ing Permit Application

al estate or personal property taxes or user charges on any gements must be made before permits of any kind are accepted.

MMC Brig	hton Medical	Center - 335 Brighton Ave, Po	ortlar	nd, ME		
al Square Footage of Proposed Structure/Area		Square Footage of Lot				
Tax Assessor's Chart, Block & Lot	Applicant *	plicant *must be owner, Lessee or Buye		Telephone:		
Chart# Block# Lot#	Name Maine Medical Center		207-662-2447		2447	
121	Address 22 Bramhall St.				2441	
12/ (2003 011	City, State & Zip Portland, ME 04102					
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address		Cost Of Work: \$ 500,000.00		00.00	
			C of O Fee: \$ 30 + 5,00			
	City, State &	City, State & Zip		Total Fee: \$ 5,030		
			10.41.00.4			
Current legal use (i.e. single family) Medical and Medical Office				RECEIVED		
If vacant, what was the previous use?						
Proposed Specific use: Same Is property part of a subdivision? No If yes, please name Project description:			MAR 2 6 2013			
Project description:		, ,1			INCHEUTION	
Project description: Abate existing asbestos ceiling, install new spray applied fire proofing and reinstall finishes. City of Portland Maine						
Contractor's name: Hebert Construction						
Address: 9 Gould Road						
City, State & Zip Lewiston. ME 04240			207-	783-2091	_ Telephone:	
Who should we contact when the permit is re	eady:Timoth	y R. Hebert 207-212-217	76		Telephone:	
Mailing address: 9 Gould Road, Lewiston, MI	E 04240					
Please submit all of the information			ist. I	Failure to		
do so will result in the automatic denial of your permit.						

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature

Timothy R. Hebert / Member

Date: March 25, 2013

This is not a permit; you may not commence ANY work until the permit is issue