Form # P 04

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGEPORNIARISSUED

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

APR 2 7 2010

Permit Number: 100216

This is to certify that

MAINEHEALTH/Consigli Construction

City of Portland

has permission to

Renovation of existing building new electric

mechanical distribution, fire suppression modifications, raised acce

AT -110 FREE ST

039 C001001

provided that the person or persons, film or corporation accepting this permit shall comply with all of 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. 2 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVA

Fire Dept. CAPT.

Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS CARD

Say Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716   10-0216   039 C001001	City of Portland, Maine			ication	ermit No:	Issue Date:		CBL:	
10 FREE ST   MAINEHEALTH   465 CONGRESS ST STE 600   Phone   Contractor Name:   Contractor Name:   Contractor Name:   Contractor Name:   Some   Phone   2077484173   2077484					10-0216			039 C001001	
Dusines Name:   Consign Construction   Consign Construction   So Monument Square Suite 300 Portla   2077484173	Location of Construction:	Owner Name:	-	Own	er Address:			Phone:	
Consigli Construction   So Monument Square Suite 300 Portal 2077484173	110 FREE ST	MAINEHEAL	MAINEHEALTH			ST STE 600			
Past Use:   Commercial - Office Building   Proposed Use:   Commercial - Office Building   Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement   Signature:   Date:   Da	Business Name:	Contractor Name						Phone	
Past Use: Commercial - Office Building Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement  Permit Taken By: 1. This permit application does not proclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbting, septic or electrical work. 3. Building permits do not include plumbting, septic or electrical work. 3. Building permits do not include the date of issuance. False information may invalidate a building permit and stop all work.  PERMIT ISSUED  Approved Note of the named property, or that the proposed work is authorized by the owner of record and that have been authorized by the owner to make this application is issued, 1 certify that the code official's authorized representative and property, or that the proposed work is authorized by the owner of record and that have been authorized by the owner to make this application is issued, 1 certify that the code official's authorized representative and property, or that the proposed work is authorized by the owner of record and that have been authorized by the owner to make this application is issued, 1 certify that the code official's authorized representation is the proposed work is authorized agent and 1 agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, 1 certify that the code official's authorized representative of the code(s) applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, 1 certify that the code official's authorized representative or the proposed work is authorized representative or the proposed with a such or the code(s) authorized representative or the proposed with a such proposed with a such or the code(s) authorized representative or the proposed with a such proposed with a such proposed with a		Consigli Cons	truction	50	Monument Squ	are Suite 30	0 Portla	2077484173	
Proposed Use:  Commercial - Office Building  Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement  Permit Taken By:  Oate Applied For: Oato Oato Oato Oato Oato Oato Oato Oato	Lessee/Buyer's Name	Phone:						Zone:	
Commercial - Office Building    Commercial - Office Building				Al	terations - Com	mercial		B-	5
Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement    Permit Taken By:					mit Fee:			District:	
electric, mechanical distribution, fire suppression modifications, raised access flooring, building Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement   Signature	Commercial - Office Building				100	\$3,957,104	1.00	<u> </u>	
Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement    PRDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					E DEPT:	Approved	INSPECTIO	N:	NE
Renovation of existing building new electric, mechanical distribution, fire suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement    PRDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						3 1	Use Group:	Type:	H,
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suppression modifications, raised access flooring, building finishes, new casework, skylight, exterior repairs, low roof replacement    PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)   Action.   Approved   Approved w/Conditions   Denied			.:		Cir			1. R 4/2	1.
CERTIFICATION    Approved   Approved w/Conditions   Denied   Denie							_	mi Ilee	110
Permit Taken By:   Date:   D				ICW PED	ESTRIAN ACTI	ATTIES DISTI	CICT (P.A.D	.) 1 /	
Permit Taken By: Idobson  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  PERMIT ISSUED  APR 2 7 2010  City of Portland  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 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	ousework, skyright, exterior re	sparts, for root replacer	nent	Acti	on. Approv	ed Appro	oved w/Cond	itions Denied	]
Interest   Idobson   03/08/2010   Sectial Zone or Reviews   Zoning Appeal   Historic Preservation   Not in District or Landmark   Shoreland   Shoreland   Shoreland   Shoreland   Not in District or Landmark   Shoreland				Sign	ature:		Date	:	
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such permit.	jurisdiction. In addition, if a p shall have the authority to ente	ermit for work describe	d in the applicat	tion is issued	, I certify that t	he code offi	cial's autho	rized representa	tive
	saon permit.								

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

Cit	y of Portland, Maine - Buil	ding or Use Permi	t		Permit No:	Date Applied For:	CBL:	
389	Congress Street, 04101 Tel: (2	207) 874-8703, Fax:	(207) 87	4-8716	5 10-0216	03/08/2010	039 C0010	01
Loc	Location of Construction: Owner Name: Or			Owner Address:		Phone:		
11	FREE ST	MAINEHEALTH			465 CONGRESS S	ST STE 600		
Bus	ness Name:	Contractor Name:			Contractor Address:		Phone	
		Consigli Construction			50 Monument Squ	are Suite 300 Portla	(207) 748-41	73
Less	see/Buyer's Name	Phone:	]		Permit Type:			
				l	Alterations - Com	mercial		
Pro	posed Use:			Propose	ed Project Description:			
	mmercial - Office Building - Renov		_			uilding new electric, i		
	ctric, mechanical distribution, fire s					ion modifications, rai		
	sed access flooring, building finishe erior repairs, low roof replacement		gnt,		ng finishes, new cas	sework, skylight, exte	rior repairs, iov	w roor
J	orier reputs, for reer replacement			) ropide	omon			
_								-
D	ept: Zoning Status: A	pproved with Condition	ns Re	viewer.	: Marge Schmucka	d Approval Da	ite: 03/08/2	2010
N	ote:						Ok to Issue:	4
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.								
2)	Separate permits shall be required	for any new signage.						
_								
D	ept: Building Status: A	pproved with Condition	is Re	viewer	: Jeanine Bourke	Approval Da		
N	ote:						Ok to Issue:	V
1)	Separate permits are required for a hood exhaust systems and fuel tan							
2)	All penetratios through rated asser or UL 1479, per IBC 2003 Section		d by an a	pprove	d firestop system in:	stalled in accordance	with ASTM 81	14
3)	As stated in the plans, and IBC Se commissioning of the smoke contr		n shall be	submi	tted for special insp	ections and test proce	dures for the	
4) It is understood that the kitchen is for use by the staff and for licensed catered functions only. If this is occupied by a licensed food establishment separate approvals and licenses are required.								
5)	Application approval based upon and approrval prior to work.	information provided by	y applica	nt. Any	deviation from app	roved plans requires	separate review	v
n	ept: Fire Status: A	pproved with Condition	Do	uiowo-	: Capt Keith Gautr	eau Approval Da	ite: 03/18/2	2010
)		pproved with Condition	15 16	VICWCI.	. Capt Kenin Gaun		Ok to Issue:	
l	ote:	1 6 !! 4					OR to issue:	
	A single source supplier should be							
2)	2) The Fire Department will require knox locking caps on all Fire Department Connections on the exterior of the building.							
3)	Fire department connection type a	nd location shall be app	proved in	writing	by fire prevention	bureau.		

- 4) As-built documents shall be submitted in pdf to the Building Inspections Office upon completion of job.
- 5) Application requires State Fire Marshal approval.
- 6) The sprinkler system shall be installed in accordance with NFPA 13.
- 7) Installation of a Fire Alarm system requires a Knox Box to be installed per city crdinance
- 8) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.
- 9) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 10 Occupancies with an occupant load of 100 persons or more require panic harware on all doors serving as a means of egress.

Location of Construction:	Owner Name:	Owner Address:	Phone:
110 FREE ST	MAINEHEALTH	465 CONGRESS ST STE 600	
Business Name:	Contractor Name:	 Contractor Address:	Phone
	Consigli Construction	50 Monument Square Suite 300 Portla	(207) 748-4173
Lessee/Buyer's Name	Phone:	Permit Type:	
		Alterations - Commercial	

- 11 Emergency lights and exit signs are required. Emergency lights and exit signs are required to be labeled in relation to the panel and circuit.
- 12 New elevators are required to be ADA compliant.
- 13 Non-combustible construction of this structure requires all construction to be Non-combustible.
- 14 Fire extinguishers required. Installation per NFPA 10
- 15 Emergency lights are required to be tested at the electrical panel on the same circuit as the lighting for the area they serve.
- 16 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.
- 17 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.
- 18 A separate Suppression System Permit is required for all new suppression systems or sprinkler work effecting more than 20 heads.
- 19 All fire alarm records required by NFPA 72 should be stored in an approved cabinet located at the FACP labeled "FIRE ALARM RECORDS". Records cabinate, FACP, annunciator(s), and pull stations shall be keyed alike.
- 20 All construction shall comply with NFPA 1 and 101.

#### Comments:

- 4/1/2010-jmb: Spoke to Chris B. (Consigli) to verify what the cost of work estimate included. It does include the total cost of all MEP, FA, sprinkler and hoods. Separate permits are required for additional specs and plans, however it will just be the admn. Fee. Discussed the "catered cafe" area and if this will be a licensed kitchen. He suggested speaking with Harriman for details.
- 4/1/2010-jmb: Left vcmsg with Patrick C. (Harriman) for details on the catered cafe and the smoke control design including specifications for testing and inspections.
- 4/8/2010-jmb: Received smoke control proposal from Keith G., will need a waiver to use the IBC 2006 edition which utilizes the same specs for exhaust that the NFPA 2006 LSC does per NFPA 92B.
- 4/26/2010-jmb; Spoke to Tim H. About the special inspections and test procedures for the smoke control system, he will contact Hughes Assoc. To submit per Sec. 909.3, ok to issue

### 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 Inspection 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 with construction.

<u>X</u>	Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling
<u> X</u>	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.
<u>X</u>	The final report of Special Inspections shall be submitted prior to the final inspection or the issuance of the Certificate of Occupancy, including the smoke control system.

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

CBL: 039 C001001 Building Permit #: 10-0216



## **Original Receipt**

	3. 8 20/0
Received from (1) LS	-l:
Location of Work	ceest.
Cost of Construction \$ E	duilding Fee: 39600
Permit Fee \$	Site Fee:
Certificate of Occup	pancy Fee:
	Total: 439675
Building (IL) Plumbing (I5) Electrical (I	2) Site Plan (U2)
Other	
CBL: 39-C-/	
Check #: Total C	ollected s 39 675

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

Taken by:

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

# 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: 110 Free	St Portland		
Total Square Footage of Proposed Structure/A		uare Footage of Lot	<del></del>
Tom oquate 1 ootage of 1 toposed outlettile/ //	J Sq	mile I Goldge OI LOC	
Tax Assessor's Chart, Block & Lot	Applicant *must	be owner, Lessee or Buye	r Telephone.
Chart# Block# Lot#	Name	Maine Health	207-775-7010
5> 6		465 Congress St S-6	00 { [
	City, State & Zi	Portland, Maine	
		· 	
Lessee/DBA (If Applicable)	Owner (if differ	ent from Applicant)	Cost Of Work: \$ 3,957,104
	Name	same as above	
	Address	Same as above	C of O Fee: \$ 75.00
	City, State & Zip	0	Total Fee: \$ 39,675.00
			Total ree: 3   00,000
Current legal use (i.e. single family)			
If vacant, what was the previous use2 office b	olag		
Proposed Specific use: Office bldg			
Is property part of a subdivision?no		s, please name	
Renovation of existing building includ	_		1
suppression modifications, raised acc		building finishes, new	casework, skylight,
exterior repairs, low roof replacement		<del></del>	
Contractor's name: Consigli Construction	Co., Inc		
Address:84 Middle St			( <del></del>
City, State & Zip_Portland, Maine 0410		Т	elephone: 207-773-3000
Who should we contact when the permit is read	ly: Chris Brow	n T	elephone: 207-650-8663
Mailing address: Same			
Please submit all of the information	outlined on th		Hampan and
do so will result in the	automatic de	1 11	
	N.	Will	
n order to be sure the City fully understands the			
nay request additional information prior to the iss his form and other applications visit the Inspection		Briefe	in
Division office, room 315 City Hall or call 874-8703.	ons Division on-in	Ding	
hereby cerufy that I am the Owner of record of the n	amed property, or		nd
hat I have been authorized by the owner to make this	application as his	PI)F	
iws of this jurisdiction. In addition, if a permit for wo uthorized representative shall have the authority to en		1 21	
rovisions of the codes applicable to this permit.			ED
			<u>-L</u>
Signature:	Date:		
This is not a permit; you may	not commenc		
		D	ept. or bureing mapections
		F.	City of Portland Maine



# PORTLAND MAINE

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

Director of Planning and Urban Development Penny St. Louis Littell

April 26, 2010

Hughes Associates, Inc. 3610 Commerce Drive, Suite 817 Baltimore, MD 21227-1652

Harriman Architects & Engineers 123 Middle Street Portland, ME 04101

RE: 110 Free Street CBL: 039 C001001

Building Permit Application: #10-0216

To whom it may concern:

Thank you for the evaluation report for the Smoke Control System (SCS) submitted in March of 2010 for the above mentioned property. In the Executive Summary, it is proposed that the SCS system design satisfy the requirements of the 2006 International Building Code (IBC). This requires a waiver from this office in order to proceed with the design.

The following are the facts:

- 1. The City of Portland is currently working under the IBC 2003. State Law does not allow the City to adopt the IBC 2006.
- 2. A smoke control system is required for Atriums per IBC 2003 Section 404.4 and to be installed in accordance with Section 909. It is also required per NFPA 101 Life Safety Code (LSC), 2006 edition.
- 3. The 2006 IBC, like the 2006 LSC, requires atrium SCS using the exhaust method be designed in accordance with NFPA 92B, Standard for Smoke Management Systems in Malls, Atria and Large Areas 2005 Edition.
- 4. NFPA 92B provides a more complete treatment of the engineering considerations necessary for designing a SCS per the exhaust method, it recognizes multiple approaches to protect an atrium. This will allow the designer of the SCS greater flexibility on which to base the design.
- 5. The SCS will be designed using the Fire Dynamics Simulator (FDS) computer model to evaluate the smoke spread through the building and the effect of the smoke control system, and per the specifications of NFPA 92B.
- Per IBC Sec. 909.3, the SCS shall undergo special inspections and tests sufficient to verify the proper commissioning of the designed system in its final installed condition. Documentation of the methods and procedures used for such inspections shall be submitted.

The Waiver Request is approved by this office to utilize the IBC 2006 for smoke control system design on the above mentioned project.

Sincerely,

Jeanie Bourke

CEO/Plan Reviewer @ 874-8715

Cc. Penny Littell, Director of Planning Chris Brown, Consigli



# Certificate of Design Application

From Designer:	HARRIMAN		
Date:	3110		
Job Name:	110 FREE ST	ZEET BUIL	DING RENOVATIONS
Address of Construction:	SAME AS	4 BOVE	
	2003 International	(Ruilding Code	
Con	struction project was designed to the	<u> </u>	ia listed below:
Building Code & Year 1	2003 Use Group Classification	on (s) BUSING	<b>55</b> 5
Type of Construction	A		
Will the Structure have a Fire s	uppression system in Accordance with	Section 903.3.1 of the 2	2003 IRC YES
			d (section 302.3) SETERATED
	ES Geotechnical/Soils report		· · · · · · · · · · · · · · · · · · ·
			,
Structural Design Calculation	ns	<del></del>	_ Live load reduction
Submitted for	all structural members (106 1 – 106.11)	N/A	Roof live loads (1603.1.2, 1607.11)
Design Loads on Construction	on Documents (1/01)		Roof snow loads (1603.7.3, 1608)
Uniformly distributed floor live lo			Ground snow load, Pg (1608.2)
Floor Area Use OFFICE	Loads Shown	40 PSF	_ If $P_g > 10$ psf, flat-roof snow load $p_f$
		1.0	_ If Pg > 10 psf, snow exposure factor, G
		1.0	_ If $Pg > 10$ psf, snow load importance factor, $L$
		1.0	_ Roof thermal factor, $G(1608.4)$
		N/A	Sloped roof snowload, Ps (1608.4)
Wind loads (1603.1.4, 1609)		B	Scismic design category (1616.3)
	ilized (1609.1.1, 1609.6)	ORCMF	Basic seismic force resisting system (1617.6.2)
100 MPH Basic wind speed		<u> </u>	Response modification coefficient, R and
CAT. II , I=1.93 unlding casegor	g and wind importance Factor, , rable 1604.5, 1609.5)	Cd=2.5	deflection amplification factor <sub>Cd</sub> (1617.6.2)
Wind exposure of	ategory (1609.4)	EQUIV. LAT. FOR	Analysis procedure (1616.6, 1617 5)
(+/-) 0,195 Internal pressure of	perficient (ASCP, 7) adding pressures (1609.1.1, 1609.6.2.2)		Design base shear (1617.4, 16175.5.1)
	ressures (7603.1.1, 1609.6.2.1)	Flood loads (1	803.1.6, 1612)
Earth design data (1603.1.5, 1		· ————	Flood Hazard area (1612.3)
EQUIVILAT, FORGE option u	•		_ Elevation of structure
Seismic use grou		Other loads	
0.251 \$ 0.087 Spectral response	e coefficients, SDs & SD (1615.1)		Concentrated loads (1607.4)
Site class (1615.1.	5)	15 PSF	Partition londs (1607.5)
		<del></del>	Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404



## Accessibility Building Code Certificate

Designer:	HARRIMAN
Address of Project:	10 FREE STEED
Nature of Project:	INTERIOR RENOVATION
designed in compliance wit Law and Federal American	covering the proposed construction work as described above have been th applicable referenced standards found in the Maine Human Rights is with Disability Act. Residential Buildings with 4 units or more must represent the Housing Accessibility Standards. Please provide proof of compliance if
PATRICK COS' No. 2	TIN Signature:
STATE OF	F MAINE Title: PAC
(SEAL)	Firm: HAT-RIMAN
	Address: 123 MIPPLE ST.
	FORTLAND, ME 04-10
	Phone: 207.775.0053

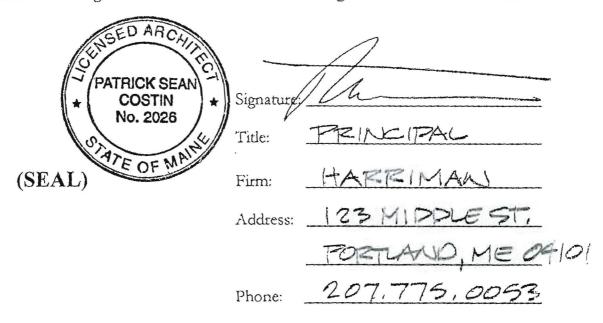
For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



## Certificate of Design

From: HARRIMAN  These plans and / or specifications covering construction work on:  110 FRGE STIZEET BUILDING RENOVATIONS	Date:	3,1.10		
	From:	HARRIM	AN	<del></del>
THE THEORY TOURS FOR VALIDA	•			PENOVATIONS

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



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



### Letter of Transmittal

Lottor or marioni	recar			
То:			Tran	smittal #: 39
389 Congres St. Rm 315 Portland, ME 04101	Date: 3/8/2010  Job: 854 Maine Health Office Bldg Reno			
Subject: Building Permit A	pplication			
WE ARE SENDING YOU	□ Attace	ched	□ Under se	eparate cover via None the following items:
□ Shop drawings	□ Print	s	□ Plans	□ Samples
□ Copy of letter	□ Char	nge order	□ Specific	ations   Building Permit Application
Document Type	Copies	Date	No.	Description
Other	0	2/12/10	4	Full Size Construction Documents
Other	0	2/12/10		Half Size Construction Docuemnts
Other	0	2/12/10		Separate FD Plans - Code, Fire Protection, Electrical, Fire Alarm
Other	0	3/8/10		Building Permit Application with AE Certifications
THESE ARE TRANSMITTE  For approval  For your use  As requested  For review and comm  FOR BIDS DUE	r nent r	Approved Approved Returned Other	for corrections	☐ Resubmit copies for approval ☐ Submit copies for distribution ☐ Return corrected prints  ER LOAN TO US
Copy To:	if there is a	aing permit a	application with a	ssociated design certifications and documentation. Please review rou will require for a complete review and approval. Thanks
				MAR - 8 2010  Dept. of Building Inspections City of Portland Maine

Signature: If enclosures are not as noted, kindly notify us at once.

Chris Brown - CONSIGLI CONST. CO., INC. - ME

Page 1 of 1

### Jeanie Bourke - 110 Free Street, Maine Health

From: Philip DiPierro

To: Code Enforcement & Inspections

Date: 4/22/2010 5:02 PM

Subject: 110 Free Street, Maine Health

Hi all, this project (HTE site plan #09-79900019) meets minimum DRC site plan requirements for the issuance of the building permit.

Please contact me with any questions. Thanks.

Phil