

# City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-0306	Issue Date: APR 17 2004	CBL: 143 A065001
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Location of Construction: 978 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: Sheridan Corporation	Contractor Address: PO Box 359 Fairfield	Phone: 2074539311
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: RP

Past Use: Office Space	Proposed Use: Amendment to permit #04-0128: Office w/interior demolition prior to tenant fit-up	Permit Fee: \$111.00	Cost of Work: \$0.00	CEO District: 4
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: 8 Type: 5B	

Proposed Project Description: Amendment to permit #04-0128: Interior demolition prior to tenant fit-up	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:	Date:	

Permit Taken By: Idobson	Date Applied For: 03/24/2004	<b>Zoning Approval</b>	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<b>Special Zone or Reviews</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"/> <input type="checkbox"/> Denied Date: <i>4/1/04</i>	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved 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:
	<p><i>dc with conditions</i></p>		

### 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 \_\_\_\_\_

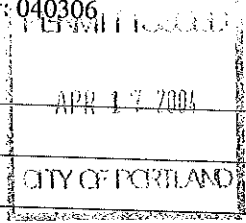
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ DATE \_\_\_\_\_ PHONE \_\_\_\_\_

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Permit Number: 040306



Please Read Application And Notes, If Any, Attached

This is to certify that Pickus Owen B/Sheridan Corporation  
has permission to Amendment to permit #04-0000000000: Interior alterations prior to tenant fit-up  
AT 978 Forest Ave Portland, ME 04103 143 A065001

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 when permission procured before this building or part thereof is entered or otherwise closed-in. 24 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. [Signature]  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

[Signature]  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit**

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

Permit No: 04-0307	Date Applied For: 03/24/2004	CBL: 143 A065001
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Location of Construction: 978 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St	Phone:
Business Name:	Contractor Name: Sheridan Corporation	Contractor Address: PO Box 359 Fairfield	Phone (207) 453-9311
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	

Proposed Use: Office Space; Amendment to permit #04-0128: Interior tenant fit-up, all three floors	Proposed Project Description: Amendment to permit #04-0128: Interior tenant fit-up, all three floors
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Dept: Zoning      Status: Approved with Conditions      Reviewer: Marge Schmuckal      Approval Date: 04/01/2004  
 Note:      Ok to Issue:

1) Separate permits shall be required for any new signage.

Dept: Building      Status: Approved      Reviewer: Mike Nugent      Approval Date: 04/14/2004  
 Note:      Ok to Issue:

Dept: Fire      Status: Approved      Reviewer: Lt. MacDougal      Approval Date: 04/06/2004  
 Note:      Ok to Issue:

**Comments:**

3/26/2004-kdunfey: amount paid reflects payment with original permit of \$1,419, which was for costs of \$146,306 (\$1344 total including base fee) plus \$75.00 for CofO, for total payment of \$1419.00. Total construction cost of \$275,000 should mean \$128 k haven't been paid for (\$1152 plus base of \$30), so this permit should be \$1182.00 They paid \$1077.00, so still owe us \$105.00.kwd



CITY OF PORTLAND  
BUILDING CODE CERTIFICATE  
389 Congress St., Room 315  
Portland, Maine 04101

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME  
MAR 24 2004  
RECEIVED  
143465

TO: Inspector of Buildings City of Portland, Maine  
Department of Planning & Urban Development  
Division of Housing & Community Service

FROM: Dana Sturtevant

RE: Certificate of Design

DATE: 2/14/2004


These plans and / or specifications covering construction work on:

980 FOREST AVENUE

PORTLAND, MAINE

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the BOCA National Building Code / 1999 (Fourteenth Edition) and local amendments.

(SEAL)

Signature: 

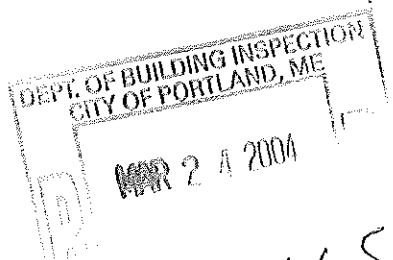
Title: Director of Engineering

Firm: The Sheridan Corporation

As per Maine State Law:

\$50,000.00 or more in new construction, repair expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

Address: P.O. Box 359, Fairfield, Me. 04937



143 A65

CITY OF PORTLAND  
BUILDING CODE CERTIFICATE  
389 Congress St., Room 315  
Portland, Maine 04101

ACCESSIBILITY CERTIFICATE

Designer: Dana Sturtevant

Address of Project: 980 Forest Avenue

Nature of Project: Upgrade of ADA issues & fire rating of Stair/Exit corridor.

~~also miscellaneous Mechanical/Electrical upgrades~~

No new tenant fit-up at this time,

Fire alarm system to be installed with this work.

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act.

Signature: \_\_\_\_\_

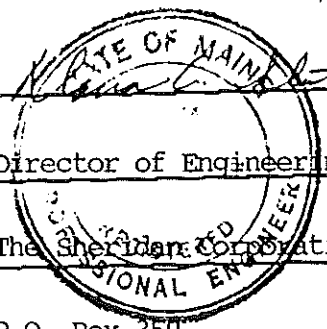
Title: Director of Engineering

Firm: The Sheridan Corporation

Address: P.O. Box 359

Fairfield, Me. 04937

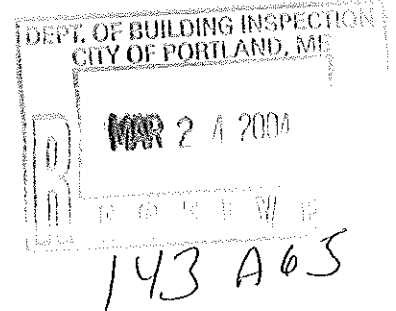
Phone: (207) 453-9311



(SEAL)



CITY OF PORTLAND  
 BUILDING CODE CERTIFICATE  
 389 Congress St., Room 315  
 Portland, Maine 04101



TO: Inspector of Buildings City of Portland, Maine  
 Department of Planning & Urban Development  
 Division of Housing & Community Service

FROM DESIGNER: Dana Sturtevant

DATE: February 12, 2004

Job Name: Office Building

Address of Construction: 980 Forest Avenue, existing building no structural changes

**THE BOCA NATIONAL BUILDING CODE / 1999 (FOURTEENTH EDITION)**

Construction project was designed according to the building code criteria listed below:

Building Code and Year 1999 Use Group Classification(s) Business

Type of Construction VI Bldg. Height \_\_\_\_\_ Bldg. Sq. Footage \_\_\_\_\_

Seismic Hazard Exposure Group \_\_\_\_\_ Seismic Performance Category \_\_\_\_\_

Roof Snow Load Per Sq. Ft. \_\_\_\_\_ Dead Load Per Sq. Ft. \_\_\_\_\_

Basic Wind Speed (mph) \_\_\_\_\_ Effective Velocity Pressure Per Sq. Ft. \_\_\_\_\_

Floor Live Load Per Sq. Ft. \_\_\_\_\_

Structure has full sprinkler system? Yes \_\_\_ No X Alarm System? Yes \_\_\_ No \_\_\_ <sup>to be added with this work</sup>

Sprinkler & Alarm systems must be installed according to BOCA and NFPA Standards with approval from the Portland Fire Department.

Is Structure being considered unlimited area building: Yes \_\_\_ No X

If mixed use, what subsection of 313 is being considered: \_\_\_\_\_

List Occupant loading for each room or space, designed into this project. one/100th

(SEAL)

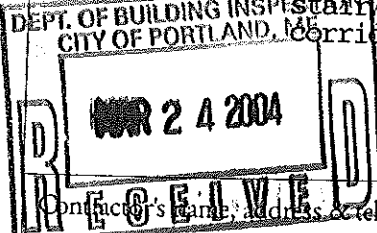
Dana Sturtevant  
 Designer's Stamp & Signature  
 PROFESSIONAL ENGINEER



040307

# Commercial Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

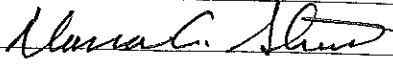
Location/Address of Construction: 980 Forest Avenue		
Total Square Footage of Proposed Structure 10,000 ft.	Square Footage of Lot 70,000 ft. +/-	
Tax Assessor's Chart, Block & Lot Chart# 143 Block# A Lot# 65	Owner: Owen Pickens Maine Centers for Healthcare	Telephone: (207) 857-9311
Lessee/Buyer's Name (If Applicable) n/a	Applicant name, address & telephone: The Sheridan Corporation P.O. Box 359 Fairfield, Me. 04937	Cost Of Work: \$275,000. Fee: \$2,466 + \$30. + \$2,496. less paid \$1,419. \$1,077.
Current Specific use: Business offices - Multiple tenants		
Proposed Specific use: same		
Project description: Renovate 3/4 of 2nd floor for two new tenants and upgrade corridors, stairways, and halls to meet BOCA standards and add rated doors and corridors for life safety plans enclosed.		
		
Contractor's name, address & telephone: The Sheridan Corporation, P.O. Box 359, Fairfield, Me.		
Who should we contact when the permit is ready: Dana Sturtévant, PE		
Mailing address: The Sheridan Corporation P.O. Box 359 Fairfield, Me. 04937		Phone: (207) 453-9311

Amendment to permit 04-0128

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

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.

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 of applicant: 	Date: 3/24/04
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

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

**CITY OF PORTLAND**  
**DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**

389 Congress Street  
 Portland, Maine 04101

**INVOICE FOR PERMIT FEES**

<b>Application No:</b> 4-0307	<b>Applicant:</b> Pickus Owen B
<b>Project Name:</b> Amendment to permit #04-0128: Int	<b>Location:</b> 978 Forest Ave
<b>CBL:</b> 143 A065001	<b>Development Type:</b>
<b>Invoice Date:</b> 03/26/2004	

<b>Previous Balance</b>	-	<b>Payment Received</b>	+	<b>Current Fees</b>	=	<b>Total Due</b>		<b>Payment Due Date</b>
\$0.00		\$0.00		\$1,182.00		\$105.00		On Receipt

**First Billing**

<b>Previous Balance</b>	<b>\$0.00</b>
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Fee Description	Qty	Fee Charge
Building Permit Fee First \$1000	1	\$30.00
Building Permit Fee Add'l \$1000	128	\$1,152.00
		\$1,182.00
	<b>Total Current Fees:</b>	<b>+ \$1,182.00</b>
	<b>Amount Due Now:</b>	<b>\$1,182.00</b>

Detach and remit with payment

**Bill to:** Pickus Owen B  
 2 Chabot St  
 Westbrook , ME 04092

CBL 143 A065001  
**Application No:** 4-0307  
**Invoice Date:** 03/26/2004  
**Invoice No:** 13302  
**Total Amt Due:** \$105.00  
**Payment Amount:**

Make checks payable to the *City of Portland*, ATTN: Karen Dunfey, 3rd Floor, 389 Congress Street, Portland, ME 04101





**The Sheridan Corporation**  
 PO Box 359, Fairfield, ME 04937  
 Phone (207) 453-9311, Fax (207) 453-2820  
 PO Box 689, Westbrook, ME 04098  
 Phone (207) 774-6138, Fax (207) 774-2885  
 www.sheridancorp.com

# LETTER OF TRANSMITTAL

DATE	3-303-04	JOB NO.	M-031051
ATTENTION	Mr. Michael Nugent, B. I.		
RE	Revised Plans for a Building Permit Application Maine Centers for Health Care 980 Forest Avenue Portland, Maine 04101		

TO City of Portland, Maine  
City Hall, Room 315  
389 Congress St. Portland, Me. 04101

GENTLEMEN:

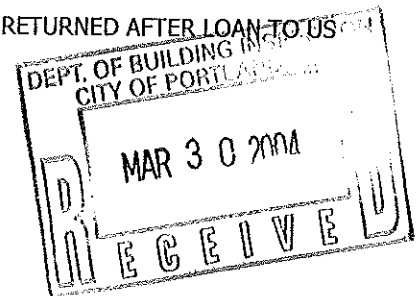
- WE ARE SENDING YOU  Attached  Under separate cover via Hand Carry the following items:  
 Shop drawings  Prints  Plans and Check  Samples  Specifications  
 Copy of letter  Change order

COPIES	DATE	NO.	DESCRIPTION
3	3-19-04	D1	Existing Conditions Plan @ Second Floor
3	3-19-04	D2	Existing Conditions Plan @ First Floor
3	3-19-04	D3	Existing Conditions Plan @Third Floor/Attic
3	3-29-04	D4	Second Floor Renovation Plan
3	3-29-04	D5	First Floor Renovation Plan
3	3-19-04	D6	Third Floor/Attic Renovation Plan
3	3-18-04	D7	Second Floor Demolition Plan
3	3-18-04	D8	First Floor Demolition Plan
3	3-18-04	D9	Third floor/Attic Demolition Plan
3	3-19-04	D10	Wall and Ceiling Renovation Details
3	3-23-04	D11	Room and Door Finish Schedule

THESE ARE TRANSMITTED as checked below:

- For approval  Approved as submitted  Resubmit \_\_\_\_\_ copies for approval  
 For your use  Approved as noted  Submit \_\_\_\_\_ copies for distribution  
 As requested  Returned for corrections  Return \_\_\_\_\_ corrected prints  
 For review and comment   
 FOR BIDS DUE \_\_\_\_\_ 20 \_\_\_\_\_  PRINTS RETURNED AFTER LOAN TO US

REMARKS:



SIGNED: [Signature]

This is to serve as a revised set of plans for this project. Plan sheets D4 and D5 were updated to reflect a mechanical handicap lift in lieu of the ramp and a sectional view of the rear landing/stair and railing detail. We enclose an additional \$105.00 to cover the cost of the building Permit as requested.

Thank you for your time and understanding.

Dana C. Sturtevant, P. E.

Engineering Manager

COPY TO: Ms. Connie Nadeau, MCHC, G. Owen, TSC

SIGNED: \_\_\_\_\_

*Dana C. Sturtevant, P.E.*

*If enclosures are not as noted, kindly notify us at once.*

**City of Portland, Maine - Building or Use Permit**

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

Permit No: 04-0306	Date Applied For: 03/24/2004	CBL: 143 A065001
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Location of Construction: 978 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St	Phone:
Business Name:	Contractor Name: Sheridan Corporation	Contractor Address: PO Box 359 Fairfield	Phone: (207) 453-9311
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	

Proposed Use: Amendment to permit #04-0128: Office w/interior demolition prior to tenant fit-up	Proposed Project Description: Amendment to permit #04-0128: Interior demolition prior to tenant fit-up
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Dept: Zoning      Status: Approved with Conditions      Reviewer: Marge Schmuckal      Approval Date: 04/01/2004  
 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      Reviewer: Mike Nugent      Approval Date: 04/14/2004  
 Note:      Ok to Issue:

Dept: Fire      Status: Approved      Reviewer: Lt. MacDougal      Approval Date: 04/06/2004  
 Note:      Ok to Issue:

**Comments:**

4/6/2004-kwd: original set of plans to MJN 4/6/2004. Kwd  
 3/30/2004-kwd: two sets of plans, one to MJN for simultaneous review. Kwd

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/17/2004

PRODUCER (207)781-3519 FAX (207)781-3907  
 Bradish-Young Insurance  
 202 U.S. Route One, Box 360  
 Foreside Place  
 Falmouth, ME 04105

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE NAIC #

INSURER A: Peerless Insurance	24198
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

INSURED Owen Pickus  
 Owen & Geraldine Pickus  
 2 Chabot St  
 Westbrook, ME 04092

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	BOP9845319 (FOREST AVE)	04/01/2004	04/01/2005	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
		AUTOMOBILE LIABILITY				PERSONAL & ADV INJURY	\$ 1,000,000
		<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				GENERAL AGGREGATE	\$ 2,000,000
		GARAGE LIABILITY				PRODUCTS - COMP/OP AGG	\$ 1,000,000
		<input type="checkbox"/> ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$
		EXCESS/UMBRELLA LIABILITY				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				BODILY INJURY (Per accident)	\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				PROPERTY DAMAGE (Per accident)	\$
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
						EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
							\$
						WC STATU-TORY LIMITS	
						OTH-ER	
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

113265

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 City of Portland is named Additional Insured regarding 980 Forest Avenue, Portland, ME property

## CERTIFICATE HOLDER

City of Portland  
 389 Congress Street  
 Portland, ME 04101

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Jean Bushnell/RJD

*Jean T. Bushnell*