

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

ENGINEERING SECTION

PERMIT

Permit Number: 011254

This is to certify that Maine Medical Center/Hebert Construction LLC
has permission to Site work changes in ER area
AT 22 Bramhall St 053 D007001

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 be given and work in permit in progress before this building or part thereof is altered or closed-in. HEAVY 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. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name

PENALTY FOR REMOVING THIS CARD



EXPIRED

SCANNED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1254	Issue Date:	CBL: 053 D007001
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Location of Construction: 22 Bramhall St	Owner Name: Maine Medical Center	Owner Address: 22 Bramhall St	Phone: 207-871-2447
Business Name:	Contractor Name: Hebert Construction LLC	Contractor Address: 9 Gould Rd. Lewiston	Phone: 2077832091
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone:

Past Use: Hospital Emergency Room	Proposed Use: Hospital Emergency Room/Handicap accessible/Grade changes & paving	Permit Fee: \$156.00	Cost of Work: \$22,000.00	CEO District: 2
Proposed Project Description: Site work changes in ER area.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
		Signature:	Signature:	
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: gad	Date Applied For: 10/12/2001	Zoning Approval
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<ol style="list-style-type: none"> 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <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"/> Date:	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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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

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53-D-7

City of Portland
INSPECTION SERVICES

Room 315
389 Congress Street
Portland, Maine 04101

Phone: (207) 874-8703 or 874-8693
Fax : (207) 874-8716

FAX TRANSMISSION COVER SHEET

Date: 10/18/01
To: Becker Structural Engineers
Fax: 879-1822
Re: MMC Sidewalk
Sender: Dave' Coudet

YOU SHOULD RECEIVE 2 PAGE(S), INCLUDING THIS COVER SHEET.

IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL 874-8693 or 874-8703.

874-1838



City of Portland, Maine

389 Congress St., Rm 315
Portland, ME 04101

ACCESSIBILITY CERTIFICATE

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Services

FROM: _____

RE: Certificate of Design, HANDICAP ACCESSIBILITY

DATE: _____

These plans and/or specifications covering construction work on:

Have been designed and drawn up by the undersigned, a Maine registered engineer/architect according to State Regulations as adopted by the State of Maine on Handicapped Accessibility.

(SEAL)

Signature _____

Title _____

Firm _____

Address _____

APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

Maine Medical Center

June 1, 2001

Applicant

Application Date

22 Bramhall Street Portland, ME 04102

McCoachy Hall Barrier Free Ramp

Applicant's Mailing Address

Project Name/Description

Cornell-Palmer Consulting Engineers, Inc.

216 Vaughan Street

Consultant/Agent/Phone Number (207) 657-6910

Address of Proposed Site

UB-10-2

Description of Proposed Development:

See attached letter to Marge Schmucka!

Please Attach Sketch/Plan of Proposal/Development

Criteria for Exemptions:

See Section 14-523 (4)

- a) Within Existing Structures; No New Buildings, Demolitions or Additions
- b) Footprint Increase Less Than 500 Sq. Ft.
- c) No New Curb Cuts, Driveways, Parking Areas
- d) Curbs and Sidewalks in Sound Condition/ Comply with ADA
- e) No Additional Parking / No Traffic Increase
- f) No Stormwater Problems
- g) Sufficient Property Screening
- h) Adequate Utilities

Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
N/A	✓
N/A	✓
NO	✓
Yes	To be reconstructed
NO	✓
NO	✓
N/A	✓
N/A	✓

Planning Office Use Only:

Exemption Granted _____ Partial Exemption Exemption Denied _____

Due to impacts on the public Right of Way a performance guarantee is required. Please contact the planning office with any questions.

Planner's Signature William B. Williams

Date 10-1-01

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Inspections DATE 10/5/01
RECEIVED FROM Herbert Costello
ADDRESS 22 Bramhall St

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	Bussing hand		1500
	cap 1amp		
	Check # 00 395		
	CRK: 053 1009		

CASH CHECK OTHER

TOTAL 156.00

RECEIVED BY Gray



October 1, 2001

CITY OF PORTLAND

Michael Haskell, EI
Gorrill-Palmer Engineers
PO Box 1237
26 Main Street
Gray, ME 04039

RE: Site Plan Exemption for barrier free ramp, 216 Vaughan Street
CBL 63-B-8

Dear Michael:

This letter is in regards to the Site Plan Exemption application for a barrier free ramp in the vicinity of 216 Vaughn Street. As I stated in our phone conversation, the Planning Office grants a Partial Exemption for this project on the condition that the applicant provide a Performance Guarantee for the cost of the site work. The Performance Guarantee is required due to the project's impacts on the Vaughan Street sidewalk. Please review the Performance Guarantee packet enclosed with this letter and feel free to call the Planning Office with any questions.

On a separate note, please allow me to apologize for the length of time this review has taken to process. Your July 24th submission was routed incorrectly, and did not arrive at my desk until last week. In future, please call or Email the Planning Office if our review process lags or stalls for an unreasonable length of time, as it is our intention to process all applications in a timely and efficient manner. Thank you.

Sincerely:

A handwritten signature in cursive script, appearing to read "Bill Needelman".

William B. Needelman, Senior Planner

CC: Sarah Hopkins, Development Review Services Manager
Inspections

01-1254

THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTE**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.

Location/Address of Construction (include Portion of Building): 22 BRAMHALL ST. PORTLAND			
Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Number Chart# 053 Block# D Lot# 007		Owner: MAINE MEDICAL CENTER	Telephone#: 571-2447
Owner's Address: 22 BRAMHALL ST., PORTLAND ME. 04101		Lessee/Buyer's Name (If Applicable) N/A	Cost Of Work: \$22,000 - \$ Fee 15000
Proposed Project Description: (Please be as specific as possible) SITWORK CHANGES AT THE EMERGENCY ROOM ENTRANCE. PROVIDE HANDICAPPED RAMPS TO THE SIDEWALK, PAVING, CURBING, AND GRADING CHANGES 6X 150' APPROX. Dave Conway 783 2091			
Contractor's Name, Address & Telephone HERBERT CONSTRUCTION LLC, 96 OGDEN RD LEWISTON ME 04240			Rec'd By 10/5
Current Use: EXISTING		Proposed Use: SAME	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
 - All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
 - All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
 - HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.
- You must Include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

OCT 5 2001

4) Building Plans

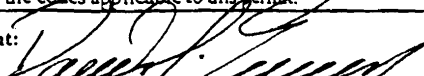
Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

Certification

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Signature of applicant: 	Date: 10/5/01
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Building Permit Fee: \$30.00 for the 1st \$1000. cost plus \$6.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum

01-1254

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