

**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: 070085

FEB 2 2007

CITY OF PORTLAND

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

has permission to Re-work existing interior water systems and sinks, toilets, new flooring, new paint

AT 887 CONGRESS ST

053 I00101

provided that the person or persons who apply for or 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.

Notification of inspection must be given and when permission is procured before this building or part thereof is leased or closed-in. 24 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. Craig Cass

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

*[Signature]* 2/2/07  
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: 07-0085	Issue Date:	CBL: 053 I001011
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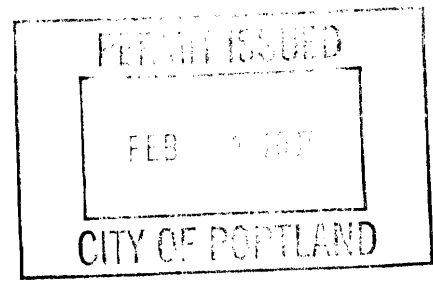
Location of Construction: 887 CONGRESS ST	Owner Name: MMC REALTY CORP	Owner Address: 22 BRAMHALL ST	Phone:
Business Name:	Contractor Name: Langford & Low, Inc.	Contractor Address: PO Box 662 Portland	Phone: 2077975141
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: C18

Past Use: Commercial - Office	Proposed Use: Commercial - Office 2nd Floor Suite 200- Re-work existing interior wall systems add sinks, outlets, new flooring, new paint	Permit Fee: \$1,120.00	Cost of Work: \$110,000.00	CEO District: 2	Contract Zone
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 2B IBC 2003		

Proposed Project Description: Re-work existing interior wall systems add sinks, outlets, new flooring, new paint	Signature: <i>Craig Cross</i>	Signature: <i>[Handwritten 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: ldobson	Date Applied For: 01/26/2007	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>01/29/07</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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:
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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



# 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 2<sup>ND</sup> FLOOR</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>33</u> <u>I</u> <u>1</u>	Owner: <u>MAINE MEDICAL CENTER</u> <u>335 BRIGHTON AVE</u> <u>PORTLAND, ME. 04101</u>	Telephone: <u>662-8065</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>LANGFORD + LEW, INC.</u> <u>248 WARREN AVE</u> <u>PORTLAND, ME 04101</u>	Cost Of Work: \$ <u>110,000</u> Fee: \$ _____ C of O Fee: \$ _____
Current Specific use: <u>OFFICE SPACE.</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>OFFICE SPACE.</u>		
Project description: <u>REWORK EXISTING INTERIOR WALL SYSTEMS.</u> <u>ADD SINKS, OUTLETS</u> <u>NEW FLOORING</u> <u>NEW PAINT.</u> <u>2nd Floor Suite 200</u>		
Contractor's name, address & telephone: <u>LANGFORD + LEW, 248 WARREN AVE PORTLAND, ME</u> <u>04101, 797-5141</u>		
Who should we contact when the permit is ready: <u>GUS DOUGHTY</u> Mailing address: _____ Phone: <u>797-5141</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 or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://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 of applicant: \_\_\_\_\_

Date: 1-24-07

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



## Certificate of Design

Date:

1/19/07

From:

PATRICK COSTIN  
HARRIMAN ASSOCIATES

These plans and / or specifications covering construction work on:

887 CONGRESS STREET OFFICE RENOVATION

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the *2003 International Building Code* and local amendments.



(SEAL)

Signature:

[Handwritten Signature]

Title:

PRINCIPAL

Firm:

HARRIMAN ASSOCIATES

Address:

66 PEARL ST, SUITE 301

PORTLAND, ME 04101

Phone:

207 775-0053

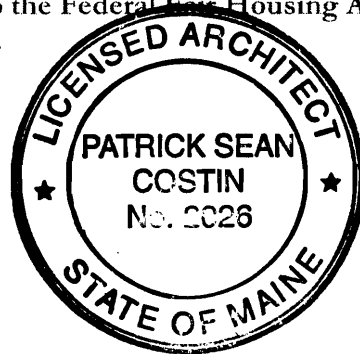
For more information or to download this form and other permit applications visit the Inspections Division on our website at [www.portlandmaine.gov](http://www.portlandmaine.gov)



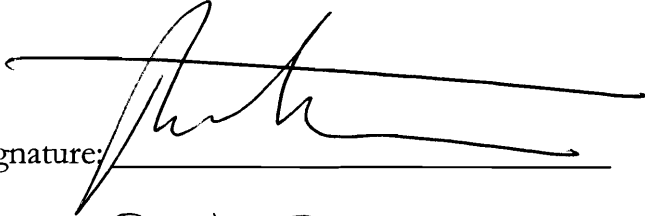
# Accessibility Building Code Certificate

**Designer:** HARRIMAN ASSOCIATES - PATRICK COSTIN  
**Address of Project:** 887 CONGRESS ST, PORTLAND ME  
**Nature of Project:** OFFICE RENOVATION  
 \_\_\_\_\_  
 \_\_\_\_\_

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act. Residential Buildings with 4 units or more must conform to the Federal Fair Housing Accessibility Standards. Please provide proof of compliance if applicable.



(SEAL)

Signature:   
 Title: PRINCIPAL  
 Firm: HARRIMAN ASSOCIATES  
 Address: 600 PEARL ST, SUITE 301  
PORTLAND, ME 04101  
 Phone: 207 775 - 0053

For more information or to download this form and other permit applications visit the Inspections Division on our website at [www.portlandmaine.gov](http://www.portlandmaine.gov)

**City of Portland, Maine - Building or Use Permit**

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

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<b>Proposed Use:</b> Commercial - Office 2nd Floor Suite 200- Re-work existing interior wall systems add sinks, outlets, new flooring, new paint	<b>Proposed Project Description:</b> Re-work existing interior wall systems add sinks, outlets, new flooring, new paint
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Marge Schmuckal      **Approval Date:** 01/29/2007

**Note:**      **Ok to Issue:**

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 02/02/2007

**Note:**      **Ok to Issue:**

1) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the required rating.

2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Cptn Greg Cass      **Approval Date:** 01/30/2007

**Note:**      **Ok to Issue:**

1) All construction shall comply with NFPA 101

**MAINE MEDICAL CENTER  
OB/GYN ASSOC. AND MATERNAL FETAL M  
OFFICE RENOVATION**

**PORTLAND, MAINE**

**JANUARY 19, 2007**

**ISSUED FOR CONSTRUCTION**

**DRAWING**