

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

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

Permit No:	07-0644	Issue Date:	JUL 2 2007	DBL:	054 B006001
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Location of Construction: 66 Bramhall St	Owner Name: RSB LIMITED LIABILITY COMP	Owner Address: 32 PYA RD	Phone:
Business Name:	Contractor Name: Monaghan Woodworks, Inc.	Contractor Address: 100 Commercial St Suite 111 Portland, ME 04101	Phone: 7752583
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B2b

Past Use: Commercial - office	Proposed Use: Commercial - Office - tenant fit-up first floor	Permit Fee: \$470.00	Cost of Work: \$45,000.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied AD FPA 101	INSPECTION: Use Group: B Type: 2C DBL-2003	

Proposed Project Description: tenant fit-up first floor - Renovations Geriatric Psychology Office	Signature: Greg Case	Signature: JMB 6/29/07
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: 06/01/2007	<b>Zoning Approval</b>		
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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><b>Special Zone or Reviews</b></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 type="checkbox"/> MM <input type="checkbox"/></p> <p>OK w/ condition Date: 6/8/07 ABU</p>	<p><b>Zoning Appeal</b></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><b>Historic Preservation</b></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</p> <p>ABU 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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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# City of Portland, Maine - Building or Use Permit

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

<b>Permit No:</b> 07-0644	<b>Date Applied For:</b> 06/01/2007	<b>CBL:</b> 054 B006001
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<b>Location of Construction:</b> 66 Bramhall St	<b>Owner Name:</b> RSB LIMITED LIABILITY COMP	<b>Owner Address:</b> 32 PYA RD	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Monaghan Woodworks, Inc.	<b>Contractor Address:</b> 100 Commercial St Suite 311 Portland	<b>Phone</b> (207) 775-2683
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Commercial - Office - Geriatric Psychology Office - tenant fit-up first floor (renovations)	<b>Proposed Project Description:</b> tenant fit-up first floor (renovations)
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 06/08/2007
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			

<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 06/29/2007
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) All penetrations through rated assemblies must be protected by an approved firestop system installed as tested in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712.			
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.			

<b>Dept:</b> Fire	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Capt Greg Cass	<b>Approval Date:</b> 06/12/2007
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) All Life safety features shall be evaluated for compliance 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>66 BEAN HALL</u>		
Total Square Footage of Proposed Structure <u>RENO of EXISTING</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>29</u> Block# <u>D</u> Lot# <u>1</u>	Owner: <u>MAINE MEDICAL CENTER</u>	Telephone: <u>662-3323</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>SAME</u> <u>Contact W. POGAN ADA</u> <u>662-3323</u>	Cost Of Work: \$ <u>45,000</u> Fee: \$ _____ C of O Fee: \$ _____
Current legal use (i.e. single family) <u>BUSINESS - office - serlabric psychology office.</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>office</u> Is property part of a subdivision: <u>NA</u> If yes, please name _____ Project description: <u>office fit-up</u>		
Contractor's name, address & telephone: <u>MONAGHAN WOODWORKS</u> <u>100 COMMERCIAL ST</u> <u>PORTLAND, ME</u> Who should we contact when the permit is ready: <u>same as above</u> Mailing address: Phone: <u>775-2693</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: <u>[Signature]</u>	Date: <u>6/1/07</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 initialzing 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

~~CO~~ Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling

~~CO~~ 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.

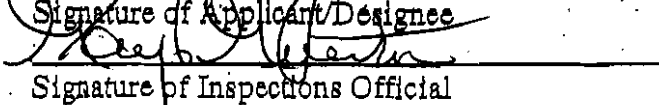
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

\_\_\_\_\_ 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 OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

  
\_\_\_\_\_  
Signature of Applicant/Designee

7/2/07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Inspections Official

7/2/07  
\_\_\_\_\_  
Date

CBL: 034 B006

Building Permit #: 070644

07/17/07 (LVE - in c/w) ~~###~~

8-9-07 Mike Manaris

A. Electrical: wires need to be secured, covers, lights need to be fixed,

HVAC - duck pump need 90° connector so ceiling can fit.

B. Ceiling needs to be finished

C. Carpet not done.

D. E. light not working

E. Label PANEL