

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

## BUILDING INSPECTION

# PERMIT

Please Read  
Instructions And  
Notes, If Any,  
Attached

PERMIT ISSUED

Permit Number: 081374

OCT 30 2008

CITY OF PORTLAND

I hereby certify that MAINE EMPLOYERS' MUTUAL INSURANCE COMPANY/Lang

is requesting permission to Office to Office interior tenant fit-up

located at 245 COMMERCIAL ST

CBI 038 F006001

Provided that the person or persons, firm or corporation accepting this permit shall comply with all the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR 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. Craig Cross

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

*[Signature]*

10/30/08

Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

# SCANNED



**CITY OF PORTLAND, MAINE**  
Department of Building Inspections

**Original Receipt**

\_\_\_\_\_ 10-23 2013 \_\_\_\_\_

Received from \_\_\_\_\_

Location of Work \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_ Building Fee: \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Site Fee: \_\_\_\_\_

Certificate of Occupancy Fee: \_\_\_\_\_

**Total:** \_\_\_\_\_ 682 \_\_\_\_\_

Building (IL) \_\_\_\_\_ Plumbing (I5) \_\_\_\_\_ Electrical (I2) \_\_\_\_\_ Site Plan (U2) \_\_\_\_\_

Other \_\_\_\_\_

CBL: \_\_\_\_\_ 38 F 16 \_\_\_\_\_

Check #: \_\_\_\_\_ 1511 \_\_\_\_\_

**Total Collected \$** \_\_\_\_\_ 682 \_\_\_\_\_

**No work is to be started until permit issued.**

If permit is Withdrawn or Denied, amount of the Refund is based on \$20.00 or 20% of the fee, (whichever is greater)

In order to receive a refund, you MUST present the Original Receipt.

Taken by: \_\_\_\_\_ [Signature] \_\_\_\_\_

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

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1374	Issue Date:	CBL: 038 F006001
-----------------------	-------------	---------------------

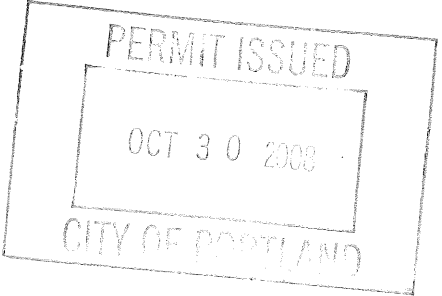
Location of Construction: 245 COMMERCIAL ST	Owner Name: MAINE EMPLOYERS' MUTUAL I	Owner Address: PO BOX 11409	Phone:
Business Name:	Contractor Name: Langford & Low, Inc.	Contractor Address: PO Box 662 Portland	Phone 2077975141
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B3

Past Use: Commercial Office	Proposed Use: Commercial - Office - Office to Office interior tenant fit-up - 2nd floor	Permit Fee: \$690.00	Cost of Work: \$66,200.00	CEO District: 1
Proposed Project Description: Office to Office interior tenant fit-up - 2nd floor		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>see conditions</i>	INSPECTION: Use Group: B Type: 3 <i>IBC 2003</i>	

Signature: <i>Greg Cross</i>		Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
Action: <input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
Signature: <i>retained work 2nd floor</i>		Date: <i>10/28/08</i>	

Permit Taken By: Idobson	Date Applied For: 10/28/2008	<b>Zoning Approval</b>	
-----------------------------	---------------------------------	------------------------	--

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..	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"/> Date: <i>10/28/08</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 <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 Date: <i>required</i>
	Date: <i>10/28/08</i>		



**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.

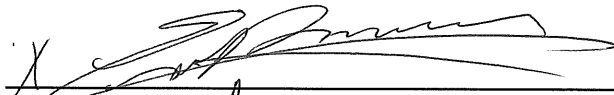
X  Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

X  Final inspection required at completion of work.

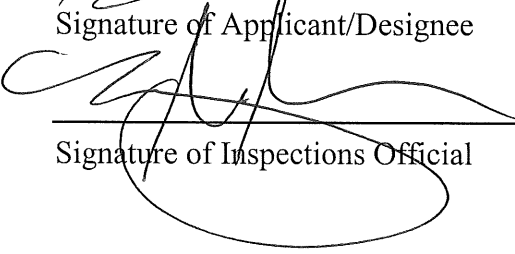
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

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

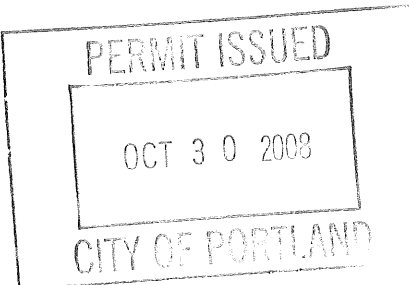
**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

X    
\_\_\_\_\_  
Signature of Applicant/Designee

10/30/08   
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Inspections Official

10/30/08   
\_\_\_\_\_  
Date



**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 08-1374	<b>Date Applied For:</b> 10/28/2008	<b>CBL:</b> 038 F006001
------------------------------	--	----------------------------

<b>Location of Construction:</b> 245 COMMERCIAL ST	<b>Owner Name:</b> MAINE EMPLOYERS' MUTUAL I	<b>Owner Address:</b> PO BOX 11409	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Langford & Low, Inc.	<b>Contractor Address:</b> PO Box 662 Portland	<b>Phone</b> (207) 797-5141
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Commercial - Office - Office to Office interior tenant fit-up on second floor	<b>Proposed Project Description:</b> Office to Office interior tenant fit-up
---	---

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 10/28/2008**Note:** **Ok to Issue:** 

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

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 10/30/2008**Note:** **Ok to Issue:** 

- 1) Interior finishes shall be classified in accordance with ASTM E 84 for flame spread and smoke-developed indexes.
- 2) All penetrations through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712.
- 3) 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:** Capt Greg Cass      **Approval Date:** 10/28/2008**Note:** **Ok to Issue:** 

- 1) Non- combustable construction of this structure requires all construction to be Non-combustable.
- 2) All means of egress to remain accessible at all times
- 3) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 4) A single source supplier should be used for all through penetrations.



# General Building Permit Application

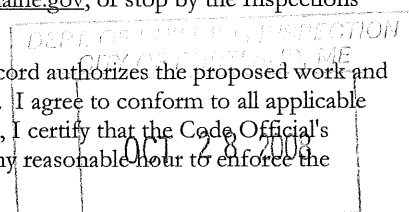
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 245 Commercial Street, 2nd Floor		
Total Square Footage of Proposed Structure/Area Renovation of tenant space/3,310 s.f.		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# 038          F006001	Applicant * <b>must be owner, Lessee or Buyer*</b> Name MEMIC/Catherine Lamson Address 261 Commercial Street City, State & Zip Portland, ME 04101	Telephone: 207-791-3304
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>66,200</u> C of O Fee: \$ _____ Total Fee: \$ <u>682</u>
Current legal use (i.e. single family) <u>office building</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? <u>no</u> If yes, please name _____ Project description: <u>office to office - interior tenant fitup</u>		
Contractor's name: <u>Langford &amp; Low</u> Address: <u>P. O. Box 662, 248 Warren Avenue</u> City, State & Zip <u>Portland, ME 04104</u> Telephone: <u>797-5141</u> Who should we contact when the permit is ready: _____ Telephone: _____ 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.**

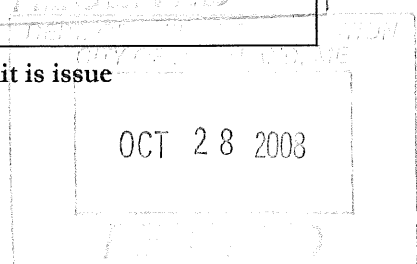
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://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: 10/27/03

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





# Certificate of Design Application

From Designer: Brian Curley of PDT Architects  
 Date: October 24, 2008  
 Job Name: 245 Commercial Street, 2nd Floor  
 Address of Construction: 245 Commercial Street, Portland, ME 04101

## 2003 International Building Code

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

Building Code & Year IBC 2003 Use Group Classification (s) Group B Business/Group M Merchandise  
 Type of Construction Type III

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC yes  
 Is the Structure mixed use? yes If yes, separated or non separated or non separated (section 302.3) existing  
 Supervisory alarm System? yes Geotechnical/Soils report required? (See Section 1802.2) n/a

### Structural Design Calculations

n/a 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

### Wind loads (1603.1.4, 1609)

  Design option utilized (1609.1.1, 1609.6)  
  Basic wind speed (1809.3)  
  Building category and wind importance Factor,  $I_w$   
 table 1604.5, 1609.5)  
  Wind exposure category (1609.4)  
  Internal pressure coefficient (ASCE 7)  
  Component and cladding pressures (1609.1.1, 1609.6.2.2)  
  Main force wind pressures (7603.1.1, 1609.6.2.1)

### Earth design data (1603.1.5, 1614-1623)

  Design option utilized (1614.1)  
  Seismic use group ("Category")  
  Spectral response coefficients,  $S_D$ s &  $S_{D1}$  (1615.1)  
  Site class (1615.1.5)

  Live load reduction  
  Roof *live* loads (1603.1.2, 1607.11)  
  Roof snow loads (1603.7.3, 1608)  
  Ground snow load,  $P_g$  (1608.2)  
  If  $P_g > 10$  psf, flat-roof snow load  $P_f$   
  If  $P_g > 10$  psf, snow exposure factor,  $C_e$   
  If  $P_g > 10$  psf, snow load importance factor,  $I_s$   
  Roof thermal factor,  $C_t$  (1608.4)  
  Sloped roof snowload,  $P_s$  (1608.4)  
  Seismic design category (1616.3)  
  Basic seismic force resisting system (1617.6.2)  
  Response modification coefficient,  $R_f$  and  
 deflection amplification factor  $C_d$  (1617.6.2)  
  Analysis procedure (1616.6, 1617.5)  
  Design base shear (1617.4, 1617.5.1)

### Flood loads (1803.1.6, 1612)

  Flood Hazard area (1612.3)  
  Elevation of structure

### Other loads

  Concentrated loads (1607.4)  
  Partition loads (1607.5)  
  Misc. loads (Table 1607.8, 1607.6.1, 1607.7,  
 1607.12, 1607.13, 1610, 1611, 2404)



# Accessibility Building Code Certificate

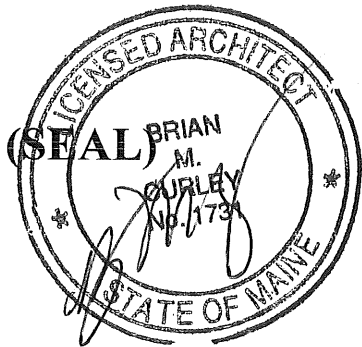
**Designer:** PDT Architects

**Address of Project:** 245 Commercial Street

**Nature of Project:** Interior fitup of two tenant spaces on the 2nd floor.

\_\_\_\_\_  
\_\_\_\_\_

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.



**Signature:** *Brian M. Curley*

**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](http://www.portlandmaine.gov)





# Certificate of Design

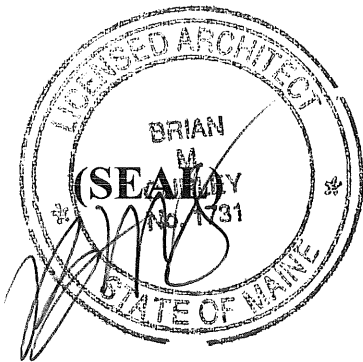
Date: October 24, 2008

From: Brian M. Curley, AIA

These plans and / or specifications covering construction work on:

Second floor tenant fitup for 245 Commercial Street, Portland, ME 04101

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the *2003 International Building Code* and local amendments.



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](http://www.portlandmaine.gov)

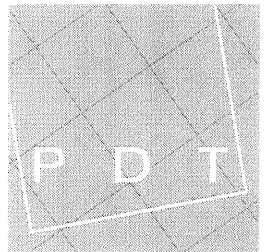
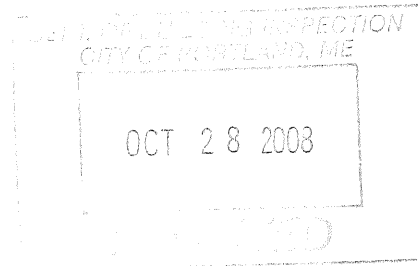
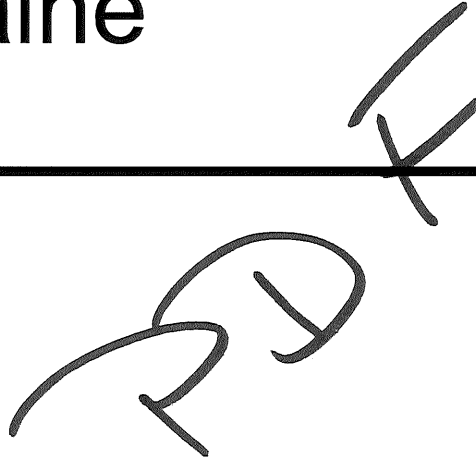
# ME HEALTH MANAGEMENT COALITION & ME HEALTH INFORMATION CENTER

Second Floor Tenant Fit-Up

245 Commercial Street  
Portland, Maine

ISSUE

PERMIT SET  
27 OCTOBER 2008



**ARCHITECTS**  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
207-775-1059  
www.pdtarchs.com

## PROJECT GENERAL NOTES

1. THESE NOTES ARE INTENDED FOR GENERAL REFERENCE AND INFORMATION AND TO AUGMENT THE CONTRACT.

2. ALL WORK INCLUDED IN THIS CONTRACT SHALL CONFORM TO ALL NATIONAL, STATE, AND LOCAL CODES, ORDINANCES AND AGENCY REQUIREMENTS INCLUDING, BUT NOT LIMITED TO: HAZARDOUS MATERIAL REMOVAL, SOLID WASTE DISPOSAL, SEISMIC DESIGN, AND LIFE-SAFETY.

3. DEFINITIONS:

- NEW: MAY BE USED TO INDICATE ITEMS WHICH SHALL BE FURNISHED AND INSTALLED BY THIS CONTRACT. TYPICALLY USED TO ENSURE CLARITY BETWEEN VARIOUS COMPONENTS OF THE DRAWINGS. NOT ALL ITEMS ARE LABELED AS "NEW" WHEN IT IS OBVIOUS BY OTHER INDICATION.
- EXISTING: EXISTING BUILDING OR SITE COMPONENTS WHICH ARE IN PLACE AT THE START OF CONSTRUCTION. NOT ALL ITEMS ARE LABELED AS "EXISTING" WHEN IT IS OBVIOUS BY OTHER INDICATION. CONSULT THE ARCHITECT FOR CLARIFICATION.
- REPAIR: RESTORE TO PROPER OPERATING AND AESTHETIC CONDITION.
- RESTORE: BRING BACK TO FORMER CONDITION, BY REPAIRING OR PATCHING AS REQUIRED.
- PATCH: RESTORE TO CONDITION MATCHING EXISTING ADJACENT CONSTRUCTION, SURFACE TEXTURE AND FINISH.
- N.I.C. (NOT IN CONTRACT): WORK WHICH IS NOT INCLUDED IN THIS CONTRACT, BUT WHICH MAY REQUIRE CONTRACTOR COORDINATION.
- REMOVE: DISMANTLE AND/OR EXTRACT FROM THE PREMISES ENTIRELY. DISPOSE OF OFF SITE UNLESS NOTED OTHERWISE.
- REPLACE: DISMANTLE AND/OR EXTRACT FROM THE PREMISES ENTIRELY. DISPOSE OF OFF SITE UNLESS NOTED OTHERWISE. PROVIDE NEW MATERIAL AS INDICATED.
- DEMOLISH: DISMANTLE AND/OR EXTRACT FROM THE PREMISES ENTIRELY. DISPOSE OF OFF SITE UNLESS NOTED OTHERWISE.
- SALVAGE: REMOVE AND REINSTALL OR REMOVE AND DELIVER TO THE OWNER, AS INDICATED.

4. IT IS THE INTENT OF THE DRAWINGS AND SPECIFICATIONS TO HAVE THE CONTRACTOR PROVIDE A COMPLETE RENOVATION READY FOR OCCUPANCY. PROVIDE ALL LABOR, MATERIALS AND INCIDENTALS NECESSARY TO ACHIEVE THIS INTENT. FAILURE OF THE DRAWINGS OR SPECIFICATIONS TO INDICATE EACH INCIDENTAL SHALL NOT RELIEVE THE CONTRACTOR FROM PROVIDING THE NECESSARY ITEMS AS PART OF THIS CONTRACT. THE DRAWINGS SHOW THE DESIGN AND LAYOUT, DESCRIBE THE QUALITY LEVEL AND CONSTRUCTION TECHNIQUES IN A GENERAL SENSE ONLY. ALL DETAILS ARE TYPICAL. WHAT IS SHOWN IN ONE CONDITION APPLIES TO ALL OTHER SIMILAR CONDITIONS, UNLESS NOTED OTHERWISE.

5. VERIFY THE FOLLOWING ITEMS AND REPORT ANY DISCREPANCIES TO THE ARCHITECT PRIOR TO PROCEEDING WITH WORK, AND PROCEED WITH THE WORK ONLY AFTER SUCH DISCREPANCIES ARE RESOLVED BY THE ARCHITECT:

- EXISTING CONDITIONS
- THE SIZE AND LOCATION OF ALL EXISTING UTILITIES.
- DISCREPANCIES BETWEEN OR WITHIN THE CONTRACT DOCUMENTS.
- UNSUITABLE SOILS: REPORT THE LOCATION OF ALL UNSUITABLE SOIL MATERIALS BELOW ANTICIPATED LEVELS OF FOOTINGS OR SLABS PRIOR TO SETTING FORMS.
- MECHANICAL, ELECTRICAL AND PLUMBING COORDINATION HAVING POTENTIAL IMPACT ON CEILING HEIGHTS OR BUILDING APPEARANCE
- DIMENSIONAL DISCREPANCIES.

6. PROVIDE BOND-OUTS, BLOCKING, SLEEVES AND PIPES AS REQUIRED FOR ALL WALL, FLOOR, ROOF, AND CEILING PENETRATIONS THROUGH STRUCTURE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR COORDINATION OF STRUCTURAL, MECHANICAL, PLUMBING AND ELECTRICAL COMPONENTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR SEALING ALL PENETRATIONS IN FIRE RATED ASSEMBLIES AND SMOKE ASSEMBLIES TO CONFORM TO U.L. RATED ASSEMBLIES AND ALL NFPA AND BOCA BUILDING CODE REQUIREMENTS. ALL PENETRATIONS SHALL ALSO COMPLY WITH THE ACOUSTICAL ASSEMBLY RATING REQUIRED FOR EACH WALL OR FLOOR ASSEMBLY.

7. DO NOT PENETRATE STRUCTURAL BEAMS, COLUMNS, OR SHEAR WALLS.

8. COORDINATE THE WORK OF ALL SUBCONTRACTORS.

9. PROVIDE WORK HOLES AND ACCESS HOLES TO INSTALL NEW SYSTEMS IN CONCEALED SPACES, AS REQUIRED OR INDICATED. REPAIR THE OPENINGS AS INDICATED IN NOTES.

10. MAINTAIN FIRE RATING OF CORRIDORS AND OTHER RATED SPACES AFFECTED BY CONSTRUCTION. MAINTAIN CODE-REQUIRED EGRESS ROUTE AND WIDTH DURING CONSTRUCTION.

## SYMBOLS

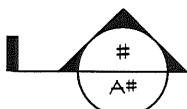
INTERIOR ELEVATION



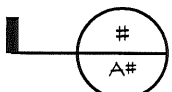
ELEVATION



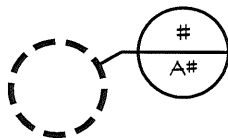
SECTION



SECTION DETAIL



PLAN DETAIL



WALL IDENTIFIER



REVISION SYMBOL



DOOR IDENTIFIER

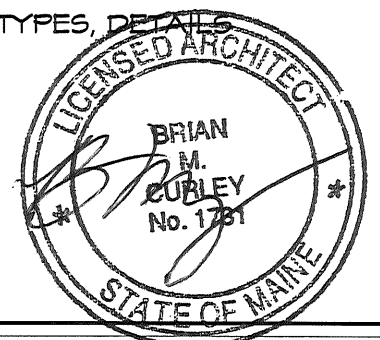


FIRE EXTINGUISHER ON BRACKET



## LIST OF DRAWINGS

TI	GENERAL NOTES, SYMBOLS, DRAWING LIST
DI	DEMOLITION PLAN
A1	FLOOR PLAN
A2	REFLECTED CEILING PLAN/LIGHTING PLAN
A3	SCHEDULES
A4	DOOR & WINDOW TYPES, DETAILS



ARCHITECTURE  
INTERIOR DESIGN  
PLANNING  
  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
www.pdtarchs.com

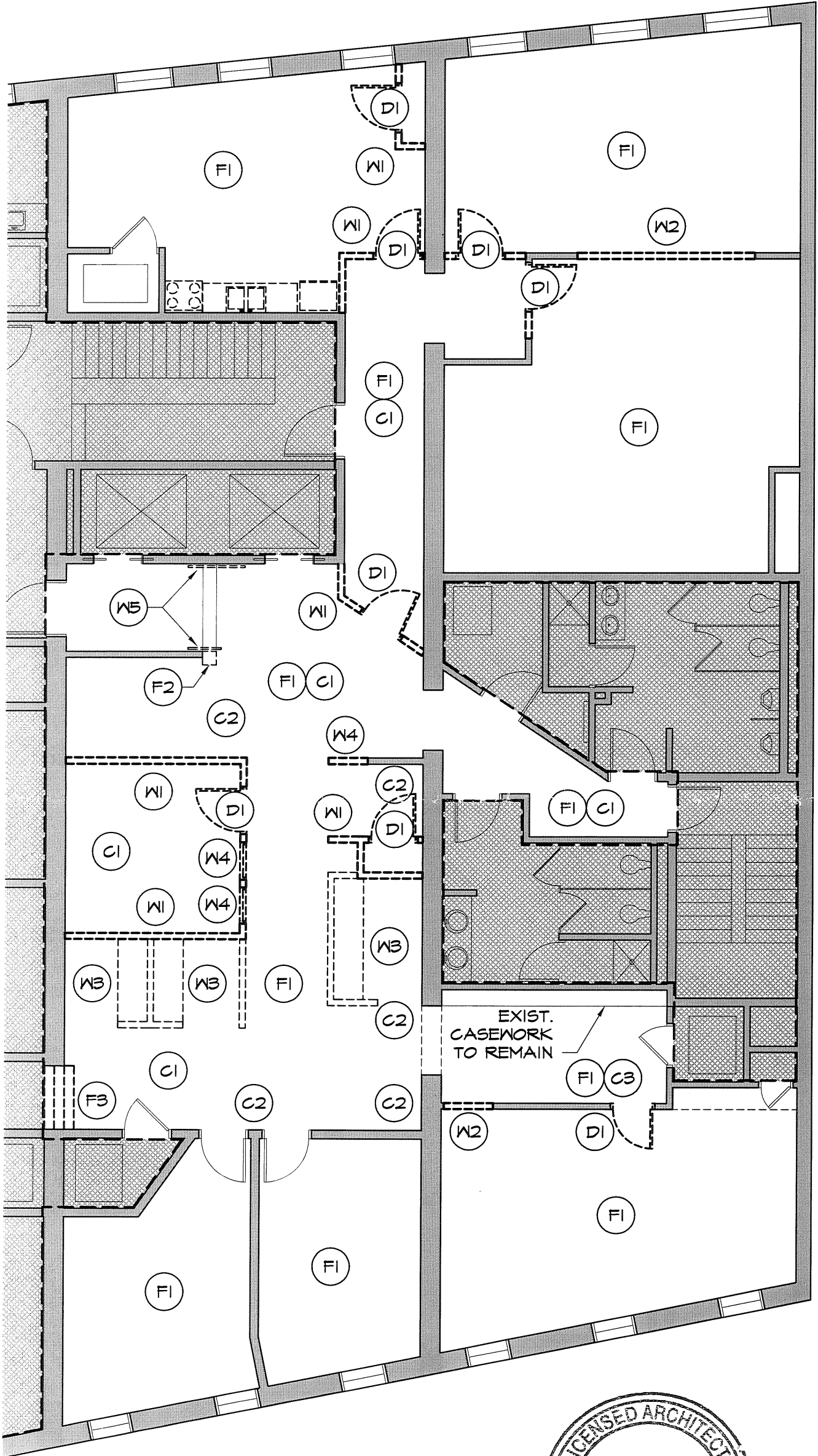
© 2008 PDT Architects

**MEMIC / 245 Commercial Street  
PORTLAND, MAINE**

TITLE  
ME HEALTH MGMT COALITION  
& ME HEALTH INFO CENTER  
GENERAL NOTES, SYMBOLS, DRAWING LIST

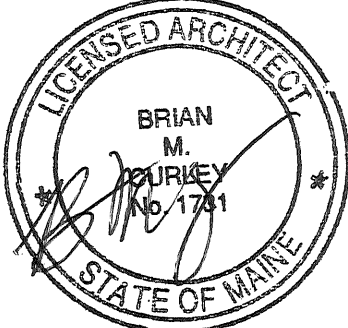
JOB # 08-086 AND 08-088  
DATE 27 OCTOBER 2008  
SCALE NO SCALE

SHEET  
**T1**



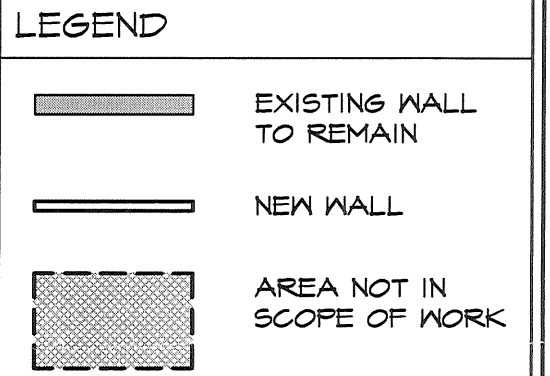
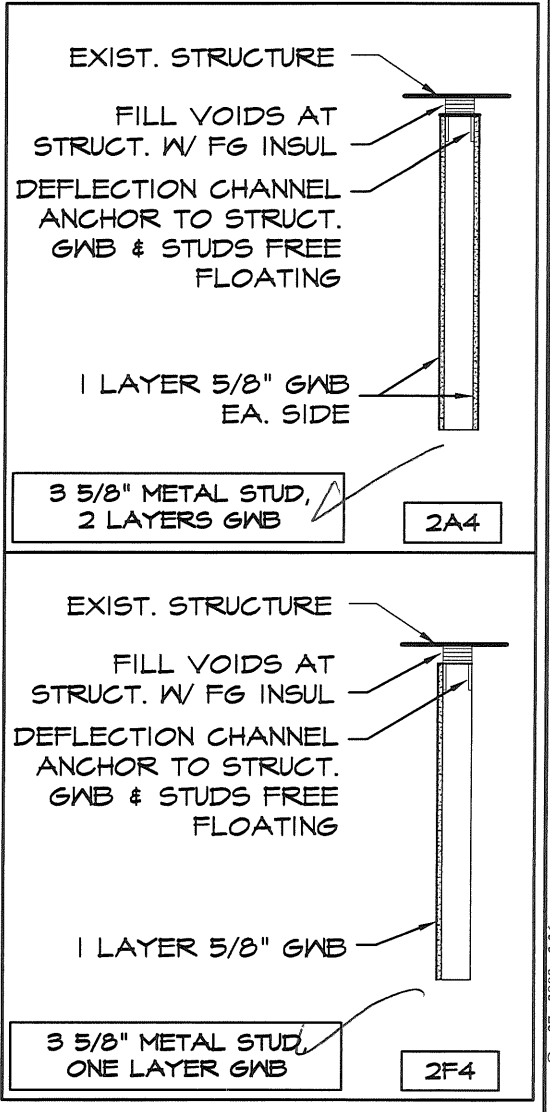
DEMOLITION LEGEND	
	EXISTING WALL TO REMAIN
	EXISTING WALL TO BE DEMOLISHED
	AREA NOT IN SCOPE OF WORK
DEMOLITION GENERAL NOTES	
1. ALL SWITCHES & OUTLETS TO REMAIN UNLESS NOTED OTHERWISE.	
2. PROTECT ALL SURFACES TO REMAIN DURING CONSTRUCTION.	
DEMOLITION KEY NOTES	
(W1)	REMOVE EXIST. PARTITION. LEAVE WIRING AND PIPING INTACT FOR POSSIBLE RE-USE. PATCH & REPAIR SURROUNDING SURFACES TO REMAIN.
(W2)	REMOVE PORTION OF EXIST. PARTITION FOR INSTALLATION OF NEW DOOR, SIDELIGHT AND/OR TRANSOM WINDOWS. RE-ROUTE WIRING OR PIPING IF NECESSARY. SEE SCHEDULE SHEET.
(W3)	REMOVE PARTIAL HEIGHT WALLS AND CASEWORK.
(W4)	REMOVE GLAZING AND FRAMES.
(W5)	REMOVE HANDRAIL.
(D1)	REMOVE DOOR & HARDWARE. PREPARE OPENING FOR NEW DOOR.
(F1)	REMOVE CARPETING. SCRAPE & CLEAN SUB-FLOOR & PREP FOR INSTALLATION OF NEW FLOORING MATERIAL.
(F2)	REMOVE PORTION OF STEP FOR INSTALLATION OF NEW WALL. PATCH & REPAIR SURROUNDING SURFACES.
(F3)	REMOVE STEPS.
(C1)	REMOVE EXISTING SAT CEILING & GRID. LEAVE EXIST. HVAC EQUIP., WIRING AND SPRINKLER PIPING & HEADS INTACT.
(C2)	REMOVE EXISTING GWB SOFFITS. PATCH/REPAIR SURFACES THAT WILL BE EXPOSED.
(C3)	REMOVE EXISTING CLG. TILES & LEAVE GRID IN PLACE. CLEAN GRID AND REPLACE ANY DAMAGED COMPONENTS.

1 DEMOLITION PLAN  
1/8" = 1'-0"



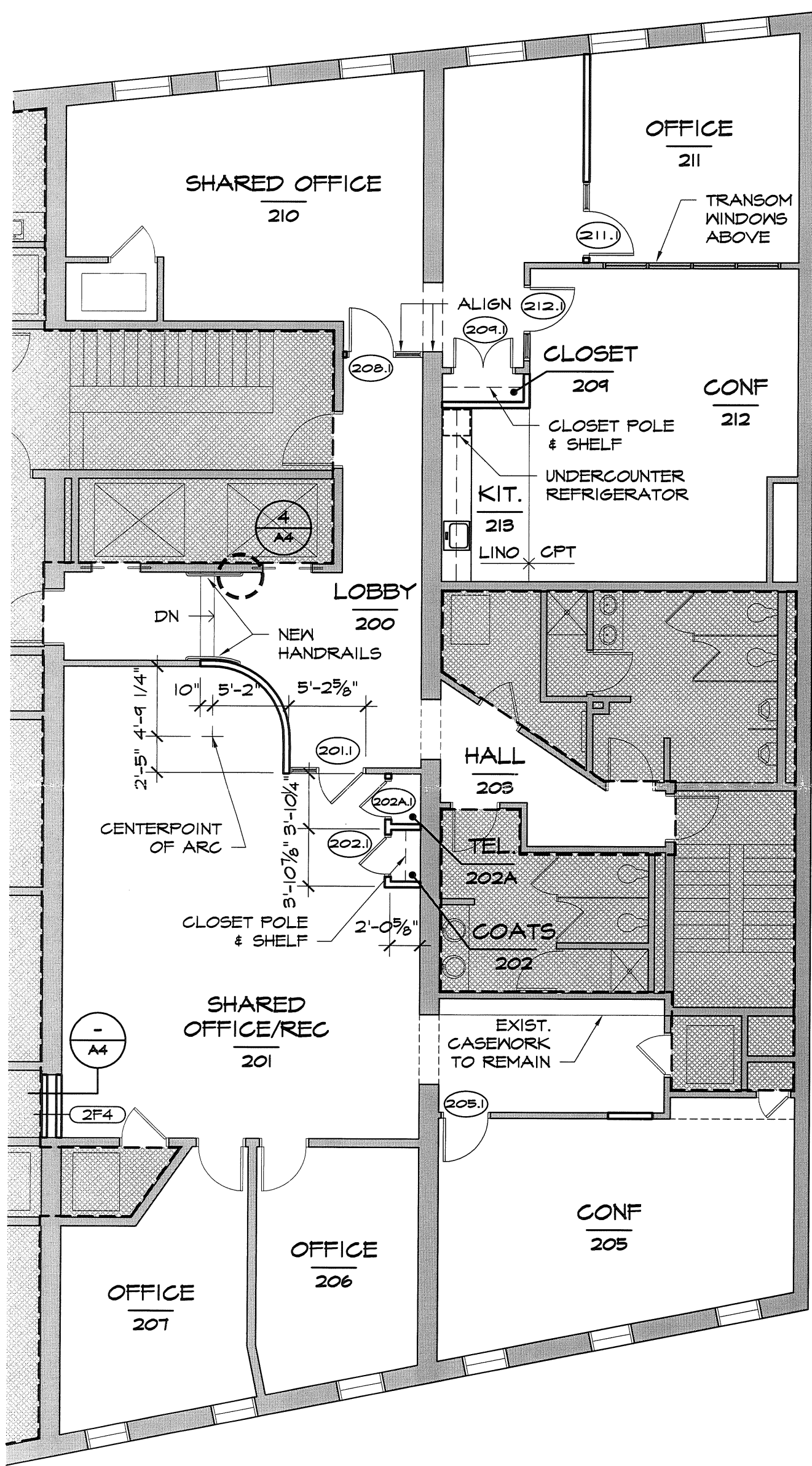
H:\Master Proj Files\MEMIC\245-251 Commercial Street\CAD\2ND FLOOR Tenant fit-up\MEMIC-2nd Floor-REV-24Oct08.dwg Oct 27, 2008 - 3:01pm

**WALL TYPES:**

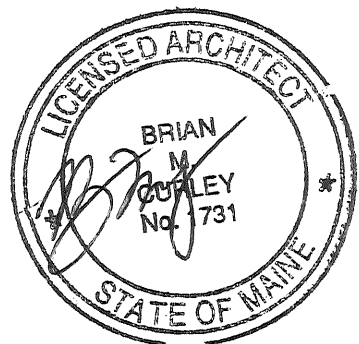


**PLAN GENERAL NOTES**

1. ALL PARTITIONS TO BE TYPE 2A4 UNLESS NOTED OTHERWISE.
2. SET DIMENSION SO THAT EXIST. REF. DOOR WILL CLEAR CORNER WHEN OPEN TO 90°.



**1 FLOOR PLAN**  
1/8" = 1'-0"



**PDT ARCHITECTS**  
ARCHITECTURE  
INTERIOR DESIGN  
PLANNING  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
www.pdtarchs.com

© 2008 PDT Architects

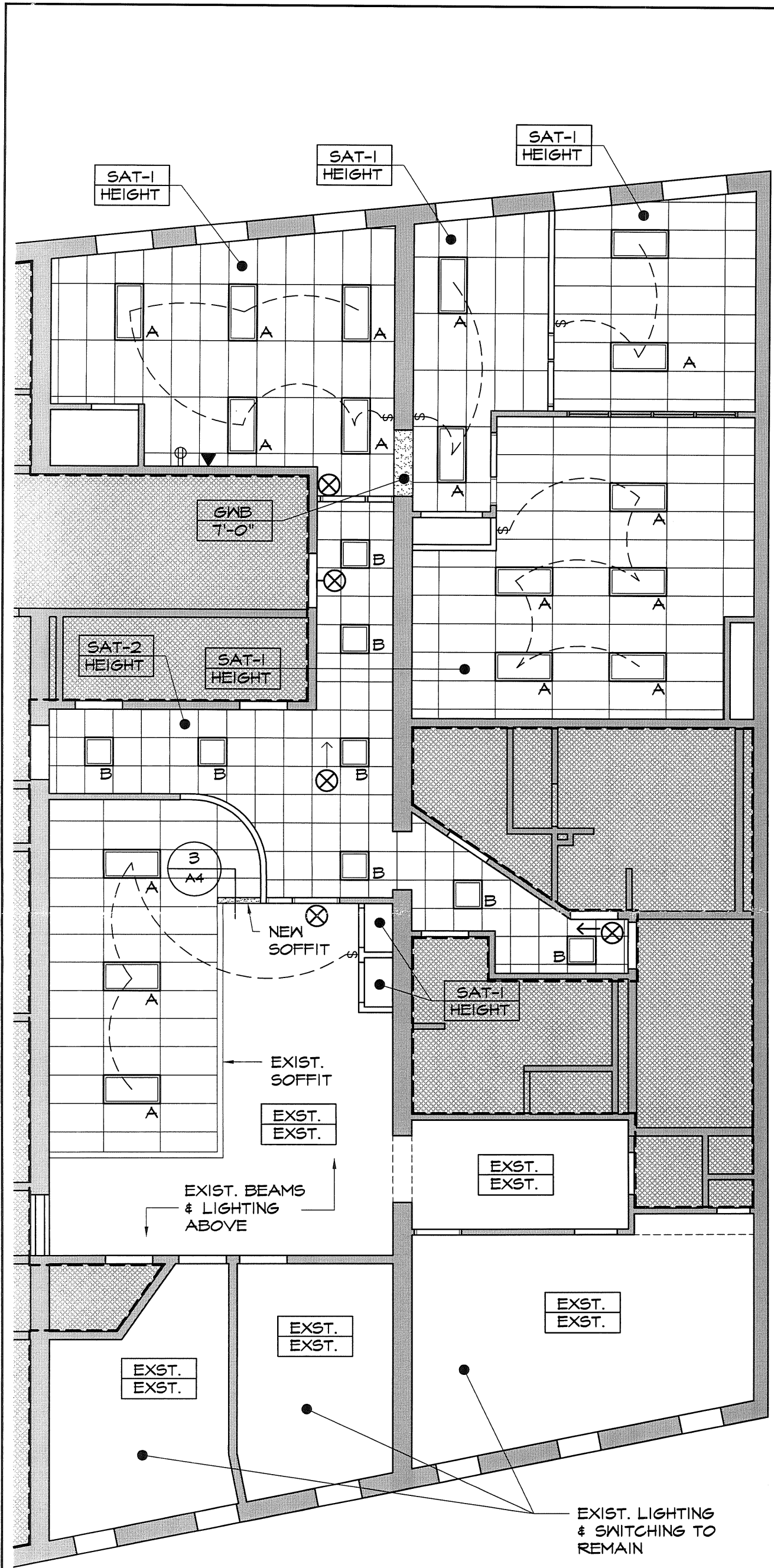
**245 Commercial Street**  
PORTLAND, MAINE

TITLE  
ME HEALTH MGMT COALITION  
& ME HEALTH INFO CENTER  
FLOOR PLAN

JOB # 08-086 AND 08-088  
DATE 27 OCTOBER 2008  
SCALE 1/8"=1'-0"

SHEET  
**A1**

Oct 27, 2008 - 3:36pm  
H:\Master Proj Files\2\MEMIC\245-251 Commercial Street\CAD\2ND FLOOR Tenant fit-up\MEMIC-2nd Floor-REV 24Oct08.dwg

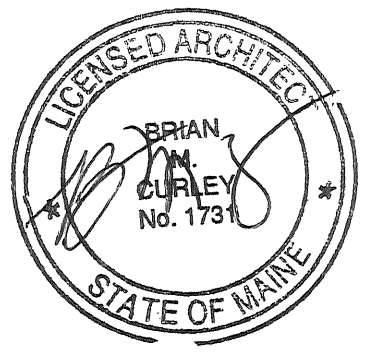


CEILING LEGEND			
	SAT-1: 2' x 4' MATCH EXISTING		
	SAT-2: 2' x 2' MATCH EXISTING		
<table border="1"><tr><th>TYPE</th><th>HEIGHT</th></tr></table>	TYPE	HEIGHT	<b>CEILING TAG:</b> SAT - SUSPENDED ACOUST. TILE (SEE SPEC. FOR TYPE) GWB - GYPSUM WALL BD. EXST. - EXISTING CLG. AND/OR HEIGHT
TYPE	HEIGHT		
	LIGHTOLIER COFFAIRE II 2'x4' DIRECT/INDIRECT RECESSED CFS26PF232120SO GLR		
	LIGHTOLIER COFFAIRE II 2'x2' DIRECT/INDIRECT RECESSED CFS26PF217120PG GLR		
\$	NEW LIGHT SWITCH		
	NEW CLG. MOUNTED EXIT SIGN		
	NEW WALL-MOUNTED EXIT SIGN		
	NEW ELEC. OUTLET		
	NEW TEL/DATA OUTLET		

**ELECTRICAL NOTES**

- COORDINATE LIGHTS WITH EXISTING HVAC EQUIPMENT AND SPRINKLER PIPING AND HEADS.
- CENTER ALL SPRINKLER HEADS ON C/L OF TILE.

1 REFLECTED CEILING / POWER PLAN  
1/8" = 1'-0"



**PDT ARCHITECTS**  
ARCHITECTURE  
INTERIOR DESIGN  
PLANNING  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
www.pdtarchs.com

© 2008 PDT Architects

**245 Commercial Street  
PORTLAND, MAINE**

TITLE  
ME HEALTH MGMT COALITION  
& ME HEALTH INFO CENTER  
REFLECTED CEILING PLAN/LIGHTING PLAN

JOB # 08-086 AND 08-088  
DATE 27 OCTOBER 2008  
SCALE 1/8"=1'-0"

SHEET  
**A2**

H:\Master Proj\Files2\MEMIC\245-251 Commercial Street\CAD\2ND FLOOR\Tenant fit-up\MEMIC-2nd Floor-REV-24Oct08.dwg Oct 27, 2008 - 3:01pm

**DOOR SCHEDULE**

DR NO	LOCATION	STATUS	DOOR MAT.	DOOR TYPE	FRAME TYPE	SIZE	FIRE RATING	REMARKS
201.I	SHARED OFFICE/REC		H.M.	1	A	3-0x6-8		Verify existing 6'-8" door height
202.I	COATS		H.M.	2	B	2-6x6-8		Verify existing 6'-8" door height
202A.I	TEL.		H.M.	2	B	2-6x6-8		Verify existing 6'-8" door height
205.I	CONFERENCE		H.M.	1	B	3-0x6-7		Verify existing 6'-8" door height
208.I	VESTIBULE		H.M.	1	A	3-0x6-8		Verify existing 6'-8" door height
209.I	CLOSET		H.M.	2	B	4-0x6-8		Pair; Verify existing 6'-8" door height
211.I	OFFICE		H.M.	1	A	3-0x6-8		Verify existing 6'-8" door height

**FINISH SCHEDULE**

RM NO	NAME	WALLS				FLOOR MAT.	BASE MAT.	FRAME Color
		N	E	S	W			
200	LOBBY	WC	WC	WC	WC	CPT	WOOD	
201	SHARED OFFICE/REC	P	P	P	P	CPT	PTD. WD	
202	COATS	P	P	P	P	CPT	VB	
202A	TEL.	P	P	P	P	SV	VB	
203	HALL	P	P	P	P	CPT	VB	
205	CONFERENCE	P	P	P	P	CPT	EXIST*	
206	OFFICE	P	P	P	P	CPT	EXIST*	
207	OFFICE	P	P	P	P	CPT	EXIST*	
209	COATS	P	P	P	P	VCT	VB	
210	SHARED OFFICE	P	P	P	P	CPT	VB	
211	OFFICE	P	P	P	P	CPT	VB	
212	CONFERENCE	P	P	P	P	CPT	VB	
213	KITCHEN	P	P	P	P	LINO	VB	

\* MATCH EXISTING WOOD BASE @ NEW WORK

VB = VINYL BASE

CPT = CARPET

P = PAINT

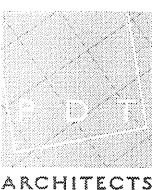
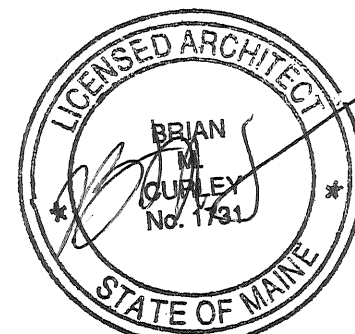
WD = WOOD

SV = SHEET VINYL

WC = VINYL WALL COVERING

**FINISH SCHEDULE - GENERAL NOTES**

1. PAINTED DOORS TO MATCH COLOR OF ADJACENT FRAMES, TYPICAL, UNLESS NOTED OTHERWISE.
2. ACCENT WALL IMPLIES CORNER TO CORNER, FLOOR TO CEILING, COMPLETE COVERAGE.
3. DRYWALL CEILINGS & SOFFITS TO BE PAINTED COLOR OF WALLS, UNLESS NOTED OTHERWISE.
4. RUBBER FLOOR TRANSITION STRIPS BETWEEN SV/CARPET TO MATCH VINYL BASE COLOR, UNLESS NOTED OTHERWISE.



ARCHITECTURE  
INTERIOR DESIGN  
PLANNING  
  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
www.pdtarchs.com

© 2008 PDI Architects

**245 Commercial Street  
PORTLAND, MAINE**

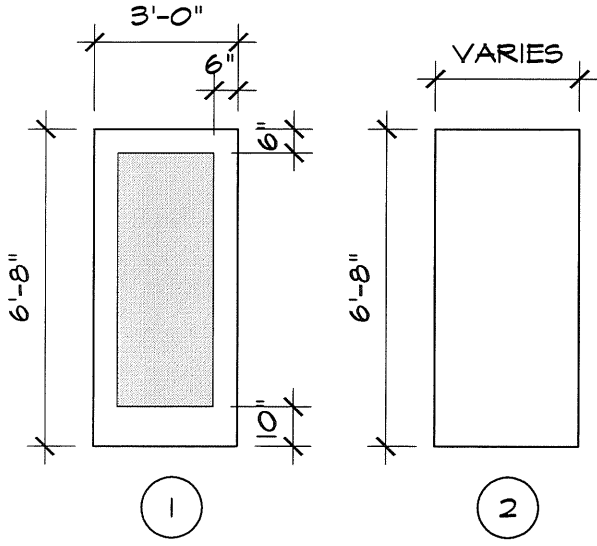
TITLE  
ME HEALTH MGMT COALITION  
& ME HEALTH INFO CENTER  
SCHEDULES

JOB # 08-086 AND 08-088  
DATE 27 OCTOBER 2008  
SCALE NO SCALE

SHEET  
**A3**

**DOOR TYPES**

1/4" = 1'-0"

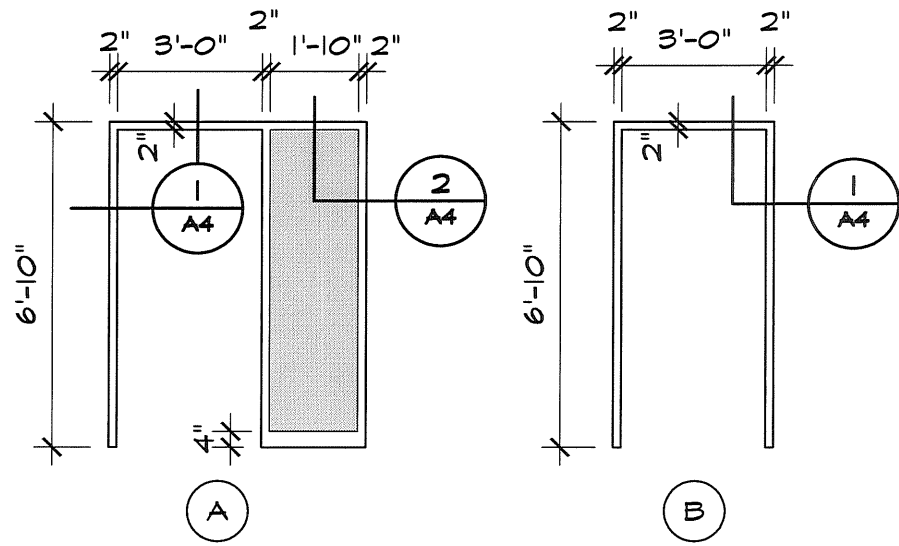


1  
H.M.  
1/4" GLASS

2  
H.M.

**FRAME TYPES**

1/4" = 1'-0"

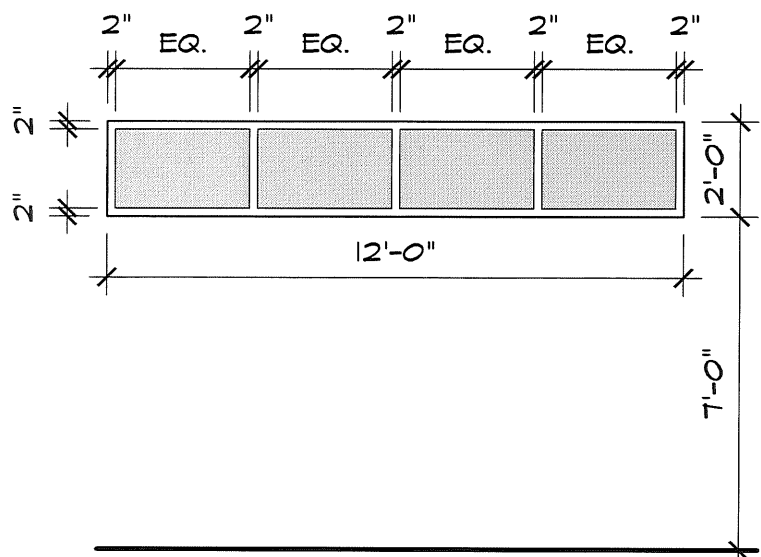


A  
H.M. FRAME  
1/4" GLASS

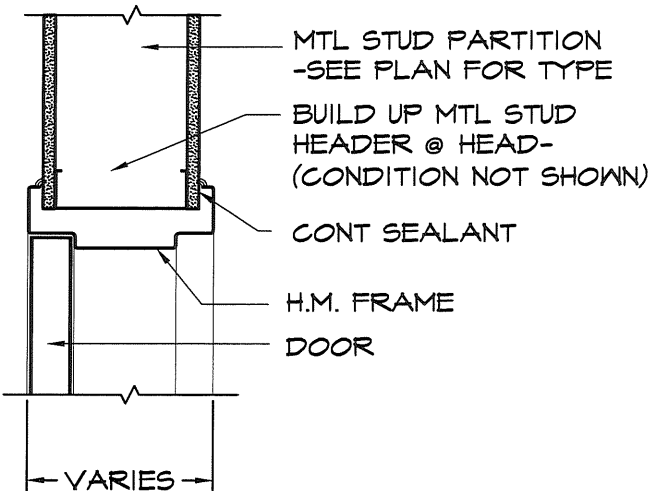
B  
H.M. FRAME  
1/4" GLASS

**WINDOW TYPES**

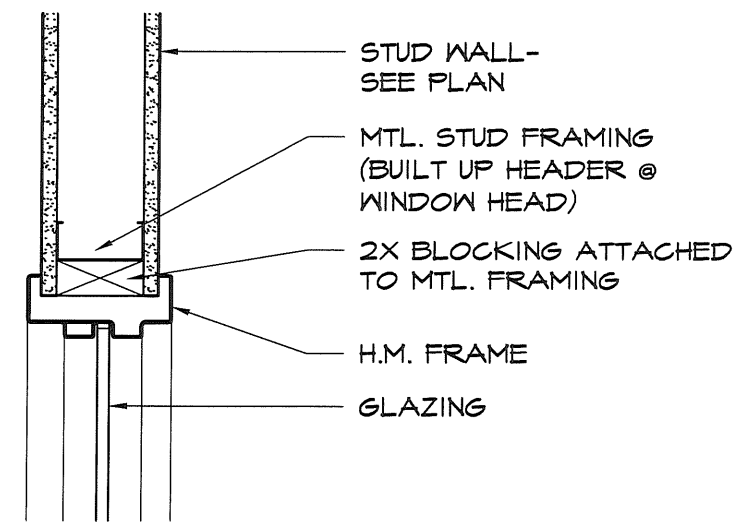
1/4" = 1'-0"



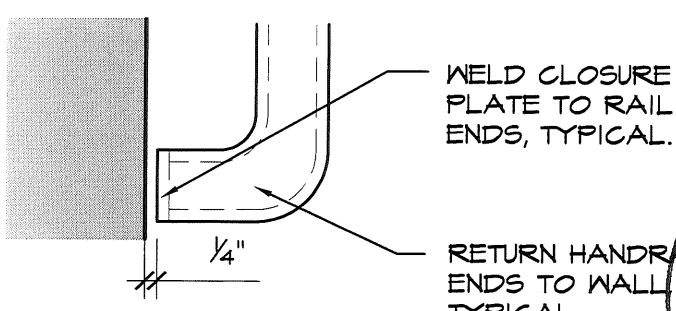
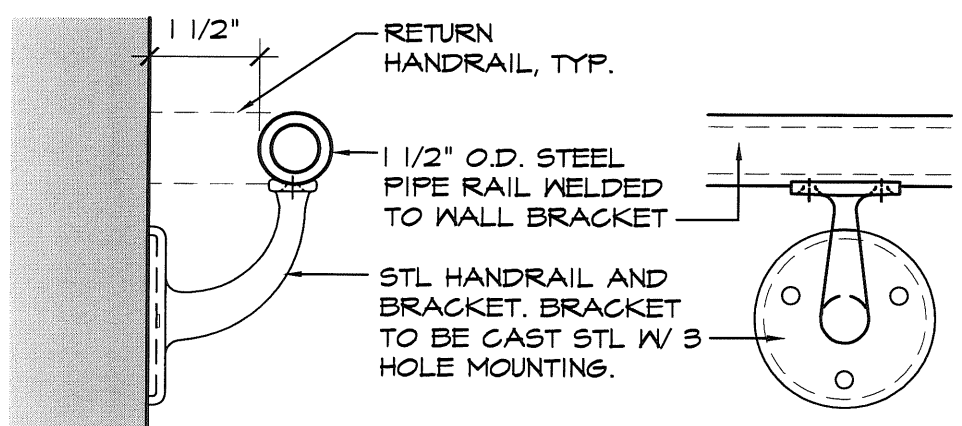
H.M.  
1/4" GLASS



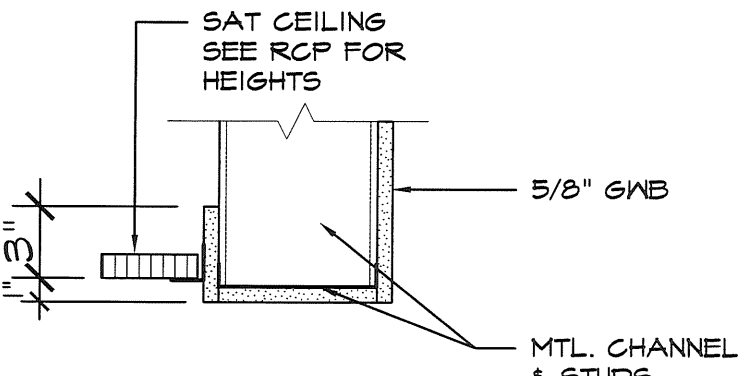
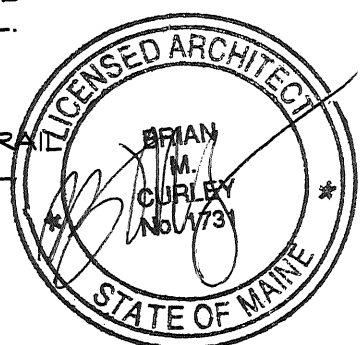
1 **DOOR JAMB DETAIL (HEAD SIM.)**  
1 1/2" = 1'-0"



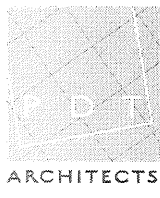
2 **WINDOW JAMB DETAIL (HEAD SIM.)**  
1 1/2" = 1'-0"



3 **DETAIL @ HANDRAIL**  
3" = 1'-0"



3 **DETAIL @ SOFFIT**  
1 1/2" = 1'-0"



ARCHITECTURE  
INTERIOR DESIGN  
PLANNING  
49 DARTMOUTH STREET  
PORTLAND, MAINE 04101  
www.pdtarchs.com

© 2008 PDT Architects

**245 Commercial Street  
PORTLAND, MAINE**

TITLE  
ME HEALTH MGMT COALITION  
& ME HEALTH INFO CENTER  
DOOR & WINDOW TYPES, DETAILS

JOB # 08-086 AND 08-088  
DATE 27 OCTOBER 2008  
SCALE AS NOTED

SHEET  
**A4**

H:\Master ProJ Files\2\MEMIC\245-251 Commercial Street\CAD\2ND FLOOR Tenant fir-up\MEMIC-2nd Floor-REV.24Oct08.dwg Oct 27, 2008 - 3:01pm