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|---|--|---|--|---|--|---|--|
| Location of Construction:<br>144 State St   |  | Owner:<br>Mercy Hospital                        |  | Phone:  |  | Permit No: 971020   |  |
| Owner Address:  |  | Lessee/Buyer's Name:<br>Oncology Program 4 West |  | Phone:  |  | BusinessName:   |  |
| Contractor Name:<br>Pochebit Co.  |  | Address:<br>171 Warren Ave Ptld, ME 04103       |  | Phone:<br>797-3369  |  | <div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b><br/>                 Permit Issued:<br/> <b>SEP 23 1997</b><br/> <b>CITY OF PORTLAND</b> </div>   |  |
| Past Use:<br>Hospital   |  | Proposed Use:<br>Same                           |  | COST OF WORK:<br>\$ 50,000.00<br>PERMIT FEE:<br>\$ 270.00<br>FIRE DEPT. <input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>INSPECTION:<br>Use Group: Type:  |  |   |  |
| Proposed Project Description:<br>Interior Renovations<br>Oncology Program 4th floor/West wing |  |   |  | Signature: <i>[Signature]</i><br>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)<br>Action: Approved <input type="checkbox"/><br>Approved with Conditions: <input type="checkbox"/><br>Denied: <input type="checkbox"/><br>Signature: _____ Date: _____ |  | Zone: <i>[Handwritten]</i> CBL: 045-C-006<br>Zoning Approval: <i>[Handwritten]</i> 9/17/97<br><input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> |  |
| Permit Taken By:<br>Mary Gresik   |  | Date Applied For:<br>17 September 1997          |  |   |  |   |  |

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

*Call Pochebit for Plu*

**PERMIT ISSUED WITH REQUIREMENTS**

*Approved for Inland Water only*

**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 provisions of the code(s) applicable to such permit

*[Signature]* Mike White ADDRESS: 171 Warren Ave Portland DATE: 17 September 1997 PHONE: 797-3369

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: *9/17/97*

*[Signature]*

CEO DISTRICT 3  
*T. Munson*