

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 071124

This is to certify that MERCY HOSPITAL /Gilbane Michael

has permission to 28' x 8 construction trailer w/ 2 doors

AT 175 Fore River Pkwy

073 A001001

PERMIT ISSUED
OCT - 1 2007

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 when permission is procured before this building or part thereof is placed 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 Cross

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Thomas M. Mackley 10/1/07
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: 07-1124	Issue Date:	CBL: 073 A001001
-----------------------	-------------	---------------------

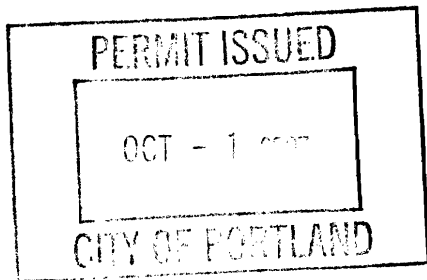
Location of Construction: 175 Fore River Pkwy	Owner Name: MERCY HOSPITAL	Owner Address: 144 STATE ST	Phone:
Business Name:	Contractor Name: Gilbane / Michael Poulin	Contractor Address: 900 Elm St Manchester	Phone 6036990076
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Commercial	Zone: C26

Past Use: Commercial	Proposed Use: Commercial 28' x 8 construction trailer w/ stairs	Permit Fee: \$40.00	Cost of Work: \$2,000.00	CEO District: 3
Proposed Project Description: 28' x 8 construction trailer w/ stairs		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: SA IBC 2003	
		Signature: <i>Greg Cass</i> Signature: <i>Jm 10/1/07</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: dmartin	Date Applied For: 09/12/2007	Zoning Approval		
-----------------------------	---------------------------------	------------------------	--	--

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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 <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>OK 9/13/07</i>	Zoning Appeal <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: _____	Historic Preservation <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>S</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



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>Mercy Hospital 201 Fore River Parkway</u>		
Total Square Footage of Proposed Structure/Area <u>224</u>		Square Footage of Lot <u>34.89 acres</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>See attached</u>	Applicant * <u>must</u> be owner, Lessee or Buyer* Name <u>Gilbane</u> Address <u>201 Fore River Parkway</u> City, State & Zip <u>Portland, ME 04102</u>	Telephone: <u>207-772-3725</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Mercy Hospital</u> Address <u>144 State St.</u> City, State & Zip <u>Portland, ME</u>	Cost Of Work: \$ <u>2,000.-</u> C of O Fee: \$ <u>40.-</u> Total Fee: \$ <u>40.-</u>
Current legal use (i.e. single family) _____ If vacant, what was the previous use? _____ Proposed Specific use: <u>Trailer - Temporary</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>Deliver 28x8 mobile office, block + level, install deadbolts, security screens + vinyl skirting. Also install tie-downs. To be used as rain/snow shelter for south parking lot. w/ stairs</u>		
Contractor's name: <u>Gilbane</u> Address: <u>201 Fore River Parkway</u> City, State & Zip <u>Portland, ME 04102</u> Telephone: <u>207-772-3725</u> Who should we contact when the permit is ready: <u>Melody-Ann Cote</u> Telephone: <u>207-252-4293</u> Mailing address: <u>P.O. Box 10019, Portland, ME 04104</u>		

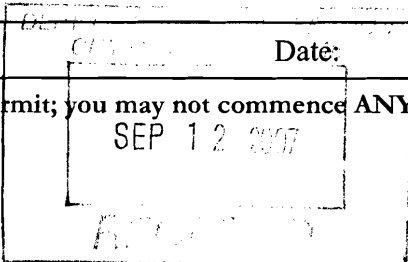
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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, 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: [Signature] Date: 9/12/2007

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



City of Portland, Maine - Building or Use Permit

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

Permit No: 07-1124	Date Applied For: 09/12/2007	CBL: 073 A001001
------------------------------	--	----------------------------

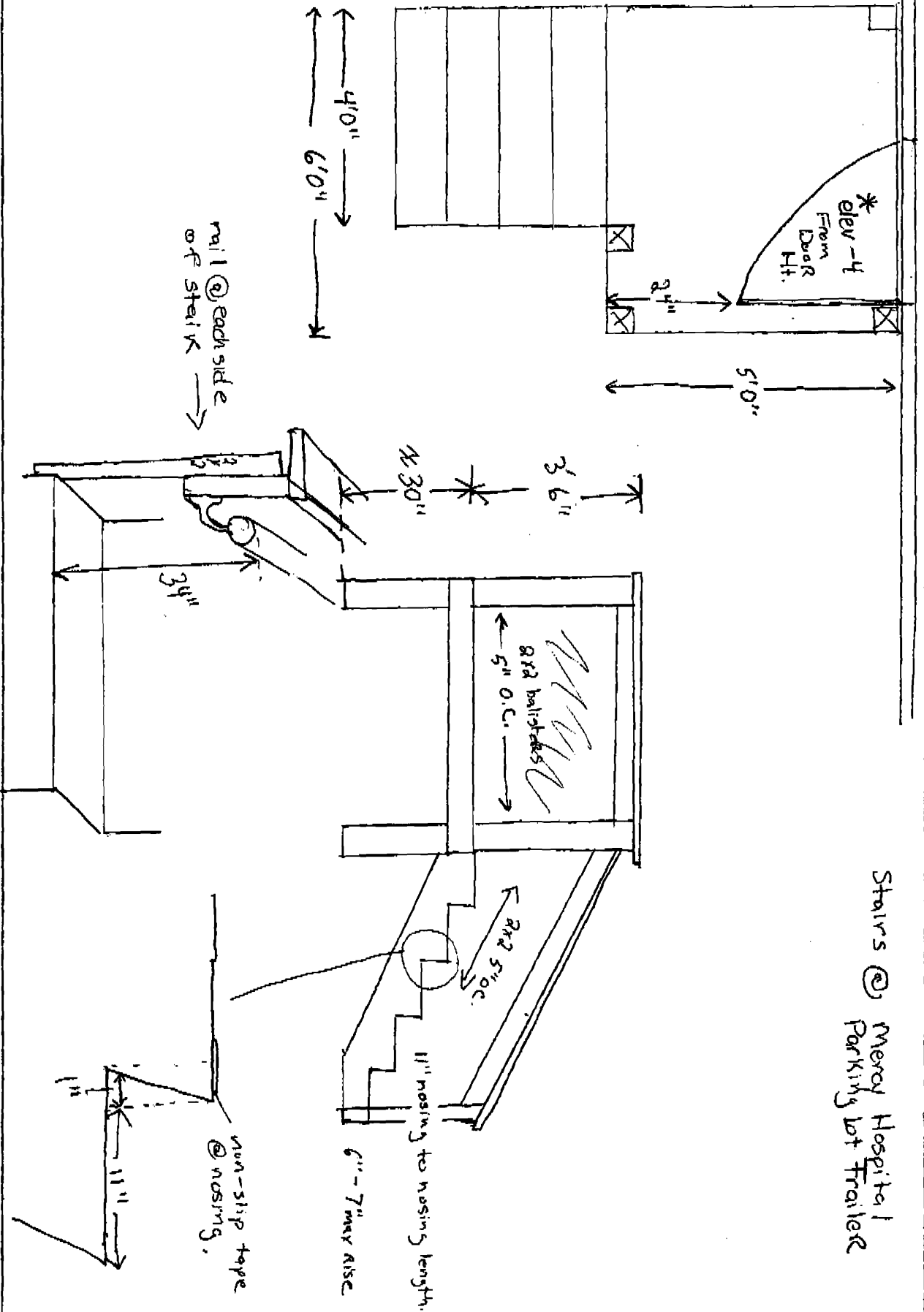
Location of Construction: 175 Fore River Pkwy	Owner Name: MERCY HOSPITAL	Owner Address: 144 STATE ST	Phone:
Business Name:	Contractor Name: Gilbane / Michael Poulin	Contractor Address: 900 Elm St Manchester	Phone (603) 699-0076
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Commercial	

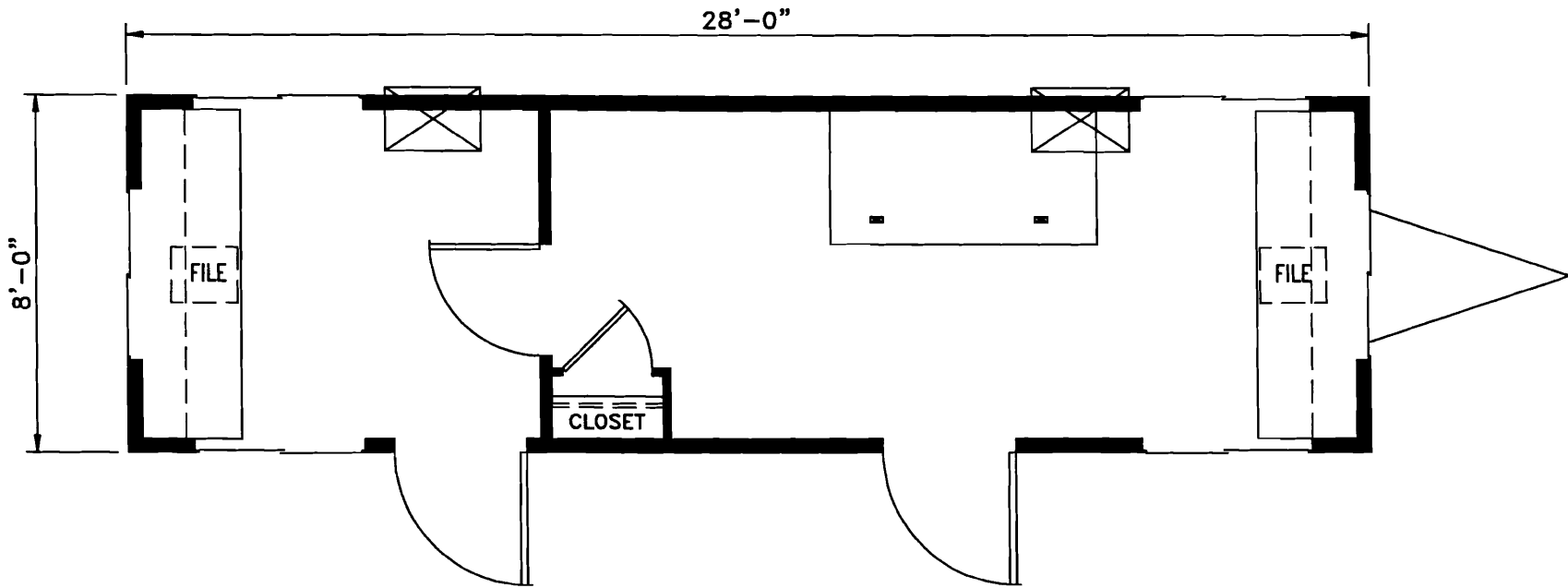
Proposed Use: Commercial 28' x 8 construction trailer w/ stairs	Proposed Project Description: 28' x 8 construction trailer w/ stairs
---	--

Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 09/13/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Building	Status: Approved with Conditions	Reviewer: Tom Markley	Approval Date: 10/01/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			
Dept: Fire	Status: Approved	Reviewer: Capt Greg Cass	Approval Date: 09/18/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		

Comments:
9/28/2007-tm: called Melody- Ann Cody and requested framing details for stairs. She will fax to me.

Stairs @ Mercy Hospital
Parking lot Trailer





Specifications

Size

- 32' Long (including hitch)
- 28' Box size
- 8' Wide
- 7' Ceiling height

Interior Finish

- Paneled walls
- Vinyl tile floors
- Gypsum ceiling
- Private office
- Wide open shells available

Furniture

- Two built-in desks with file cabinets
- One built-in plan table
- Overhead shelf

Electric

- Fluorescent ceiling lights
- Breaker panel

Windows/Doors

- Horizontal slider windows
- Two vision panel doors with standard locks

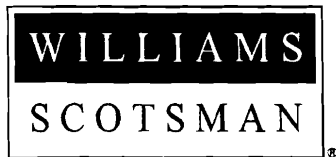
Heating and Cooling

- Electric baseboard heat
- Thru-wall AC unit

Exterior Finish/Frame

- Aluminum siding
- I-Beam frame
- Standard drip rail gutters

Additional floor plans available. Floor plans and specifications may vary from those shown and are subject to in-stock availability.



Mobile Offices • Storage Products
And More

Mobile Office 32x8

WILLIAMS SCOTSMAN, INC.

325 Rodman Road

Auburn, ME 04210

Phone: 207-783-3200

Fax: 207-783-6183

Toll free: 800-782-1500

Poulin, Michael G.

From: Steve Bushey [SBushey@DelucaHoffman.com]
Sent: Thursday, July 20, 2006 10:11 AM
To: Poulin, Michael G.
Subject: RE: Scan

Hi Mike,

the property is a compilation of many different tax map properties. the following table outlines how the tax maps previously identified the property prior to the purchase by Mercy.

Previous Owner	Tax Map-block-Lot Number
Merrill Industries Inc.	73-A-1
Merrill Industries Inc.	73-B-2 (Mud Flats)
Merrill Industries Inc.	74-A-2
Merrill Industries Inc.	74-A-22
Portland Terminal Company	74-A-1
Portland Terminal Company	74-A-3 (Mud Flats)
Portland Terminal Company	74-A-30 (Mud Flats)
Portland Terminal Company	74A-A-1 (Mud Flats)
Portland Terminal Company	75-A-3
Portland Terminal Company	75A-A-1 (Mud Flats)
Portland Terminal Company	75A-A-17
Portland Terminal Company	76-A-1
Portland Terminal Company	76-A-33

trust this helps.

sTeve Bushey

