

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 080815

This is to certify that CHARTER WESTGATE LLC/Langford & Low, Inc.

has permission to Mercy- Convert retail space to 11,000 sq ft Medical Office space

AT 1372 CONGRESS ST

191 BC19001

provided that the person or persons who obtain or accept this permit shall comply with all of the provisions of the Statutes of the State 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 is procured before this building or part thereof is altered or closed-in. 4 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]* *[Signature]*

Health Dept. _____

Appeal Board _____

Other _____

Department Name

James Burke 8/4/08
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: 08-0815	Issue Date:	CBL: 191 B019001
-----------------------	-------------	---------------------

Location of Construction: 1372 CONGRESS ST	Owner Name: CHARTER WESTGATE LLC	Owner Address: 800 WESTCHESTER AVE STE S-63	Phone:
Business Name:	Contractor Name: Langford & Low, Inc.	Contractor Address: PO Box 662 Portland	Phone: 2077975141
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: B-2

Past Use: Retail	Proposed Use: Medical office -Mercy- Convert retail space into 11,000 sq ft Medical Office space	Permit Fee: \$8,095.00	Cost of Work: \$800,000.00	CEO District: 3	
Proposed Project Description: Mercy- Convert retail space into 11,000 sq ft Medical Office space		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied			INSPECTION: Use Group: B Type: 2 IBC-2003 Signature: [Signature] Date: 8/4/08
		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: 07/02/2008	Zoning Approval		
<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 checked="" type="checkbox"/> Site Plan Exemption Applied For Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 7/17/08	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	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: [Signature]
				

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

ELECTRICAL PERMIT

City of Portland, Me.



PORT-08-111E

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 7-25-08
 Permit # 00084541
 CBL# 191-B-19

LOCATION: Westgate Plaza METER MAKE & # TBD
 CMP ACCOUNT # TBD OWNER Charter Realty
 TENANT Mercy Health Center PHONE # 203-227-2922

TOTAL EACH FEE

OUTLETS	250	Receptacles	100	Switches	30	Smoke Detector	.20	76.00
FIXTURES		Incandescent	210	Fluorescent		Strips	.20	42.00
SERVICES	1	Overhead		Underground		TTL AMPS <800	15.00	15.00
		Overhead		Underground		>800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS	25.00	
							25.00	
METERS	1	(number of)					1.00	1.00
MOTORS		(number of)					2.00	
RESID/COM		Electric units					1.00	
HEATING	2	oil/gas units		Interior	X	Exterior	5.00	10.00
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00	
		Insta-Hot		Water heaters		Fans	2.00	
		Dryers		Disposals		Dishwasher	2.00	
		Compactors		Spa		Washing Machine	2.00	
		Others (denote)					2.00	
MISC. (number of)		Air Cond/win					3.00	
		Air Cond/cent				Pools	10.00	
		HVAC		EMS		Thermostat	5.00	
		Signs					10.00	
		Alarms/res					5.00	
	1	Alarms/com				AUG 4 2008	15.00	15.00
		Heavy Duty(CRKT)					2.00	
		Circus/Carnv					25.00	
		Alterations					5.00	
		Fire Repairs					15.00	
	20	E Lights					1.00	20.00
		E Generators					20.00	
PANELS		Service	2	Remote	1	Main	4.00	12.00
TRANSFORMER		0-25 Kva					5.00	
		25-200 Kva					8.00	
		Over 200 Kva					10.00	
						TOTAL AMOUNT DUE		\$ 191.00
						MINIMUM FEE	45.00	

CONTRACTORS NAME ES Bowlos
 ADDRESS 45 Bradley Dr, Westbrook
 TELEPHONE 207 464 3706

MASTER LIC. # MC 60016185
 LIMITED LIC. # _____

SIGNATURE OF CONTRACTOR

Shawn Henderson

White Copy - Office

• Yellow Copy - Applicant

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 5-12-08
Permit # 2008-4302
CBL# 131 B-019

LOCATION: Westgate Shopping Center METER MAKE & # _____
CMP ACCOUNT # _____ OWNER _____
TENANT Westgate Shopping Center PHONE # _____
1364 Congress Street

						TOTAL EACH FEE	
OUTLETS		Receptacles		Switches		Smoke Detector	.20
FIXTURES	<u>16</u>	Incandescent		Fluorescent		Strips	.20
SERVICES		Overhead		Underground		TTL AMPS <800	15.00
		Overhead		Underground		>800	25.00
Temporary Service		Overhead		Underground		TTL AMPS	25.00
							25.00
METERS		(number of)					1.00
MOTORS		(number of)					2.00
RESID/COM		Electric units					1.00
HEATING		oil/gas units		Interior		Exterior	5.00
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00
		Insta-Hot		Water heaters		Fans	2.00
		Dryers		Disposals		Dishwasher	2.00
		Compactors		Spa		Washing Machine	2.00
		Others (denote)					2.00
MISC. (number of)		Air Cond/win					3.00
		Air Cond/cent				Pools	10.00
		HVAC		EMS		Thermostat	5.00
		Signs					10.00
		Alarms/res					5.00
		Alarms/com					15.00
		Heavy Duty(CRKT)					2.00
		Circus/Carnv					25.00
		Alterations					5.00
		Fire Repairs					15.00
		E Lights					1.00
		E Generators					20.00
PANELS		Service		Remote		Main	4.00
TRANSFORMER		0-25 Kva					5.00
		25-200 Kva					8.00
		Over 200 Kva					10.00
						TOTAL AMOUNT DUE	
						MINIMUM FEE	45.00
						MINIMUM FEE/COMMERCIAL	55.00

CONTRACTORS NAME Matt Flaherty MASTER LIC. # MC600 B650
ADDRESS 49 Haventys Way Portland, Me. LIMITED LIC. # _____
TELEPHONE 878-5864

SIGNATURE OF CONTRACTOR

Deborah Wallace

White Copy - Office

• Yellow Copy - Applicant



State of Maine

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION

ELECTRICIANS' EXAMINING BOARD

License # MC60018650

Be it known that: **M+R ELECTRIC INC**
has qualified as required by Title 32 MRSA Chapter 17 and is
licensed as an
ELECTRICAL COMPANY
affiliated with MATTHEW J. FLAHERTY

ISSUE DATE
Jan 25, 2007

Anne L. Head

EXPIRATION DATE
Feb 28, 2009

Director, Office of Licensing & Registration
Authorizing signature



Matt Flaherty
Owner

49 Havertys Way
Portland, ME 04103
business: 207.878.5864
mobile: 207.415.2957
matt@MandRelectric.com

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant

Date

PORTLAND

PERMIT # 10669 TOWN COPY

Date Permit Issued:

1/6/08
Local Plumbing Inspector Signature

\$ 158

☐ If Double Fee Charged

L.P.I. # 1069

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

- ☒ NEW PLUMBING
- ☐ RELOCATED PLUMBING

Type of Structure To Be Served:

- ☐ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☒ OTHER - SPECIFY

Plumbing To Be Installed By:

- ☒ MASTER PLUMBER
- ☐ OIL BURNERMAN
- ☐ MFG'D. HOUSING DEALER/MECHANIC
- ☐ PUBLIC UTILITY EMPLOYEE
- ☐ PROPERTY OWNER

LICENSE #

Hook-Up & Piping Relocation Maximum of 1 Hook-Up

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.

OR

HOOK-UP: to an existing subsurface wastewater disposal system.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE
[\$6.00]

Number

Column 2

Type of Fixture

Hosebibb / Sillcock

Floor Drain

Urinal

Drinking Fountain

Indirect Waste

Water Treatment Softener, Filter, etc.

Grease / Oil Separator

Roof Drain

Bidet

Other:

Fixtures (Subtotal)
Column 2

Number

Column 1

Type of Fixture

Bathtub (and Shower)

Shower (Separate)

Sink

Wash Basin

Water Closet (Toilet)

Clothes Washer

Dish Washer

Garbage Disposal

Laundry Tub

Water Heater

Fixtures (Subtotal)
Column 1

Fixtures (Subtotal)
Column 2

Total Fixtures

Fixture Fee

Transfer Fee

Hook-Up & Relocation Fee

Permit Fee
(Total)

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE