

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Permit Number: 061644

Please Read Application And Notes, If Any, Attached

This is to certify that PRESUMPCOT STREET PROPERTIES LLC / Reagan & Company

has permission to Change of use, new space to office space / fitup

AT 125 PRESUMPCOT ST

425 A002001

PERMIT ISSUED

DEC 28 2006

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this 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 altered 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. Craig Carr 11-9-06

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_  
Department Name

*Thomas M. Mackley* 11/29/06  
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: 06-1644	Issue Date:	CBL: 425 A002001
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Location of Construction: 125 PRESUMPCOT ST	Owner Name: PRESUMPCOT STREET PROPE	Owner Address: PO BOX 403	Phone:
Business Name:	Contractor Name: Reagan & Company	Contractor Address: 106 Merrill Rd. Gray	Phone 2076536353
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: I-M

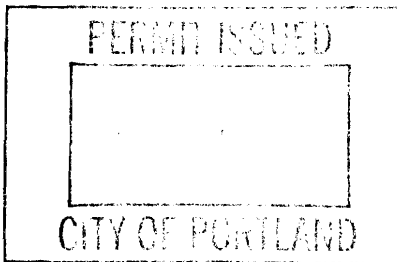
Past Use: Commercial	Proposed Use: Commercial Change of use, new space to office space w/ fitup <i>ME Revenue Services Bldg #1</i>	Permit Fee: \$1,295.00	Cost of Work: \$120,000.00	CEO District: 4
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Bus</i> Type: <i>II</i> <i>IBC 2003</i>	

Proposed Project Description: Change of use, new space to office space w/ fitup	Signature: <i>Craig Carr</i>	Signature: <i>Jm 11/29/06</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: dmartin	Date Applied For: 11/07/2006	<b>Zoning Approval</b>
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>9/11/06</i>	Date: _____	Date: _____



**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



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 125 PRESUMPCOT ST CBL 425 A002001

Issued to PRESUMPCOT STREET PROPERTIES LLC /Reagan & Co Date of Issue 01/26/2007

**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. 06-1644, 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

135 Front

APPROVED OCCUPANCY

Commercial Office Space  
Use Group B  
Type 5B  
IBC 2003

Limiting Conditions:  
none

This certificate supersedes  
certificate issued

Approved:

.....  
(Date)

.....  
*Inspector*

.....  
*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.

# ELECTRICAL PERMIT

## City of Portland, Me.



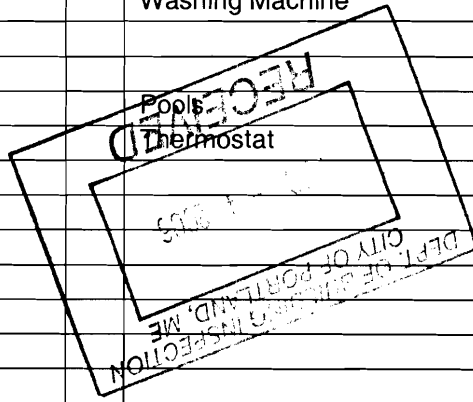
To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 4 Dec 06  
 Permit # 2006-5068  
 CBL# 425-A-2

LOCATION: 131 Presumpscot St Suite B METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER \_\_\_\_\_  
 TENANT Matrix Educational Services PHONE # 791-3681

**TOTAL EACH FEE**

<b>OUTLETS</b>	Receptacles	Switches	Smoke Detector	.20
<b>FIXTURES</b>	Incandescent	Fluorescent	Strips	.20
<b>SERVICES</b>	Overhead	Underground	TTL AMPS <800	15.00
	Overhead	Underground	>800	25.00
<b>Temporary Service</b>	Overhead	Underground	TTL AMPS	25.00
				25.00
<b>METERS</b>	(number of)			1.00
<b>MOTORS</b>	(number of)			2.00
<b>RESID/COM</b>	Electric units			1.00
<b>HEATING</b>	oil/gas units	Interior	Exterior	5.00
	<b>APPLIANCES</b>	Ranges	Cook Tops	Wall Ovens
Insta-Hot		Water heaters	Fans	2.00
Dryers		Disposals	Dishwasher	2.00
Compactors		Spa	Washing Machine	2.00
	Others (denote)			2.00
<b>MISC. (number of)</b>	Air Cond/win			3.00
	Air Cond/cent			10.00
	HVAC	EMS		5.00
	Signs			10.00
	Alarms/res			5.00
	1 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	
<b>PANELS</b>	Service	Remote	Main	4.00
	<b>TRANSFORMER</b>	0-25 Kva		5.00
		25-200 Kva		8.00
Over 200 Kva			10.00	
			TOTAL AMOUNT DUE	
	<b>MINIMUM FEE/COMMERCIAL</b>	<b>55.00</b>	<b>MINIMUM FEE</b>	<b>45.00</b>



CONTRACTORS NAME CU Security Systems MASTER LIC. # MCL60017952  
 ADDRESS P.O. Box 1105 Sanford Me 04073 LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 490-2526

SIGNATURE OF CONTRACTOR [Signature] [Signature]

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	25 Thompson

## PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

PORTLAND PERMIT # 10129 TOWN COPY

Date Permit Issued: 12/18/06 \$ 1124  If Double Fee Charged

A Row L.P.I. # 0.64.1  
Local Plumbing Inspector Signature

### 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.

### Caution: Inspection Required

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

Signature of Owner/Applicant	Date	Local Plumbing Inspector Signature	Date Approved
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## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 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>Commercial</u>	<b>Plumbing To Be Installed By:</b> 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>7844</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b> <b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.	1	Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
<b>OR</b> <b>TRANSFER FEE</b> [\$6.00]		Bidet		Laundry Tub
	1	Other: <u>K.S. Pumps</u>		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
			12	Fixtures (Subtotal) Column 2
			2	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

