

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

Location of Construction: 22 Branhall		Owner: Haine Medical		Phone:		Permit No: 971273	
Owner Address:		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Dead River Co		Address: 73 Pleasant Hill Road, Scarborough		Phone: 883-9515		Permit Issued: NOV 25 1997 CITY OF PORTLAND Zone: CBL 53-D-7	
Past Use:		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$ 70.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature: <i>[Signature]</i>		Signature:	
Proposed Project Description: Install 2 1,000 gal propane tanks				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
				Signature: Date:			
Permit Taken By: Vicki Dover		Date Applied For: 11/20/97					

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 Richard Connolly for P/U
Dead River Co.

PERMIT ISSUED
WITH REQUIREMENTS

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 OF APPLICANT <i>[Signature]</i> Richard Connolly		ADDRESS: 73 Pleasant Hill Rd., Scarborough 883-9515		DATE:		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						PHONE:	

- Zoning Approval:
- Special Zone or Reviews:**
- Shoreland
 - Wetland
 - Flood Zone
 - Subdivision
 - Site Plan maj minor mm

- 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: _____

CEO DISTRICT 3

6/Jan/99.
Completed

COMMENTS

Lined area for handwritten comments.

Inspection Record

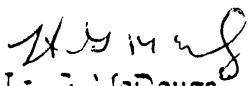
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

FIRE CODE PERMIT REPORT

DATE: 11/24/97 ADDRESS: 223 BennettPERMIT TO: Disc. ReviewOWNER/CONTRACTOR: mmcAPPROVED DENIED CONDITIONS OF APPROVAL/DENIAL

1. The boiler or furnace shall be protected by enclosing with one hour fire rated construction including fire doors and ceiling or by providing automatic extinguishment and smoke protected enclosure. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide a 0.15 gpm, per square foot of floor throughout the entire area. An indicating shut-off valve shall be installed in an accessible location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
2. All required Fire Alarm Systems shall have the capability of "Zone Disconnect" via switches or key pad program provided the method is approved by the Fire Prevention Bureau.
3. All remote annunciators shall have a visible "trouble" indicator along with the Fire Alarm "Zone" indicators.
4. Any Master Box connected to the Municipal Fire Alarm System shall have a supervised Municipal Disconnect Switch.
5. All Master Box locations shall be approved by the Fire Department Director or Communications. A Master Box shall be located so that the center of the box is five feet above finished floor.
6. All Master Box locations are required to have a locked box (knoxbox).
7. A fire alarm acceptance report shall be submitted to the Portland Fire Department.
8. All underground tank removal(s) and/or installation(s) shall be done in accordance with the Department of Environmental Regulations (Chapter 691).
9. No cutting of tanks on site. Cutting of tanks is to be done at an approved tank disposal site.
10. Fire Dispatcher must be at least 48 hours in advance of removal and/or transportation of tanks.
11. All above ground L/P storage tanks shall be located in accordance with NFPA 53 Standards.
12. Any tank located near the path of vehicle movement shall be protected with appropriate permanent barricades.

13. All piping shall be protected from possible mechanical damage and vandalism.
14. A 1" storm fire department connection is required.
15. Any new sprinkler construction over six sprinkler heads needs to have State Fire Marshal approval.
16. Any renovations of sprinkler systems over 20 sprinkler heads needs to have State Fire Marshal approval.
17. A sprinkler performance test shall be submitted to the Portland Fire Department after completion of sprinkler work.
18. State Fire Marshal approval is required for this project.


Lt. E. McDougal
Fire Prevention Officer
City of Portland

MAINE
MEDICAL
CENTER

PROPOSED
LOCATION OF
2,100 GALLON
A/G PROPANE TANKS

GILMAN
STREET

TEMPORARY PROPANE HEAT
FOR MAINE MASONRY
AT MAINE MEDICAL CTR
PROJECT - TANKS &
PROPANE BY
DEAD RIVER CO.

+25'

+50'

NOT TO SCALE

6' CHAIN LINK
FENCE

PARKING
GARAGE

CONGRESS
STREET

TO: ST. JOHN ST.



REVIEWED FOR
NOT
SAFER FEE
COMPLIANCE

STATE OF MAINE
DEPARTMENT OF PUBLIC SAFETY
OFFICE OF STATE FIRE MARSHAL
AUGUSTA
CONSTRUCTION PERMIT



Permit N^o 8876

PERMISSION IS HEREBY GIVEN TO:
Mercy Hospital
148 State St.
Portland, ME 04101

Location of project:
State St.
Portland, ME

PROJECT TITLE:
Mercy Hospital Oncology 4th Floor
OCCUPANCY CLASSIFICATION:
Hospital

To construct or alter the afore referenced building according to the plans hitherto filed with the Commissioner and now approved. No departure from such plans shall be made without prior approval in writing.

This permit will expire at midnight on March 31, 19 98.

This permit is issued under the provisions of Title 25, Chapter 317, Section 2448

. Nothing herein shall excuse the holder of this permit for the failure to comply with local ordinances, zoning laws, or other pertinent legal restrictions.

Dated the 1st day of October A.D. 19 97

FEE \$ 75.00

SPRINKLED

Alfred Skelton
Commissioner - Public Safety