Fire Alarm
Permit Application

If you or the property owner owes real estate or personal property taxes or user cl
within the City, payment arrangements must be made before permits of any

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

Address/Location of Construction: 22 Bramhall Street

Date: 02/20/15

Total Square Footage of Proposed Structure: 33,728 (New) / 7633 (Renovated)

Tax Assessor's Chart, Block & Lot
Chart# Block# Lot#

Applicant Name: E.S.Boulos (Jesse Klimaytis)
Address: 45 Bradley Drive
City, State & Zip: Westbrook, ME 04092

Telephone: 1-207-464-3706 (Office)
1-207-272-6986 (Cell)

Email: jklimaytis@esboulos.com

Lessee/Owner Name: Maine Medical Center
(if different than applicant)
Address: 22 Brahmall Street
City, State & Zip: Portland, ME 04102
Telephone & E-mail: Marshall Bartett 1-207-662-2013

Contractor Name:
(if different from Applicant)
Address:
City, State & Zip:
Telephone & E-mail:

Cost Of Work: $ 71,326

Fees: first $1000 = $25 fee + $11 for every other $1,000 of Cost of work

Total Fees : $ $25+(70,326/100) = $799

Current use (i.e. single family) Healthcare
If vacant, what was the previous use? _____
Proposed Specific use: Five (5) New Operating Rooms, Twenty (20) PACU Recovery Beds & Supporting Service
Is property part of a subdivision? ___ If yes, please name _____
Project description:

Who should we contact when the permit is ready: Jesse Klimaytis

Address: 45 Bradley Drive

City, State & Zip: Westbrook, ME 04092

E-mail Address: jklimaytis@esboulos.com

Telephone: 1-207-272-6986

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permitdenial.

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 www.portlandmaine.gov, 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: See Digital Signature Above **Date:** 1/30/2015

This is not a permit; you may not commence ANY work until the permit is issued.