
1361 Washington Ave Carye Raymor		ond A Etal	15 N	15 Monsignor O'brien Hwy		PERILAND		
Business Name: Contractor		me:	Contr	actor Address:		Phone		
	TBD	TBD		tland				
Lessee/Buyer's Name Phone:			ľ	Permit Type: Alterations - Commercial			Zone:	
Past Use: Proposed Use:			Perm	it Fee:	Cost of Work:	CEO District:	7	
LL Bean Call Ctr.	Insurance of	Insurance office Liberty Mutual /		\$3,246.00	\$350,000.0	0 4	İ	
Tenant Fit-up		p	FIRE DEPT: Approved Denied		Approved Use	INSPECTIONS Use Group Type 2		
Insurance office/ Tenant Fi		Actio	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conditions Denied					
			Signa Signa	ture		Date		
Permit Taken Bv:	Date Applied For:			Zoning	Approval			
ldobson	03/11/2004		——					
1. This permit application	n does not preclude the	Special Zone or Re	views	ws Zoning Appeal		Historic Preservation		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	Shoreland		Variance		Not in District or Landmark	
 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 		Wetland		Miscellaneous Conditional Use Interpretation Approved Denied		Does Not Require Review Requires Review Approved Approved w/Conditions Denied Date:		
		Flood Zone						
		Subdivision						
		Site Plan						
		Maj Minor M	IM -					
	Date: -3 3/1	6/04						
						/		
		CERTIFICAT	ΓΙΟΝ					

I hereby certify that 1 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	

CITY OF PORTLAND, MAINE Department of Building Inspection

Certificate of Occupancy

LOCATION 1361 Washington Ave

CBL 401 A005001

Issued to Carye Raymond A Etal/TBD

Date of Issue 06/15/2004

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 04-0231 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVEDOCCUPANCY

Tenant Fit-up-Insurance Office

Inspector

Use Group B Type 2C (Boca 1999)

Limiting Conditions:

This Certificate covers permit #04-0231 only. Any future work/alterations shall require separate permit.

This certificate supersedes certificate issued

Approved:

Dota) La

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

4/23/04 - 12 6 de 6 12 /2 /2 100 /

6/19/69 - Jinal inspection OK Be clo subject to GIRE And exctrical inspection schooled for this day In