



# General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges within the City, payment arrangements must be made before permits of any kind

Reviewed for Code Compliance  
Inspections Division  
Approved with Conditions

Date: 08/07/14

Address/Location of Construction: 144 FORE ST - VA CLINIC		Date: 08/07/14	
Total Square Footage of Proposed Structure: NO SF ADDED			
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Applicant Name: LEDGEWOOD CONSTRUCTION Address: 27 MAIN ST City, State & Zip: PORTLAND ME 04106	Telephone: 207 767 1860 x 105 Email: PREYNOLDS@LEDGEWOODCONSTRUCTION.COM	
Lessee/Owner Name: VA (if different than applicant) Address: Medical Regional Office Center City, State & Zip: TOBUS MAINE Telephone & E-mail: 04330	Contractor Name: (if different from Applicant) Address: SEE ABOVE City, State & Zip: Telephone & E-mail:	Cost Of Work: \$ 12,592 C of O Fee: \$ Historic Rev \$ Total Fees : \$ 157	
Current use (i.e. single family) VA Clinic			
If vacant, what was the previous use?			
Proposed Specific use: OUTRt A BATHROOM INTO A LAB			
Is property part of a subdivision? ___ If yes, please name			
Project description: OUTRt A BATHROOM INTO A LAB SPACE. MOVE A SPECIMEN PASS THRU, ADD COUNTER TOP.			
Who should we contact when the permit is ready: Peter Reynolds, LEDGEWOOD CONST.			
Address: 27 MAIN ST			
City, State & Zip: PORTLAND MAINE 04106			
E-mail Address: PREYNOLDS@LEDGEWOODCONSTRUCTION.COM			
Telephone: 207 749 9350			

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. 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's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:	Date: 7-29-14
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This is not a permit; you may not commence ANY work until the permit is issued.