

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 070566

This is to certify that 315 PARK AVENUE PROPERTIES LLC / North Shore Construction

has permission to Interior renovations to enlarge conference room

AT 315 PARK AVE

066 F001001

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.

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

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

PERMIT ISSUED

OTHER REQUIRED APPROVALS

Fire Dept. Greg Clark

Health Dept. _____

Appeal Board _____

Other _____

JUN 13

CITY OF PORTLAND

Department Name

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

PERMITTED

Location of Construction: 315 PARK AVE		Owner Name: 315 PARK AVENUE PROPRTIE		Owner Address: 30 MILK ST 2ND FLOOR CITY		Phone:	
Business Name:		Contractor Name: North Shore Construction		Contractor Address: P.O. Box 2564 South Portland		Phone: 2077742800	
Lessee/Buyer's Name		Phone:		Permit Type: Alterations - Commercial			Zone: B-2
Past Use: Commercial / Office and warehouse		Proposed Use: Commercial / Office and warehouse/ Practice Interior renovations to enlarge confrence room		Permit Fee: \$80.00	Cost of Work: \$5,500.00	CEO District: 1	
Proposed Project Description: Interior renovations to enlarge conference room				FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 3 IBC 2003 Signature: [Signature]	
				Signature: [Signature]		Signature: [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: dmartin		Date Applied For: 05/18/2007		Zoning Approval			

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: [Signature] 5/22/07	Date:	Date:

PERMIT ISSUED
JUN 13 2007
CITY OF PORTLAND

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: 07-0566	Date Applied For: 05/15/2007	CBL: 066 F001001
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Location of Construction: 315 PARK AVE	Owner Name: 315 PARK AVENUE PROPRTIE	Owner Address: 30 MILK ST 2ND FLOOR	Phone:
Business Name:	Contractor Name: North Shore Construction	Contractor Address: P.O. Box 2564 South Portland	Phone (207) 774-2800
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial / Office and warehouse/ Practice Interior renovations to enlarge confrence room	Proposed Project Description: Interior renovations to enlarge conference room
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/21/2007**Note:****Ok to Issue:**

- 1) This permit is NOT a change of use. The entire building is not approved for office use. There is an approved warehouse in the rear of this building.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 3) This property shall remain offices with a warehouse in the rear. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 06/13/2007**Note:****Ok to Issue:**

- 1) 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 **Reviewer:** Capt Greg Cass **Approval Date:** 05/22/2007**Note:****Ok to Issue:**



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>315 Park Ave.</u>		
Total Square Footage of Proposed Structure <u>NA</u>		Square Footage of Lot <u>NA</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>606 F 001</u>	Owner: <u>315 Park Ave</u> <u>Assouline</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>Main Medical Center</u>	Applicant name, address & telephone: <u>HERB ROBINSON</u> <u>Box 2564 South Portland</u> <u>Maine 04116</u> <u>207-774-2800</u>	Cost Of Work: \$ <u>5500</u> Fee: \$ <u>80</u> C of O Fee: \$ <u>N/A</u>
Current legal use (i.e. single family) <u>Commercial office/practice</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Remove one Existing Door and wall to Enlarge Conference Room Turn Kitchen From Hall into adjacent Room</u>		
Contractor's name, address & telephone: <u>North Shore Construction 207-774-2800</u> <u>P.O. Box 2564 S. P. 04116</u> Who should we contact when the permit is ready: <u>HERB ROBINSON (650-2547)</u> Mailing address: _____ Phone: _____		

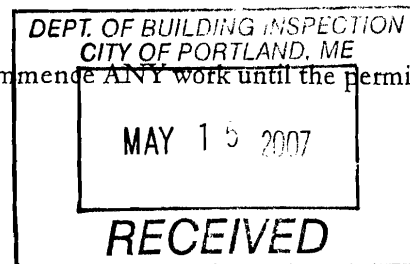
Please submit all of the information outlined in the Commercial Application Checklist.
Failure to do so will result in the automatic denial of your permit.

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.

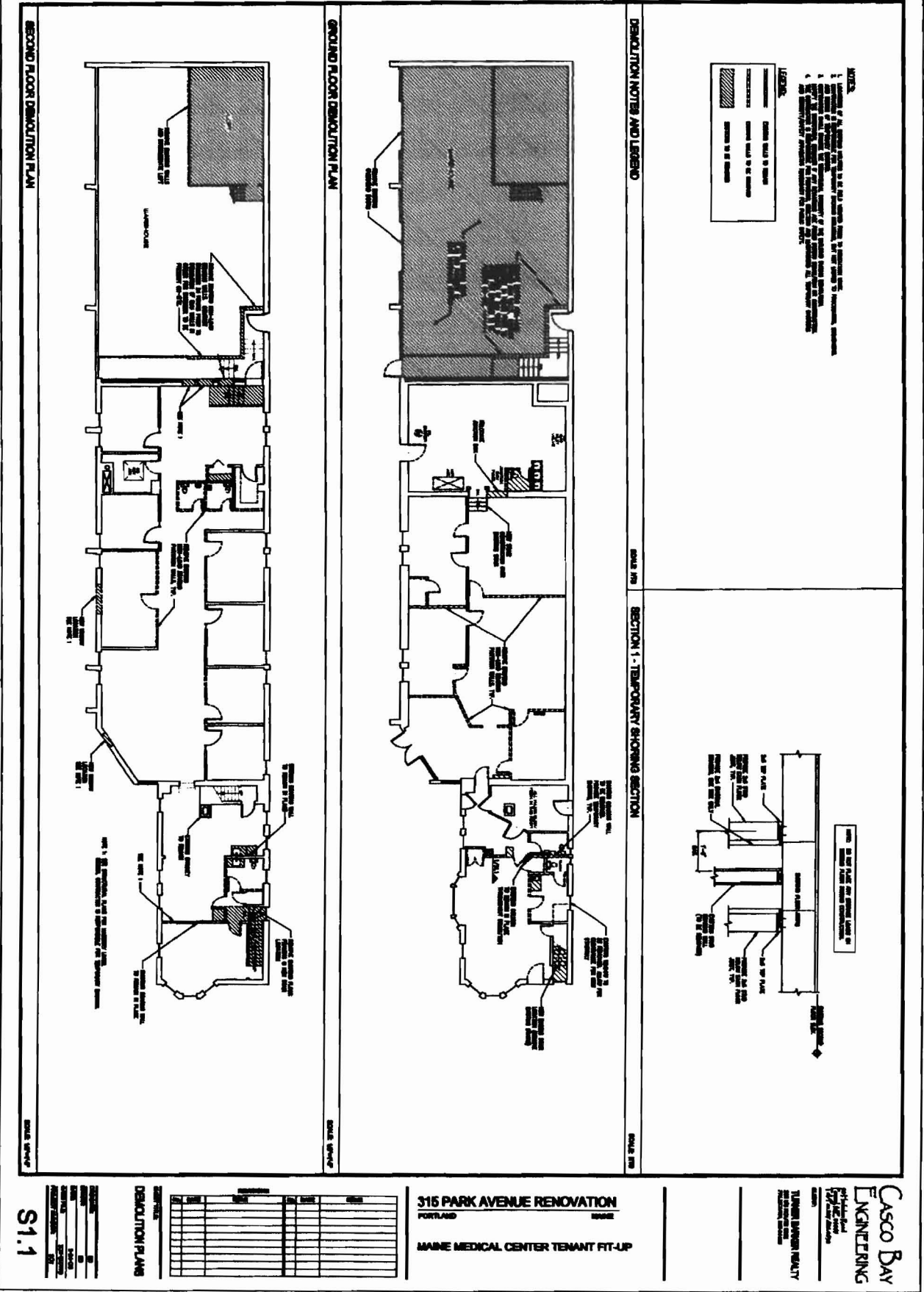
Signature of applicant: [Signature] Date: 5/15/07

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



[Signature] 1121

per mt # 04-0023 Office/Warehouse



CASCO BAY
ENGINEERING

PROJECT LOCATION
1000 MARKET STREET
PORTLAND, MAINE 04107

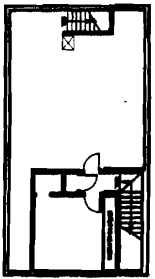
TAKING SHOWN REALTY
1000 MARKET STREET
PORTLAND, MAINE 04107

315 PARK AVENUE RENOVATION
PORTLAND
MAINE MEDICAL CENTER TENANT FIT-UP

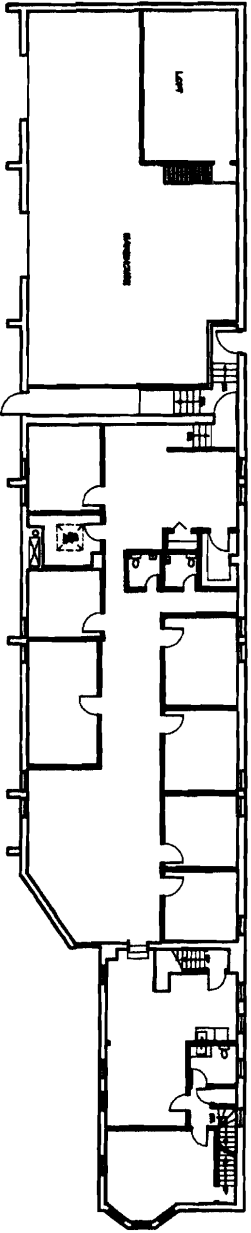
NO.	DATE	REVISION

DATE: 01/15/11
SCALE: 1/8"=1'-0"
S1.1

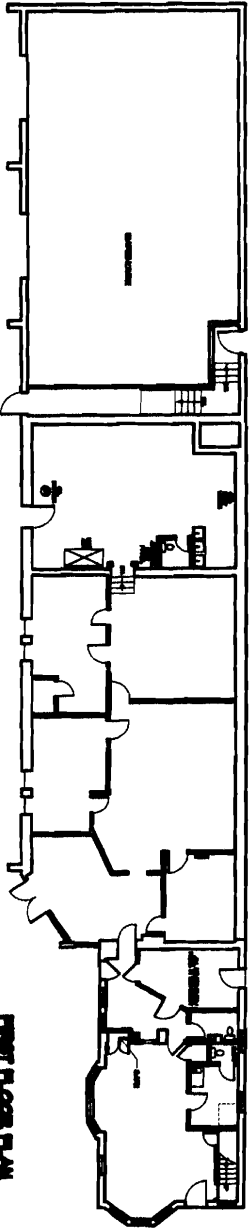
Permit # 04-6623



FIRST FLOOR PLAN



SECOND FLOOR PLAN



THIRD FLOOR PLAN



M.A.R.K.
ARCHITECTS
INC.

2000
Maine State Board of Building and Construction Officials
Portland, ME 04103

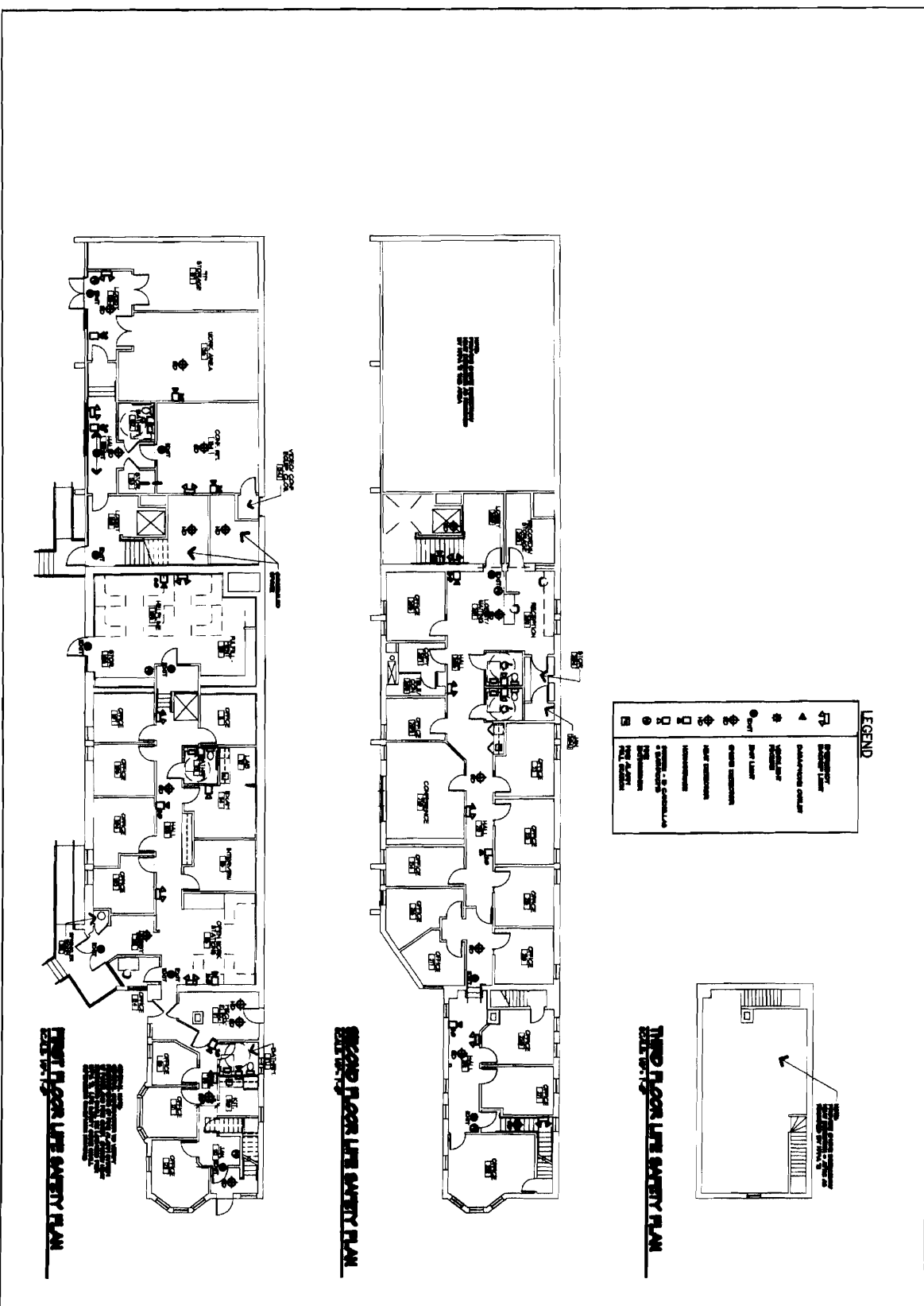
RENOVATION OF
315 PARK AVENUE BUILDING

PORTLAND, MAINE

GENERAL CONTRACTOR PLAN

A-5

#04-0023

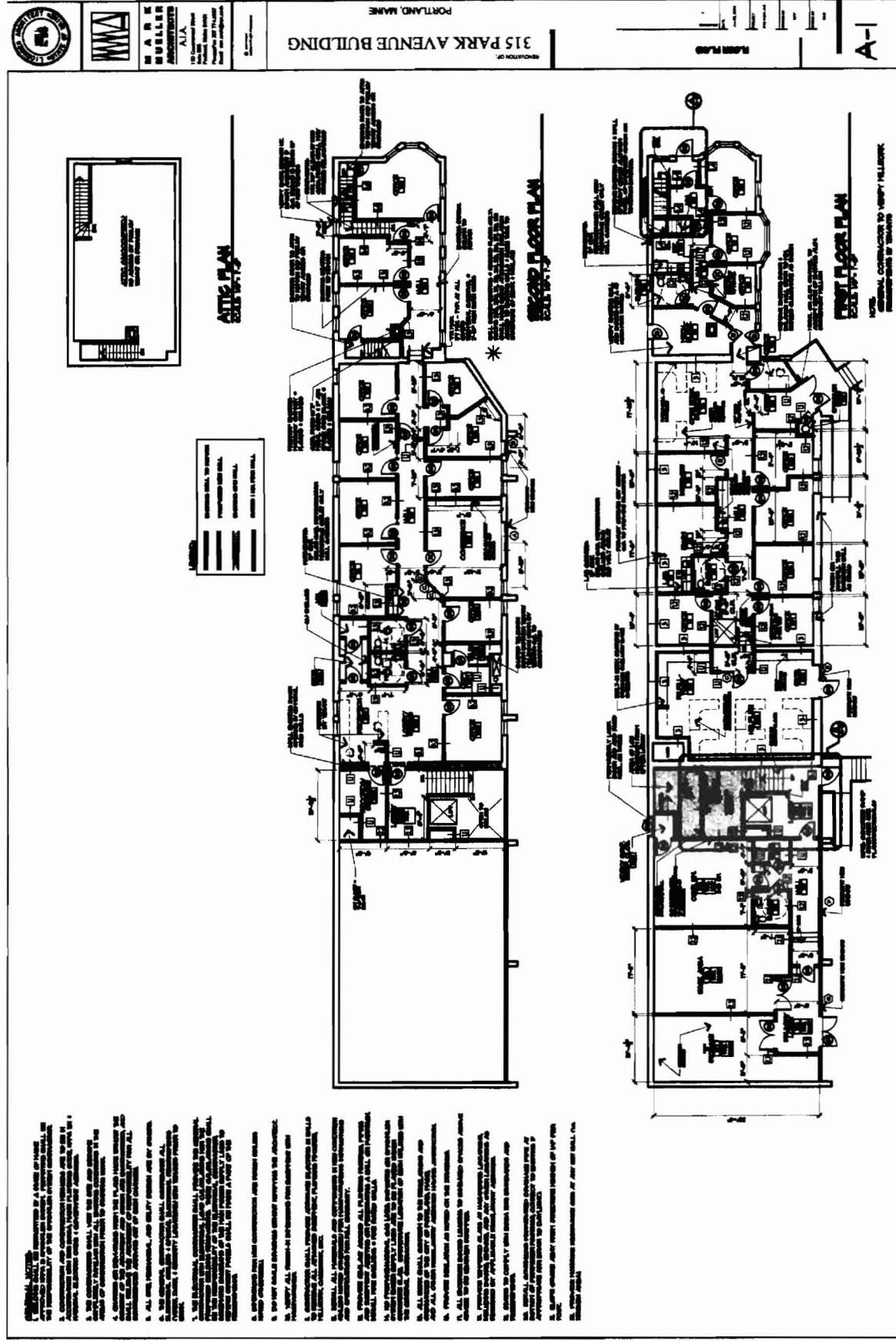


M.A. BELLIS ASSOCIATES, INC.
ARCHITECTS
315 PARK AVENUE, SUITE 1000
PORTLAND, MAINE 04101
TEL: 553-5500
FAX: 553-5501

RENOVATION OF
315 PARK AVENUE BUILDING
PORTLAND, MAINE

LIFE SAFETY PLAN
A-4

Permit # 0A-0023





APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

TURNER BALKER REALTY - MARK PRIMEAU

11-17-03

Applicant

Application Date

2000 ROUTE ONE
FALMOUTH, ME 04105

Applicant's Mailing Address

INTERIOR SPACE RENOVATION
Project Name/Description

LAWRY DAY ENGINEERING/ERK DURE/688-4670

Consultant/Agent/Phone Number

315 PARK AVE.
Address of Proposed Site

CBL: 1111-F-1

Description of Proposed Development:

INTERIOR RENOVATION FOR NEW TENANT IN EXISTING BUILDING.
ALSO PROVIDING EXTERIOR ACCESS/RAMPS FOR ADA
HANDICAPPED ACCESSIBILITY

Please Attach Sketch/Plan of Proposal/Development

Criteria for Exemptions:

See Section 14-523 (4) on back side of form

a) Within Existing Structures; No New Buildings, Demolitions or Additions

b) Footprint Increase Less Than 500 Sq. Ft.

c) No New Curb Cuts, Driveways, Parking Areas

d) Curbs and Sidewalks in Sound Condition/Comply with ADA

e) No Additional Parking/ No Traffic Increase

f) No Stormwater Problems

g) Sufficient Property Screening

h) Adequate Utilities

Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
DEMO IN INSIDE OF BUILDING	✓
YES	✓
YES	✓
HE WILL BE UPGRADING THE EXISTING TO MAKE NEW ADA ACCESSIBILITY TO ALL PUBLIC ENTRANCES	✓
YES	✓
NOT IN SUBJECT PARCEL	✓
EXISTING RETAINING WALLS IN PLACE	✓
IT WILL BE NECESSARY TO HAVE WATER SERVICE FOR NEW SPRINKLER SYSTEM	✓

Planning Division Use Only

Exemption Granted Partial Exemption Exemption Denied









Planner's Signature

Date

White - Planning Office

Pink - Inspections

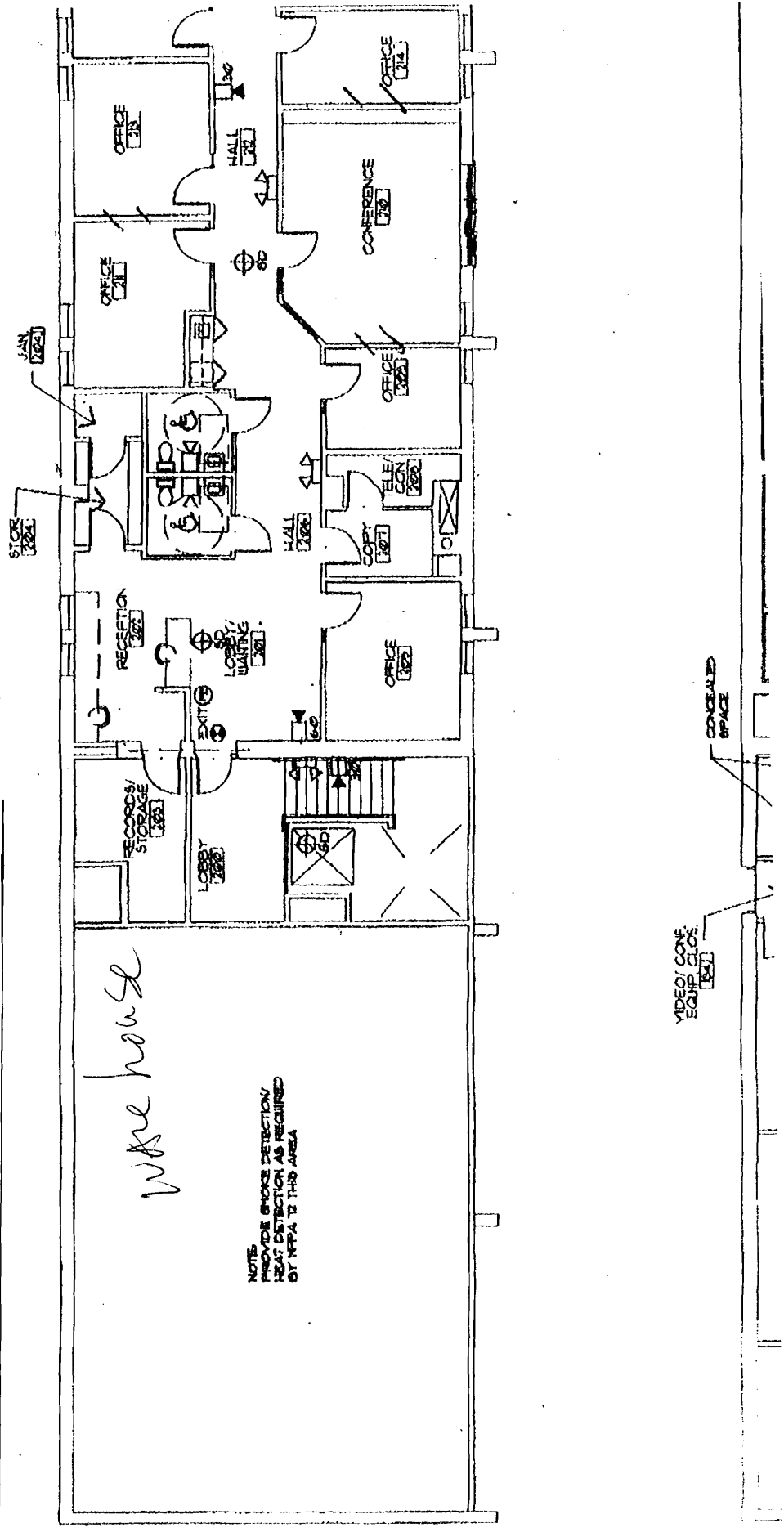
Yellow - Applicant

	VENT LIGHT FIXTURE
	EXIT LIGHT
	SMOKE DETECTOR
	HEAT DETECTOR
	HORNSTROBE
	STROKE - 10 CANDELLAS • BATHROOMS
	FIRE EXTINGUISHER
	FIRE ALARM PULL STATION

Current permit # 07-0566









315 Park Avenue Alterations

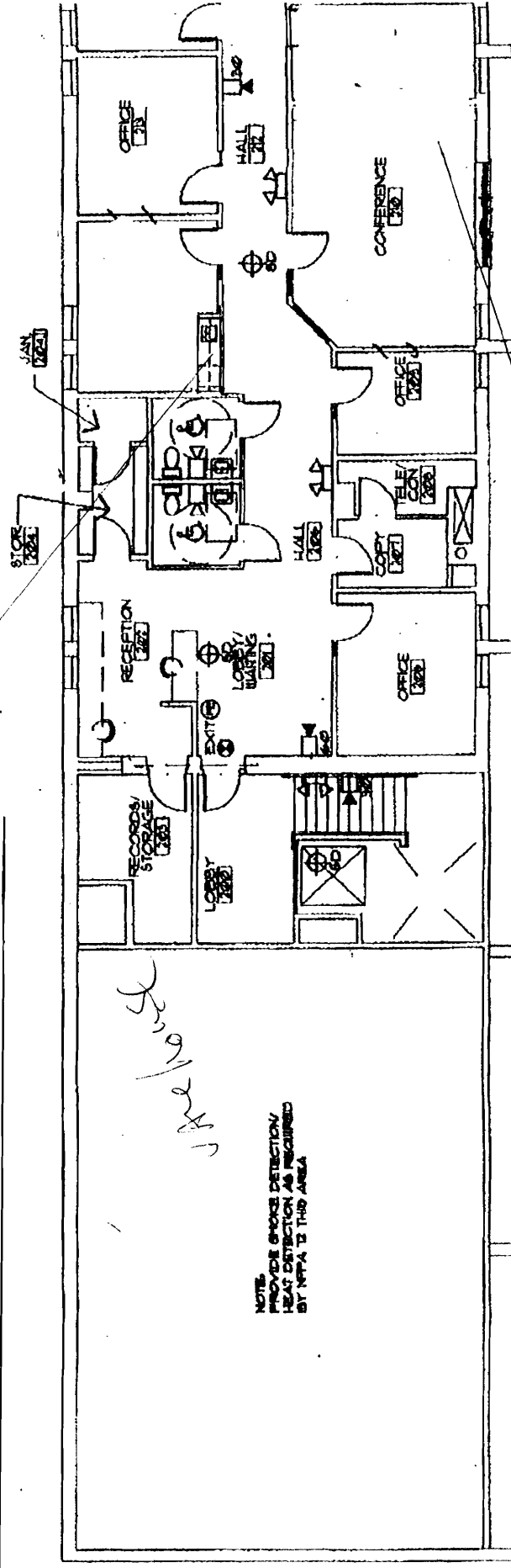
Existing



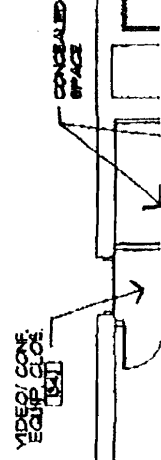
315 Park Avenue Alterations

Current permit submitted
 # 07-0566 Remove Doors and Infill wall
 Turn Cabinets to face
 Into Adjacent Room

	VERTICAL LIGHT FIXTURE
	EXIT LIGHT
	SMOKE DETECTOR
	HEAT DETECTOR
	HORN/STROBE
	STROBE - B CANDELLAS & BATHROOMS
	FIRE EXTINGUISHER
	FIRE ALARM PULL STATION



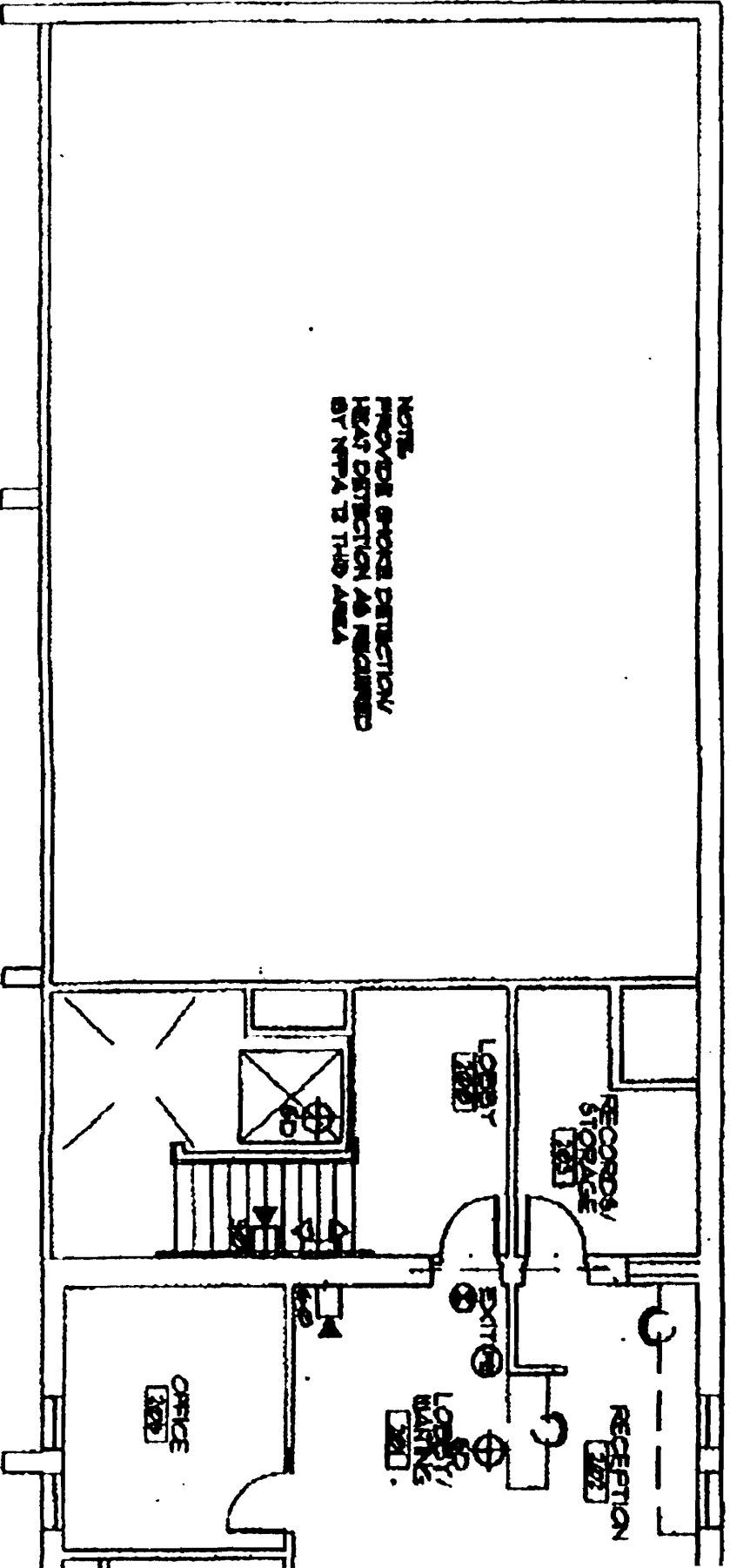
Remove Existing Wall and Door Infill Door





315 Park Avenue Alterations

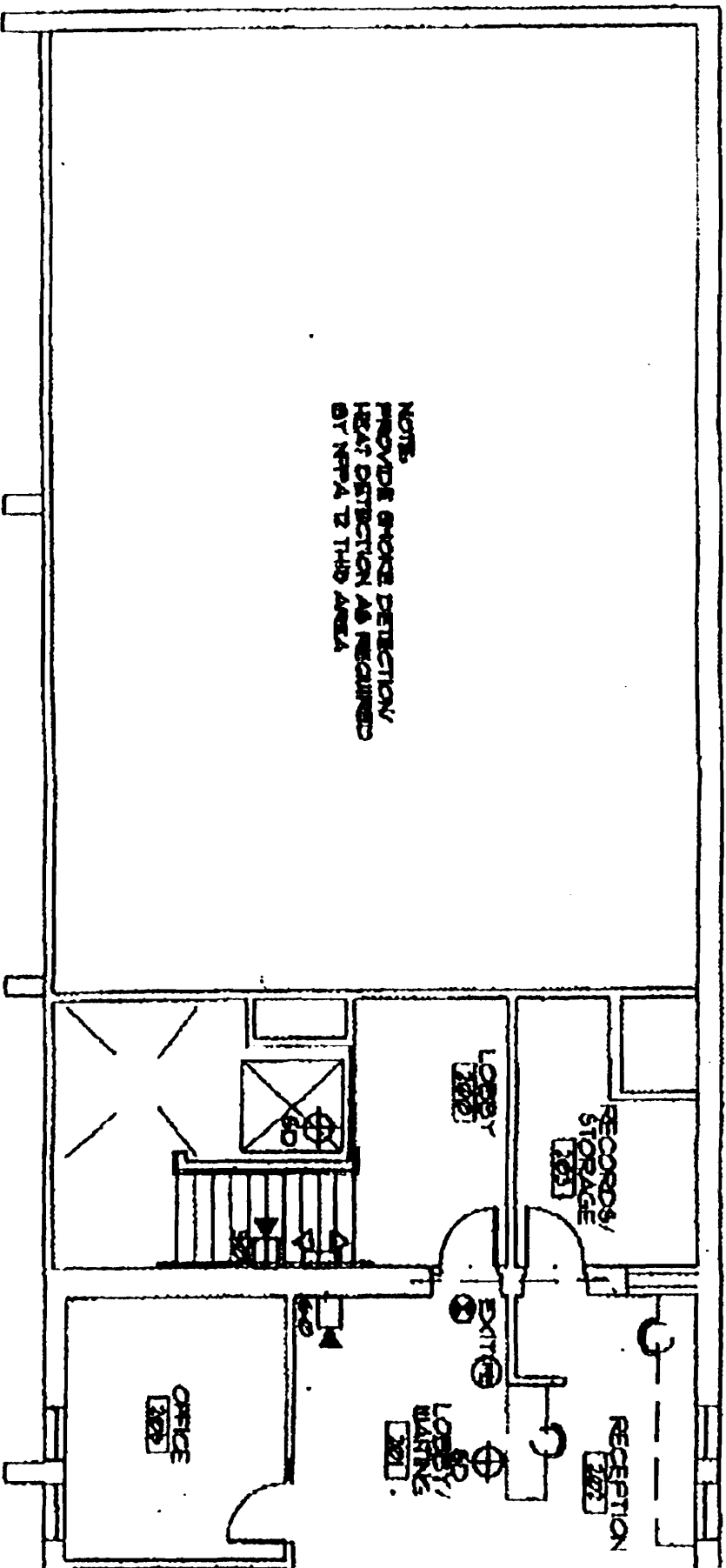
Remove Doors and:
Turn Cabinets +
Into Adjaca



Remove Existing Wall and Door Infill Door

315 Park Avenue Alterations

Existing



NOTE:
PROVIDE SMOKE DETECTION/
HEAT DETECTION AS REQUIRED
BY NFPA 72 THIRD EDITION AREA

VIDEO/CONF.
EQUIP. CLOS.
201

CONCEALED
SPACE

