	y of Portland, Maine - Build	0			Pe	rmit No: 09-1341	Issue Dat	e:	CBL: 075 A0	05001	
	Congress Street, 04101 Tel: (Fax: (2	207) 874-8716						05001	
	ation of Construction: 5 FORE RIVER PKWY Suite 470	Owner Name: LANDMARK	Owner Name: LANDMARK HEALTHCARE FACI			Owner Address: 839 NORTH JEFFERSON			Phone:		
Bus	iness Name:	Contractor Name: Ledgewood Construction			Contractor Address: 27 Maine St. So. Portland Permit Type: Commercial				Phone		
T	/P!N								2077671866		
Lessee/Buyer's Name Phone:									Zone:		
	t Use:	Proposed Use:			Permit Fee: Cost of Wor						
	mmercial - Fore River Medical	Commercial - l				\$945.00	\$84,0	70.00	3		
	mplex, LLC Suite 470 Vacant		- Dr. David Keller O Tenant Fit-up for Dr. MD		FIRE DEPT:		Approved	INSPE	CTION:		
Spa	ace	David Keller N				Denied		Use Group: Type		Type	
-	posed Project Description: ite 470 Tenant Fit-up for Dr. David					G:					
Su	tic 4/0 Tenant Pit-up for Dr. Davic	Renei MD				Signature: PEDESTRIAN ACTIVITIES DIST			Signature: FRICT (P.A.D.)		
					Action Approved Approv				ved w/Condition Denied		
					Signature:				Date:		
Permit Taken By: Date Applied For: Ldobson 11/23/2009					Zoning Approval						
1.	This permit application does not preclude the		Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting appli Federal Rules.		☐ Sh	noreland		☐ Varianc	e		☐ Not in Dist	rict or Landn	
2.	Building permits do not include septic or electrical work.	plumbing,	□w	etland	Miscellaneous				☐ Does Not Require Revie		
3.	Building permits are void if wor within six (6) months of the date	re void if work is not started		Condition	Conditional Us		Requires Re	view			
	within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			☐ Interpretatio			Approved				
		re void if work is not started hs of the date of issuance. hay invalidate a building work Site Plan Cond Subdivision Inter	Approv	Approved			Approved w/Condition				
			Maj [Mino MM	☐ Denied		☐ Denied				
		Date:			Date:		D	ate:			
I ha juri: shal	ereby certify that I am the owner of the owner of the owner of the owner is diction. In addition, if a permit for the authority to enter all and the permit.	to make this appl or work described	amed pro ication a d in the a	as his authorized application is iss	ne prop l agen sued, I	t and I agree to certify that the	to conform to ne code office	to all ap	oplicable laws othorized repre	of this esentative	
SIC	GNATURE OF APPLICAN			ADDRES	S		DATE	Ξ	I	РНО	

Location of Construction: 195 FORE RIVER PKWY Suite 470			Owner Address: EARE FACI 839 NORTH JEFFERSON		Phone:	
Business Name:	Contractor Name: Ledgewood Construction		Contractor Address: 27 Maine St. So. Portland	Phone 207767186	Phone 2077671866	
Lessee/Buyer's Name	Phone:		Permit Type: Commercial	Zone:		

Dept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 11/23/2009

Note: Ok to Issue: ✓

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

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Tammy Munson
 Approval Date:
 12/28/2009

 Note:
 Ok to Issue:
 ✓

- 1) Any duct work penetrating rated assemblies shall have fire dampers.
- All penetrations between units and common areas shall be protected with approved firestop materials and shall not reduce the required rating.
- 3) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.

 Dept:
 Fire
 Status:
 Approved with Conditions
 Reviewer:
 Capt Keith Gautreau
 Approval Date:
 12/03/2009

 Note:
 Ok to Issue:
 ✓

- 1) Emergency lights and exit signs are required. Emergency lights and exit signs are required to be labeled in relation to the panel and circuit.
- 2) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 3) A single source supplier should be used for all through penetrations.
- 4) Any cutting or welding operations require a seperate permit from the Fire dept.
- 5) All construction shall comply with NFPA 101
- 6) Application requires State Fire Marshal approval.

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