

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1203	Issue Date:	CBL: 075 A005001
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Location of Construction: 0 FORE RIVER PKWY 2nd & 3rd Fl	Owner Name: LANDMARK HEALTHCARE FACI	Owner Address: 839 NORTH JEFFERSON	Phone:
Business Name:	Contractor Name: Ledgewood Construction	Contractor Address: 27 Maine St. So. Portland	Phone 2077671866
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone:

Past Use: Vacant Building - Original Permit under CBL 073 A001001 permit# 061802	Proposed Use: Commercial - Medical Offices - Establish the use of 2nd & 3rd Floor as offices w/Tenant fit-up	Permit Fee: \$23,520.00	Cost of Work: \$2,350,000.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type
Proposed Project Description: Establish the use of 2nd & 3rd Floor as offices w/Tenant fit-up		Signature:		Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature:		Date:		

Permit Taken By: ldobson	Date Applied For: 09/26/2007	Zoning Approval		
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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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	Date:

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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

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Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone:

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 09/27/2007

Note: **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 2) Separate permits shall be required for any new signage.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 11/15/2007

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.
- 2) 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.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Greg Cass **Approval Date:** 10/15/2007

Note: **Ok to Issue:**

- 1) A single source supplier should be used for all through penetrations.
- 2) The fire alarm system shall comply with NFPA 72
- 3) Installation of a Fire Alarm system requires a Knox Box to be installed per city ordinance
- 4) All construction shall comply with NFPA 101
- 5) The sprinkler system shall be installed in accordance with NFPA 13.
- 6) Application requires State Fire Marshal approval.

Comments:

10/25/2007-jmb: Spoke with Lou Posada, architect for information on projected staff occupancy, siting the codes specific to Portland adoption, gender ID on bathroom facilities, and wall type at for areas covered under the shell permit around the electrical and tele/data rooms.

11/6/2007-jmb: Received letter from Lou P., via email. I replied requesting info on the gender ID and the water fountain, which I had overlooked originally.

11/13/2007-jmb: Received email from Lou P. With the details on the bathroom ID and water fountain location, ok to issue

9/27/2007-ldobson: Spoke with Rick Stoughton when he submitted the permit app still need certificate of design form

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DATE

PHO