

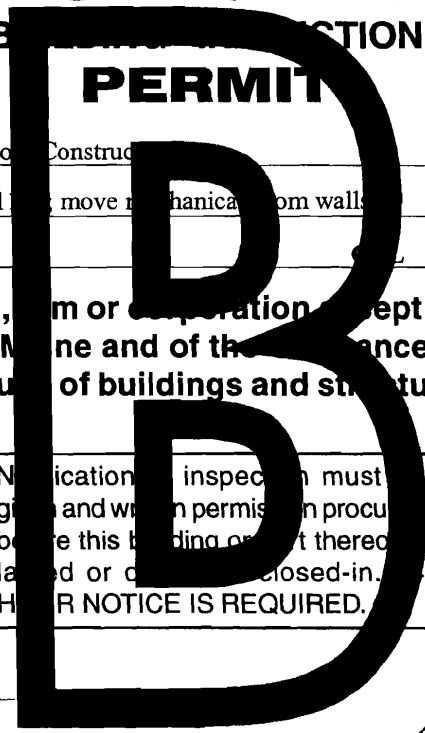
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 031464



This is to certify that Mmc Realty Corp/North Shore Construction
has permission to Amendment to permit #03-1111 to move mechanical room walls
AT 173-195 High St/420 Cumberland Ave PERMIT NO. 037 E006001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must given and work on permit in progress before this building or part thereof is occupied or enclosed-in.
HEAR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name

[Signature] 12/5/03
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-1464	Issue Date:	CBL: 037 E006001
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Location of Construction: 173-195 High St/420 Cumberland A	Owner Name: Mmc Realty Corp	Owner Address: 22 Bramhall St	Phone:
Business Name:	Contractor Name: North Shore Construction	Contractor Address: P.O. Box 2564 South Portland	Phone: 2077742800
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: B3

Past Use: Office Building	Proposed Use: Office Building w/Amendment to permit #03-1196; move mechanical room walls	Permit Fee: \$39.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Amendment to permit #03-1196; move mechanical room walls		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 1, 17 12/5/03 <i>[Signature]</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____				

Permit Taken By: kwd	Date Applied For: 11/21/2003	Zoning Approval		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>[Signature]</i> 12/10/03	Date: _____	Date: <i>[Signature]</i>

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK. TITLE DATE PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-1464	Date Applied For: 11/21/2003	CBL: 037 E006001
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Location of Construction: 173-195 High St/420 Cumberland A	Owner Name: Mmc Realty Corp	Owner Address: 22 Bramhall St	Phone:
Business Name:	Contractor Name: North Shore Construction	Contractor Address: P.O. Box 2564 South Portland	Phone (207) 774-2800
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	

Proposed Use: Office Building w/Amendment to permit #03-1196; move mechanical room walls	Proposed Project Description: Amendment to permit #03-1196; move mechanical room walls
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 12/01/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 12/05/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Fire	Status: Approved	Reviewer: Lt. MacDougal	Approval Date: 12/01/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>

03-1464

All Purpose Building Permit Application

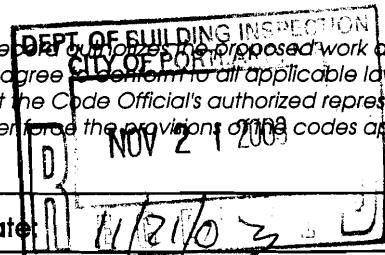
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

173-195 High St.

Location/Address of Construction: 420 Cumberland.		
Total Square Footage of Proposed Structure NA	Square Footage of Lot NA	
Tax Assessor's Chart, Block & Lot Chart# 037 Block# E Lot# 006	Owner: MMC Realty	Telephone: 207 879-0111
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: HERB ROBINSON P.O. Box 2564 So. Po. 04116 207-774-2800	Cost Of Work: \$ 2000 Fee: \$ 39.00
Current use: office		
If the location is currently vacant, what was prior use: NA		
Approximately how long has it been vacant: NA		
Proposed use: SAME Amendment to permit 03-1196		
Project description: Move / New load bearing wall Build / New wall Move Mechanical Room Walls		
Contractor's name, address & telephone: North Shore Const. P.O. Box 2564 So. Po 04116		
Who should we contact when the permit is ready: HERB CELL 650-2547		
Mailing address: SAME		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 207-650-2547		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant:	Date: 11/21/08
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

 Pre-construction Meeting: Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before **any** site work begins on any project other than single family additions or alterations.

 Footing/Building Location Inspection: Prior to pouring concrete

 Re-Bar Schedule Inspection: Prior to pouring concrete

 Foundation Inspection: Prior to placing ANY backfill

Call **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

Call **Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

 If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

Signature of applicant/designee

Date

Signature of Inspections Official

Date

CBL: 037 EOD Building Permit #: 03 1196

10/22/03



PO Box 2564
South Portland, ME 04116
207.774.2800 (Phone/Fax)
www.northshoreconst.com

~~September 25, 2003~~ Nov 21, 2003

Maine Medical Center
19 Bramhall
Portland, ME 04102

037-E006001 Permit # 03-1196

RE: Renovations to 6 Mechanical rooms @ 420/Cumberland Ave. Portland,
ME

Addendum

~~105 High St.~~
173 High

Scope of Work: Expand 6 Mechanical rooms to accommodate future additional HVAC units. Doors shall be moved or replaced as necessary. Non load bearing wall shall be moved as necessary. Mechanical Room 7 shall have fire rated doors and walls. Renovations shall be made per plans by Allied engineering.

Changes: Build Partitions PER PLANS → Sketch # 1.1
Dated 11/21/03

A-101

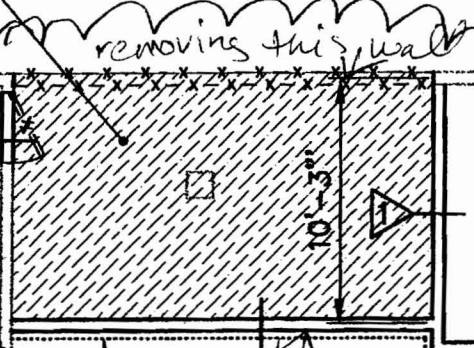
REMOVE EXISTING SUSPENDED CEILING IN THIS (CROSS HATCHED) AREA. INSTALL NEW SUSPENDED CEILING SYSTEM. ALIGN W/EXISTING CEILING IN ADJACENT AREA. REFER TO MECHANICAL & ELECTRICAL DRAWINGS FOR LIGHTING LAYOUT AND RELATED WORK. NEW TILE/GRID SHALL MATCH TILE/GRID AT ADJACENT AREA.

EXISTING MECHANICAL ROOM MOVING TO EQUIP RM

PIPE CHASE SEE

A8
A-101

REVISED Floor Plan



EQUIPMENT ROOM 1
101

101

9'-0"

PATCH S.A.T. SYSTEM TO NEW WALL LOCATION

4'-

CUMBERLAND AVENUE

PIPE CHASE SEE

A8
A-101

PIPE CHASE SEE

A8
A-101

Sketch #1.1. Revision To
Mechanical Room # 1 11/21/03

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-1196	Date Applied For: 09/26/2003	CBL: 037 E006001
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Location of Construction: 173 High St	Owner Name: Mmc Realty Corp	Owner Address: 22 Bramhall St	Phone: () 879-0111
Business Name:	Contractor Name: North Shore Construction	Contractor Address: P.O. Box 2564 South Portland	Phone: (207) 774-2800
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Office Space/Commercial w/non Load-Bearing Walls Removed & Replaced/New Door	Proposed Project Description: Non Load-Bearing Walls Removed & Replaced/New Door
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Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 10/03/2003
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 10/14/2003
Note: **Ok to Issue:**

1) This permit authorizes partitions only. Additional separate permits are required for the use of the space for equipment etc. As no floor load engineering has been provided.

Dept: Fire **Status:** Approved **Reviewer:** Lt. MacDougal **Approval Date:** 10/06/2003
Note: **Ok to Issue:**

Previous permit

