

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Please Read Application And Notes, if Any, Attached

Permit Number: 071287
PERMIT ISSUED
OCT 19 2007
CITY OF PORTLAND

This is to certify that HIGHLAND BAY LLC ET AL S/Build it Construction Services LLC

has permission to Add wall for sound proofing small wall to create storage space

AT 145 COMMERCIAL ST L 029 S001001

provided that the person or persons whom or whom this permit is issued to shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is occupied or otherwise closed-in. **YOUR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Jeanine Bonke 10/15/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1287	Issue Date:	CBL: 029 S001001
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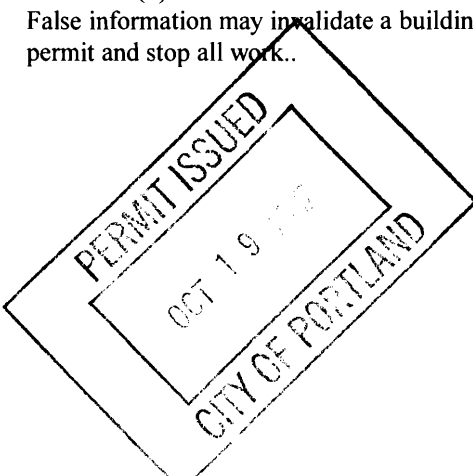
Location of Construction: 145 COMMERCIAL ST	Owner Name: HIGHLAND BAY LLC ETALS	Owner Address: 150 METRO PARK	Phone:
Business Name: United Health Care Group	Contractor Name: Build it Construction Services, LLC	Contractor Address: P.O. Box 1610 Salem	Phone: 6033702666
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B3

Past Use: Commercial - Office - United Health Care Group - <i>First Floor</i>	Proposed Use: United Health Care Group - <i>First Floor</i> Add wall for sound proofing & small wall to create storage space	Permit Fee: \$110.00	Cost of Work: \$9,000.00	CEO District: 1
Proposed Project Description: Add wall for sound proofing & small wall to create storage space		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>B</i> Type:	
		Signature: <i>AMB 10/15/07</i>		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 10/12/2007	Zoning Approval		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/ cond. hist</i> Date: <i>10/15/07 ABM</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <i>Yes</i> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>Any exten. work requires a separate permit and approval</i> Date: _____ <i>the Historic Preservation</i>
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CERTIFICATION

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

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- Footing/Building Location Inspection: Prior to pouring concrete
- Re-Bar Schedule Inspection: Prior to pouring concrete
- Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

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

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

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

Signature of Applicant/Designee

Date

Signature of Inspections Official

Date

CBL: 029 5001

Building Permit #: _____

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1287	Date Applied For: 10/12/2007	CBL: 029 S001001
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Location of Construction: 145 COMMERCIAL ST	Owner Name: HIGHLAND BAY LLC ETALS	Owner Address: 150 METRO PARK	Phone:
Business Name: United Health Care Group	Contractor Name: Build it Construction Services, LLC	Contractor Address: P.O. Box 1610 Salem	Phone: (603) 370-2666
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: United Health Care Group - First Floor - Add wall for sound proofing & small wall to create storage space	Proposed Project Description: Add wall for sound proofing & small wall to create storage space
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Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 10/15/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District. 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 10/15/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 10/15/2007
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) All construction shall comply with NFPA 101			

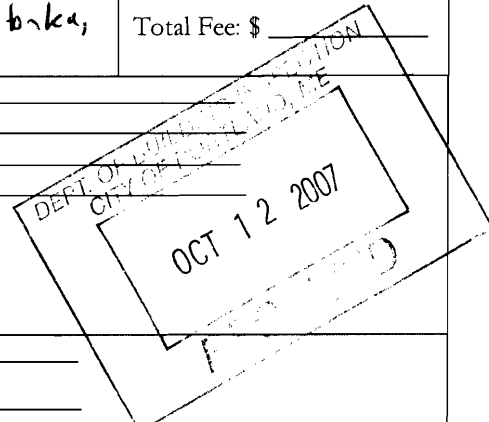




General Building Permit Application

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


Location/Address of Construction: <u>145 Commercial Street 1st Floor</u>		
Total Square Footage of Proposed Structure/Area <u>20 SF</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant * <u>must</u> be owner, Lessee or Buyer* Name <u>Fleming Creek LLC</u> Address <u>42 Market Street</u> City, State & Zip <u>Portland ME 04101</u>	Telephone: <u>207.774.2946</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>United Healthcare Group</u> Address <u>9900 Broad Rd.</u> City, State & Zip <u>East Minneapolis, MN.</u>	Cost Of Work: \$ <u>9,000</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>office</u>		
If vacant, what was the previous use? <u>X</u>		
Proposed Specific use: _____		
Is property part of a subdivision? <u>No</u> If yes, please name _____		
Project description: <u>Add walls for soundproofing -</u> <u>Small wall for storage -</u>		
Contractor's name: <u>Build-It Construction Services LLC</u>		
Address: <u>PO Box 1610</u>		
City, State & Zip <u>Salem NH 03079</u>		Telephone: _____
Who should we contact when the permit is ready: <u>JAION Settineri</u>		Telephone: <u>603.370.2666</u>
Mailing address: _____		



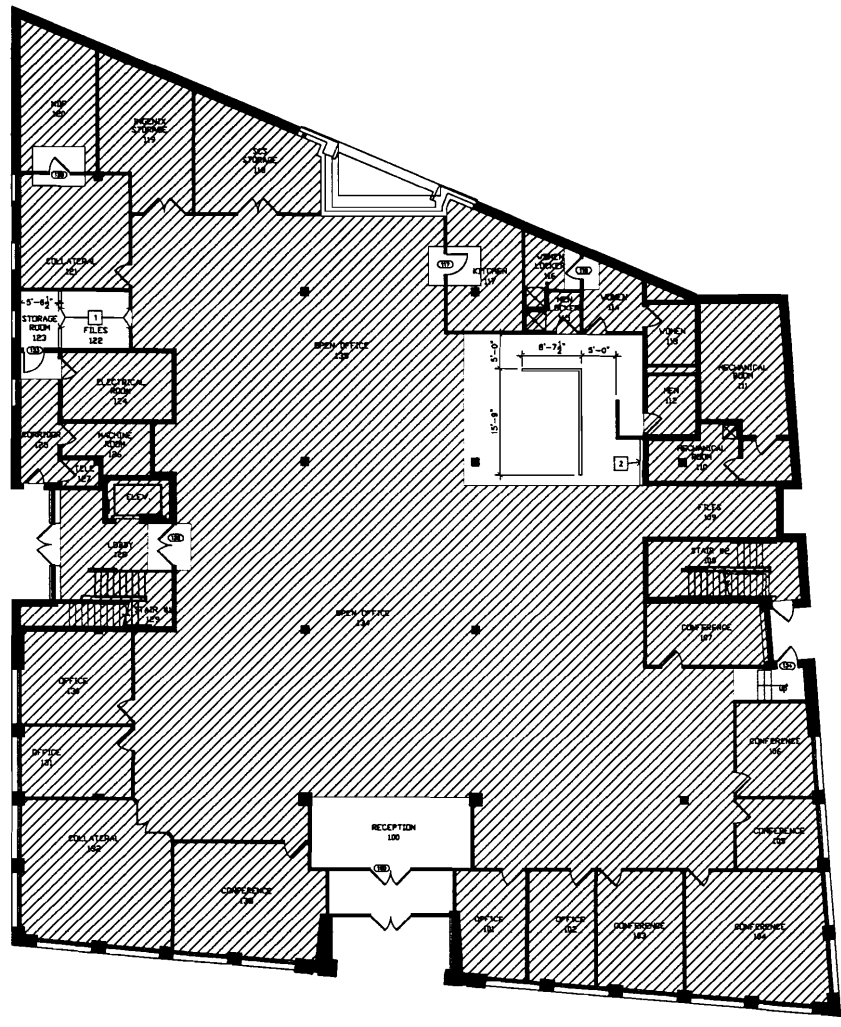
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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

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

Signature:  Date: 10.12.07

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

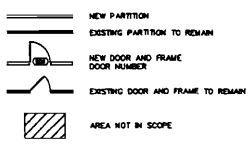


1 LEVEL 1 ARCHITECTURAL FLOOR PLAN
1/8" = 1'-0"

GENERAL FLOOR PLAN NOTES:

1. LIFE SAFETY MUST BE MAINTAINED FOR ALL PERSONNEL WORKING ON THE FLOOR. ALL FIRE STAIRS, ALARMS, SPEAKERS, EXIT SIGNS, ETC. MUST REMAIN ACCESSIBLE AND OPERABLE AT ALL TIMES. NOTIFY BUILDING SECURITY AND BUILDING MANAGER OF DAMAGED SYSTEMS AND REPAIR OR REPLACE DAMAGED SYSTEMS IMMEDIATELY.
2. ALL DIMENSIONS SHOWN ARE TO FINISHED FACE OF WALL (U.N.O.).
3. ALL CLEAR DIMENSIONS ARE TO BE EXACT WITHIN 1/8" ALONG FULL HEIGHT AND FULL WIDTH OF WALLS. CONTRACTOR SHALL NOT ADJUST ANY DIMENSIONS MARKED "CLEAR" OR "CLF" WITHOUT WRITTEN INSTRUCTION FROM THE ARCHITECT.
4. VERIFY INTEGRITY OF EXISTING FIRE-RATED PARTITIONS TO REMAIN AND REPORT FINDINGS TO THE PROJECT MANAGER.
5. ALL NEW PARTITIONS TO BE TYPE C1. U.N.O.

LEGEND:



KEYNOTES:

- 1 "ALIGN" - INDICATES FINISH FACE OF NEW PARTITION TO FALL ON THE SAME PLANE AS THE FINISH FACE OF AN EXISTING PARTITION, EXISTING COLUMN FACE OR ANOTHER NEW PARTITION.
- 2 FURR OUT WALL AS NEEDED FOR POWER AND VOICE/DATA. SEE SHEET AT01 FOR MORE INFO.

DOOR SCHEDULE 1 LEVEL - ELECTRICAL "OR" GROUPS

MARK	CA	Room Name	TYPE	DOOR DIMENSIONS (H x W)	GLAZ	FRAME	HARDWARE	FIRE RATING	REMARKS
100	1	Main Entry	A	21'-0" x 7'-0" x 1.34"	WD	1	H&J	21	Reuse Existing Door if Possible
120	2	ME	B	3'-0" x 7'-0" x 1.34"	WD	1	H&J	21	Reuse Existing Door if Possible
122	3	Storage	B	3'-0" x 7'-0" x 1.34"	WD	1	H&J	21	Reuse Existing Door if Possible
126	4	Lobby	A	21'-0" x 7'-0" x 1.34"	WD	1	H&J	21	Reuse Existing Door if Possible
124	4	Exit	B	3'-0" x 7'-0" x 1.34"	WD	1	H&J	21	Reuse Existing Door if Possible

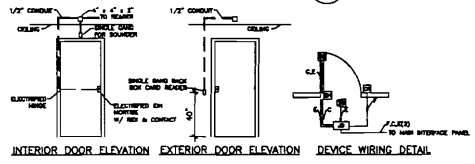
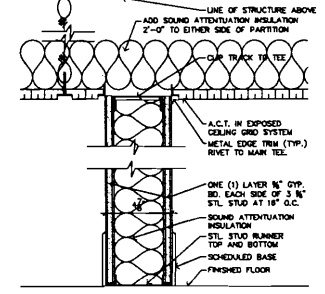
DOOR SCHEDULE 1 LEVEL - MECHANICAL HARDWARE GROUPS

MARK	Room Name	TYPE	DOOR DIMENSIONS (H x W)	GLAZ	FRAME	HARDWARE	FIRE RATING	REMARKS	
112	Women Locker	B	3'-0" x 7'-0" x 1.34"	WD	SK1	1	H&J	1	Hardware Change Only

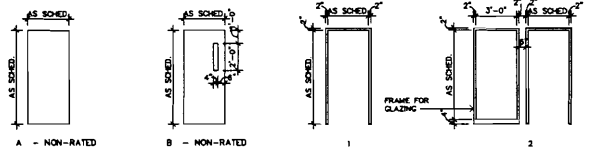
- DOOR SCHEDULE NOTES:**
1. GL-1: 1/4" CLEAR TEMPERED GLASS.
 2. SEE SPECIFICATION SECTION 0670 FOR GENERAL CONTRACTOR RESPONSIBILITIES.

HARDWARE SCHEDULE:

- GROUP 1 - Interior Slab (Sched. 1)**
 Slab (1-1/2" Fd) F8175 4-1/2" x 4-1/2"
 Lockset: Privacy Function to Match Building Standard
 Chock: Match Building Standard
 Mail Stop
- GROUP 2 - Interior Slab (Chosen Lockset - Match'd Room)**
 Slab (1-1/2" Fd) F8175 4-1/2" x 4-1/2"
 Lockset: Privacy Function to Match Building Standard
 Chock: Match Building Standard
 Mail Stop
- GROUP 3 - Interior Slab - Core Access (Suite Entry, MOF)**
 Slab: F8175 4-1/2" x 4-1/2" Fd
 Doorset: Hinge (1 in.) Square Box, Hinge
 Core's Lockset: Full Security Electronic Reader Lock with Request to Exit and Door Function Switch to Match Building Standard
 Chock: Included with lockset
 Dr. Position Switch: Included with lockset
 Smoke Control Sol. Panel: Smoke SBD (if req. noted)



3 GROUP 21 - INTERIOR SINGLE Core Access (Suite Entry, MOF)
1/4" = 1'-0"



4 MECHANICAL DOOR TYPES AND FRAME TYPES
1/4" = 1'-0"



145 COMMERCIAL
PORTLAND, ME

UHG Project #
F071440
UHG Location Code
3615

Business Group
SCS/GENIX
Terry G. Wobken, Architect

1200 Marshall Street NE
Minneapolis, MN 55413-1006
Phone: (612) 677-7100
Fax: (612) 677-7999

NOTES: The design team and client have been building an internal project portfolio and have not yet started on this project. The design team is currently in the process of defining the project and will be providing a more detailed design and construction program in the near future. The design team is currently in the process of defining the project and will be providing a more detailed design and construction program in the near future. The design team is currently in the process of defining the project and will be providing a more detailed design and construction program in the near future.

Revision
 Project Name: TERRY'S WORKS
 Application No.: 1533
 Issue Date: 08/20/09
 Date: 8/20/07

RSP Project No.
6138 071440
Scale
AS NOTED
 Drawn By:
CEB
 Checked By:
BAJ, DL
 Issue Date
SEPTEMBER 20, 2007

Rev	Date	Description

LEVEL 1
ARCHITECTURAL
FLOOR PLAN,
DOOR SCHEDULE,
PARTITION TYPES

AE101

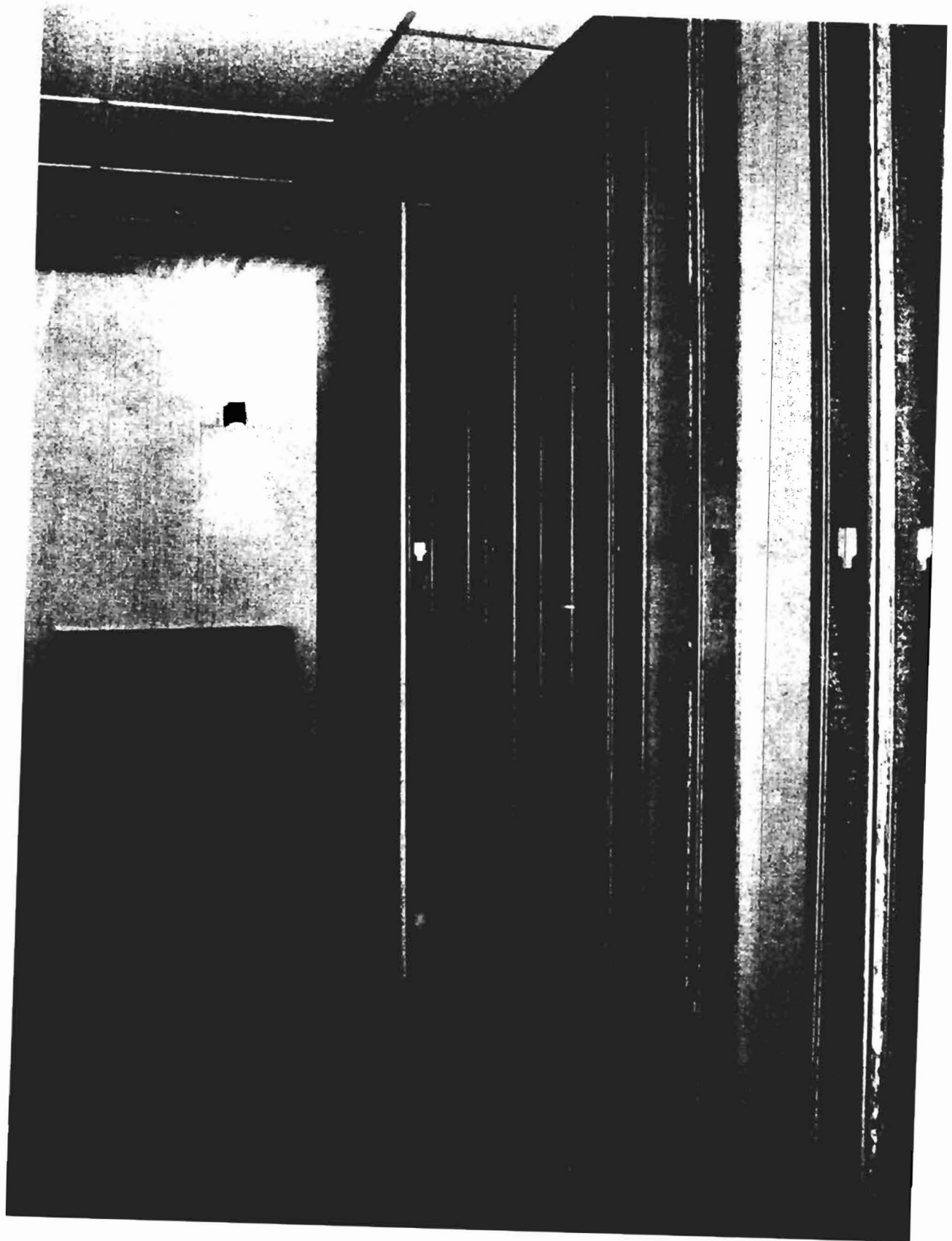
From: "Jason V. Settineri" <jvsettineri@comcast.net>
To: <jmb@portlandmaine.gov>
Date: 10/22/2007 9:28:06 AM
Subject: 145 Commercial Street Interior Wall - 1st floor

Hi Jeanie,

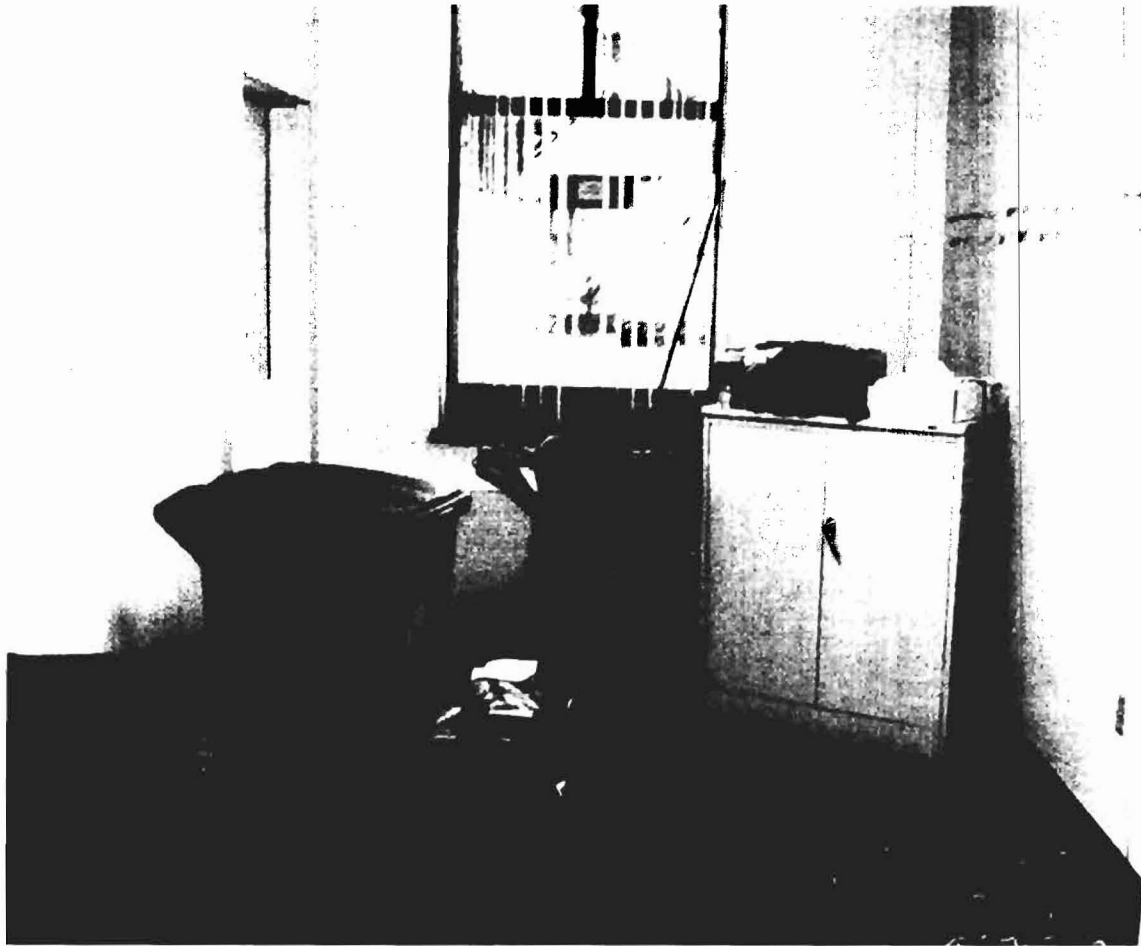
Thank you for letting us proceed w/ this work, it is much appreciated. Attached are photos of the walls that were built, insulated, rocked, taped, and painted. Please call if you have questions. I am expecting to be back to Portland in a few weeks for some millwork on the walls, I will call you to close this out.

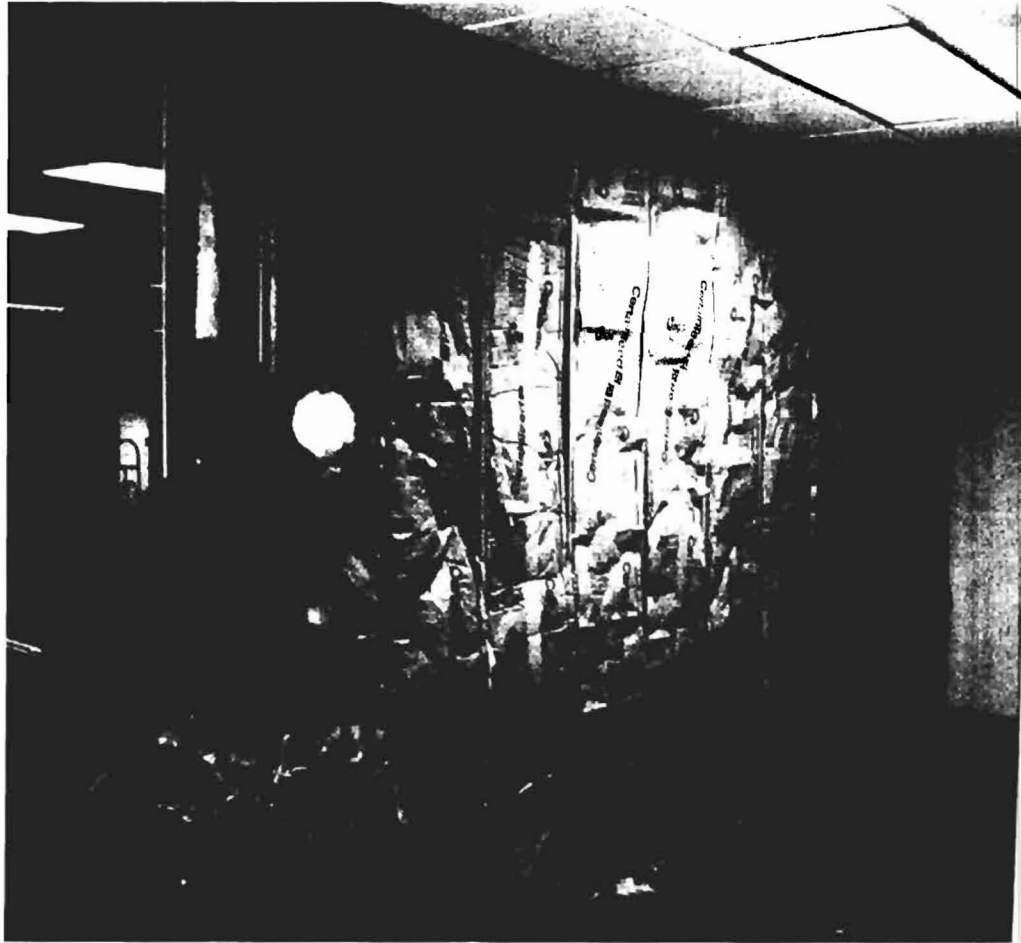
Thank you very much again.

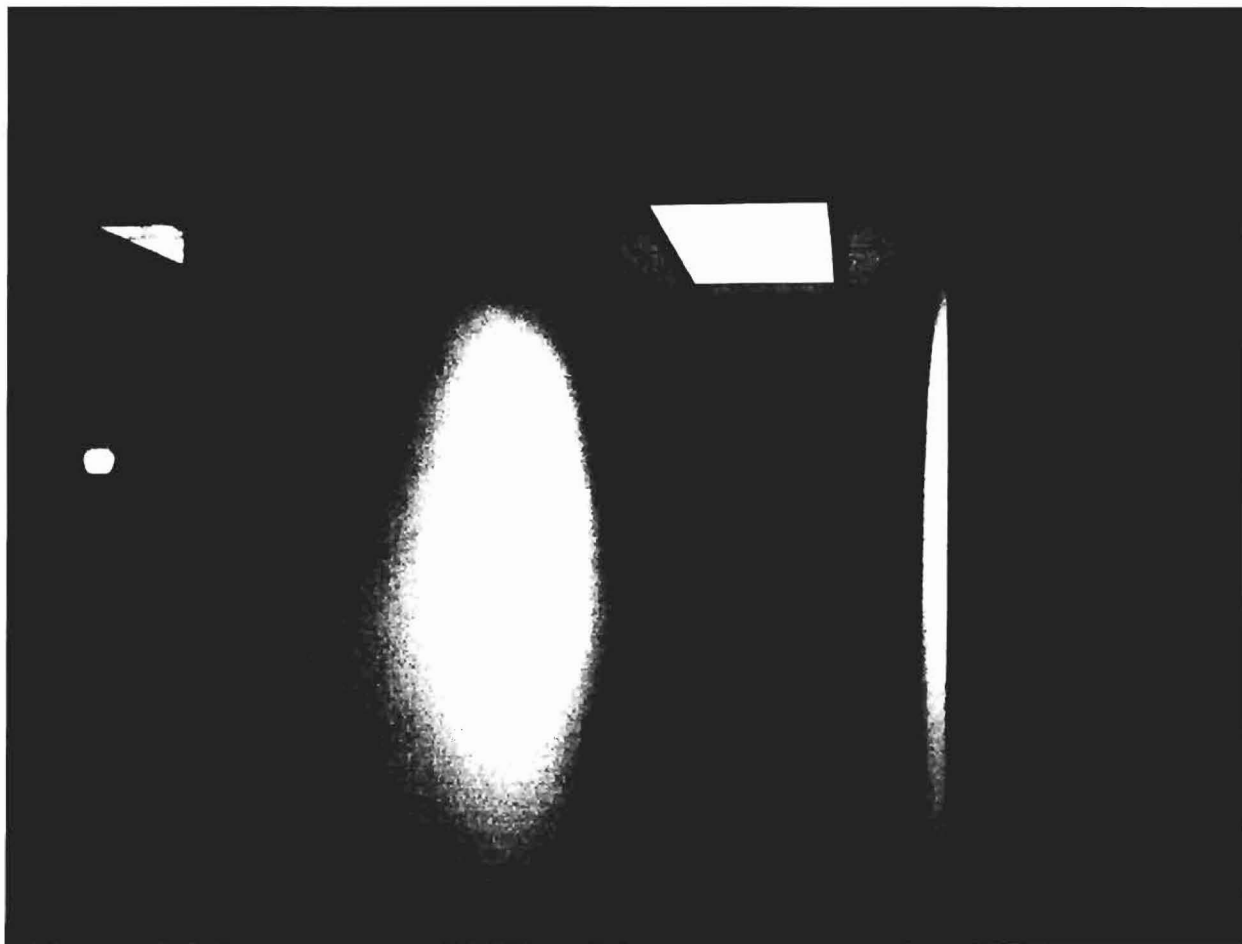
Jason V. Settineri
Build-It Construction Services LLC
PO Box 1610
Salem, NH 03079
p. 603.370.2666
f. 603.912.5080
jvsettineri@comcast.net

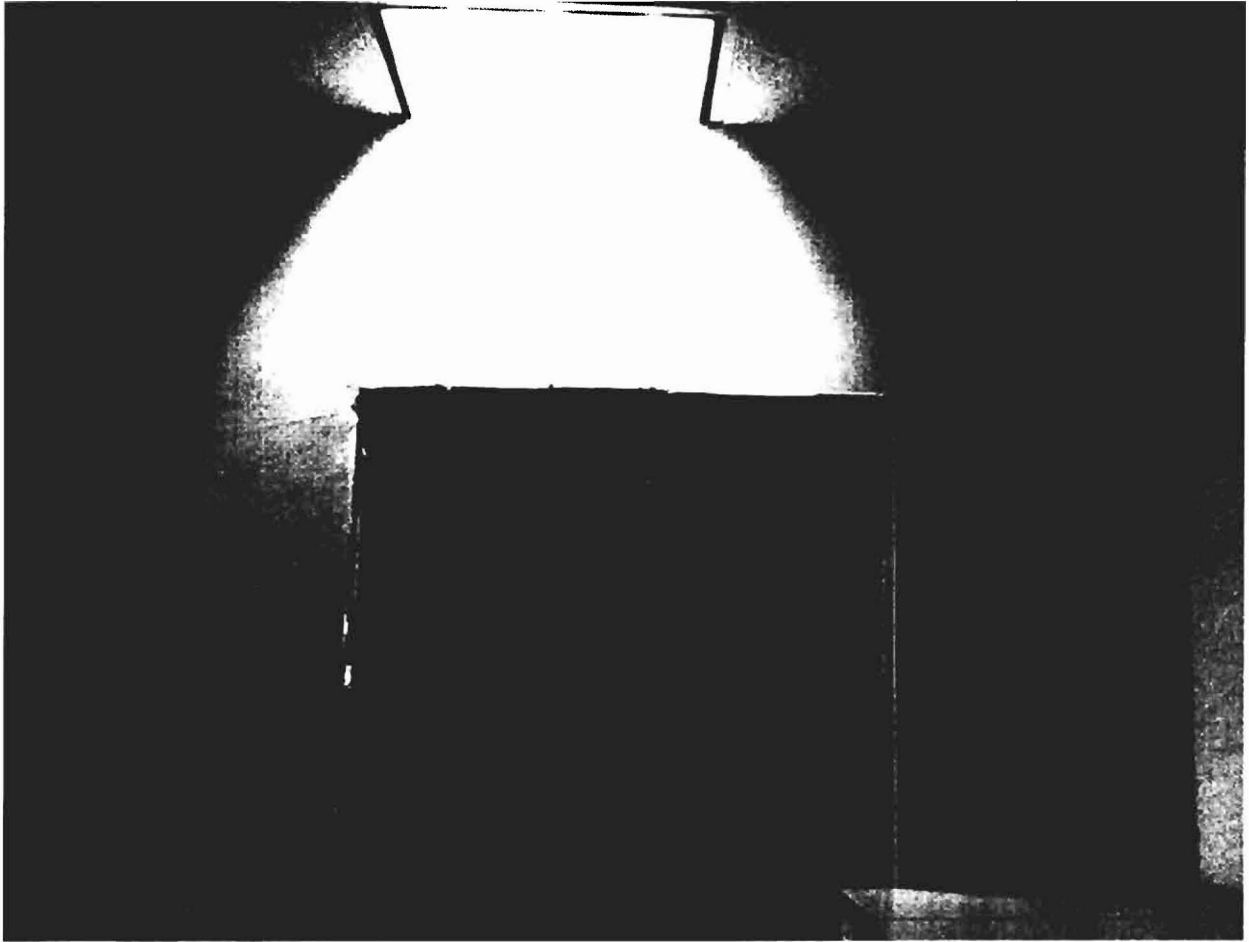




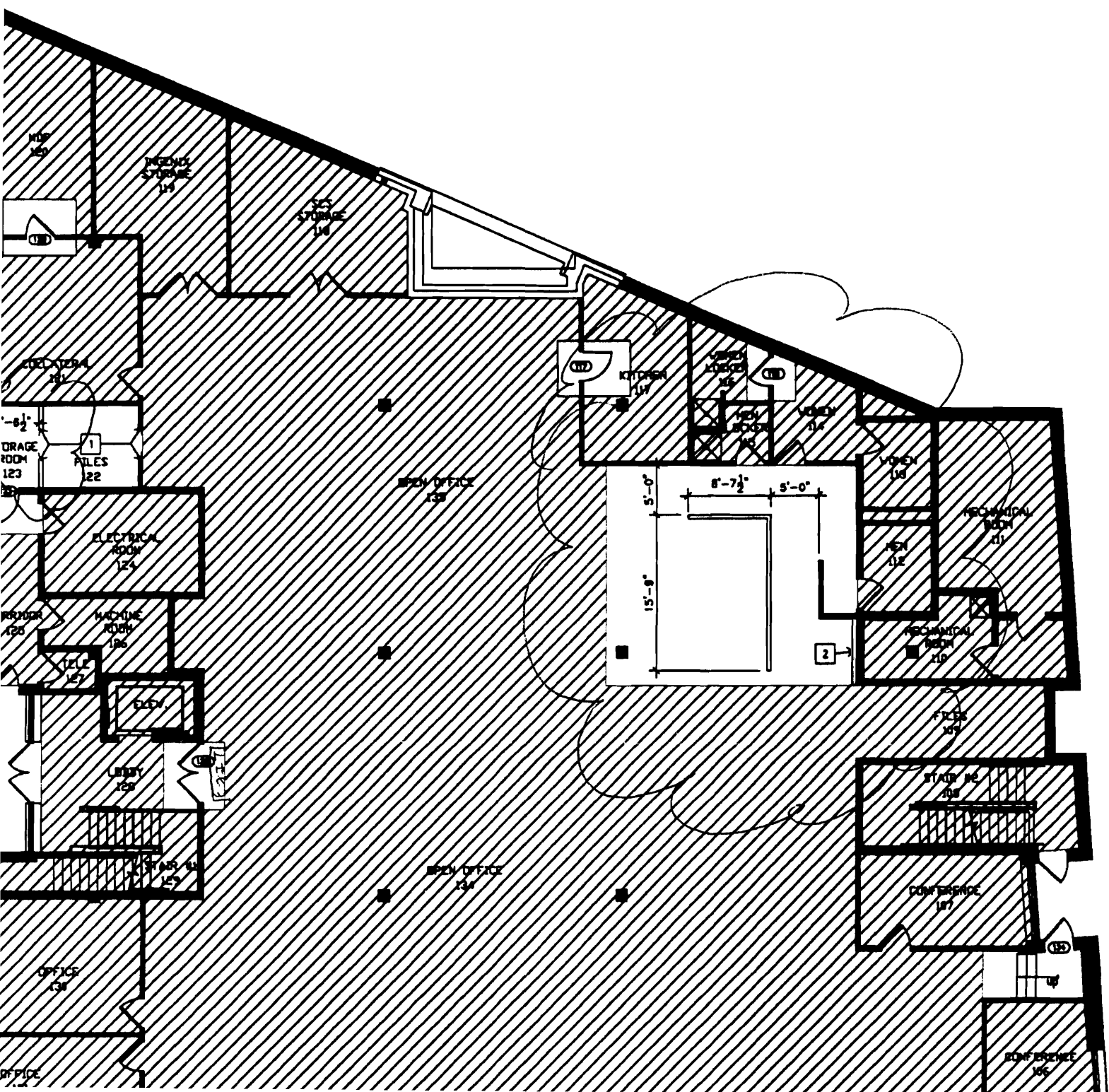


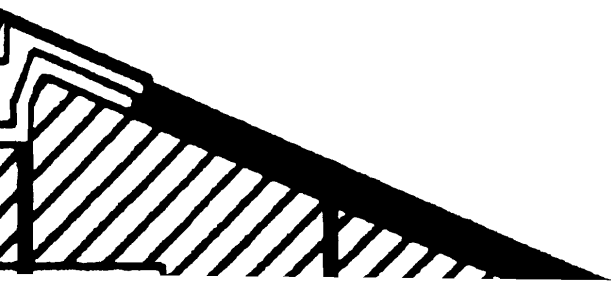












Dots Sprinkler Heads



NOTES:

1. PERSONNEL WORKING ON THE FLOOR. ALL FIRE STAIRS, REMAIN ACCESSIBLE AND OPERABLE AT ALL TIMES. NOTIFY OF DAMAGED SYSTEMS AND REPAIR OR REPLACE DAMAGED

FACE OF WALL (U.N.O.).

WITHIN 1/8"; ALONG FULL HEIGHT AND FULL WIDTH OF ANY DIMENSIONS MARKED "CLEAR" OR "CLR" WITHOUT WRITTEN

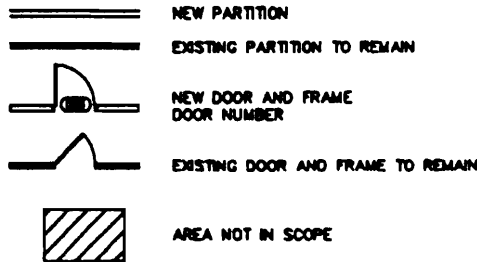
PARTITIONS TO REMAIN AND REPORT FINDINGS TO THE

O.

NEW PARTITION TO FALL ON THE SAME PLANE AS THE EXISTING COLUMN FACE OR ANOTHER NEW PARTITION.

AND VOICE/DATA. SEE SHEET AT101 FOR MORE INFO.

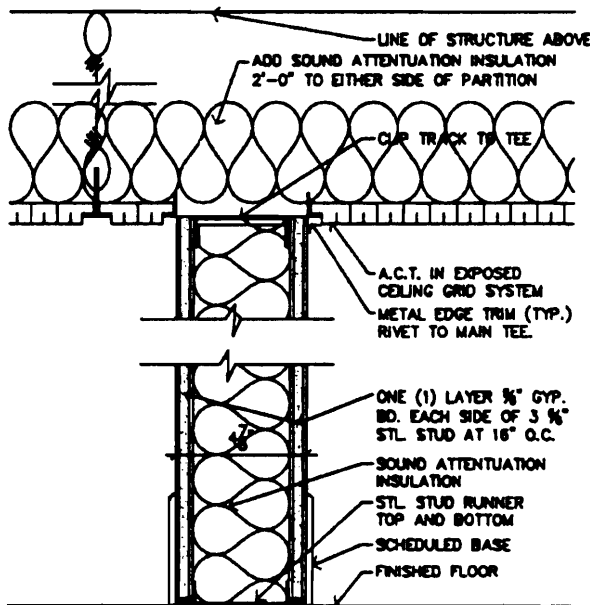
LEGEND:



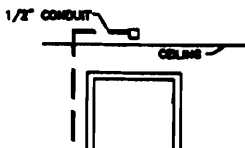
DOORS								
DOOR DIMENSIONS	MATL	GLAZ	FRAME TYPE	MATL	GLAZ	HARDWARE GROUP	FIRE RATING	REMARKS
7'-0" x 1'-3/4"	WD	-	1	HM	-	21		Reuse Existing Doors if Possible
8' x 1'-3/4"	WD	-	1	HM	-	21		Reuse Existing Door if Possible
8' x 1'-3/4"	WD	-	1	HM	-	21		
7'-0" x 1'-3/4"	WD	-	1	HM	-	21		
8' x 1'-3/4"	WD	-	1	HM	-	21		Reuse Existing Door if Possible

FRAME GROUPS								
DOOR DIMENSIONS	MATL	GLAZ	FRAME TYPE	MATL	GLAZ	HARDWARE GROUP	FIRE RATING	REMARKS
8' x 1'-3/4"	WD	-	1	HM	-	4		Hardware Change Only
8' x 1'-3/4"	WD	GL1	1	HM	-	1		

GENERAL CONTRACTOR RESPONSIBILITIES.



2 PARTITION TYPE G1 NON-RATED
3' - 1'-0"



145 COMMERCIAL
PORTLAND, ME

UHG Project #
F071440

UHG Location Code
3615

Business Group
SCS/INGENIX

Terry G. Wobken, Architect

1220 Marshall Street NE
Minneapolis, MN 55413-1036
Phone: (612) 677-7100
Fax: (612) 677-7499

NOTE: The design shown and described herein including all technical drawings, graphics and models thereof are proprietary and cannot be copied, duplicated or otherwise used without the written consent of Terry G. Wobken, Architect. These are available for limited review and evaluation by clients, consultants, contractors, government agencies, vendors and other interested parties in accordance with the Notice.

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Signature: _____

Printed Name: TERRY G. WOBKEN

Registration No: 1533 Expires On: 06/30/09

Date: 9/20/07

RSP Project No.
6138.071440

Scale
AS NOTED

Drawn By:
CEB