

02-0597

All Purpose Building Permit Application

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.

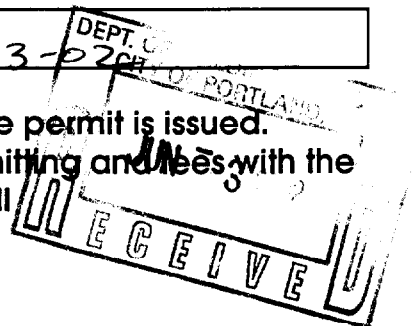
Location/Address of Construction: <u>22 BRAMHALL ST. Portland ME.</u>		
Total Square Footage of Proposed Structure <u>16000</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>053</u> Block# <u>D</u> Lot# <u>009</u>	Owner: <u>MAINE Medical Center</u>	Telephone: <u>871-2447</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>LANGFORD FLOW</u> <u>248 WARREN AVE.</u> <u>797-5141</u> <u>Portland ME. 04104</u>	Cost Of Work: \$ <u>348,000</u> Fee: \$ <u>2,459.00</u>
Current use: <u>PATIENT'S ROOMS</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>SAME AS IS</u>		
Project description: <u>Interior Reno PAINT Patch 5th Floor of Richards wing.</u>		
Contractor's name, address & telephone: <u>Langford Flow, 248 Warren Ave. Portland</u> <u>797-5141</u>		
Who should we contact when the permit is ready: <u>Gus Dougherty</u> <u>cell</u>		
Mailing address: _____		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: _____		

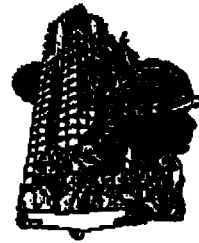
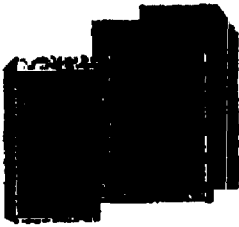
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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>[Signature]</u>	Date: <u>6-3-02</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall





**CITY OF PORTLAND
BUILDING CODE CERTIFICATE**

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

FROM: Winton Scott Architects P.A.

RE: Certificate of Design

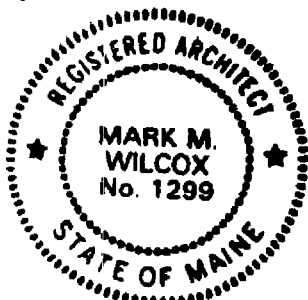
DATE: May 30, 2002

These plans and/or specifications covering construction work on:

Richards Wing R5 Renovations
Maine Medical Center

Have been designed and drawn up by the undersigned, a Maine registered architect/engineer according to the BOCA National Building Code/1996 Thirteenth Edition, and local amendments.

(SEAL)



Signature [Handwritten Signature]

Title Principal

Firm Winton Scott Architects

Address 5 Milk St. Portland, ME 04101

As per Maine State Law:

\$50,000.00 or more in new construction, repair expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.



City of Portland, Maine

ACCESSIBILITY CERTIFICATE

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

FROM: Winton Scott Architects P.A.

RE: Certificate of Design, HANDICAP ACCESSIBILITY

DATE: May 30, 2002

These plans and/or specifications covering construction work on:

Richards Wing R5 Renovations
Maine Medical Center

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 Mark M. Wilcox

Title PRINCIPAL

Firm Winton Scott Architects

Address 5 Milk St. Portland, ME 04101