

E-Plan ✓
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City of Portland, Maine - Building or Use Permit Application

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

Permit No: 2013-00341	Issue Date:	CBL: 038 B002001
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Location of Construction: 2 PORTLAND SQ - 7th floor	Owner Name: RREEF AMERICA REIT III CORP Z4	Owner Address: PO BOX 4900 DEPT 207 SCOTTSDALE , AZ 85261		Phone:
Business Name:	Contractor Name: CBRE Boulos Company / Paul Urenceck	Contractor Address: 1 Canal Plaza Portland ME 04101		Phone (207) 871-1290
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial		Zone: B3
Past Use: 1st floor: bank, retail, restaurant with offices above the first floor	Proposed Use: Same: 1st floor bank, retail, restaurant with office above the 1st floor	Permit Fee: \$935.00	Cost of Work: \$83,767.00	CEO District: 2
Proposed Project Description: Interior renovations to office space on the 7th floor		FIRE DEPT: 4/10/13 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	INSPECTION: Use Group: B Type: 2B MUBEC2009 IBC Signature: [Signature] 3/25/13	
		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: gg	Date Applied For: 02/20/2013	Zoning Approval	
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	<input type="checkbox"/> Special Z <input type="checkbox"/> Shorelan <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Z <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan	<input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> Historic Preservation <input type="checkbox"/> of 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
	CLOSED 		
	Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 2/20/13	Date: _____	Date: _____

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

4-23-13

GF/BKL OK - WALL CLOSE IN ONLY.
WILL NEED ABOVE CEILING

5-16-13

GF/BKL OK - ABOVE
CEILING.

5-23-13

GF/JM

BKL - PASS

PASS - FINAL - CLOSE

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that

RREEF AMERICA REIT III CORP Z4 /CBRE Boulos
Company / Paul Urenceck

Located at

2 Portland Sq

PERMIT ID: 2013-00341 **ISSUE DATE:** 04/11/2013 **CBL:** 038 B002001

has permission to **Interior renovations to office space on the 7th floor**

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 cloed-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 procured prior to occupancy.

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

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

SCANNED

BUILDING PERMIT INSPECTION PROCEDURES
Please call 874-8703 (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.**

REQUIRED INSPECTIONS:

Close-in Plumbing/Framing

Electrical Close-in

Above Ceiling Inspection

Final - Electric

Final - Commercial

Final - Fire

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.

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Permit No: 2013-00341	Date Applied For: 02/20/2013	CBL: 038 B002001
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Business Name:	Contractor Name: CBRE Boulos Company / Paul Uren	Contractor Address: 1 Canal Plaza Portland	Phone (207) 871-1290
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Same: 1st floor bank, retail, restaurant with office above the 1st floor	Proposed Project Description: Interior renovations to office space on the 7th floor
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 02/20/2013
Note:	Ok to Issue: <input checked="" type="checkbox"/>		

Dept: Building	Status: Approved w/Conditions	Reviewer: Jeanie Bource	Approval Date: 03/25/2013
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
<ol style="list-style-type: none"> 1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm, HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process. 2) Interior finishes shall be classified in accordance with ASTM E 84 for flame spread and smoke-developed indexes as specified per occupancy group in IBC 2009 Chapter 8. 3) Any modifications to existing building systems and all new systems (HVAC, electrical, plumbing) shall meet IECC 2009 or ASHRAE 90.1-2007 requirements for energy code compliance. 4) The glazed wall panels to be installed per the manufacturers specifications and shall meet the loading requirements of IBC Sec. 2403 and Chap. 16. 5) Penetrations through fire resistance rated assemblies shall be protected by an approved penetration firestop system installed as tested in accordance with ASTM E814 or UL 1479 6) Permit approved based upon information provided by the applicant or design professional. Any deviation from approved plans requires separate review and approval prior to work. 			

Dept: Fire	Status: Approved w/Conditions	Reviewer: Ben Wallace Jr	Approval Date: 04/10/2013
Note: Approval based upon most current revised plans.	Ok to Issue: <input checked="" type="checkbox"/>		
<ol style="list-style-type: none"> 1) Through-penetrations and membrane penetrations in fire walls, fire barrier walls, and fire resistance rated horizontal assemblies shall be protected by firestop systems or devices in conformance with NFPA 101:8.3.5 (ASTM E 814 or ANSI/UL 1479). Providing firestop labels at each firestop system or device and an onsite manual containing the detail for each firestop system or device used for the project will streamline final inspection approvals. 2) A separate Fire Alarm Permit is required for new systems; or for work effecting more than 5 fire alarm devices; or replacement of a fire alarm panel with a different model. This review does not include approval of fire alarm system design or installation. 3) A separate Suppression System Permit is required for all new suppression systems, including standpipe systems, and sprinkler work effecting more than 20 heads. This review does not include approval of system design or installation. 4) Fire extinguishers are required per NFPA 1. 5) All means of egress to remain accessible at all times. 6) 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. 7) Any cutting and welding done will require a Hot Work Permit from Fire Department. 8) Construction or installation shall comply with City Code Chapter 10. 			

Location of Construction: 2 Portland Sq	Owner Name: RREEF AMERICA REIT III CORP	Owner Address: PO BOX 4900 DEPT 207	Phone:
Business Name:	Contractor Name: CBRE Boulos Company / Paul Uren	Contractor Address: 1 Canal Plaza Portland	Phone (207) 871-1290
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

- 9) Notice: The first scheduled final inspection fee is at no charge. Additional inspections shall be billed at \$75 for each inspector.
- 10 **The fire alarm system design shall be evaluated for the renovated areas by an NICET IV certified interior fire alarm designer or a licensed engineer for compliance with the code. A compliance letter is required prior to the final inspection.**
 A current inspection sticker from an approved fire alarm inspection company is required prior to the final inspection.
- 11 Fire walls, fire barriers, fire partitions, smoke barriers and smoke partitions or any other wall required to have protected openings or penetrations shall be effectively and permanently identified with signs or stenciling in accessible concealed floor, floor-ceiling or attic spaces at intervals not exceeding 30 feet with lettering not less than 0.5 inches in height.

will enclose electronic plans.



General Building Permit Application

20130634/

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>2 Portland Square : 7th Floor</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>038 B 002</u>	Applicant * must be owner, Lessee or Buyer* Name <u>CBRE -The Bowlos Co.</u> Address <u>One Portland Sq</u> City, State & Zip <u>04101</u>	Telephone: <u>Mike McDonald</u> <u>874-6000</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>83,967⁰⁰</u> C of O Fee: \$ <u>75⁰⁰</u> Total Fee: \$ <u>935⁰⁰</u>
Current legal use (i.e. single family) <u>OFFICE SPACE</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>OFFICE</u> Is property part of a subdivision? <u>NO</u> If yes, please name _____ Project description: <u>INTERIOR RENOVATIONS TO OFFICE SPACE.</u>		
Contractor's name: <u>Landry French Construction</u> Address: <u>68 Mussey Rd</u> City, State & Zip <u>Scarborough ME 04874</u> Telephone: <u>207-780-5566</u> Who should we contact when the permit is ready: <u>Scott Cristina / Becky Knox</u> Telephone: _____ Mailing address: <u>same</u>		

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: [Signature] Date: 2.11.13

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

RECEIVED
FEB 20 2013

Dept. of Building Inspections
City of Portland Maine



Certificate of Design

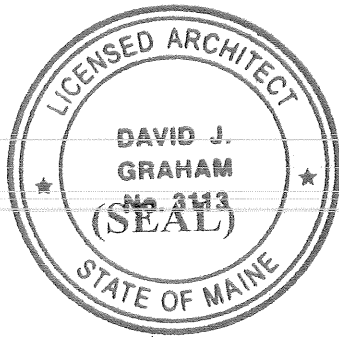
Date: 2.19.13

From: _____

These plans and / or specifications covering construction work on:

TWO PORTLAND SQUARE, PORTLAND, ME

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



Signature: David J. Graham

Title: ARCHITECT

Firm: GRAHAM ARCHITECTS

Address: 59 MILLS ROAD

KENNEBUNKPORT ME

Phone: 207-967-8850



Accessibility Building Code Certificate

Designer:

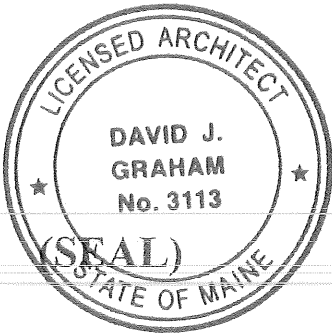
DAVID GRAHAM

Address of Project:

TWO PORTLAND, PORTLAND, ME

Nature of Project:

INTERIOR RENOVATION



Signature:

David J. Graham

Title:

ARCHITECT

Firm:

GRAHAM ARCHITECTS

Address:

59 MILLS RD

KENNEBUNKPORT ME

Phone:

207-967-8850

DEAN & ALLYN, INC.
FIRE PROTECTION / SPECIAL HAZARD

116 Lewiston Road
PO Box 709
Gray, ME 04039
P-207-657-5646 / F-207-657-5647

May 16, 2013

Portland Fire Department
Inspections / Prevention Division
Attn: Prevention & Inspections Division

Re: 7th Floor Raymond James Renovation
2 Ptd Sq,
Dean & Allyn Customer: Landry French Construction/ Rob Donahue
p- (207) 730-5566

Dear Sirs or Madam,

This letter is to confirm that the fire sprinkler system for the above referenced property has been renovated in accordance with NFPA# 13 2010, Maine State Fire Marshals office and Portland Fire Department's requirements.

Very truly yours,

Dean & Allyn, Inc.


Derek Narvaez
Project Manager

FIRE ALARM SYSTEM RECORD OF COMPLETION

To be completed by the system installation contractor at the time of system acceptance and approval.

1. Protected Property Information

Name of property: Two Portland Square*****ADD TO EXISTING SYSTEM*****

Address: 2 Portland Square, Portland, ME

Description of property: Commercial Office Space

Occupancy type: Commercial Office Spaces

Name of property representative: n/a

Address: n/a

Phone: n/a

Fax: n/a

E-mail: n/a

Authority having jurisdiction over this property: Portland Fire Dept

Phone: 207-874-8576

Fax: n/a

E-mail: n/a

2. Fire Alarm System Installation, Service, and Testing Information

Installation contractor for this equipment: DeBlois Electric Job Number 13-0834 attn Steve Morin

Address: 1033 Sabbatus St Lewiston, Maine 04240

Phone: 207-783-6512

Fax:

E-mail:

Service organization for this equipment: Norris, Inc

Address: 2257 W. Broadway S. Portland, ME

Phone: 1-800-370-3473

Fax: n/a

E-mail: www.norrisinc.com

Location of as-built drawings: n/a

Location of Historical Test Reports: n/a

Location of system operation and maintenance manuals: n/a

A contract for test and inspection in accordance with NFPA standards is in effect as of n/a

Contracted testing company: n/a

Address: n/a

Phone: n/a

Fax: n/a

E-mail: n/a

Contract expires: n/a

Contract number: n/a

Frequency of routine inspections: n/a

3. Type of Fire Alarm System or Service

NFPA 72[®], Chapter Reference of System Type: 8

Name of organization receiving alarm signals with phone numbers (if applicable):

Alarm: Portland Fire Department Master Box

Phone: 207-874-8576

Supervisory:

Phone:

Trouble:

Phone:

Entity to which alarms are retransmitted: Portland Fire

Phone: 1-207-854-8576

Method of retransmission of alarms to that organization or location: City Circuit Master Box

If Chapter 8, note the means of transmission from the protected premises to the central station:

Digital alarm communicator McCulloh Multiplex 2-way radio 1-way radio N/A

If Chapter 9, note the type of connection: Local energy Shunt N/A

3.1 System Software

Operating system (executive) software revision level: n/a

Site-specific software revision date: n/a Revision completed by: n/a

4. Signaling Line Circuits

Characteristics of signaling line circuits connected to this system (see NFPA 72[®], Table 6.6.1):

Quantity: 1 Style: 4 Class: B

5. Alarm-Initiating Devices and Circuits

Characteristics of initiating device circuits connected to this system (see NFPA 72[®], Table 6.5):

Quantity: n/a Style: n/a Class: n/a

5.1 Manual Initiating Devices

5.1.1 Manual Pull Stations Number of manual pull stations: 0

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2 Automatic Initiating Devices

5.2.1 Area Smoke Detectors Number of smoke detectors: 0

Type of coverage: Complete area Partial area Nonrequired partial area N/A

Type of devices: Addressable Conventional Coded Transmitter N/A

Type of smoke detector sensing technology: Ionization Photoelectric

5.2.2 Duct Smoke Detectors Number of duct smoke detectors: 0

Type of coverage: n/a

Type of devices: Addressable Conventional Coded Transmitter N/A

Type of smoke detector sensing technology: Ionization Photoelectric

5.2.3 Heat Detectors Number of heat detectors: 0

Type of coverage: Complete area Partial area Nonrequired partial area N/A

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2.4 Sprinkler Waterflow Detectors Number of waterflow detectors: 0

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2.5 Alarm Verification Number of devices subject to alarm verification: 0

Alarm verification on this system is: Enabled Disabled Set for _____ seconds

6. Supervisory Signal-Initiating Devices and Circuits

6.1 Sprinkler System Number of valve supervisory switches: 0

Type of devices: Addressable Conventional Coded Transmitter N/A

6.2 Fire Pump

Type of fire pump: Electric Diesel

Type of fire pump supervisory devices: Addressable Conventional Coded Transmitter N/A

Fire Pump Functions Supervised

Fire pump power Fire pump running Fire pump phase reversal Selector switch not in auto

Engine or control panel trouble Low fuel

Other: n/a

6.3 Engine-Driven Generator

Type of generator supervisory devices: Addressable Conventional Coded Transmitter N/A

Engine or control panel trouble Generator running Selector switch not in auto Low fuel

Other: n/a

7. Annunciators

7.1 Annunciator 1 Local Remote

Type: Addressable Directory Graphic N/A Location: n/a

7.2 Annunciator 2 Local Remote

Type: Addressable Directory Graphic N/A Location: n/a

7.3 Annunciator 3 Local Remote

Type: Addressable Directory Graphic N/A Location: n/a

8. Alarm Notification Devices and Circuits

8.1 Emergency Voice Alarm Service

Number of single voice alarm channels: 1

Number of multiple voice alarm channels: 0

Number of speakers: 3 Speaker Strobes

Number of speaker zones: 7

8.2 Telephone Jacks

Number of telephone jacks installed: 0

Number of telephone handsets stored on site: 0

Type of telephone system installed: Electrically powered Sound powered N/A

8.3 Nonvoice Audible System

Characteristics of notification device circuits connected to this system (see NFPA 72[®], Table 6.5):

Quantity: 1

Style: 4

Class: B

8.4 Types and Quantities of Nonvoice Notification Appliances Installed

Bells: 0 With visual device: 0 Horns: 0 With visual device: 0

Chimes: 0 With visual device: 0 Bells: 0 With visual device: 0

Visual devices without audible devices: 2 -Strobe Only Other (describe): 3- Speaker/Strobes

9. Emergency Control Functions Activated

- Hold-open door releasing devices Smoke management or smoke control
- Door unlocking Elevator recall Other

10. System Power Supply

10.1 Primary Power

Nominal voltage: 120 VAC Amps: 3
 Overcurrent protection: Type: Circuit Breaker Amps: 20
 Location (of primary supply panelboard): Electrical Room
 Disconnecting means location: n/a

10.2 Secondary Power

Location: At panel Type: Sealed Nominal voltage: 12 Current rating: n/a
 Number of standby batteries: 2 Amp hour rating: 12
 Location of emergency generator: n/a
 Location of fuel storage: n/a
 Calculated capacity of secondary power to drive the system
 In standby mode: n/a In alarm mode: n/a

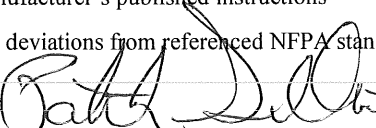
11. Record of System Installation

Fill out after all installation is complete and wiring has been checked for opens, shorts, ground faults, and improper branching, but before conducting operational acceptance tests.

The system has been installed in accordance with the following NFPA standards: (Note any or all that apply.)

- NFPA 72[®] NFPA 70[®], Article 760
- Manufacturer's published instructions Other (please specify):

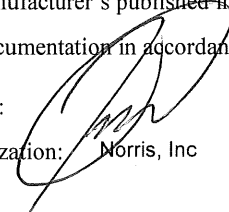
System deviations from referenced NFPA standards:

Signed:  Printed name: Pat Sullivan Date: 5-23-2013
 Organization: DeBlois Electric Title: Electrician Phone: 207-783-7428

12. Record of System Operation

All operational features and functions of this system were tested by or in the presence of the signer shown below, on the date shown below, and were found to be operating properly in accordance with the requirements of:

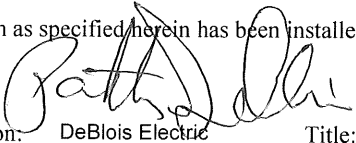
- NFPA 72[®] NFPA 70[®], Article 760
- Manufacturer's published instructions Other (please specify):
- Documentation in accordance with Inspection and Testing Form (Figure 10.6.2.3 of NFPA 72[®]) is attached

Signed:  Printed name: Joe Zuchara Date: 5-23-2013
 Organization: Norris, Inc Title: Technician Phone: 1-800-370-3473

13. Certifications and Approvals

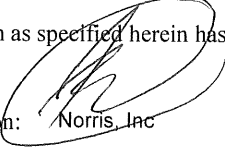
13.1 System Installation Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed:  Printed name: Pat Sullivan Date: 4/24/13
Organization: DeBlois Electric Title: Electrician Phone: 207-576-3976

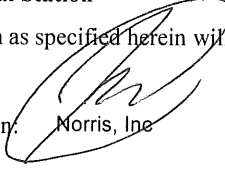
13.2 System Service Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed:  Printed name: Joe Zuchara Date: 4/24/13
Organization: Norris, Inc Title: Technician Phone: 1-800-370-3473

13.3 Central Station

This system as specified herein will be monitored according to all NFPA standards cited herein.

Signed:  Printed name: Joe Zuchara Date: 4/24/13
Organization: Norris, Inc Title: Technician Phone: 1-800-370-3473

13.4 Property Representative

I accept this system as having been installed and tested to its specifications and all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____
Organization: _____ Title: _____ Phone: _____

13.5 Authority Having Jurisdiction

I have witnessed a satisfactory acceptance test of this system and find it to be installed and operating properly in accordance with its approved plans and specifications, its approved sequence of operations, and with all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____
Organization: _____ Title: _____ Phone: _____