



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date March 30 1978
 Receipt and Permit number 2 10533

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 22 Bramhall St. - 4th floor
 OWNER'S NAME: Me. Medical Center ADDRESS: same

OUTLETS: (number of)

Lights	<u>7</u>	
Receptacles	<u>4</u>	
Switches	<u>2</u>	
Plugmold	_____	(number of feet)
TOTAL	_____	<u>3.00</u>

FIXTURES: (number of)

Incandescent	_____	
Fluorescent	_____	(Do not include strip fluorescent)
TOTAL	_____	
Strip fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	_____	
Temporary	_____	

METERS: (number of) _____

MOTORS: (number of)

Fractional	_____	
1 HP or over	_____	

RESIDENTIAL HEATING:

Oil or Gas (number of units)	_____	
Electric (number of rooms)	_____	

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler)	_____	
Oil or Gas (by separate units)	_____	
Electric (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	_____	Others (denote)	_____
TOTAL	_____		

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
Emergency Lights, battery	_____	
Emergency Generators	_____	

INSTALLATION FEE DUE: _____
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____
 FOR PERFORMING WORK WITHOUT A PERMIT (304-9) 3.00
TOTAL AMOUNT DUE: _____

INSPECTION:
 Will be ready on 3-30, 1978 Will Call _____

CONTRACTOR'S NAME: Rogers & Wentworth Inc.
 ADDRESS: 152 Main St. Yarmouth
 TEL.: 846-5391

MASTER LICENSE NO.: 99x511x 4280 SIGNATURE OF CONTRACTOR: Thomas Wentworth
 LIMITED LICENSE NO.: _____

INSPECTOR'S COPY



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS.

Date Dec 1, 19 77
 Receipt and Permit number A-03495
A-03500

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 22 Bramhall Street

OWNER'S NAME: Maine Medical Center ADDRESS: same

OUTLETS: (number of) 6

Lights	<u>50</u>	
Receptacles	<u>50</u>	
Switches	<u>10</u>	(number of feet)
Plugmold		
TOTAL		10.60

FIXTURES: (number of)

Incandescent		
Fluorescent	<u>450</u>	(Do not include strip fluorescent)
TOTAL		47.00
Strip Fluorescent, in feet		

SERVICES:

Permanent, total amperes	_____	
Temporary	_____	

METERS: (number of) _____

MOTORS: (number of)

Fractional	<u>25</u>	
1 HP or over		12.50

RESIDENTIAL HEATING:

Oil or Gas (number of units)	_____	
Electric (number of rooms)	_____	

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler)	_____	
Oil or Gas (by separate units)	_____	
Electric (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	_____	Others (denote)	_____
TOTAL			

MISCELLANEOUS: (number of) 1

Branch Panels	<u>1</u>	1.00
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
Emergency Lights, battery	_____	
Emergency Generators	_____	

INSTALLATION FEE DUE: _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____

FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____

FOR PERFORMING WORK WITHOUT A PERMIT (304-9) _____

TOTAL AMOUNT DUE: 71.10

INSPECTION:

Will be ready on _____, 19____; or Will Call xx

CONTRACTOR'S NAME: F. E. Hilton & Son

ADDRESS: P. O. Box 207 Nonmouth, Me.

TEL.: 933-2361

MASTER LICENSE NO.: 2027

LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:
Edward J. Hilton

INSPECTOR'S COPY

ELECTRICAL INSTALLATIONS

Permit Number 13510

Location 22 Bramhall St.

Owner Morris Good Center

Date of Permit 12-1-77

Final Inspection 4-20-78

By Inspector [Signature]

Permit Application Register Page No. 122

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 1-10-78 by Hilly

PROGRESS INSPECTIONS: 2-10-78 _____

2-22-78 AM _____

2-22-78 PM _____

3-3-78, 5-16-78 _____

3-14-78 _____

4-20-78 _____

CODE
COMPLIANCE
COMPLETED
DATE _____

DATE	REMARKS
<u>2-22-78</u>	<u>Told electrician to support boxes on second floor. (ok)</u>
<u>2-22-78</u>	<u>Question about exhaust fan on roof - not explosion proof. Will get explosion-proof motor.</u>

Morris Good Center

[Handwritten signature]

**CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form**

105

Applicant Medical Center
27 Bramhall Street
 Mailing Address Medical Service Building
 Proposed Use of Site
475,000 / 7,320
 Acreage of Site / Ground Floor Coverage

Date June 21, 1977
 Address of Proposed Site 27 Bramhall Street
64-3-1
 Site Identifier(s) from Assessors Maps
h-6
 Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No
 Board of Appeals Action Required: () Yes () No
 Planning Board Action Required: () Yes () No

Proposed Number of Floors
 Total Floor Area 7,320

Other Comments: _____
 Date Dept. Review Due: _____

FIRE DEPARTMENT REVIEW

6-27-77
(Date Received)

	ACCESS TO SITE	ACCESS TO STRUCTURES	SUFFICIENT VEHICLE TURNING ROOM	SAFETY HAZARDS	HYDRANT'S	SIAMASE CONNECTIONS	SUFFICIENCY OF WATER SUPPLY	OTHER	
APPROVED	✓	✓	✓	✓			✓		CONDITIONS SPECIFIED BELOW REASONS SPECIFIED BELOW
APPROVED CONDITIONALLY					✓				
DISAPPROVED									

REASONS: A new hydrant shall be placed as shown on site plan review map.

(Attach Separate Sheet if Necessary)

St. James F. Collins
SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY

105

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form

Post Office
Post Office Center
Bramhall Street
Post Office
Postal Service Building
 Use of Site
000 / 7,320
 of Site / Ground Floor Coverage

Date June 21, 1977
22 Bramhall Street
 Address of Proposed Site
64-C-1
 Site Identifier(s) from Assessors Maps
R-6
 Zoning of Proposed Site

Location Review (DEP) Required: () Yes () No
 Board of Appeals Action Required: () Yes () No
 Planning Board Action Required: () Yes () No

Proposed Number of Floors _____
 Total Floor Area 7,320

Other Comments: _____
 Date Dept. Review Due: _____

BUILDING DEPARTMENT SITE PLAN REVIEW
 (Does not include review of construction plans)

- Use does NOT comply with Zoning Ordinance
 Requires Board of Appeals Action
 Requires Planning Board/City Council Action

Explanation _____

- Use complies with Zoning Ordinance — Staff Review Below

Zoning:
 SPACE & BULK,
 as applicable

COMPLIES
 COMPLIES
 CONDITIONALLY
 DOES NOT
 COMPLY

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS
6/21/77			NO		OK	OK	OK	OK									

CONDITIONS SPECIFIED BELOW
 REASONS SPECIFIED BELOW

REASONS: _____

SIGNATURE OF REVIEWING STAFF/DATE
 BUILDING DEPARTMENT — ORIGINAL

105

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

Applicant: _____ Date: June 21, 1977
 Project: _____ Address of Proposed Site: 22 Bramhall Street
 Name of Building: Service Building Site Identifier(s) from Assessors Maps: 64-2-1
 Area of Site: _____ Zoning of Proposed Site: _____
 Ground Floor Coverage: 7,320
 Elevation Review (DEP) Required: () Yes () No Proposed Number of Floors: _____
 Appeals Action Required: () Yes () No Total Floor Area: 7,320
 Planning Board Action Required: () Yes () No

Other Comments: _____
 Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

6-23-77
 (Date Received)

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER	
APPROVED	N/A	N/A	N/A	N/A	N/A	N/A	N/A	✓	✓	✓	✓	-	N/A	N/A	✓	CONDITIONS SPECIFIED BELOW
APPROVED CONDITIONALLY																
DISAPPROVED																

REASONS: N/A = NOT APPLICABLE

(Attach Separate Sheet if Necessary)

John P. Ryan 6-24-77
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

RECEIVED JUN 2 2 1977

Date _____

Address of Proposed Site _____

Site Identifier(s) from Assessors Maps _____

Zoning of Proposed Site _____

Proposed Number of Floors _____

Total Floor Area _____

Use of Site: _____

Ground Floor Coverage _____

Site Location Review (DEP) Required: () Yes () No

Board of Appeals Action Required: () Yes () No

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW 6/23
 (Date Received)

- Major Development — Requires Planning Board Approval: Review Initiated
- Minor Development — Staff Review Below

	LOADING AREA	PARKING	CIRCULATION PATTERN	ACCESS	PEDESTRIAN WALKWAYS	SCREENING	LANDSCAPING	SPACE & BULK OF STRUCTURES	LIGHTING	CONFLICT WITH CITY PROJECTS	FINANCIAL CAPACITY	CHANGE IN SITE PLAN	CONDITIONS SPECIFIED BELOW	REASONS SPECIFIED BELOW
APPROVED														
APPROVED CONDITIONALLY														
DISAPPROVED														

REASONS: NOTE = ALTHOUGH THIS DEVELOPMENT OCCUPIES A PARCEL GREATER THAN 2 ACRES, AND IS THEREFORE A MAJOR DEVELOPMENT BY DEFINITION, CORPORATION COUNSEL HAS ADVISED THIS DEPARTMENT TO PROCESS THE PROPOSAL AS A MINOR SITE PLAN DUE TO AMBIGUITY IN THE LANGUAGE OF THE ORDINANCES THAT CONFUSES INTENT.

James O'Brien 6/23
 SIGNATURE OF REVIEWING STAFF/DATE
 PLANNING DEPARTMENT COPY



CITY OF PORTLAND

R. LOVELL BROWN
BUILDING AND INSPECTION DIRECTOR

July 5, 1977

22 Bramhall Street

Langford & Low
P. O. Box 662
Portland, Maine

cc to: Maine Medical Center
22 Bramhall Street
cc to: Fire Chief

Gentlemen:

A permit is issued herewith to construct a 122 x 60 foot addition to be used as a service building subject to the following Building Code and Fire Dept. requirements.

While the specs call for a complete fire alarm system as per drawings it is noted that the system shall be of a single zone for the entire building. The Fire Dept. requires the system to be zoned by floors therefore it could mean that 3 zones are required.

All passageway doors leading into the stairwells are to be classed B labeled fire doors.

There are to be illuminated exit signs at all exits with white lights on the outside if needed so that a person will not exit from a lighted exterior into the darkness.

The paint shop shown in the basement floor plan, in addition to the class B labeled door, needs a special vent therefrom so that any fumes will be discharged directly to the outside.

PERMIT ISSUED
WITH LETTER

Very truly yours,

Earle S. Smith
Plan Examiner

ESS/t

P. S. A new hydrant shall be placed as drawn on site plan review map.



CITY OF PORTLAND

JOSEPH E. McDONOUGH
FIRE CHIEF

July 1, 1977

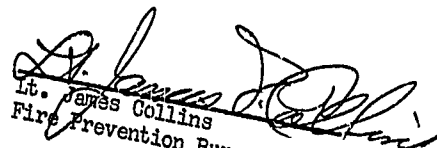
Maine Medical Center Service Building
22 Bramhall Street
Portland, Maine

Permit for above mentioned address is granted by the Department with the following requirements:

1. Building to have complete automatic alarm system and be zoned by floors, three zones.
2. All passage ways from the building to the existing building to be protected with 1 hour fire doors and self closers.
3. Illuminated exit signs at all exits.

cc: Fire Prevention Bureau
Building Inspection Department

JC/dw


Lt. James Collins
Fire Prevention Bureau

22 Branhall Street

March 29, 1977

Bailey Sign's, Inc.
553 Commercial Street
Portland ME

cc: Maine Medical Center
Attn Donald Bail
22 Branhall St; Portland

Dear Sir

An inspection of the property at the above-named location today reveals that two pole signs have been erected without first obtaining a permit from this department. This is not allowable under the Portland building code.

It is necessary, therefore, that both of these signs be removed, and if a sign has been installed at 830 Congress St. (see our letter to you March 21, 1977) this too will need to be taken down.

We will need plans of these signs showing the foundation, the structural members of the signs, projection over the street line, if any, height above the grade, the wording of the sign and the type of face used. Your application states plastic facing; a strictly plastic face is not allowable under the code. We will also need a plot plan showing the location of the signs and drawn with a ruler, distance from the street line to the sign(s), thereon to the streets they abutt.

It is therefore necessary that these signs be removed at once and not later than April 12, 1977 with new plans submitted indicating new information listed above.

It is hoped that we have your cooperation in this matter such that further action by this department will not be necessary.

Very truly yours

A. Allan Soule
Assistant Director

AAS:cm

330 Congress Street

March 25, 1977

Bailey's Sign, Inc.
553 Commercial Street
Portland ME

Gentlemen

In checking your application to erect a pole sign 3'x5' for the Maine Medical Center, it is our understanding that this sign will be on property that is not accessory to the hospital and owned by them. If this is the case, then we will be unable to approve this sign.

If you will return your receipt for the fee paid we will be glad to have the City of Portland refund your money.

Very truly yours

A. Allan Soule
Assistant Director

AAS:cm



APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION _____ PORTLAND, MAINE, Mar. 22, 1977

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION *Cr of Bramhall St* 22 Bramhall St.

1. Owner's name and address Maine Medical Center Fire District #1 , #2
 2. Lessee's name and address Inc. Telephone

3. Contractor's name and address Bailey's Sign Co 55's Commercial St. Telephone 774-2843
 4. Architect

Proposed use of building

Last use

Material

Other buildings on same lot

Estimated contractual cost \$

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451 To erect a pole sign 4'x8' as per plan illuminated - non flashing - plastic
 Dwelling Ext. 234
 Garage

Masonry Bldg. Stamp of Special Conditions.
 Metal Bldg.
 Alterations

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

DETAILS OF NEW WORK

Is any plumbing involved in this work?

Is connection to be made to public sewer?

Has septic tank notice been sent?

Height average grade to top of plate

Size, front

Material of foundation

Kind of roof

No. of chimneys

Framing Lumber—Kind

Size Girder

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet,
 Joists and rafters: 1st floor, 2nd, 3rd, roof

On centers: 1st floor, 2nd, 3rd, roof

Maximum span: 1st floor, 2nd, 3rd, roof

If one story building with masonry walls, thickness of walls?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated ... number commercial cars to be accommodated ..

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: BUILDING INSPECTION—PLAN EXAMINER

DATE

MISCELLANEOUS

ZONING:

BUILDING CODE:

Fire Dept.:

Health Dept.:

Others:

Will work require disturbing of any tree on a public street? ..

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Signature of Applicant Bruce Bailey Phone #

Type Name of above Bruce Bailey 1 2 3 4

FIELD INSPECTOR'S COPY

Other and Address

RECEIVED
APR 11 1977
DEPT. OF BLDG. INSP.
CITY OF PORTLAND

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED
TO BE ERECTED PROJECTING OVER A PUBLIC SIDEWALK FROM THE PREMISES
AT Maine Medical Center IN PORTLAND, MAINE

Maine Medical being the owner of the premises
at 22 Broomhall St. in Portland, Maine hereby
gives consent to the erection of a certain sign owned by
Maine Medical Center projecting over the public
sidewalk from said premises as described in application to the
Inspector of Buildings of Portland, Maine for a permit to cover
erection of said sign;

And in consideration of the issuance of said permit
Maine Medical Center, owner of said premises,
in event said sign shall cease to serve the purpose for which
it was erected or shall become dangerous and in event the owner
of said sign shall fail to remove said sign or make it permanently
safe in case the sign still serves the purpose for which it was
erected, hereby agrees for himself or itself, for his heirs,
its successors, and his or its assigns, to completely remove
said sign within ten days of notice from said Inspector of
Buildings that said sign is in such condition and of order from
him to remove it.

In Witness whereof, the owner of said premises has signed this
consent and agreement this 28th day of
March 1977.

Margaret W. Harris
Witness

John H. Cook
Owner



APPLICATION FOR PERMIT

PERMIT ISSUED

APR 25 1977

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION PORTLAND, MAINE, Mar. 22, 1977

CITY of PORTLAND

0243

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22 Bramhall St. Fire District #1 , #2

1. Owner's name and address Maine Medical Ctr. Telephone

2. Lessee's name and address

3. Contractor's name and address Bailey's Sign, Inc., 553 Commercial St. Telephone 774-2843

4. Architect

Specifications

Plans

No. of sheets

Proposed use of building

No. families

Last use

No. families

Material

No. stories

Heat

Style of roof

Roofing

Other buildings on same lot

Estimated contractual cost \$.....

Fee \$..... 11.50

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451 To erect a pole sign 3'x5' as per plan

Dwelling

Ext. 234 illuminated - non flashing-plastic

Garage

Masonry Bldg. Stamp of Special Conditions

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work?

Is any electrical work involved in this work?

Is connection to be made to public sewer?

If not, what is proposed for sewage?

Has septic tank notice been sent?

Form notice sent?

Height average grade to top of plate

Height average grade to highest point of roof

Size, front

depth

No. stories

solid or filled land?

earth or rock?

Material of foundation

Thickness, top

bottom

cellar

Kind of roof

Rise per foot

Roof covering

No. of chimneys

Material of chimneys

of lining

Kind of heat

fuel

Framing Lumber—Kind

Dressed or full size?

Corner posts

Sills

Size Girder

Columns under girders

Size

Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor

2nd

3rd

roof

On centers: 1st floor

2nd

3rd

roof

Maximum span: 1st floor

2nd

3rd

roof

If one story building with masonry walls, thickness of walls?

height?

IF A GARAGE

No. cars now accommodated on same lot

to be accommodated ... number commercial cars to be accommodated ...

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY:

DATE

MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER

ZONING: John 4/22/77 - Allen

BUILDING CODE:

Fire Dept.:

Health Dept.:

Others:

Will work require disturbing of any tree on a public street? ..

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? .. Yes

Signature of Applicant Bruce Bailey Phone #.....

Type Name of above Bruce Bailey 1 2 3 4

Other

and Address

FIELD INSPECTOR'S COPY



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP Z-702.0 0400

B.O.C.A. TYPE OF CONSTRUCTION

MAY 19 1976

ZONING LOCATION PORTLAND, MAINE, May 17, 1976

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22. Bramhall Street..... Fire District #1 #2

1. Owner's name and address .. Maine Medical Center..... Telephone

2. Lessee's name and address

3. Contractor's name and address .Brown Construction Inc. 253 Warren Ave. Portland Telephone 797-6152

4. Architect

Specifications Plans No. of sheets . 2 ..

Proposed use of building No. families

Last use No. families

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$. 25,000 Fee \$. 100.00

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451

Dwelling Ext. 234 Renovations to X-Ray Dept. as per plan.

Garage

Masonry Bldg.

Metal Bldg.

Alterations Stamp of Special Conditions

Demolitions

Change of Use

Other

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

Height average grade to top of plate Height average grade to highest point of roof

Size, front depth No. stories solid or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise per foot Roof covering

No. of chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor, 2nd, 3rd, roof

On centers: 1st floor, 2nd, 3rd, roof

Maximum span: 1st floor, 2nd, 3rd, roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated ... number commercial cars to be accommodated ...

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE

MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street? ..

ZONING:

BUILDING CODE: 9.14.8.5/12/76

Fire Dept.: Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

Health Dept.:

Others:

Signature of Applicant John Mazeiko Phone #

Type Name of above John Mazeiko 1 2 3 4

Other and Address

FIELD INSPECTOR'S COPY

NOTES

6-8-76 Started work - getting ready to
work by file boom - *M.S.*
7-13-76 Completed - *M.S.*

[Large handwritten scribble]

Permit No. 76/0400
Location 22 Bunnell
Owner M M P
Date of permit 5/19/76
Approved Alustrons (officers)
K. King Dept

Two columns of horizontal lines for notes or data entry.

[Small handwritten notes at the bottom of the columns]



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION _____ PORTLAND, MAINE, August 17, 1976

AUG 19 1976

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION .. 22. Bramhall. St. Fire District #1 , #2

1. Owner's name and address ... Maine Medical Ctr. Telephone

2. Lessee's name and address

3. Contractor's name and address . Scribner & Iverson 64 Union St. Telephone . 774-6167

4. Architect

Specifications

Plans

No. of sheets .. 3 ..

Proposed use of building ... hospital

No. families

Last use ... hospital

No. families

Material

No. stories

Heat

Style of roof

Roofing

Other buildings on same lot

Estimated contractual cost \$

Fee \$. 10.00

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451 To install air conditioning

Dwelling Ext. 234 in pharmacy as per plans

Garage ~~Scrubber~~

Masonry Bldg. 7 1/2 tons

Metal Bldg. Stamp of Special Conditions

Alterations

Demolitions

Change of Use

Other

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

Height average grade to top of plate Height average grade to highest point of roof

Size, front depth No. stories solid or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise per foot Roof covering

No. of chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor, 2nd, 3rd, roof

On centers: 1st floor, 2nd, 3rd, roof

Maximum span: 1st floor, 2nd, 3rd, roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated . . . number commercial cars to be accommodated . . .

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street? ..

ZONING:

BUILDING CODE: O.K. E.B. 7/15/76 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? . yes ..

Fire Dept.:

Health Dept.:

Others:

Signature of Applicant *William H. Iverson* Phone #

Type Name of above . Scribner & Iverson 1 2 3 4

Other

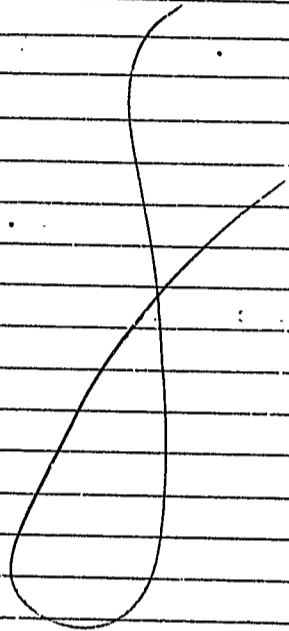
and Address

FIELD INSPECTOR'S COPY

NOTES

8/18/76 - No fire tested
walls. E.A.A.
9-9-76 Heavy installed - Affirmed that it penetrated
No fire walls - will replace ceiling panels - MS

Permit No. 76/741
Location 22 Bramhall St
Owner Maine Medical Ctr
Date of permit 8-19-76
Approved by: conditioning in pharmacy



July 6, 1976

Pearless Welding Co.
54 St. John St.

cc to: Maine Med. Center
22 Bramhall St.

RE: 22 Bramhall St.

Gentlemen,

Permit to erect fire escape as per plans is issued herewith
subject to the following Building Code requirements.

The double hung windows must provide an opening of at least
28" in the clear if they are to serve as a means of egress.

Very truly yours,

Earle S. Smith
Plan Examiner

ESS:mes

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP 058

JUL 7 1976

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION R-6 PORTLAND, MAINE, June 28, 1976

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22 Bramhall St. 1st bldg. Fire District #1 [], #2 []
1. Owner's name and address Maine Med. Ctr. same Telephone
2. Lessee's name and address Telephone
3. Contractor's name and address Peerless Welding Co. 54 St. Hahn St. Telephone 773-4772
4. Architect Specifications Plans No. of sheets
Proposed use of building hospital No. families
Last use No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ 2,700 Fee \$ 12.00

FIELD INSPECTOR—Mr. Marge

GENERAL DESCRIPTION

This application is for: @ 775-5451 Ext. 234

To erect fire escape as per plans.

Dwelling
Garage
Masonry Bldg.
Metal Bldg.
Alterations
Demolitions
Change of Use
Other

PERMIT ISSUED WITH LETTER

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 [] 2 [] 3 [x] 4 []
Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, feet depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber—Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor, 2nd, 3rd, roof
On centers: 1st floor, 2nd, 3rd, roof
Maximum span: 1st floor, 2nd, 3rd, roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE

MISCELLANEOUS

BUILDING INSPECTION—P. AN EXAMINER

Will work require disturbing of any tree on a public street? ..

ZONING: OK M.A.C.C. 7/1/76

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? .. yes

BUILDING CODE: O.K. E.S. 7/6/76

Fire Dept.:

Health Dept.:

Others:

Signature of Applicant Walter E. Watson Phone #

Type Name of above Walter Watson 1 [] 2 [] 3 [] 4 []

Other and Address

FIELD INSPECTOR'S COPY

NOTES

7-13-76 Haven't started yet - M.S.
 8-3-76 same - M.S.
 8-16-76 same - M.S.
 8-31-76 no change - M.S.
 9-16-76 completed as per plans - double h. studs
 in place - M.S.



No. 7-13586
 22 Beakell
 M.S. M.S.
 of permit 7/2/76
 approved fire escape

A large section of the page consisting of two vertical columns of horizontal lines, typical of a ledger or notebook. The left column is crossed out with a large 'X' drawn in ink.

PERMIT TO INSTALL PLUMBING

PERMIT NUMBER **4051**

Date Issued **March 26, 1975**
 Portland Plumbing Inspector
 By **ERNOLD R GOODWIN**

Address **22 Bramhall St.**
 Installation For: **Pathology Wing**
 Owner of Bldg **Maine Medical Ctr.**
 Owner's Address **same**
 Plumber **Andrew P. Iverson** Date: **3-26-75**

App. First Insp.
 Date
 By
 App. First Insp.
 Date
 By
 Type of Bldg.

- Commercial
- Residential
- Single
- Multi Family
- New Construction
- Remodeling

NEW	REPL		NO	FEE
2		SINKS	2	4.00
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		POUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		Base Fee		3.00
			TOTAL	7.00

Building and Inspection Services Dept.; Plumbing Inspection

APR 2 1975
 ERNOLD R. GOODWIN
 PORTLAND PLUMBING INSPECTOR

PERMIT TO INSTALL PLUMBING

PERMIT NUMBER **4043**

Date Issued **March 12, 1975**
 Portland Plumbing Inspector
 By **ERNOLD R GOODWIN**

Date **MAR 13 1975**
 By **ERNOLD R GOODWIN**
 App. Final Insp.

Date **APR 3 1975**
 By **ERNOLD R GOODWIN**
 Type of Bldg. Inspection

- Residential
- Single
- Multi Family
- New Construction
- Remodeling

Address **22 Bramhall St.**

Installation For **Medical**

Owner of Bldg **Maine Medical Center**

Owner's Address: **same**

Plumber **Andrew P. Iverson** Date: **3-12-75**

Plumber Address: **PO Box 27, Portland** NO. FEE

NEW	REPL		NO.	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
2		DRAINS FLOOR SURFACE	2	4.00
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		Base Fee		3.00
TOTAL				2 7.00

MAR 13 1975

Building and Inspection Services Dept.; Plumbing Inspection

October 6, 1975

Mr. Donald W. Bail
Administrative Engineer
Maine Medical Center
22 Bramhall Street
Portland, ME 04102

Dear Mr. Bail:

I am in receipt of your letter of October 3, 1975, pertaining to the request for consideration of an outside fire escape at Annex A (Rosenberg Wing).

I suggest you either make a sketch to submit to this office for review, or an appointment with the Fire Prevention Bureau and myself to review the conditions on the site. When we have found them to be satisfactory we may then entertain an application for permit for a metal fire escape.

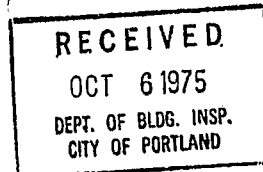
Very truly yours,

R. Lovell Brown
Director

RLB/mj



MAINE MEDICAL CENTER
PORTLAND, MAINE 04102



Mr. R. Lovell Brown
City Building Inspection Office
389 Congress Street
Portland, Maine

October 3, 1975

Dear Sir:

In the State Fire Marshall's inspection report dated December 9th, 1974 the Maine Medical Center was asked to provide a second means of egress from Annex A (so called Rosenberg Wing), which houses office-administrative personnel. We had considered making moves to vacate the area but now find this impossible. However, in considering ways to accomplish the egress we feel that building construction prevents an interior means of egress and therefore we must resort to an outside fire escape. BOCA Code indicates on page 623, 1970 edition, that this is not acceptable without local approval.

We are requesting permission for constructing means for an outside egress.

Yours truly,

Donald W. Bail
Administrative Engineer

DWB/rh
cc: E.J. McGeachey
State Fire Marshall's Office
File



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION

PORTLAND, MAINE, Mar. 7, 1975

0147

MAR 11 1975

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22 Bramhall St Fire District #1 [], #2 []
1. Owner's name and address ... Medical Center, same Telephone 797-2473
2. Lessee's name and address Telephone
3. Contractor's name and address Salter Corp., 108 Arsenal St., Augusta Telephone 622-7511
4. Architect Specifications Plans No. of sheets
Proposed use of building hospital No. families
Last use No. families
Material brick No. stories 10 Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ 55,000.00 Fee \$ 220.00

FIELD INSPECTOR - Mr. Cartwright GENERAL DESCRIPTION

This application is for: @ 775-5451 renovations on 8th floor computer room
Dwelling Ext. 234
Garage
Masonry Bldg.
Metal Bldg.
Alterations
Demolitions
Change of Use
Other

PERMIT ISSUED WITH LETTER

Stamp of Special Conditions PLANS FILED IN OTHER ROOM

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 [] 2 [] 3 [x] 4 []

Other: mail to Mr. Clement at St Josephs Manor (check with Nelson)

DETAILS OF NEW WORK

Is any plumbing involved in this work? YES Is any electrical work involved in this work? YES
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber—Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor, 2nd, 3rd, roof
On centers: 1st floor, 2nd, 3rd, roof
Maximum span: 1st floor, 2nd, 3rd, roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY:

DATE

MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER

Will work require disturbing of any tree on a public street?

ZONING:

BUILDING CODE:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? YES

Dept.:

h Dept.:

Signature of Applicant

Phone # 797-2473

Type Name of above Mr. Clement

1 [] 2 [] 3 [x] 4 []

Other (Clement) and Address

copy

March 11, 1975

22 Bramhall St.

Salter Corporation
108 Arsenal Street
Augusta, Maine

c.c. Maine Medical Center
22 Bramhall Street
Portland, Maine

Gentlemen:

Permit for renovations on the 8th floor Computer Room at the above address is issued herewith subject to the following Building Code Requirements.

The Computer Room is to be separated from the balance of the 8th floor by 3/4 hour fire resistant partitions. The double acting doors leading from the main corridor to the Computer Room are to be 3/4 hour fire resistant doors equipped with self-closing devices.

Very truly yours,

Earle S. Smith
Plan Examiner

PERMIT ISSUED
WITH LETTER

ESS:sk

c.c. Maine Medical Center



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

0144 MAR 11 1975

ZONING LOCATION

PORTLAND, MAINE, March 10, 1975

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22 Bramhall St. Fire District #1 #2

1. Owner's name and address Maine Medical Center same Telephone

2. Lessee's name and address

3. Contractor's name and address Fels Co. Inc. 390 Presumpscot St. Telephone 773-6431

4. Architect

Proposed use of building Hospital- Richards Wing Specifications Plans No. of sheets

Last use

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$

Fee \$ 20.

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451

Dwelling Ext. 234 **To install 25 ton air conditioning unit in Richards Wing - 8th floor as per plans on file**

Garage

Masonry Bldg.

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work?

Is connection to be made to public sewer?

Has septic tank notice been sent?

Height average grade to top of plate

Size, front depth No. stories solid or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise per foot Roof covering

No. of chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor 2nd 3rd roof

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 2nd 3rd roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot to be accommodated . . . number commercial cars to be accommodated . . .

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE 3/11/75 MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER

ZONING:

BUILDING CODE: OK NKC

Fire Dept.:

Health Dept.:

Others:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Signature of Applicant William H. Myer Phone #

Type Name of above

Other

and Address

FIELD INSPECTOR'S COPY

1111

NOTES

3-21-75 To enclose ducts (2) in
 corners & add Fire Dampers
 4-4-75 completed closing in of ducts
 4-24-75 wall going well
 completed by 5th May
 5-20-75 completed

Permit No. 75/1114
 Location 22 BRYAN HILL ST
 Owner MATHIE MEDICAL CENTER
 Date of permit 3/11/75
 Approved

Hospital - Richard - Inc.
 390 WINDING RD. - HOUSTON, TEXAS 77002

Richard Wind - 8th floor as per plans on
 file

Richard

Richard Wind - 8th floor as per plans on file



APPLICATION FOR PERMIT

Class of Building or Type of Structure _____
Portland, Maine, June 7, 1973

PERMIT ISSUED

JUN 27 1973
00692

CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, Maine, plans and specifications, if any submitted herewith and the following specifications:

Location 22 Bramhall St. Within Fire Limits? _____ Dist. No. _____
Owner's name and address Maine medical Center, SAME Telephone _____
Lessee's name and address _____ South Burlington, Vt. Telephone 05401
Contractor's name and address Vermont Heating & Ventilating - 1891 Williston Telephone _____
Architect _____ Specifications _____ Plans _____ No. of sheets _____
Proposed use of building hospital No. families _____
Last use _____ No. families _____
Material _____ No. stories _____ Heat _____ Style of roof _____ Roofing _____
Other buildings on same lot _____
Estimated cost \$ _____ Fee \$ 10.

General Description of New Work

To install air conditioning and ventilation in all four floors of new addition as per plans.

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** _____ contractor

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____
Has septic tank notice been sent? _____ Form notice sent? _____
Height average grade to top of plate _____ Height average grade to highest point of roof _____
Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
Kind of roof _____ Rise per foot _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
Framing Lumber-Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____
Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will work require disturbing of any tree on a public street? _____
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

APPROVED:

Vermont Heating & Ventilating Co.

CS 301

FILE COPY

Signature of owner By: James W. Root, Adm. Engr.



MAINE
MEDICAL
CENTER

PORTLAND, MAINE 04102

Office of the
Executive Director

April 7, 1971

R. Lovell Brown, Director
Department of Building Inspection
Portland, Maine

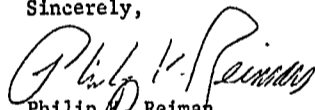
Dear Sir:

We have recently completed installation of a pair of swing Class "A" fire doors in the Pavilion corridor. They are to replace the roll drop door between the 1929 and 1956 Pavilions as per recommendation from the State Insurance Department.

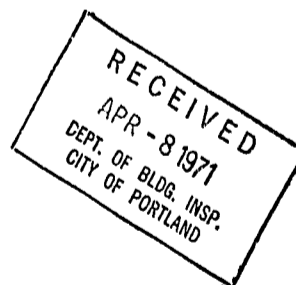
There has been considerable discussion relating to this project and we, therefore, respectfully request that your office check this installation for completeness and correctness. We will proceed immediately with the remaining doors upon receipt of approval.

By separate letter we are also asking approval by the State Fire Prevention Commissioner and the Portland Fire Department.

Sincerely,


Philip R. Reiman
Executive Director

PKR/jp





APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

0300

APR 29 1975

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION R-6 PORTLAND, MAINE,

23, 1975

CITY OF PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 22 Bramhall St. Fire District #1 , #2

1. Owner's name and address Maine Medical Center, same Telephone

2. Lessee's name and address

3. Contractor's name and address Fred I. Merrill, Inc., 187 Sawyer St. Telephone 799-1541

4. Architect

Specifications Plans No. of sheets

Proposed use of building

Last use

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 1,880 Fee \$ 8.00

FIELD INSPECTOR—Mr. Sam Hoffses GENERAL DESCRIPTION

This application is for: @ 775-5451 Ext. 234 To pour a cement slab ambulance off loading

Dwelling

Garage

Masonry Bldg. Stamp of Special Conditions

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4
Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

Height average grade to top of plate Height average grade to highest point of roof

Size, front depth No. stories solid or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise per foot Roof covering

No. of chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joints and rafters: 1st floor 2nd 3rd roof

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 2nd 3rd roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated ... number commercial cars to be accommodated ...

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street? ..

ZONING: N.A.

BUILDING CODE: O.K. E.A. 4/28/75 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes ...

Fire Dept.:

Health Dept.:

Others:

Signature of Applicant Phone #

Type Name of above Nat Clifford 1 2 3 4

FIELD INSPECTOR'S COPY

Other and Address

22 Bramhall Street
Maine Medical Center

August 27, 1969

Maine Medical Center
22 Bramhall Street
Att: Donald W. Bail, Plant Superintendent

Dear Mr. Bail:

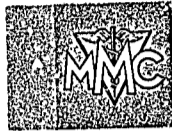
We have reviewed your request for changing fire shutter to fire door as per plans submitted with your application and are issuing permit for same with the following compliances.

The new door system shall meet the requirements of the Building Code of the City of Portland and in particular Section 803. It shall also meet the requirements of the National Fire Protection Association Pamphlet 80, latest edition. The complete door frame and hardware shall meet the requirements of the Underwriters Label and bear the label of same. Smoke and fire detection devices with magnetic hold backs should be installed on this type of door.

Very truly yours,

R. Lovell Brown
Director, Building & Inspection Services

RLB:m



MAINE
MEDICAL
CENTER

PORTLAND, MAINE 04102

(207) 775-3454

OFFICE OF
PLANT SUPERINTENDENT

April 23, 1969

City of Portland, Maine
Department of Building Inspection
Portland City Hall
Portland, Maine

Dear Sirs:

We have been requested by the State Insurance Department to replace the roll fire doors at the Maine Medical Center. With their cooperation and approval, we are proposing an installation of a pair of Class A, 3 hour, 1 3/4" doors sized at 3'6" per leaf and 6'8" high. The companion frame is 3 3/4" X 2 1/2" OA. This installation would be of hollow metal construction and have a vestibule latch set. It would bear the Underwriters label.

Two sketches are enclosed to clarify the installation and location. New work is shown in orange.

If this plan of installation is satisfactory, we request a permit to proceed.

Yours truly,

Donald W. Bail
Plant Superintendent

DWB/jp

cc: P. K. Reiman, Director, M. M. C.



R6 RESIDENCE ZONE

PERMIT ISSUED
AUG 27 1969
816
CITY of PORTLAND



APPLICATION FOR PERMIT

Class of Building or Type of Structure Second Class
Portland, Maine, April 23, 1969

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 Bramhall St. Within Fire Limits? _____ Dist. No. _____
 Owner's name and address Maine Medical Center, 22 Bramhall St. Telephone _____
 Lessee's name and address _____ Telephone _____
 Contractor's name and address owners Telephone _____
 Architect _____ Specifications _____ Plans yes No. of sheets 2
 Proposed use of building Hospital No. families _____
 Last use " No. families _____
 Material 2nd. class No. stories _____ Heat _____ Style of roof _____ Roofing _____
 Other buildings on same lot _____
 Estimated cost \$ 500.00 Fee \$ 3.00

General Description of New Work

To change from fire shutter to fire door as per plan. (at juncture of 1929 and 1956 bldgs.)

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. PERMIT TO BE ISSUED TO owners c/o Donald W. Bail

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Is connection to be made to public sewer? _____ If not, what is proposed for sewage? _____
 Has septic tank notice been sent? _____ Form notice sent? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
 Framing Lumber—Kind _____ Dressed or full size? _____ Corner posts _____ Sills _____
 Size Girder _____ Columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
 Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
 If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

OK. R.L.S. 8/26/69 w/letter.

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Maine Medical Center

INSPECTION COPY

Signature of owner

by:

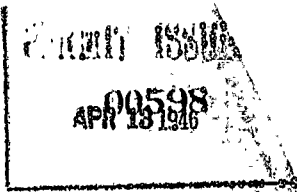
Donald W. Bail, Plant Sign

APARTMENT HOUSE ZONING

APPLICATION FOR PERMIT

Class of Building or Type of Structure Second Class

Portland, Maine, April 11, 1946



City INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~work~~ ~~erect~~ ~~work~~ ~~erect~~ ~~work~~ the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 Arsenal Street Within Fire Limits? yes Dist. No. 3

Owner's name and address Maine General Hospital, 22 Arsenal Street Telephone 4

Lessee's name and address _____ Telephone _____

Contractor's name and address owners Telephone _____

Architect _____ Specifications _____ Plans no No. of sheets _____

Proposed use of building Nurses' Home No. families _____

Last use _____ " " _____ No. families _____

Material brick No. stories 3 Heat _____ Style of roof _____ Roofing _____

Other buildings on same lot Hospital

Estimated cost \$ 350. Fee \$ 1.00

General Description of New Work

- To demolish several non-bearing partition, first floor, now forming bedrooms to make one large room for living room.
- To enlarge 3' opening between rooms to 8' opening - 4x6 header for support - non-bearing partition.
- To change existing window to door in rear of building - existing header for support. Width of opening not to be enlarged.

CERTIFICATE OF OCCUPANCY REQUIREMENT IS WAIVED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Is any plumbing work involved in this work? _____ Is any electrical work involved in this work? _____

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____

Framing lumber - Kind _____ Dressed or full size? _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____ to be accommodated _____ number commercial cars to be accommodated _____

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will work require disturbing of any tree on a public street? no

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

APPROVED:

Maine General Hospital

Signature of owner John C. Barber
By _____

INSPECTION COPY

AP 22 Arsenal Street-D

December 5, 1947

Maine General Hospital
22 Arsenal Street
Attn: Mr. Barker
Brown Construction Company
562 Congress Street

Subject: Building permit for alterations on 7th
floor of Maine General Hospital at 22 Arsenal
Street

Gentlemen:

Mr. Barker was good enough to show me these proposed changes at the building and explain the purpose of them—to separate the maternity rooms from the balance of the floor.

The effect of the new solid partition across the main corridor is to change the direction of means of egress so that persons would have to go through the elevator lobby to pass from corridor 701 to corridor 702. While this makes the means of egress connecting the two stairways less direct, the Building Code offers no objection to it.

We discovered that a doorway separating the two public corridors was evidently closed permanently with wallboard a long time ago. This opening is to be reopened, and thus the means of egress will not be changed materially from that which exists at the present time. However, these obstructions in the public corridor do obstruct a view of the exit lights indicating the exit stairway at either end of the wing. Inasmuch as the Building Code requires that all means of egress shall be fully equipped with exit lights in such manner that all persons will unerringly know what directional exit light on the side of new partition toward corridor 701 indicating the means of egress through the elevator lobby to corridor 702 and a similar directional exit light in corridor 702 indicating the doorway from that corridor to the elevator lobby, these exit lights to be controlled by the same switch as the other exit lights.

Please be governed accordingly.

Very truly yours,

Inspector of Buildings

/s

(A) APARTMENT HOUSE ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure First Class

Portland, Maine, December 4, 1947



PERMIT ISSUED
03292
DEC 5 1947

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter ~~repair~~ ~~erect~~ ~~install~~ the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 ~~Brown~~ Street Within Fire Limits? Yes Dist. No. 3
Owner's name and address Maine General Hospital, 22 Arsenal St. Telephone.....
Lessee's name and address..... Telephone.....
Contractor's name and address Brown Construction Co., 562 Congress St. Telephone 2-5893
Architect..... Specifications..... Plans YES No of sheets 1
Proposed use of building Hospital No. families.....
Last use..... " No. families.....
Material brick No. stories 7 Heat..... Style of roof..... Roofing.....
Other buildings on same lot.....
Estimated cost \$ 1,000. Fee \$ 2.00

General Description of New Work

To erect 4" cinder block partition, 7th floor, as per plan and
To erect metal cubicles as per plan

Permit issued with Letter

orig found for wing 29/10/27

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. PERMIT TO BE ISSUED TO Brown Construction Co.

Details of New Work

Is any plumbing involved in this work?..... Is any electrical work involved in this work?.....
Height average grade to top of plate..... Height average grade to highest point of roof.....
Size, front..... depth..... No. stories..... solid or filled land?..... earth or rock?.....
Material of foundation..... Thickness, top..... bottom..... cellar.....
Material of underpinning..... Height..... Thickness.....
Kind of roof..... Rise per foot..... Roof covering.....
No. of chimneys..... Material of chimneys..... of lining..... Kind of heat..... fuel.....
Framing lumber—Kind..... Dressed or full size?.....
Corner posts..... Sills..... Girt or ledger board?..... Size.....
Girders..... Size..... Columns under girders..... Size..... Max. on centers.....
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor....., 2nd....., 3rd....., roof.....
On centers: 1st floor....., 2nd....., 3rd....., roof.....
Max num span: 1st floor....., 2nd....., 3rd....., roof.....
If one story building with masonry walls, thickness of walls?..... height?.....

If a Garage

No. cars now accommodated on same lot....., to be accommodated..... number commercial cars to be accommodated.....
Will a automobile repair' ing be done other than minor repairs to cars habitually stored in the proposed building?.....

APPROVED:
.....
.....
.....

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? YES

Maine General Hospital
Brown Construction Co.

INSPECTION COPY Signature of owner By: C. A. Currier

Permit No. 47/ 3292

Location 22 Arsenal St.

Owner Maine General Hospital

Date of permit 12/ 5 /47

Notif. closing-in _____

Inspn. closing-in _____

Final Notif. _____

Final Inspn. _____

Cert. of Occupancy issued _____

NOTES

*3/22/48 Mr. Banker said
this work not to be
done, all decided on
later will apply for
new permit. O'do.*

[Handwritten signature]

AP 22 Arsenal Street

November 20, 1946

Maine General Hospital
22 Arsenal Street
Portland 4, Maine

Attention: Mr. Barker

Gentlemen:

Subject: Building permit for alterations in first story of Maine General Hospital. (original building) to provide soda fountain and lunch room accessory to the hospital.

Permit for the above work is herewith, subject to the following:

It is understood that this is to be a hospital enterprise under the control of the hospital management and not a concession let out to outside parties; also that the only fire-actuated apparatus in the shop will be some appliance for making coffee.

As arranged with Mr. Barker because the thickness of the brick wall in which openings are to be cut is not known, the permit is issued without information as to the lintels proposed over the two openings on the basis that when the thickness of the walls are known the lintels will be designed and details furnished with the signed statement of the designer.

Very truly yours,

Inspector of Buildings

WMOB/D

CC: Brown Construction Company
465 Congress Street

McGuire & Jones
33 Pearl Street

TH
ESS
PMT
ATS
PH
DT
AD
ES



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

PERMIT 1946
02293
1946

Class of Building or Type of Structure Second Class

Portland, Maine, November 5, 1946

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~rebuild~~ ~~reconstruct~~ the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 Arsenal Street Within Fire Limits? yes Dist. No. 3
Owner's name and address Maine General Hospital, 22 Arsenal Street Telephone _____
Lessee's name and address _____ Telephone _____
Contractor's name and address Brown Construction Co., 155 Congress St. Telephone _____
Architect _____ Specifications _____ Plans yes No. of sheets 1
Proposed use of building Hospital No. families _____
Last use _____ " _____ No. families _____
Material brick No. stories 4 Heat _____ Style of roof _____ Roofing _____
Other buildings on same lot _____
Estimated cost \$ 2000. Fee \$ 3.75

General Description of New Work

Health Officer and this

To make alterations to existing room, first floor, to provide ~~an~~ soda fountain as per plan.

Permit Issued with Letter

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Is any plumbing work involved in this work? _____ Is any electrical work involved in this work? _____
Height average grade to top of plate _____ Height average grade to highest point of roof _____
Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
Material of underpinning _____ Height _____ Thickness _____
Kind of roof _____ Rise per foot _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
Framing lumber—Kind _____ Dressed or full size? _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Maine General Hospital

Signature of owner By: John C. B...

ON COPY

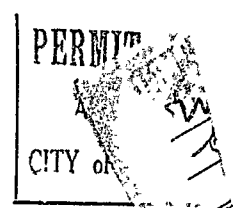
Permit No. 46/ 2293
Location 22 Arsenal St
Owner Morris General Hosp
Date of permit 11/20/46
Notif. closing-in
Inspn. closing-in
Final Notif.
Final Inspn. 11/11/47
Cert. of Occupancy issued none

NOTES

1/10/46 - no work done
E.H.
3/25/47 - no work
done E.H.
4/1/47 - Mr. Grand
says that they
will use 2-4"x6" IS
for each opening -
11/11/47 - no work done
E.H.



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT



Class of Building or Type of Structure Installation
 Portland, Maine, August 9, 1950

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to ~~construct~~ install the following building structures in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, specifications, if any, submitted herewith and the following specifications:

Location 22 Arsenal Street Within Fire Limits? _____ Dist. No. _____
 Owner's name and address Maine General Hospital, 22 Arsenal Street Telephone _____
 Lessee's name and address _____ Telephone _____
 Contractor's name and address K. B. Bourne & Son, 50 Cross Street Telephone 2-3907
 Architect _____ Specifications _____ Plans yes No. of sheets 1
 Proposed use of building Hospital No. families _____
 Last use _____ " _____ No. families _____
 Material brick No. stories 2 Heat _____ Style of roof _____ Roofing _____
 Other buildings on same lot _____
 Estimated cost \$ _____ Fee \$ 1.00

General Description of New Work

To install mechanical system of ventilation for basement room as per plan.

no mfg necessary. change of spec. 8/18/50

Permit Issued with Letters

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** K. B. Bourne & Son.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
 Framing lumber—Kind _____ Dressed or full size? _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over _____ feet.
 Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
 If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

Miscellaneous

Will work require disturbing of any tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Maine General Hospital
 K. B. Bourne & Son
W. B. Bourne

SPECTION COPY

Signature of owner by:

AP 22 Arsenal St.

August 10, 1950

M. B. Bourne & Son,
56 Cross Street,
Portland, Maine

Copy to Maine General Hospital
22 Arsenal Street

Gentlemen:

The permit for installation of a mechanical system of ventilation for a basement room in the Maine General Hospital at 22 Arsenal Street is issued herewith. The Building Code provides that such an installation shall be installed in accordance with the Standards of the National Board of Fire Underwriters for the Installation of Air Conditioning, Warm Air Heating, Air Cooling and Ventilation Systems as recommended by the National Fire Protection Association (Pamphlet #90). Because of its location in a hospital, it is important that all precautions be taken in connection with the location of the fresh air intake to prevent the spread of gas, smoke or fire throughout the building. In this connection the specifications of Sections 136, 143, 144 and 151 of this Standard are particularly called to your attention.

Very truly yours,

AJS/H

Warren McDonald
Inspector of Buildings



034

APARTMENT HOUSE ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure Installation

Portland, Maine, December 15, 1950

02470

DEC 18 1950

CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to ~~construct~~ install the following ~~building~~ electrical equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 Arsenal Street Within Fire Limits? yes Dist. No. _____
 Owner's name and address Maine General Hospital, 22 Arsenal Street Telephone _____
 Lessee's name and address _____ Telephone _____
 Contractor's name and address A. B. Bourne & Sons, 56 Cross Street Telephone 2-3907
 Architect _____ Specifications _____ Plans yes No. of sheets 1
 Proposed use of building Hospital No. families _____
 Last use _____ " _____ No. families _____
 Material brick No. stories 4 Heat _____ Style of roof _____ Roofing _____
 Other buildings on same lot _____
 Estimated cost \$ _____ Fee \$ 1.00

General Description of New Work

To install exhaust from laboratory machine on second floor as per plan.

CERTIFICATE OF OCCUPANCY
BY THE CITY ENGINEER

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** E. B. Bourne & Sons

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
 Framing lumber—Kind _____ Dressed or full size? _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
 Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
 If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

Miscellaneous

Will work require disturbing of any tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Maine General Hospital
E. B. Bourne & Sons

Signature of owner BY _____

William C. Bee

NON-COPY



**(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT**

PERMIT ISSUED
01281
JUL 18 1951
CITY OF PORTLAND

Class of Building or Type of Structure Installation
Portland, Maine, July 11, 1951

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to ~~erect, alter, repair, demolish~~ install the following ~~building structure or equipment~~ in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 22 Arsenal Street Within Fire Limits? yes Dist. No. _____
Owner's name and address Maine General Hospital, 22 Arsenal Street Telephone _____
Lessee's name and address _____ Telephone _____
Contractor's name and address M. B. Bourne & Sons, 56 Cross Street Telephone 2-3907
Architect _____ Specifications _____ Plans yes No. of sheets 1
Proposed use of building Hospital No. families _____
Last use _____ No. families _____
Material brick No. stories 7 Heat _____ Style of roof _____ Roofing _____
Other buildings on same lot _____
Estimated cost \$ _____ Fee \$ 1.00

General Description of New Work

To install ventilation on fifth floor as per plan.

This is to exhaust steam from sterilizers in morning depart ment.

**CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED**

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** M. B. Bourne & Sons

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
Height average grade to top of plate _____ Height average grade to highest point of roof _____
Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
Material of underpinning _____ Height _____ Thickness _____
Kind of roof _____ Rise per foot _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____
Framing lumber—Kind _____ Dressed or full size? _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____
If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

OK-7/12/51-AJS

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Maine General Hospital
M. B. Bourne & Sons

Signature of owner BY:

William C. Rice

ION COPY



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, Dec. 4, 1952

PERMIT ISSUED 02222 DEC 4 1952 CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 22 Arsenal Street Use of Building Hospital No. Stories 1 Building Existing " Name and address of owner of appliance Maine General Hospital, 22 Arsenal Street Installer's name and address Thompson Winchester Co., 1299 Boylston St., Boston, Mass. Telephone Permit to be mailed to 20 Sylvan Road, So. Portland

General Description of Work

To install one electric griddle

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath? If so, how protected? Kind of fuel? Minimum distance to burnable material, from top of appliance or casing top of furnace From top of smoke pipe From front of appliance From sides or back of appliance Size of chimney flue Other connections to same flue If gas fired, how vented? Rated maximum demand per hour Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

Name and type of burner Labelled by underwriter's laboratories? Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? Type of floor beneath burner Location of oil storage Number and capacity of tanks If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? How many tanks fire proofed? Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance first floor Any burnable material in floor surface or beneath? wood employees cafeteria Burner will be 2 1/2" from floor with air space beneath Kind of fuel? electric If so, how protected? Minimum distance to wood or combustible material from top of appliance From front of appliance From sides and back over 6' From top of smokepipe over 6' Size of chimney flue Other connections to same flue Is hood to be provided? yes If so, how vented? existing Forced or gravity? forced If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

To change location of existing hood/as per plan from over cafeteria counter

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Thompson Winchester Co.

INSPECTION COPY

Signature of Installer by: Neal R. Oliver