Form # P 04

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

Health Dept. \_ Appeal Board \_ Other \_\_\_\_

Department Name

Application And Notes, If Any, Attached	PERIVIN	Permit Number, 071447 PERMIT ISSUED
This is to certify thatMERCY HOSPITAL /	ES E os Company	
has permission to Install Fire Alarm Syste	em	DEC 2 1
AT 175 FORE RIVER PKWY	L 073	A001001
provided that the person or person of the provisions of the Statutes the construction, maintenance at this department.	of mine and or the contances of	this permit shall comply with all of the City of Portland regulating s, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	ification of inspire on must even and ven permition product of ilding or left there is need or corruit cosed-in 4 UR NC	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Buil	•				Issue Date	e:	073 A0	01001	
389 Congress Street, 04101 Tel: ( Location of Construction:		, rax:	(207) 874-8710	<u></u>					
175 FORE RIVER PKWY	Owner Name: MERCY HOSPITAL			Owner Address: 144 STATE ST			Phone:		
Business Name:	Contractor Name		-	Contractor Address			Phone		
	ES Boulos Co			45 Bradley Drive	-		20746437	'06	
Lessee/Buyer's Name	Phone:			Permit Type:				Zone:	
				Fire Alarm Syst	em			1C26	
Past Use:	Proposed Use:			Permit Fee:	Cost of Wor	rk:	CEO District:		
Mercy @ Fore River connected w/		e River connected w/		\$860.00	\$84,0	00.00	3		
, , ,		rmit#061801 - Install Fire Alarm estem		FIRE DEPT:	Approved  Denied		CTION:	Type: Ala	
							BC-200	3	
Proposed Project Description: Install Fire Alarm System				Signature: Crea	<del></del>	Signati	-	2/21/0	
				PEDESTRIAN ACT		`	$\mathcal{A}\mathcal{J}'$	. j'	
				Action: Appro	oved Ap	proved w	/Conditions	Denied	
				Signature:			Date:		
	pplied For:			Zonin	g Approva	al			
ldobson 11/28	8/2007	<u> </u>				—-т	W		
1. This permit application does not Applicant(s) from meeting applic Federal Rules.		\ ·	ecial Zone or Review	vs Zon Varian	ing Appeal		Historic Press		
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		☐ Wetland		Miscel	llaneous D		Does Not Rec	quire Review	
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		☐ Flood Zone		Condit	Conditional Use		Requires Rev	iew	
		Subdivision		Interpretation		Approved			
		☐ Si	te Plan	Approv	ved		Approved w/o	Conditions	
		Maj Minor MM		1 Denied		_ Denied			
		Date:	1/2010	Date:		D	Date:		
Critical Control			, ,						
		C	CERTIFICATIO	)N					
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	make this appler work describe	ication a	as his authorized application is is	agent and I agree sued, I certify that	to conform the code of	to all a ficial's a	pplicable laws of authorized representation	of this esentative	

DATE

**PHONE** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, Maine - B	uilding or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Te	l: (207) 874-8703, Fax: (20	7) 874-871	6 07-1447	11/28/2007	073 A001001
Location of Construction:	Owner Name:		Owner Address:		Phone:
175 FORE RIVER PKWY	MERCY HOSPITAL		144 STATE ST		
Business Name:	Contractor Name:		Contractor Address:		Phone
	ES Boulos Company		45 Bradley Drive	Westbrook	(207) 464-3706
Lessee/Buyer's Name	Phone:		Permit Type:		
			Fire Alarm System	m	
Proposed Use: Mercy @ Fore River connected w Alarm System	/ permit#061801 - Install Fire	_	ed Project Description l Fire Alarm Systen		
Dept: Zoning Status Note:	: Approved	Reviewer	: Marge Schmuck	al Approval I	Ok to Issue: ✓
Dept: Building Status Note:	: Approved	Reviewer	: Jeanine Bourke	Approval I	<b>Date:</b> 12/21/200° <b>Ok to Issue:</b> ✓
Dept: Fire Status Note:	: Approved with Conditions	Reviewer		Approval I	Date: 11/29/200′ Ok to Issue: ✓
1) Application requires State Fire	e Marshal approval.				
<ol> <li>The fire alarm system shall co And NFPA 101</li> </ol>	mply with NFPA 72				
3) Fire alarm system requires a M	lasterbox connection per city	ordinance.			

## 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: Mercal Square Footage of Proposed Structure/A	1 at the Fore, 201 Fore R	liver Pkwy
136,610	rea Square Footage of Lot	<b>/</b>
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buye	r* Telephone:
Chart# Block# Lot#	Name Mercy Hospital Address /44 State	
173 H	Address /445 take	
	City, State & Zip POHME 04101	
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
	Name Mercy Hospital	Work: \$ 84,000
	Address	C of O Fee: \$
	City, State & Zip	Total Fee: \$ 560 /00
	· -	Total Fee: \$
Current legal use (i.e. single family)	cy Hospital	
If vacant, what was the previous use? Proposed Specific use:		
Is property part of a subdivision?	If yes, please name	<del></del>
Project description:		
Fire Alarm System	~	
Contractor's name: E.S. Boulos Con	pany	
Address: 45 Bradley Drive		
City, State & Zip Westbrook, ME 04	<b>1092</b> T	elephone: <u>207 464 3706</u>
Who should we contact when the permit is read	ly: Scott Marguis T	elephone: <u>207 464 3706</u>
Mailing address: 45 Bradley Drive	<u> </u>	
Please submit all of the information	outlined on the applicable Checkl	ist. 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.

	1		
Signature:	Latt Menzini	Date: 11/28/07	_
	This is not a permit; you may no	ot commence ANY work until the permit is issue	