

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED

Permit Number: US0574

MAY 26 2005

CITY OF PORTLAND

This is to certify that MERCY HOSPITAL /TBD

has permission to Renovations to Ambulance entrance

AT 148 STATE ST

045 C006001

provided that the person or persons, firm 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 altered or closed-in. **HEAR 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. [Signature]

Health Dept. _____

Appeal Board _____

Other _____

Department Name

[Signature]

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-0574	Issue Date: PERMIT ISSUED MAY 26 2005	City: 045 C006001
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Location of Construction: 148 STATE ST	Owner Name: MERCY HOSPITAL	Owner Address: 144 STATE ST	Phone: 045 C006001
Business Name:	Contractor Name: TBD	Contractor Address: Portland	Phone: CITY OF PORTLAND
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: R-6
Past Use: Hospital/ Mercy Hospital	Proposed Use: Mercy Hospital/ Renovations to Ambulance entrance	Permit Fee: \$921.00	Cost of Work: \$100,000.00
Proposed Project Description: Renovations to Ambulance entrance		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>with conditions</i>	INSPECTION: Use Group I Type: B <i>5/27/05</i>
		Signature: <i>Greg Carr</i>	Signature: <i>[Handwritten Signature]</i>
		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: Idobson	Date Applied For: 05/10/2005	Zoning Approval
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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"/> MMS <input type="checkbox"/> Date: <i>5/19/05</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 checked="" type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>to DA</i> Date: _____
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D. Andrews
5/19/05

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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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City of Portland, Maine - Building or Use Permit

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

Permit No: 05-0574	Date Applied For: 05/10/2005	CBL: 045 C006001
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Location of Construction: 148 STATE ST	Owner Name: MERCY HOSPITAL	Owner Address: 144 STATE ST	Phone:
Business Name:	Contractor Name: TBD	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	

Proposed Use: Mercy Hospital/ Renovations to Ambulance entrance	Proposed Project Description: Renovations to Ambulance entrance
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Dept: Historical **Status:** Approved **Reviewer:** Deborah Andrews **Approval Date:** 05/19/2005
Note: **Ok to Issue:**

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 05/19/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 05/24/2005
Note: **Ok to Issue:**

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Jay Kelley **Approval Date:** 05/19/2005
Note: **Ok to Issue:**

- 1) Building construction to comply with all state codes
- 2) Fire alarm system to remain operational at all times.
- 3) Sprinkler system to remain operational at all times.

All Purpose 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.

Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: MERCY HOSPITAL 144 STATE STREET PORTLAND, MAINE 04101	Telephone: 879.3895			
Lessee/Buyer's Name (If Applicable) N/A	Applicant name, address & telephone: MERCY HOSPITAL c/o BILL CONNOLLY 879.3895	cost Of Work: \$ 100,006 Fee: \$ 921			
Current use: AMBULANCE ENTRANCE					
If the location is currently vacant, what was prior use: N/A					
Approximately how long has it been vacant: NA.					
Proposed use: AMBULANCE ENTRANCE & EMS WORK AREA. Project description: INFILL OF EXISTING CANOPY & 218 SF OF SPACE, THE PROJECT HAS BEEN REVIEWED/APPROVED BY BMT PLANNING AND HISTORIC STAFF					
Contractor's name, address & telephone: T.B.D					
Who should we contact when the permit is ready: BILL CONNOLLY					
Mailing address: MERCY HOSPITAL 144 STATE STREET PORTLAND, MAINE 04101					
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 879 3895					

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant: FOR BC	Date: 5.10.05
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**This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the
Planning Department on the 4th floor of City Hall**



CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Room 315
Portland, Maine 04101

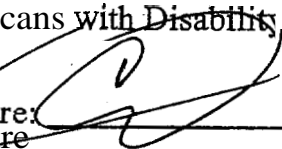
ACCESSIBILITY CERTIFICATE

Designer: CRAIG PIPER @ SMRT

Address of Project: 144 STATE STREET

Nature of Project: ADDING AN EMS (EMERGENCY TECHNICIAN)
SPACE & EXTENSION OF EXISTING CORRIDOR.
+/- 218 SF

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.

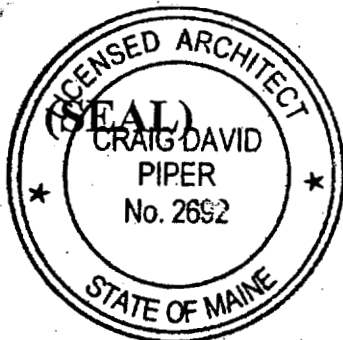
Signature: 

Title: ARCHITECT

Firm: SMRT

Address: 144 FORE STREET
PORTLAND, MAINE 04101

Phone: 772-3846



NOTE. If this project is a new Multi Family Structure of 4 units or more, this project must also be designed in compliance with the Federal Fair Housing Act. On a separate submission, please explain in narrative form the method of compliance.



CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Room 315
Portland, Maine 04 101

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Service

FROM: CRAIG PIPER

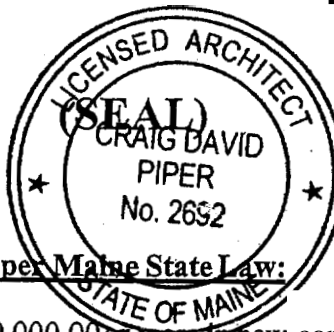
RE: Certificate of Design

DATE: 5.10.05

These plans and/ or specifications covering construction work on:

EMS ADDITION @ MERCY HOSPITAL

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



As per Maine State Law:

\$50,000.00 or more in new construction, repair expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

Signature: [Handwritten Signature]

Title: ARCHT T

Firm: SMRT

Address: 144 - F STREET

FROM DESIGNER: CRAIG PIPER

DATE: 5.10.05

Job Name: MERCY HOSPITAL - EMS ADDITION.

Address of Construction: 144 STAR STREET

2003 International Building Code

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

Building Code and Year 2003 IBC Use Group Classification(s) I

Type of Construction I

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IR

Is the Structure mixed use? NO if yes, separated or non separated (see Section 302.3)

Supervisory alarm system? Y Geotechnical/Soils report required? (See Section 1802.2) NO

N/A

STRUCTURAL DESIGN CALCULATIONS

Submitted for all structural members (100.1, 100.1.7)

Live load reduction (1603.1.7, 1607.9, 1607.10)

Roof live loads (1603.1.2, 1607.11)

DESIGN LOADS ON CONSTRUCTION DOCUMENTS (1603)

Roof snow loads (7603.7.3, 1608)

Uniformly distributed floor live loads (7603.12, 1607)

Ground snow load, P_g (1608.2)

Floor Area Use

Loads Shown

If $P_g > 10$ psf, flat-roof snow load, P_f (1608.3)

If > 10 psf, snow exposure factor, C_e (1608.3.1)

If $P_g > 10$ psf, snow load importance factor, I_s (Table 1604.5)

Roof thermal factor, C_t (Table 1608.3.2)

Sloped roof snowload, P_s (1608.4)

Seismic design category (1616.9)

Basic seismic-force-resisting system (Table 1617.5.2)

Wind loads (1603.1.4, 1609)

Design option utilized (1609.1.1, 1609.5)

Response modification coefficient, R , and deflection amplification factor, C_d (Table 1617.5.2)

Basic wind speed (1609.3)

Analysis procedure (1616.6, 1617.5)

Building category and wind importance factor, I_w (Table 1604.5, 1609.5)

Design base shear (1617.4, 1617.5.1)

Wind exposure category (1608.4)

Internal pressure coefficient (ASCE 7)

Flood loads (1603.1.8, 1612)

Component and direction pressures (1609.5.1, 1609.5.2.2)

Flood hazard area (1612.3)

Main force wind pressures (7603.1.1, 1609.5.2.1)

Elevation of structure

Earthquake design data (1603.1.5, 1614, 1623)

Other loads

Design option utilized (1614.1)

Concentrated loads (1607.4)

Seismic use group ("Category") (Table 1604.5, 1616.2)

Partition loads (1607.5)

Spectral response coefficients, S_{DS} & S_{D1} (1615.1)

Impact loads (1607.8)

Site class (1616.1.5)

Misc. loads (Table 1607.6, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)

CHECK LIST FOR COMMERCIAL PROJECTS

All of the following information is required. Failure to provide this information at time of submission will delay the permitting Process until the application is complete.

- N/A 1 Copy of Deed if current owner has owned the property less than 365 days.
- X 2 Copies of floor plan, indicating dimensions of each area and specific uses (office, warehouse, storage, retail, etc.)
- 1 Copy of the Plot Plan to scale
- X 2 copies of the Construction Detail
- X If any of your plans are larger than 11" x 17" we will need one copy on paper no larger than 11" x 17" of all submissions. We cannot accept applications without the reduced submission. Electronic plans may be submitted in place of the 11" x 17" copies and must be in the PDF format,

A COMPLETE SET OF CONSTRUCTION DRAWINGS INCLUDES THE FOLLOWING:

PLEASE NOTE** Construction Documents for Cost of Work in excess of \$50,000.00 must be prepared by a Design Professional and bear their seal.

- X Cross sections w/framing details
- X Detail of any new walls or permanent partitions
- X Floor Plans & Elevations
- X Window and door schedules
- X Foundation plans with required drainage and damp proofing (if applicable)
- X Complete Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

SEPARATE PERMITS ARE REQUIRED FOR INTERNAL & EXTERNAL PLUMBING, HVAC, AND ELECTRICAL INSTALLATIONS

If there are any additions to the footprint or volume of the structure or new structures:

PLOT PLAN IS REQUIRED THAT INCLUDES THE FOLLOWING:

- The shape and dimension of the lot, footprint of the proposed structure and the distance from the actual property lines. Structures include decks porches; a bow windows cantilever sections and roof overhangs, sheds, pools, garages and any other accessory structures must be shown and to scale. **A photocopy of the plat with hand drawn footprints of buildings if it is not to scale, it will not be accepted**
- Boundary survey to scale showing North arrow; zoning district & setbacks
- First floor sill elevation (based on mean sea level datum);
- Location and dimensions of parking areas and driveways;
- Location and size of both existing utilities in the street and the proposed utilities serving the building;
- Location of areas on the site that will be used to dispose of surface water.
- Existing and proposed grade contours
- Silt fence locations
- THE SURVEYORS MONUMENTS MUST BE IN PLACE AND THE LOT STAKED FOR A SETBACK INSPECTION PRIOR TO ISSUANCE OF A BUILDING PERMIT**

AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THE PERMIT. IF THE REQUIRED INFORMATION AS STATED ABOVE IS NOT SUBMITTED WITH THE APPLICATION, THE APPLICATION WILL BE AUTOMATICALLY DENIED

- Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

Please call 874-8703 or 874-8693 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.

- NA Footing/Building Location Inspection: Prior to pouring concrete
- NA Re-Bar Schedule Inspection: Prior to pouring concrete
- NA Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- 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.~~

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

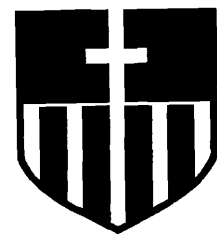
If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

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

Signature of Applicant/Designee
James Bonke
 Signature of Inspections Official

Date 5/31/05
 Date

CBL: 045006 Building Permit #: 050574



MERCY HOSPITAL

EMS ADDITION

144 STATE STREET PORTLAND, MAINE



ARCHITECTURE ENGINEERING PLANNING
SMRT
144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104
tel. (207) 772-3846 / fax. (207) 772-1070

REV	DESCRIPTION	DATE
0	ISSUED FOR CONSTRUCTION	5-6-05

PROJECT: MERCY HOSPITAL
EMS ADDITION
144 STATE STREET PORTLAND, ME

CURRENT ISSUED STATUS:
ISSUED FOR CONSTRUCTION
5-6-05

SHEET TITLE:
TITLE SHEET

SCALE: N/A
PROJECT MANAGER: CDP
SHEET No. **G1001**

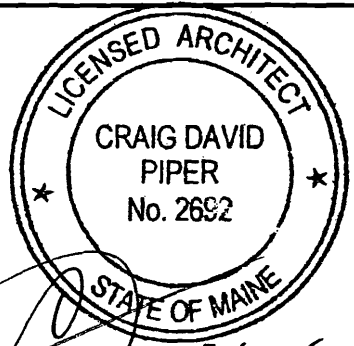
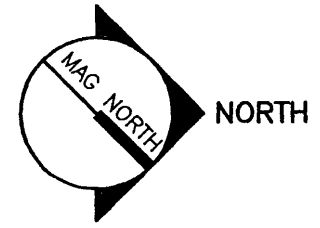
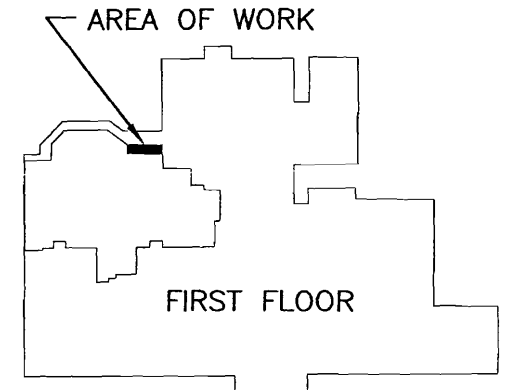
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A/E OF RECORD: CDP
SMRT CAD FILE: 03089-04
PROJECT No.: 03089-04
DATE: 5-6-05

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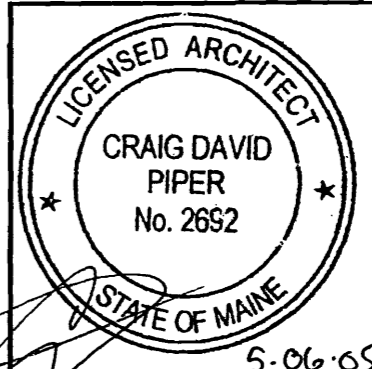
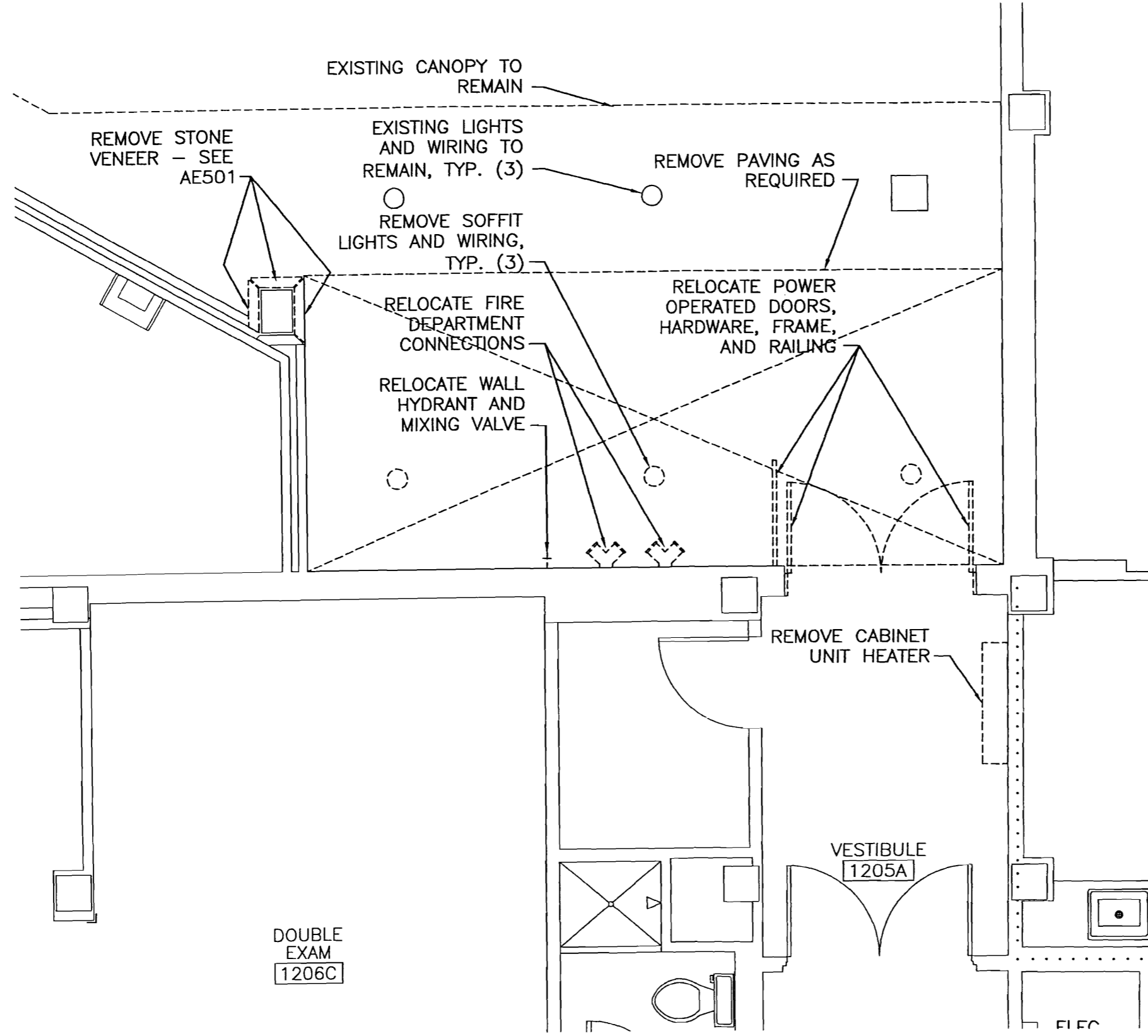
DRAWING LIST

GI001	TITLE SHEET	M-001	LEGEND & ABBREVIATIONS
		M-002	GENERAL NOTES
AD101	PARTIAL FIRST FLOOR DEMOLITION PLAN	M-101	PARTIAL FIRST FLOOR HVAC PLAN
AE101	PARTIAL FIRST FLOOR PLAN	M-601	SCHEDULES
AE102	PARTIAL FIRST FLOOR REFLECTED CEILING PLAN	P-101	PARTIAL FIRST FLOOR PLUMBING PLAN
AE201	PARTIAL EXISTING EAST ELEVATION	P-601	PLUMBING SCHEDULES & DETAILS
AE202	PARTIAL PROPOSED EAST ELEVATION	EP101	PARTIAL FIRST FLOOR POWER & SYSTEMS PLAN
AE203	INTERIOR ELEVATION	EL101	PARTIAL FIRST FLOOR LIGHTING PLAN
AE301	BUILDING SECTION		
AE302	WALL SECTION		
AE501	SECTIONS AND STRUCTURAL NOTES		

KEY PLAN



5.6.05

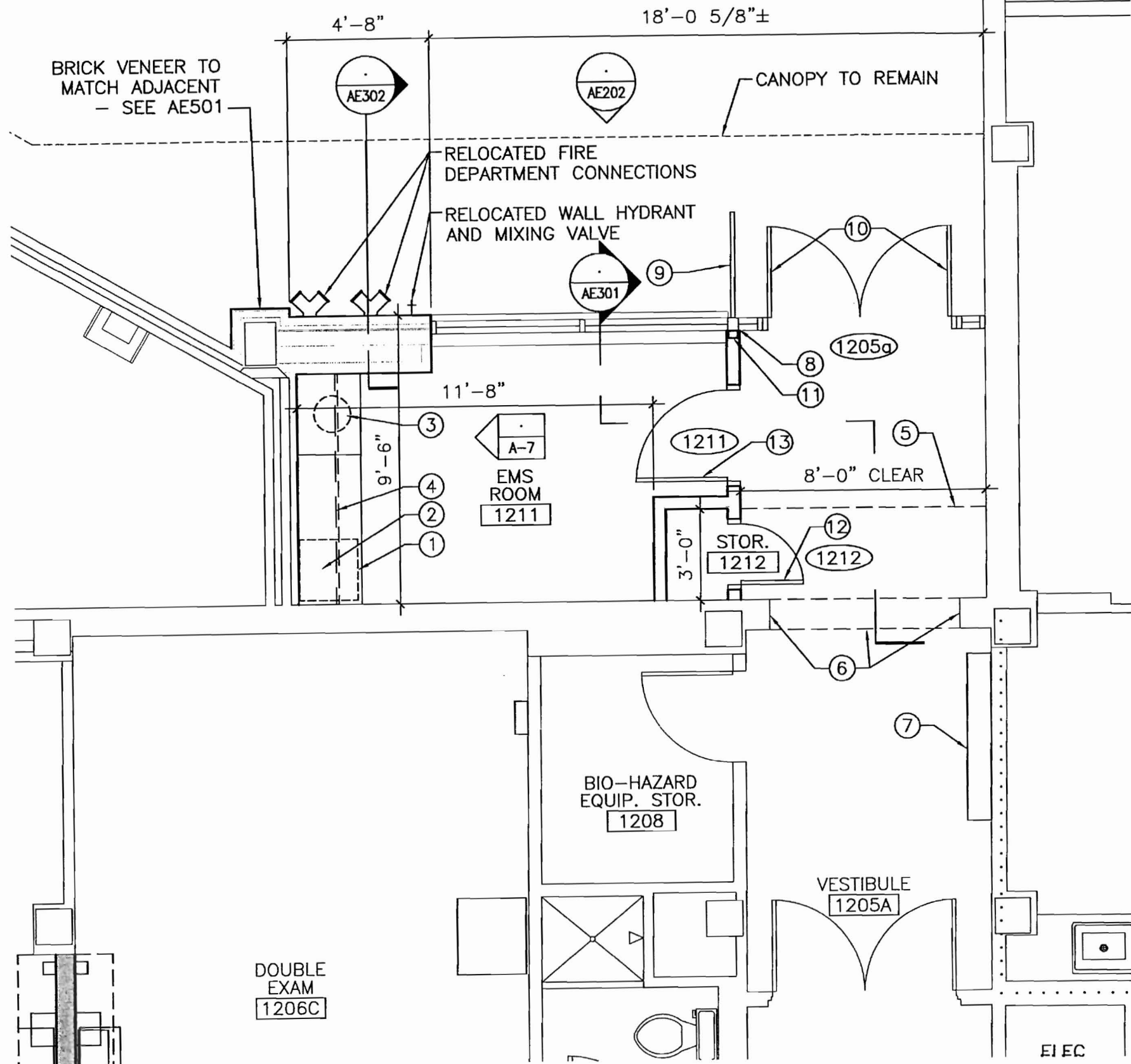


5.06.05

CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME	
SCALE: 1/4" = 1'-0"	JC/DRAWN BY: APM	SHEET TITLE: PARTIAL FIRST FLOOR DEMOLITION PLAN	
PROJECT MANAGER: CDP	A/E OF RECORD: CDP	ARCHITECTURE ENGINEERING PLANNING SMRT	
SHEET No. AD101	SMRT CAD FILE: 03089-04	REV: 0	ISSUED FOR CONSTRUCTION: 5-6-05
	PROJECT No: 03089-04	DESCRIPTION:	DATE:
	DATE: 5-6-05		



ARCHITECTURE ENGINEERING PLANNING
SMRT
144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104
Tel. (207) 772-3846 / fax. (207) 772-1070

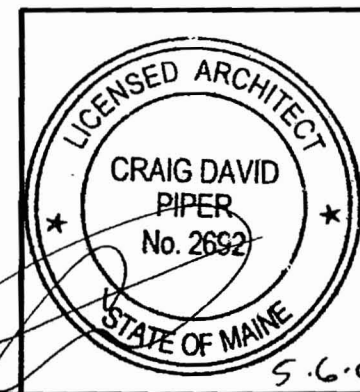


KEYED NOTES

- ① UNDER-CABINET REFRIGERATOR, N.I.C.
- ② MICRO COFFEE MAKER, N.I.C.
- ③ SINK IN COUNTERTOP AT A.D.A. HEIGHT, WASTE PUMP UNDERNEATH IN CABINET
- ④ OVERHEAD CABINETS WITH SOFFIT ABOVE
- ⑤ SOFFIT ABOVE - MATCH CEILING HEIGHT IN VESTIBULE 1205A - SEE DRAWING AE301
- ⑥ PATCH WALLS AND HEADER TO MATCH ADJACENT WHERE DOOR FRAME IS TO BE REMOVED - SEE DRAWING AE301
- ⑦ REPLACEMENT CABINET UNIT HEATER - PATCH AND FINISH WALL TO MATCH ADJACENT
- ⑧ 4" WIDE STOREFRONT POST - ABUT NEW PARTITION TO POST FOR A SMOKE-TIGHT SEAL
- ⑨ REINSTALL EXISTING GUARD RAIL
- ⑩ REINSTALL POWER OPERATED DOORS AND FRAME - INTEGRATE INTO STOREFRONT SYSTEM - SEE ELEVATION AE202
- ⑪ COLD-FORMED JAMB FULL-HEIGHT FROM TOP OF FLOOR SLAB TO UNDERSIDE OF CANOPY SLAB TO PROVIDE LATERAL SUPPORT FOR BRICK WALL/WINDOW SILL
- ⑫ DOOR 1212: 2'-0"x7'-0" WOOD DOOR, CLOSER, PASSAGE FUNCTION
- ⑬ DOOR 1211: 3'-0"x7'-0" WOOD DOOR, NARROW LITE, OFFICE FUNCTION



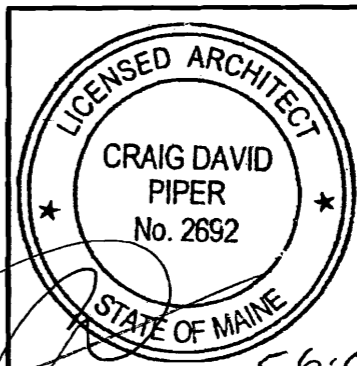
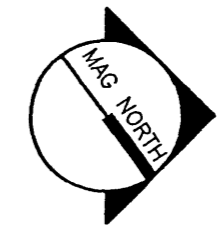
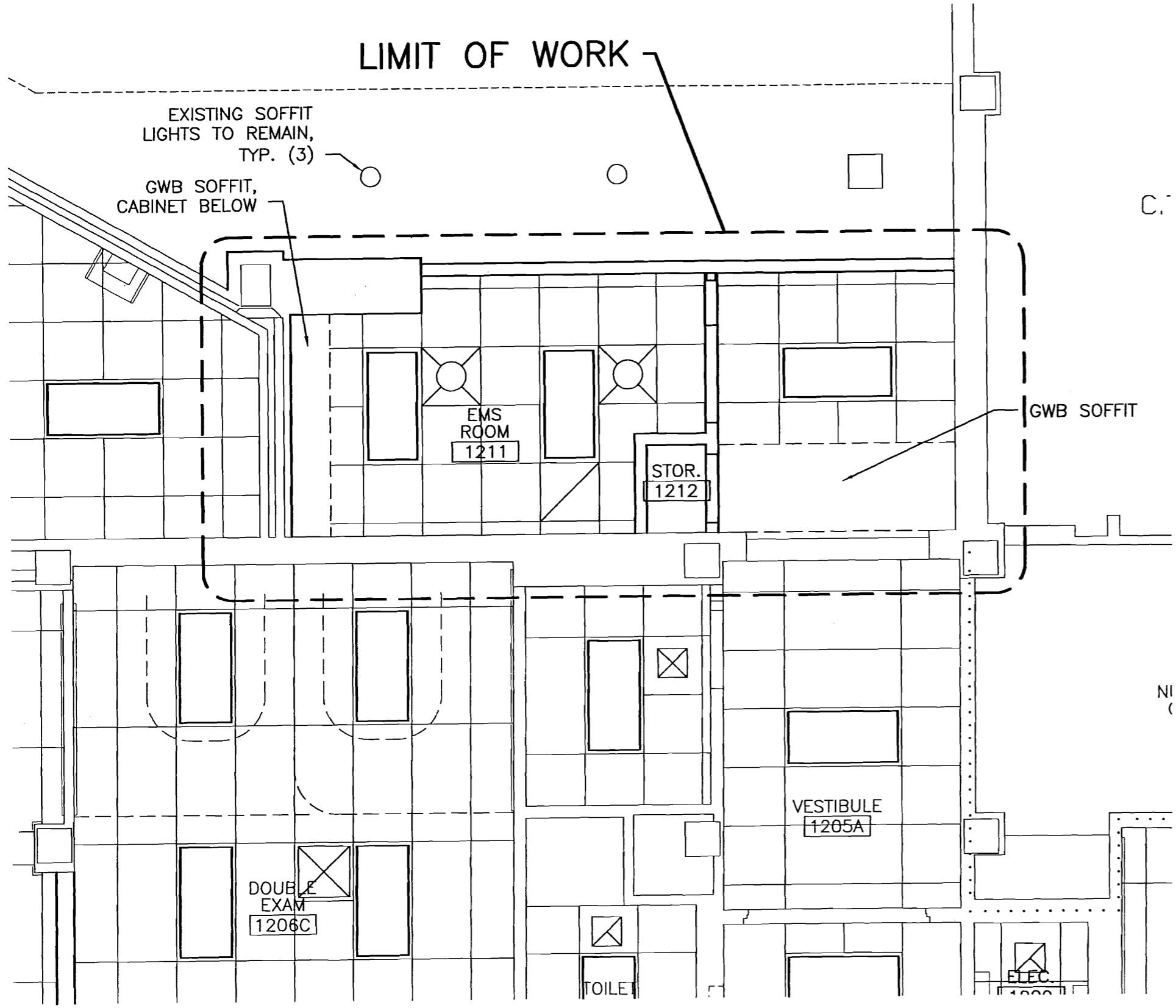
PROJECT NORTH



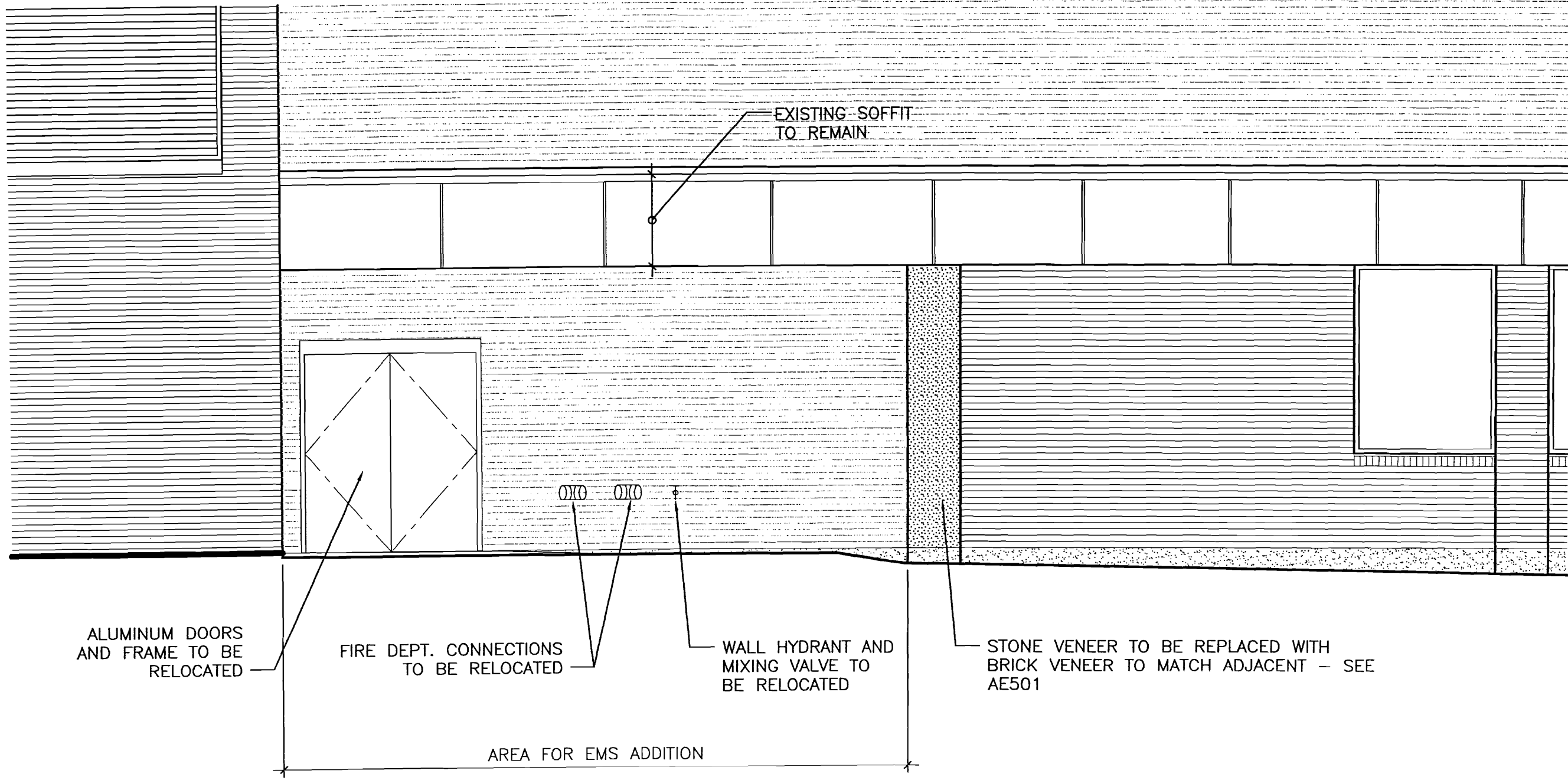
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SHEET No. AE101		SMART CAD FILE: 03089-04	CDP
PROJECT No. 03089-04		PROJECT No. 03089-04	03089-04
DATE: 5-6-05		DATE: 5-6-05	5-6-05
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: PARTIAL FIRST FLOOR PLAN	
REV		DESCRIPTION	DATE
0	ISSUED FOR CONSTRUCTION		5-6-05



SMRT
ARCHITECTURE ENGINEERING PLANNING
144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104
tel. (207) 772-3846 / fax. (207) 772-1070



CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		SCALE: 1/4" = 1'-0"	JC/DRAWN BY: APM
PROJECT MANAGER: CDP	A/E OF RECORD: CDP	SMART CAD FILE: 03089-04	PROJECT No.: 03089-04
SHEET No. AE102	DATE: 5-6-05	© COPYRIGHT 2005 SMART INC.	
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: PARTIAL FIRST FLOOR REFLECTED CEILING PLAN	
REV	DESCRIPTION	ISSUED FOR CONSTRUCTION	DATE
0		5-6-05	
ARCHITECTURE ENGINEERING PLANNING SMART 144 Fore Street/P. O. Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070			



ALUMINUM DOORS AND FRAME TO BE RELOCATED

FIRE DEPT. CONNECTIONS TO BE RELOCATED

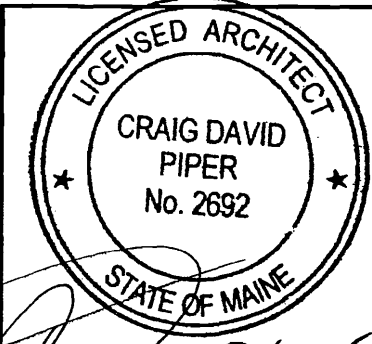
WALL HYDRANT AND MIXING VALVE TO BE RELOCATED

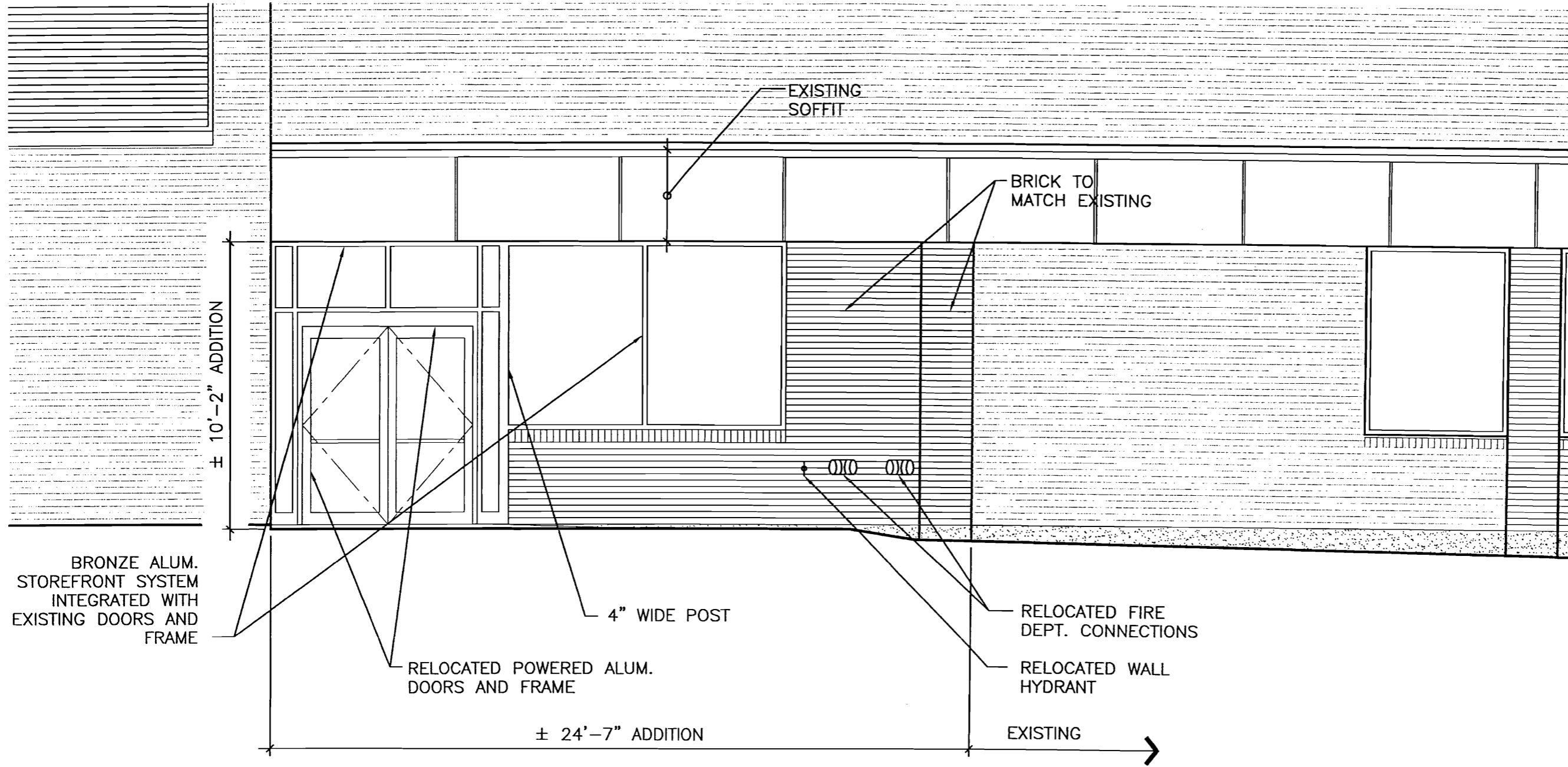
STONE VENEER TO BE REPLACED WITH BRICK VENEER TO MATCH ADJACENT - SEE AE501

EXISTING SOFFIT TO REMAIN

AREA FOR EMS ADDITION

ISSUED FOR CONSTRUCTION 5-6-05		PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME	SHEET TITLE: PARTIAL EXISTING EAST ELEVATION
SCALE: 1/4" = 1' - 0" PROJECT MANAGER: CDP SHEET No. AE201	JC/DRAWN BY: APM A/E OF RECORD: CDP SMRT CAD FILE: 03089-04 PROJECT No: 03089-04 DATE: 5-6-05	REV 0 ISSUED FOR CONSTRUCTION 5-6-05 DATE	ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104 Tel. (207) 772-3846 / Fax. (207) 772-1070





BRONZE ALUM.
STOREFRONT SYSTEM
INTEGRATED WITH
EXISTING DOORS AND
FRAME

± 10'-2" ADDITION

RELOCATED POWERED ALUM.
DOORS AND FRAME

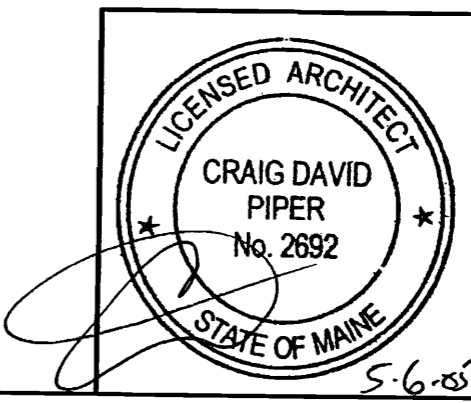
4" WIDE POST

± 24'-7" ADDITION

EXISTING →

GLAZING NOTES

1. MAXIMUM U-VALUE = 0.57
2. MAXIMUM SOLAR HEAT GAIN COEFFICIENT = 0.39

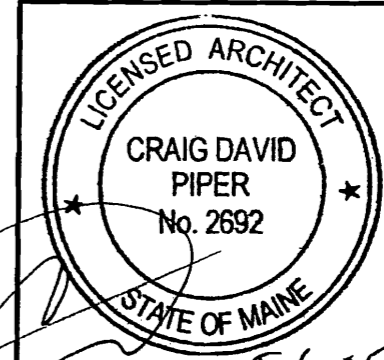
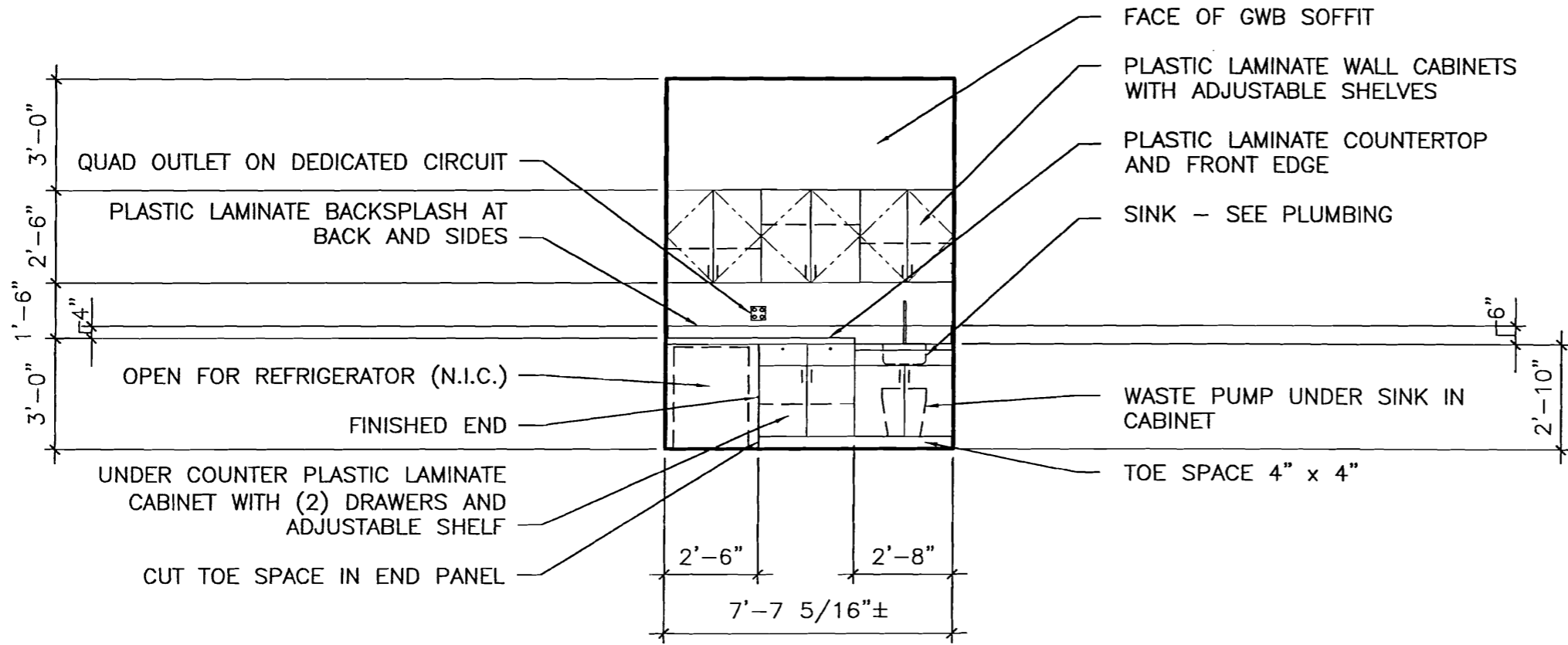


CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		ARCHITECTURE ENGINEERING PLANNING SMART 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070	
SCALE: 1/4" = 1'-0"	JC/DRAWN BY: APM	ISSUED FOR CONSTRUCTION	DESCRIPTION	5-6-05	DATE
PROJECT MANAGER: CDP	A/E OF RECORD: CDP	0			
SHEET No. AE202	SMRT CAD FILE: 03089-04	PROJECT TITLE: PARTIAL PROPOSED EAST ELEVATION			
	PROJECT No: 03089-04				
	DATE: 5-6-05				



NOTES

1. CABINERY SHALL BE A.W.A. CUSTOM GRADE
2. COUNTERTOPS AND BACKSPASHES SHALL BE PIONITE AT991 WHEAT FIBER
3. ALL OTHER (VERTICAL) SURFACES SHALL BE PIONITE AG581 PEPPER FIBER



CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: INTERIOR ELEVATION	
SCALE: 1/4" = 1'-0"	JC/DRAWN BY: APM	PROJECT MANAGER: CDP		DATE: 5-6-05	
PROJECT No. AE203	A/E OF RECORD: CDP	SMRT CAD FILE: 03089-04		PROJECT No.: 03089-04	
		PROJECT No.: 03089-04		DATE: 5-6-05	
		ISSUED FOR CONSTRUCTION		DATE: 5-6-05	
		REV		DESCRIPTION	
		0		ISSUED FOR CONSTRUCTION	

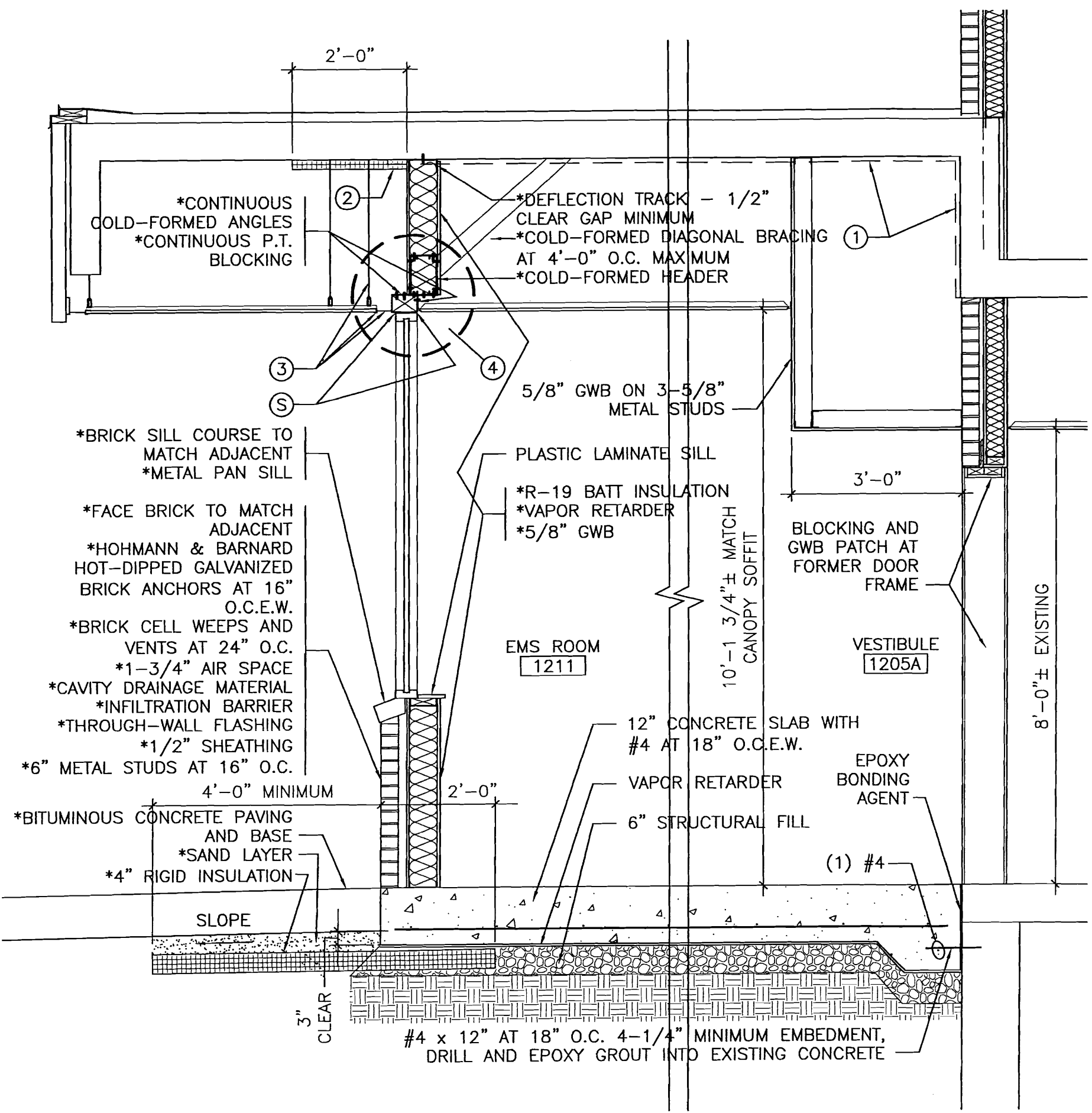


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144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104
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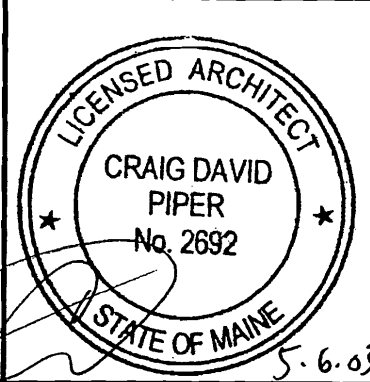
SEE SHEET AE501 FOR STRUCTURAL NOTES.

KEYED NOTES

- ⑤ PROVIDE BACKER ROD AND SEALANT
- ① REMOVE RIGID INSULATION AND FASTENERS - LEAVE CONCRETE BARE
- ② PROVIDE 2" RIGID INSULATION
- ③ CUT EXISTING SOFFIT TO SUIT NEW LAYOUT, PROVIDE J-BEAD AT NEW EDGE OF GWB, PROVIDE SUSPENDED CHANNEL RUNNER TO SUPPORT NEW EDGE, PROVIDE SCREENED VENTILATOR AT EDGE TO MATCH EXISTING
- ④ MATCH STOREFRONT HEIGHT, HEAD, AND TRIM CONDITIONS AT WALK-IN ENTRANCE



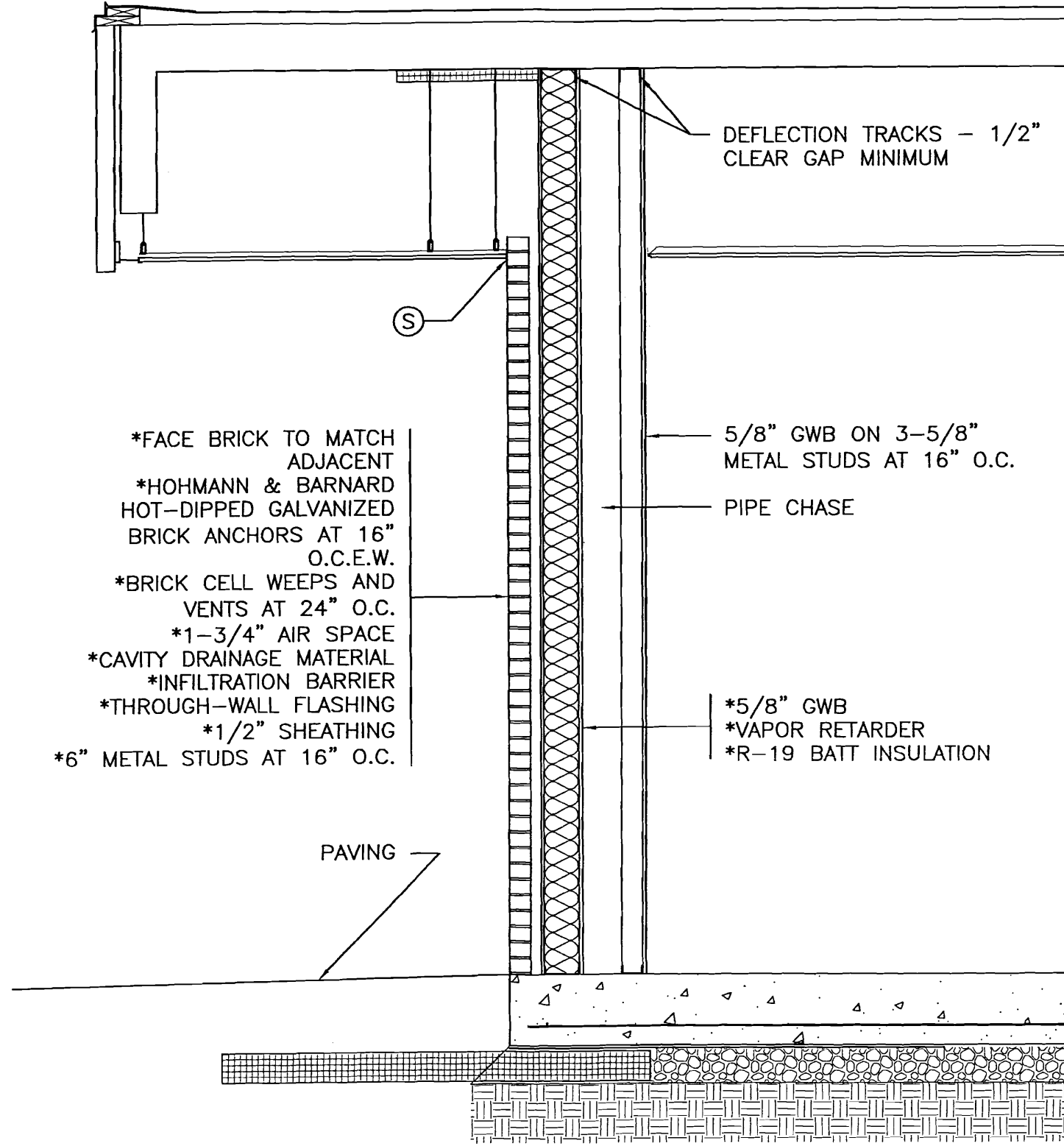
PROJECT:		MERCY HOSPITAL EMS ADDITION		144 STATE STREET PORTLAND, ME	
SHEET TITLE:		BUILDING SECTION			
CURRENT ISSUED STATUS:		ISSUED FOR CONSTRUCTION 5-6-05			
SCALE:	1/2" = 1'-0"	JC/DRAWN BY:	APM	DATE:	5-6-05
PROJECT MANAGER:	CDP	A/E OF RECORD:	CDP	SMRT CAD FILE:	03089-04
SHEET No.	AE301	PROJECT No.:	03089-04		



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REV	DESCRIPTION	DATE
0	ISSUED FOR CONSTRUCTION	5-6-05

SEE SHEET AE301 FOR ADDITIONAL NOTES.



- *FACE BRICK TO MATCH ADJACENT
- *HOHMANN & BARNARD HOT-DIPPED GALVANIZED BRICK ANCHORS AT 16" O.C.E.W.
- *BRICK CELL WEEPS AND VENTS AT 24" O.C.
- *1-3/4" AIR SPACE
- *CAVITY DRAINAGE MATERIAL
- *INFILTRATION BARRIER
- *THROUGH-WALL FLASHING
- *1/2" SHEATHING
- *6" METAL STUDS AT 16" O.C.

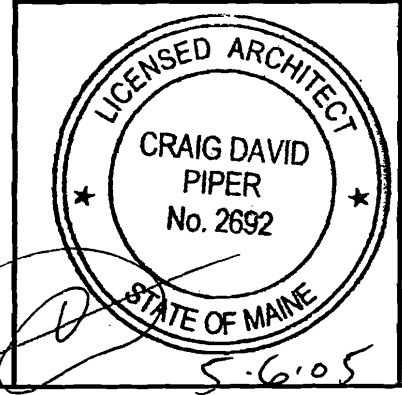
DEFLECTION TRACKS - 1/2"
CLEAR GAP MINIMUM

5/8" GWB ON 3-5/8"
METAL STUDS AT 16" O.C.

PIPE CHASE

*5/8" GWB
*VAPOR RETARDER
*R-19 BATT INSULATION

PAVING

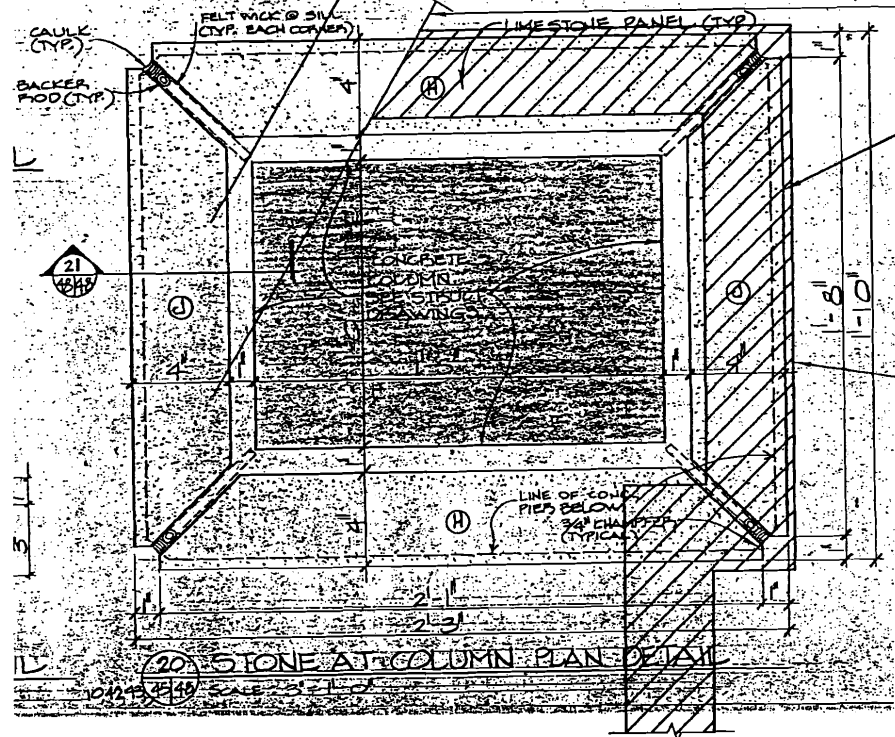
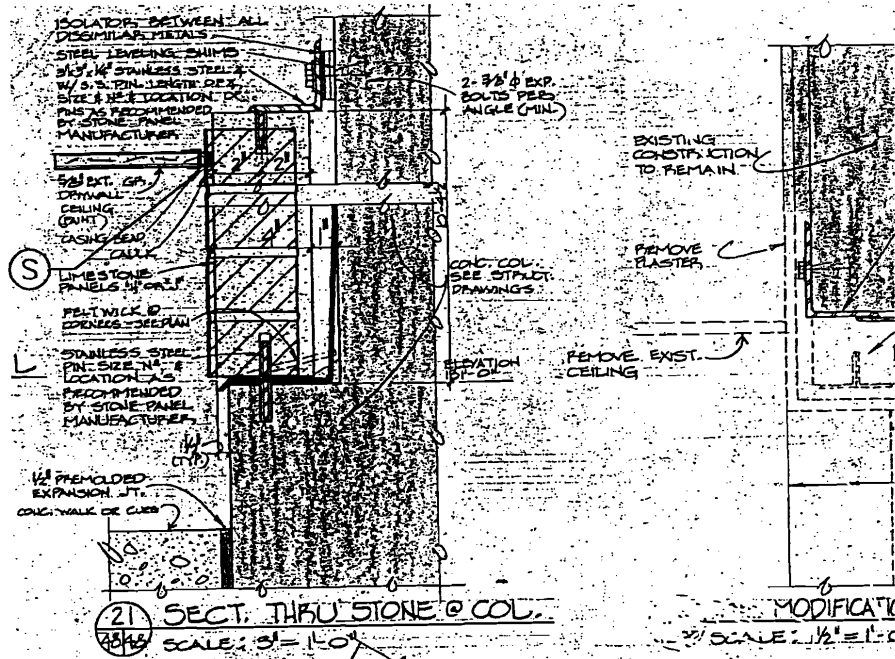


CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		SCALE: 1/2" = 1'-0"	JC/DRAWN BY: APM	APM
PROJECT MANAGER: CDP		A/E OF RECORD: CDP	CDP	CDP
SHEET No. AE302		SMRT CAD FILE: 03089-04	PROJECT No: 03089-04	DATE: 5-6-05
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: WALL SECTION		
REV		DESCRIPTION	DATE	
0	ISSUED FOR CONSTRUCTION	5-6-05		
ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street/P.O.Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070				

STRUCTURAL NOTES

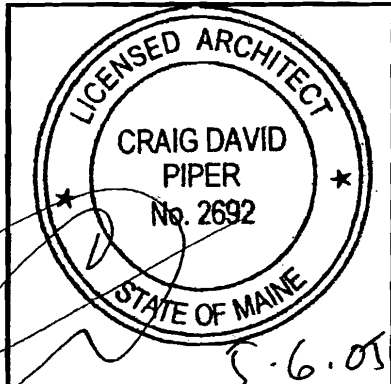
1. ALL CONCRETE WORK SHALL COMPLY WITH ACI 318-02.
2. CONCRETE COMPRESSIVE STRENGTH AT 28 DAYS SHALL BE 4,000 PSI.
3. REINFORCING BARS SHALL CONFORM TO ASTM A-615 GRADE 60 DEFORMED BARS AND SHALL BE DETAILED, FABRICATED AND PLACED IN ACCORDANCE WITH ACI 315, LATEST EDITION.
4. ALL EXTERIOR WALL FRAMING MEMBERS AND COMPONENTS SHALL BE 18 GAGE MINIMUM AND SHALL BE DESIGNED FOR A MAXIMUM ALLOWABLE DEFLECTION OF L/600.
5. THE LIGHT GAGE METAL FRAMING SUBCONTRACTOR SHALL SUBMIT SHOP DRAWINGS AND DESIGN CALCULATIONS AFFIXED WITH THE SEAL OF A PROFESSIONAL ENGINEER REGISTERED IN THE STATE OF MAINE. THESE DRAWINGS SHALL ILLUSTRATE THE DESIGN OF EXTERIOR STUD WALL FRAMING INCLUDING HEADERS, JAMBS, TRACKS, AND ALL NECESSARY STRUCTURAL STEEL STIFFENING AND BRACING.

NOTE: NEW BRICK WORK SHOWN ON TOP OF DETAIL OF EXISTING LIMESTONE PANELS.



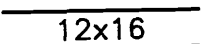
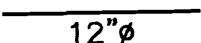

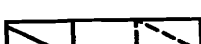



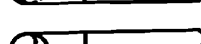
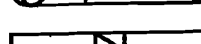



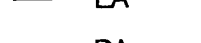



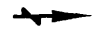


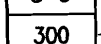



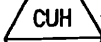
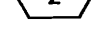
- EXISTING BRICK WALL TO REMAIN
- REMOVE (3) STONE PANELS
- FACE BRICK TO MATCH EXISTING ADJACENT
- HOT-DIPPED GALVANIZED BRICK ANCHORS AT 16" O.C.E.W. - USE CONCRETE SCREWS INTO EXISTING COLUMN
- BRICK CELL WEEPS AT BOTTOM, VENTS AT TOP, AT 24" O.C.
- 1-3/4" AIR SPACE
- CAVITY DRAINAGE MATERIAL
- SELF-ADHESIVE THROUGH WALL FLASHING

EXISTING CONDITIONS AT LIMESTONE-CLAD COLUMN



PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: SECTIONS AND STRUCTURAL NOTES	
CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05	SCALE: 1-1/2" = 1'-0" PROJECT MANAGER: CDP SHEET No. AE501	JC/DRAWN BY: APM A/E OF RECORD: CDP SMRT CAD FILE: 03089-04 PROJECT No: 03089-04 DATE: 5-6-05	DATE: 5-6-05 DESCRIPTION: ISSUED FOR CONSTRUCTION REV: 0
SMRT ARCHITECTURE ENGINEERING PLANNING 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070			



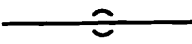
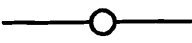

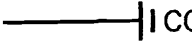






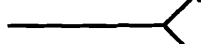

AIR DISTRIBUTION SYMBOLS

-  RECTANGULAR DUCT. (FIRST NUMBER IS SIDE SHOWN) DIMENSIONS IN INCHES
-  12 INCH ROUND DUCT
-  FLEXIBLE DUCT
-  RETURN DUCT TURNED UP OR DOWN (DASHED)
-  SUPPLY DUCT TURNED UP OR DOWN (DASHED)
-  EXHAUST DUCT TURNED UP OR DOWN (DASHED)
-  ROUND DUCT ELBOW DOWN
-  ROUND DUCT ELBOW UP
-  SQUARE TO ROUND TRANSITION
-  CAP (DUCT AND/OR PIPE)
-  INDICATES DUCT, PIPING, EQUIPMENT TO BE REMOVED.
-  EXHAUST AIR
-  RETURN AIR
-  SUPPLY AIR
-  VOLUME DAMPER
-  DIRECTION OF AIR FLOW (IN)
-  DIRECTION OF AIR FLOW (OUT)
-  THERMOSTAT (T'STAT) OR TEMP. SENSOR
-  DIFFUSER, REGISTER OR GRILLE TAG
-  CFM AIR FLOW QUANTITY
-  TYP. 3
-  DETAIL NO.
-  SHEET NO. WHERE DETAIL IS LOCATED
-  EQUIPMENT TAG
-  EQUIPMENT NO.

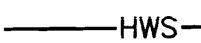
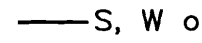
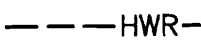
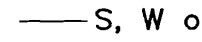

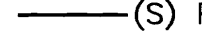
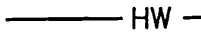
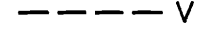

ABBREVIATIONS

ACC	AIR COOLED CONDENSER	CV	CONTROL VALVE	MIN	MINIMUM
ACU	AIR CONDITIONING UNIT	CW	COLD WATER	MTD	MOUNTED
AD	ACCESS DOOR	DIC	DOWN IN CHASE	NTS	NOT TO SCALE
AFF	ABOVE FINISHED FLOOR	DIW	DOWN IN WALL	(R)	REMOVE
AHU	AIR HANDLING UNIT	DN	DOWN	RA	RETURN AIR
AV	AIR VENT	EA	EXHAUST AIR	RHC	REHEAT COIL
CFM	CUBIC FEET PER MINUTE	(E)	EXISTING	SA	SUPPLY AIR
CLG	CEILING	EXIST.	EXISTING	TYP	TYPICAL
CO	CLEANOUT	HW	HOT WATER	W/	WITH
CTE	CONNECT TO EXISTING	MAX	MAXIMUM	WH	WALL HYDRANT
CUH	CABINET UNIT HEATER	MFR	MANUFACTURER		

PIPING SYMBOLS

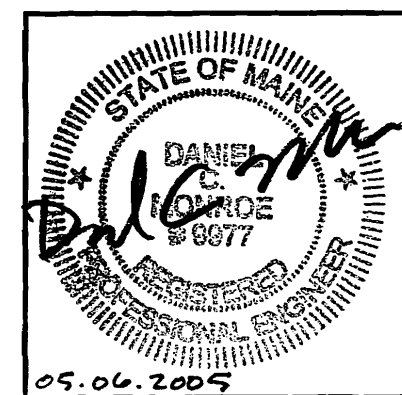
-  PIPE ELBOW TURNED DOWN
-  PIPE ELBOW TURNED UP
-  PIPING TEE-DOWN
-  PIPING TEE-UP
-  PIPE RISER
-  CLEAN OUT
-  GENERIC VALVE, SEE SPECIFICATIONS FOR TYPE
-  GATE VALVE
-  BALL VALVE
-  CHECK VALVE
-  WH WALL HYDRANT
-  DIRECTION OF FLOW
-  FIRE DEPT CONNECTION
-  PUMP

PIPING SYSTEMS

-  HWS ——— HOT WATER SUPPLY
-  S, W or KW ——— SANITARY, WASTE & KITCHEN WASTE
-  HWR - - - - - HOT WATER RETURN
-  S, W or KW ——— SANITARY, WASTE & KITCHEN WASTE (E)
-  CW - - - - - DOMESTIC COLD WATER
-  (S) PD ——— SANITARY, PUMPED DISCHARGE
-  HW ——— DOMESTIC HOT WATER
-  V - - - - - SANITARY VENT
-  V - - - - - SANITARY VENT (E)

GENERAL NOTE

1. ALL GENERAL NOTES, SYMBOL LISTS, AND DETAILS ARE TO BE CONSIDERED AS APPLICABLE TO ALL HVAC DRAWINGS FOR THIS PROJECT. SYMBOLS AND ABBREVIATIONS SHOWN ON THIS SHEET ARE FOR REFERENCE ONLY AND DO NOT INDICATE THEIR INCORPORATION INTO THE DESIGN.



ISSUED FOR CONSTRUCTION 5-6-05	DATE	5-6-05	DATE	5-6-05
CURRENT STATUS:	ISSUED FOR CONSTRUCTION	DESCRIPTION	REV	DATE
SCALE:	NTS	CAH	0	0
PROJECT MANAGER:	CDP	DCM	144 STATE STREET	PORTLAND, ME
SHEET No.	M-001	03089-04	144 STATE STREET	PORTLAND, ME
PROJECT No.	M-001	03089-04	144 STATE STREET	PORTLAND, ME
DATE:	5-6-05	03089-04	144 STATE STREET	PORTLAND, ME



ARCHITECTURE ENGINEERING PLANNING
SMRT
144 Fore Street / P.O. Box 618 PORTLAND, MAINE 04104
Tel. (207) 772-3846 / Fax. (207) 772-1070

PROJECT: MERCY HOSPITAL
EMS ADDITION
144 STATE STREET PORTLAND, ME

SHEET TITLE:
LEGEND & ABBREVIATIONS

JC/DRAWN BY: CAH
A/E OF RECORD: DCM
SMRT CAD FILE: 03089-04
PROJECT No.: 03089-04
DATE: 5-6-05

GENERAL NOTES:

1. REFER TO EMERGENCY DEPARTMENT RENOVATION PROJECT DIVISION 13 AND DIVISION 15 SPECIFICATIONS AND DETAILS FOR MATERIALS, METHODS, AND PRODUCTS WHICH APPLY TO THIS PROJECT.
2. COORDINATE WITH EXISTING CONDITIONS AND WORK INSTALLED UNDER THE EMERGENCY DEPARTMENT RENOVATION PROJECT.
3. HVAC CONTROLS:

RH-ED-12: MATCH ED RENOVATION PROJECT SEQUENCE OF OPERATION.

CUH-1: PROVIDE UNIT MOUNTED THERMOSTAT AND CONTROLS. PROVIDE AQUASTAT & CYCLE FAN AS REQUIRED TO MAINTAIN SETPOINT.

4. TESTING, ADJUSTING, AND BALANCING (T.A.B.):

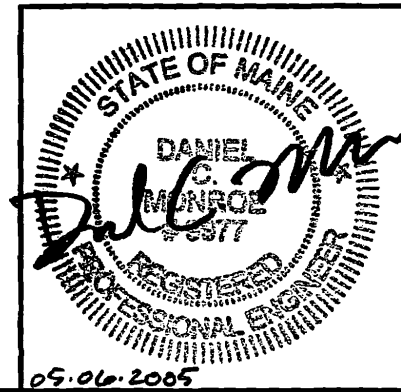
PROVIDE T-A-B FOR NEW EQUIPMENT AIR AND WATER FLOWS.

BALANCE EMERGENCY DEPARTMENT AIR HANDLING UNIT RTU-ED TO 9000 CFM.

5. FIRE PROTECTION:

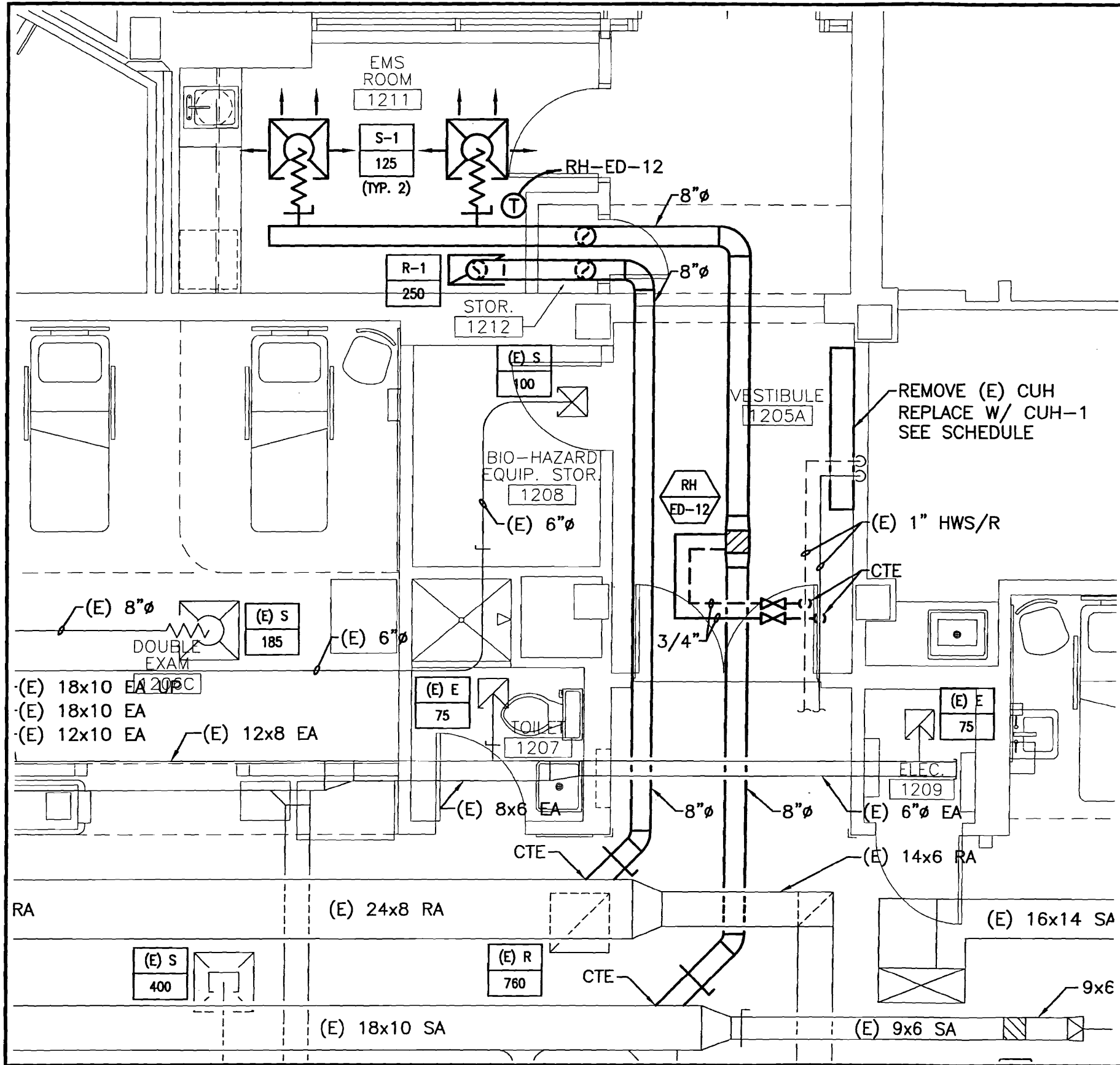
REMOVE AND RELOCATE EXISTING FIRE DEPARTMENT CONNECTIONS (FDC), AND SIGN TO LOCATIONS AS INDICATED ON THE DRAWINGS. CONNECT TO EXISTING PIPING. MOUNTING HEIGHT, SPACING AND CLEARANCES TO NEW FDC LOCATIONS SHALL BE PER, STATE & LOCAL AUTHORITY HAVING JURISDICTION AND PER NFPA-13. COORDINATE WORK WITH EXISTING CONDITIONS AND CHASE. VERIFY LOCATION OF CHECK VALVES, REWORK AS REQUIRED. INSPECT THE EXISTING FDC EQUIPMENT CONDITION, NOTIFY ARCHITECT IF NEW FDC IS REQUIRED.

EXTEND EXISTING SPRINKLER SYSTEM TO PROVIDE COVERAGE FOR THE EMS ADDITION. REFER TO EMERGENCY DEPARTMENT RENOVATION PROJECT DIVISION 13 SPECIFICATIONS FOR MATERIALS, METHODS, AND REQUIREMENTS.



05.06.2005

CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		DATE 5-6-05	
SCALE: NTS	JC/DRAWN BY: CAH	SHEET TITLE: GENERAL NOTES		ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street/P.O.Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070	
PROJECT MANAGER: CDP	A/E OF RECORD: DCM	SMRT CAD FILE: 03089-04		PROJECT No.: 03089-04	
SHEET No. M-002	DATE: 5-6-05	SMRT 144 Fore Street/P.O.Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070		SMRT RTI	



NOTE:

1. SEE SHEET M-001 FOR LEGEND AND ABBREVIATIONS.



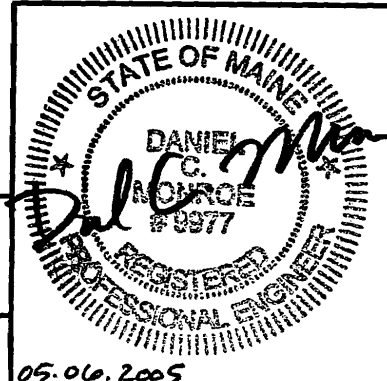
ARCHITECTURE ENGINEERING PLANNING
 SMART
 144 Fore Street/P.O. Box 618, PORTLAND, MAINE 04104
 tel. (207) 772-3846 / fax. (207) 772-1070

REV	DESCRIPTION	DATE
0	ISSUED FOR CONSTRUCTION	5-6-05

PROJECT: **MERCY HOSPITAL
 EMS ADDITION**
 144 STATE STREET PORTLAND, ME

SHEET TITLE:
**PARTIAL FIRST FLOOR
 HVAC PLAN**

SCALE: 1/4" = 1'-0"	JC/DRAWN BY: CAH
PROJECT MANAGER: CDP	A/E OF RECORD: DCM
SHEET No. M-101	SMART CAD FILE: 03089-04
	PROJECT No: 03089-04
	DATE: 5-6-05



05.06.2005

1 PARTIAL FIRST FLOOR PLAN

NTS

CURRENT ISSUED STATUS:
**ISSUED FOR CONSTRUCTION
 5-6-05**

UNIT HEATER SCHEDULE

TAG	LOCATION	TYPE	CFM	HP	MBH	GPM @180 EWT	ΔP	EAT/LAT	WATER ΔT	VOLT/φ	AMPS	TYP. UNIT MANUF. & MODEL NO.	NOTES:
CUH-1	(E) VESTIBULE 1205A	EXPOSED FLOOR	1060	(1) 1/10 (1) 1/15	53	5.3	2.0	60/106	20	120/1	2.2	VULCAN F-1000 SIZE 10	①

NOTES: ① FACTORY MOUNTED RETURN AIR TEMPERATURE CONTROL.
 ② FIELD INSTALLED AQUASTAT CONTROL, MANUFACTURERS STANDARD BAKED ENAMEL FINISH, COLOR SELECTED BY ARCHITECT.

REGISTER, DIFFUSER & GRILLE SCHEDULE

TAG	CFM	NECK SIZE	TYPE	ΔP	MAX NC	BORDER MOUNTING	PRICE INDUSTRIES MODEL NO.	NOTES
S-1	125	8x8 TO 8φ	MODULAR CORE DIFFUSER	0.10	25	24x24 LAY-IN PANEL	SMCD-SR	①②
R-1	UP TO 640	12x22	RETURN GRILLE	0.06	25	12x24 LAY-IN PANEL	535-TB	

GENERAL NOTE: BRANCH DUCT TO DIFFUSER TO MATCH DIFFUSER NECK SIZE. ALL DIFFUSERS, REGISTERS, AND GRILLES TO HAVE STANDARD WHITE FINISH UNLESS NOTED OTHERWISE.

NOTE: ① SQUARE TO ROUND NECK ADAPTOR.
 ② ADJUSTABLE PATTERN, REFER TO PLANS.

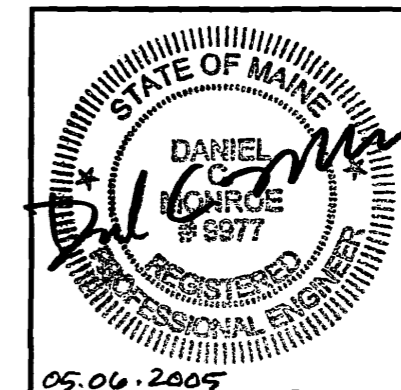
REHEAT COIL SCHEDULE

TAG	AIR DATA					WATER DATA				SIZE LxH (IN.)	ROWS	FACE VEL (FPM)
	CFM	EAT	LAT	MAX APD (IN WC)	MIN MBH	GPM	EWT	LWT	MAX WPD (FT. HD)			
RH-ED-12	250	48	96	0.13	13.1	1.5	180	160	0.5	9x9	2	445

NOTES: BASED ON YORK INTERNATIONAL 5/8" BOOSTER COILS W/ SLIP & DRIVE CONNECTIONS.

NOTE:

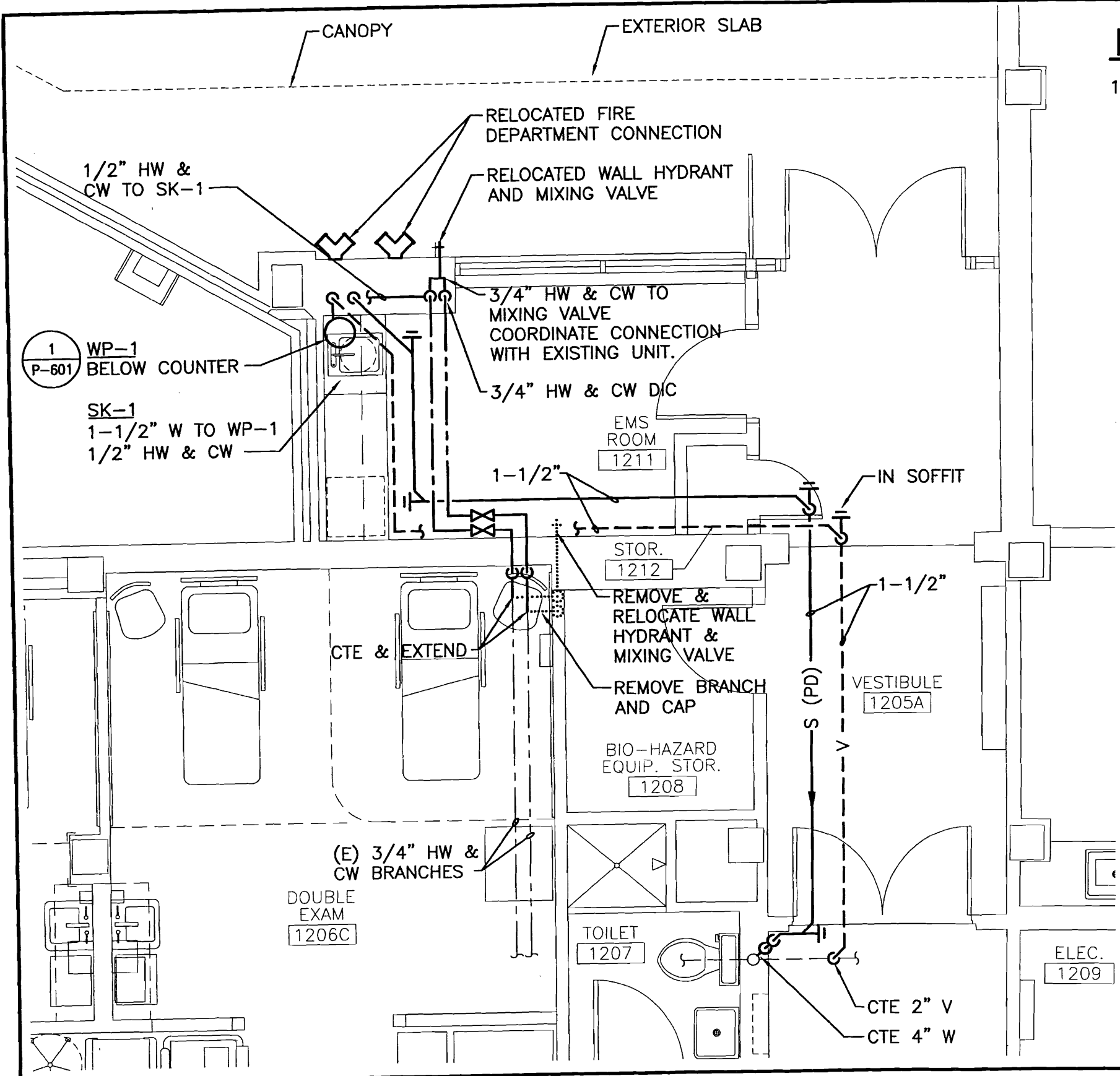
1. SEE SHEET M-001 FOR LEGEND AND ABBREVIATIONS.



ISSUED FOR CONSTRUCTION	5-6-05	DATE					
REV	DESCRIPTION						
0							
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: SCHEDULES					
CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		JC/DRAWN BY: CAH	CAH				
SCALE: NTS	PROJECT MANAGER: CDP	A/E OF RECORD: DCM	DCM				
SHEET No. M-601	SMRT CAD FILE: 03089-04	PROJECT No: 03089-04					
							5-6-05
© COPYRIGHT 2005 SMRT INC.							



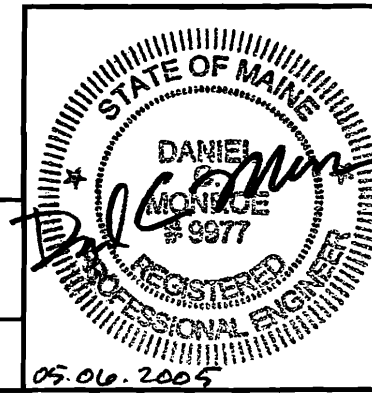
ARCHITECTURE ENGINEERING PLANNING
 SMRT
 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104
 tel. (207) 772-3846 / fax. (207) 772-1070



NOTE:

1. SEE SHEET M-001 FOR LEGEND AND ABBREVIATIONS.

CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05		SCALE: 1/4" = 1'-0"	JC/DRAWN BY: CAH
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		PROJECT MANAGER: CDP	A/E OF RECORD: DCM
SHEET TITLE: PARTIAL FIRST FLOOR PLUMBING PLAN		SHEET No. P-101	SMRT CAD FILE: 03089-04
PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		DATE: 05.06.2005	PROJECT No.: 03089-04
SHEET TITLE: PARTIAL FIRST FLOOR PLUMBING PLAN		DATE: 5-6-05	DATE: 5-6-05
ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104 tel. (207) 772-3846 / fax. (207) 772-1070			



1 PARTIAL FIRST FLOOR PLAN

1/4" = 1'-0"



REV	DESCRIPTION	DATE
0	ISSUED FOR CONSTRUCTION	5-6-05

PLUMBING FIXTURE SCHEDULE

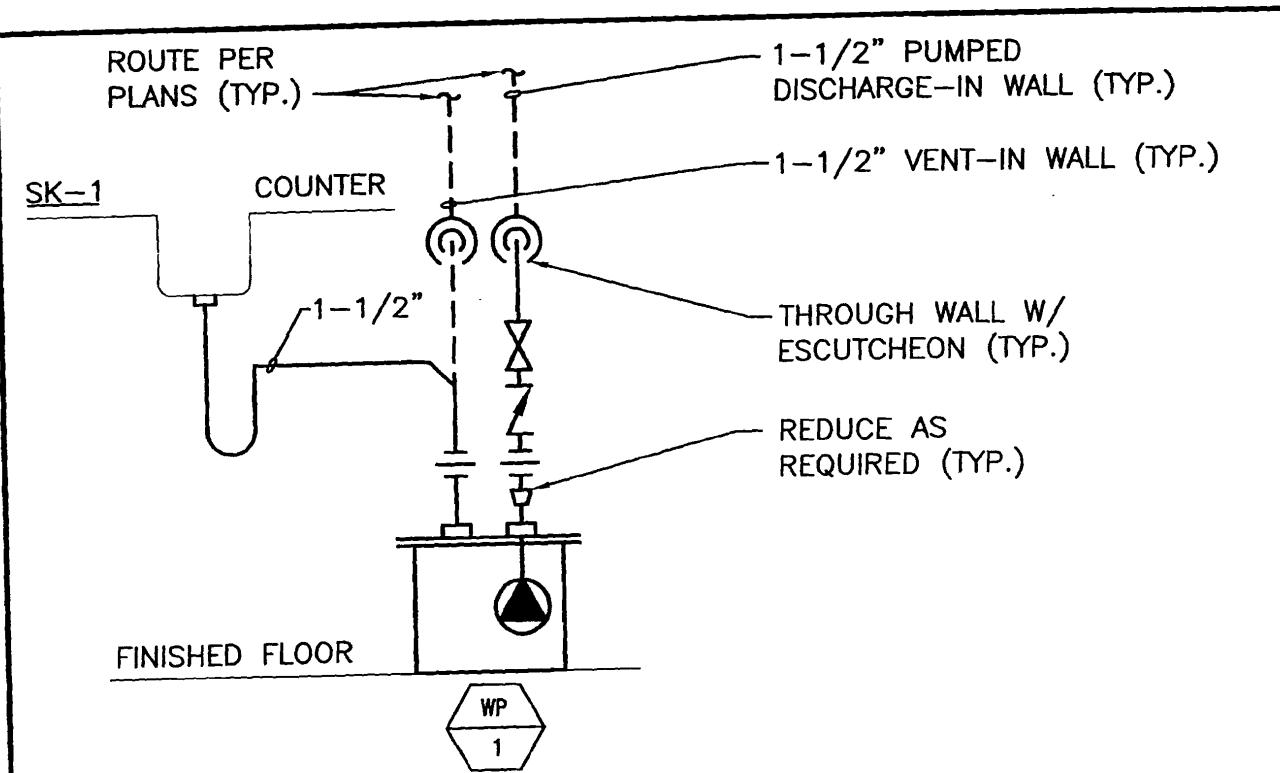
TAG	DESCRIPTION	FIXTURE	FAUCET/DRAIN	TRIM	SUPPORT
SK-1	KITCHENETTE SINK - ADA	JUST #SL-ADA-2217-A-GR, 18 GAUGE 304SS SELF RIMMING, 22"x17" - FAUCET ON 4" CENTERS.	CHICAGO #201-AGN8AE3-317 GOOSENECK FAUCET, WRIST BLADE HANDLES, #J-ADA-35 SS CUP STRAINER, 1-1/2" SS OFFSET TAIL	MCGUIRE ANGLE STOPS, P-TRAP, ESCUTCHEONS AND RISERS-CHROME PLATED	INTEGRAL

NOTES:

PUMP SCHEDULE

TAG	LOCATION	SERVICE	GPM	HD (FT.)	ELECTRICAL DATA				TYPICAL UNIT MFG & MODEL NO.	NOTES:
					HP	RPM	VOLTS	PH		
WP-1	EMS ROOM	SINK WASTE	12	15	1/3	1750	120	1	LITTLE GIANT WRSC-6 ITEM #506065	①

NOTES: ① PACKAGED PUMP STATION, 5 GAL. BASIN, PLUG IN STYLE.



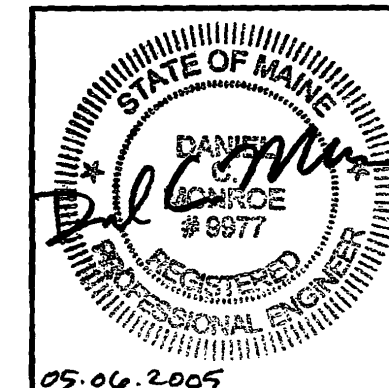
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SINK WASTE PUMP DETAIL

NTS

NOTE:

1. SEE SHEET M-001 FOR LEGEND AND ABBREVIATIONS.



CURRENT ISSUED STATUS:

ISSUED FOR CONSTRUCTION
5-6-05

SCALE: NTS
PROJECT MANAGER: CDP
SHEET No. P-601
JC/DRAWN BY: CAH
A/E OF RECORD: DCM
SMRT CAD FILE: 03089-04
PROJECT No: 03089-04
DATE: 5-6-05

PROJECT:
MERCY HOSPITAL
EMS ADDITION
144 STATE STREET PORTLAND, ME

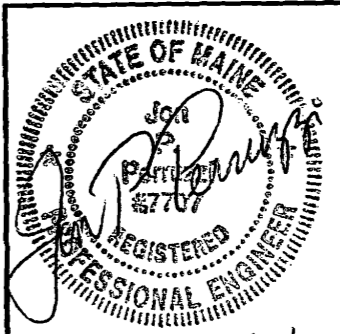
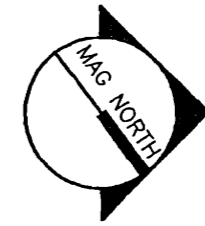
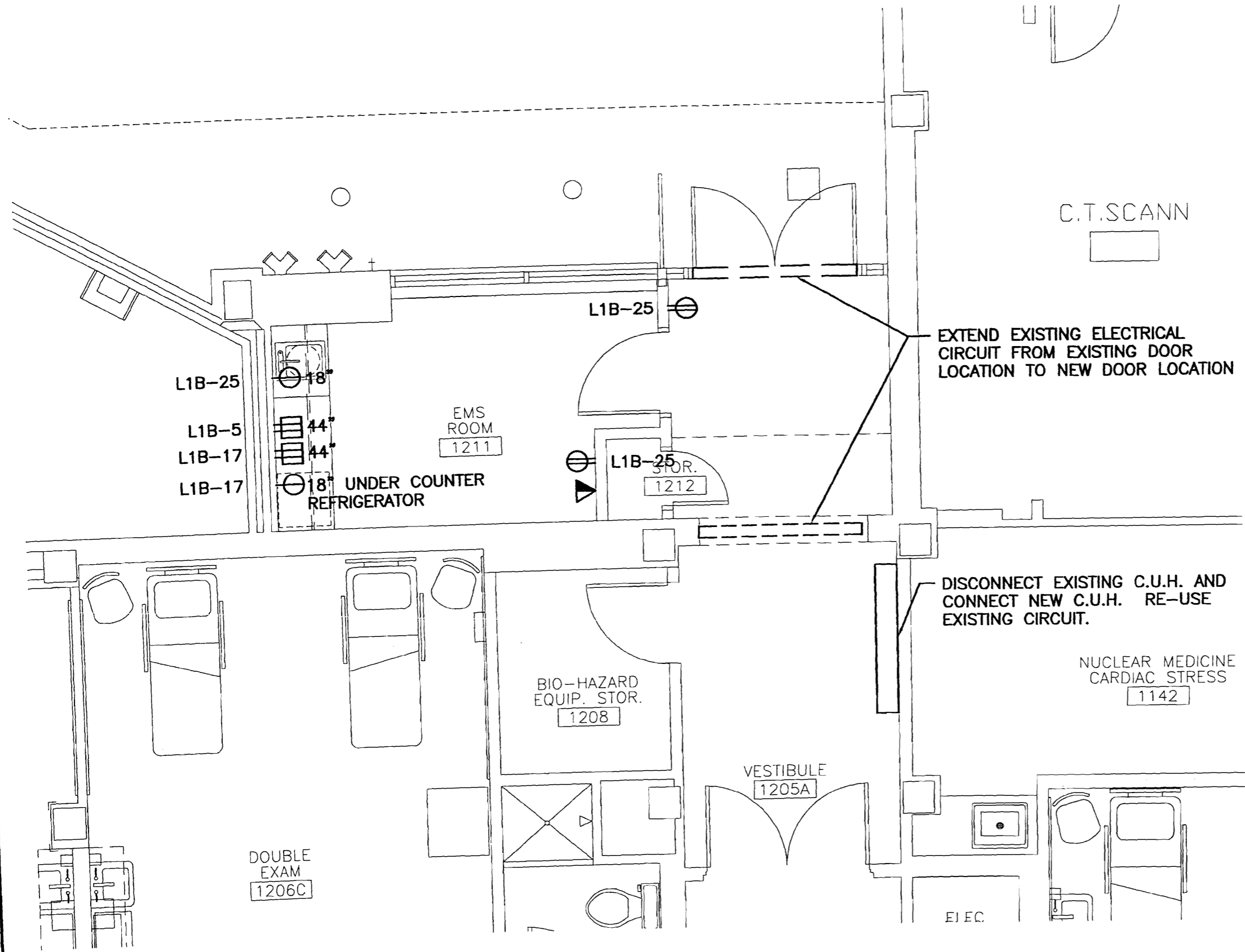
SHEET TITLE:
PLUMBING
SCHEDULES & DETAILS

REV 0 ISSUED FOR CONSTRUCTION 5-6-05
DESCRIPTION DATE

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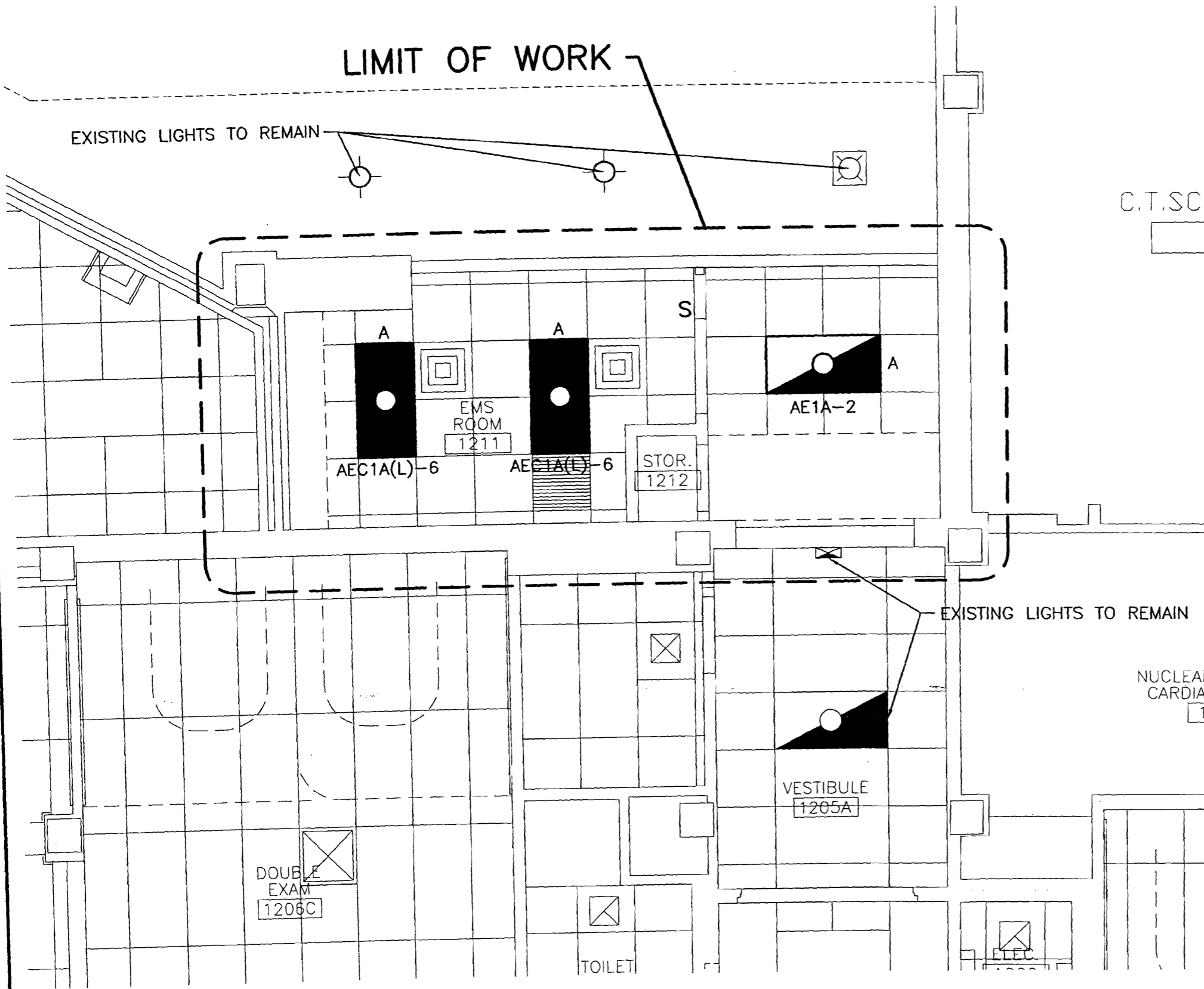
**SM
RT**



Rev. 0 5/6/05

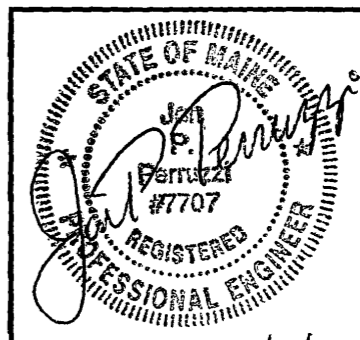
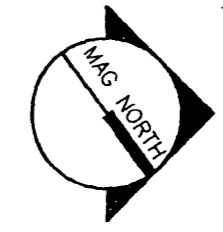
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PROJECT MANAGER: GDP	A/E OF RECORD: JPP	SMRT CAD FILE: E-001-03089-04	PROJECT No.: 03089-04
SHEET No.: EP101	DATE: 5-6-05	PROJECT TITLE: PARTIAL FIRST FLOOR POWER & SYSTEMS PLAN	
PROJECT: MERCY HOSPITAL EMS ADDITION		SHEET TITLE: PARTIAL FIRST FLOOR POWER & SYSTEMS PLAN	
144 STATE STREET PORTLAND, ME		ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street/P.O. Box 618 PORTLAND, MAINE 04104 Tel. (207) 772-3846 / Fax. (207) 772-1070	
REV	DESCRIPTION	ISSUED FOR CONSTRUCTION	DATE
0		5-6-05	





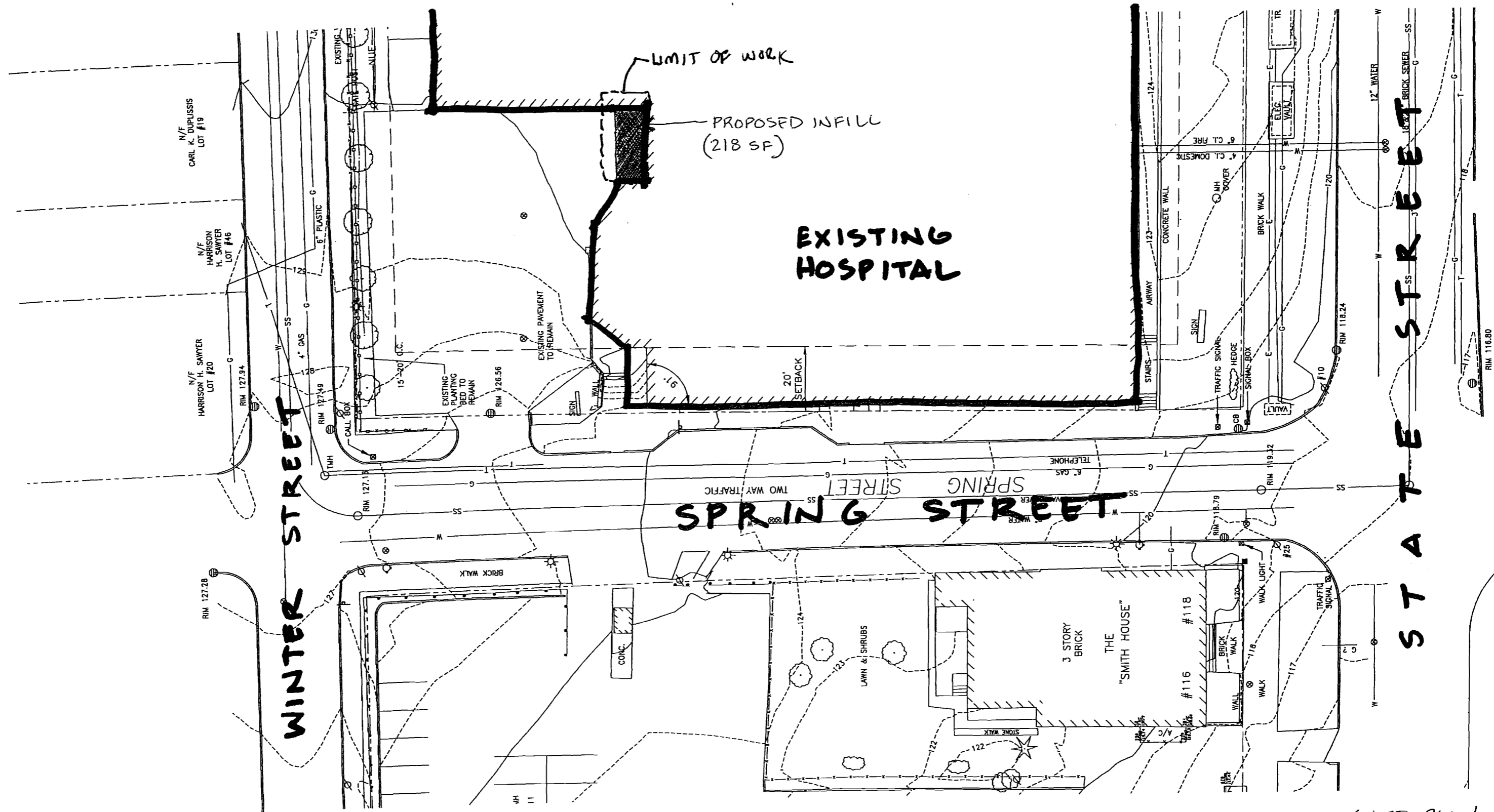
NOTES

1. TYPE "A" LIGHT FIXTURE TO BE A METALUX 2x4 ACRYLIC, CATALOG # 2GR8-232A-UNV-EB81



Rev. 0 5/6/05

PROJECT: MERCY HOSPITAL EMS ADDITION 144 STATE STREET PORTLAND, ME		SHEET TITLE: PARTIAL FIRST FLOOR LIGHTING PLAN	
CURRENT ISSUED STATUS: ISSUED FOR CONSTRUCTION 5-6-05	SCALE: 1/4" = 1'-0" PROJECT MANAGER: CDP SHEET No. EL101	JC/DRAWN BY: CEB A/E OF RECORD: JPP SMRT CAD FILE: 03089-04 PROJECT No.: 03089-04 DATE: 5-6-05	REV 0 ISSUED FOR CONSTRUCTION 5-6-05 DATE
SM RT ARCHITECTURE ENGINEERING PLANNING SMRT 144 Fore Street / P. O. Box 618 PORTLAND, MAINE 04104 Tel. (207) 772-3846 / fax. (207) 772-1070			



SITE PLAN
 1"=30'-0"
 4.15.05



CITY OF PORTLAND, MAINE
Department of Building Inspections

20

Received from _____

Location of Work _____

Cost of Construction \$ _____

Permit Fee \$ _____

Building (I1) ____ Plumbing (I5) ____ Electrical (I2) ____ Site Plan (U2) ____

Other _____

CBL: _____

Check #: _____

Total Collected \$ _____

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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