

## General 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.

Address/Location of Construction: 144 State S Total Square Footage of Proposed Structure:		repair to existing structure	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Address 144 State City, State &	Name: <sub>Mercy Hospital</sub> - Rich Kapise  Street	
Lessee/Owner Name: if different than applicant) Address: City, State & Zip:	Contractor Name: Loranger Door & Window (if different from Applicant) Address: 2325 Broadway Suite 1 City, State & Zip: South Portland, ME 04106		
Telephone & E-mail:	Telephone	& E-mail:	Total Fees : \$
Current use (i.e. single family)  Hospital  Hospital  Hospital  Hospital  List vacant, what was the previous use? If  Proposed Specific use: replace existing win  Is property part of a subdivision? If y  Project description:  Replace existing window on 5th floor	dow on 5th floor res, please name		
ho should we contact when the permit is			
ddress: 144 State Street	ready: RICH Kap	DISE	
ity, State & Zip: Portland, ME 04101			
-mail Address: kapiserich@mercyme.com			
elephone: 207-879-3531			

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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, 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: Richard Kapise	Date: 4/16/13