

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED

Permit Number: 051740
DEC 28 2005

CITY OF PORTLAND

This is to certify that MAINE MEDICAL CENTER William Berry & Sons, Inc.

has permission to FOUNDATION ONLY CONNECTED PERMIT #04145

AT 2 BRAMHALL ST L 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 when permission procured before this building or part thereof is leased or closed-in. 4 HOUR 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. Greg Cass 12-7-05

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature]
Director - Building & Inspection Services 12/16/05

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|--|----------------------------|--|
| Permit No: 05-1740 | Issue Date: DEC 28 2005 | CBL: 053 D007001 |
| Location of Construction: 2 BRAMHALL ST | | Owner Name: MAINE MEDICAL CENTER |
| Business Name: | | Contractor Name: William Berry & Sons, Inc. |
| Lessee/Buyer's Name | Phone: | Permit Type: Foundation Only/Commercial |

| | |
|-------------------------|--|
| Past Use: Commercial | Proposed Use: Commercial/ Build new parking garage, connector bridge & helipad FOUNDATION ONLY CONNECTED W/ PERMIT#04 1451 |
|-------------------------|--|

| | | |
|--|--|--------------------|
| Permit Fee: | Cost of Work: \$0.00 | CEO District: 2 |
| FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: FOUNDATION Only 12/16/05 Signature: Greg Cass | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | | |

| | |
|-----------------------------|---------------------------------|
| Permit Taken By: Idobson | Date Applied For: 12/01/2005 |
|-----------------------------|---------------------------------|

| Zoning Approval | | |
|---|--|---|
| Special Zone or Reviews <input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>panel 13 zone C</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i>#200A-0003</i> Maj <input checked="" type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK with conditions</i> Date: <i>12/1/05</i> | 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 checked="" 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: |

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 |

TRO

LETTER OF TRANSMITTAL

We are transmitting the following:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Prints | <input type="checkbox"/> For your use |
| <input type="checkbox"/> Specifications | <input checked="" type="checkbox"/> As requested |
| <input type="checkbox"/> Proposal | <input type="checkbox"/> For review & comment |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> Other |

RE:

Maine Medical Center
Parking Garage

Date:

August 10, 2005

Comm. #:

4678

To**Attention****Address****No.****Sent VIA**

| | | | | |
|------------------------------|----------------|---|---|--------|
| William A. Berry & Son, Inc. | Dennis Dickson | 100 Conifer Hill Drive Danvers, MA 01923 | 1 | Fed-Ex |
|------------------------------|----------------|---|---|--------|

Comments:

Dennis,
Enclosed, please find elevations and plans for the Garage Redesign for Mike Nugent's use. Also included is a signed letter from Keith Davis to Mike Nugent requesting Package 'D' – Garage Earth Retention from 04/15/2004, be withdrawn from the application for building permit and be replaced by Schnabel's documents. Please call with any questions.

Thanks,
John.

Copy to:

Rashid Ashraf (transmittal and letter only)
Keith Davis (transmittal and letter only)

Signed:

John Viapiano

If enclosures are not as noted, please notify us at once.

4678TR_050810_DD_Garage Dwgs.doc

ARCHITECTURE PLANNING ENGINEERING INTERIOR DESIGN

TRO / The Ritchie Organization

80 Bridge Street, Newton, MA 02458-1134

T 617.969.9400 F 617.332.4669



TRO

ARCHITECTURE PLANNING ENGINEERING INTERIOR DESIGN

August 11, 2005
Comm. No. 4678

Housing & Neighborhood Services Division
Planning & Development Department
City Hall Rom 315
389 Congress Street
Portland, Maine 04101
Attn: Mike Nugent

RE: Maine Medical Center
Parking Garage

Dear Mr. Nugent,

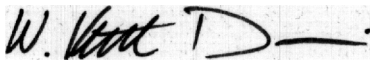
Please accept this letter as our formal request that the documents titled "Maine Medical Center, Package 'D' - Garage Earth Retention," dated April 15, 2004 prepared by The Ritchie Organization, Newton, MA be withdrawn from the application for building permit made on or about 08/12/2005.

The design for the earth retention system for the proposed parking garage will be performed by Schnabel Foundation Company, who will be submitting the appropriate documents to your office.

Please contact me if you have any questions or concerns regarding this request.

Very truly yours,

TRO/ THE RITCHIE ORGANIZATION



W. Keith Davis, AIA
Principal/Vice President of Architecture

The Ritchie Organization
80 Bridge Street
Newton, MA
02458
T 617.969.9400
F 617.332.4669
www.troarch.com



Commercial Building Permit Application

If you or the property owner owes real estate or personal property taxes or other charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

| | | |
|--|--|--|
| Location/Address of Construction: 22 Bramhall Street | | |
| Total Square Footage of Proposed Structure 82,321 SF | Square Footage of Lot 270,080 SF | |
| Tax Assessor's Chart, Block & Lot Chart# 053 Block# D Lot# 007 | Owner: Maine Medical Center, Hank Dunn | Telephone: 207.871.6799 |
| Lessee/Buyer's Name (If Applicable) | Applicant name, address & telephone: Maine Medical Center 22 Bramhall Street Portland, ME 04102-375 | Cost Of Work: \$ <u>15,976,000</u> Fee: \$ 143,805.00 |
| Current Specific use: <u>Vacant Land/S-2 Storage - Existing Parking Garage</u> | | |
| Proposed Specific use: <u>S-2 Storage - Parking Garage, H-2 Helipad, 1-2 Institutional- Bridge & Connectors</u> | | |
| Project description: Demolition of New England Rehab building and House 1 & 2, Construction of a new parking garage, connector, bridge and helipad. | | |
| Contractor's name, address & telephone William A. Berry & Son, Inc., 99 Conifer Hill Drive, Danvers, MA 01923, (978) 774-1057 | | |
| Who should we contact when the permit is ready: <u>Jason E. Lansberry</u> | | |
| Mailing address: William A. Berry & Son, Inc. c/o Maine Medical Center 22 Bramhall Street Portland, ME 04102-3175 | | Phone: 20 <u>223.6026</u> |

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

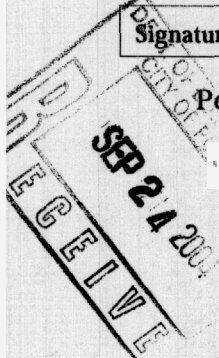
At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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 of applicant: <u>Michael J. V...</u> | Date: <u>9/23/04</u> |
|--|----------------------|

Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.



City of Portland, Maine - Building or Use Permit Application

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

| | | |
|-----------------------|-------------|---------------------|
| Permit No: 04-1451 | Issue Date: | CBL: 053 D007001 |
|-----------------------|-------------|---------------------|

| | | | |
|--|--|--|----------------------------------|
| Location of Construction: 2 Bramhall St | Owner Name: Maine Medical Center | Owner Address: 22 Bramhall St | Phone: |
| Business Name: | Contractor Name: William Berry & Sons, Inc. | Contractor Address: 99 Conifer Hill Drive Danvers | Phone: 2032236026 |
| Lessee/Buyer's Name | Phone: | Permit Type: Additions - Commercial | Zone: Contract Zone C-4 |
| Past Use: Commercial | Proposed Use: Commercial/ Demo New England Rehab & House/ Build new parking garage, connector bridge & helipad. | Permit Fee: \$143,880.00 | Cost of Work: \$15,976,000.00 |
| Proposed Project Description: Demolition & construct new parking garage / connector bridge/ helipad | | CEO District: 2 | INSPECTION Use Group: Type: |
| | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> h i e d | 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: Idobson | Date Applied For: 09/28/2004 | Zoning Approval | | |
| <p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p> | <p>Special Zone or Review</p> <p><input type="checkbox"/> Shoreland <i>N/A</i></p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone <i>Panel 13 Zone C</i></p> <p><input type="checkbox"/> Subdivision</p> <p>Site Plan <i>2004-0003</i></p> <p>Major <input checked="" type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date:</p> | <p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p> | <p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied <i>[Signature]</i></p> <p>Date:</p> | |

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 |

Applicant: ME MEDICAL Center Date: 12/1/05

Address: 22 Bramhall St C-B-L: 053-D-007

CHECK-LIST AGAINST ZONING ORDINANCE

Date - Existing Dev.

#05-1740 connected with

Zone Location - C-41-Contract Zone

#04-1457

Interior or corner lot -

Proposed Use/Work - Foundation Permit only for new parking garage - connector bridge & helipad

Sewage Disposal - City

Lot Street Frontage -

Front Yard - Parking garage along Congress St Allowed to be 0' setback as shown - other yards

Rear Yard -

Are more than 25' or

Side Yard -

helicopter Landing Pad only - No setbacks require Doesn't have to meet fencing req of 14-327(4)

Projections -

Width of Lot -

Height - Parking garage - 70' MAX - not approved yet since this permit is for foundation or

Lot Area -

13. MMC agrees to divest itself of ownership of the following existing structures owned by MMC according to the following schedule:

Arc (per F

Prior to the issuance of a certificate of occupancy for the Charles Street Addition:

Off-street

15 Crescent Street (Map 53, Block F, Lot 6)

25 Crescent Street (Map 53, Block E, Lot 5)

Loading B

25 Ellsworth Street (Map 53, Block H, Lot 2)

32 Ellsworth Street (Map 54, Block C, Lot 5)

Site Plan -

20 Hill Street (Map 54, Block C, Lot 1)

Shoreland

No later than January 1, 2010 or the issuance of a certificate of occupancy for any of the future expansions described in Section 6(b) above, whichever is earlier:

Flood Plain

19 Bramhall Street (Map 63, Block A, Lot 4)

23 Bramhall Street (Map 63, Block A, Lot 3)

25 Bramhall Street (Map 63, Block A, Lot 2)

31 Bramhall Street (Map 63, Block A, Lot 1)

will need to be confirmed on the next permit