

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read  
Application And  
Notes, If Any,  
Attached

B DIVISION

PERMIT

Permit Number: 041134

This is to certify that University Of Maine/Consigli Construction  
has permission to Amendment to permit # 0401 for HVAC work.

AT 15 Surrenden St

114 A004001

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 written permission procured before this building or part thereof is altered or closed-in.  
HOURS 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. W. M. S.

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_


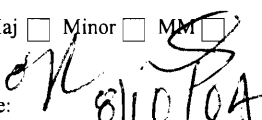
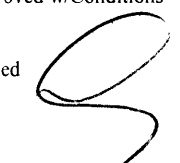
Department Name

Ch. J. Long 9/3/04  
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

<b>Permit No:</b> 04-1134		<b>Issue Date:</b>		<b>CBL:</b> 114 A004001	
<b>Location of Construction:</b> 15 Surrenden St		<b>Owner Name:</b> University Of Maine		<b>Owner Address:</b> 107 Maine Ave	
<b>Business Name:</b> n/a		<b>Contractor Name:</b> Consigli Construction		<b>Phone:</b> 207-780-4160	
<b>Lessee/Buyer's Name</b> n/a		<b>Phone:</b> n/a		<b>Contractor Address:</b> 50 Monument Square Suite 300 Portla	
<b>Past Use:</b> Vacant / Parking Lot		<b>Proposed Use:</b> Amendment to permit # 040130 / Drawing for the HVAC work performed under permit # 040130.		<b>Permit Type:</b> Amendment to Commercial	
<b>Proposed Project Description:</b> Amendment to permit # 040130 for HVAC work.		<b>Permit Fee:</b> \$30.00		<b>Cost of Work:</b> \$30.00	
		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: Type:	
		Signature: 		Signature:	
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied			
		Signature: Date:			
<b>Permit Taken By:</b> gg		<b>Date Applied For:</b> 08/10/2004		<b>Zoning Approval</b>	
<ol style="list-style-type: none"><li>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li><li>2. Building permits do not include plumbing, septic or electrical work.</li><li>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..</li></ol>		<b>Special Zone or Reviews</b>		<b>Zoning Appeal</b>	
		<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: 		<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:	
		<b>Historic Preservation</b>		<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: 	

**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

<b>Location of Construction:</b> 15 Surrenden St	<b>Owner Name:</b> University Of Maine	<b>Owner Address:</b> 107 Maine Ave	<b>Phone:</b> 207-780-4160
<b>Business Name:</b> n/a	<b>Contractor Name:</b> Consigli Construction	<b>Contractor Address:</b> 50 Monument Square Suite 300 Portlan	<b>Phone</b> 2077484173
<b>Lessee/Buyer's Name</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> Amendment to Commercial	<b>Zone:</b>

<b>Dept:</b> Zoning <b>Note:</b>	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 08/10/2004 <b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building <b>Note:</b>	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Mike Nugent	<b>Approval Date:</b> 09/03/2004 <b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Fire <b>Note:</b>	<b>Status:</b> Approved	<b>Reviewer:</b> Lt. MacDougal	<b>Approval Date:</b> 08/11/2004 <b>Ok to Issue:</b> <input checked="" type="checkbox"/>

**Comments:**

09/01/2004-mjn: Called Carol Potter w/ Fire Damper and Pump loading question...

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO

# Commercial Building Permit Application

Location/Address of Construction: <u>15 SURRENDEN ST. / BEDFORD ST.</u>			
Total Square Footage of Proposed Structure <u>32,285 SF</u>		Square Footage of Lot <u>89,555 SF</u>	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>114                  A                  004</u>	Owner: <u>UNIVERSITY OF MAINE</u> <u>SYSTEM c/o UNIVERSITY OF</u> <u>SOUTHERN MAINE</u>		Telephone: <u>207 780 4160</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>CAROL POTTER</u> <u>P.O. BOX 9300</u> <u>PORTLAND, ME 04104</u> <u>207 228 8124</u>		Cost Of Work: \$ <u>SEE BELOW</u>  Fee: \$ <u>SEE BELOW</u>
Current Specific use: _____			
Proposed Specific use: <u>500+ SEAT LECTURE HALL, OFFICES &amp; CLASSROOMS</u>			
Project description: <u>*THESE DRAWINGS DEPICT THE HVAC WORK THAT WILL BE</u> <u>PERFORMED UNDER PERMIT #04-0130 ISSUED 5-24-04,</u> <u>AND ARE SUBMITTED AS AN AMENDMENT TO THAT</u> <u>PERMIT.</u>			
Contractor's name, address & telephone: <u>CONSIGLI NORTHERN</u> <u>84 MIDDLE ST.</u> <u>PORTLAND, ME 04101</u> <u>207 774 3500</u>			
Who should we contact when the permit is ready: <u>CAROL POTTER</u>			
Mailing address: <u>USM</u> <u>P.O. BOX 9300</u> <u>PORTLAND, ME 04104</u> <span style="float: right;">Phone: <u>207 228 8124</u></span>			

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections office, room 315 City Hall or call 874-8703.

*gules*  
\$30.00

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Signature of applicant:

Carol M. Potter

Date:

8-10-04

**This is not a Permit; you may not commence any work until the Permit is issued.**