



General Building Permit Application

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

Address/Location of Construction: 161 Marginal Way		
Total Square Footage of Proposed Structure:		25,000
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant Name: Hebert Address: Construction 9 Gould Road City, State & Zip: Lewiston, ME 04240	Telephone: 783-2091 Email: thebert@hebertconstruction.com
Lessee/Owner Name: 161 Marginal (if different than applicant) Way, LLC Address: P.O. Box 7525 City, State & Zip: Portland, ME 04112 Telephone: 207-772-6404 E-mail:	Contractor Name: (if different from Applicant) Address: City, State & Zip: Telephone: E-mail:	Cost of Work: \$ 1,931,908 C of O Fee: \$ _____ Historic Rev \$ _____ Total Fees: \$ _____
Current Use (i.e. single family) <u>Office Building</u>		
If vacant, what was the previous use? <u>DHHS Office Building</u>		
Proposed Specific use: <u>Medical Office Building</u>		
Is property part of a subdivision? If yes, please Name _____		
Project description: <u>Renovate 1st and 2nd floors for Maine Eye - Retina Surgery Center</u>		
Who should we contact when the permit is ready: Timothy R. Hebert		
Address: 9 Gould Road		
City, State & Zip: Lewiston, ME 04240		
E-mail Address: thebert@hebertconstruction.com		
Telephone: 207-783-2091		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

In order to be sure the City fully understands the full scope of the project, the Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Department of Permitting and Inspections on-line at www.portlandmaine.gov, or stop by the office, room 315 City Hall or call 874-8703.

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

Signature: 	Date: May 20, 2016
---	---------------------------

This is not a permit; you may not commence ANY work until the permit is issued.



Department of Permitting and Inspections

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

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. You are also signifying your intent on paying your fees by the opportunities below.

1. Once the complete application package has been received by us, and entered into the system,
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

- provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment
- call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone
- hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall,
- deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland
 Department of Permitting and Inspections
 389 Congress Street, Room 315
 Portland, Maine 04101**

By Signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. *No work shall be started until I have received my permit.*

Applicant Signature: *Timothy R. Hebert* Date: 5/20/16

I have provided digital copies and sent them on: Date: 5/20/16

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.



Certificate of Design Application

From Designer: David C. Webster
 Date: May 18, 2016
 Job Name: Maine Eye Retina & Surgery
 Address of Construction: 161 Marginal Way (Floors 1 & 2)

2009 International Building Code

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

Building Code & Year IBC 2009 Use Group Classification (s) Business

Type of Construction Type IIA

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IBC Yes

Is the Structure mixed use? No If yes, separated or non separated or non separated (section 302.3) _____

Supervisory alarm System? Yes Geotechnical/Soils report required? (See Section 1802.2) N/A - exg building

Structural Design Calculations

Completed Submitted for all structural members (106.1 - 106.11)

Design Loads on Construction Documents (1603)

Uniformly distributed floor live loads (7603.11, 1807)	
Floor Area Use	Loads Shown
<u>Existing Office</u>	<u>50psf + partitions</u>
<u>no change in occupanc</u>	
_____	_____
_____	_____
_____	_____

Wind loads (1603.1.4, 1609)

analytical me Design option utilized (1609.1.1, 1609.6)
100 pmh Basic wind speed (1809.3)
Cat II, lw=1.0 Building category and wind importance Factor, I_w table 1604.5, 1609.5)
C Wind exposure category (1609.4)
+/-0.18 Internal pressure coefficient (ASCE 7)
Per ASCE 7-1 Component and cladding pressures (1609.1.1, 1609.6.2.2)
Per ASCE 7-1 Main force wind pressures (7603.1.1, 1609.6.2.1)

Earth design data (1603.1.5, 1614-1623)

C&C Ch13 Design option utilized (1614.1)
Cat II Seismic use group ("Category")
0,481 Spectral response coefficients, S_D & S_I (1615.1)
0.180 Site class (1615.1.5)

n/a Live load reduction
snow loads g_f Roof live loads (1603.1.2, 1607.11)
42psf Roof snow loads (1603.7.3, 1608)
60psf Ground snow load, P_g (1608.2)
42psf If $P_g > 10$ psf, flat-roof snow load P_f
1.0 If $P_g > 10$ psf, snow exposure factor, C_e
1.0 If $P_g > 10$ psf, snow load importance factor, I_s
1.0 Roof thermal factor, C_T (1608.4)
42psf Sloped roof snowload, P_s (1608.4)
C Seismic design category (1616.3)
braced frames Basic seismic force resisting system (1617.6.2)
C&C, n/a Response modification coefficient, R , and deflection amplification factor, C_d (1617.6.2)
C&C, Ch13 Analysis procedure (1616.6, 1617.5)
C&C, n/a Design base shear (1617.4, 1617.5.1)
Flood loads (1803.1.6, 1612)
n/a Flood Hazard area (1612.3)
n/a Elevation of structure
Other loads
Unit wgts per Concentrated loads (1607.4)
n/a Partition loads (1607.5)
n/a Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)



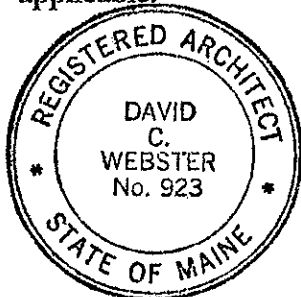
Accessibility Building Code Certificate

Designer: David C. Webster

Address of Project: 161 Marginal Way (floors 1 & 2)

Nature of Project: Interior Fit-Up for Ambulatory Surgical Center and Common
Interior Fit-Up for Medical Practice on 2nd floor
Minor Exterior work submitted for admin. review separately

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act. Residential Buildings with 4 units or more must conform to the Federal Fair Housing Accessibility Standards. Please provide proof of compliance if applicable.



(SEAL)

Signature:

Title: Principal

Firm: PDT Architects

Address: 49 Dartmouth Street
Portland, ME 04101

Phone: 207-775-1059

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



Certificate of Design

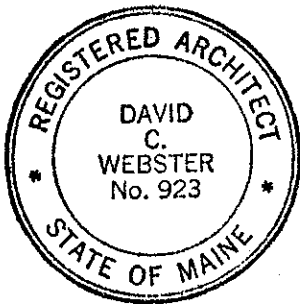
Date: May 18, 2016

From: David C. Webster

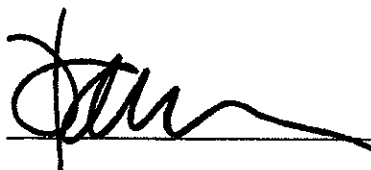
These plans and / or specifications covering construction work on:

Interior Fit-Up at floors 1 & 2 with associated site modifications and added mechanical equipment.

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the **2009 International Building Code** and local amendments.



(SEAL)

Signature: 

Title: Principal

Firm: PDT Architects

Address: 49 Dartmouth Street

Portland, ME 04101

Phone: 207-775-1059

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov