

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 22 Bramhall Street 4th floor		Owner: Maine Medical Center		Phone: 871-2447		Permit No: 001403	
Owner Address: 22 Bramhall Street		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Herbert Construction LLC		Address: 9 Gould Rd., Lewiston, ME		Phone:		Permit Issued: DEC 15 2000	
Past Use: Hospital		Proposed Use: Hospital		COST OF WORK: \$128,000.00		PERMIT FEE: \$ 792.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <u>E-2</u> Type: <u>2B</u> <u>BOCAGY</u>	
Proposed Project Description: Renovate				Signature: <u>[Signature]</u>		Signature: <u>[Signature]</u>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: <u>E-2</u> CBL: 053-D-007	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning/Approval: <u>[Signature]</u> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <u>12/13/00</u> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: Gayle		Date Applied For: December 11, 2000 GG					

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 Dan Hebert @ 783-2091

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

December 12, 2000

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

PERMIT ISSUED
WITH REQUIREMENTS

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:
- Approved
 - Approved with Conditions
 - Denied

Date: [Signature]

PERMIT ISSUED
WITH REQUIREMENTS

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