

ELECTRICAL PERMIT

City of Portland, Maine

2016-06436
053-2007001

To the Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland's Electrical Ordinances, National Electrical Code and the following specifications:



Date: 9/21/2016

Permit #: 2016-06436

CBL#: 053-2007001

ADDRESS: 22 Bramhall Street, Portland Me 04103

METER MAKE/MODEL #: _____

CMP Work Order #: _____

OWNER: Maine Medical Center

TENANT: Maine Medical Center MGB 1 Admin Renovation

PHONE #: _____

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

							TOTAL EACH FEE	
OUTLETS:	160	Receptacles	41	Switches	1	Smoke Detector	0.20	40.40
FIXTURES:	12	Incandescent		Flourescent	80	Strips LED	0.20	18.40
SERVICES:	<input type="checkbox"/>	Overhead	<input type="checkbox"/>	Underground	<input type="checkbox"/>	TTL Amps <800	15.00	
					<input type="checkbox"/>	TTL Amps >800	25.00	
TEMPORARY SERVICE:	0	Overhead	<input checked="" type="checkbox"/>	Underground		TTL Amps	25.00	25.00
METERS:	0	(Number of)					1.00	
MOTORS:	0	(Number of)					2.00	
RESID/COMMER:	0	Electric Units					1.00	
HEATING:	0	Oil/Gas Units	<input checked="" type="checkbox"/>	Interior	<input type="checkbox"/>	Exterior	5.00	5.00
APPLIANCES:	0	Ranges	0	Cook Tops	0	Wall Ovens	2.00	
	0	Insta-hot	0	Water Heaters	0	Fans	2.00	
	0	Dryers	0	Disposals	0	Dishwasher	2.00	
	0	Compactors	0	Spa	0	Washing Machine	2.00	
		Others (denote)					2.00	
MISC. (# of):	0	Air Cond (Window)					3.00	
	0	Air Cond (Central)			0	Pools	10.00	
MINI SPLIT AC UNITS,	19	HVAC	0	EMS	0	Thermostat	5.00	95.00
CONDENSERS & ERVS	0	Signs					10.00	
	0	Alarms/Resident					5.00	
	0	Alarms/Commer					15.00	
	0	Heavy Duty (CRKT)					2.00	
	0	Alterations					5.00	
	0	Fire Repairs					15.00	
	0	Emergency Lights					1.00	
	0	Emer Generators					20.00	
	0	Circus/Carnival					25.00	
PANELS:	<input type="checkbox"/>	Service	<input checked="" type="checkbox"/>	Remote	<input type="checkbox"/>	Main	4.00	12.00
TRANSFORMER:	<input type="checkbox"/>	0-25 Kva					5.00	
	<input type="checkbox"/>	25-200 Kva					8.00	
	<input type="checkbox"/>	Over 200 Kva					10.00	

MINIMUM COMMERCIAL FEE: \$55.00 **MINIMUM RESIDENTIAL FEE: \$45.00**

Brief Description of work: _____ **TOTAL DUE: 165.80 + 195.80**

Demolition & renovation of approx. 5,600sqft of existing Medical Office space.

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CONTRACTOR INFORMATION:

Contractor Name: ES Boulos Company (Tom Driscoll) Master License #: MS6000-3111
 Address: 45 Bradley Drive Westbrook Maine 04092 Limited License #: _____
 Telephone & E Mail: (207) 272-6986 - jklimaytis@esboulos.com

Contractor Signature: JESSE KLIMAYTIS

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

CBL: 053-2007001

RECEIVED

SEP 21 2016

Dept. of Building Inspections
City of Portland Maine

TRANSACTION SUMMARY

TRANSACTION TYPE: SALE

PAYMENT ITEM	REFERENCE NUMBER	AMOUNT
NPS Convenience Fee		\$4.80
Electrical Permit	2016-06436	\$195.80
TOTAL:		\$200.60

CITY OF PORTLAND TREASURY

389 Congress Street
Portland,ME 04101
207-874-8853

Scott Marquis

Transaction Number:	2333550
Date Processed:	09/21/2016 13:02:05 EDT
Transaction Type:	Credit Card
MASTERCARD - Key Entered	CardNumber: *****4610
Authorization:	041885
Reference Number:	00736866
Electrical Permit	\$195.80
Total:	\$195.80

I agree to pay above total amount according to the card issuer agreement.

Signature: _____

Thank You

MUNICIPAL SERVICE FEE CITY OF PORTLAND
22 Free Street
Portland,ME 04101
877-590-5097

Scott Marquis

Transaction Number:	2333550
Date Processed:	09/21/2016 13:02:05 EDT
Transaction Type:	Credit Card
MASTERCARD - Key Entered	CardNumber: *****4610
Authorization:	041880
Reference Number:	00736865
Convenience Fee	\$4.80
Total:	\$4.80

I agree to pay above total amount according to the card issuer agreement & understand this non-refundable convenience fee will be charged to allow my payment via credit card.

Signature: _____

Thank You

Printed: 09/21/2016 13:02:47

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
 389 Congress Street
 Portland, Maine 04101

ELECTRICAL PERMITS RECEIPT

Application No: 2016-06436	Applicant: MAINE MEDICAL CENTER
Project Desc: Demolition and renovation of appro	Location: 22 BRAMHALL ST
CBL: 053 D007001	Electrician:
Invoice Date: 09/21/2016	License #: MS60003111

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$195.80		\$195.80		\$0.00	On Receipt

Previous Balance

\$0.00

Fee Description	Qty	Fee
Electrical Commercial	1	\$195.80
Services >800 amps - Underground	1	\$25.00
Panel Remote	3	\$12.00
Outlets Switches	41	\$8.20
Outlets Smoke Detector	1	\$0.20
Outlets Receptacles	160	\$32.00
Misc HVAC	19	\$95.00
Heating Interior	1	\$5.00
Fixtures Strips	80	\$16.00
Fixtures Incandescent	12	\$2.40
		\$195.80

Total Current Payments: \$195.80

Minimum Amount Due Now: \$0.00

CBL: 053 D007001 **Application No:** 2016-06436
Bill to: MAINE MEDICAL CENTER
 22 BRAMHALL ST
 PORTLAND, ME 04102

Invoice Date: 09/21/2016
Invoice No: 59994
Total Amt Due: \$0.00
Payment Amount: \$195.80

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.