



# Zoning Map, Text Amendment, Contract or Conditional Rezoning Application Portland, Maine

Planning and Urban Development Department  
Planning Division

Portland's Planning and Urban Development Department coordinates the review of requests for zoning map amendments, zoning text amendments and contract or conditional re-zoning. The Division also coordinates site plan, subdivision and other applications under the City's Land Use Code. Attached is the application form for a Zone Change.

Portland's development review process and requirements are outlined in the Land Use Code (Chapter 14) which is available on our website:

Land Use Code: <http://me-portland.civicplus.com/DocumentCenter/Home/View/1080>

Design Manual: <http://me-portland.civicplus.com/DocumentCenter/View/2355>

Technical Manual: <http://me-portland.civicplus.com/DocumentCenter/View/2356>

#### **Planning Division**

Fourth Floor, City Hall

389 Congress Street

(207) 874-8719

[planning@portlandmaine.gov](mailto:planning@portlandmaine.gov)

#### **Office Hours**

Monday thru Friday

8:00 a.m. – 4:30 p.m.

**I. Project Information (Please enter n/a on those fields that are not applicable)**

<b>Project Name:</b>	Maine Medical Center Master Facility Plan Phase IIB
<b>Proposed Development Address:</b>	22 Bramhall St., Portland, ME, 04102
<b>Project Description:</b>	Zone change
<b>Chart/Block/Lot:</b>	c41 & c18
<b>Right, Title or Interest</b> <i>(Please identify the status of the applicant's right, title, or interest in the subject property – for example a deed, option or contract to purchase or lease the subject property)</i>	
Deed	
<b>Existing Use</b> <i>(Describe the existing use of the subject property)</i>	
Academic Medical Center (Hospital)	
<b>Current Zoning Designation:</b>	
Contract Zone (C41 & C18)	
<b>Proposed Use of the Property</b> <i>(Please describe the proposed use of the subject property. If construction or development is proposed, please describe any changes to the physical condition of the property)</i>	
MMC is applying for a zone change to allow for a hospital modernization and replacement.	
<b>Vicinity Map</b> <i>(Attach a map showing the subject parcel and abutting parcels, labeled as to ownership and/or current use)</i>	
<b>Site Plan</b> <i>(On a separate sheet, please provide a site plan of the property showing existing and proposed improvements, including such features as buildings, parking, driveways, walkways, landscape and property boundaries. This may be a professionally drawn plan, or a carefully drawn plan – to scale – by the applicant. (Scale to suit, range from 1' = 10' to 1' = 50'.) Contract and conditional rezoning applications may require additional site plans and written material that address physical development and operation of the property to ensure that the rezoning and subsequent development are consistent with the comprehensive plan, meet applicable land use regulations, and compatible with the surrounding neighborhood)</i>	

**II. Contact Information (Please enter n/a on those fields that are not applicable)**

**APPLICANT**

Name:	Alexander M Green
Business Name:	Maine Medical Center
Address:	22 Bramhall St.
City/State:	Portland, ME
Zip Code:	04102
Work #:	207-662-3689
Home #:	na
Cell #:	na
Fax #:	na
E-mail:	agreen@mmc.org

**OWNER**

Name:	Maine Medical Center
Address:	22 Bramhall St.
City/State:	Portland, ME
Zip Code:	04102
Work #:	na
Home #:	na
Cell #:	na
Fax #:	na
E-mail:	na

**AGENT/REPRESENTATIVE**

Name:	Dominic Gagnon
Address:	22 Bramhall St.
City/State:	Portland, ME
Zip Code:	04102
Work #:	na
Home #:	na
Cell #:	na
Fax #:	na
E-mail:	dominic.gagnon@colliers.com

**BILLING (to whom invoices will be forwarded to)**

Name:	Alexander M. Green
Address:	22 Bramhall St.
City/State:	Portland, ME
Zip Code:	04102
Work #:	207-662-3689
Home #:	na
Cell #:	na
Fax #:	na
E-mail:	agreen@mmc.org

**ENGINEER**

Name:	
Address:	
City/State:	
Zip Code:	
Work #:	
Home #:	
Cell #:	
Fax #:	
E-mail:	

**SURVEYOR**

Name:	
Address:	
City/State:	
Zip Code:	
Work #:	
Home #:	
Cell #:	
Fax #:	
E-mail:	

**ARCHITECT**

Name:	Perkins & Will
Address:	225 Franklin St.
City/State:	Boston, MA
Zip Code:	02110
Work #:	na
Home #:	na
Cell #:	na
Fax #:	na
E-mail:	jeffrey.keilman@perkinswill.com; basak.alkan@perkinswill.com

**ATTORNEY**

Name:	
Address:	
City/State:	
Zip Code:	
Work #:	
Home #:	
Cell #:	
Fax #:	
E-mail:	

**DESIGNATED PERSON(S) FOR UPLOADING INTO e-PLAN**

Name:	Alexander M Green
E-mail:	agreeen@MMC.ORG
Name:	Jeff Keilman
E-mail:	jeffrey.keilman@perkinswill.com;
Name:	Dennis Morelli
E-mail:	MORELD@mmc.org

### III. APPLICATION FEES (check applicable review)

	<b>Zoning Map Amendment</b> from ( ) zone to (IDP ) zone c41/c18	\$3,000.00
	<b>Zoning Text Amendment</b> to Section 14- ( ) (For a zoning text amendment, attach on a separate sheet the exact language being proposed, including existing relevant text, in which language to be deleted is depicted as crossed out (example).	\$3,000.00
	<b>Combination Zoning Text Amendment and Zoning Map Amendment</b>	\$4,000.00
	<b>Conditional or Contract Zone</b> <i>(A conditional or contract rezoning may be requested by an applicant in cases where limitations, conditions, or special assurance related to the physical development and operation of the property are needed to ensure that the rezoning and subsequent development are consistent with the comprehensive plan, meet applicable land use regulations, and compatible with the surrounding neighborhood. Please refer to Division 1.5, Section 14-60-62.)</i>	\$5,000.00

### IV. FEES ASSESSED AND INVOICED SEPARATELY

- Notices to abutters (receipt of application, workshop and public hearing meetings) (\$.75 each)
- Legal Ad in the Newspaper (% of total ad)
- Planning Review (\$50.00 hour)
- Legal Review (\$75.00 hour)
- Third Party Review (all outside reviews or analysis, eg. Traffic/Peer Engineer, are the responsibility of the applicant and will be assessed and billed separately)

## V. SUBMITTING YOUR APPLICATION IN ELECTRONIC FORMAT

Welcome to the Planning & Urban Development's new Electronic Plan Review Process. Below you will find the steps along with tips and guides to help you through uploading and viewing your project electronically during the review process.

All of the following applications shall be submitted electronically to [planning@portlandmaine.gov](mailto:planning@portlandmaine.gov) by following the steps below:

*Level 1 Site Alteration, Level 2 Site Plan, Level 3 Site Plan, Level 3 Subdivision, Administrative Authorization, Conditional Use, Inclusionary Zoning and Contract/Rezoning Applications.*

1. Fill out the application completely and e-mail the **application only** to [planning@portlandmaine.gov](mailto:planning@portlandmaine.gov) (Please be sure to designate a person who will be responsible for uploading documents and drawings.) This step will generate the project ID number for your project.
2. An invoice for the application fee will be e-mailed to you. Payments can be made on-line at [Pay Your Invoice](#), by mail (Planning Division, 389 Congress Street, Portland, ME 04102) or in person at City Hall, 4<sup>th</sup> Floor. Please reference the Application Number when submitting your payment which is located in the upper left hand corner of the invoice.
3. The designated person responsible for uploading documents and drawings will receive an email from [eplan@portlandmaine.gov](mailto:eplan@portlandmaine.gov) with an invitation into the project. At this time, you will upload all corresponding documents and plans into the project. For first time users you will receive a temporary password which you must change on entry. Make note of your username and password for any future projects.
4. Follow the link below (Applying Online) for step by step instructions on how to do the following:
  - Prepare drawings, documents and photos for uploading;
  - Getting started in e-Plan;
  - Prepare **revised** drawings and documents for uploading.

[Applying Online](#)

**Reminder: Before the project can move forward, the application fee shall be paid in full and all required documents and drawings shall be uploaded into e-plan correctly.**


5. As the process evolves you will be able to log in and see markups, comments and upload revisions as requested into these folders.

## VI. APPLICANT SIGNATURE

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law.

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

**This application is for a Level III Site Plan review. It is not a permit to begin construction. An approved site plan, a Performance Guarantee, Inspection Fee, Building Permit, and associated fees will be required prior to construction. Other Federal, State or local permits may be required prior to construction, which are the responsibility of the applicant to obtain.**

Signature of Applicant:	
Date:	01/04/2017