

**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> 08-1032	<b>Issue Date:</b>	<b>CBL:</b> 075 A005001
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<b>Location of Construction:</b> 195 FORE RIVER PKWY	<b>Owner Name:</b> LANDMARK HEALTHCARE FACI	<b>Owner Address:</b> 839 NORTH JEFFERSON	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Ledgewood Construction	<b>Contractor Address:</b> 27 Maine St. So. Portland	<b>Phone</b> 2077671866
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Generator	<b>Zone:</b>

<b>Past Use:</b> Commercial - Fore River Medical Complex, LLC	<b>Proposed Use:</b> Commercial - Fore River Medical Complex, LLC - install a permanent 25 kw generator on pad w/ screening	<b>Permit Fee:</b> \$300.00	<b>Cost of Work:</b> \$28,000.00	<b>CEO District:</b> 3
		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: Type
<b>Proposed Project Description:</b> install a permanent 25 kw generator on pad w/ screening		Signature:		Signature:
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature:		Date:		

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 08/19/2008	<b>Zoning Approval</b>		
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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..	<b>Special Zone or Reviews</b> <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"/>	<b>Zoning Appeal</b> <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	<b>Historic Preservation</b> <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

<b>Location of Construction:</b> 195 FORE RIVER PKWY	<b>Owner Name:</b> LANDMARK HEALTHCARE FACI	<b>Owner Address:</b> 839 NORTH JEFFERSON	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Ledgewood Construction	<b>Contractor Address:</b> 27 Maine St. So. Portland	<b>Phone</b> 2077671866
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Generator	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 08/22/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) All efforts shall be taken to mitigate the noise created when there is testing of this emergency generator.			
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 09/04/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Separate permits are required for any electrical installations.			
<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Capt Greg Cass	<b>Approval Date:</b> 08/25/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>

<b>Comments:</b>
8/22/2008-mes: Wait for Planning approvals before issuing permit
9/4/2008-jmb: Waiting for planning approvals
9/4/2008-gg: received partial granted site exemption as of 9/4/08. Gg gfiled with permit (Jeanie).

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