GRAHAM/MEUS INC.
ARCHITECTS

224 CLARENDON STREET
BOSTON
MASSACHUSETTS 02116
TELEPHONE
617-267-9399

18 April, 1989

Lieutenant Garaway
City of Portland
Portland Building Inspectors Office
Portland, ME

RE: The Bay Club
One City Center
Portland, Maine

Dear Lt. Garaway ;

This letter is in reply to your recent review of the above mentioned project. The following items have been addressed:

1. Administration Wing; one door with closer will be added to reduce the length of the dead end corridor to less than the twenty foot requirement.

2. Second means of egress from the Cardio-Action Area will be accommodated by enclosing a corridor between the two aerobics studios creating a direct passage from the Cardio-Action Area to the common atrium.

3. In addition to the above mentioned revisions we are currently investigating the existing code requirements regarding the smoke and heat detection system. Due to the lack of distance between egress doors created by existing conditions, we will increase the necessary detection devices over and above the code requirements. With this addition we will theoretically be able to create an early warning system which will provide for additional time for egress.

At this time we are proceeding with these design/drawing changes. If there are any further questions please do not hesitate to call either myself (617 267-9399) or Ron Russo on the job site (773-7237). We trust these changes satisfy your concerns and we await your final approval.

Sincerely,
Graham / Meus Inc. Architects

Darryl T. Filippi

pc. Davis Specialties, HDC

APPLICATIO[illegible] P PERMIT

DEPARTMENT OF BU[illegible] -PECTIONS SERVICES

ELECTR[illegible] LATIONS

Date April 5, [illegible] 19 69

Receipt and Permit number 00128

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 1 City Center 3rd floor

OWNER'S NAME: Fisher Group ADDRESS: 1 City Center, Portland

	FEES
OUTLETS:	
Receptacles 123 Switches 40 Plugmold 40 ft. TOTAL 203	19.30
FIXTURES: (number of)	
Incandescent 151 Flourescent 40 (not strip) TOTAL 191	21.10
Strip Flourescent 60 ft.	3.20
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
METERS: (number of) ____	
MOTORS: (number of)	
Fractional 6	3.00
1 HP or over 1	1.00
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws 11 Over 20 kws ____	55.00
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels 6 500 AMP.	6.00
Transformers 1	2.00
Air Conditioners Central Unit 1	5.00
Separate Units (windows) ____	
Signs 20 sq. ft. and under ____	
Over 20 sq. ft. ____	
Swimming Pools Above Ground ____	
In Ground ____	
Fire/Burglar Alarms Residential ____	
Commercial ____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____	
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires ____	
Repairs after fire ____	
Emergency Lights, battery ____	
Emergency Generators ____	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	115.60

INSPECTION:

Will be ready on ____, 19__; or Will Call X

CONTRACTOR'S NAME: Tier Electric

ADDRESS: RD 1 Cross Road Johnson City, New York 13790

TEL.: 607-729-3634

MASTER LICENSE NO.: 33370 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: Robert H. Klick

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 2019 P

Location 1650 Cathedral

Owner Ted Cathedral

Date of Permit 6/6/89

Final Inspection 8/7/89

By Inspector [illegible]

Permit Application Register Page No. 60

INSPECTIONS: Service 600 Amps by [illegible]

Service called in 7-19-89

Closing-in 6/2/89 by [illegible]

PROGRESS INSPECTIONS: 6/6/89 / /

6/28/89 / /

DATE:	REMARKS:
8-07-89	Secondary conduit section needed on Garbage - see Article 210-3 Connecting Article 250-3 and 384-16 - OK 8/4/89

CODE COMPLIANCE COMPLETED DATE 8/7/89

ELECTRICAL INSTALLATIONS —

Permit Number 00963

Location ONE CITY CENTER

Owner FLEET BANK 22nd Floor

Date of Permit 12/12/89

Final Inspection 2-19-91

By Inspector SPS

Permit Application Register Page No. 80

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 12/15/89 by Thomas

PROGRESS INSPECTIONS: _____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

DATE:	REMARKS:
12/15/89	RATE OF RISE HEAT DETECTOR NEAR HEAT DUCT?

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 12/12/89, 19__
Receipt and Permit number 06963

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: One City Center (second floor) Fleet Bank Office

OWNER'S NAME: One City Center ADDRESS: Portland, ME

	FEES
OUTLETS:	
Receptacles 40 Switches 8 Plugmold ____ ft. TOTAL 48	5.00
FIXTURES: (number of)	
Incandescent 21 Flourescent 44 (not strip) TOTAL 65 3.00 5.50	8.50
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
METERS: (number of) ____	
MOTORS: (number of)	
Fractional ____	
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels ____	
Transformers ____	
Air Conditioners Central Unit ____	
Separate Units (windows) ____	
Signs 20 sq. ft. and under ____	
Over 20 sq. ft. ____	
Swimming Pools Above Ground ____	
In Ground ____	
Fire/Burglar Alarms Residential ____	
Commercial 19	5.00
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____	
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires ____	
Repairs after fire ____	
Emergency Lights, battery ____	
Emergency Generators ____	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	18.50

INSPECTION: rough in inspection
Will be ready on 12/15/89, 19__; or Will Call ____

CONTRACTOR'S NAME: E. S. Boulos
ADDRESS: 28 Foden RD; So Ptld, ME
TEL.: 772-3706
MASTER LICENSE NO.: 3291 SIGNATURE OF CONTRACTOR:
LIMITED LICENSE NO.: ____

William Swanton
LIC. 3374

INSPECTOR'S COPY — WHITE
OFFICE COPY — CANARY
CONTRACTOR'S COPY — GREEN

913097

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee $55. Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank/ME Phone # 795-8685

Address: 35 Ash St; Lewiston, ME ~~XXXXX~~ 04264-40

LOCATION OF CONSTRUCTION One City Center

Contractor: A T A& T Tridom Sub.: _____

Address: _____ Phone # _____

Est. Construction Cost: 5700 Proposed Use: bank bldg w sat dis

Past Use: bank bldg

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion erect satallite dish - on roof

For Official Use Only

Date 9/25/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 5700

Subdivision: Name _____ Lot _____

Ownership: CITY OF PORTLAND Public Private

PERMIT ISSUED OCT - 1 1991

Zoning: B-3

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other (Explain) WOA - 10-30-91

HISTORIC PRESERVATION

~~Not in District or Landmark. Does not require review.~~

~~Requires Review.~~

Action. ___ Approved. ___ Approved with Conditions. ___ Denied

Date: 9/26/91

Signature: _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Paul Lalibertè Date 9-26-91

Paul LaLiberte

CEO's District _____

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

White - Tax Assessor

2 MR. IRVING.

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date Nov. 20, 1990
Receipt and Permit number 01747

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: One City Center - Ground Floor behind food court
OWNER'S NAME: Long Distance North ADDRESS: same

	FEES
OUTLETS:	
Receptacles 1 Switches 1 Plugmold ____ ft. TOTAL 2	.10
FIXTURES: (number of)	
Incandescent ____ Flourescent 2 (not strip) TOTAL ____	.40
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes 60	15.00
METERS: (number of) 1	1.00
MOTORS: (number of)	
Fractional ____	
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) ____	
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES. (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans 1 Others (denote) ____	
TOTAL 1	2.00
MISCELLANEOUS: (number of)	
Branch Panels 1 ...(100)	4.00
Transformers 1 ..(30)	8.00
Air Conditioners Central Unit ____	
Separate Units (windows) ____	
Signs 20 sq. ft. and under ____	
Over 20 sq. ft. ____	
Swimming Pools Above Ground ____	
In Ground ____	
Fire/Burglar Alarms Residential ____	
Commercial ____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____	
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires ____	
Repairs after fire ____	
Emergency Lights, battery ____	
Emergency Generators ____	
INSTALLATION FEE DUE.	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	30/80

INSPECTION: Morning
Will be ready on Nov. 21, 1990 or Will Call ____
CONTRACTOR'S NAME: Boulos Company - Masters 3291
ADDRESS: 28 Foden Rd., S. P. 04106
TEL.: 772-3706
MASTER LICENSE NO.: 03374 William
LIMITED LICENSE NO.: Swanton
SIGNATURE OF CONTRACTOR: [signature]

INSPECTOR'S COPY — WHITE
OFFICE COPY — CANARY
CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS—

Permit Number 01747

Location 1 City Center

Owner Long Distance North

Date of Permit 11-20-90

Final Inspection 11-28-90

By Inspector [illegible]

Permit Application Register Page No. 100

INSPECTIONS: Service 11-28-90 by SB

Service called in 11-28-90 - 1:40 PM

Closing-in 11-28-90 by SB

PROGRESS INSPECTIONS: ___/___/___

___/___/___

___/___/___

___/___/___

___/___/___

___/___/___

DATE:	REMARKS:

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date December 12, 19 90
Receipt and Permit number 01600

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 4th & 6th floor One City Center

OWNER'S NAME: M.C.I. ADDRESS. Same

	FEES
OUTLETS:	
Receptacles 37 Switches 15 Plugmold ____ ft. TOTAL ____	
FIXTURES: (number of)	
Incandescent ____ Flourescent 78 (not strip) TOTAL 130	26.00
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
METERS: (number of) ____	
MOTORS: (number of)	
Fractional 2	4.00
1 HP or over ____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) ____	
Electric (number of rooms) ____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) ____	
Oil or Gas (by separate units) 2	10.00
Electric Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels ____	
Transformers ____	
Air Conditioners Central Unit ____	
Separate Units (windows) ____	
Signs 20 sq. ft. and under ____	
Over 20 sq. ft. ____	
Swimming Pools Above Ground ____	
In Ground ____	
Fire/Burglar Alarms Residential ____	
Commercial ____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____	
over 30 amps ____	
Circus, Fairs, etc. ____	
Alterations to wires X	5.00
Repairs after fire ____	
Emergency Lights, battery ____	
Emergency Generators ____	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	45.00

INSPECTION:

Will be ready on ____, 19__; or Will Call X

CONTRACTOR'S NAME: Aladdin Elec.

ADDRESS: P.O. Box 6819 Portland, Maine 04101

TEL.: 878-3995

MASTER LICENSE NO. 3295 SIGNATURE OF CONTRACTOR: Roger A. Fogg (agent)

LIMITED LICENSE NO.: ____

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 01800

Location 1 City Center

Owner MCI

Date of Permit 12-12-90

Final Inspection 1-30-91

By Inspector [illegible]

Permit Application Register Page No 18

INSPECTIONS Service ____ by ____

Service called in ____

Closing-in 12-11-90 by SB

PROGRESS INSPECTIONS ____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

DATE.	REMARKS

PERMIT # . BUILDING PERMIT APPLICATION **Portland** 4-2-87 Previous permit #

APPLICANT FILL OUT 1 - WRITE AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION

Location/address of construction 1 City Center (8th Fl)

Owner or lessees name Burton Fisher Tel 775-3155

Address 4th Floor - 1 City Center 04101

Contractors name Tyler Construction Tel 775-3155

Address 1 City Center, 4th Fl 04101

Subcontractors

APR 13 1987

II. NEW SUBDIVISION OR EXISTING LOT REFERENCE

Name

Lot

Block

Bk. & pg. Reg./ deeds

Date recorded

III. PROPOSED USE: CODE 324 - offices If other*, explain Seasonal Condominium Apartment

IV. PAST USE: vacant space

V. OWNERSHIP: ____ PUBLIC (Federal/ State/ local government) X PRIVATE (individual/corp/nonprofit)

VI. DESCRIPTION OF WORK: Change of Use from vacant space to offices, as per plans.

ISSUE PERMIT TO CONTRACTOR

VII. BUILDING DIMENSIONS: length ____ width ____ square footage ____ height ____ #stories ____

VIII. EST. CONSTRUCTION COST: $46,000.00 **IX. GR. SQ. FT. OF LAND** ____ **BUILDING** ____

X. RESIDENTIAL BUILDINGS ONLY: BEDROOMS

1 BDRM 2 BDRMS 3 BDRMS

NEW DWELLING UNITS WITH

EXISTING DWELLING UNITS WITH

XI. # RESIDENTIAL UNITS

NEW DWELLINGS

EXISTING DWELLINGS

NET RESIDENTIAL UNITS

XII. SIGNATURE OF APPLICANT [signature] **DATE** 4-7-87

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:

DISTRICT B-3 STREET FRONTAGE

SETBACKS: front ____ back ____ side ____ side ____

ZONING BOARD APPROVAL: no ☐ yes ☐ (date)

PLANNING BOARD APPROVAL: no ☐ yes ☐ (date)

XIV. OFFICE USE:

TAX MAP #

LOT #

VALUE/STRUCTURE

PERMIT EXPIRATION

XV. CONDITIONAL USE: variance ____ site plan ____ subdivision ____ shore and floodplain mgmt ____ special exception ____ other ____ (explain) ....

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) ..... **DATE** .....

XVII. FEES:

base fee .....

subdivision fee .....

site plan review fee .....

other fees .....

late fee .....

TOTAL 277.50

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:

OK. [signature] April 3, 1987

[signature]

1 WATER SUPPLY ☐ public ☐ private

2 SEWER ☐ public ☐ private, type

3 HEAT type fuel

4 FOUNDATION type

thickness footing

5 ROOF type pitch

covering load

6 PLUMBING # tubs # showers

lavatories # laundry tubs

flushes # other

SPRINKLER SYSTEM? ☐ yes ☐ no

7 ELECTRICAL service entrance size

smoke detectors

NUMBER OF OFF-STREET PARKING SPACES

enclosed outdoors

8 CHIMNEY # flues #fireplaces

material

9 FRAMING floor joists

size max on centers

ceiling joists

afters

studs

wall studs

10 If 1-story building w/ masonry walls

wall thickness height

11 BEDROOM WINDOWS

height width sill height

egress window? ☐ yes ☐ no

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office

Green - Applicant

Yellow - CEO

Pink - Tax Assessor

Gold - GPCOG

[signature]

PERMIT # [illegible] **PORTLAND BUILDING PERMIT APPLICATION** DATE 6/3/87

PERMIT ISSUED
JUN 16 1987
City Of Portland

I. GENERAL INFORMATION

Location/address of construction: One City Center - 2nd floor

1. Owner's name: Total Image Tel.
   Address: same
2. Lessee's name: Tel.
   Address: #1700
3. Contractor's name: Tyler Construction Tel. 775-3165
   Address: One City Center
4. Is this a legally recorded lot? yes ____ no ____

II. DESCRIPTION OF WORK:

change of use from vacant to retail shop with renovations as per plans

permit sent to 4th floor One City Center ~~Xtex~~ Tyler Constr. 04101

III. BUILDING DIMENSIONS: length ____ width ____ square footage ____ height ____ #stories ____

IV. ZONE ____ Street frontage ____ Zoning board approval: no ☐ yes ☐ date ____

Setbacks: front ____ back ____ side ____ side ____ Planning board approval: no ☐ yes ☐ date ____

V. REVIEW REQUIRED: variance ____ other ____
site plan ____ subdivision ____ shore ____ floodplain mgmt ____

Number of off-street parking spaces: ____ enclosed ____ outdoors

VI. FEES:
base fee ____ other fees ____
subdivision fee ____ late fee ____
site plan review fee ____ TOTAL $145.00

VII. DETAILS OF WORK

1. WATER SUPPLY: ☐ public ☐ private
2. SEWER: ☐ public ☐ private, type
3. HEAT: type fuel
4. FOUNDATION: type thickness footing
5. ROOF: type pitch covering load
6. PLUMBING: SPRINKLER SYSTEM? yes ☐ no ☐
7. ELECTRICAL: service entrance size # smoke detectors
8. CHIMNEY: # flues material # fireplaces
9. FRAMING: floor joists ____ size ____ max. on center ____ ceiling joists ____ rafters ____ studs ____ wall studs ____
10. If 1-story building w/masonry walls: wall thickness height
11. BEDROOM WINDOWS height width sill height egress window? yes ☐ no ☐

VIII. OFFICE USE:
TAX MAP #
LOT #
VALUE/STRUCTURE
PERMIT EXPIRATION
CODE If other: explain
X. PROPOSED USE: 327 - cosmetic store
XI. PAST USE: 330 - vacant
XII. OWNERSHIP: PUBLIC X PRIVATE

IX. NEW OR PHASED SUBDIVISION REFERENCE
Name
Lot
Block
Seasonal Condominium Apartment

XIII. EST. CONSTRUCTION COST: $ 20,000

XIV. GR. SQ. FT. OF LOT
BUILDING

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY: BEDROOMS 1. BDRM 2 BDRMS 3. BDRMS
NEW DWELLING UNITS WITH:
EXISTING DWELLING UNITS WITH:

XVI. # RESIDENTIAL UNITS:
NEW DWELLINGS
EXISTING DWELLINGS
TOTAL RESIDENTIAL UNITS

APPROVALS BY: DATE
BUILDING INSPECTION - PLAN EXAMINER
ZONING:
C.E.O.
FIRE DEPT.

MISCELLANEOUS
Will work require disturbing of any tree on a public street?
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

NOTE TO APPLICANT: Separate permits are required by the installer and subcontractors of heating, plumbing electrical, and mechanicals.

District No. 10

XVII. SIGNATURE OF APPLICANT [signature] PHONE 775-3165
TYPE NAME OF ABOVE Gary Tyler for Tyler Constr. 1 2 3 4 5

White - GPCOG Green - Applicant Yellow - Assessor Pink - Office File Gold - Field Inspector

March 25, 1987

PERMIT # BUILDING PERMIT APPLICATION **Portland** Previous permit #.....

APPLICANT FILL OUT I - XVIII AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION

Location/address of construction One City Center - 2nd floor - left side

Owner or lessee's name Fisher Group Tel

Address Troy , New ~~Yorr~~ York

Lessee - Norstar Bank - same 874-5000

Contractor's name Tyler Corp. Tel H 879-0377

Address 1 city center - 4th floor W 775-4482

Subcontractors:

PERMIT ISSUED

APR 2 1987

~~City Of Portland~~

II. NEW SUBDIVISION OR EXISTING LOT REFERENCE

Name

Lot

Block

Bk. & pg. Reg. deeds

Date recorded

III. PROPOSED USE: CODE 324- bank If other*, explain Seasonal Condominium Apartment

IV. PAST USE: same

V. OWNERSHIP: PUBLIC (Federal/State/local government) PRIVATE (individual/corp/nonprofit)

VI. DESCRIPTION OF WORK:

To make interior addition to be used for continuation of bank as per plans. 4 sheets of plans.

PERMIT ISSUED WITH LETTER

VII. BUILDING DIMENSIONS: length width square footage height *stories

VIII. EST. CONSTRUCTION COST: 28,000 **IX. GR. SQ. FT. OF LAND** **BUILDING**

X. RESIDENTIAL BUILDINGS ONLY: BEDROOMS

	1 BDRM	2 BDRMS	3 BDRMS
* NEW DWELLING UNITS WITH:			
* EXISTING DWELLING UNITS WITH:			

XI. * RESIDENTIAL UNITS:

* NEW DWELLINGS

* EXISTING DWELLINGS

NET RESIDENTIAL UNITS

XII. SIGNATURE OF APPLICANT Larry Morin DATE 3-25-87

DO NOT WRITE BELOW THIS LINE

XIII. ZONING:

DISTRICT STREET FRONTAGE

SETBACKS: front back side side

ZONING BOARD APPROVAL: no ☐ yes ☐ (date)

PLANNING BOARD APPROVAL: no ☐ yes ☐ (date)

XIV. OFFICE USE:

TAX MAP #

LOT #

VALUE/STRUCTURE

PERMIT EXPIRATION

XV. CONDITIONAL USE: variance site plan subdivision shore and floodplain mgmt special exception other (explain)

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) DATE

XVII. FEES:

base fee

subdivision fee

site plan review fee

fees

TAL 160.00

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:

James V. Collins, Jr. Lead

PERMIT ISSUED WITH LETTER

WATER SUPPLY ☐ public ☐ private

SEWER ☐ public ☐ private, type

3. HEAT type fuel

4. FOUNDATION type thickness footing

5. ROOF type pitch covering load

6. PLUMBING * tubs * showers * lavatories * laundry tubs * flushes * other

SPRINKLER SYSTEM? ☐ yes ☐ no

7. ELECTRICAL service entrance size * smoke detectors

8. CHIMNEY * flues *fireplaces material

9. FRAMING: floor joists size max. on centers

ceiling joists

rafters

studs

wall studs

10. If 1-story building w/ masonry walls. wall thickness height

11. BEDROOM WINDOWS height width sill height

egress window? ☐ yes ☐ no

NUMBER OF OFF-STREET PARKING SPACES encolosed outdoors

PERMIT ISSUED WITH LETTER

PLOT PLAN/DETAILS OF WORK ON REVERSE

White - Municipal Office

Green - Applicant

Yellow - CEO

Pink - Tax Assessor

Gold - GPCOG

☐ MA Board.

CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

April 2, 1987

Tyler Corp.
4th Floor
1 City Center
Portland, Maine 04101

Re: 2nd Floor Left Side One City Center

Dear Sir:

Your application to make interior addition to be used for continuation of bank has been reviewed and a building permit is herewith issued subject to the following requirement.

The building fire alarm system shall be extended to include this area.

If you should have any questions regarding this requirement, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Collins, Fire Prevention Bureau

/kbc

389 CONGRESS STREET • PORTLAND, MAINE 04101 • TELEPHONE (207) 775-5451

BUILDING PERMIT REPORT

DATE: 4-1-87

ADDRESS: 1 Clyde Center Norton Road

REASON FOR PERMIT: Renovations

BUILDING OWNER: Fisher Group

CONTRACTOR: Clyde Corp.

PERMIT APPLICANT Larry Masters

APPROVED: xxx DENIED

CONDITION OF APPROVAL OR DENIAL:

1.) The building fire alarm system shall be extended to include this area.

2

PERMIT # 1306 CITY OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT#_____

Please fill out any part which applies to job. Proper plans must accompany form.

For Official Use Only

Date October 17, 1988
Inside Fire Limits
Bldg Code
Time Limit
Estimated Cost
Value/Structure
Fee $25.00
Subdivision: Yes / No
Name
Lot
Block
Permit Expiration
Ownership: Public / Private

PERMIT ISSUED
OCT 21 1988
City Of Portland

Owner: One City Center Associates

Address: 4th Floor, One City Center, Portland, 04101

LOCATION OF CONSTRUCTION 3rd floor, One City Center, (C-12)

CONTRACTOR: Frank Thiboutot SUBCONTRACTORS: 775-4482

ADDRESS: One City Center, same

Est. Construction Cost:_____ Type of Use: vacant

Past Use:_____

Building Dimensions L____ W____ Sq. Ft.____ # Stories:____ Lot Size:____

Is Proposed Use:_____ Seasonal_____ Condominium_____ Apartment_____

Conversion - Explain To use space temporarily for a sales office until ~~XXX~~ February.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:
Of Dwelling Units_____ # Of New Dwelling Units_____

Foundation:
1. Type of Soil:_____
2. Set Backs - Front_____ Rear_____ Side(s)_____
3. Footings Size:_____
4. Foundation Size:_____
5. Other_____

Floor:
1. Sills Size:_____ Sills must be anchored.
2. Girder Size:_____ Size:_____
3. Lally Column Spacing:_____ Spacing 16" O.C.
4. Joists Size:_____ Size:_____
5. Bridging Type:_____ Size:_____
6. Floor Sheathing Type:_____
7. Other Material:_____

Exterior Walls:
1. Studding Size_____ Spacing_____
2. No. windows_____
3. No. Doors_____ Span(s)_____
4. Header Sizes_____
5. Bracing: Yes_____ No._____
6. Corner Posts Size_____
7. Insulation Type_____ Size_____
8. Sheathing Type_____ Size_____
9. Siding Type_____ Weather Exposure_____
10. Masonry Materials_____
11. Metal Materials_____

Interior Walls:
1. Studding Size_____ Spacing_____
2. Header Sizes_____ Span(s)_____
3. Wall Covering Type_____
4. Fire Wall if required_____
5. Other Materials_____

Ceiling:
1. Ceiling Joists Size:_____
2. Ceiling Strapping Size_____ Spacing_____
3. Type Ceilings:_____ Size_____
4. Insulation Type_____
5. Ceiling Height:_____

Roof:
1. Truss or Rafter Size_____ Span_____
2. Sheathing Type_____ Size_____
3. Roof Covering Type_____
4. Other_____

Chimneys:
Type:_____ Number of Fire Places_____

Heating:
Type of Heat:_____

Electrical:
Service Entrance Size:_____ Smoke Detector Required Yes____ No____

Plumbing:
1. Approval of soil test if required Yes_____ No_____
2. No. of Tubs or Showers_____
3. No. of Flushes_____
4. No. of Lavatories_____
5. No. of Other Fixtures_____

Swimming Pools:
1. Type:_____
2. Pool Size:_____ x_____ Square Footage_____
3. Must conform to National Electrical Code and State Law.

Zoning:
District_____ Street Frontage Req.:_____ Provided_____
Required Setbacks: Front_____ Back_____ Side_____ Side_____

Review Required:
Zoning Board Approval: Yes_____ No_____ Date:_____
Planning Board Approval: Yes_____ No_____ Date:_____
Conditional Use:_____ Variance_____ Site Plan_____ Subdivision_____
Shore and Floodplain Mgmt._____ Special Exception_____
Other_____ (Explain)_____
Date Approved_____

Permit Received By Nancy Grossman

Signature of Applicant [signature] (agent for owner) Date 10/7/88

Signature of CEO_____ Date_____

Inspection Dates (10) AR

White-Tax Assesor Yellow-GPCOG White Tag -CEO

© Copyright GPCOG 1987

CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION One City Gate , 3rd floor

Issued to One City Center Associates

Date of Issue August 3, 1989

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. 89/1986, 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	APPROVED OCCUPANCY
Partial ~~XXXXXX~~ 3rd floor	Health Club

Limiting Conditions:

None

This certificate supersedes
certificate issued
Approved:
8/3/89
(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 the asking.

PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION - MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

For Official Use Only

Date March 29, 1989
Inside Fire Limits
Bldg Code
Time Limit
Estimated Cost $472,000.
Value/Structure
Fee $2,360

Subdivision: Yes / No
Name
Lot
Block
Permit Expiration:
Owner: Public / Private

Owner: One City Center Associates - Frank Thibeutot - 775-4482

Address: 6th floor, One City Center, Portland, 04101

LOCATION OF CONSTRUCTION One City Center, 3rd Floor

CONTRACTOR: Davis Specialties SUBCONTRACTORS:

ADDRESS: 4 Tyler St., Troy, N.Y.

Est. Construction Cost: $472,000 Type of Use: health club

Past Use:

Building Dimensions L____ W____ Sq. Ft.____ # Stories:____ Lot Size:____

Is Proposed Use: ____ Seasonal____ Condominium____ Apartment

____ Conversion - Explain Change use from vacant space to health club with interior renovations. 7 sets of plans submitted

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
Residential Buildings Only:
Of Dwelling Units ____ # Of New Dwelling Units ____

Foundation:
1. Type of Soil:
2. Set Backs - Front ____ Rear ____ Side(s) ____
3. Footings Size:
4. Foundation Size:
5. Other

Floor:
1. Sills Size: ____ Sills must be anchored.
2. Girder Size:
3. Lally Column Spacing: ____ Size:
4. Joists Size: ____ Spacing 16" O.C.
5. Bridging Type: ____ Size:
6. Floor Sheathing Type: ____ Size:
7. Other Material:

Exterior Walls:
1. Studding Size ____ Spacing
2. No. windows
3. No. Doors
4. Header Sizes ____ Span(s)
5. Bracing: Yes ____ No.
6. Corner Posts Size
7. Insulation Type ____ Size
8. Sheathing Type ____ Size
9. Siding Type ____ Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:
1. Studding Size ____ Spacing
2. Header Sizes ____ Span(s)
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

PERMIT ISSUED WITH LETTER

Ceiling:
1. Ceiling Joists Size:
2. Ceiling Strapping Size ____ Spacing
3. Type Ceilings:
4. Insulation Type ____ Size
5. Ceiling Height:

PERMIT ISSUED
APR 07 1989
City Of Portland

Roof:
1. Truss or Rafter Size ____ Spacing
2. Sheathing Type ____ Size
3. Roof Covering Type
4. Other

Chimneys:
Type: ____ Number of Fire Places

Heating:
Type of Heat:

Electrical:
Service Entrance Size: ____ Smoke Detector Required Yes____ No____

Plumbing:
1. Approval of soil test if required Yes ____ No____
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

Swimming Pools:
1. Type:
2. Pool Size: ____ Square Footage
3. Must conform to National Electrical Code and Site Law.

Zoning:
District ____ Street Frontage Req.: ____ Provided
Required Setbacks: Front ____ Back ____ Side ____ Side

Review Required:
Zoning Board Approval: Yes ____ No ____ Date:
Planning Board Approval: Yes ____ No ____ Date:
Conditional Use: ____ Variance ____ Site Plan ____ Subdivision
Shore and Floodplain Mgmt ____ Special Exception
Other ____ (Explain)
Date Approved 4-26-89

Permit Received By Nancy Grossman

Signature of Applicant ____ Date 3/29/89

Signature of CEO ____ Date

Inspection Dates

13/15/E White-Tax Assesor Yellow-GPCOG White Tag-CEO

© Copyright GPCOG 1987

110 MA. DRIVING

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $25.00

Subdivision Fee $

Site Plan Review Fee $

Other Fees $ 2,355

(Explain)

Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 4/27/89 - Several inspections have been made prior to the issuing of this permit, including the zero lot line. Drywalling of the perimeter of the area is completed. Fireplaces are being placed as per plans.

8/2/89 CO AC

Signature of Applicant [signature] (As Agent for Owner) Date 3/29/89

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND MAINE 04101
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

April 27, 1989

One City Center
4th Floor One City Center
Portland, Maine 04101
Frank Thiboutot

Re: One City Center 3rd Floor

Dear Sir:

Your application to make alterations has been reviewed and a permit is herewith issued subject to the following requirements:

1.) Comply with agreed upon changes noted on plan A-1. Addition of an egress corridor to an additional exit door. Addition of a door with closer to the corridor to the administration wing. Added smoke and heat detectors.

2.) Illuminated exit signs to be provided to mark path of travel to exits and to mark exits doors.

3.) Emergency lighting throughout to illuminate path of travel to exits.

4.) Relocation and addition to sprinkler system to be done per the requirements of N.F.P.A. #13.

5.) Building core egress corridors and aprinkler and fire alarm system to be maintained at level that existed prior to construction.

6.)Please read and implement item 11 of the attached Building Permit Report.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief, Inspection Services

cc: Lt. Garroway, Portland Fire Department

BUILDING PERMIT REPORT

ADDRESS: One City Center 3rd Floor. DATE: 27/Apr/89

REASON FOR PERMIT: Make Alterations.

BUILDING OWNER: One City Center Assoc.

CONTRACTOR: Davis Specialties.

PERMIT APPLICANT:

APPROVED: * 11 ~~DENIED~~:

CONDITION OF APPROVAL ~~[illegible]~~:

1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.

2.) Precaution must be taken to protect concrete from freezing.

3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.

4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.

5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.

6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m^2). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).

7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fireresistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches cannot pass through any opening.

10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

*11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el
11/16/88

CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION One City Center

Date of Issue 1/10/92

Issued to Fleet Bank

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. 91/3227 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	APPROVED OCCUPANCY
Seventh floor	office space

Limiting Conditions:

This certificate supersedes certificate issued

Approved: 1/10-92

(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.

913227

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $770 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank - lessee Phone # 871-5595

Address: Box 1280; Ptld, ME 04104

LOCATION OF CONSTRUCTION One City Center - 7th floor

Contractor: lessee Sub.: _____

Address: _____ Phone # _____

Est. Construction Cost: 150,000. Proposed Use: office space

Past Use: office space

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Interior renovations - 7th floor

For Official Use Only

Date 10/30/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost $150,000.

Subdivision: Name _____ Lot _____

Ownership _____

PERMIT ISSUED NOV 15 1991 CITY OF PORTLAND

Zoning: B-3

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other _____ (Explain) _____

HISTORIC PRESERVATION

Not in District nor Landmark

Does not require review

Requires Review

Action: Approved

Approved with Conditions

Denied

Date: _____

Signature: _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front: _____ Rear _____ Side(s) _____
3. Footings Size _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size _____
3. Lally Column Spacing _____ Size: _____
4. Joists Size _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No. _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____ 16/40
2. Header Size _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Issued By Louise E. Chase

Signature of Applicant Richard Dodd Date 10/30/91

CEO's District 2M Inspector Richard Sawyer

PERMIT ISSUED WITH LETTER

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ no -
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
Late Fee $

Inspection Record

Type	Date
Footing & Foundation work	11/26/91 - RW
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 11/26/91 - Progressing as per plans - erecting metal partitions, removing old work

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 this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

Richard Fowler — SIGNATURE OF APPLICANT

P. O. Box 1280 Portland, ME 04101 — ADDRESS

874-5505 — PHONE NO

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO

Inspection Services
Samuel P. Hoffses
Chief

Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

November 14, 1991

RE: One City Center — 7th Floor

Fleet Bank
Box 1280
Portland, ME 04104

Dear Sir:

Your application to make interior renovations 7th floor, has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

1. Sprinkler protection may require modification i.e. additional sprinklers due to creation of new space that may not be adequately protected by existing sprinkler locations, Room 732 for example. Ref. Requirements of N.F.P.A. #13.
2. Newly created spaces shall be provided with rate of rise heat detectors as a minimum.
3. Additional emergency lighting and exit signs shall be provided for new corridor space and changed path of travel in area near Rooms 713, 710, 709, and 708.
4. Portable fire extinguishers shall be provided in accordance with N.F.P.A. #10.
5. Your plan does not bear the seal of a registered architect. This is now required under Maine State Law. Please have plans seal before work begins.
6. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el

cc: LT. Wallace Garroway, Fire Prevention Bureau

PERMIT ISSUED
NOV -6 1991
CITY OF PORTLAND

APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. 1

Portland, Maine, NOV 4, 1991

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 913144 *pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications*

Location 12 Moulton St Within Fire Limits? _____ Dist. No. _____

Owner's name and address Fleet Bank 1 City Center Ptld Telephone _____

Lessee's name and address Jim Albert Telephone 283-3750

Contractor's name and address Owner, 57 Winter St Saco, ME 04072 Telephone _____

Architect _____ Plans filed _____ No. of sheets _____

Proposed use of building Class A Lounge/Comm w.renovations No. families _____

Last use Comm/Retail No. families _____

Increased cost of work N/A Additional fee 25.00

Description of Proposed Work

Readjusting Interior Renovations

HISTORIC PRESERVATION
North District not Landmark.
Does not require review.
Requires Review.
Action: Approved
Approved with Conditions.
Denied
Date:
Signature:

Details of New Work

Is any plumbing involved in this work? Yes Is any electrical work involved in this work? No

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____

Framing lumber — Kind _____ Dressed or full size? _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O.C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

Approved: B-3 11-4-91

Signature of Owner

Approved: Inspector of Buildings

INSPECTION COPY — WHITE
APPLICANT'S COPY — YELLOW
FILE COPY — PINK
ASSESSOR'S COPY — GOLDEN

2 MR. IRVING

913097

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee $55. Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank/NH Phone # 795-8535

Address: 35 Ash St; Lewiston, ME ~~04240~~ 04204

LOCATION OF CONSTRUCTION One City Center

Contractor: A T A& T Tildom Sub.: _____

Address: _____ Phone # _____

Est. Construction Cost: 6700 Proposed Use: bank bldg w sat dis

Past Use: bank bldg

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion erect satallete dish - on roof

For Official Use Only

Date 9/26/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 6700

Subdivision _____

Name _____

Lot _____

Ownership _____

PERMIT ISSUED

OCT - 1 1991

CITY OF PORTLAND

Zoning: B-3

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other (Explain) WOR - 9-30-91

HISTORIC PRESERVATION

Not in District nor Landmark.

Does not require review.

Required Review.

Action: Approved. Approved with Conditions.

Signature _____ Date _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No. _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys: (Masonry or Prefab)

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Paul Lalibertè Date 9-26-91

CEO's District 12 Paul Laliberte

CONTINUED TO REVERSE SIDE

12 MR. IRVING

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 55
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

Type	Date
AT&T Satellite Dish	11 / 19 / 91
installation	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 11/19/91 - Installation completed as per plans.

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 has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

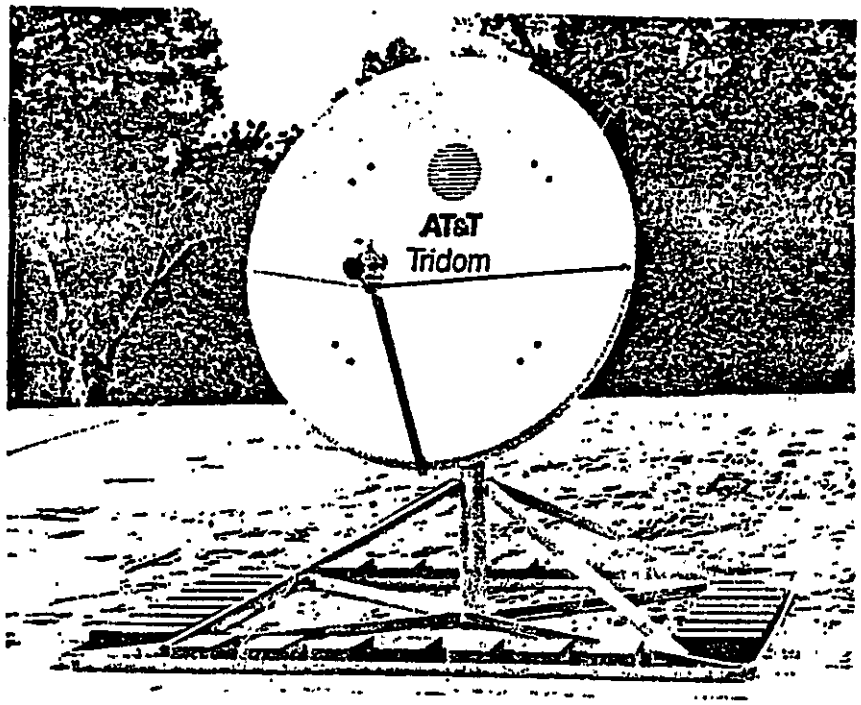
Paul Labiste — 795-8685

SIGNATURE OF APPLICANT — ADDRESS — PHONE NO

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE — PHONE NO

one city

PRODELIN 1.8m
NON-PENETRATING RC OF MOUNT



FEATURES:

- ADAPTABLE, CAN BE USED FOR APPROXIMATELY 95% OF ALL 1.8m NON-PENETRATING ROOF MOUNT APPLICATIONS
- FEW PARTS AND FASTENERS MAKE ASSEMBLY QUICK AND EASY
- ALL STRUCTURAL STEEL COMPONENTS
- HARDWARE IS HOT-DIPPED GALVANIZED TO PROVIDE CORROSION PROTECTION
- DATA VSAT OPERATIONAL AT 50 mph WINDSPEED
- CONCRETE BLOCK BALLAST
- ROOF PADS PROTECT ROOF SURFACE
- 10 ft x 10 ft BASE AREA REDUCES STATIC ROOF LOAD TO LESS THAN 20 psf FOR MOST APPLICATIONS
- APPLICABILITY CAN BE INCREASED IF ROOF CAN SUPPORT MORE THAN 20 psf STATIC ROOF LOAD

RECEIVED
SEP 2 6 1991
DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

AT&T Tridom

9

TECHNICAL SPECIFICATIONS

SURVIVAL WINDSPEED	125 mph
MOUNT WEIGHT	251 lb
ANTENNA ASSEMBLY WEIGHT	185 lb
BALLAST WEIGHT	1564 lb
TOTAL WEIGHT	2000 lb
BASE TRIBUTARY AREA	100 ft^2
STATIC ROOF PRESSURE	20 psf
MAST SIZE	5-1/2" O.D.
COEFFICIENT OF FRICTION	0.64
FACTOR OF SAFETY OVERTURNING	1.7

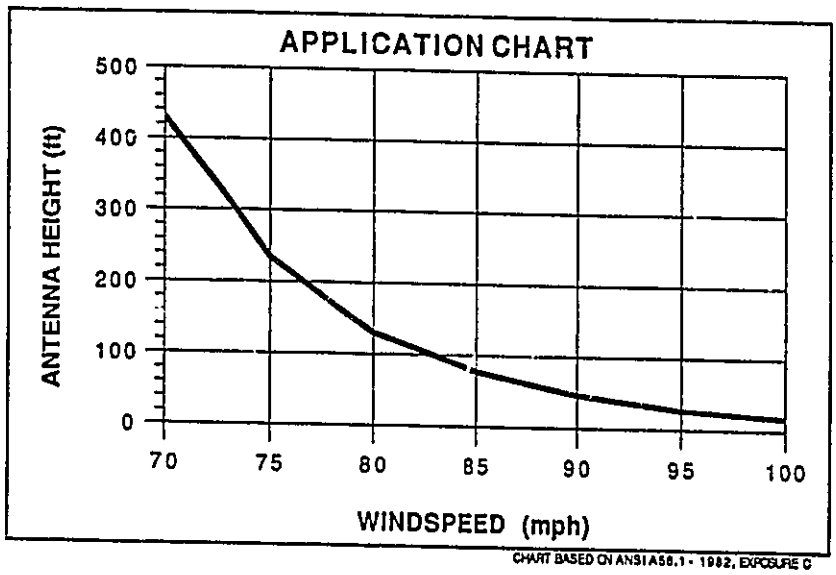
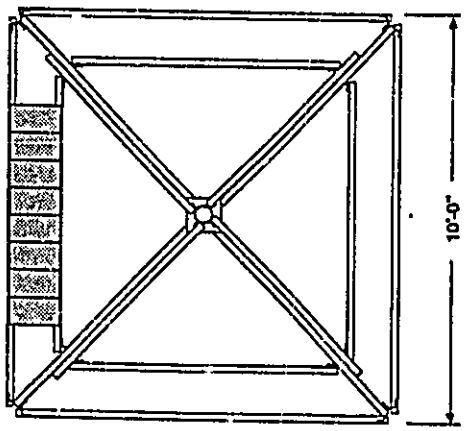
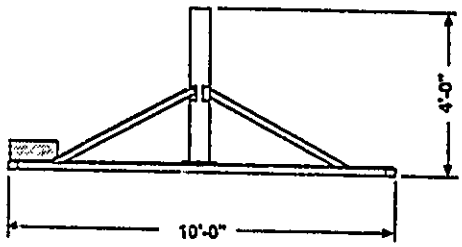


CHART BASED ON ANSI A58.1 - 1982, EXPOSURE C



PLAN VIEW



SIDE VIEW

AT&T Tridom

EXCEPTION PRICE AND SITE SURVEY SUMMARY

Fleet /Norstar Services

TRIDOM SITE NUMBER
FNS468
CUSTOMER SITE CODE
NONE

SITE SURVEY SUMMARY

OPTION RECOMMENDED: 1

SITE ADDRESS

Fleet/Norstar Services
One City Center
Portland ME 04101
Julie Burns 207/874-5000

SHIPPING ADDRESS

AT&T Network Systems
45 Forest Ave
Portland ME 04101
Bob Louis 207-879-5030

4-24-91 permit Landlord

OPTION 1

MAJOR SITE EQUIPMENT ITEMS:

SYSTEM DESCRIPTION:
MOUNT DESCRIPTION: PRODELIN NON PEN
CABLE LENGTH 500 FT VIDEO ACCESS ADAPTER: 1

MSO. 0 POWER SUPPLY: 1
CSO. 0 LINE AMPLIFIER. 2
BIC: 0
MIC: 0

Exception Price

DESCRIPTION	UNIT PRICE	QUAN	LINE PRICE
VIDEO ACCESS ADAPTER & INSTALLATION	176.00	1	176.00
POWER SUPPLY & INSTALLATION	358.50	1	358.50
SPECIAL BUILDING PENETRATION(S)/EACH/CEMENT WALL	15.00	5	75.00
SPECIAL BUILDING PENETRATION(S)/EACH/CONTRETE WALL	36 00	1	36.00
PVC INSTALLATION/PER FT	2.85	30	85.50
HANDLING(OR STORAGE)& DELIVERY	252.00	1	252.00
LINE AMPLIFIER& INSTALLATION	176 00	1	176.00
ADDITIONAL CABLE OVER 100 FFET/PER FT	5 55	400	2220.00
TOTAL ESTIMATED EXCEPTION PRICE			$3379.00

SURVEY COMMENTS:

OPTION 2

MAJOR SITE EQUIPMENT ITEMS:

SYSTEM DESCRIPTION:
MOUNT DESCRIPTION:
CABLE LENGTH: FT VIDEO ACCESS ADAPTER.

MSO. POWER SUPPLY:
CSO: LINE AMPLIFIER:
BIC:
MIC:

Exception Price

DESCRIPTION	UNIT PRICE	QUAN	LINE PRICE
TOTAL ESTIMATED EXCEPTION PRICE			

SURVEY COMMENTS:

RECEIVED JUN 17 1991 FLEET/NORSTAR

OPTION APPROVED: 1 / 2 APPROVED BY: Pete Davis DATE: 6/14/91

REV 6/91

SECTION 4: SHIPPING INFORMATION

EQUIPMENT TO BE SHIPPED TO THE INSTALLER / CUSTOMER (CIRCLE ONE) AT THE FOLLOWING ADDRESS

COMPANY NAME A.T.&T NET SYS
ADDRESS ATTN BOB LOWIS
45 FOREST AVE
CITY, STATE, ZIP PORTLAND ME. 04101
CONTACT BOB LOWIS
TELEPHONE 207-879-5030

IS LOADING DOCK AVAILABLE? YES ✓ NO ___
IS STORAGE SPACE AVAILABLE? YES ✓ NO ___

SECTION 5: GENERAL COMMENTS

CUSTOMER/LANDLORD COMMENTS

INSTALLER COMMENTS: LONG CABLE RUN;

REVISION 11-29-90

SECTION 6: MOUNT OPTIONS

EXPLAIN WHY PARTICULAR MOUNT CATEGORIES WERE NOT USED AS INSTALLATION OPTIONS:

NON-PENETRATING ROOF MOUNT- 1.8 BRM6 MOUNT

WALL/POLE MOUNT-

GROUND MOUNT-

SECTION 7: ACKNOWLEDGEMENTS

THE INSTALLATION TECHNICIAN HAS EXPLAINED THE MOUNTING OPTIONS AVAILABLE FOR THIS FACILITY. I AGREE WITH THE METHODOLOGY OF THESE OPTIONS AS THEY HAVE BEEN EXPLAINED, AND SHOULD THE INSTALLATION BE APPROVED, WOULD LIKE THE SYSTEM TO BE INSTALLED AS DESCRIBED

	SIGNATURE	DATE	TELEPHONE #
BRANCH MGR.	Cynthia S Brockhart	5-17-91	874-5151
FLEET PROPERTY MGMT ~~BLDG. MGR.~~	Paul Galibute	5/17/91	207-879-8685
INST. TECH.	Dale Rader	5/17/91	207-879-5030

REVISION 11-29-90

SECTION 8: INDOOR EQUIPMENT

LOCATION OF IDU (Describe in detail) 2ND Floor of building; By Teller STAND

LOCATION OF SPLICE BOX (Describe in detail): ON WALL By INDOOR UNIT.

IS VENTILATION FOR THE IDU ACCEPTABLE: YES ✓ NO ____ IF NO, WHAT CAN BE DONE TO OBTAIN ACCEPTABLE VENTILATION? ____

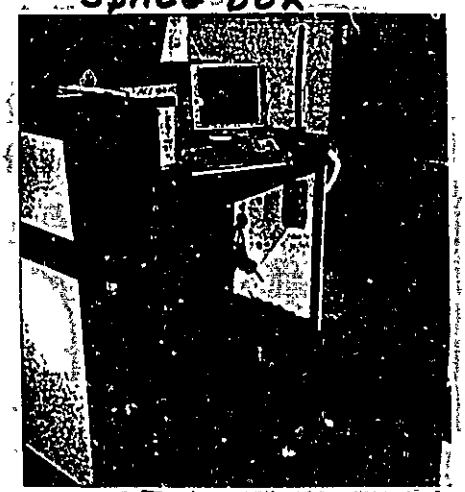
IS SHELF REQUIRED? YES ____ NO ✓ IF YES, EXPLAIN: ____

IS AC POWER AVAILABLE? YES ✓ NO ____ IF NO, EXPLAIN: SEE I.D.U. PHOTO

PHOTO OF INDOOR EQUIPMENT LOCATION: COMMENTS ____

ONE CITY CENTER PORTLAND ME.
TR1539NE

Splice Box



ONE CITY CENTER
PORTLAND ME
TR 1539 NE

SECTION 9: ANTENNA MOUNTING INFO.

OPTION # _____

TYPE OF MOUNT: PART # 10-0060-01 DESCRIPTION Nor-SAT 1.8

BALLAST (if applicable-refer to charts) 1428 lbs.

MOUNTING STRUCTURE (Describe): BMR-6

WIND EXPOSURE CATEGORY: EXPOSURE "B" ✓ EXPOSURE "C" _____

COMMENTS _____

ACCESSIBILITY TO BOTH SIDES OF MOUNTING STRUCTURE (Describe): YES

STRUCTURAL ANALYSIS REQUIRED: YES _____ NO ✓ EXPLAIN _____

TYPE OF ACCESS TO ANTENNA LOCATION (Describe): LADDER FROM LOW ROOF, TO UPPER ROOF!

METHOD OF TRANSPORTING REFLECTOR TO INSTALL LOCATION (Describe): CONTRACTOR WILL TRANSPORT EQUIPMENT AND RAILCART

UTILITIES MARKERS REQUIRED (Describe if applicable): No

ANTENNA VISIBILITY BY PUBLIC (Describe): No

ACTIVE DE-ICING, IF APPLICABLE (1.8m requires 120VAC-20AMP circuit, 2.4m requires 120VAC-30AMP circuit. Describe method of installing the required circuit at the antenna.): No

REVISION 11-29-10

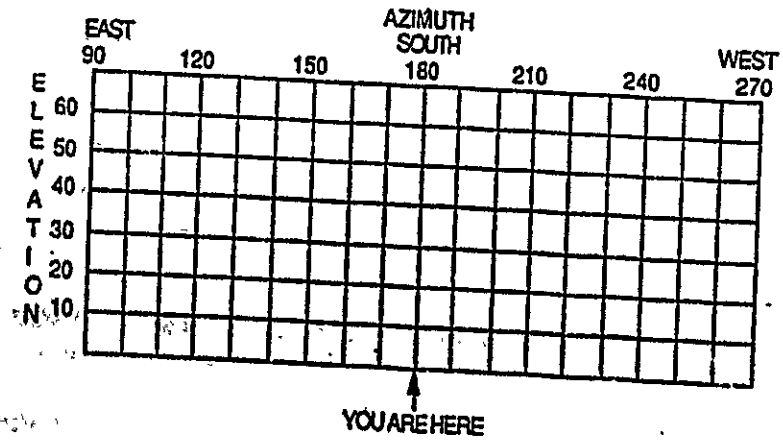
SECTION 9: ANTENNA MOUNTING INFORMATION (cont.) OPTION #____

GROUND/POLE MOUNT ONLY: LENGTH OF PIPE ____FT ABOVE GRND. ____FT BELOW GRND. ____FT
NOMINAL DIAMETER OF PIPE ____IN SCHEDULE 40
CONCRETE PIER SIZE– DEPTH _____FT DIAMETER _____FT

POLE MOUNT ONLY: NUMBER OF BRACKETS REQUIRED _____

SERVICEABILITY: HEIGHT OF MAST PIPE ABOVE WORKING SURFACE _____FT.
WILL SPECIAL EQUIP. BE REQUIRED TO SERVICE ANTENNA (Front or Back): YES ___ NO ___
IF YES, PLEASE SPECIFY: LADDER* ____ BUCKET TRUCK ____ OTHER ____
* IF LADDER, PLEASE SPECIFY HEIGHT _____FT
COMMENTS: _____

LINE OF SIGHT (ENTIRE ARC): NOTE ANY OBSTACLES ABOVE 15 DEGREES FROM DUE EAST (90 DEGREES) AND DUE WEST (270 DEGREES).



COMMENTS: CLEAR 2.7.5

REVISION 11-29-90

SECTION 9-A: ANTENNA GROUNDING

OPTION #____

(refer to AT&T-Tndom grounding policy for requirements)

WHAT TYPE OF GROUNDING ELECTRODE SYSTEM IS TO BE USED?

- BUILDING STEEL ✓
- UNDERGROUND PIPE SYSTEM ____
- GROUND ROD ____
- OTHER (explain) ____

COMMENTS: _____

SIZE, TYPE AND LENGTH OF GROUNDING CONDUCTOR TO BE USED TO CONNECT THE GROUND HARNESS TO THE GROUNDING ELECTRODE SYSTEM.

SIZE 6 gauge LENGTH 50 feet

SOLID ____ STRANDED ✓

HOW IS THE GROUNDING CONDUCTOR TO BE BONDED TO THE GROUNDING ELECTRODE SYSTEM.

- EXOTHERMICALLY WELDED ____
- CLAMPED ✓
- BOLTED ____
- OTHER (explain) ____

COMMENTS: _____

IS THERE AN EXISTING LIGHTNING PROTECTION SYSTEM WITHIN 6 FEET OF THE PROPOSED ANTENNA LOCATION? YES ✓ NO ____

IF YES, THEN THE ANTENNA BASE SHOULD ALSO BE BONDED TO THE LIGHTNING PROTECTION SYSTEM.

COMMENTS: NEED 15 FT OF #6. LIGHTING PROTECTION IS 350 MCM, NEED CLAMP FOR #6 TO 350.

REVISION 11-29-90

SECTION 10: CABLE RUN: OPTION # _____

TOTAL LENGTH OF CABLE: 483 FT

CABLE POINT OF ENTRY (P.O.E.) EXISTING ✓ NEED TO CONSTRUCT ____ TYPE _____
COMMENTS: _____

IS CONDUIT REQUIRED? YES ✓ NO ____ IF YES, FOOTAGE 30 FT TYPE 1½
COMMENTS: 4-LB-6; ONE WEATHER HEAD CONDUIT TO BE USE ON ROOF

IS TRENCHING REQUIRED? YES ____ NO ✓ IF YES, FOOTAGE _____ FT
COMMENTS: _____

PENETRATIONS REQUIRED (Excluding P.O.E.): WALL (qty.) 7 FLOOR (qty.) ____ OTHER (qty) ____
COMMENTS: ALL PENETRATIONS ARE ON 2ND FLOOR

CABLE PATH (Describe in detail): FOR ROOFOP 14 FLOOR TO PENTHOUSE; PENTHOUSE TO TELCO CLOSE 13 FLOOR; TEL CLOSE ON 13TH FLOOR TO TELCO CLOSE 2ND FLOOR OVER 2ND TO BANK. TEL.CO CLOSE ARE ON EAST SIDE BULDING.

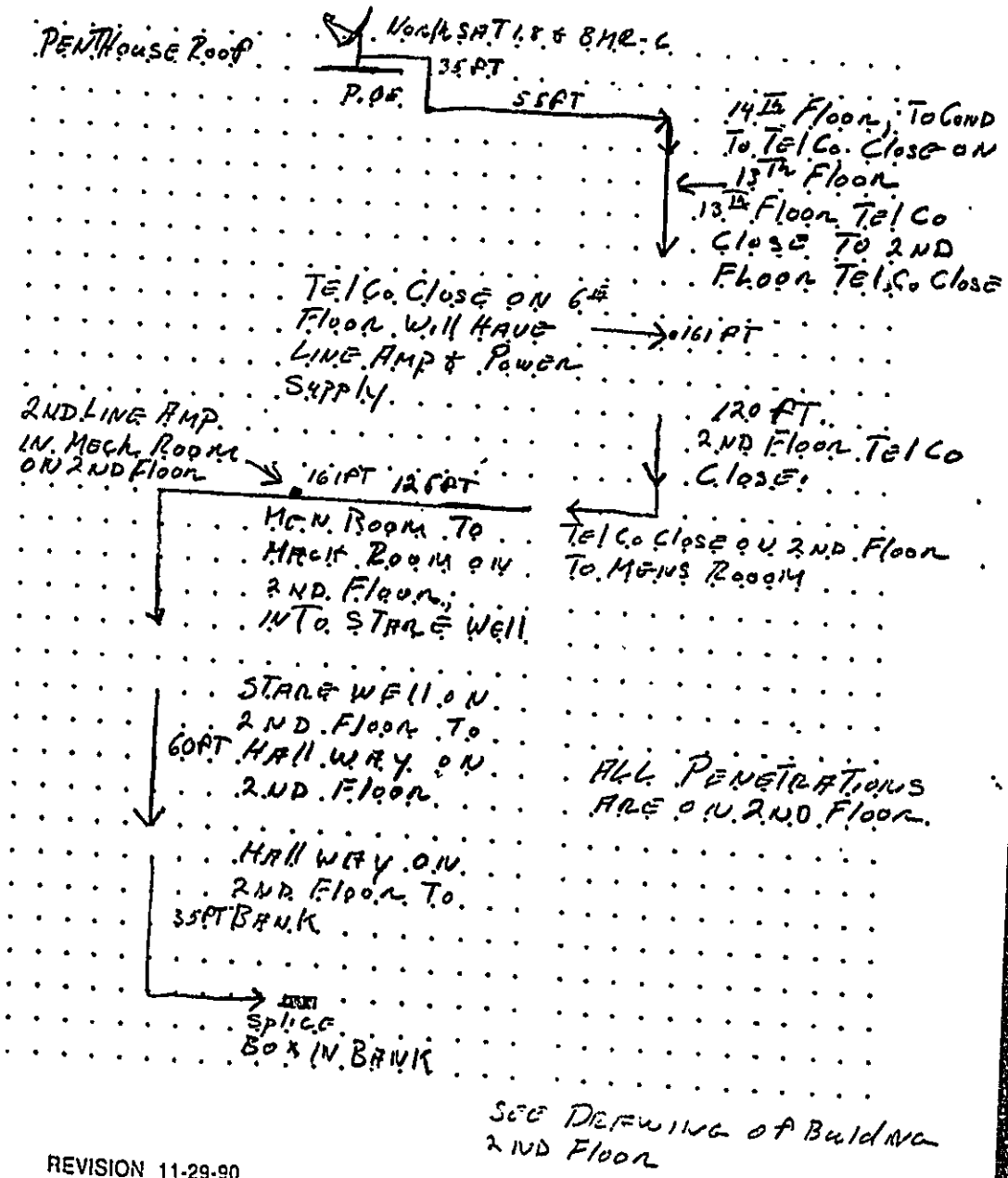
LINE AMPLIFIER(S): QUANTITY REQUIRED 2 DISTANCE FROM ODU #1 161 FT #2 161 FT
COMMENTS (Describe locations): LINE AMP TEL.CO CLOSE 6TH FLOOR LINE AMP MECH ROOM 2ND FLOOR.

EXTERNAL POWER SUPPLY: YES ✓ NO ____ DISTANCE FROM ANTENNA 161 FT
IS AC AVAILABLE? YES ✓ NO ____
COMMENTS (Describe location and AC availability): POWER SUPPLY WILL BE IN 6TH FLOOR TEL.CO CLOSE. A.C. IS 6TH FLOOR TEL.CO CLOSE.

REVISION 11-29-90

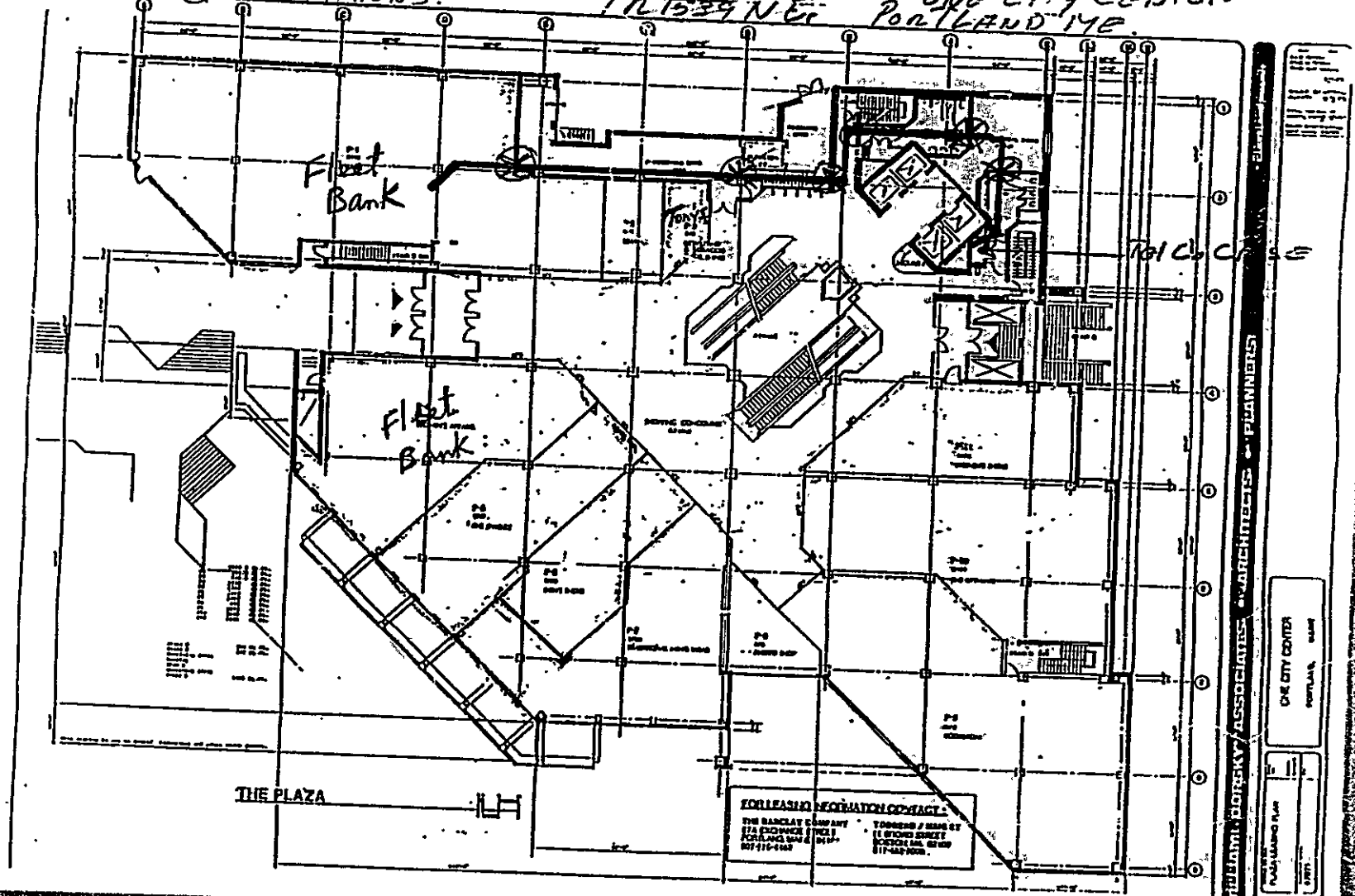
SECTION 11: DRAWINGS (CONT.) CABLE RUN OPTION = _____

CABLE RUN: (Show cable run from ODU to IDU noting Point-of-Entry measurements, locations of line amps and ext. pwr. supply. Identify all options with the option number.)



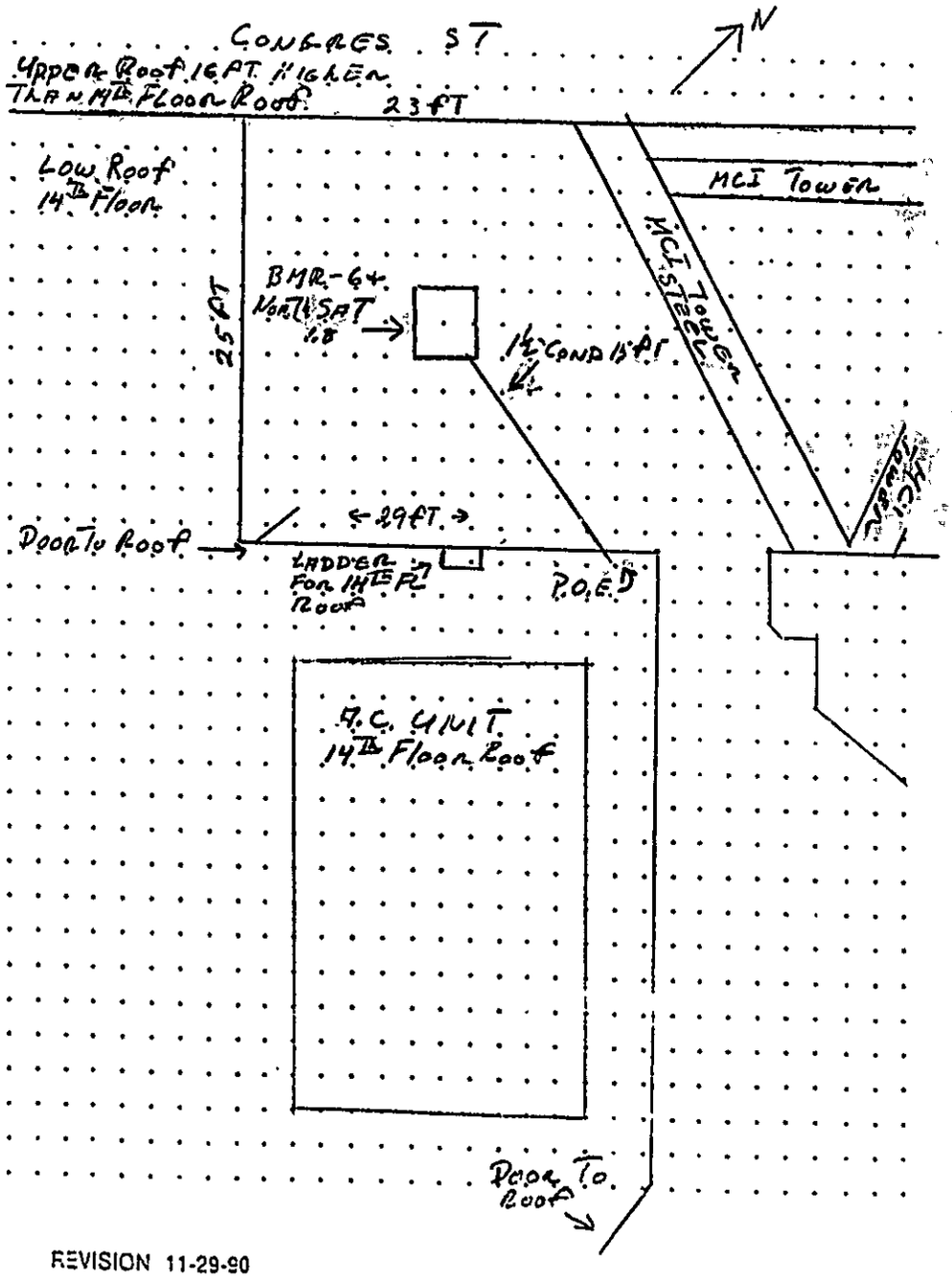
REVISION 11-29-90

(X) PENETRATIONS. TR 539 N.E. 2ND FLOOR ONE CITY CENTER PORTLAND ME.



SECTION 11: DRAWINGS ANTENNA LOCATION OPTION #_____

ANTENNA LOCATION: (Include antenna location(s), cable run, surrounding structures, measurements, line-of-sight, magnetic north, etc. If more than one option, please note option #.)



REVISION 11-29-90

SECTION 12 - PHOTOS (CONT.)

CABLE POINT OF ENTRY (P.O.E.) OPTION #____

COMMENTS _____

P.O.E.
ONE CITY CENTER
PORTLAND ME TR 1539 NE

ONE CITY CENTER PORTLAND ME

ANTENNA AS SEEN BY PUBLIC OPTION # N/A
(PHOTO OF ENTIRE BLDG FROM DISTANCE)

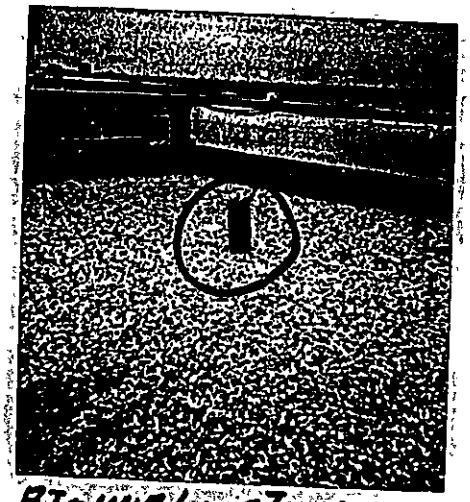
COMMENTS _____

REVISION 11 2 01

SECTION 12: PHOTOS

ANTENNA LOCATION-OPTION #____ (Show line-of-sight)

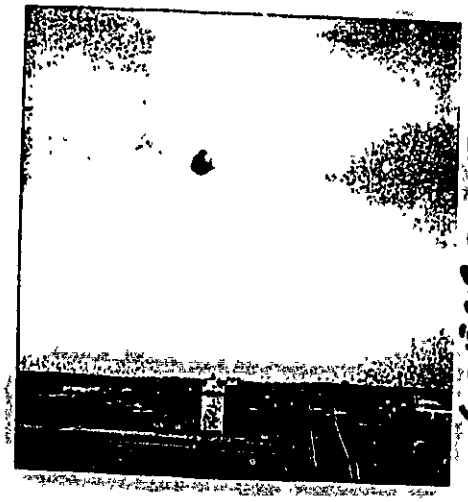
COMMENTS _____



ANTENNA LOCATION
ONE CITY CENTER
PORTLAND ME 7R1539N.E

LINE OF SIGHT-OPTION #____

COMMENTS _____



LINE OF SIGHT
ONE CITY CENTER
PORTLAND ME
7R1539 NE

REVISION 11-29-90

SECTION 12: PHOTOS (CONT.)

PHOTO SHOWING GREATEST WIND EXPOSURE-OPTION #____ COMMENTS_____

See Photo on L.O.S.

P.O.E From Penthouse To 14th Floor

B
(

P.O.E Penthouse To 14 Floor Tel. Co Close [redacted]. 1½ IN Cond

COMMENTS_____

REVISION 11-29-90

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 11/25/91, 19__
Receipt and Permit number 3374

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: One City Center - 5XX 7th floor

OWNER'S NAME: Fleet Bank ADDRESS:

	FEES
OUTLETS:	
Receptacles 18 Switches 36 Plugmold ____ ft. TOTAL ____	10.80
FIXTURES: (number of)	
Incandescent ____ Flourescent 26 (not strip) TOTAL 26	5.20
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
METERS: (number of)	
MOTORS: (number of)	
Fractional	
1 HP or over	
RESIDENTIAL HEATING:	
Oil or Gas (number of units)	
Electric (number of rooms)	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler)	
Oil or Gas (by separate units)	
Electric Under 20 kws ____ Over 20 kws	
APPLIANCES: (number of)	
Ranges ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
MISCELLANEOUS: (number of)	
Branch Panels	
Transformers	
Air Conditioners Central Unit	
Separate Units (windows)	
Signs 20 sq. ft. and under	
Over 20 sq. ft.	
Swimming Pools Above Ground	
In Ground	
Fire/Burglar Alarms Residential	
Commercial x	15.00
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under	
over 30 amps	
Circus, Fairs, etc.	
Alterations to wires	
Repairs after fire	
Emergency Lights, battery	
Emergency Generators	
INSTALLATION FEE DUE:	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE:	31.00

INSPECTION:
Will be ready on now, 19__; or Will Call

CONTRACTOR'S NAME: E S BOulos Co
ADDRESS: 28 Foden Rd So Ptld, ME
TEL.: 772-3706
MASTER LICENSE NO.: Wm Swanton #03374 SIGNATURE OF CONTRACTOR:
LIMITED LICENSE NO.:

INSPECTOR'S COPY — WHITE
OFFICE COPY — CANARY
CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 3074

Location [illegible] City Center

Owner First Bank

Date of Permit 11-26-91

Final Inspection 11-27-91

By Inspector [illegible]

Permit Application Register Page No. 118

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 11-27-91 by SB

PROGRESS INSPECTIONS: ____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

DATE:	REMARKS:

Permit # 913227 913227 City of Portland BUILDING PERMIT APPLICATION Fee $770 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank - lessee Phone # 874-5505

Address: Box 1280; Ptld, ME 04104

LOCATION OF CONSTRUCTION One City Center - 7th floor

Contractor: lessee Sub.: _____

Address: _____ Phone # _____

Est. Construction Cost: 150,000 Proposed Use: office space

Past Use: office space

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Interior renovations - 7th floor

For Official Use Only

Date 10/30/91

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost $150,000.

Subdivision _____

Name _____

Lot _____

Ownership _____

Zoning: B-3

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval. Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other _____ (Explain) _____

WDH 70 - HISTORIC PRESERVATION

Not in District nor Landmark. Does not require review.

Requires Review.

Action. ___ Approved. ___ Approved with Conditions. ___ Denied.

Date. 10/30/91

Signature _____

PERMIT ISSUED NOV 15 1991 CITY OF PORTLAND

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size _____
4. Foundation Size _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored
2. Girder Size _____
3. Lally Column Spacing _____ Size: _____
4. Joists Size. _____ Spacing 16" O.C.
5. Bridging Type. _____ Size. _____
6. Floor Sheathing Type _____ Size _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No Doors _____
4. Header Sizes _____
5. Bracing Yes _____ No _____ Span(s) _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____
10. Masonry Materials _____ Weather Exposure _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings. _____
4. Insulation Type _____
5. Ceiling Height: _____ Size _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type _____ Number of Fire Places _____

Heating:

Type of Heat _____

Electrical.

Service Entrance Size _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No of Tubs or Showers _____
3. No of Flushes _____
4. No. of Lavatories _____
5. No of Other Fixtures _____

Swimming Pools:

1. Type _____
2. Pool Size _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Richard Davis Date 10/30/91

CEO's District 2 Richard Davis

PERMIT ISSUED WITH LETTER

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

MA. TRIM

ELECTRICAL INSTALLATIONS —

Permit Number 22 499

Location 7441 - 1 Ave. Court

Owner Mordter Bailey

Date of Inspection 10/30/88

Final Inspection

By Inspector

Permit Application Register Page No. 15

INSPECTIONS Service _____ by _____

Service called in _____

Closing in

PROGRESS INSPECTIONS _____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

DATE:	REMARKS
10/30/88	Permit is void. Contractor has withdrawn from the job. Refund requested.

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date October 30, 19 87

Receipt and Permit number 22499

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 7th Floor One City Center

OWNER'S NAME: Norstar Banks ADDRESS: same

		FEES
OUTLETS:		
Receptacles 66 Switches 41 Plugmold ___ ft. TOTAL 107		9.70
FIXTURES: (number of)		
Incandescent 24 Flourescent 88 (not strip) TOTAL 116		13.60
Strip Flourescent 4 ft.		~~3.00~~
SERVICES:		
Overhead X Underground ___ Temporary ___ TOTAL amperes 100		3.00
METERS: (number of) 1		.50
MOTORS: (number of)		
Fractional 2		1.00
1 HP or over ___		
RESIDENTIAL HEATING:		
Oil or Gas (number of units) ___		
Electric (number of rooms) ___		
COMMERCIAL OR INDUSTRIAL HEATING.		
Oil or Gas (by a main boiler) ___		
Oil or Gas (by separate units) ___		
Electric Under 20 kws ___ Over 20 kws ___		
APPLIANCES: (number of)		
Ranges ___	Water Heaters 1	
Cook Tops ___	Disposals ___	
Wall Ovens ___	Dishwashers ___	
Dryers ___	Compactors ___	
Fans ___	Others (denote) ___	
TOTAL X		
MISCELLANEOUS: (number of)		1.50
Branch Panels 1		1.00
Transformers 1		~~2.00~~
Air Conditioners Central Unit ___		
Separate Units (windows) ___		
Signs 20 sq. ft. and under ___		
Over 20 sq. ft. ___		
Swimming Pools Above Ground ___		
In Ground ___		
Fire/Burglar Alarms Residential ___		
Commercial 1		
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ___		5.00
over 30 amps ___		
Circus, Fairs, etc. ___		
Alterations to wires ___		
Repairs after fire ___		
Emergency Lights, battery 1		
Emergency Generators ___		.50
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE	
FOR REMOVAL OF A "STOP ORDER" (304-16 b)	DOUBLE FEE DUE	
	TOTAL AMOUNT DUE	40.80

INSPECTION.

Will be ready on ___, 19__; or Will Call X

CONTRACTOR'S NAME. Aladdin Elec

ADDRESS: 631 Forest Avenue

TEL.: 773-2296

MASTER LICENSE NO. 03295

LIMITED LICENSE NO.: ___

SIGNATURE OF CONTRACTOR Wayne Cleaves

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

PERMIT # 595 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Merrill Norstar Bank

Address: One City Center

LOCATION OF CONSTRUCTION One City Center

CONTRACTOR: J.A. Languet Constr Co. SUBCONTRACTORS:

ADDRESS: 22 Monument Square S Portland 04101 775-1772

Est. Construction Cost: 82,000 Office

Past Use:

Building Dimensions L W Lot Size:

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Interior renovations to existing space

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil:
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size:
4. Foundation Size:
5. Other

Floor:

1. Sills Size: _____ Sills must be anchored
2. Girder Size:
3. Lally Column Spacing: _____ Size:
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size
6. Floor Sheathing Type: _____ Size
7. Other Material:

Exterior Walls:

1. Studding Size _____ Spacing
2. No. windows
3. No. Doors
4. Header Sizes _____ Span
5. Bracing: Yes _____ No.
6. Corner Posts Size
7. Insulation Type _____ Size
8. Sheathing Type _____ Size
9. Siding Type _____ Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:

1. Studding Size _____ Spacing
2. Header Sizes _____ Span(s)
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

For Official Use Only

Date May 24, 1988
Inside Fire Limits
Bldg Code
Time Limit
Estimated Cost 82,000
Value/Structure
Fee 430

Subdivision: Yes / No
Name
Lot
Block
Permit Expiration
Ownership _____ Public _____ Private

Ceiling:

1. Ceiling Joists Size:
2. Ceiling Strapping Size _____ Spacing
3. Type Ceilings:
4. Insulation Type _____ Size
5. Ceiling Height:

PERMIT ISSUED
MAY 31 1988
City C...

Roof:

1. Truss or Rafter Size _____ Span
2. Sheathing Type _____ Size
3. Roof Covering Type
4. Other

Chimneys:

Type _____ Number of Fire Places

Heating:

Type of Heat

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No
2. No of Tubs or Showers
3. No of Flushes
4. No of Lavatories
5. No of Other Fixtures

Swimming Pools:

1. Type
2. Pool Size _____ x _____ Square Footage
3. Must conform to National Electrical Code and State Law

Zoning:

District _____ Street Frontage Req _____ Provided
Required Setbacks: Front _____ Back _____ Side _____ Side

Review Required:

Zoning Board Approval: Yes _____ No _____ Date
Planning Board Approval: Yes _____ No _____ Date
Conditional Use _____ Variance _____ Site Plan _____ Subdivision
Shore and Floodplain Mgmt _____ Special Exception
Other _____ (Explain)
Date Approved

Permit Received By Lynne Benoit

Signature of Applicant _____ Date 5/24/88

Signature of CEO Merrill Fiske Date

Inspection Dates

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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B.

PERMIT # 731 **CITY OF** Portland **BUILDING PERMIT APPLICATION** **MAP #**_____ **LOT#**_____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: The Fisher Group

Address: Troy, New York (Previously Northstar Bank)

LOCATION OF CONSTRUCTION 1 City Center (Fleet Bank)

CONTRACTOR: NeoKraft Signs ~~SUBCONTRACTORS:~~ 772-1544

ADDRESS: 686 Main St., Lewiston, ME 04240

Est. Construction Cost:_____ Type of Use: Bank

Past Use: Same

Building Dimensions L____ W____ Sq.Ft.____ # Stories:____ Lot Size:_____

Is Proposed Use:_____ Seasonal_____ Condominium_____ Apartment_____

Conversion - Explain To erect 3 signs in place of exist. signs, same size, 3 elevations, as per plan. 512 sq. ft.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE above 125 feet,

Residential Buildings Only:

Of Dwelling Units_____ # Of New Dwelling Units_____

Foundation:

1. Type of Soil:
2. Set Backs - Front_____ Rear_____ Side(s)_____
3. Footings Size:
4. Foundation Size:
5. Other

Floor:

1. Sills Size: _____ _____ Sills must be anchored.
2. Girder Size:
3. Lally Column Spacing:_____ Size:
4. Joists Size: Spacing 16" O.C.
5. Bridging Type: Size:
6. Floor Sheathing Type: Size:
7. Other Material:

Exterior Walls:

1. Studding Size_____ Spacing
2. No. windows
3. No. Doors
4. Header Sizes_____ Span(s)
5. Bracing: Yes_____ No.
6. Corner Posts Size
7. Insulation Type_____ Size
8. Sheathing Type_____ Size
9. Siding Type_____ Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:

Studding Size_____ Spacing
2. Header Sizes_____ Span(s)
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

For Official Use Only

Date June 16, 1988
Inside Fire Limits
Bldg Code
Time Limit
Estimated Cost
Value/Structure
Fee XXXXXXX 177.40 Work Pd.

Subdivision: Yes / No
Name
Lot
Block
Permit Expiration:
Ownership: _____ Public _____ Private

PERMIT ISSUED
JUN 23 1988
City of Lewiston

Ceiling:

1. Ceiling Joists Size:
2. Ceiling Strapping Size_____ Spacing
3. Type Ceilings:
4. Insulation Type_____ Size
5. Ceiling Height:

Roof:

1. Truss or Rafter Size_____ Span
2. Sheathing Type_____ Size
3. Roof Covering Type
4. Other

Chimneys:

Type:_____ Number of Fire Places

Heating:

Type of Heat:

Electrical:

Service Entrance Size:_____ Smoke Detector Required Yes____ No____

Plumbing:

1. Approval of soil test if required Yes_____ No_____
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

Swimming Pools:

1. Type:
2. Pool Size: _____ x _____ Square Footage
3. Must conform to National Electrical Code and State Law.

Zoning:

District_____ Street Frontage Req.:_____ Provided
Required Setbacks: Front_____ Back_____ Side_____ Side_____

Review Required:

Zoning Board Approval. Yes_____ No_____ Date:
Planning Board Approval: Yes_____ No_____ Date:
Conditional Use:_____ Variance_____ Site Plan_____ Subdivision_____
Shore and Floodplain Mgmt._____ Special Exception_____
Other_____ (Explain)
Date Approved

Permit Received By Joyce M. Rinaldi

Signature of Applicant [signature] for Fleet Bank Date 6-16-88

Signature of CEO (10) [signature] Date

Inspection Dates

White-Tax Assesor Yellow-GPCOG White Tag-CEO

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B

PERMIT # 730 CITY OF _____ BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: The Fisher Group

Address: Troy, New York (Previously Northstar Bank)

LOCATION OF CONSTRUCTION 1 City Center (Fleet Bank)

CONTRACTOR: NeoKraft Signs ~~SUBCONTRACTOR~~ 772-1544

ADDRESS: 686 Main St., Lewiston, ME 04240

Est. Construction Cost: _____ Type of Use: bank

Past Use: same

Building Dimensions L ___ W ___ Sq. Ft. ___ # Stories: ___ Lot Size: ___

Is Proposed Use: ___ Seasonal ___ Condominium ___ Apartment

___ Conversion - Explain To erect 2 ground level signs flush to bldg.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE 56 sq. ft.

Residential Buildings Only:

Of Dwelling Units ___ # Of New Dwelling Units ___

Foundation:

1. Type of Soil: ___
2. Set Backs - Front ___ Rear ___ Side(s) ___
3. Footings Size: ___
4. Foundation Size: ___
5. Other ___

Floor:

1. Sills Size: ___ Sills must be anchored
2. Girder Size: ___
3. Lally Column Spacing: ___ Size ___
4. Joists Size: ___ Spacing 16" O C
5. Bridging Type: ___ Size ___
6. Floor Sheathing Type: ___ Size ___
7. Other Material ___

Exterior Walls:

1. Studding Size ___ Spacing ___
2. No windows ___
3. No. Doors ___
4. Header Sizes ___ Span(s) ___
5. Bracing: Yes ___ No ___
6. Corner Posts Size ___
7. Insulation Type ___ Size ___
8. Sheathing Type ___ Size ___
9. Siding Type ___ Weather Exposure ___
10. Masonry Materials ___
11. Metal Materials ___

Interior Walls:

1. Studding Size ___ Spacing ___
2. Header Sizes ___ Span(s) ___
3. Wall Covering Type ___
4. Fire Wall if required ___
5. Other Materials ___

For Official Use Only

Date 6/16/88

Inside Fire Limits ___

Bldg Code ___

Time Limit ___

Estimated Cost ___

Valu /Structure ___

Fee $61.20

Subdivision: Yes / No

Name ___

Lot ___

Block ___

Permit Expiration ___

Ownership: ___ Public ___ Private

PERMIT ISSUED

JUN 20 1988

City C. Clerk

Ceiling:

1. Ceiling Joists Size: ___
2. Ceiling Strapping Size ___ Spacing ___
3. Type Ceilings: ___
4. Insulation Type ___ Size ___
5. Ceiling Height ___

Roof:

1. Truss or Rafter Size ___ Span ___
2. Sheathing Type ___ Size ___
3. Roof Covering Type ___
4. Other ___

Chimneys:

Type ___ Number of Fire Places ___

Heating:

Type of Heat ___

Electrical:

Service Entrance Size ___ Smoke Detector Required Yes ___ No ___

Plumbing:

1. Approval of soil test if required Yes ___ No ___
2. No. of Tubs or Showers ___
3. No. of Flushes ___
4. No. of Lavatories ___
5. No. of Other Fixtures ___

Swimming Pools:

1. Type ___
2. Pool Size ___ x ___ Square Footage ___
3. Must conform to National Electrical Code and State Law

Zoning:

District ___ Street Frontage Req ___ Provided ___

Required Setbacks: Front ___ Back ___ Side ___ Side ___

Review Required:

Zoning Board Approval Yes ___ No ___ Date ___

Planning Board Approval Yes ___ No ___ Date ___

Conditional Use ___ Variance ___ Site Plan ___ Subdivision ___

Shore and Floodplain Mgmt ___ Special Exception ___

Other ___ (Explain) ___

Date Approved ___

Permit Received By Joyce M. Rinaldi

Signature of Applicant [signature] Date ___

Signature of CEO [signature] Date ___

Inspection Dates ___

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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930304

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $27.80 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank of Maine Phone # 874-5141

Address: One City Ctr- Ptld, ME 04101

LOCATION OF CONSTRUCTION One City Center

Contractor: NeoKraft Sub.:

Address: Lewiston, ME Phone #

Est. Construction Cost: Proposed Use: office bldg w 4 sig

Past Use: office bldg

# of Existing Res. Units # of New Res. Units

Building Dimensions L V Total Sq. Ft.

Stories: # Bedrooms Lot Size:

Is Proposed Use: Seasonal Condominium Conversion

Explain Conversion erect four signs - 3'x1' 3'x1' 2'x2' 2'x2'

For Official Use Only

Date 4/23/93

Inside Fire Limits

Bldg Code

Time Limit

Estimated Cost

Subdivision:

Name APR 29 1993

Lot

Ownership: Public Private

CITY OF PORTLAND

Zoning:

Street Frontage Provided:

Provided Setbacks: Front Back Side Side

Review Required:

Zoning Board Approval: Yes No Date:

Planning Board Approval: Yes No Date:

Conditional Use: Variance Site Plan Subdivision

Shoreland Zoning Yes No Floodplain Yes No

Special Exception

Other (Explain) PAD OK PLM 4-28-93

4-28-93

HISTORIC PRESERVATION

Not in District or Landmark

Does not require review

Requires Review

Approved

Approved with Conditions

Denied

Date 4/28/93

Signature

Foundation:

1. Type of Soil:
2. Set Backs - Front Rear Side(s)
3. Footings Size:
4. Foundation Size:
5. Other

Floor:

Prop owner: One City Ctr Assc

1. Sills Size: Sills must be anchored.
2. Girder Size:
3. Lally Column Spacing: Size:
4. Joists Size: Spacing 16" O.C.
5. Bridging Type: Size:
6. Floor Sheathing Type: Size:
7. Other Material:

***** Mail Permit : Hazel Hopkins
2 Phoebe Way
Worcester, MA 01605

Exterior Walls:

1. Studding Size Spacing
2. No. windows
3. No. Doors
4. Header Sizes Span(s)
5. Bracing: Yes No.
6. Corner Posts Size
7. Insulation Type Size
8. Sheathing Type Size
9. Siding Type Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:

1. Studding Size Spacing
2. Header Sizes Span(s)
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

Ceiling:

1. Ceiling Joists Size:
2. Ceiling Strapping Size Spacing
3. Type Ceilings:
4. Insulation Type Size
5. Ceiling Height:

Roof:

1. Truss or Rafter Size Span
2. Sheathing Type Size
3. Roof Covering Type

Chimneys:

Type: Number of Fire Places

Heating:

Type of Heat:

Electrical:

Service Entrance Size: Smoke Detector Required Yes No

Plumbing:

1. Approval of soil test if required Yes No
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

Swimming Pools:

1. Type:
2. Pool Size: x Square Footage
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Hazel Hopkins Date 4-23-93

Signature of CEO Hazel Hopkins for Fleet Bank Date

Inspection Dates

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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930276

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee $145.00 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: One City Center Assoc. Phone # 775-4483

Address: One City Center, Portland Me 04101

LOCATION OF CONSTRUCTION basement/first floor One City Center

Contractor: Tylor Const. Sub.: _____

Address: One City Ctr. Phone # 775-4483

Est. Construction Cost: $25,000 Proposed Use: tele. equip room

Past Use: compactor room

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion add door and erect wall as per plans

For Official Use Only

Date April 13, 1993

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost $25,000

Subdivision: Name _____ Lot _____

Ownership: Public _____ Private _____

APR 16 1993

Zoning:

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ___ No ___ Date: _____

Planning Board Approval: Yes ___ No ___ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ___ No ___ Floodplain Yes ___ No ___

Special Exception _____

Other (Explain) _____

WRA 4-15-93

HISTORIC PRESERVATION

Not in District nor Landmark

Does not require review.

Requires Review.

Action: Approved

Approved with Conditions

Denied

Date 4/15/93

Signature _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size _____
6. Floor Sheathing Type: _____ Size _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No. _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joist Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type _____ Number of Fire Places _____

Heating:

Type of Heat _____

Electrical:

Service Entrance Size _____ Smoke Detector Required Yes ___ No ___

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law

Permit Received By Latini

Signature of Applicant _____ Date 4/13/93

CEO's District _____

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

930276

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $145.00 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: One City Center Assoc. Phone # 775-4483

Address: One City Center, Portland Me 0410

LOCATION OF CONSTRUCTION basement/first floor One City Center

Contractor: Tylor Const. Sub _____

Address One City Ctr. Phone # 775-44-3

Est. Construction Cost: $25,000 Proposed Use. tele. equip room

Past Use: compactor room

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft _____

Stories: _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion add door and erect wall as per plans

PERMIT

For Official Use Only

Date April 13, 1993 Subdivision: Name _____

Inside Fire Limits _____ Lot _____

Bldg Code _____ Ownership: Public _____ Private _____

Time Limit _____

Estimated Cost $25,000

APR 16 1993 CITY OF PORTLAND

Zoning:

Street Frontage Provided. _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other (Explain) _____

WHA 04-15-93

HISTORIC PRESERVATION

Not in District nor Landmark.

Does not require review.

Requires Review

Action Approved.

Approved with Conditions.

Date 4/19/93

Signature

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No. _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Latini

Signature of Applicant Ron Finado Date 4/13/93

Ron Finado

CEO's District _____

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 145.00
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS 2 sets of plans submitted
Work Completed

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 has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT ADDRESS PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO

930304

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $27.80 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fleet Bank of Maine Phone # 874-5141

Address: One City Ctr- Ptld, ME 04101

LOCATION OF CONSTRUCTION One City Center

Contractor: NeoKraft Sub: _____

Address: Lewiston, ME Phone # _____

Est. Construction Cost: _____ Proposed Use: office bldg w 4 sig

Past Use: office bldg

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft _____

Stories: _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion erect four signs - 3'x1' 3'x1' 2'x2' 2'x2'

For Official Use Only

Date 4/23/93

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost _____

Subdivision: Name _____ Lot _____

Ownership: Public _____ Private _____

APR 29 1993

CITY OF PORTLAND

Zoning:

Street Frontage Provided _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval Yes ____ No ____ Date: _____

Planning Board Approval Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other (Explain) _____

4-28-93

HISTORIC PRESERVATION

~~Not in District nor Landmark~~

~~Does not require review.~~

~~Requires review.~~

Action ____ Approved.

Approved with Conditions:

Denied

4/28/93

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

Prop owner: One City Ctr Assc

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

***** Maine Permit : Hazel Hopkins
2 Phoebe Way
Worcester, MA 01605

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No. _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height _____

Roof:

1. Truss or Rafter Size 2" x 10" Space _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ____ No ____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise M. Chase

Signature of Applicant _____ Date 4-23-93

Signature of CEO Hazel Hopkins - Fleet Bank Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag-CEO

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PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 29,80

Subdivision Fee $

Site Plan Review Fee $

Other Fees $

(Explain)

Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS Work completed

Signature of Applica Hegl Hopkins for Fleet Bank Date 4-23-93

DIRIGO
MANAGEMENT
COMPANY

April 5, 1993

Ms. Hazel Wood Hopkins
Two Phoebe Way
Worcester, MA 01605-1125

RE: Fleet Bank ATM Signage

Dear Hazel:

Please regard this letter as written approval by One City Center Associates for the installation of ATM signs to the exterior of One City Center as indicated on your plans/elevations of March 17, 1993.

Should you have any questions, please give me a call.

Sincerely,

Jim O'Donnell

James P. O'Donnell
Vice President

45 EXCHANGE STREET • PORTLAND, MAINE 04101 • (207) 871-1080 • FAX (207) 871-7189