

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, if Any,
Attached

BUILDING INSPECTION PERMIT

PERMIT ISSUED
Permit Number: 061060
AUG - 8 2006
CITY OF PORTLAND

This is to certify that MMC REALTY CORP / Lawford & Low, Inc

has permission to Commercial / Office - Tenant Set-up

AT 887 CONGRESS ST

053 1001011

provided that the person or persons who apply for and accept this permit shall comply with all of the provisions of the Statutes of the State 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.

Classification of inspection must be given and when permission procedure is complete this building or part thereof is closed or services closed-in. 4 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Michael J. Coughlin
Director - Building & Inspection Services

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: 06-060	Issue Date: PERMIT ISSUED ST AUG - 8 2006	CBL: 953 I001011
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Location of Construction: 887 CONGRESS ST	Owner Name: MMC REALTY CORP	Owner Address: 22 BRAMBALL ST	Phone:
Business Name:	Contractor Name: Langford & Low, Inc.	Contractor Address: PO Box 662 Portland	Phone: 2077975141
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: C19

Past Use: Commercial/ Office <i>MMC Medical Building doctors' offices.</i>	Proposed Use: Commercial/ Office - Tenant Fit-up <i>Medical - Doctors' offices.</i>	Permit Fee: \$450.00	Cost of Work: \$43,000.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: <i>B</i> Type: <i>20</i> <i>8/11/06</i>	

Proposed Project Description: Commercial/ Office - Tenant Fit-up <i>Third Floor</i>	Signature: <i>Greg Cass</i>	Signature: <i>[Signature]</i>
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: 07/19/2006	Zoning Approval	
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<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 Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/></p> <p><i>See w/conditions</i> Date: <i>7/25/06</i> <i>JEM</i></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>ABM</i></p> <p>Date:</p>
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 06-1060	Date Applied For: 07/19/2006	CBL: 053 1001011
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Location of Construction: 887 CONGRESS ST	Owner Name: MMC REALTY CORP	Owner Address: 22 BRAMHALL ST	Phone:
Business Name:	Contractor Name: Langford & Low, Inc.	Contractor Address: PO Box 662 Portland	Phone (207) 797-5141
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial/ Office - Tenant Fit-up (doctors' offices - MMC Medical Building)	Proposed Project Description: Commercial/ Office - Tenant Fit-up (third floor)
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 07/25/2006

Note: **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 08/01/2006

Note: **Ok to Issue:**

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 07/27/2006

Note: **Ok to Issue:**

- 1) Application requires State Fire Marshal approval.
- 2) All building construction shall comply with NFPA 101



General Building Permit Application

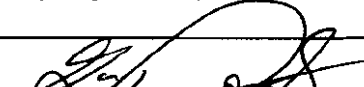
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

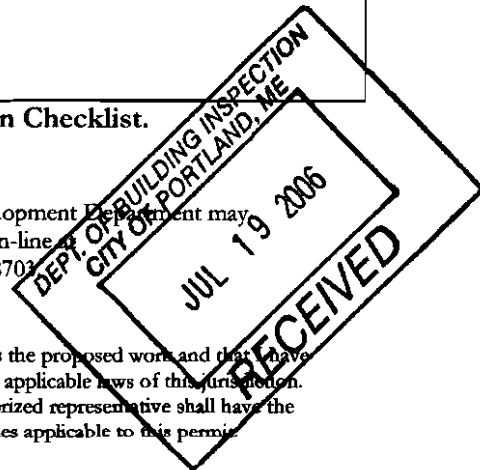
Location/Address of Construction: <u>887 Congress Street 3rd Flr.</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>53 I 1</u>	Owner: <u>MAINE Medical Center</u> <u>335 Brighton Ave</u> <u>Portland, Me 04101</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>LANGFORD + LOW, INC.</u> <u>248 WARREN AVE.</u> <u>Portland, ME 04104</u> <u>797-5141</u>	Cost Of Work: \$ <u>43,000</u> Fee: \$ <u>450⁰⁰/00</u> C of O Fee: \$ _____
Current Specific use: <u>Med OFFICES</u> If vacant, what was the previous use? <u>Med. OFFICES</u> Proposed Specific use: <u>Med. OFFICES</u>		
Project description: <u>Relocate a few walls ; Add some additional units.</u> <u>PAINT ; PATCH.</u>		
Contractor's name, address & telephone: <u>LANGFORD + LOW, 248 WARREN AVE, PORTLAND ME.</u>		
Who should we contact when the permit is ready: <u>GUS DOUGHERTY.</u> Mailing address: <u>248 WARREN AVE.</u> Phone: <u>797-5141</u> <u>Portland, ME 04104</u>		

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

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 visit us on-line at www.portlandmaine.gov, 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: 	Date: <u>7-17-06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

N/A Footing/Building Location Inspection: Prior to pouring concrete
N/A Re-Bar Schedule Inspection: Prior to pouring concrete
N/A Foundation Inspection: Prior to placing ANY backfill
Call Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
Call Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

_____ If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

Signature of Applicant/Designee

Date

Signature of Inspections Official

Date

CBL 0531001 Building Permit #:

061060



CITY OF PORTLAND, MAINE
Department of Building Inspections

7.19 2006

Received from Langford's House

Location of Work 887 Congress St

Cost of Construction \$ 413000

Permit Fee \$ _____

Building (IL) Plumbing (IS) Electrical (I2) Site Plan (U2)

Other _____

CBL: 53 I 1

Check #: 30575

Total Collected \$ 450⁰⁰/₁₀₀

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

M.M.C.

CONGRESS ST. MEDICAL BUILDING

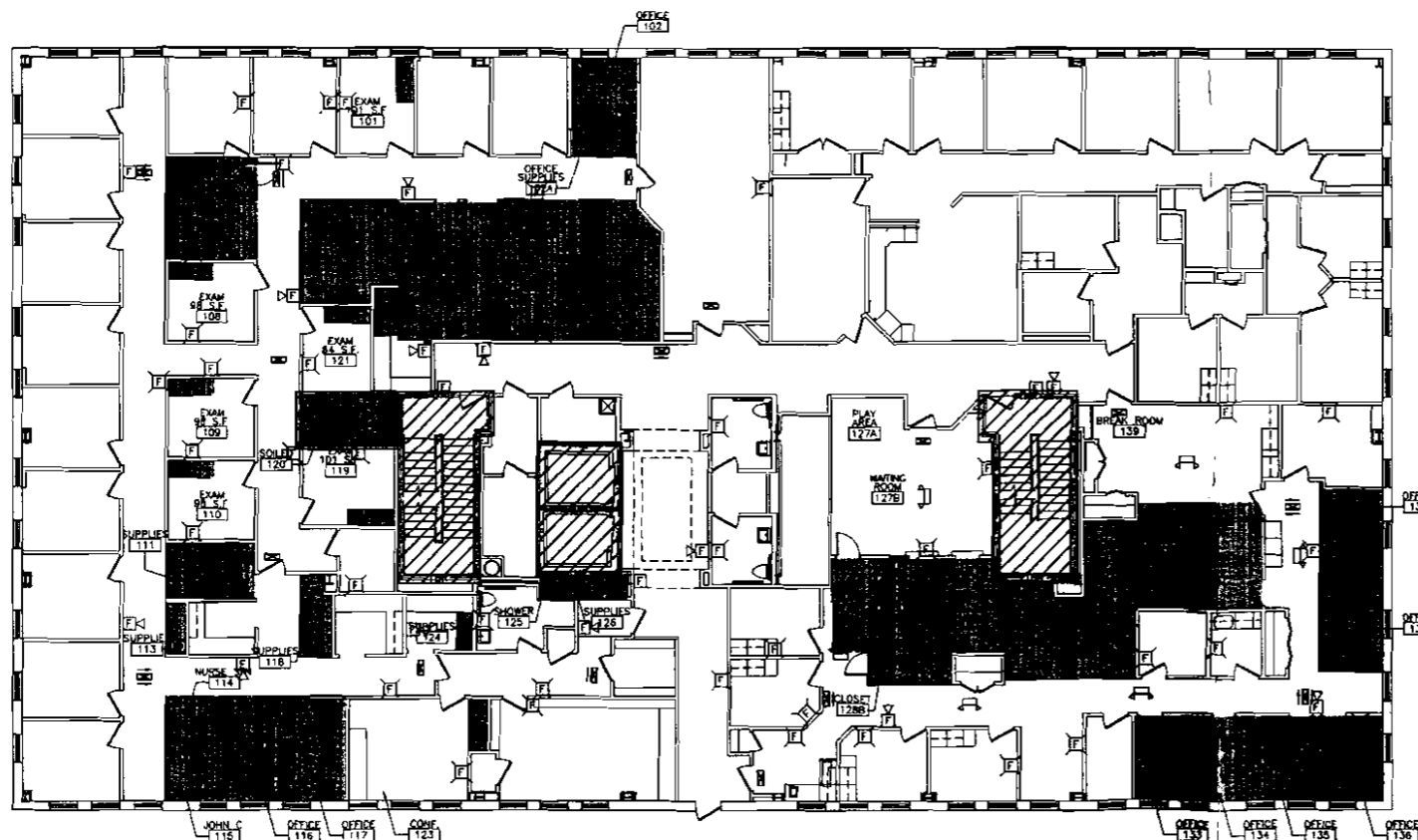
3RD FLOOR RENOVATION

PORTLAND, MAINE

DRAWING LIST

ARCHITECTURAL

- A-100 COVER PAGE & LIFE SAFETY PLAN
- A-101 THIRD FLOOR DEMOLITION & FLOOR PLAN



NOTE:

1. BUILDING IS FULLY SPRINKLED.
2. EGRESS LIGHTING SHALL BE PROVIDED IN ALL CORRIDORS AND PASSAGEWAYS LEADING TO EXITS. A MINIMUM AVERAGE OF 1 FOOT-CANDLE IS TO BE PROVIDED. THE SOURCE OF ILLUMINATION NEEDS TO BE PROVIDED FOR 90 MINUTES AND CAN BE EITHER OF THE FOLLOWING:
 - A. GENERATOR BACKED-UP LIGHT FIXTURES
 - B. BATTERY BALLAST LIGHT FIXTURES
 - C. INDIVIDUAL BATTERY UNIT WITH UNIT MONITOR OR REMOTE LAMPS.

LEGEND:

- 1 HOUR FIRE PROTECTION
- AREA OF WORK

SYMBOL LEGEND

- EXIT SIGN, CEILING MOUNTED
ARROW INDICATES EGRESS DIRECTION
SHADING INDICATES SIGN FACE
- EXIT SIGN, WALL MOUNTED
SHADING INDICATES SIGN FACE
- DUAL HEAD EMERGENCY LIGHT BATTERY PACK
TO - TIME DELAY RESET
- FIRE ALARM AUDIBLE/VISIBLE
NOTIFICATION APPLIANCE (GENERAL EVACUATION)
- FIRE ALARM VISIBLE ONLY NOTIFICATION APPLIANCE

GENERAL NOTES:

1. FIELD VERIFY ALL DIMENSIONS AND LAYOUT PRIOR TO PROCEEDING WITH WORK. NOTIFY ARCHITECT IN WRITING OF ANY DISCREPANCIES OR INCONSISTENCIES. FAILURE TO REPORT ANY DISCREPANCIES WITHIN THESE CONSTRUCTION DOCUMENTS TO THE ARCHITECT WILL NOT BE GROUNDS FOR ADDITIONAL COST OR CHANGE ORDERS.
2. "PROVIDE" MEANS "FURNISH AND INSTALL".
3. THE CONTRACTOR SHALL BE RESPONSIBLE FOR PROVIDING ALL MATERIALS (UNLESS NOTED OTHERWISE), AND WORKMANSHIP IN ACCORDANCE WITH FEDERAL, STATE, CITY AND LOCAL BUILDING CODES AND THEIR REQUIREMENTS.
4. THE CONTRACTOR AND ALL TRADES SHALL NOTE REQUIREMENTS OF "GENERAL NOTES" ON ALL SHEETS.

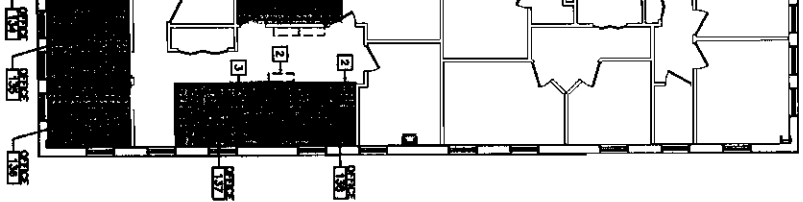
SYMBOL LEGEND

- BUILDING SECTION
- WALL SECTION
- DETAIL
- EXTERIOR ELEVATION
- INTERIOR ELEVATION
- LEVEL LINE
- CIRCLE NOTE
- WINDOW TAG
- PARTITION TAG
- DOOR TAG
- ROOM NAME
- ROOM NUMBER
- COLUMN CENTER AND CENTER LINE
- BACKER ROD AND SEALANT

REV.	DESCRIPTION	DATE
ISSUED FOR PERMIT		
7-11-06		
CURRENT ISSUE STATUS:		
PROJECT NORTH		
SMRT ARCHITECTURE ENGINEERING PLANNING		
141 Park Avenue/7th Fl., Box #10 Portland, Maine 04104 Tel. (207) 775-8888 Fax. (207) 775-8200		
M.M.C.-887 CONGRESS ST. 3RD FLOOR RENOVATION PORTLAND, ME		
PROJECT:		
COVER PAGE & LIFE SAFETY PLAN		
SHEET TITLE:		
SCALE: 1/8"=1'-0"	DATE:	
PROJECT MANAGER: CLP	GRAPHIC SCALE: 0"	
JOB CAP/DRAWN: ART		
A/E OF RECORD: CLP	SHEET No.	
SMRT CAD FILE: 08110		AE100
PROJECT No. 06110		

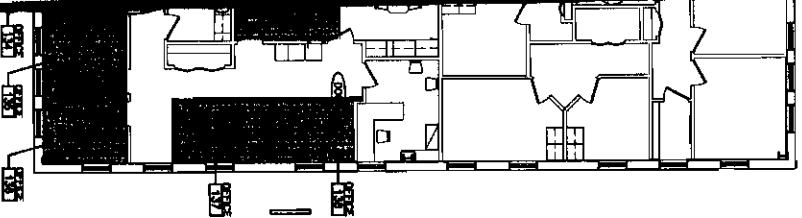
DEMOLITION KEY NOTES:

- 1 REMOVE PARTITION COMPLETE.
- 2 REMOVE EXISTING CASEWORK COMPLETE FOR POTENTIAL RELOCATION.
- 3 REMOVE DOOR, FRAME AND HARDWARE COMPLETE FOR POTENTIAL RELOCATION.
- 4 REMOVE PORTION OF PARTITION FOR INSTALLATION OF DOOR. COORDINATE EXTENTS WITH FINESSE TO REPAIR NETWORK DOOR SCHEDULE.
- 5 REMOVE EXISTING PLUMBING FIXTURE. CAP-OFF PIPING AT WALL/FLOOR.
- 6 REMOVE PORTION OF PARTITION FOR INSTALLATION OF TRANSOMION WINDOW. COORDINATE EXTENTS WITH FINESSE TO REPAIR.
- 7 REMOVE EXISTING EXT SIGN FOR POTENTIAL RELOCATION.



PLAN KEY NOTES:

- 1 INSTALL LOCK ON EXISTING SUPPLY DOOR.
- 2 INSTALL NEW UPPER CASEWORK ONLY.
- 3 INSTALL NEW LOWER CASEWORK ONLY.
- 4 INSTALL NEW EXHA ROOF CASEWORK, INCLUDING SINK.
- 5 INSTALL NEW SHOWER DOOR.
- 6 PROVIDE 1 HOUR RATING ENCLOSURE FOR NEW SCALED UTILITY ROO. REMOVE DOOR & FRAME AS WELL.
- 7 INSTALL NEW FIXED INTERIOR WINDOW.



GENERAL DEMOLITION NOTES:

- 1. COORDINATE EXTENT OF DEMOLITION WITH LOCATION OF EXISTING CASEWORK AND NETWORKS WITH FINESSE TO REPAIR OR FINESSE NOTED AS EXISTING TO SIGN.
- 2. ANY WALL REMOVAL OR SURFACE REMOVAL REPAIRS OF NEW WORK ON DEMOLITION SHALL BE PATCHED AND FINESSED CONSISTENTLY TO THE NEAREST CORNER UNLESS NOTED OTHERWISE. COORDINATE WITH FINESSE SCHEDULES, NETWORK SCHEDULES AND THE FINESSE SCHEDULES NOTED OTHERWISE.
- 3. PROTECT ALL FINESSE, MATERIALS AND EQUIPMENT NOTED AS FINESSE TO REPAIR OR FINESSE NOTED AS EXISTING TO REPAIR. REPLACE ALL FINESSE, MATERIALS AND EQUIPMENT DAMAGED DURING CONSTRUCTION.
- 4. FOR EXTENTS OF COLLAR AND REPAIRS AND ADJUSTMENTS REFER TO SHEET A577.
- 5. DIMENSIONS NOTICED & ARE EXISTING COMMON DIMENSIONS TO BE VERIFIED IN FIELD.

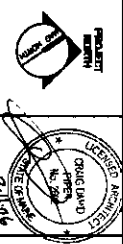
GENERAL NOTES:

- 1. RELOCATE SPRINKLERS AS REQUIRED.
- 2. REMOVE AND REPAIR EXISTING FINISH AS NOTED.
- 3. CLEAN ENTIRE SPACE.

REV.	DESCRIPTION	DATE

**ISSUED FOR PERMIT
7-11-06**

CURRENT ISSUE STATUS



ARCHITECTURAL ENGINEERING PLANNING
SMITH
144 New Street, P.O. Box 616
Portland, Maine 04101
Tel: 603/775-2444
Tel: 603/775-2446

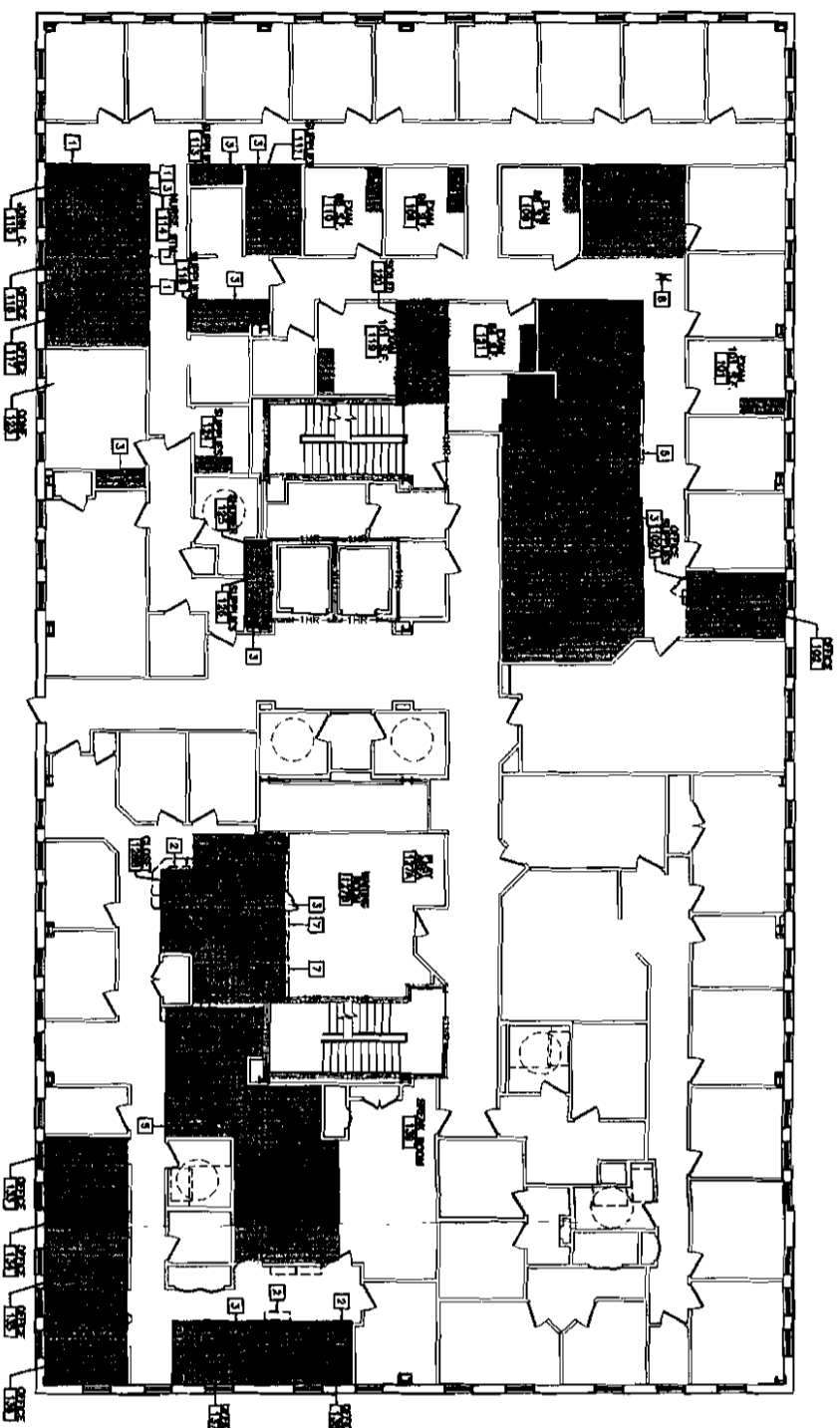
**M.M.C.-887 CONGRESS ST.
3RD FLOOR RENOVATION**
PORTLAND, ME

PROJECT:

**DEMOLITION &
FLOOR PLAN**

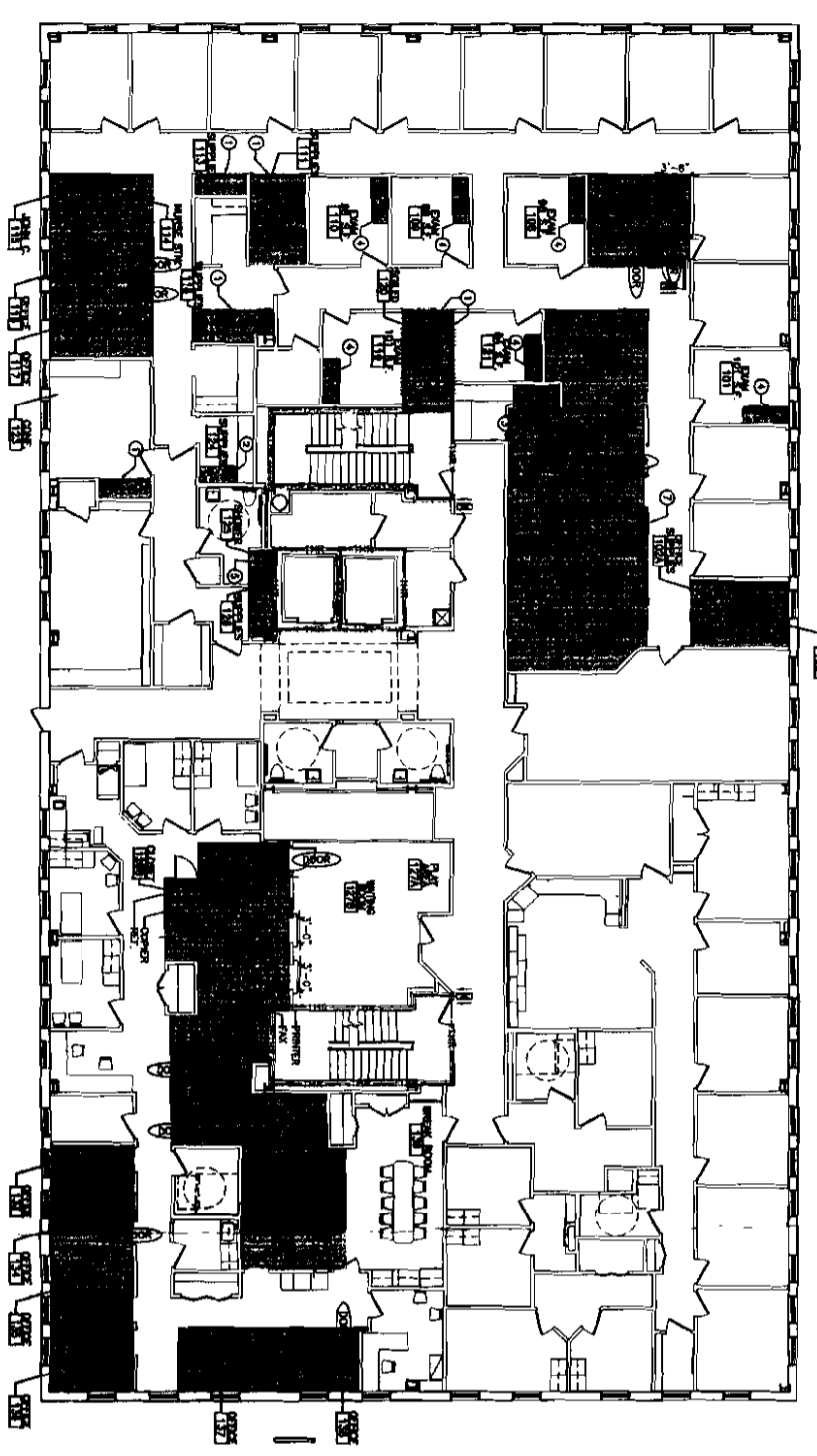
SHEET TITLE:

SCALE	1/8"=1'-0"	DATE	
PROJECT MANAGER:	GPJ	GRAPHIC SCALE:	1" =
JOB CAD/DRWING:	AMT	A/E OF RECORD:	GPJ
SHEET CAD FILE:	08110	SHEET NO.:	AE101
PROJECT NO.:	08110		



- DEMOLITION KEY NOTES:**
- 1 REMOVE PARTITION COMPLETE
 - 2 REMOVE EXISTING CEILING COMPLETE FOR POTENTIAL RELOCATION
 - 3 REMOVE DOOR, FRAME AND HINGES COMPLETE FOR POTENTIAL RELOCATION
 - 4 REMOVE PORTION OF PARTITION FOR RELOCATION OF DOOR DOOR SCHEDULE
 - 5 REMOVE EXISTING PLUMBING FINISH, CAP-OFF FROM AT WALL/CEILING
 - 6 REMOVE PORTION OF PARTITION FOR RELOCATION OF TRASH ROOM REMOVE EXISTING CEILING WITH FINISHES TO REMAIN
 - 7 REMOVE EXISTING DOOR FOR POTENTIAL RELOCATION

J1
DEMOLITION PLAN



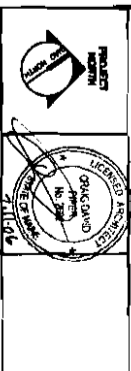
- PLAN KEY NOTES:**
- 1 INSTALL LOCK ON EXISTING SLIPWAY DOOR
 - 2 INSTALL NEW LATCH OPERATOR ONLY
 - 3 INSTALL NEW LATCH OPERATOR ONLY
 - 4 INSTALL NEW DOOR FROM OPERATOR, INCLUDING SILL
 - 5 INSTALL NEW SPOKEN DOOR
 - 6 PROVIDE 1 HOUR RATING ENCLOSURE FOR NEW SPOKEN UNITARY ROOF ACCESS DOOR & FRAME AS SHOWN
 - 7 INSTALL NEW FIBER WINDOW WINDOW

A1
FLOOR PLAN

- GENERAL DEMOLITION NOTES:**
1. COMPASSION EARTH OR BOMBED AREA, LANDSCAPE OR PLANTINGS DESCRIBED ON PLAN AND WITH LOCATIONS OF FINISHES NOTED AS EXISTING TO REMAIN.
 2. ALL WALL, PARTITION OR SERVICE PARTS REMOVED BECAUSE OF NEW WORK OR DEMOLITION SHALL BE REMOVED AND REUSED OR RECYCLED. ALL OTHER MATERIALS SHALL BE RECYCLED OR REUSED. CONTRACTOR SHALL OBTAIN NECESSARY PERMITS AND APPROVALS FROM ALL AFFECTED AGENCIES AND THE AFFECTED JURISDICTIONS.
 3. PROTECT ALL FINISHES, WINDOWS AND EQUIPMENT NOTED AS EXISTING TO REMAIN. CONTRACTOR SHALL BE RESPONSIBLE TO MAINTAIN PROTECT EXISTING FINISHES AND EQUIPMENT THROUGHOUT CONSTRUCTION.
 4. FOR DOORS OF EQUAL OR EQUAL AND ALTERNATE TO REMAIN, CONTRACTOR SHALL BE RESPONSIBLE TO MAINTAIN PROTECT EXISTING FINISHES AND EQUIPMENT THROUGHOUT CONSTRUCTION.
 5. DEMOLITION WASTE SHALL BE REMOVED FROM THE SITE TO BE RECYCLED IN FIELD.

- GENERAL NOTES:**
1. SEALOFF SPREADERS AS SHOWN.
 2. REMOVE AND REPAIR EXISTING FROM AS NOTED.
 3. CLEAN DRAIN SPACE.

ISSUED FOR PERMIT
7-11-06



SM RT
ARCHITECTURE DESIGNING PLANNING
100 NEW BRIDGE ST. 10TH FLOOR
PORTLAND, ME 04101-2000
TEL: 603.775.5500
FAX: 603.775.5501

**M.C.-887 CONGRESS ST.
3RD FLOOR RENOVATION**
PORTLAND, ME

SHEET TITLE	1/8"=1'-0"	DATE	
PROJECT MANAGER	CLP	GRAPHIC SCALE	
DESIGNER	ANT		
DATE OF RECORD	CLP	SHEET NO.	AE101
DATE CAD FILE	08/10		
PROJECT NO.	08110		