

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that 39 LLC, ** 39 LLC

Located At 39 FOREST

Job ID: 2011-06-1492-ALTCOMM

CBL: 037 - - A - 012 - 001 - - - -

has permission to Tenant fit up for IT for MMC

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

[Handwritten signature and date 7/11/11]

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**
 1. Close-in inspection required prior to insulating or drywalling.
 2. Final Certificate of Occupancy inspection required upon completion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-06-1492-ALTCOMM

Located At: 39 FOREST

CBL: 037 - - A - 012 - 001 - - - -

Conditions of Approval:

Zoning

1. This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
2. ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
3. Separate permits shall be required for any new signage.

Fire

All construction shall comply with City Code Chapter 10.

This permit is being approved on the basis of the plans submitted. Any deviation from the plans would require amendments and approval.

A separate Fire Alarm Permit is required for new systems; or for work effecting more than 5 fire

The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.

Fire Alarm system shall be maintained. If system is to be off line over 4 hours a fire watch shall be in place. Dispatch notification required 874-8576.

Sprinkler protection shall be maintained. Where the system is to be shut down for maintenance or repair, the system shall be checked at the end of each day to insure the system has been placed back in service.

Fire extinguishers are required per NFPA 10.

Emergency lights and exit signs are required. Emergency lights and exit signs are required to be labeled in relation to the panel and circuit and on the same circuit as the lighting for the area they serve.

Capt. Gautreau

Building

1. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
2. Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
3. All penetrations through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2009 Section 713.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-06-1492-ALTCOMM	Date Applied: 6/22/2011	CBL: 037 - - A - 012 - 001 - - - - -	
Location of Construction: 39 FOREST ST (1st level & 2nd level) <i>Arce</i>	Owner Name: 39 LLC	Owner Address: 100 SILVER ST PORTLAND, ME - MAINE 04101	Phone:
Business Name:	Contractor Name: North Shore Construction Inc. - Herb Robinson	Contractor Address: 150 Dawson St., South Portland, ME 04106	Phone: (207) 774-2800
Lessee/Buyer's Name: Maine Medical Center	Phone: 207-662-8065	Permit Type: Building	Zone: B-3c
Past Use: Commercial	Proposed Use: Offices - tenant fit up IT for Maine Medical Center	Cost of Work: 85000.00	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved <i>w/ Conditions</i> <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: B Type: 2 IBC 09
Proposed Project Description: Tenant Improvements : Office Renovations		Signature: <i>CAPT. D. Gauthier 6/26</i> Pedestrian Activities District (P.A.D.)	

Permit Taken By:	Zoning Approval
------------------	------------------------

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building Permits do not include plumbing, septic or electrical work.</p> <p>3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: <i>6/24/11</i> <i>ok w/ conditions ABN</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input type="checkbox"/> Not in Dist or Landmark</p> <p><input type="checkbox"/> Does not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>Any exterior work requires a separate review: approval thru historic</i></p>
---	--	--	--

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	PHON
---	------	------

B-3c historic

15/0



General Building Permit Application

Location/Address of Construction: 39 Forest Ave <i>1st Floor</i>	
Total Square Footage of Proposed Structure/Area	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <i>037</i> Block# <i>A</i> Lot# <i>012</i>	Applicant * must be owner, Lessee or Buyer* Name Maine Medical Center Address 335 Brighton Ave City, State & Zip Portland, ME 04103
Telephone: 207.662.8065	
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Commercial Properties Address 100 Silver St. City, State & Zip Portland, ME 04101
Cost Of Work: \$ 85,000.00	
C of O Fee: \$ 75	
Total Fee: \$ 870	
Current legal use (i.e. single family) Office	
If vacant, what was the previous use?	
Proposed Specific use:	
Is property part of a subdivision? _____ If yes, please name _____	
Project description: Tenent improvements: Office Renovation See plans	
RECEIVED JUN 22 2011 Dept. of Building Inspections City of Portland, Maine Telephone: 207.774.2800	
Contractor's name: NorthShore Construction Inc.	
Address: 150 Dawson Street	
City, State & Zip: South Portland, Me 04106	
Who should we contact when the permit is ready: Herb Robinson	Telephone: 207.650.2547
Mailing address: PO Box 2564 South Portland, ME 04116	

11-22-11

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: *[Handwritten Signature]* Date: **6/22/2011**

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



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

_____ 11-2-20 11

Received from Worth...

Location of Work ...

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 125

Building (IL) ___ Plumbing (I5) ___ Electrical (I2) ___ Site Plan (U2) ___

Other _____

CBL: 37 A 12

Check #: 10506 Total Collected \$ _____

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

RECEIVED

JUN 22 2011

Dept. of Building Inspections
City of Portland Maine

39 Forest Ave IT FIT-UP - Level 1 Renovations

Portland, Maine



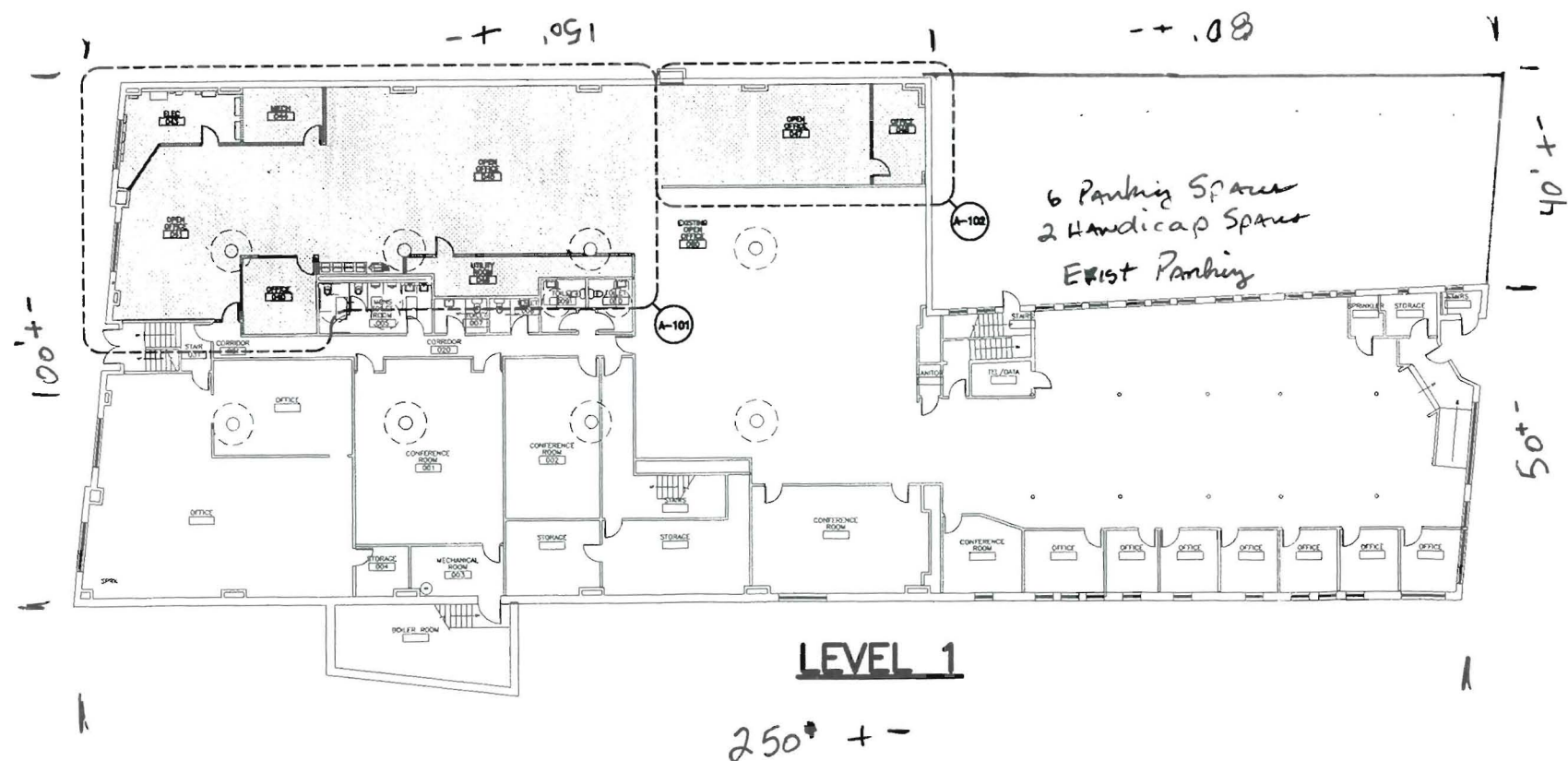
DRAWING LIST

- G-001 TITLE SHEET
- G-002 LIFE SAFETY PLAN
- G-003 PARTITION LEGEND

- AD101 DEMOLITION PLAN
- AD102 DEMOLITION PLAN

- A-101 PARTIAL FLOOR PLAN LEVEL 1
- A-102 PARTIAL FLOOR PLAN LEVEL 2
- A-103 SCHEDULES

Plot Plan



ISSUED FOR PERMITTING 6-20-11

144 Fore Street/P.O. Box 618
Portland, Maine 04104
tel. (207) 772-3846
fax. (207) 772-1070
www.smrtinc.com

ARCHITECTURE
ENGINEERING
PLANNING
INTERIOR DESIGN
COMMISSIONING

SMRT

**39 FOREST AVE
IT FIT-UP RENOVATION**
Portland, Maine



ISSUED FOR PERMITTING
6-20-11

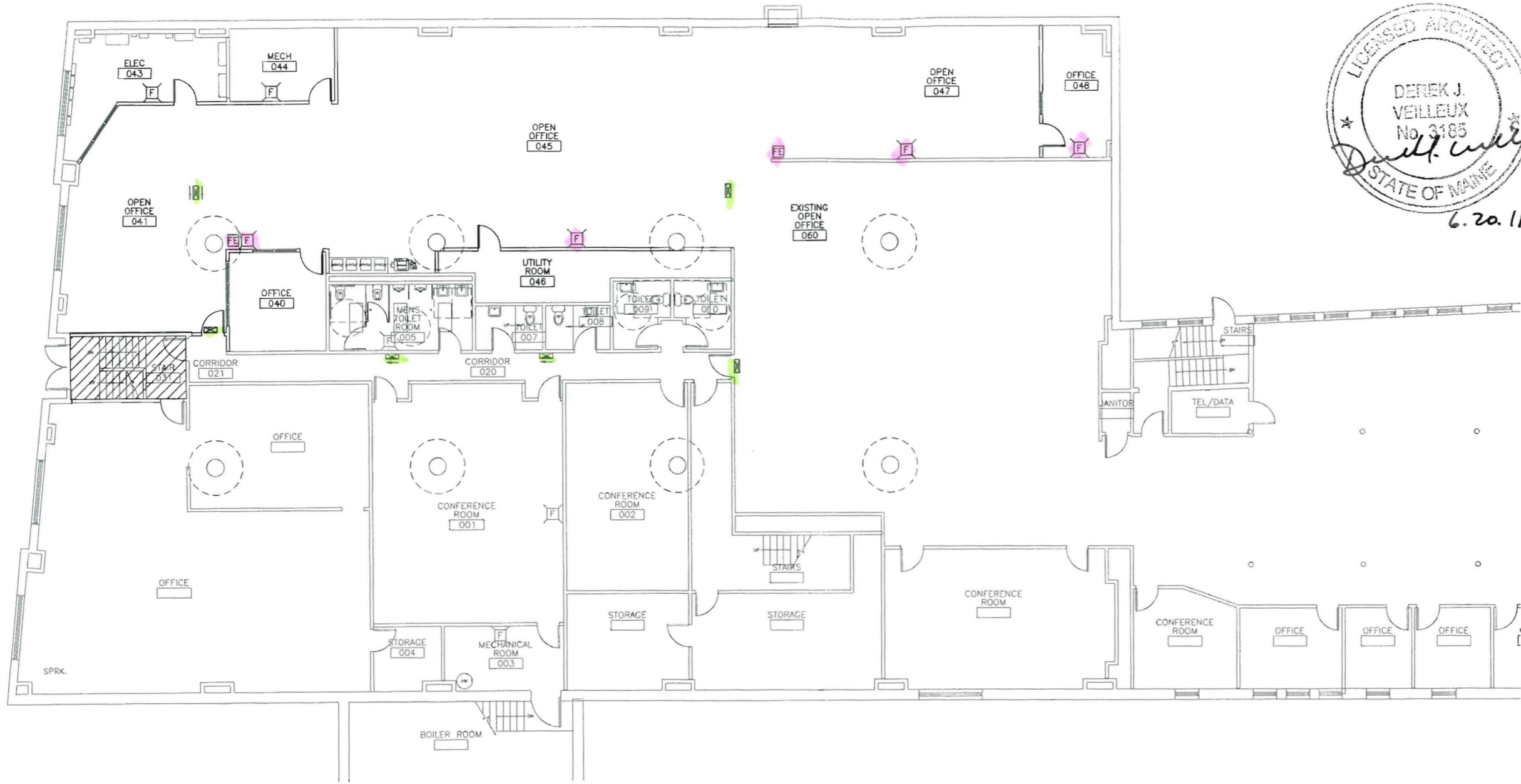
CURRENT ISSUE STATUS:

REV	DESCRIPTION	DATE
0	ISSUED FOR PERMITTING	6-20-11

SCALE:	N.T.S.
PROJECT MANAGER:	DJV
JC/DRAWN BY:	MDR
A/E OF RECORD:	
CAD FILE:	A-101-11082
PROJECT NO:	11082
DATE:	

SHEET TITLE:
COVER SHEET

SHEET No. **G-001**
© COPYRIGHT 2009 SMRT INC.



LICENSED ARCHITECT
 DEREK J. VEILLEUX
 No. 3185
 STATE OF MAINE
Derek J. Veilleux
 6.20.11

PARTIAL LEVEL 1

NOTES

1. BUILDING IS FULLY SPRINKLED.
2. EGRESS LIGHTING SHALL BE PROVIDED IN ALL CORRIDORS AND PASSAGEWAYS LEADING TO EXITS. A MINIMUM AVERAGE OF 1 FOOT-CANDLE IS TO BE PROVIDED. THE SOURCE OF ILLUMINATION SHALL BE PROVIDED FOR 90 MINUTES AND CAN BE ANY OF THE FOLLOWING:
 - a. BATTERY BALLAST LIGHT FIXTURES
 - b. INDIVIDUAL BATTERY UNIT WITH UNIT MONITOR OR REMOTE LAMPS.

SYMBOL LEGEND

- EXIT SIGN, ARROWS INDICATE EGRESS DIRECTION, SHADING INDICATES SIGN FACE
- FIRE ALARM AUDIBLE/VISUAL NOTIFICATION APPLIANCE. NUMBER IN PARENTHESES INDICATES ILLUMINATION IN CANDELA
- FIRE ALARM VISIBLE-ONLY NOTIFICATION APPLIANCE
- FIRE EXTINGUISHER, SURFACE MOUNTED
- EXISTING 2 HR FIRE RATED ENCLOSURE MAINTAIN CONTINUITY OF ENCLOSURE. REPAIR ANY DEFICIENCIES FOUND.

ARCHITECTURE
 ENGINEERING
 PLANNING
 INTERIOR DESIGN
 COMMISSIONING
SMRT

39 FOREST AVE
IT FIT-UP RENOVATION
 Portland, Maine



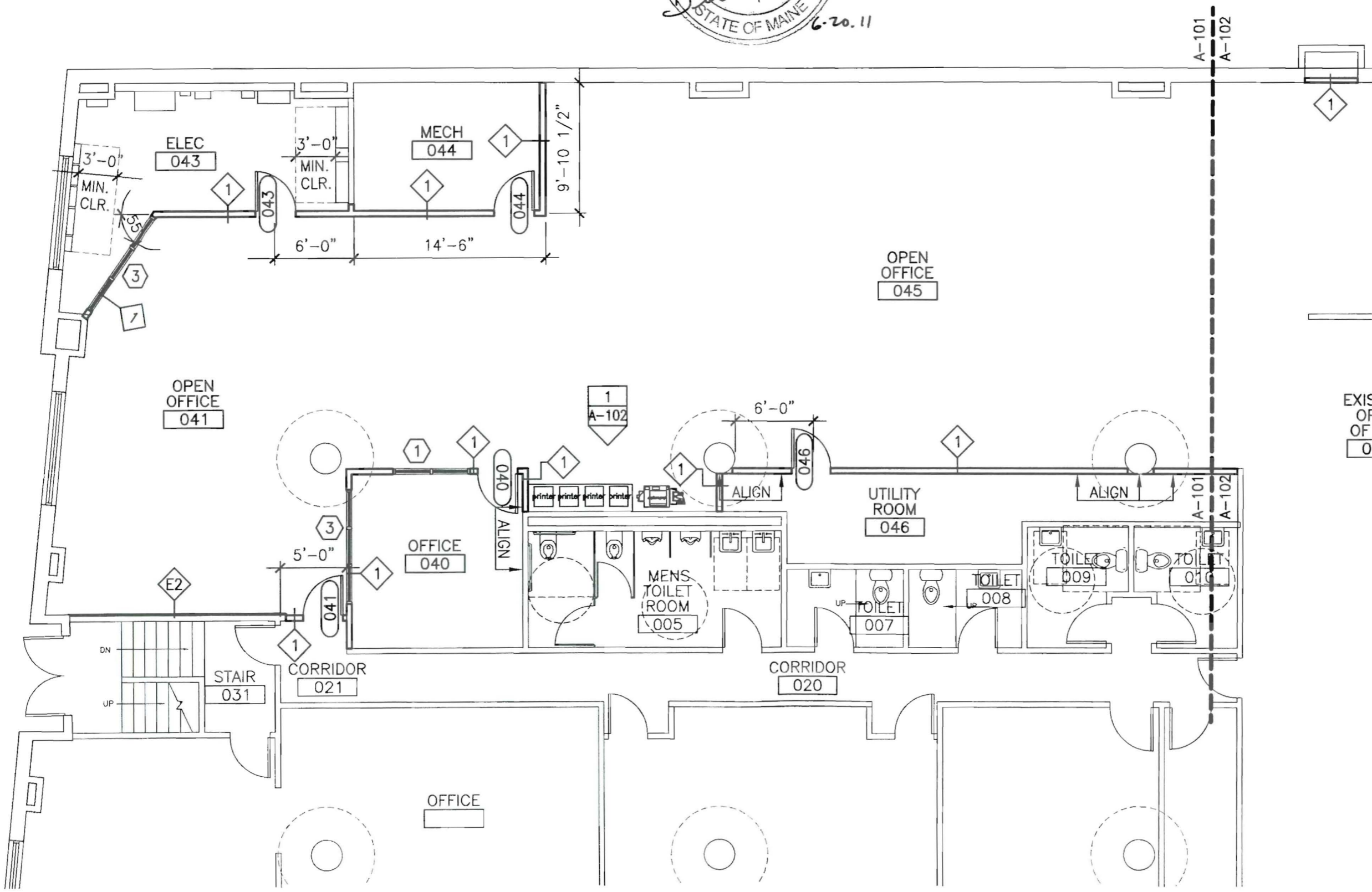
ISSUED FOR PERMITTING			
6-20-11			
CURRENT ISSUE STATUS:			
O	ISSUED FOR PERMITTING	6-20-11	DATE
REV	DESCRIPTION		
SCALE: 1/16"=1'-0"			
PROJECT MANAGER:		DJV	
JC/DRAWN BY:		MDR	
A/E OF RECORD:			
CAD FILE:		G-002-11082	
PROJECT NO:		11082	
DATE:			
SHEET TITLE:		LIFE SAFETY PLANS	
SHEET No.		G-002	
<small>© COPYRIGHT 2009 SMRT INC.</small>			

144 Fore Street/P.O. Box 618
 Portland, Maine 04104
 tel. (207) 772-3846
 fax. (207) 772-1070
 www.smrtinc.com



FLOOR PLAN NOTES

1. DIMENSIONS SHOWN ARE APPROXIMATE. WHERE POSSIBLE, ALIGN STUDS WITH FLAT, WAFFLE SLB RIBS FOR EASE OF CONSTRUCTIBILITY.



144 Fore Street/P.O. Box 618
 Portland, Maine 04104
 tel. (207) 772-3846
 fax. (207) 772-1070
 www.smrtinc.com

ARCHITECTURE
 ENGINEERING
 PLANNING
 INTERIOR DESIGN
 COMMISSIONING

SMART

**39 FOREST AVE
 IT FIT-UP RENOVATION**
 Portland, Maine

**ISSUED FOR PERMITTING
 6-20-11**

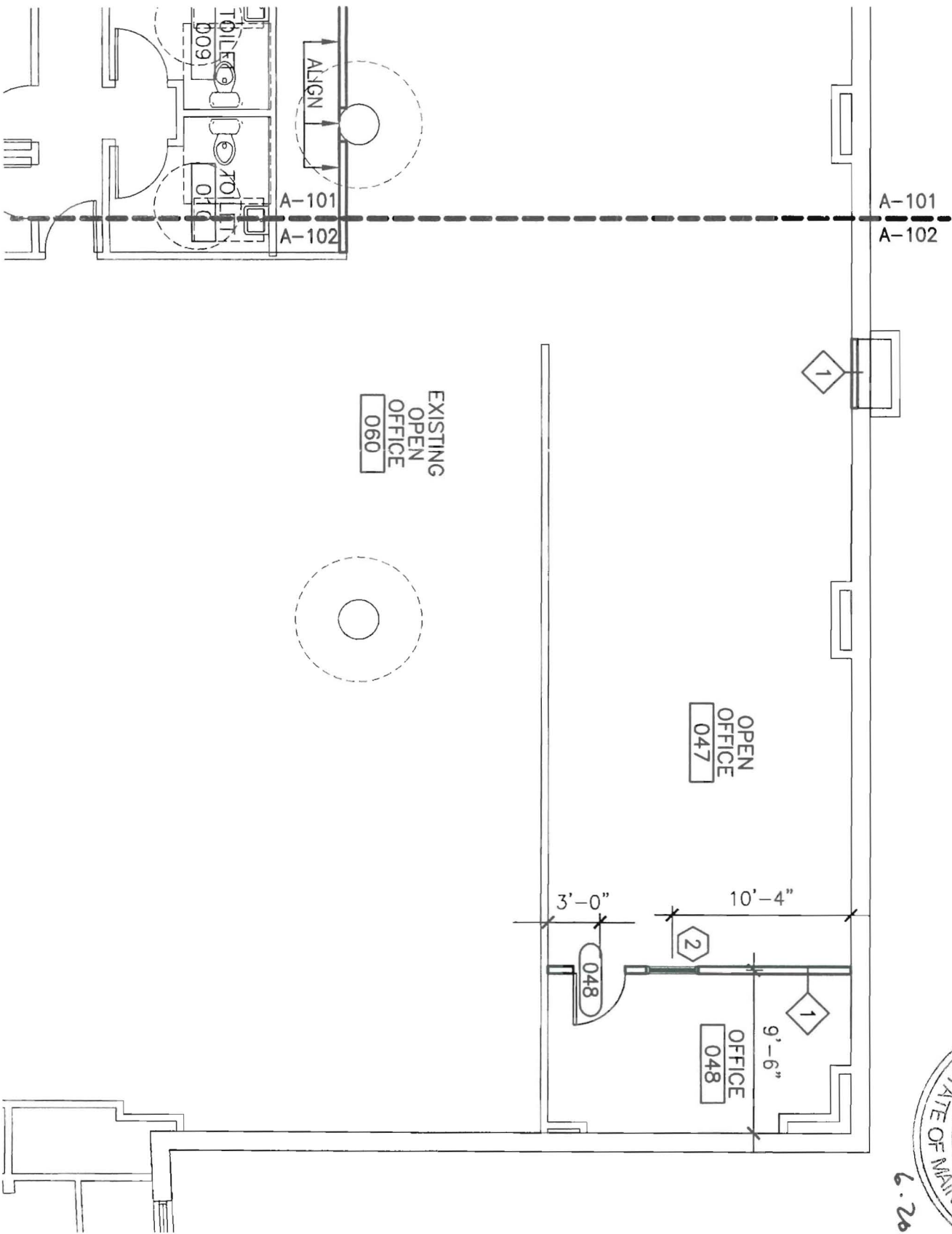
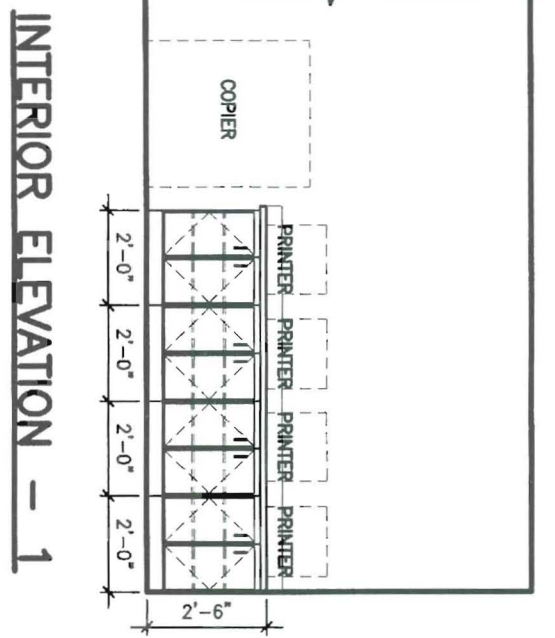
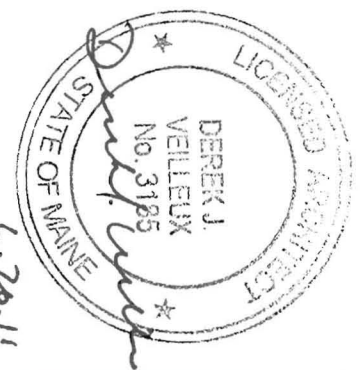
REV	DESCRIPTION	DATE
0	ISSUED FOR PERMITTING	6-20-11

SCALE: 1/8" = 1'-0"

PROJECT MANAGER: DJV
 JC/DRAWN BY: MDR
 A/E OF RECORD:
 CAD FILE: A-101-11009
 PROJECT NO: 11082
 DATE:
 SHEET TITLE:
**PARTIAL FLOOR PLAN
 LEVEL 1**
 SHEET No. **A-101**
 © COPYRIGHT 2009 SMART INC.

FLOOR PLAN NOTES

1. DIMENSIONS SHOWN ARE APPROXIMATE. WHERE POSSIBLE, ALIGN STUDS WITH FLAT, WAFFLE SLB RIBS FOR EASE OF CONSTRUCTIBILITY.



ARCHITECTURE
ENGINEERING
PLANNING
INTERIOR DESIGN
COMMISSIONING

144 Fore Street/P.O. Box 618
Portland, Maine 04104
tel. (207) 772-3846
fax. (207) 772-1070
www.smrinc.com



**39 FOREST AVE
IT FIT-UP RENOVATION**
Portland, Maine



**ISSUED FOR PERMITTING
6-20-11**

CURRENT ISSUE STATUS:

REV	DESCRIPTION	DATE
0	ISSUED FOR PERMITTING	6-20-11

SCALE: 1/8"=1'-0"

PROJECT MANAGER: DJV

JC/DRAWN BY: MDR

A/E OF RECORD:

CAD FILE: A-102-11009

PROJECT NO: 11082

DATE:

SHEET TITLE:

**PARTIAL FLOOR PLAN
LEVEL 2**

SHEET No. **A-102**

© COPYRIGHT 2009 SMRT INC.



ARCHITECTURE
 ENGINEERING
 PLANNING
 INTERIOR DESIGN
 COMMISSIONING

144 Fore Street/P.O. Box 618
 Portland, Maine 04104
 tel. (207) 772-3846
 fax. (207) 772-1070
 www.smrtinc.com

SMRT

39 FOREST AVE
 IT FIT-UP RENOVATION
 Portland, Maine

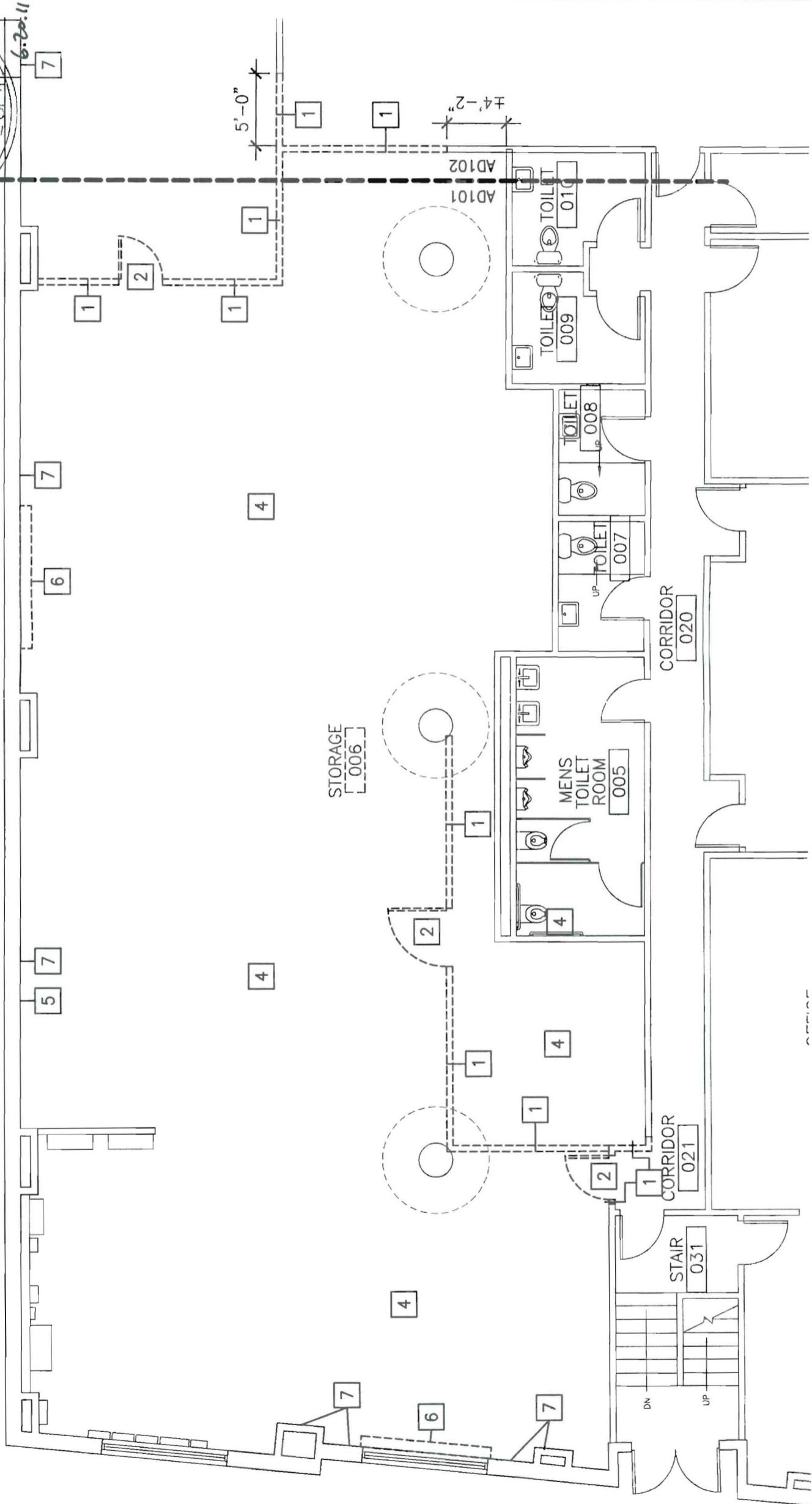
ISSUED FOR PERMITTING
 6-20-11

CURRENT ISSUE STATUS:

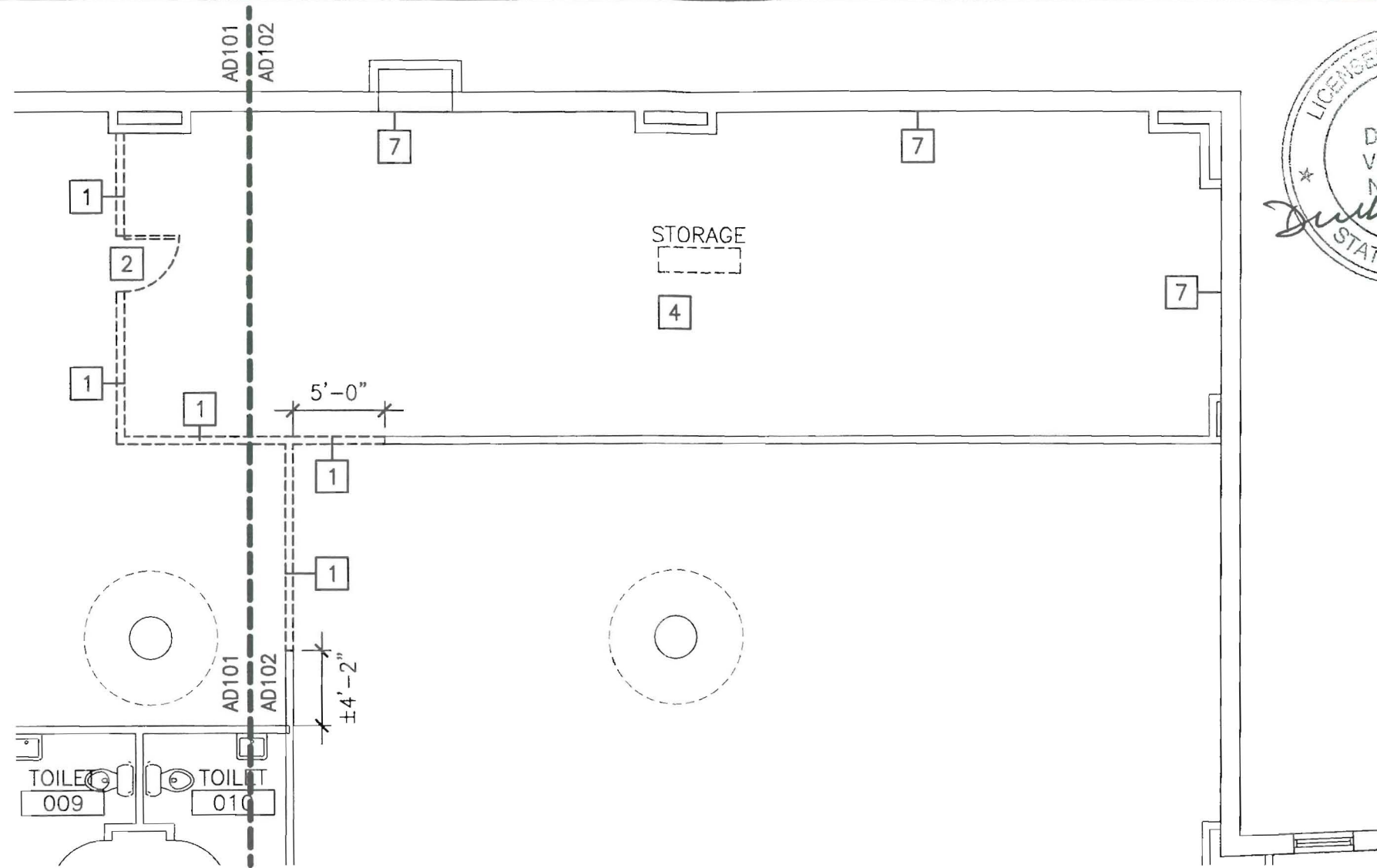
REV	DESCRIPTION	DATE

SCALE: 1/8" = 1'-0"
 PROJECT MANAGER: DJV
 JC/DRAWN BY: MDR
 A/E OF RECORD: AD101-11082
 CAD FILE: AD101-11082
 PROJECT NO: 11082
 DATE:

SHEET TITLE:
**PARTIAL DEMOLITION
 FLOOR PLAN**
 SHEET No. **AD101**
© COPYRIGHT 2009 SMRT INC.



NOTE:
 SEE AD102 FOR GENERAL
 DEMOLITION NOTES AND KEYED
 NOTES.



GENERAL DEMOLITION NOTES

1. COORDINATE EXTENT OF DEMOLITION WITH LOCATIONS OF PARTITIONS DESCRIBED ON PLANS AND WITH LOCATIONS OF FINISHES NOTED AS EXISTING TO REMAIN.
2. ANY WALL, PARTITION OR SURFACE DISTURBED BECAUSE OF NEW WORK OR DEMOLITION SHALL BE PATCHED AND FINISHED CONTINUOUSLY TO THE NEAREST CORNER UNLESS NOTED OTHERWISE, MATCH EXISTING ADJACENT CONSTRUCTION FINISHES, CONTINUITY AND FIRE RATINGS UNLESS NOTED OTHERWISE.
3. PROTECT ALL FINISHES, MATERIALS AND EQUIPMENT NOTED AS EXISTING TO REMAIN. CONTRACTOR SHALL BE RESPONSIBLE TO REPLACE ALL FINISHES, MATERIALS AND EQUIPMENT DAMAGED DURING CONSTRUCTION.

DEMOLITION PLAN KEY NOTES

- 1 REMOVE PARTITION. PATCH ADJOINING WALL TO MATCH ADJACENT FINISH.
- 2 REMOVE DOOR AND FRAME.
- 3 NOT USED
- 4 REMOVE ANY EXISTING FLOORING AND PREPARE SURFACE FOR SCHEDULED FLOORING.
- 5 CUT OPENING IN EXTERIOR WALL TO PROVIDE MAKE UP AIR, COODINATE WITH MECH CONTRACTOR,
- 6 REMOVE EXISTING CAST IRON RADIATOR
- 7 SCRAP/SAND EXISTING CONCRETE FOUNDATION AND PREPARE FOR PTD.

ARCHITECTURE
ENGINEERING
PLANNING
INTERIOR DESIGN
COMMISSIONING



**39 FOREST AVE
IT FIT-UP RENOVATION**
Portland, Maine



144 Fore Street/P.O. Box 618
Portland, Maine 04104
tel. (207) 772-3846
fax. (207) 772-1070
www.smrftinc.com

ISSUED FOR PERMITTING
6-20-11

CURRENT ISSUE STATUS:

REV	DESCRIPTION	DATE

SCALE:	1/8"=1'-0"
PROJECT MANAGER:	DJV
JC/DRAWN BY:	MDR
A/E OF RECORD:	
CAD FILE:	AD102-11082
PROJECT NO:	11082
DATE:	
SHEET TITLE:	PARTIAL DEMOLITION FLOOR PLAN
SHEET No.	AD102

ROOM FINISH SCHEDULE

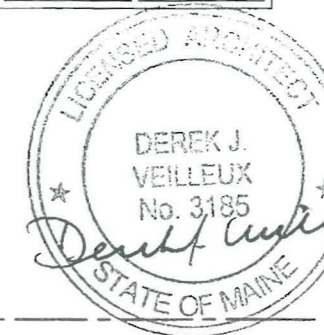
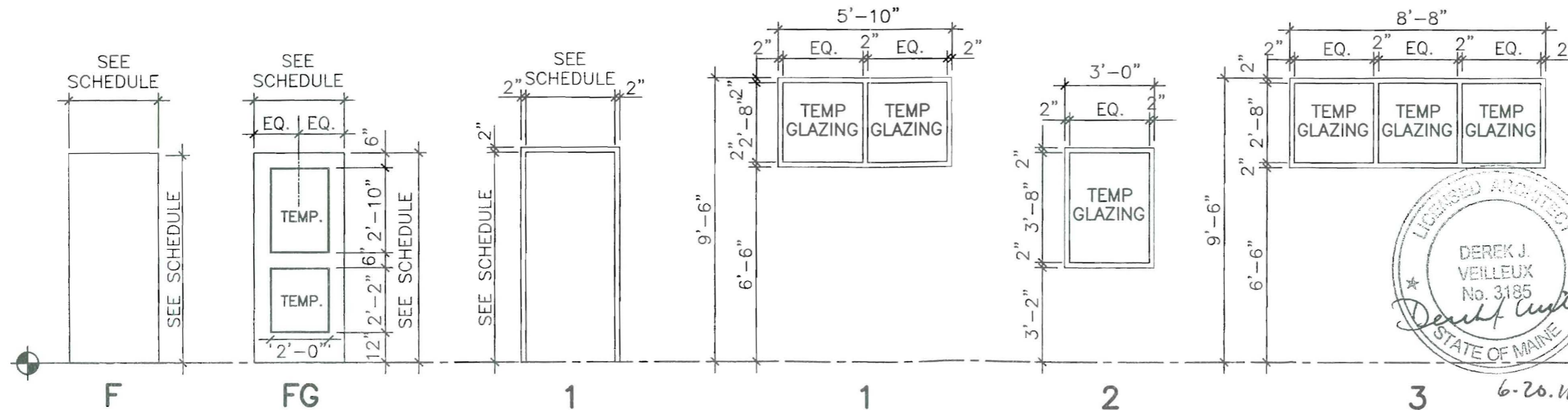
ROOM NUMBER	ROOM NAME	FLOOR	BASE	WALLS				CEILING		ROOM NUMBER	REMARKS
				NORTH	SOUTH	EAST	WEST	MATERIAL	HEIGHT		
021	CORRIDOR	←			EXISTING				→	021	
031	STAIR	←			EXISTING				→	031	
040	OFFICE	CARPET	RB	PTD	PTD	PTD	PTD	PTD	E	040	
041	OPEN OFFICE	CARPET	RB	PTD	PTD	PTD	PTD	PTD	E	041	
043	ELEC	←			EXISTING				→	043	
044	MECH	←			EXISTING				→	044	
045	OPEN OFFICE	CARPET	RB	PTD	PTD	PTD	PTD	PTD	E	045	
046	MECH	←			EXISTING				→	046	PTD AS REQUIRED
047	OPEN OFFICE	CARPET	RB	PTD	PTD	PTD	PTD	PTD	E	047	
048	OPEN OFFICE	CARPET	RB	PTD	PTD	PTD	PTD	PTD	E	048	

NOTES

- ALL FINISH MATERIAL SELECTIONS ARE BY OWNER

DOOR SCHEDULE

DOOR NUMBER	DOOR			GLAZING	FRAME MATERIAL	FIRE RATING (MIN.)	REMARKS
	SIZE	MATERIAL	ELEVATION				
040	3'-0"x7'-0"	WD	FG	TEMP	HM		
041	3'-0"x7'-0"	WD	FG	TEMP	HM	20	SMOKE, 20 MIN, CLOSER
043	3'-0"x7'-0"	WD	F	-	HM		
044	3'-0"x7'-0"	WD	F	-	HM		
046	3'-0"x7'-0"	WD	F	-	HM		
048	3'-0"x7'-0"	WD	FG	TEMP	HM		



144 Fore Street/P.O. Box 618
 Portland, Maine 04104
 tel. (207) 772-3846
 fax. (207) 772-1070
 www.smtinc.com

ARCHITECTURE
 ENGINEERING
 PLANNING
 INTERIOR DESIGN
 COMMISSIONING

SMRT
 39 FOREST AVE
 IT FIT-UP RENOVATION
 Portland, Maine



ISSUED FOR PERMITTING
 6-20-11

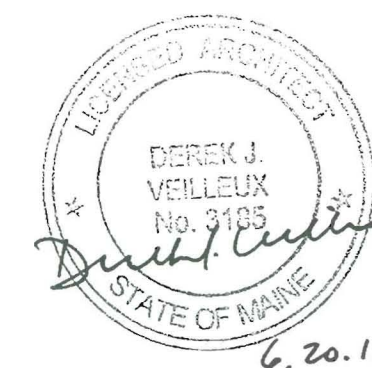
CURRENT ISSUE STATUS:

REV	DESCRIPTION	DATE
0	ISSUED FOR PERMITTING	6-20-11

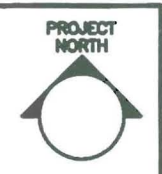
SCALE:
 PROJECT MANAGER: DJV
 JC/DRAWN BY: MDR
 A/E OF RECORD:
 CAD FILE: A-103-11009
 PROJECT NO: 11082
 DATE:

SHEET TITLE:
SCHEDULES

SHEET No. **A-103**
 © COPYRIGHT 2009 SMRT INC.



144 Fore Street/P.O. Box 618
 Portland, Maine 04104
 tel. (207) 772-3846
 fax. (207) 772-1070
 www.smrinc.com



**39 FOREST AVE
 IT FIT-UP RENOVATION**
 Portland, Maine

ARCHITECTURE
 ENGINEERING
 PLANNING
 INTERIOR DESIGN
 COMMISSIONING



ISSUED FOR PERMITTING
 6-20-11

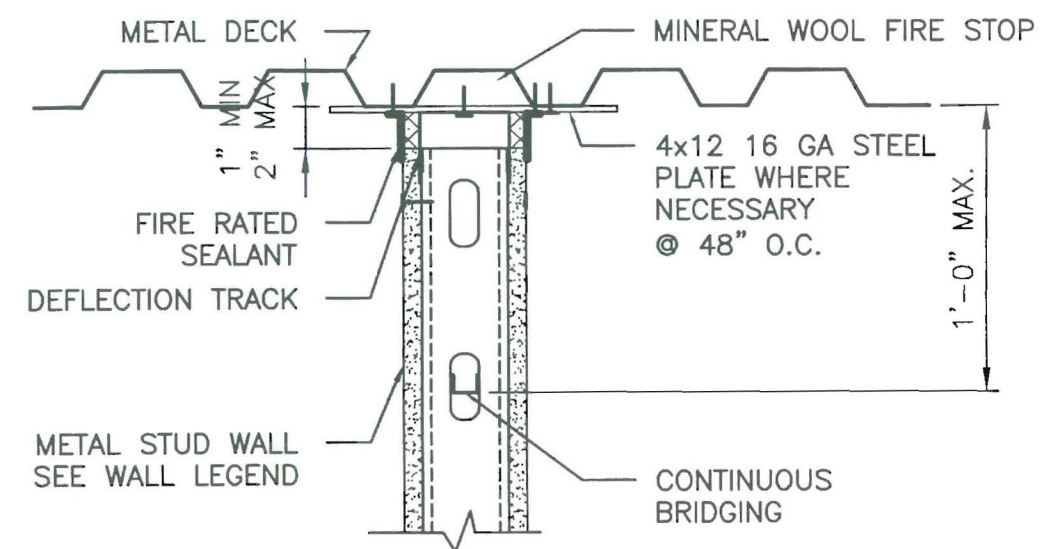
REV	DESCRIPTION	DATE
0	ISSUED FOR PERMITTING	6-20-11

CURRENT ISSUE STATUS:

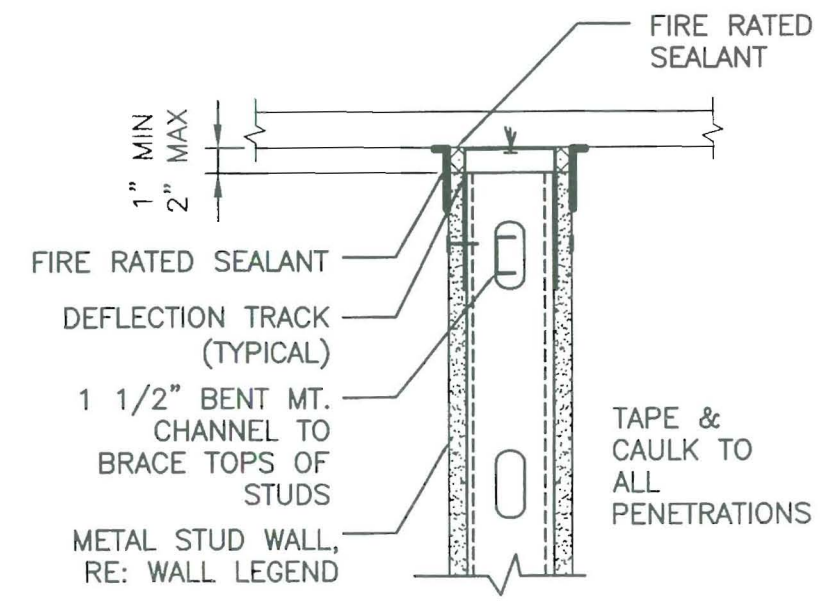
SCALE: 1/8"=1'-0"
 PROJECT MANAGER: DJV
 JC/DRAWN BY: MDR
 A/E OF RECORD:
 CAD FILE: G-003-11082
 PROJECT NO: 11082
 DATE:

SHEET TITLE:
PARTITION LEGEND

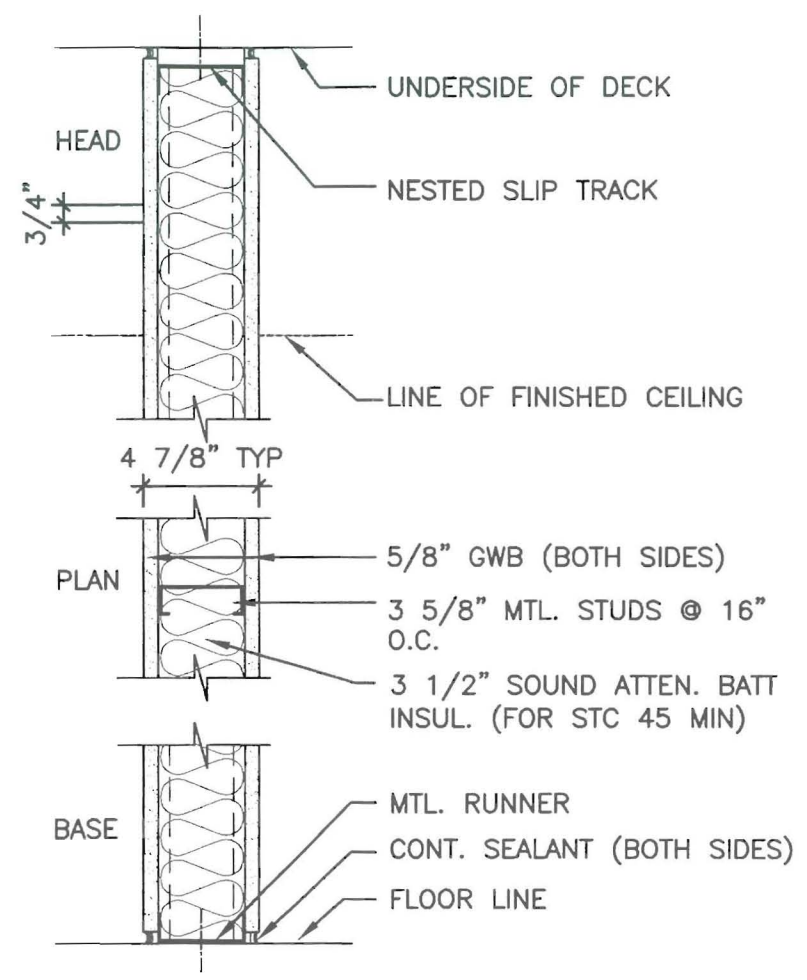
SHEET No. **G-003**
 © COPYRIGHT 2009 SMRT INC.



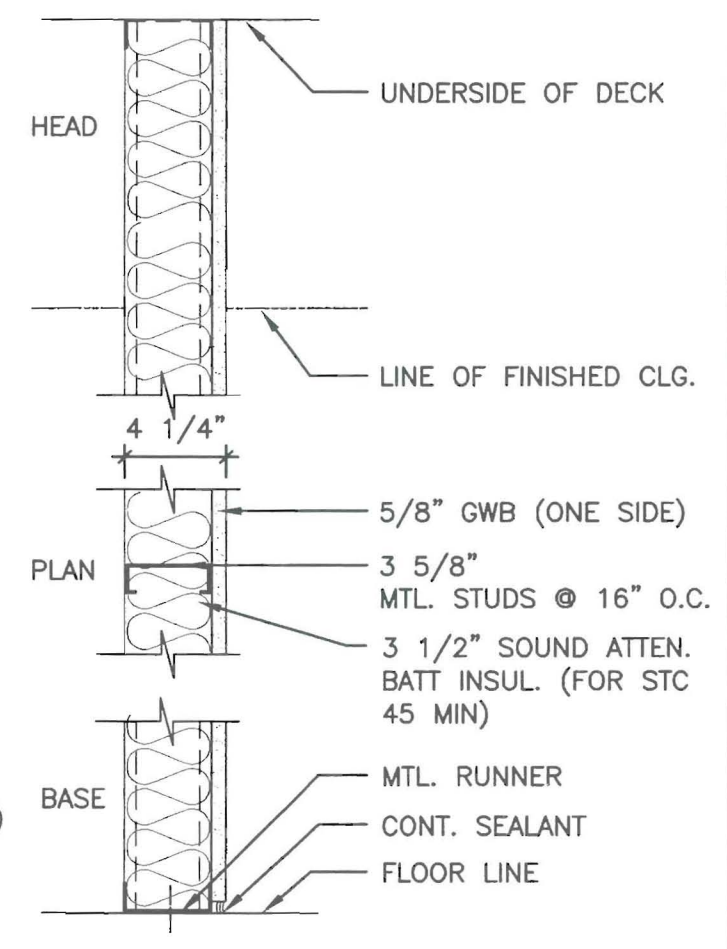
UL RATED FIRE ASSEMBLY : #HW-D-0087



**TYPICAL TOP OF
 RATED WALL DETAILS**



1 CONSTRUCT AS SHOWN
 *TYPICAL PARTITION U.N.O.



2 CONSTRUCT AS SHOWN

PARTITIONS

E2 REPAIR EXISTING WALL TO MEET
 2HR RATING REQUIREMENTS.