



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 335 BRIGHTON AVE 3rd Floor CBL 121 C009011

Issued to Mmc Realty Corp /Herbert Construction, LLC Date of Issue 07/21/2010

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 09-0509 has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Entire 3rd Floor
Brighton Medical Center

APPROVED OCCUPANCY

Medical Education Facility
Use Group B Type 1B
IBC-2003

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

7-21-10
.....
(Date)

Inspector

.....
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

CAPI K. Sautreau
7/28/10

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 090509

Please Read Application And Notes, If Any, Attached

This is to certify that MMC REALTY CORP /Herbert Construc
has permission to Renovate existing clinical space into a medical education facility 3rd floor, Office and class room areas
AT 335 BRIGHTON AVE 3rd Floor -C- 121 C009014

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 lathed or otherwise used-in. 2 HOUR 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. CHAD R. Gauthier

Health Dept. JUL 16 2009

Appeal Board

Other

CITY OF PORTLAND

Carrie Bowler 7/15/09
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

SCANNED

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0509	Issue Date:	CBL: 121 C009011
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Location of Construction: 335 BRIGHTON AVE 3rd Floor	Owner Name: MMC REALTY CORP	Owner Address: PO BOX 380546	Phone:
Business Name:	Contractor Name: Herbert Construction, LLC	Contractor Address: 9 Gould Road Lewiston	Phone: 2077832091
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: R-3

Past Use: Commercial - Maine Medical Ctr Brighton Campus	Proposed Use: Maine Medical Ctr Brighton Campus - Renovate existing clinical space into a medical education Facility 3rd floor, Office and class room areas	Permit Fee: \$17,460.00	Cost of Work: \$1,743,007.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied * See Conditions	INSPECTION: Use Group: <i>B</i> Type: <i>IB</i> <i>IBC-2003</i> Signature: <i>AMB 7/5/09</i>	

Proposed Project Description:
Renovate existing clinical space into a medical education Facility 3rd floor, Office and class room areas

Signature: *(KL)* Signature: *AMB 7/5/09*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: Ldobson	Date Applied For: 05/27/2009	Zoning Approval	
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied Date: <i>05/29/09</i>	Zoning Appeal <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: _____	Historic Preservation <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: _____
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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

12-17-09 OK - rough in elec/plum (AT) by Ely

3-04-10 Skills section -

Bathroom sec A skills lab

ASK Keith

Business form within
~~Does~~ or require form
what are our requirements
Elec + Mec only -

3-30-10

Electric Closet

① 3216 1MC -
Fire Rated walls OK 3 min

② 3317 CAGE OK

Check Electric Panel Room

Check Utility Room

Plumbing Test Sec A -

DR Room Is OK to close
Bathroom OK to "

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0509	Date Applied For: 05/27/2009	CBL: 121 C009011
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Location of Construction: 335 BRIGHTON AVE 3rd Floor	Owner Name: MMC REALTY CORP	Owner Address: PO BOX 380546	Phone:
Business Name:	Contractor Name: Herbert Construction, LLC	Contractor Address: 9 Gould Road Lewiston	Phone: (207) 783-2091
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Maine Medical Ctr Brighton Campus - Renovate existing clinical space into a medical education Facility 3rd floor, Office and class room areas	Proposed Project Description: Renovate existing clinical space into a medical education Facility 3rd floor, Office and class room areas
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/29/2009
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.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 07/15/2009
Note: **Ok to Issue:**

- 1) 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.
- 2) The official documents for the Statement of Special Inspections shall be submitted prior to ordering the structural steel.
- 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Keith Gautreau **Approval Date:** 06/10/2009
Note: **Ok to Issue:**

- 1) A separate Sprinkler System Permit is required per the Fire Department.
- 2) Fire alarm system requires a Masterbox connection per city ordinance.
- 3) Fire extinguishers required. Installation per NFPA 10
- 4) Walls in structure are to be labeled according to fire resistance rating. IE; 1 hr. / 2 hr. / smokeproof.
- 5) Emergency lights are required to be tested at the electrical panel.
- 6) Fire Alarm system shall be maintained. If system is to be off line over 4 hours a fire watch shall be in place. Dispatch notification required 874-8576.
- 7) A separate Fire Alarm System Permit is required per the Fire Department.
- 8) Emergency lights and exit signs are required
- 9) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.
- 10) Application requires State Fire Marshal approval.
- 11) The sprinkler system shall be installed in accordance with NFPA 13.
- 12) All construction shall comply with NFPA 101
- 13) The fire alarm system shall comply with NFPA 72 and Fire Department Technical Standard. A compliance letter is required.
- 14) Any cutting or welding operations require a separate permit from the Fire dept.



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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

15 A single source supplier should be used for all through penetrations.

16 The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.

17 The Standpipe system shall be installed in accordance with NFPA 14. A signed compliance letter will be required.

Comments:

6/16/2009-jmb: Left vmsg with Dan H. About statement of SI requirements for the structural modifications.

6/18/2009-jmb: Dan H. Called back and he will have Ron Rideout the engineer from SMRT contact me. Returned call from Ron and he will prepare the statement of inspections. The welding fabrication shop is not certified to perform work w/o SI, but Ron is very familiar with them and he will inspect at the shop and submit a report.

7/15/2009-jmb: Dan H. Left a vmsg about the statement of SI, it is still being developed and he has requested permit approval with this condition and they would like to start work Monday. I returned call and left a msg.

7/15/2009-jmb: Spoke with Dan H., he emailed a preliminary statement for the special inspections with a letter of guarantee that the official documentation will be submitted prior to ordering the steel. Ok to issue



BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling
- Final inspection required at completion of work.
- The final report of Special Inspections shall be submitted prior to the final inspection or the issuance of the Certificate of Occupancy


Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.



Signature of Applicant/Designee



Date



Signature of Inspections Official



Date



