

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

## PERMIT

Permit Number: 040744

This is to certify that Tundra Associates/Unicco

has permission to Tenant fit-up

AT 15 Lowell St 067 J00101A

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is laid or closed-in. **48 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. [Signature]

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

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

Other \_\_\_\_\_

DepartmentName

[Signature]  
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

<b>Permit No:</b> 04-0744	<b>Issue Date:</b>	<b>CBL:</b> 067 J00101A
<b>Location of Construction:</b> 15 Lowell St	<b>Owner Name:</b> Tundra Associates	<b>Owner Address:</b> 15 Lowell St
<b>Business Name:</b>	<b>Contractor Name:</b> Unicco	<b>Contractor Address:</b> 71 Elm Street Suite 10 Portland
<b>Lessee/Buyer's Name</b>	<b>Phone:</b> 774-8277	<b>Phone:</b> 6172935111
<b>Past Use:</b> Office	<b>Proposed Use:</b> Office	<b>Permit Type:</b> Alterations - Commercial
		<b>Zone:</b> B-2
	<b>Permit Fee:</b> \$156.00	<b>Cost of Work:</b> \$14,548.00
		<b>CEO District:</b> 3
	<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: B Type: RB
<b>Proposed Project Description:</b> Tenant fit-up	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
	<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>	
	Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
	Signature: _____ Date: _____	

<b>Permit Taken By:</b> iodinea	<b>Date Applied For:</b> 06/07/2004	<b>Zoning Approval</b>		
<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"/> MIM <input type="checkbox"/> Date: <i>6/7/04</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: <i>[Signature]</i>	

**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



# Commercial 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.

5		+2	E
Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>67</u> Block# <u>J</u> Lot# <u>1</u>	Owner: <u>MAINE EYE CENTER</u> <u>15 LOWELL ST</u> <u>PORTLAND, ME 04102</u>		Telephone: <u>207-774-8277</u>
Lessee/Owner Name (If Applicable) <i>DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME JUN 4 2004</i>	Applicant name, address & telephone: <u>STEVE BEAULIERU</u> <u>UNILCO CONSTRUCTION SERVICES</u> <u>71 ELM ST STE #10</u> <u>FOXBORO, MA 02035</u> <u>508-698-9666</u>		Cost Of Work: \$ <u>17,598</u> Fee: \$ <u>156.00</u>
Current Specific use: <u>OFFICE</u>			
Proposed Specific use: <u>OFFICE</u>			
Project description: <u>Build drywall/metal stud partitions at two locations on 4th floor in order to create two additional offices. Scope includes metal studs, drywall insulation, metal doors + frames, minor electrical (receptacles, data ports and relocation of lights + exit signs - under separate permit) and painting. Existing flooring to remain and ceiling will be patched at new partitions</u>			
Contractor's name, address & telephone <u>Unilco Construction Services</u> <u>71 Elm St Suite #10 Foxboro, MA</u> <u>508-698-9666</u>			
Who should we contact when the permit is ready <u>Steve Beaulieru</u>			
Mailing address: <u>71 Elm St Suite #10</u> <u>Foxboro, MA 02035</u>			
Phone: <u>617-293-5111</u>			

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

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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: <u>Steve Beaulieru</u>	Date: <u>3/17/04</u>
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

**This is not a Permit; you may not commence any work until the Permit is issued.**

Frank W. Read, M.D.  
General Partner  
Tundra Associates  
15 Lowell ST  
Portland, Maine 04102

June 1, 2004

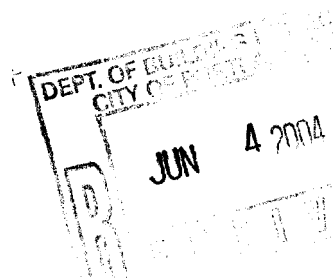
City of Portland

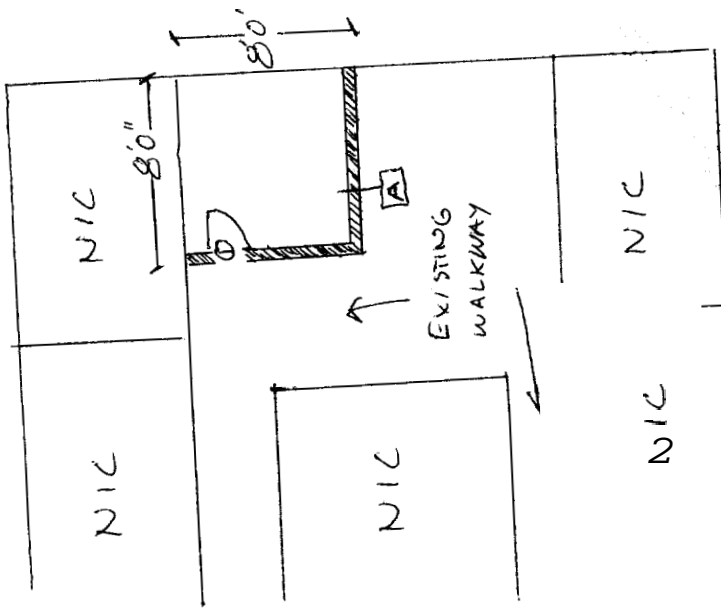
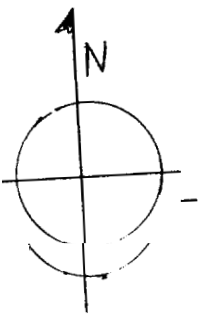
Please be advised that Tundra Associates, as Landlord, has agreed to the facility changes proposed by Maine Eye Center, PA on the fourth floor of 15 Lowell Street. Both Tundra Associates and Maine Eye Center, P.A. are governed by the same nine partners. We have met to discuss and approve the renovations. Thank you for consideration of this request.

Sincerely,



Frank W. Read, MD





4<sup>TH</sup> FLOOR PLAN  
NTS.

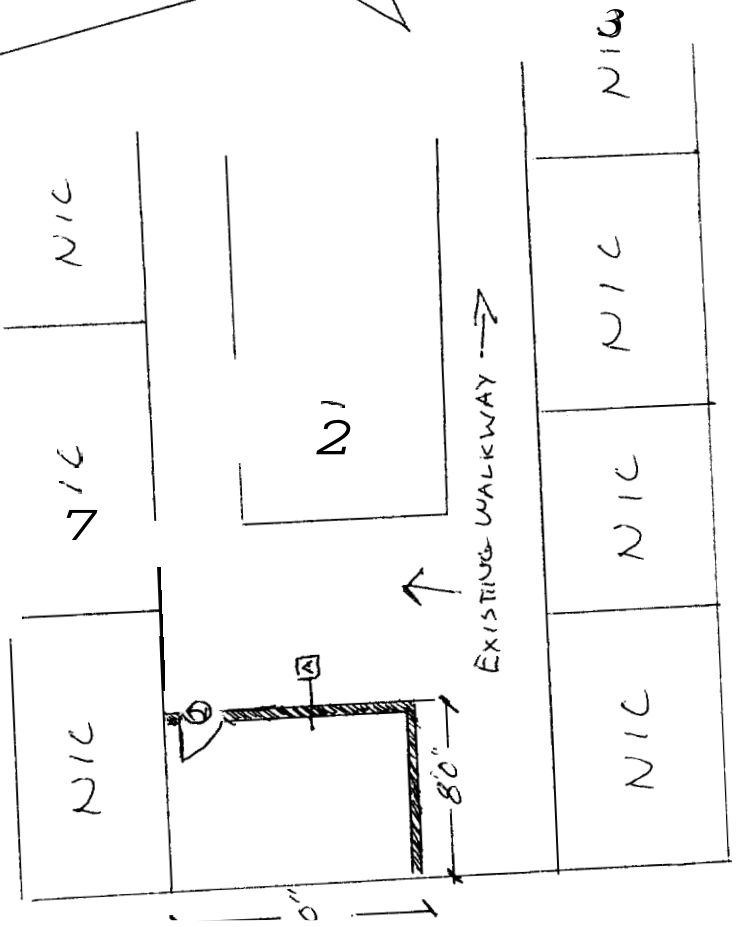
--- ABOVE W/ BATT INSULATION

MAINE EYE CENTER - 4<sup>TH</sup> FLOOR

15 LOWELL STREET  
DARTMOUTH ME 04102

DOOR SCHEDULE

- ① 3'0" X 7'0" HOLLOW METAL w/ HOLLOW METAL FRAME
- ② 3'0" X 7'0" HOLLOW METAL w/ HOLLOW METAL FRAME



--- TYPE

--- 3/0 20 GA FINISH

NOTES

- ① PATCH + REPAIR ACT BEING TO ACCOMMODATE NEW PARTITIONS
- ② FLOOR FINISHES TO REMAIN
- ③ FLOOR FINISHES + PARTITIONS TO BE PAINTED TO MATCH EXISTING

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