Form # P Q4

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Pinese Read Application And Notes, If Any, Attached

PERMIT

PERMIT 48SUED

This is to certify thatMAINEHEALTH!	iohnson & .	-			
has permission toInstall Hood System		lth Cate Kitch	ground f	<u> </u>	<u>-1</u> 60
AT -110 FREE ST			—C 039	- C00100+	<u> </u>
provided that the person or pe	rsons, fi	огсо	on agreeting	this permit sh	f Portland all comply with a
of the provisions of the Statut					ortland regulatin
the construction, maintenance		-	_	•	plication on file l
this department.	:			•	
<del></del>		ation o spection	nust b	$\Gamma$	
Apply to Public Works for street line			Procured		occupancy must be
and grade if nature of work requires and information.	befd lath		hereof j sed-in. 2	ing or part there	ner before this build- ect is populied.
		NOTICE IS REQU			or is coopies.
ATHER RECORDER ASSESSMENT OF				<del>\                                    </del>	
DI DES BEGUNNED APPRICATION					
OTHER REQUIRED APPROVALS	>	M. 477-148-148-14-14-14-14-14-14-14-14-14-14-14-14-14-		# <del></del>	
Fire Dept	<u> </u>			<del>////</del>	
Fire Dept. CAPT. N. Maurica	<u>-</u>			#	
Fire Dept	<u> </u>				

			Permit Application		Issur Date:	CBL:
		Tel: (207) 874-8703	, Fax: (207) 874-8716	10-1314		039 C001001
Location of Const	rug <b>tion:</b>	Owner Name:	١	Owner Address:		Plane:
110 FREE ST		MAINEHEAL		465 CONGRESS	ST STE 600	<u> </u>
Business Name:		Contractor Name	•	Confrictor Address:		Phos
essee/Bayer's Na		Sohason & Jon Phone:	<del></del>	18 Mussey Road :	Scarborough	2078838345
Z3300/15#yel 5 / 1		Frione;		Permi Type: Hood Systems, C	ommerical	13-2 13-2
Past Use:		Proposed (ve:	ì	Permit Fee:	Cost of Works	CEO District:
Maine Health -	Office		Office - Install Hood	\$90,00	\$6,468.00	
		Kitchen ground	ne Health Catering d Ooor rear	FIRE DEPT:	Approved INSPER	CITION: oup: ///
			}		] Octrical	
				* See Cons	ar are	TMC 2093
Proposed Project	Deteription:			25	. 1 -	
1	-	Health Catering Kitche	-	Sogneture: (K4	Som	
				PROESTRIAN ACTI	YFILES DISTRICT (I	(A.D.)
Ì				Action 🔲 Approx	el 📋 Approval w	Conditions Desired
				Signature:		Date:
Permit Taken By: Idobson		Date Applied For: 10/20/2010		Zoning	Approval	
This permi	t annification de	tes not preclude the	Special Zooc or Review	Zonie	ig Appeal	Hiptoric Preservation
- 1	s) from meeting	g applicable Stare and	☐ Sharelend	☐ <b>V</b> ariance	.	Not in District or Landma
· • • • • • • • • • • • • • • • • • • •	ermits do not in ectrical work.	ıclude plumbing,	☐ Welland	☐ Miscella	тирея	Does Not Require Review
3. Building p	ermits are void	if work is not started to date of issuance.	Flood Zone	☐ Conditio	ma) Use	Requires Remich
False infor		alidate a building	Subdivisem	☐ Interpret	nton	☐ Approved
			Site Plan	[] Аррюж	.i	Approved w/Canditions
PE	RMIT IS	SUED	Naj ∐ Minor ⊡ <b>394</b> {	2   Cl Demied		☐ Ovaled <
	ו - עסא	(M)		2 <sub>bez</sub>		<u>**</u>
			10/21/10	)		-
	City of Part	lan <b>d</b>	•			
			CERTIFICATIO	SN .		
hereby cartify:	nar I am the o	amen of record of the no-			authorized by the	owner of record and that
have been auth criediction. In	orized by the o	wner to make this appli count for work described	cation as his authorized I in the application is iss	agent and I agree to sued, I certify that	to conform to all ap the code official's a	
SKINATURE OF A	A DEDITION A ATA				DATE.	7/AAA
MINATORE IN	TUK ANI		ALXORESS		DATE	PHONE

RESPONSIBLE PERS



# uilding inspections LAND, MAINE

# Original Receipt

·	10/20 0010
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and the set the set	
	Suitching Fee:
	Site Fae:
	Certificate of Occupancy Fee:
)	Total: 70
Magna (EL) Pu	Plumbing (II) Electrical (I2) Site Pien (I/2)
35.6.1	
10	14796

WHITE - Applicant's Copy VELLOW - Office Copy PNK - Permit Copy

Taken by:

City of Portland, M	aine - Building or Use Permit		Permit No:	Date Applied For:	CBI.;
· I	4101 Tel: (207) 874-8703, Fax: (207	7) 874-8716	10-1314	10/20/2010	039 C001001
Location of Conservation:	Owner Name:		Dwaer Address:	<u> </u>	Phone:
UIO FREE ST	MAINEHEALTH	l	465 CONGRESS	ST STE 600	
Business Name:	Contractor Name:		Contractor Address:		fhone
	Johnson & Jordan		18 Mussey Road S	carborough	(207) 883-8345
I,egsee/Bayer's Name	Phones		Permit Type: Hood Systems, Co	permerical	
Proposed Use:		Propes	d Project Description:	<u></u>	<del>==-</del>
Maine Health Office - I Catering Kitchen ground	install Hood System to Maine Health à floor rear	Install rear	Hood System to M	taine Health Caterir	ng Kitchen ground floor
Dept: Zoning Nate:	Status: Approved	Reviewer	Marge Schmuck	a) Approval i	Ok to Issue: ✓
Dept: Building Note:	Status: Approved with Conditions	Reviewer	Татқыу Мильор	Approval l	Date: 11/01/2010 Ok to fisue: ⊀
1) All penetratios throu or UL 1479, per IBC	igh rared assemblies must be protected by 2 2003 Section 712.	у ап аррголе	d firestop system ir	nstalled in accordan	ec with ASTM 814
This permit is appro	exhaust shall be installed per IMC 2003 a ved based on the plans submitted and/or rap or equivalent assembly per code.			eaances based on th	e application of a
Dept: Fire Note:	Status: Approved with Conditions	Reviewer	Capt Keith Gaut	reau Approval i	Date: 10/26/2010 Ok to Issue: ✓
Install shall comply     A compliance letter					

PERMIT ISSUED

NOV - 1 40

#### BUILDING PERMIT INSPECTION PROCEDURES

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

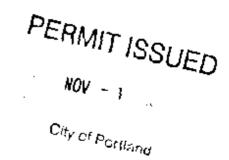
or email: bulldinginspections@portlandmaine.gov

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 n "Stop Work Order" and subsequent release to continue with construction.
- X Final Inspection required at completion of work.

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 #: 10-1314

# Kitchen How Permit

# 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.

ordion/Address of Construction:	110+ree
Total Square Footage of Proposed Structur	Square Footage of Lot
Tax Assessor's Chart, Block & Lot  Joseph Block# Lot#	Owner:  MAINE HEALTH  Telephone:
essee/Buyer's Name (If Applicable)	Applicant name, address & telephone:  Tohnuson, Johnus Inc.  La Musser RD  Schreborough, Mar 04038  Top 7 - 883-8345  Cof O Fee: \$ 70
roject description:	lood Syster- Maine Health Cutuing
	word that comp
Contractor's name, address & triephone:	See Applicant Above
Contractor's name, address & telephone.  Who should we contact when the permit is failing address.  Tokason & Jordan Tax	See Applicant Above  Phone: 207-883-8345 Popul my.
Contractor's name, address & telephone:  Who should we contact when the permut is dailing address:  Johnson & Josepho The 18 Museum Roma  Sentborough, ME, 04  Please submit all of the information	SEE APPLICANT Above  restly: Lewis R. Kerstwer Johnson Jun  Phone: 207-883-8345  OTH  outlined in the Commercial Application Checklist.
Contractor's name, address & telephone:  Who hould we contact when the permut is dailing address:  Tokason Jorgana Tac  Santsarough, ME, Or  Please submit all of the information  allufe to do so will result in the aut  order to be sue the City fully understands the equestional information prior to the inter-	SEE APPLICANT Above  restly: Lewis R. Kerstwer Johnson Jun  Phone: 207-883-8345  OTH  outlined in the Commercial Application Checklist.
Contractor's name, address & telephone:  Who hould we contact when the permit is failing address:  Tokason Jorgana Tac  Series (NE, 04)  Tease submit all of the information  railure to do so will result in the aut  to order to be sure the City fully understands the equestional information prior to the into the applications visit the Inspections Division	See Applicant Above  resty: Lew & R. Kerstwer Johns Jan  Phone: 207-883-8345  outlined in the Commercial Application Checklist.  constituted in the Commercial Application Checklist.  on atic denial of your permit.  The full scope of the project, the Planning and Development Department may ance of a permit. For further information of the project the form and
Contractor's name, address & telephone:  Who should we contact when the permut is dailing address:  JOHNSON THE City fully understands the equesto additional information prior to the intuition applications visit the Inspections Division than 30.5 City Hall or call 874-8703.  hereby certify that I am the Owner of record of the contraction by the owner to make this applications.	Phone: 207-883-8345  Phone: 207-883-8345  Outlined in the Commercial Application Checklist.  Constitute denial of your permit.  The full scope of the project, the Planning and Development Department may ance of a permit. For further information of the project, the project, the project of the project, the project of the





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

Lee Urban - Director of Planning and Development Jeanie Bourke; Inspection Division Services Director

#### Kitchen Exhaust System Checklist and code Provisions

Dear Applicant,

The following is a checklist to assist you in filing for a permit for a Kitchen

Type	of System:					
	Type I	<b>X</b>	Type II			
			that vent fryers, grist that vent steamers		or wols. se producing applian	ාදක.
Туре	Materials	:				
	Is the hood	Stainless s	steel or other typ	pe of steel? 434	2 servinas	If Other, what
	Type?				UL 710	
				• •		If Other
	Thickness of	f the steel	for the hood	18 6	A	
	Tinewite22 O		C 4 L 1	4		
	Thickness of	the duct	tor the hood	16 61	<u> </u>	<del></del> _
			_		<u> </u>	
	Thickness of	d and Du	ct Supports		mes Street	

2" BALK Strais	der drawin	<u> ۱۳۸۲ کی اور کی</u> ل	JIADO OFF
Duct Clearance reduction to C	ombustibles des	ign/specs;	un 25Å
2 10 yers 1'12"	OHO nating	O" clearons	· · · · · · · · · · · · · · · · · · ·
Vibration Isolation System:	,		
Homing isolators			
Air Velocity within the duct sy		M 14" ROA	Noburt
Grease accumulation prevention	on system:	1500	CFM
YES (S	sec Jusmin	Ha()	
Cleanouts	15 14 " ROVE	o, straight a	wonly 3'
Grease Duct enclosure		•	,
 Exhaust Termination Roof_		•	
Fire Suppression System	S WE	T_CHEMICA	<u> </u>
Exhaust fan mounting and clea			
Rost Corb 3'8" ra	oof to exhaus	terit 33 ex	haust wit to
Exhaust fan distance from prop	erty lines	+ to stra	vapet,
Exhaust fan distance from othe			•
Exhaust fan distance from adja			-
∣ Exhaust fan height above adjoir			
Specs			
Style of Hood	PANODH		
Style of Hood	Heel bas	Ale with he	audles
laight of filter above nearest co	<u> </u>	<del></del>	
Height of filter above nearest co Capacity of hood CFM			