

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

**CITY OF PORTLAND**

BUILDING DEPARTMENT

**PERMIT**

Permit Number: 090912

Please Read Application And Notes, If Any, Attached

This is to certify that WESTBROOK SEMINARY JUNIOR HIGH SCHOOL FOR WOMEN

has permission to Demolish Portion of existing building area

AT 714 STEVENS AVE City of Portland 145 A003001

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 lath or other work is used-in. 2 HOURLY 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. \_\_\_\_\_

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

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

Other \_\_\_\_\_  
Department Name

*Ch. M. [Signature]* 2/29/09  
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

Permit No: 09-0912	Issue Date: 8/28/09	CBL: 145 A003001
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Location of Construction: 714 STEVENS AVE	Owner Name: WESTBROOK SEMINARY & JU	Owner Address: 716 STEVENS AVE	Phone:
Business Name:	Contractor Name: Allied/Cook Construction	Contractor Address: PO Box 1396 Portland	Phone 2077722888
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: R-5

Past Use: Institutional UNE Pharmacy Connected to permit# 080088	Proposed Use: Institutional UNE Pharmacy Connected to permit# 080088 - Demolish Portion of existing loading area rebuild	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 5
Proposed Project Description: Demolish Portion of existing loading area rebuild		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A3/B Type: SB IBC-2003 Signature: <i>CL</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: Ldobson	Date Applied For: 08/25/2009	<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> 	<p><b>Special Zone or Reviews</b></p> <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: <i>OK - 8/27/09</i>	<p><b>Zoning Appeal</b></p> <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: _____	<p><b>Historic Preservation</b></p> <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: <i>8/28/09</i> <i>D. Andrews</i>
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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

**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.**

  X   **Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers**

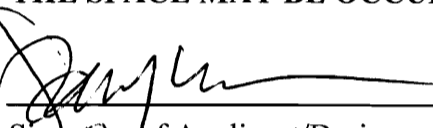
  X   **Re-Bar Schedule Inspection: Prior to pouring concrete**

  X   **Final inspection required at completion of work.**

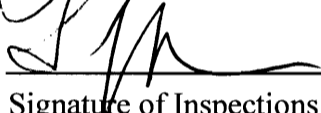
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

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

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

  
\_\_\_\_\_  
Signature of Applicant/Designee

  9/2/09    
Date

  
\_\_\_\_\_  
Signature of Inspections Official

  5/2/09    
Date



**CBL: 145 A003001**

**Building Permit #: 09-0912**

**City of Portland, Maine - Building or Use Permit**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 09-0912	<b>Date Applied For:</b> 08/25/2009	<b>CBL:</b> 145 A003001
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<b>Location of Construction:</b> 714 STEVENS AVE	<b>Owner Name:</b> WESTBROOK SEMINARY & JUN	<b>Owner Address:</b> 716 STEVENS AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Allied/Cook Construction	<b>Contractor Address:</b> PO Box 1396 Portland	<b>Phone:</b> (207) 772-2888
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Amendment to Commercial	

<b>Proposed Use:</b> Institutional UNE Pharmacy Connected to permit# 080088 - Demolish Portion of existing loading area rebuild	<b>Proposed Project Description:</b> Demolish Portion of existing loading area rebuild
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<b>Dept:</b> Historic	<b>Status:</b> Not Applicable	<b>Reviewer:</b> Deborah Andrews	<b>Approval Date:</b> 08/28/2009	<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 08/27/2009	<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 08/28/2009	<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>

1) Frost protection must be installed per the enclosed detail as discussed w/owner/contractor.  
 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

**Comments:**  
 8/25/2009-Ldobson: Gave to Chris to speak with marge about expediting classes starting and the noise work has to be done. Chris said he would give to marge.



# MODIFICATION

## General Building Permit Application

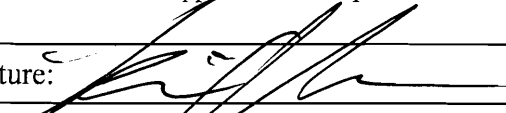
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>UNE-COLLEGE OF PHARMACY, 714 STEVENS AVE.</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>145 A 3</u>	Applicant * <b>must be owner, Lessee or Buyer</b> * Name <u>UNE</u> Address <u>11 HILLS BEACH RD.</u> City, State & Zip <u>BIDDEFORD, ME 04005</u>	Telephone:  <u>(207) 602-2253</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ _____ C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>INSTITUTIONAL</u> Number of Residential Units _____ If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>DENOLISH PORTION OF EXISTING LOADING AREA AUG 25 2009 REBUILD PER ATTACHED SKETCHES</u>		
Contractor's name: <u>ALLIED/COOK CONSTRUCTION</u>		
Address: <u>P.O. BOX 1396</u>		
City, State & Zip <u>PORTLAND, ME 04104</u>		Telephone: <u>(207) 772-2888</u>
Who should we contact when the permit is ready: <u>BENJAMIN A. LEVESQUE</u>		Telephone: <u>(207) 615-1830</u>
Mailing address: <u>SAME AS ABOVE</u>		

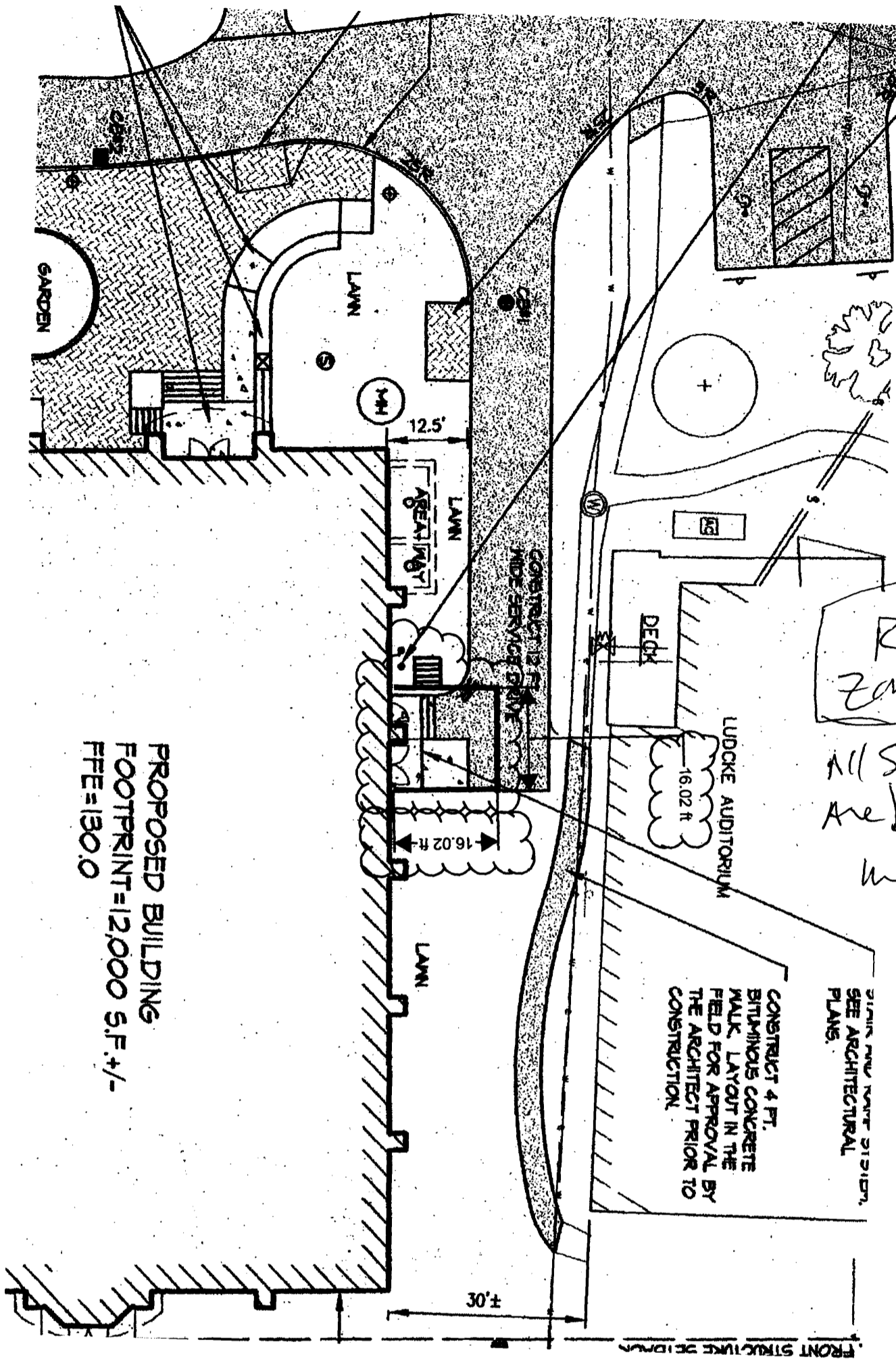
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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](http://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: 	Date: <u>8/25/09</u>
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This is not a permit; you may not commence ANY work until the permit is issue



R-5 Zone  
 All Setbacks are being met

PROPOSED BUILDING  
 FOOTPRINT=12,000 S.F. +/-  
 FFE=130.0

CONSTRUCT 4 FT. BITUMINOUS CONCRETE WALK LAYOUT IN THE FIELD FOR APPROVAL BY THE ARCHITECT PRIOR TO CONSTRUCTION.

FRONT STRUCTURE SETBACK

30'±

12.5'

16.02 ft

16.02 ft

GARDEN

LAWN

LAWN

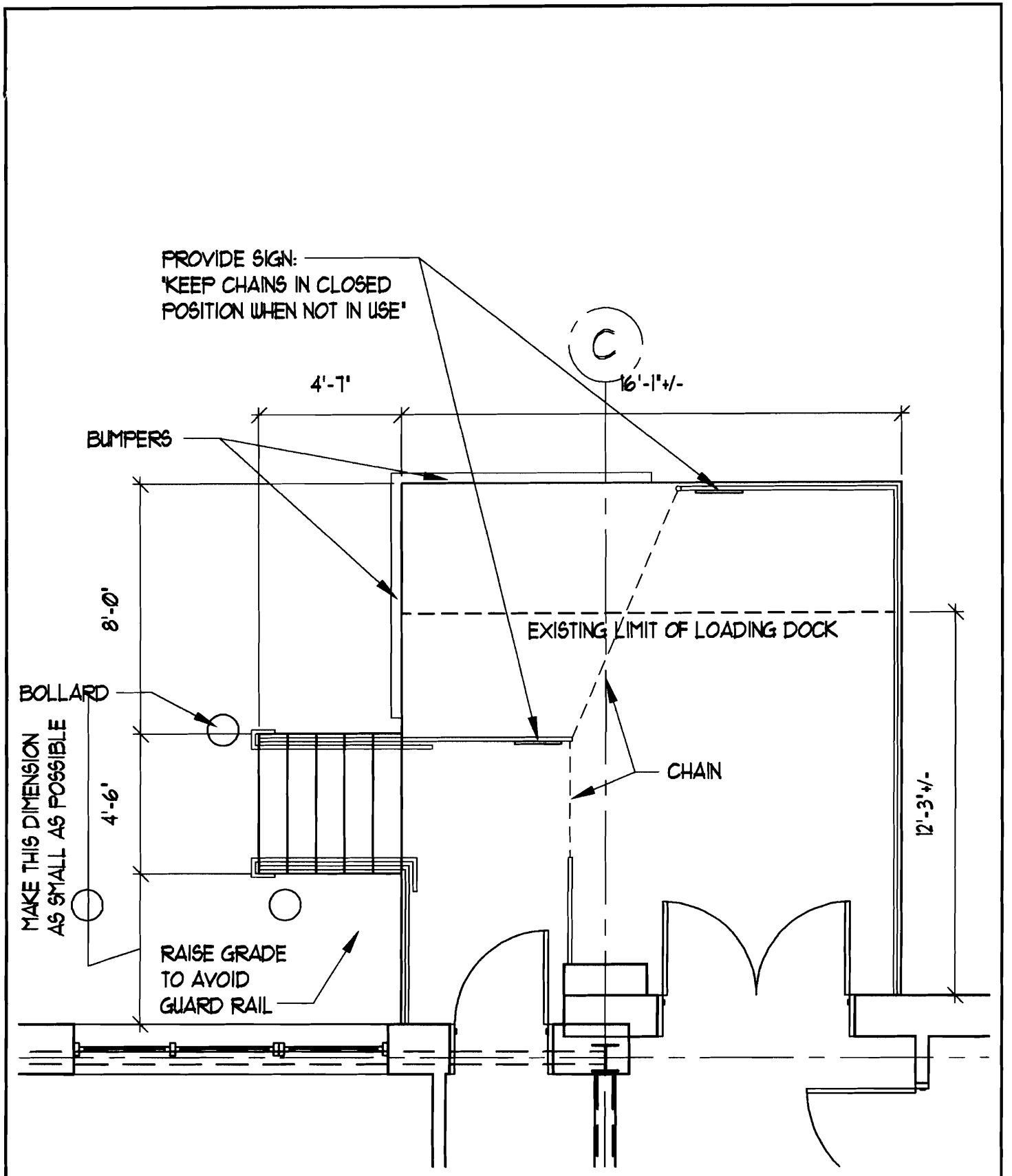
LAWN


DECK

LUDCKE AUDITORIUM

CONSTRUCT 18 FT. WIDE SERVICE DRIVE

SEE ARCHITECTURAL PLANS.



 PORT CITY ARCHITECTURE	UNIVERSITY OF NEW ENGLAND COLLEGE OF PHARMACY	LOADING DOCK		SK 141	
	. . .	Ref Dwg: A12	Scale: 1/4" = 1'-0"		Issued : 08/03/09
					Revised : -

# BECKER

structural engineers, inc.

75 York Street, Portland, ME 04101-4550  
Tel 207-879-1838 ■ Fax 207-879-1822

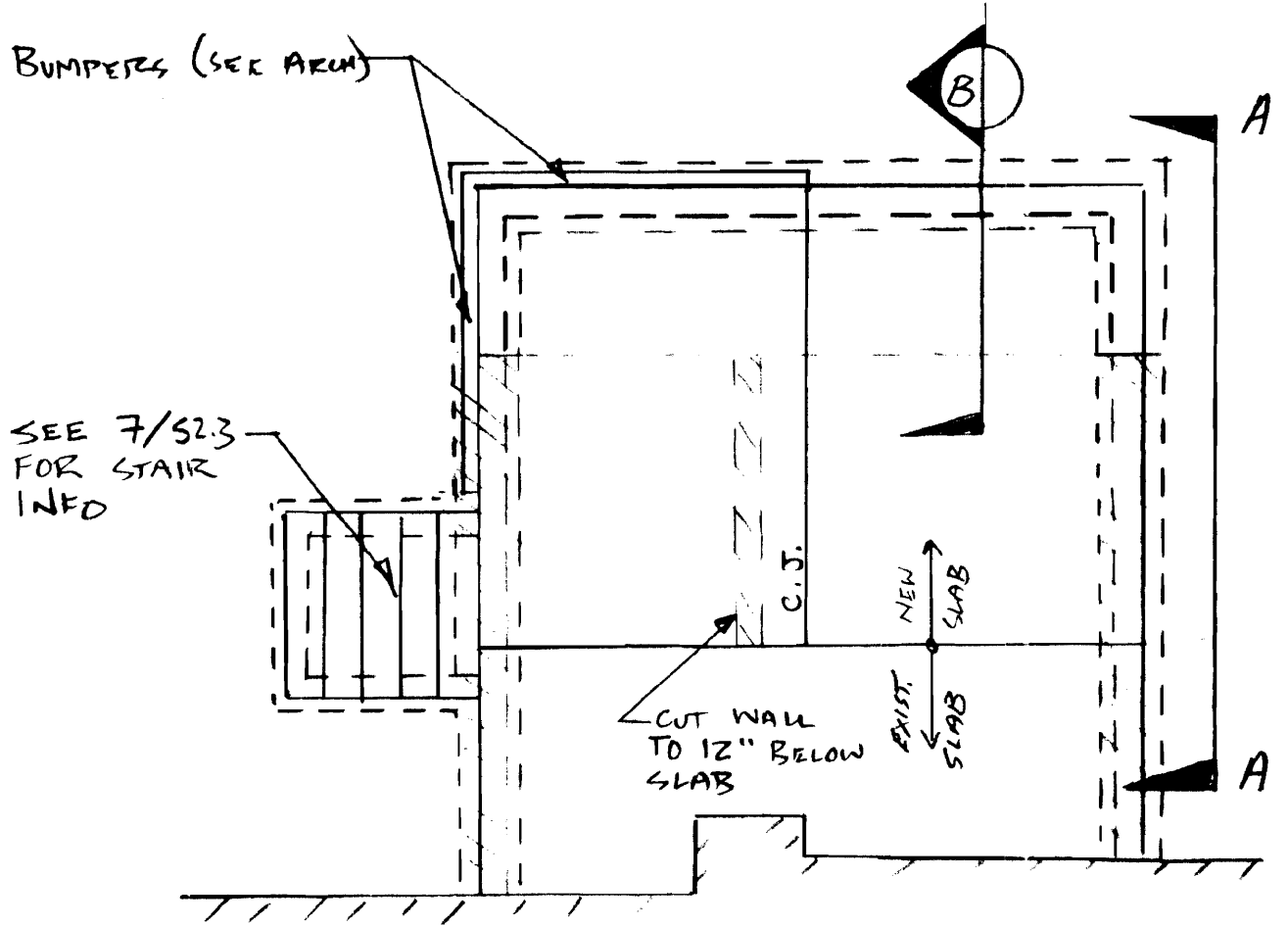
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W.O. \_\_\_\_\_ Sheet 1 Of 3

Calculated By: DSE Date 8-5-09

Checked By: \_\_\_\_\_ Date \_\_\_\_\_

SEE ARCH FOR PLAN DIMS



LOADING DOCK REVISIONS

N.T.S.



# BECKER

structural engineers, inc.

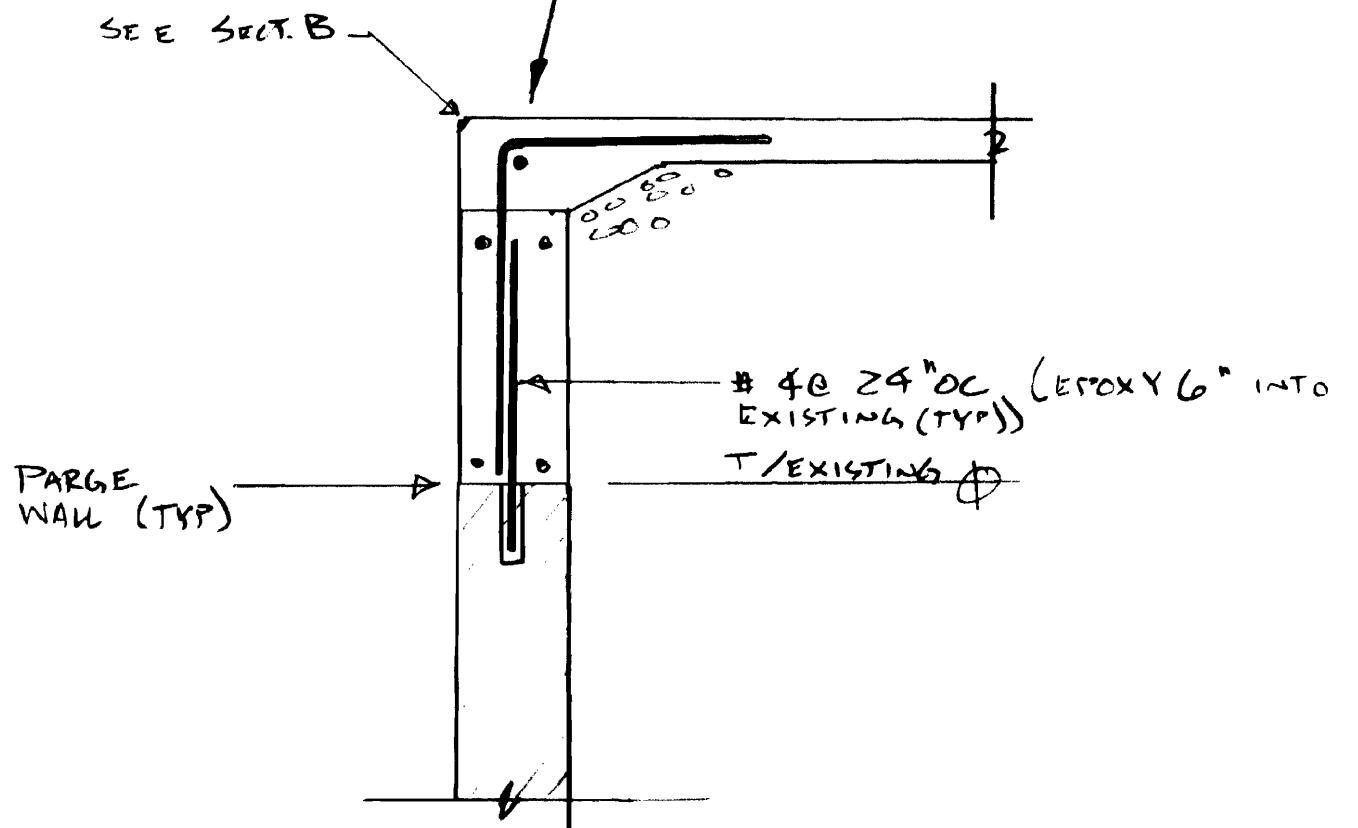
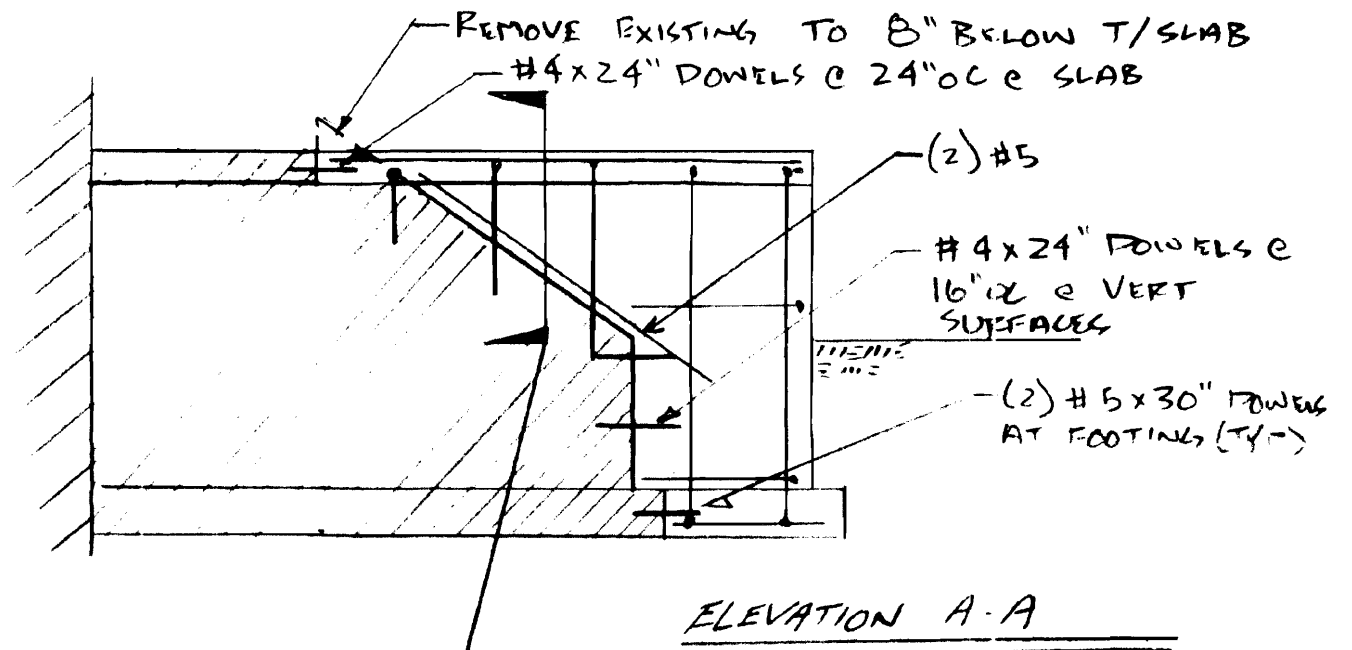
75 York Street, Portland, ME 04101-4550  
Tel 207-879-8388 ■ Fax 207-879-1822

Project UNE COP

W.O. \_\_\_\_\_ Sheet 2 Of 3

Calculated By: DSB Date 8-5-09

Checked By: \_\_\_\_\_ Date \_\_\_\_\_



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Project UNE COP

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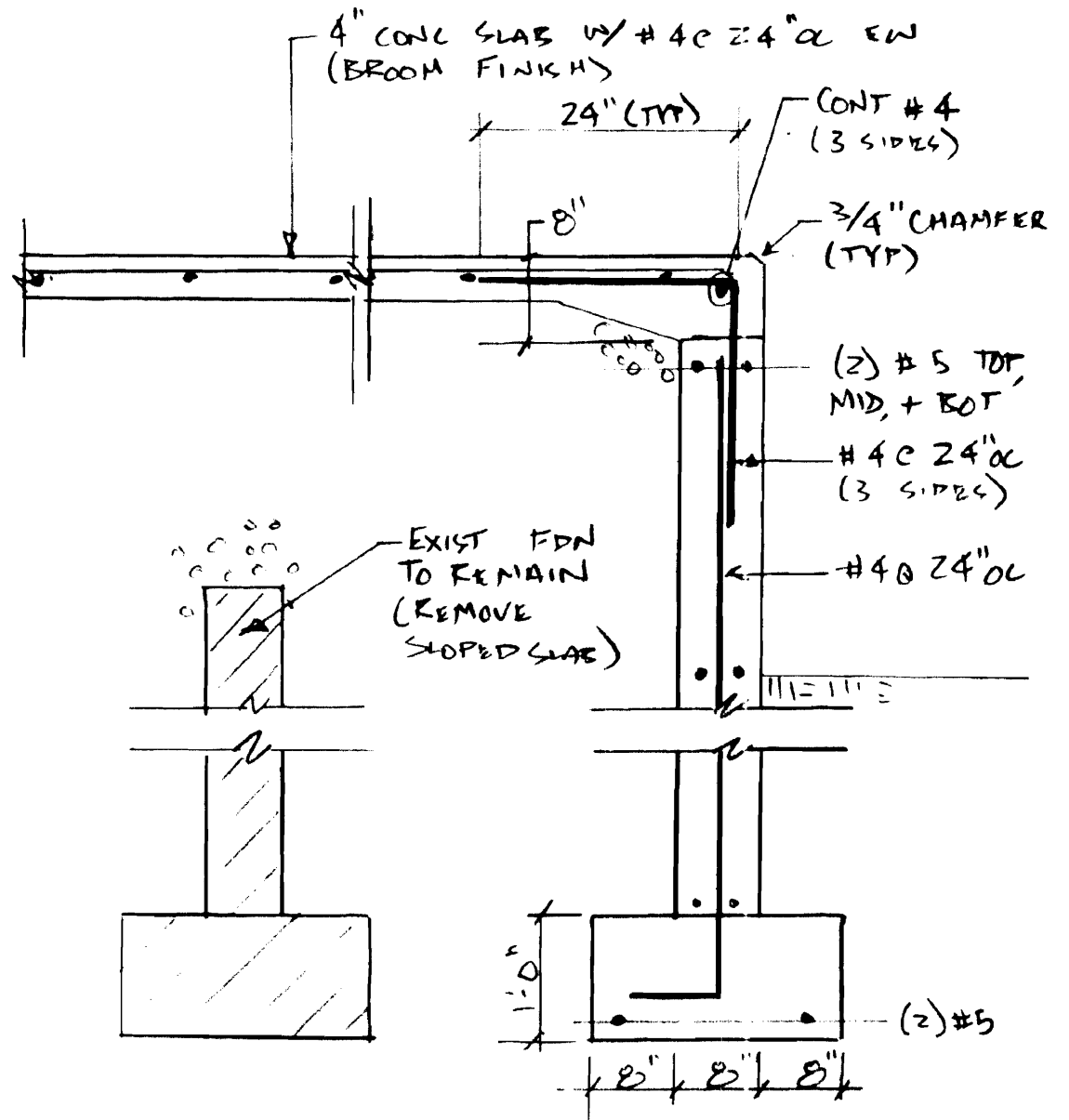
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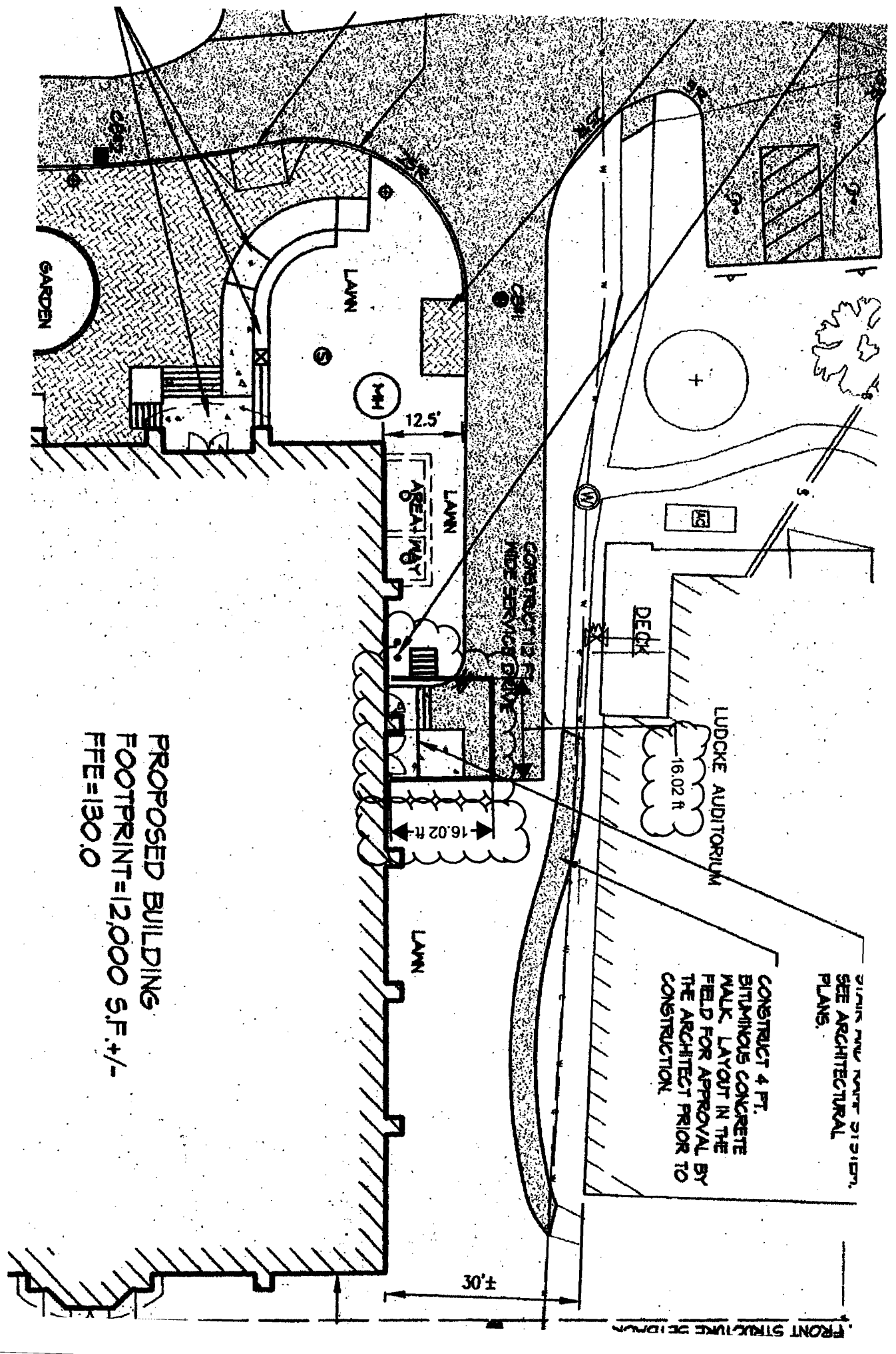
Date 8-5-09

Checked By: \_\_\_\_\_

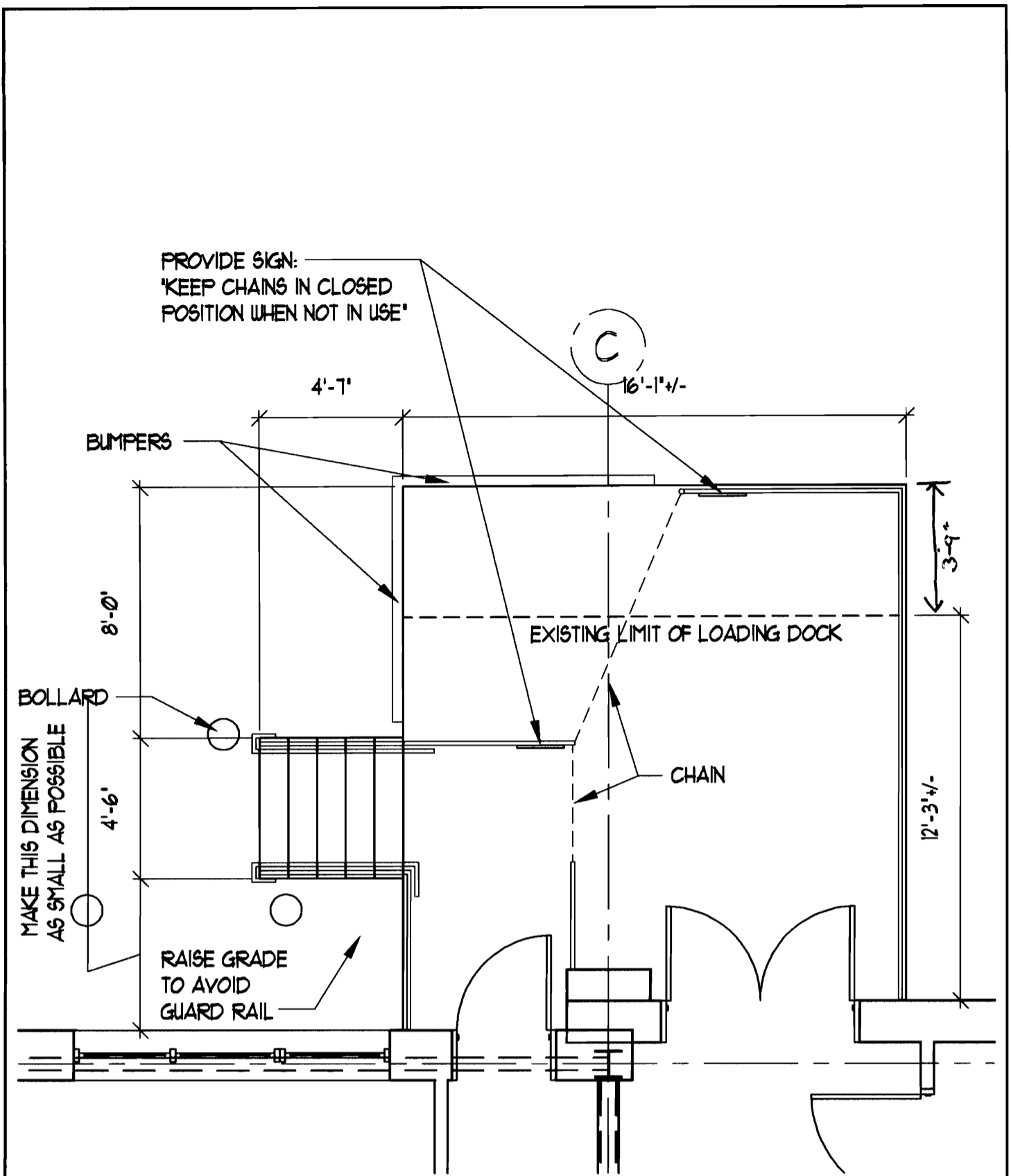
Date \_\_\_\_\_




## SECTION B



PROPOSED BUILDING  
 FOOTPRINT=12,000 S.F. +/-  
 FFE=130.0



 <p>PORT CITY ARCHITECTURE</p>	<p>UNIVERSITY OF NEW ENGLAND COLLEGE OF PHARMACY</p>		<p>LOADING DOCK</p>		<p>SK 141</p>
	<p>Ref Dwg: AL2</p>	<p>Scale: 1/4" = 1'-0"</p>	<p>Issued : 08/23/09</p>		
	<p>Revised : -</p>				

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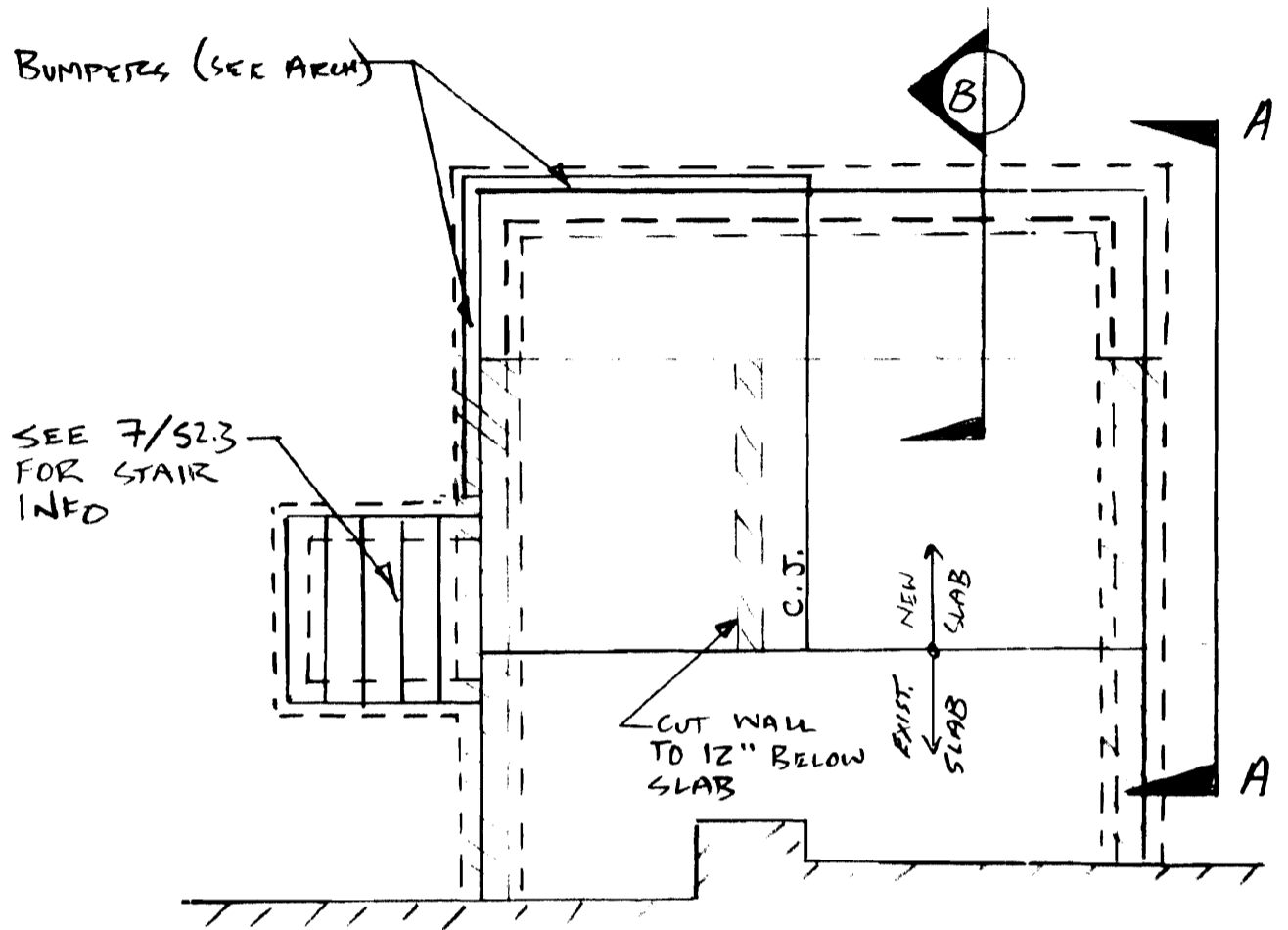
Project: UNE COP

W.O. \_\_\_\_\_ Sheet 1 of 3

Calculated By: DSE Date 8-5-09

Checked By: \_\_\_\_\_ Date \_\_\_\_\_

SEE ARCH FOR PLAN DIMS



LOADING DOCK REVISIONS

N.T.S.

# BECKER

structural engineers, inc.

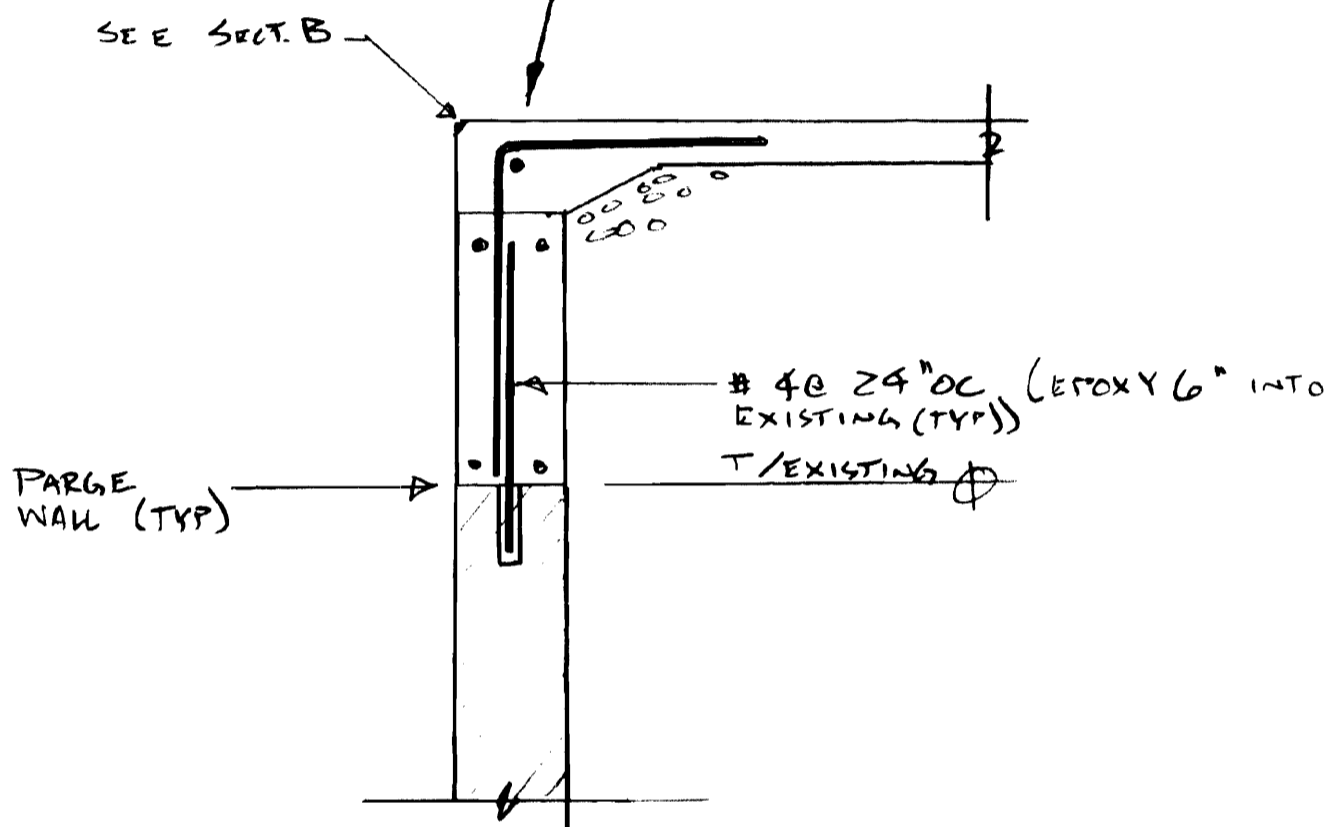
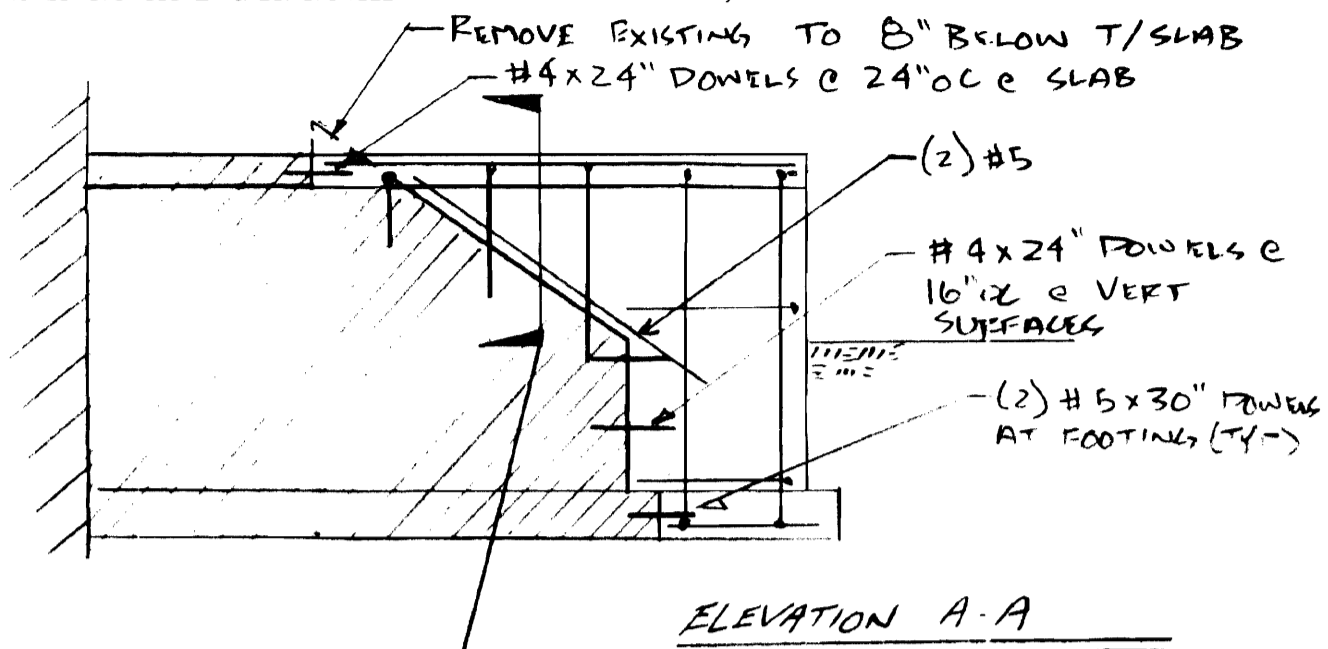
75 York Street, Portland, ME 04101-4550  
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Project UNE COP

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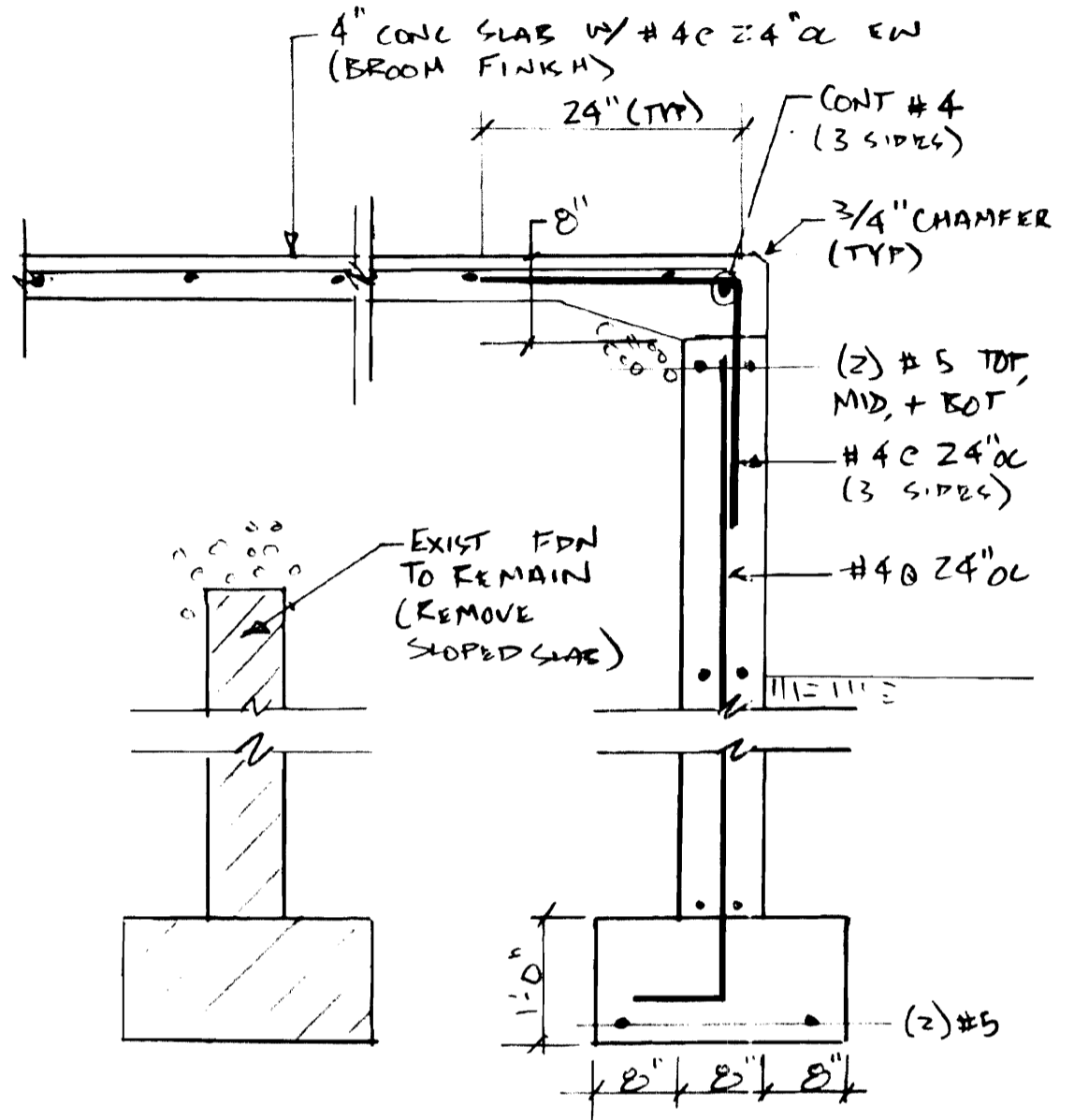
Sheet 3 Of 3

Calculated By: DSE

Date 8-5-09

Checked By: \_\_\_\_\_

Date \_\_\_\_\_



## SECTION B