

CITY OF PORTLAND, MAINE Department of Building Inspection

Certificate of Occupancy

LOCATION 2 BRAMHALL ST

CBL 053 D007001

Issued to Maine Medical Center/William Berry & Sons, Inc.

Date of Issue

12/09/2009

This is to certify that the building, premises, or part thereof, at the above location, built - altered

- changed as to use under Building Permit No. $_{08-0153}$, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Emergency Department

APPROVED OCCUPANCY

Phase 2 Use Group : I-2 Type : 1A IBC 2003

Limiting Conditions:

None

This certificate supersedes certificate issued 11-5-09Approved: 12-9-09 (Date) Inspector of Buildings Inspector Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar,

Form # P 04 DISPLAY THIS CA	RD ON PRINCIPAL FRON	TAGE OF WORK
Please Read	FY OF PORTLAN	D
Application And Notes, If Any, Attached		Permit Number: 080153
	NTF William Berry & Sons, Inc.	PERMIT ISSUED
has permission toED fit-out of Charles Str	eet ement, ung- enovatio	1 0009
AT _2 BRAMHALL ST		D007001 MAR 3 1 2008
provided that the person or perso		this permit shall comply with all
of the provisions of the Statutes of		f the City of Portland Regulating
the construction, maintenance an this department.	d use of buildings and suctures	, and of the application on file in
		·····
Apply to Public Works for street line	n fication of inspection musice in g n and ween permition procure	A certificate of occupancy must be
and grade if nature of work requires	b re this ding or there	procured by owner before this build-
such information.	Hered or convict bosed-in.	ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept		\bigcirc
Health Dept		
Appeal Board	- (ll	1 1 100 3 27/18
Other Department Name		Director - Building & Inspection Services
PE	NALTY FOR REMOVING THIS CAR	p ^r
		3

Plans across from Greg's offsice

City of Portland, Mai	ne - Buil	ding or Use	Permi	t Applicatio	n	Permit No:	Issue Date	:	CBL:	
389 Congress Street, 041		-				08-0153			053 D00	07001
Location of Construction:		Owner Name:			0	wner Address:			Phone:	
2 BRAMHALL ST		MAINE MED	ICAL C	CENTER	2	2 BRAMHALL	ST			
Business Name:		Contractor Name	:		Co	ontractor Address:			Phone	
		William Berry	& Son	s, Inc.	9	9 Conifer Hill D	rive Danver	'S	20322360	26
Lessee/Buyer's Name		Phone:				rmit Type:				Zone:
						Alterations - Cor	nmercial			L4
Past Use:		Proposed Use:			Pe	ermit Fee:	Cost of Wor		CEO District:	
Maine Medical Ctr Emerge	ency	Maine Medica				\$83,535.00	\$8,343,51		2	
Department		Department - I Street Baseme			F	IRE DEPT:	Approved		CTION:	_ 1.41
		renovations	ш, сліз			, [Denied	Use Gr	oup: L	Type:
					l	N/Conditio	ns		\sim (\vee	1 L
Proposed Project Description:		L			-	' 3	13 jus	6	10 V	
ED fit-out of Charles Stree	t Basement	Existing ED re	enovatio	ons	Si	W/Conditions 3 gnature MBP	$u \in \mathbb{C}$	Signatu	110 2/2	n list
	e Dusemene		liovan	,115		DESTRIAN ACTI		<u> </u>		100-
						ction: 🗍 Approv			Conditions	Denied
										Domed
Permit Taken By:		- Wed From			Si	ignature:			Date:	
ldobson	02/25	plied For: /2008				Zoning	Approva	l		
I. This permit application			Spe	cial Zone or Revi	ews	Zonii	ng Appeal	T	Historic Prese	rvation
Applicant(s) from mee Federal Rules.			🗌 Sł	oreland			e		Not in Distric	t or Landmark
2. Building permits do no septic or electrical wor		olumbing,	🗆 w	etland		🗌 Miscella	ineous		Does Not Req	uire Review
3. Building permits are v		is not started	FI	ood Zone			onal Use		Requires Revi	iew
within six (6) months of False information may permit and stop all wo	invalidate		🗌 🗌 Su	bdivision			ation		Approved	
			🗌 🗌 Si	te Plan			ed		Approved w/C	Conditions
PERMIT IS			Maj [OL Date:	$ \begin{array}{c} \text{Minor} \\ \text{Minor} \\ \text{Min} \\ \text{Min} \\ \text{Minor} \\ Minor$	1 🗆 Na 51	Denied		D	Denied	\mathbf{P}
CITY OF FO)		/ /	1	C				

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

TO:	Inspections Department
FROM:	Philip DiPierro, Development Review Coordinator
DATE:	October 29, 2009
RE:	C. of O. for #22 Bramhall Street, Maine Medical Center Emergency Department Expansion Project (Id#2004-0003) (CBL 053 G 001001)

After visiting the site, I have the following comments:

Site work incomplete:

- 1. Minor landscaping,
- 2. Miscellaneous signs,
- 3. Miscellaneous minor site work,

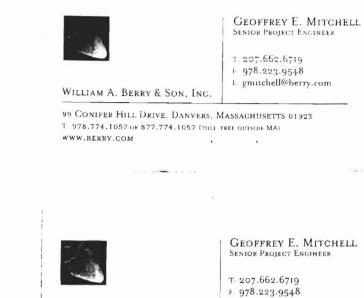
I anticipate this work will be completed by November 20, 2009.

At this time, I recommend issuing a temporary Certificate of Occupancy.

Please Note, the catch basin at the corner of Congress & Gilman Streets will be relocated and sidewalk ramps will be constructed at the end of the project when the street moratorium has expired.

Cc: Barbara Barhydt, Development Review Services Manager Tammy Munson, Director of Inspection Services File: Urban Insight

O:\PLAN\DRC\Projects\Bramhall St. 22 Maine Medical Center\Temporary CO 10-30-09.doc



. .

.

E. gmitchell@berry.com

WILLIAM A. BERRY & SON, INC.

99 CONIFER HILL DRIVE, DANVERS, MASSACHUSETTS 01923 T: 978.774.1057 OR 877.774.1057 (TOLL-FREE OUTSIDE MA) WWW.BERRY.COM

City of Portland, Maine - Buil	0		Permit No: 08-0153	Date Applied For: 02/25/2008	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8	/10		053 D007001	
Location of Construction:	Owner Name: MAINE MEDICAL C	ENTED	Owner Address:	۲T	Phone:	
2 BRAMHALL ST Business Name:	Contractor Name:		22 BRAMHALL S	<u> </u>	Phone	
Dusiness Maine.	William Berry & Sons	Inc	99 Conifer Hill Dr	ive Danvers	(203) 223-6026	
Lessee/Buyer's Name	Phone:		Permit Type:		(203) 223 0020	
			Alterations - Com	mercial		
Proposed Use:			posed Project Description:			
Maine Medical Ctr Emergency Depar Street Basement, Existing ED renovat		arles ED) fit-out of Charles Stre	eet Basement, Existi	ng ED renovations	
Dept: Zoning Status: A Note:	pproved with Condition	is Review	ver: Marge Schmucka	al Approval I	Date: 02/25/2008 Ok to Issue: ✓	
1) All the prior conditions placed up	on the new work under	previous peri	nits are still in force.			
2) Separate permits shall be required	for any new signage.					
 This permit is being approved on work. 	the basis of plans submi	tted. Any de	viations shall require a	ı separate approval l	before starting that	
Dept: Building Status: A Note:	pproved with Condition	s Reviev	ver: Mike Nugent	Approval I	Date: 03/31/2008 Ok to Issue:	
 4) Prior to the commencement of referenced in the construction doc 						
 3) Prior to the commencement of from the State Fire Marshall, and 				itted and approved.		
 2) Prior to the commencement of for any required elements such as new structural work or any spraye 17 must be submitted and approved 	the ED Canopy, any ed on fireproofing or ele	-	-	ecial inspections out	tlined in Chapter	
4) 1) Prior to the commencement of compliance with Section 407.4.1	-					
Dept: Fire Status: A	pproved with Condition	s Review	ver: Capt Greg Cass	Approval I	Date: 03/03/2008	
Note:					Ok to Issue: 🗹	
1) Fire alarm system requires a Mast	erbox connection per ci	ty ordinance.				
2) Occupancies with an occupant loa	d of 100 persons or mo	re require pai	nic harware on all door	s serving as a mean	s of egress.	
 The Fire alarm and Sprinkler syste Compliance letters are required. 	ems shall be reviewed by	y a licensed of	contractor[s] for code c	compliance.		
4) A single source supplier should be	e used for all through pe	netrations.				
5) The fire alarm system shall compl	y with NFPA 72					
6) All construction shall comply with NFPA 101						
		1411 A 15.				
8) Application requires State Fire M	arsnai approval.					

Location of Construction:	Owner Name:	Owner Address:	Phone:
2 BRAMHALL ST	MAINE MEDICAL CENTER	22 BRAMHALL ST	
Business Name:	Contractor Name:	Contractor Address:	Phone
	William Berry & Sons, Inc.	99 Conifer Hill Drive Danvers	(203) 223-6026
Lessee/Buyer's Name	Phone:	Permit Type:	
		Alterations - Commercial	



Sept. 4, 2008

Attn: Mr. Jon Rioux Code Enforcement City of Portland Portland Maine 04101

RE: Maine Medical Center C of O

Jon:

As discussed we respectfully request time to repair the egress stairs at the Garage leading to Congress St. from the Garage East stair tower. As you are aware the stairs have been torn out and replaced already. The remaining repairs to meet rise and run requirements will be completed by October 16th.

Sincerely,

n r

Henry T. Dunn, P.E.

--- -

SEF 2 ----

SIMPSON GUMPERTZ & HEGER



Engineering of Structures and Building Enclosures

28 January 2008

Mr. Hank Dunn Maine Medical Center 22 Bramhall Street Portland, ME 04102

Project 820684 – Central Utility Plant, Maine Medical Center, Portland, Maine

Dear Mr. Dunn:

As Structural Engineer of Record and Special Inspector for the above-mentioned project, we visited the site during construction to observe the work for conformance with structural portions of the Construction Documents, which we submitted for permit. Based on these site visits we conclude that, to the best of our knowledge and belief, the work is in compliance with the structural portions of the Construction Documents and the provisions of the governing building code (International Building Code, 2003 Edition).

We are sending this statement as a requirement for the temporary certificate of occupancy for the portions of the project listed above. Upon complete of all punch-list items for these portions of the project, we will submit our final affidavit as required for the certificate of occupancy.

Respectfully Submitted, Simpson Gumpertz & Heger Inc. Joseph J. Zona, P.E. COMPANYAN IN sh. Structural Engineer of Record Sia nature Registration Seal JAN 31 2008 O:\DATEFILE\2008\Zona\JJZ02-L.mem.doc SIMPSON GUMPERTZ & HEGER INC. Boston 41 Seyon Street, Building 1, Suite 500 Waltham, Massachusetts 02453

Los Angeles New York San Francisco Washington, DC

www.sgh.com

main. 781.907.9000 fax. 781.907.9009

SIMPSON GUMPERTZ & HEGER

Engineering of Structures and Building Enclosures

28 January 2008

Mr. Hank Dunn Maine Medical Center 22 Bramhall Street Portland, ME 04102

Project 820684 -Central Utility Plant, Maine Medical Center, Portland, Maine

Dear Mr. Dunn:

As Structural Engineer of Record and Special Inspector for the above-mentioned project, we visited the site during construction to observe the work for conformance with structural portions of the Construction Documents, which we submitted for permit. Based on these site visits we conclude that, to the best of our knowledge and belief, the work is in compliance with the structural portions of the Construction Documents and the provisions of the governing building code (International Building Code, 2003 Edition).

We are sending this statement as a requirement for the temporary certificate of occupancy for the portions of the project listed above. Upon complete of all punch-list items for these portions of the project, we will submit our final affidavit as required for the certificate of occupancy.

Respectfully Submitted. Simpson Gumpertz & Heger Inc. Joseph J. Zona, P.E. 01 21 "icting m Structural Engineer of Record t No. 5531 hature Registration Seal 1/30/08 This will be adequate for now upon completion of the numerous projects underway at mime a full SI report zona June with be submitted Recome Banka O:\DATEFILE\2008\Zona\JJZ02-L mem.doc SIMPSON GUMPERTZ & HEGER INC. Boston 41 Seyon Street, Building 1, Suite 500 Los Angeles Waltham, Massachusetts 02453 New York main: 781.907.9000 tox: 781.907.9009 San Francisco www.sgh.com Washington, DC

SIMPSON GUMPERTZ & HEGER

Engineering of Structures and Building Enclosures

28 January 2008

Mr. Hank Dunn Maine Medical Center 22 Bramhall Street Portland, ME 04102

Project 820684 – Central Utility Plant, Maine Medical Center, Portland, Maine

Dear Mr. Dunn:

As Structural Engineer of Record and Special Inspector for the above-mentioned project, we visited the site during construction to observe the work for conformance with structural portions of the Construction Documents, which we submitted for permit. Based on these site visits we conclude that, to the best of our knowledge and belief, the work is in compliance with the structural portions of the Construction Documents and the provisions of the governing building code (International Building Code, 2003 Edition).

We are sending this statement as a requirement for the temporary certificate of occupancy for the portions of the project listed above. Upon complete of all punch-list items for these portions of the project, we will submit our final affidavit as required for the certificate of occupancy.

Respectfully Submitted, Simpson Gumpertz & Heger Inc.

Joseph J. Zona, P.E. Structural Engineer of Record

Signatur



Registration Seal

O:\DATEFILE\2008\Zona\JJZ02-L mem.doc

SIMPSON GUMPERTZ & HEGER INC. 41 Seyon Street, Building 1, Suite 500 Waltham, Massachusetts 02453 main: 781 907.9000 fax: 781 907 9009

www.sgh.com

Boston Los Angeles New York San Francisco Washington, DC

STATEMENT OF SPECIAL INSPECTIONS

PROJECT: Maine Medi	cal Center - Emergency Department Expansion and Renovations				
LOCATION: Portland, M	N: Portland, Maine				
PERMIT APPLICANT:	Henry Dunn (Project Manager), Maine Medical Center				
APPLICANT'S ADDRESS:	22 Bramhall Street				
	Portland, Maine 04102				
PROJECT ARCHITECT:	TRO-Jung Brannen (TRO-JB)				
PROJECT STRUCTURAL ENGINEER: Simpson Gumpertz & Heger Inc. (SGH)					
REGISTERED DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE: Joseph J. Zona (SGH)					

This statement of special inspections is submitted as a condition for permit issuance in accordance with Section 1704 of the 2003 International Building Code. It includes a *Schedule of Special Inspection Services* applicable to the above referenced project as well as the identity of the individuals, agencies, or firms intended to be retained for conducting these inspections.

The Special Inspector(s) shall keep records of all inspections and shall furnish interim inspection reports to the building official and to the registered design professional in responsible charge at a frequency agreed upon by the permit applicant and building official prior to the start of work. Discrepancies shall be brought to the immediate attention of the Contractor for correction. If the discrepancies are not corrected, the discrepancies shall be brought to the attention of the building official and the registered design professional in responsible charge prior to completion of the attention of the building official and the registered design professional in responsible charge prior to completion of that phase of work. A *Final Report of Special Inspections* documenting required special inspections and correction of any discrepancies noted in the inspections shall be submitted at the conclusion of the project.

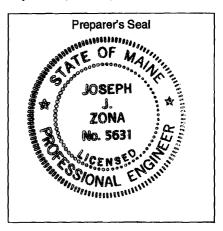
Frequency of interim report submittals to Registered Design Professional in Responsible Charge:

Monthly Bi-Monthly Upon Completion Per attached schedule

The Special Inspection program does not relieve the Contractor of the responsibility to comply with the Contract Documents. Jobsite safety and means and methods of construction are solely the responsibility of the Contractor.

Prepared By:

Joseph J. Zona,	P.E.
Type or print name	



To be filled out by Building Department and returned to applicant:

Building Official's Acce	eptance:			
Signature	Date	9	Permit No.	
Frequency of interim re	eport submittals to buil	ding official:		
Monthly	Bi-Monthly	Upon Completion	Per attached schedule	

Program of Structural Tests and Inspections

For compliance with the 2003 International Building Code

Project:	Maine Medical Center – Emergency Department Fit-Out
Location:	Maine Medical Center 22 Bramhall Street Portland, Maine, 04102
Owner:	Henry Dunn (Project Manager) Maine Medical Center 22 Bramhall Street Portland, Maine, 0102
Architect of Record:	TRO-Jung Brannen 22 Boston Wharf Road Boston, Massachusetts 02210 Phone: 617-502-3400
Structural Engineer of Record (SER):	Simpson Gumpertz & Heger Inc. 41 Seyon St., Building 1, Suite 500 Waltham, MA 02453 Phone: 781-907-9000

This program of structural tests and inspections is submitted as a condition for issuance of the building permit in accordance with the 2003 International Building Code.

The following firms, agencies, or individuals (hereinafter referred to collectively as *agents*) will perform the tests and inspections under the direction of the SER:

Abbreviation	Agent
SER	Structural Engineer of Record listed above
GE	Project Geotechnical Engineer - S.W. Cole Engineering, Inc.
TL1	Testing Lab #1 – TBD
TL2	N.A.

The abbreviations will be used on the attached pages to identify which agent is performing the particular tests or inspections.

Maine Medical Center Emergency Department Expansion and Renovations - 4696 **PROGRAM SPECIAL TESTS & INSPECTIONS**

04160-1

The following categories of structural tests and inspections, if checked, are included in the program for structural tests and inspections for this project. The specific tests and inspections required for each checked category are listed on the page noted opposite the category.

Category	Page	Category	Page
In-situ bearing strata for footings	8	Precast concrete construction	7
Controlled structural fill	8	Steel construction	3
(prepared fill)		□ Masonry construction	7
Pile foundations	8	Wood construction	7
Pier foundations	8	Curtain walls (wall panels	8
Cast-in-place concrete	5	and veneers)	
construction		Light gage metal framing	9
		□ Special cases	NA

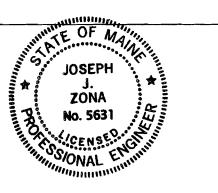
The following items of construction, if checked, are specified in the contract documents on a performance basis. Their structural design will be reviewed by the SER and their construction is included in the program for tests and inspections on the attached sheets:

Curtain walls	Metal buildings
Precast concrete components	Light gage metal framing
 Post-tensioning steel 	
Structural steel connections	

The following items are excluded from this program of structural tests and inspections, since they are designed by other structural engineers not under the aegis of the SER, and the SER was not retained to provide performance specifications for their design. These other structural engineers may be assigned by the owner, architect, or construction contractor, as applicable, to be special SER's for their respective designs and to provide a program of structural tests and inspections for their respective designs. Curtain walls, Light gage metal framing

Prepared by the Structural Engineer of Record: Name: Joseph J. Zong Signature Joseph J. Zong Firm: Simpson Gumpertz & Heger Inc. Date: 4/7/ZOOB Reg

Maine Medical Center Emergency Department Expansion and Renovations - 4696



Registration Seal

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-2

Ite	en <u>– – – – – – – – – – – – – – – – – – –</u>	Agent	Criteria/Scope
1.	Fabricator Certification/ Quality Control Procedures (IBC 1704.2.1)	TL1	 Review plant quality control procedures. Inspect plant storage and handling procedures. Confirm that approved submittals are in the plant and are being used for fabrication. Review welders' certifications. File welder certifications and any other quality assurance documentation as required by building department.
2.	Fabricator Inspection (IBC 1704.2.1)	TL1	 Inspect fabrication and fabricated steel per items 3, 4, and 5 below at five separate plant visits scheduled at the following times: At beginning of fabrication At approx. 20% complete, At approx. 40% complete, At approx. 60% complete, At approx. 80% complete, and As directed by the SER.
3.	Material Certification	TL1	 Review mill reports, certificates, and identification markings of all structural steel, bolts, nuts, and washers for compliance with the ASTM Specifications required by the Contract Documents and by AISC LRFD Specification Section A3. Inspect certificates of weld filler material and shear stud connectors for compliance with the AWS Specifications required by the Contract Documents and by AISC LRFD Specification Section A3. Inspect surface finish of steel members for conformance with SSPC standards, approved shop drawings, and Contract Documents.
4.	Bolting	TLI	 Inspect shop and field bolting procedures per RCSC Specification and for compliance with the Contract Documents. Inspect 100% of bolts in slip critical connections. Inspect 25% of bolts in all other connections. Verify size and grade of fasteners for compliance with Contract Documents. Verify bolt strength by testing one nut and bolt from each keg prior to its release to the field. Sign-off each keg to be released to the field. Inspect daily wrench calibration procedures. Field test bolts at discretion of inspector or SER by testing selected bolts to failure with tension calibrator.

Steel Construction – IBC Section 1704.3

Maine Medical Center **Emergency Department** Expansion and Renovations - 4696 04160-3

PROGRAM SPECIAL TESTS & INSPECTIONS

5.	Welding	TL1	• Perform weld inspections and tests per Chapter 6 of AWS D1.1. Weld inspectors shall be certified per
			 AWS D1.1. Perform visual inspections of all welds for conformance with shop drawings with the applicable visual inspection requirements of AWS D1.1. Review with SER scope of visual inspection as work progresses. Frequency of testing by ultrasonic or magnetic particle testing methods of other welds as follows: 5% of partial penetration groove welds 100% of welds subject to tension (hangers, etc.) 100% of all other welds
			 additional inspection as determined by inspector and/or SER defects are revealed
6.	Shear Connectors	TL1	 Perform inspection of stud installation to verify location, number, installation of studs, and ferrule removal is in accordance with the Contract Documents and that the installation is in compliance with AWS D1.1 Chapter 7. Daily preproduction testing: per AWS D1.1 Section 7.7 except that five studs are to be tested and that the studs are to be capable of bending 45 degrees from vertical without weld failure. Visual inspection of production stud installation per AWS D1.1 Section 7.8. Continuous testing during installation (in addition to the testing required by studs that do not pass the visual inspection): A minimum of two hammer stud bend tests on each structural member at 1/3 points on the span. If a failure occurs, every stud on the structural member is to be tested. Retest all studs that are replaced.
7.	Structural Framing, Details and Assemblies	SER,TL1	• Inspect member sizes, milled surfaces, beam camber (at shop), and installation and connection details for compliance with approved shop drawings and with Contract Documents.
8.	Open Web Steel Joists	N/A	Not Applicable

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-4

9. Metal Decking	SER, TL1	 Review mill reports for all deck material delivered to the site. Verify gauge, width and type of deck for conformance with approved shop drawings and with Contract Documents Verify welder certifications. Inspect placement for proper installation of approved screws, puddle welds, other mechanical fasteners (if any), and accessories for compliance with SDI, AWS D1.3 and the Contract Documents. Inspect placement of deck reinforcement at openings and other discontinuities for compliance with approved shop drawings and with Contract Documents. Inspect repair of damaged galvanized finish for compliance with Contract Documents.
10. Expansion Anchors.	SER, TL1	 Inspect installation. Verify that existing reinforcing steel is not cut when drilling holes for anchors. Verify embedment and torque of anchors.

Cast-in-Place Concrete Construction - IBC Section 1704.4

Ite	m	Agent	Criteria/Scope
1.	Formwork Geometry	TL1	 Inspect formwork for conformance with ACI 301 Section 2 and ACI 318 Sections 6.1, 6.3, and 6.4. Inspect all formwork size, geometry, and finishes for conformance with Contract Documents.
2.	Reinforcement Installation	SER, TL1	 Inspect location, size, condition and placement of all reinforcement (including prestressing tendons if applicable), reinforcement supports, inserts, and accessories for conformance with approved shop drawings and with Contract Documents. Inspect placement of all reinforcement for compliance with ACI 318 Sections 7.3, 7.4, 7.5, 7.6, and 7.7 and ACI 301 Section 3.3.
3.	Reinforcing steel welding	TL1	 Verify weldability of reinforcing steel other than ASTM A706 per IBC 1704.3 Inspect reinforcing steel resisting flexural and axial forces in intermediate and special moment frames and boundary elements of special reinforced concrete shear walls and shear reinforcement.
4.	Bolts and Embedded Items in Concrete Exposed to Tension and shear	TL1	Inspect embedded items for conformance with Contract Documents

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-5

5 Mix Decien	S IZ D	Deview min deview for an formation with contrast
5. Mix Design	SER	• Review mix design for conformance with contract documents. Review ready mix plant tickets for conformance of mix with project specifications.
		• Review that plant procedures for establishing mix
j j		design strength comply with ACI 301 Sections 4.1 and 4.2 and with ACI 318 Sections 5.1, 5.2, 5.3, 5.4, and
)		4.2 and with ACI 518 Sections 5.1, 5.2, 5.3, 5.4, and 5.8.
6. Materials Certification	TL1 and	Review in plant all materials, manufacturer's
	SER	certifications, mill reports, etc. for conformance with
		contract documents.
7. Materials Certification Records	TL1	Maintain records of all material certificates, mill reports
		of all concrete mix constituent materials, and steel
		reinforcement.
8. Batching Plant	TL1	Review plant quality control procedures for material
		storage and handling comply with ACI 301 Sections 4.1.3, 7.1 and 7.2.
		 Inspect plant to ensure compliance of mix constituents
	I	with the requirements of ACI 318 Chapter 3 and ACI
		301 Sections 4.2 and 7.2.
		• Inspect that mixing and ready mix equipment and vehicles comply with ACI 318 Section 5.7 and 5.8 and
		with ASTM C 94.
		• Maintain records of all ready mix truck contents and
		dispatch times.
	TL1	• Collect and test concrete samples per ACI 318 Section
and Evaluation of Concrete Strength		5.6 (min, of four cylinders for each 150 cy of concrete or 5,000 sf of slab or wall area) but not less than four
Suchgur		cylinders for each day's pour. As a minimum, perform
		compression tests on two cylinders at 28 days.
		• Measure slump (ASTM C 143), temperature (ASTM C
		1064), weight, (ASTM C 138 for normal weight and C 567 for lightweight), and air content (ASTM C 173 for
		normal weight and C 231 for lightweight) for all
I I		concrete sampled for strength. For pumped concrete,
		measure at point of deposit.
10. Concrete Placement	SER, TL1	Maintain a record correlating concrete batching information with location of placement in the finished
		information with location of placement in the finished work.
		Inspect all concrete placements for compliance with
		ACI 318 Section 5.9 and 5.10; and ACI 301 Sections 5
		and 7.3.
		Inspect for conformance with all approved hot and cold weather concrete placement procedures
11. Curing and Protection	TLI	 weather concrete placement procedures. Inspect all placements for conformance with Contract
		Documents, ACI 318 Sections 5.11, 5.12, and 5.13, and
		with procedures approved by SER.
12. In-Situ Concrete Strength	TL1	• Verify in-situ concrete strength prior to stressing of
		prestressing tendons (where applicable) and prior to removal of shores and forms from beams and structural
		slabs in accordance with ACI 318 Section 6.2
Maine Medical Center		PROGRAM SPECIAL TESTS & INSPECTIONS
Emergency Department		
Expansion and Renovations - 4696		04160-6 12/14/0

13. Evaluation of Concrete Strength	TL1	• Test for conformance to specifications in accordance with ACI 318 Section 5.6 and IBC Section 1905.6
14. Post-Tensioning Operations	N/A	Not Applicable
15. Other	TL1	 Test column base plate non-shrink grout cubes restrained from all sides per ASTM C 109, and for shrinkage/expansion properties per ASTM C 1090. Test 3 cubes per day. Inspect installation of subgrade vapor retarder for compliance with manufacturer's approved installation procedures and with Contract Documents.

Precast Concrete Construction – IBC Section 1704.4 (not applicable)

Ite		Agent	04.5 (NOT APPLICATIE) Criteria/Scope		
1.	Material Certification	SER, TL1	• Review certificates of all masonry material, reinforcement, and accessories for compliance with ACI-530.1 Sections 2.1, 2.2, 2.3, 2.4, and 2.5 and with the Contract Documents.		
2.	Mixing of Mortar and Grout	TL1	• Periodically inspect all mortar grout mixes and mixing operations for compliance with ACI 530.1 Section 2.6 and with the Contract Documents.		
3.	Installation of Masonry	TLI	• Inspect installation of masonry units for compliance with ACI 530.1 Section 3.2 and 3.3, and with the Contract Documents.		
4.	Reinforcement Installation	TL1	Inspect installation of reinforcement for compliance with ACI 530 Chapter 8, ACI 530.1 Section 3.4, and with the Contract Documents.		
5.	Grouting Operations	TL1	 Verify that grout space is clean prior to grouting Inspect grouting operations for compliance with ACI 530.1 Section 3.5 and with the Contract Documents. 		
6.	Weather Protection	TL1	• Inspect that protection procedures comply with ACI 530.1 Section 1.8 and with the Contract Documents.		
7.	Evaluation of Masonry Strength	TL1	 Determine compressive strength of mesonry per ACI 530.1 Section 1.4 and 1.6. For exterior walls, test three prism samples for f'm (ASTM E 1314) prior to construction and one sample for every 5,000-sq. ft. thereafter for each type of unit used. 		

Maine Medical Center Emergency Department Expansion and Renovations - 4696 **PROGRAM SPECIAL TESTS & INSPECTIONS**

04160-7

(NIA)			
8. Anchors and Ties	TLI	• Inspect all anchorage to masonry (including masonry veneers) for compliance with ACI 530 Sections 4.2 and 5.14 and with Contract Documents.	
9. Expansion Anchors	TL1	• Inspect installation Verify that existing reinforcement is not cut when drilling holes for eachors. Verify embedment and torque of anchors.	

Wood Construction – IBC Section 1704.6 (not applicable)

Item Agent		Agent	Criteria/Scope
1.	Bearing strata for footings	GE	Inspect strata for conformance to the structural drawings, specifications, and/or the approved geotechnical report.
2.	Bearing surfaces of footings	GE	Inspect bearing surfaces for conformance to the requirements of the structural drawings, specifications, and/or the approved geotechnical report.

In-Situ Bearing Strata for Footings - IBC Section 1704.7.1

Controlled Structural Fill (Prepared Fill) - IBC Sections 1704.7.2 and 1704.7.3

Ite	m	Agent	Criteria/Scope
1.	Fill Material	GE	Test material for conformance to specifications or geotechnical report. Perform laboratory compaction tests in accordance with the specifications to determine optimum water content and maximum dry density.
2.	Installation of controlled structural fill (IBC 1704.7.2)	GE	Provide full-time inspection of the installation, in accordance with the specifications and IBC 1704.7.2.
3.	Density of fill (IBC 1704.7.3)	GE	Perform field density tests of the in-place fill for every other lift in accordance with the specifications and IBC 1704.7.3.

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-8

4. 0	Dther	GE	Verify the adequacy of dewatering systems (if required) by confirming that the area to be dewatered is dry.
1			

Pile Foundations - IBC Section 1704.8 (not applicable)

Pier Foundations – IBC Section 1704.9 (not applicable)

Cı	Curtain Walls (Wall Panels and Veneers) - IBC Section 1704.10				
Ite		Agent	Criteria/Scope		
1.	Light Sage Metal Framing for Panels	TLI	Perform structural tests and inspections as listed under category Light Gage Metal Framing.		
2.	Proprietary Light Weight Curtain Walls Systems	TLI	Review manufacturer's fabrication methods and quality control procedures. Review material certification, and inspect fabrication of structural framing, details, connections, and fasteners for conformance to approved submittals and the contract documents.		
3.	Masonry Veneers	TL1	Perform structural tests and inspections as listed under category Masonry Construction. Verify that relieving angles, ties to the backup structure, and other structural supports are installed in conformance with the contract documents and SER approved submittals.		
4.	Aluminum Welding	TL1	Review welding procedures and welding qualifications in accordance with AWS D1.2. Observe performance testing of welds required by AWS D1.2.		

Light Gage Metal Framing				
Item	Agent	Criteria/Scope		
1. Fabricator's Quality Sentrol Procedures		Not applicable		
2. Member Sizes	TL1	 Verify that member profiles, lengths, and surface finishes are in conformance with approved shop drawings. Review research/evaluation reports for evidence of compliance IBC 2003. 		

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-9

	(N)+	
3. Material Thickness	TLI	 Review mill certificates from sheet steel producer for conformance with AISI and construction documents requirements for uncoated steel thickness. Verify that material thicknesses conform to the gauges specified in the approved shop drawings.
4. Material Properties	TLI	 Review mill reports from sheet steel manufacturer for conformance with yield strength, tensile strength, total elongation, chemical requirements, ductility, and galvanized coating thickness. Review manufacturer's data and/or lab test results for conformance with construction documents, approved shop drawings, and approved submittals for the following: expansion anchors, powder actuated fasteners, mechanical fasteners, vertical deflection clips, miscellaneous clips and accessories
5. Mechanical Connections		 Inspect fastener installation procedures. Verify that type, number, and location of fasteners comply with construction documents and with approved shop drawings. Verify that member splices comply with approved shop drawings for type and location of connection. Verify that asteners are installed tight.
6. Welding	TL1	 Check welder certifications. Verify that weld location, size and details conform to approved shop drawings. Verify that welding procedures conform with AWS D1.3 and to construction documents. Visually inspect welds.
7. Framing Details	TL1	 Verify installation and clearances of deflection tracks. Verify that framing details, installation and tolerances conform to ASTM C 1007, construction documents, and approved shop drawings. Verify that repair and touch-up of galvanizing is done in conformance with construction documents using approved products.

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-10

References

- 1. ACI 301-96, Standard Specifications for Structural Concrete.
- 2. ACI 318-02, Building Code Requirements for Structural Concrete.
- 3. ACI 530.1 / ASCE 6 / TMS 602 02, Specifications for Masonry Structures.
- 4. AISC LRFD, Third Edition, Load and Resistance Factor Design Specification for Structural Steel Buildings.
- 5. ASTM A 6–95c, Specification for General Requirements for Rolled Steel Plates, Shapes, Sheet Piling, and Bars for Structural Use.
- 6. ASTM A 568–95, Specification for Steel Sheet, Carbon and High-Strength, Low-Alloy, Hot-Rolled and Cold Rolled, General Requirements For.
- 7. ASTM C 31-91, Practice for Making and Curing Concrete Test Specimens in the Field.
- 8. ASTM C 94–94, Specification for Ready-Mixed Concrete.
- 9. ASTM C 109–98, Test Method for Compressive Strength of Hydraulic Cement Mortars (Using 2 in. or 50 mm Cube Specimens).
- 10. ASTM C 138-92, Test Method for Unit Weight, Yield and Air Content (Gravimetric) of Concrete.
- 11. ASTM C 143-97, Test Method for Slump of Hydraulic Cement Concrete.
- 12. ASTM C 172-90, Practice for Sampling Freshly Mixed Concrete.
- 13. ASTM C 173-94, Test Method for Air Content of Freshly Mixed Concrete by the Volumetric Method.
- 14. ASTM C 231–97, Test Method for Air Content of Freshly Mixed Concrete by the Pressure Method.
- 15. ASTM C 567-91, Test Method for Unit Weight of Structural Lightweight Concrete
- 16. ASTM C 1007-83, Specification for Installation of Load Bearing (transverse and Axial) Steel Studs and Related Accessories.
- 17. ASTM C 1064–86, Test Method for Temperature of Freshly Mixed Portland Cement Concrete.
- 18. ASTM C 1090–96, Test Method for Measuring Changes in Height of Cylindrical Specimens from Hydraulic Cement Grout.
- ASTM C 1314–97, Test Method for Constructing and Testing Masonry Prisms Used to Determine Compliance with Specified Compressive Strength of Masonry.
- 20. ASTM D 3963–97, Specification for Epoxy-Coated Reinforcing Steel.
- 21. AWS D1.1-96, Structural Welding Code Steel.
- 22. International Building Code, 2003
- 23. PCI MNL-116-85, Manual for Quality Control for Plants and Prestressed Concrete Products.
- 24. RCSC-2000, Specification for Structural Joints Using A325 or A490 Bolts.
- 25. SDI, Steel Deck Institute Specifications and Commentaries for Composite Steel Floor Deck and Specifications and commentaries for Roof Deck.
- 26. SSPC, Steel Structures Painting Council Steel Structures Painting Manual Vol. 2, Systems and Specifications.
- 27. CFSD-ASD-86, Specification for Design of Cold-Formed Steel Structural Members, with 1989 Addendum.
- 28. CCFSS, AISI Specification Provisions for Screw Connections.

Maine Medical Center	PROGRAM SPECI	AL TESTS & INSPECTIONS
Emergency Department		
Expansion and Renovations - 4696	04160-11	12/14/07

P.O. Box 481 Belgrade Lakes, ME 04918-0481 Tel: (207) 293-4821 Fax: (207) 871-6195

February 22, 2008

Chris Simmons, Project Manager Facilities Development Maine Medical Center 22 Bramhall Street Portland, Maine 04102

Re: Asbestos Notification, D.E.P. / E.R. Department

Dear Chris:

Attached, please find the Building Demolition Notification Form for the Maine Medical Center Emergency Department scheduled to be renovated as part of the hospital expansion. In the late 1980's the Emergency Department underwent a major renovation, which included a full asbestos survey and significant asbestos abatement (fireproofing, floor tile, etc.).

I have spoken with John Bucci from the Department of Environmental Protection and he is aware the hospital's renovation and asbestos notification policy (if needed).

If you have any questions please call.

Sincerely;

alex rounds

Alex McCarthy President

Enclosures



ASBESTOS BUILDING DEMOLITION NOTIFICATION

MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION Lead & Asbestos Hazard Prevention Program 17 State House Station, Augusta, Maine 04333



Maine law requires the filing of the ASBESTOS BUILDING DEMOLITION NOTIFICATION with the Department prior to demolition of any building except a single-family home.

Building owners are required to provide this notification of the demolition of a building to the DEP at least 5 working days prior to the demolition. This notification is **not** required before the demolition of a single-family residence or related structure (e.g., garage, shed, bam). It is also **not** required if previous notification of the demolition has been provided to the DEP as part of an asbestos abatement project notification. **Demolition** means the tearing down or intentional burning of a building or part of a building.

Prior to demolition, building owners must determine if there is any asbestos-containing material(s) (ACM) in the building. An "asbestos inspection" by a DEP-licensed Asbestos Consultant is required for all buildings except single-family homes and residential buildings with 2-4 units built after 1980. In lieu of an asbestos inspection, pre-1981 residential buildings with 2-4 units can be <u>surveyed</u> to identify possible ACM by someone knowledgeable about ACM, such as a code enforcement officer or building inspector. If materials that may contain asbestos are found, then you can either assume they are ACM or hire a DEP-licensed Asbestos Consultant to test the materials.

Whenever more than 3 square feet or 3 linear feet of ACM is identified, the ACM must be abated in accordance with the Maine Asbestos Management Regulations by a DEP-licensed Asbestos Abatement Contractor. This includes materials presumed to be ACM. Check www.maine.gov for a listing of asbestos contractors.

Prior to issuing a local demolition permit, the DEP requests that municipalities have applicants for municipal demolition permits complete this form and fax it to the DEP at 207-287-7826. Municipalities should not issue local demolition permits if the required asbestos inspection or survey has not been performed and identified ACM removed.

Were regulated asbestos-containing building materials found? Hyes 🛛 no

property address: Maine medicai Center 22 Branhau Street Porthad, me	building description: pre-1981 residential with 2-4 units post-1980 residential with 2-4 units Wother: Commeter Buildury
asbestos survey/inspection performed by: (name & address)	l scheetne abatement contractor
Alex mccanty PO Box 491 Belgrade lakes me telephone: 207 293-4821	Contissing Environmenter Lewiston. M. Helephone: 1800 360 3434
property owner: (name & address)	demolition contractor. (name & address)
Chris Simmons Facilities Nurlosmet	NA
telephone: 207 2:1062 - 2447	telephone:
demolition start date. TO BC Detuniand	demolition and date: To Be Determinus

This demolition notification does not take the place of the Asbestos Project Notification if applicable

Λ	I CERTIFY THAT	THE ABOVE INFORMATION IS	CORRECT	
Heren	~ Canthy	Laspector	(100	fmili
Print Name: Owner/Agent		Title	Signature	- f - CCGAL,
		··· = 11		

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/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.
- X The final report of Special Inspections shall be submitted prior to the issuance of the Certificate of Occupancy

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO requires</u> 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.

Signature of Applicant/Designee

Signature of Inspections Official

Date 3/28/08

THE REAL PROPERTY OF THE REAL

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: 2 BRAMHAU ST.			
Total Square Footage of Proposed Structure/Area Square Footage of Lot			
FIT/OUT - RENOVATION 46,0405F			
Tax Assessor's Chart, Block & Lot	Applicant * <u>must</u> be owner, Lessee or Buye	er*	Telephone:
Chart# Block# Lot#	Name MAINE MEDICAL CENTER		
53 4	Address 22 BRAMHALL ST.		
	City, State & Zip PORTLAND, ME		
Lessee/DBA (If Applicable)	Owner (if different from Applicant)		ost Of
	Name		ork: \$ <u>8,343,515.00</u> of O Fee: \$ <u>Pay ar Pa<i>K-</i>I</u> P
	Address	C	of O Fee: \$ <u>PAY AT PILK-I</u> A
	City, State & Zip	Tc	tal Fee: \$ <u>83,460.00</u>
Current legal use (i.e. single family)	-		
If vacant, what was the previous use?			
Proposed Specific use: Ho	BRITAL		
Is property part of a subdivision? If yes, please name			
Project description: HOSPITAL / ED FIT-OUT OF CHARLES ST. BASEMENT, EXISTING ED RENOVATION.			
Contractor's name:WILLIAM A. BERRY & SON, INC.			
Address: <u>99 Contrer Hill Drive</u>			
City, State & Zip			
Who should we contact when the permit is ready: <u>C7E0FF MITCHEU</u> Telephone: <u>207.662.6719</u>			
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 <u>www.portlandmaine.gov</u>, 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: Date: emm

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

CI TY CALL
ORTLAND .

Certificate of Design Application

RAD RTLAND	Gertificate of D		
From Designer:	TRO Jung Brannen		
Date:	2/20/2008		
Job Name:	• • • •	Emergency Depa	artment Expansion & Renovation
Address of Construction:			
Cor	2003 Internationa Instruction project was designed to the	0	eria listed below:
Building Code & Year 14	36-2003 Use Group Classification	on (s) 12	
Type of Construction	5		
	-		
	suppression system in Accordance with		•
Is the Structure mixed use?	D If yes, separated or non se	eparated or non separat	ted (section 302.3)
Supervisory alarm System? 🗙	Geotechnical/Soils report	t required? (See Section	1802.2) See Package H
Structural Design Calculation	ons	Y1.5	Live load reduction
Available of request Submitted for		snow 20 pst	Roof <i>live</i> loads (1603.1.2, 1607.11)
i and in the second sec		governs/ 45 bst	Roof snow loads (1603.7.3, 1608)
Design Loads on Construct		50 psf	Ground snow load, Pg (1608.2)
Uniformly distributed floor live lo Floor Area Use	Dads (7603.11, 1807) Loads Shown	لم اسرار	-
stairs, bbbies	100 pst	47 p=t	If $Pg > 10$ psf, flat-roof snow load pf
1st floor comidor	100 psf	1.0	If $Pg > 10$ psf, snow exposure factor, $_{G}$
upper corridor	80 p st	1.2	If $Pg > 10$ psf, snow load importance factor, L_{I}
	50 psf	1.2 unheat	Roof thermal factor, $G(1608.4)$
typical floors	60 pst	45 psf	Sloped roof snowload, _{P3} (1608.4)
Wind loads (1603.1.4, 1609)		Þ	Seismic design category (1616.3)
ASCE 7 Design option u	ıtilized (1609.1.1, 1609.6)	OMF	Basic seismic force resisting system (1617.6.2)
100 psfBasic wind speed	d (1809.3)	3.5,3.0	Response modification coefficient, R1 and
1.15 Building categor	ry and wind importance Factor, j _v table 1604.5, 1609.5)		deflection amplification factor _{CI} (1617.6.2)
	category (1609.4)	ELF	Analysis procedure (1616.6, 1617.5)
	coefficient (ASCE 7)	4 Kips	Design base shear (1617.4, 16175.5.1)
	ladding pressures (1609.1.1, 1609.6.2.2)	· · · · · ·	(1803.1.6, 1612)
	pressures (7603.1.1, 1609.6.2.1)	nla	
Earth design data (1603.1.5, 1	,	!! <i>d</i> e	Flood Hazard area (1612.3)
ASCE 7 Design option u	tilized (1614.1)	<u> </u>	Elevation of structure
Seismic use grou		Other loads	
ما	se coefficients, SDs & SD1 (1615.1)	_n[a	Concentrated loads (1607.4)
Site class (1615.1.	.5)	20	Partition loads (1607.5)

250 psf	_ Misc. loads (Table 1607.8, 1607.6.1, 1607.7,
driveway	1607.12, 1607.13, 1610, 1611, 2404



Commercial Interior & Change of Use Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

One (1) complete set of construction drawings must include:

Note: Construction documents for costs in excess of \$50,000.00 must be prepared by a Design Professional and bear their seal.

- Cross sections w/framing details
- Detail of any new walls or permanent partitions
- Floor plans and elevations
- Window and door schedules
- Complete electrical and plumbing layout.
- Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment or other types of work that may require special review
- Insulation R-factors of walls, ceilings, floors & U-factors of windows as per the IEEC 2003
- \mathbf{V} Proof of ownership is required if it is inconsistent with the assessors records.
- Reduced plans or electronic files in PDF format are required if originals are larger than 11" x 17".
- Per State Fire Marshall, all new bathrooms must be ADA compliant.

Separate permits are required for internal and external plumbing, HVAC & electrical installations.

For additions less than 500 sq. ft. or that does not affect parking or traffic, a site plan exemption should be filed including:

- □ The shape and dimension of the lot, footprint of the existing and proposed structure and the distance from the actual property lines.
- □ Location and dimensions of parking areas and driveways, street spaces and building frontage.
- Dimensional floor plan of existing space and dimensional floor plan of proposed space.

A Minor Site Plan Review is required for any change of use between 5,000 and 10,000 sq. ft. (cumulatively within a 3-year period)

2

Fire Department requirements.

The following shall be submitted on a separate sheet: Please see effacted sheet.

- □ Name, address and phone number of applicant **and** the project architect.
- □ Proposed use of structure (NFPA and IBC classification)
- □ Square footage of proposed structure (total and per story)
- Existing and proposed fire protection of structure.
- □ Separate plans shall be submitted for
 - a) Suppression system
 - b) Detection System (separate permit is required)
- □ A separate Life Safety Plan must include:
 - a) Fire resistance ratings of all means of egress
 - b) Travel distance from most remote point to exit discharge
 - c) Location of any required fire extinguishers
 - d) Location of emergency lighting
 - e) Location of exit signs
 - f) NFPA 101 code summary
- \Box Elevators shall be sized to fit an 80" x 24" stretcher.

For questions on Fire Department requirements call the Fire Prevention Officer at (207) 874-8405.

Please submit all of the information outlined in this application checklist. If the application is incomplete, the application may be refused.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

Permit Fee: \$30.00 for the first \$1000.00 construction cost, \$10.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.



Accessibility Building Code Certificate

Designer:

Address of Project:

Nature of Project:

TRO Jung Bronnen 22 Bramhall Street, Portland ME 04102 Expansion and renovation of Maine Medical Center's emergency department.

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:	Rombert Hoye, AIA
Title:	CEO
Firm:	TRO Jung Brannen
Address:	22 Boston Wharf Koad
	Boston, MA 02210
Phone:	617-502-3400

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

Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936



Certificate of Design

2/20/08

From:

Date:

TRO Jung Brannen

These plans and / or specifications covering construction work on:

The expansion and renovation of Maine Medical Center's emergency department.

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

Liv	
(LSM) Y	Signature: Ribert Ul, Hepe, All
A DE CE	Title: CEO
(SEAL)	Firm: TRO Jung Brannen
	Address: 22 Boston Wharf Road
	Boston, MA 02210
	Phone: 617-502-3400

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

5

Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936



ARCHITECTURE INTERIOR DESIGN ENGINEERING MASTER PLANNING

February 20, 2008 Job No.: 4696

City of Portland Inspections Division 389 Congress Street Portland, Maine 04101

Re: Fire department requirements for building permit

Please find below the information required by the fire department as a part of the General Building Permit Application.

- Proposed applicant:
 - Maine Medical Center 22 Bramhall Street Portland, ME 04102
- Project Architect:
 TRO Jung|Brannen
 - 22 Boston Wharf Road Boston, MA 02210
- Proposed use of structure
 - NFPA classification: IBC classification:
- Ambulatory Care New Healthcare
- Square footage:
 - o 46, 040 sf
- Existing and proposed fire protection system: See enclosed fire protection drawings and specifications
- Separate plans for:

0

- o Suppression system: See enclosed fire protection drawings and specifications.
 - Detection System: See enclosed fire protection drawings and specifications.

BOSTON BEIJING BIRMINGHAM DUBAI HARTFORD MEMPHIS SARASOTA

- Separate Life Safety Plan
 - See drawing G10B for fire resistance ratings, travel distances, fire extinguisher locations, exit signs, and NFPA 101 code summary.

22 Boston Wharf Road Boston, MA 02210 Tel 617.502.3400 Fax 617.502.3401 info@trojungbrannen.com www.trojungbrannen.com



Building Permit February 20, 2008 Page 2

- o See drawings E30B.A and E30B.B for emergency lighting.
- Elevators:
 - o There are no new elevators for the Emegency Department Expansion and Renovation Project.

Sincerely,

John Viapiano Associate TRO Jung|Brannen

STATEMENT OF SPECIAL INSPECTIONS

PROJECT:	Maine Medical Center - Emergency Department Expansion and Renovations				
LOCATION:	N: Portland, Maine				
PERMIT APPL	PERMIT APPLICANT: Henry Dunn (Project Manager), Maine Medical Center				
APPLICANT'S	PPLICANT'S ADDRESS: 22 Bramhall Street				
		Portland, M	laine 04102		
PROJECT AR	CHITECT:	-	TRO-Jung Brannen (TRO-JB)		
PROJECT ST	RUCTURAL E		Simpson Gumpertz & Heger In	c. (SGH)	
REGISTERED	DESIGN PRO	OFESSIONA	L IN RESPONSIBLE CHARGE:	Joseph J. Zona (SGH)	

This statement of special inspections is submitted as a condition for permit issuance in accordance with Section 1704 of the 2003 International Building Code. It includes a *Schedule of Special Inspection Services* applicable to the above referenced project as well as the identity of the individuals, agencies, or firms intended to be retained for conducting these inspections.

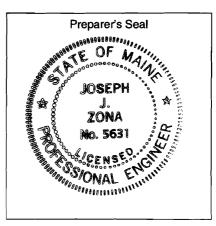
The Special Inspector(s) shall keep records of all inspections and shall furnish interim inspection reports to the building official and to the registered design professional in responsible charge at a frequency agreed upon by the permit applicant and building official prior to the start of work. Discrepancies shall be brought to the immediate attention of the Contractor for correction. If the discrepancies are not corrected, the discrepancies shall be brought to the attention of the building official and the registered design professional in responsible charge prior to completion of that phase of work. A *Final Report of Special Inspections* documenting required special inspections and correction of any discrepancies noted in the inspections shall be submitted at the conclusion of the project.

Frequency of interim report submittals to Registered Design Professional in Responsible Charge:

The Special Inspection program does not relieve the Contractor of the responsibility to comply with the Contract Documents. Jobsite safety and means and methods of construction are solely the responsibility of the Contractor.

Prepared By:

Joseph J. Zona,	P.E.
Type or print name	



1

To be filled out by Building Department and returned to applicant:

Building Official's Ac	ceptance:			
Signature	Date		Permit No.	— ₀
Frequency of interim	report submittals to build	ling official:		h i
Monthly	Bi-Monthly	Upon Completion	Per attached schedule	
L			# = = = = = = = = = = = = = = = = = = =	

Program of Structural Tests and Inspections

For compliance with the 2003 International Building Code

Project:	Maine Medical Center – Emergency Department Fit-Out
Location:	Maine Medical Center 22 Bramhall Street Portland, Maine, 04102
Owner:	Henry Dunn (Project Manager) Maine Medical Center 22 Bramhall Street Portland, Maine, 0102
Architect of Record:	TRO-Jung Brannen 22 Boston Wharf Road Boston, Massachusetts 02210 Phone: 617-502-3400
Structural Engineer of Record (SER):	Simpson Gumpertz & Heger Inc. 41 Seyon St., Building 1, Suite 500 Waltham, MA 02453 Phone: 781-907-9000

This program of structural tests and inspections is submitted as a condition for issuance of the building permit in accordance with the 2003 International Building Code.

The following firms, agencies, or individuals (hereinafter referred to collectively as *agents*) will perform the tests and inspections under the direction of the SER:

Abbreviation	Agent
SER	Structural Engineer of Record listed above
GE	Project Geotechnical Engineer – S.W. Cole Engineering, Inc.
TL1	Testing Lab #1 – TBD
TL2	N.A.

The abbreviations will be used on the attached pages to identify which agent is performing the particular tests or inspections.

Maine Medical Center Emergency Department Expansion and Renovations - 4696 **PROGRAM SPECIAL TESTS & INSPECTIONS**

04160-1

The following categories of structural tests and inspections, if checked, are included in the program for structural tests and inspections for this project. The specific tests and inspections required for each checked category are listed on the page noted opposite the category.

Category	Page	Category	Page
In-situ bearing strata for footings	8	Precast concrete construction	7
Controlled structural fill	8	M Steel construction	3
(prepared fill)		Masonry construction	7
□ Pile foundations	8	Wood construction	7
Pier foundations	8	Curtain walls (wall panels	8
Cast-in-place concrete	5	and veneers)	
construction		Light gage metal framing	9
		□ Special cases	NA

The following items of construction, if checked, are specified in the contract documents on a performance basis. Their structural design will be reviewed by the SER and their construction is included in the program for tests and inspections on the attached sheets:

Curtain walls	Metal buildings
Precast concrete components	Light gage metal framing
 Post-tensioning steel 	
Structural steel connections	

The following items are excluded from this program of structural tests and inspections, since they are designed by other structural engineers not under the aegis of the SER, and the SER was not retained to provide performance specifications for their design. These other structural engineers may be assigned by the owner, architect, or construction contractor, as applicable, to be special SER's for their respective designs and to provide a program of structural tests and inspections for their respective designs.

Curtain walls, Light gage metal framing

and a second of the second second

		1000
Prepared by the Structural Engineer of Record	I: S ^{VIIII} ATE OF	
Name: Joseph J. Zona	J.	
Signature to gh f ma	E 3 No. 56	
Firm: <u>Simpson Gumpertz & Heger Inc.</u>	SONAL	
Date: 4/7/2008	Registration Se	eal
Maine Medical Center Emergency Department	PROGRAM SPI	ECIAL TESTS & INSPECTIONS
Expansion and Renovations - 4696	04160-2	12/14/07

Ite	m	Agent	Criteria/Scope
1.	Fabricator Certification/ Quality Control Procedures (IBC 1704.2.1)	TL1	 Review plant quality control procedures. Inspect plant storage and handling procedures. Confirm that approved submittals are in the plant and are being used for fabrication. Review welders' certifications. File welder certifications and any other quality assurance documentation as required by building department.
2.	Fabricator Inspection (IBC 1704.2.1)	TL1	 Inspect fabrication and fabricated steel per items 3, 4, and 5 below at five separate plant visits scheduled at the following times: At beginning of fabrication At approx. 20% complete, At approx. 40% complete, At approx. 60% complete, At approx. 80% complete, and As directed by the SER.
3.	Material Certification	TL1	 Review mill reports, certificates, and identification markings of all structural steel, bolts, nuts, and washers for compliance with the ASTM Specifications required by the Contract Documents and by AISC LRFD Specification Section A3. Inspect certificates of weld filler material and shear stud connectors for compliance with the AWS Specifications required by the Contract Documents and by AISC LRFD Specification Section A3. Inspect surface finish of steel members for conformance with SSPC standards, approved shop drawings, and Contract Documents.
4.	Bolting	TL1	 Inspect shop and field bolting procedures per RCSC Specification and for compliance with the Contract Documents. Inspect 100% of bolts in slip critical connections. Inspect 25% of bolts in all other connections. Verify size and grade of fasteners for compliance with Contract Documents. Verify bolt strength by testing one nut and bolt from each keg prior to its release to the field. Sign-off each keg to be released to the field. Inspect daily wrench calibration procedures. Field test bolts at discretion of inspector or SER by testing selected bolts to failure with tension calibrator.

Steel Construction – IBC Section 1704.3

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-3

5.	Welding	TL1	 Perform weld inspections and tests per Chapter 6 of AWS D1.1. Weld inspectors shall be certified per AWS D1.1. Perform visual inspections of all welds for conformance with shop drawings with the applicable visual inspection requirements of AWS D1.1. Review with SER scope of visual inspection as work progresses. Frequency of testing by ultrasonic or magnetic particle testing methods of other welds as follows: 5% of partial penetration groove welds 100% of welds subject to tension (hangers, etc.) 10% of all other welds
			 100% of all remade welds additional inspection as determined by inspector and/or SER defects are revealed
6.	Shear Connectors	TL1	 Perform inspection of stud installation to verify location, number, installation of studs, and ferrule removal is in accordance with the Contract Documents and that the installation is in compliance with AWS D1.1 Chapter 7. Daily preproduction testing: per AWS D1.1 Section 7.7 except that five studs are to be tested and that the studs are to be capable of bending 45 degrees from vertical without weld failure. Visual inspection of production stud installation per AWS D1.1 Section 7.8. Continuous testing during installation (in addition to the testing required by studs that do not pass the visual inspection): A minimum of two hammer stud bend tests on each structural member at 1/3 points on the span. If a failure occurs, every stud on the structural member is to be tested. Retest all studs that are replaced.
7.	Structural Framing, Details and Assemblies	SER,TL1	• Inspect member sizes, milled surfaces, beam camber (at shop), and installation and connection details for compliance with approved shop drawings and with Contract Documents.
8.	Open Web Steel Joists	N/A	Not Applicable

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-4

9. Metal Decking	SER, TL1	 Review mill reports for all deck material delivered to the site. Verify gauge, width and type of deck for conformance with approved shop drawings and with Contract Documents Verify welder certifications. Inspect placement for proper installation of approved screws, puddle welds, other mechanical fasteners (if any), and accessories for compliance with SDI, AWS D1.3 and the Contract Documents. Inspect placement of deck reinforcement at openings and other discontinuities for compliance with approved shop drawings and with Contract Documents. Inspect repair of damaged galvanized finish for compliance with Contract Documents.
10. Expansion Anchors.	SER, TL1	 Inspect installation. Verify that existing reinforcing steel is not cut when drilling holes for anchors. Verify embedment and torque of anchors.

Cast-in-Place Concrete Construction – IBC Section 1704.4

Ite	m	Agent	Criteria/Scope
1.	Formwork Geometry	TL1	 Inspect formwork for conformance with ACI 301 Section 2 and ACI 318 Sections 6.1, 6.3, and 6.4. Inspect all formwork size, geometry, and finishes for conformance with Contract Documents.
2.	Reinforcement Installation	SER, TL1	 Inspect location, size, condition and placement of all reinforcement (including prestressing tendons if applicable), reinforcement supports, inserts, and accessories for conformance with approved shop drawings and with Contract Documents. Inspect placement of all reinforcement for compliance with ACI 318 Sections 7.3, 7.4, 7.5, 7.6, and 7.7 and ACI 301 Section 3.3.
3.	Reinforcing steel welding	TL1	 Verify weldability of reinforcing steel other than ASTM A706 per IBC 1704.3 Inspect reinforcing steel resisting flexural and axial forces in intermediate and special moment frames and boundary elements of special reinforced concrete shear walls and shear reinforcement.
4.	Bolts and Embedded Items in Concrete Exposed to Tension and shear	TL1	Inspect embedded items for conformance with Contract Documents

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

5. Mix Design	SER	 Review mix design for conformance with contract documents. Review ready mix plant tickets for conformance of mix with project specifications. Review that plant procedures for establishing mix design strength comply with ACI 301 Sections 4.1 and 4.2 and with ACI 318 Sections 5.1, 5.2, 5.3, 5.4, and 5.8.
6. Materials Certification	TL1 and SER	 Review in plant all materials, manufacturer's certifications, mill reports, etc. for conformance with contract documents.
7. Materials Certification Records	TL1	• Maintain records of all material certificates, mill reports of all concrete mix constituent materials, and steel reinforcement.
8. Batching Plant	TL1	 Review plant quality control procedures for material storage and handling comply with ACI 301 Sections 4.1.3, 7.1 and 7.2. Inspect plant to ensure compliance of mix constituents with the requirements of ACI 318 Chapter 3 and ACI 301 Sections 4.2 and 7.2. Inspect that mixing and ready mix equipment and vehicles comply with ACI 318 Section 5.7 and 5.8 and with ASTM C 94. Maintain records of all ready mix truck contents and dispatch times.
9. Sampling of Fresh Concrete and Evaluation of Concrete Strength	TL1	 Collect and test concrete samples per ACI 318 Section 5.6 (min, of four cylinders for each 150 cy of concrete or 5,000 sf of slab or wall area) but not less than four cylinders for each day's pour. As a minimum, perform compression tests on two cylinders at 28 days. Measure slump (ASTM C 143), temperature (ASTM C 1064), weight, (ASTM C 138 for normal weight and C 567 for lightweight), and air content (ASTM C 173 for normal weight and C 231 for lightweight) for all concrete sampled for strength. For pumped concrete, measure at point of deposit.
10. Concrete Placement	SER, TL1	 Maintain a record correlating concrete batching information with location of placement in the finished work. Inspect all concrete placements for compliance with ACI 318 Section 5.9 and 5.10; and ACI 301 Sections 5 and 7.3. Inspect for conformance with all approved hot and cold weather concrete placement procedures.
11. Curing and Protection	TL1	 Inspect all placements for conformance with Contract Documents, ACI 318 Sections 5.11, 5.12, and 5.13, and with procedures approved by SER.
12. In-Situ Concrete Strength	TL1	 Verify in-situ concrete strength prior to stressing of prestressing tendons (where applicable) and prior to removal of shores and forms from beams and structural slabs in accordance with ACI 318 Section 6.2
Maine Medical Center		PROGRAM SPECIAL TESTS & INSPECTION

Emergency Department Expansion and Renovations - 4696

04160-6

13. Evaluation of Concrete Strength	TL1	• Test for conformance to specifications in accordance with ACI 318 Section 5.6 and IBC Section 1905.6
14. Post-Tensioning Operations	N/A	Not Applicable
15. Other	TL1	 Test column base plate non-shrink grout cubes restrained from all sides per ASTM C 109, and for shrinkage/expansion properties per ASTM C 1090. Test 3 cubes per day. Inspect installation of subgrade vapor retarder for compliance with manufacturer's approved installation procedures and with Contract Documents.

Precast Concrete Construction – IBC Section 1704.4 (not applicable)

Μ	Masonry Construction – IBC Section 1704.5 (NOT APPLICABLE)				
Ite		Agent	Criteria/Scope		
1.	Matenal Certification	SER, TL1	• Review certificates of all masonry material, reinforcement, and accessories for compliance with ACI-530.1 Sections 2.1, 2.2, 2.3, 2.4, and 2.5 and with the Contract Documents.		
2.	Mixing of Mortar and Grout	TL1	• Periodically inspect all mortar grout mixes and mixing operations for compliance with ACI 530.1 Section 2.6 and with the Contract Documents.		
3.	Installation of Masonry	TL1	• Inspect installation of masonry units for compliance with ACI 530.1 Section 3.2 and 3.3, and with the Contract Documents.		
4.	Reinforcement Installation	TL1	Inspect installation of reinforcement for compliance with ACI 530 Chapter 8, ACI 530.1 Section 3.4, and why the Contract Documents.		
5.	Grouting Operations	TL1	 Verify that grout space is clean prior to grouting Inspect grouting operations for compliance with ACI 530.1 Section 3.5 and with the Contract Documents. 		
6.	Weather Protection	TL1	• Inspect that protection procedures comply with ACI 530.1 Section 1.8 and with the Contract Documents.		
7.	Evaluation of Masonry Strength	TL1	 Determine compressive strength of mesonry per ACI 530.1 Section 1.4 and 1.6. For exterior walls, test three prism samples for f'm (ASTM E 1314) prior to construction and one sample for every 5,000-sq. ft. thereafter for each type of unit used. 		

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-7

		(NIA)
8. Anchors and Ties	TL1	• Inspect all anchorage to masonry (including masonry veneers) for compliance with ACI 530 Sections 4.2 and 5.14 and with Contract Documents.
9. Expansion Anchors	TL1	• Inspect installation. Verify that existing reinforcement is not cut when drilling holes for enchors. Verify embedment and torque of anchors.

Wood Construction – IBC Section 1704.6 (not applicable)

Ite	m	Agent	Criteria/Scope	
1.	Bearing strata for footings	GE	Inspect strata for conformance to the structural drawings, specifications, and/or the approved geotechnical report.	
2.	Bearing surfaces of footings	GE	Inspect bearing surfaces for conformance to the requirements of the structural drawings, specifications, and/or the approved geotechnical report.	

In-Situ Bearing Strata for Footings – IBC Section 1704.7.1

Controlled Structural Fill (Prepared Fill) - IBC Sections 1704.7.2 and 1704.7.3

Ite	m	Agent	Criteria/Scope
1.	Fill Material	GE	Test material for conformance to specifications or geotechnical report. Perform laboratory compaction tests in accordance with the specifications to determine optimum water content and maximum dry density.
2.	Installation of controlled structural fill (IBC 1704.7.2)	GE	Provide full-time inspection of the installation, in accordance with the specifications and IBC 1704.7.2.
3.	Density of fill (IBC 1704.7.3)	GE	Perform field density tests of the in-place fill for every other lift in accordance with the specifications and IBC 1704.7.3.

Maine Medical Center Emergency Department Expansion and Renovations - 4696

.

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-8

4. Other	GE	Verify the adequacy of dewatering systems (if required) by confirming that the area to be dewatered is dry.

Pile Foundations – IBC Section 1704.8 (not applicable)

Pier Foundations - IBC Section 1704.9 (not applicable)

Ite		Agent	rs) - IBC Section 1704.10 (N/A) Criteria/Scope				
1.	Light Sage Metal Framing for Panels	TL1	Perform structural tests and inspections as listed under category Light Gage Metal Framing.				
2.	Proprietary Light Weight Curtain Walls Systems	TLI	Review manufacturer's fabrication methods and quality control procedures. Review material certification, and inspect fabrication of structural framing, details, connections, and fasteners for conformance to approved submittals and the contract documents.				
3.	Masonry Veneers	TL1	Perform structural tests and inspections as listed under category <i>Masonry Construction</i> . Verify that relieving angles, ties to the backup structure, and other structural supports are installed in conformance with the contract documents and SER approved submittals.				
4.	Aluminum Welding	TL1	Review welding procedures and welding qualifications in accordance with AWS D1.2. Observe performance asting of welds required by AWS D1.2.				

Light Gage Metal Framing									
Item	Agent	Criteria/Scope							
1. Fabricator's Quality Sentrol Procedures		Not applicable							
2. Member Sizes	TL1	 Verify that member profiles, lengths, and surface finishes are in contomance with approved shop drawings. Review research/evaluation reports for evidence of compliance IBC 2003. 							

Maine Medical Center **Emergency Department** Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-9

	(N)+	
3. Material Thickness	₽ L1	 Review mill certificates from sheet steel producer for conformance with AISI and construction documents requirements for uncoated steel thickness. Verify that material thicknesses conform to the gauges specified in the approved shop drawings.
4. Material Properties	TLI	 Review mill reports from sheet steel manufacturer for conformance with yield strength, tensile strength, total elongation, chemical requirements, ductility, and galvanized coating thickness. Review manufacturer's data and/or lab test results for conformance with construction documents, approved shop drawings, and approved submittals for the following: expansion anchors, powder actuated fasteners, mechanical fasteners, vertical deflection clips, miscellaneous clips and accessories
5. Mechanical Connections	TLI	 Inspect fastener installation procedures. Verify that type, number, and location of fasteners comply with construction documents and with approved shop drawings. Verify that member splices comply with approved shop drawings for type and location of connection. Verify that insteners are installed tight.
6. Welding	TL1	 Check welder certifications. Verify that weld location, size and details conform to approved shop drawings. Verify that welding procedures conform with AWS D1.3 and to construction documents. Visually inspect welds.
7. Framing Details	TL1	 Verify installation and clearances of deflection tracks. Verify that framing details, installation and tolerances conform to ASTM C 1007, construction occuments, and approved shop drawings. Verify that repair and touch-up of galvanizing is done in conformance with construction documents using approved products.

Maine Medical Center Emergency Department Expansion and Renovations - 4696

PROGRAM SPECIAL TESTS & INSPECTIONS

04160-10

References

- 1. ACI 301-96, Standard Specifications for Structural Concrete.
- 2. ACI 318-02, Building Code Requirements for Structural Concrete.
- 3. ACI 530.1 / ASCE 6 / TMS 602 02, Specifications for Masonry Structures.
- 4. AISC LRFD, Third Edition, Load and Resistance Factor Design Specification for Structural Steel Buildings.
- 5. ASTM A 6–95c, Specification for General Requirements for Rolled Steel Plates, Shapes, Sheet Piling, and Bars for Structural Use.
- 6. ASTM A 568–95, Specification for Steel Sheet, Carbon and High-Strength, Low-Alloy, Hot-Rolled and Cold Rolled, General Requirements For.
- 7. ASTM C 31-91, Practice for Making and Curing Concrete Test Specimens in the Field.
- 8. ASTM C 94–94, Specification for Ready-Mixed Concrete.
- 9. ASTM C 109–98, Test Method for Compressive Strength of Hydraulic Cement Mortars (Using 2 in. or 50 mm Cube Specimens).
- 10. ASTM C 138-92, Test Method for Unit Weight, Yield and Air Content (Gravimetric) of Concrete.
- 11. ASTM C 143-97, Test Method for Slump of Hydraulic Cement Concrete.
- 12. ASTM C 172–90, Practice for Sampling Freshly Mixed Concrete.
- 13. ASTM C 173–94, Test Method for Air Content of Freshly Mixed Concrete by the Volumetric Method.
- 14. ASTM C 231-97, Test Method for Air Content of Freshly Mixed Concrete by the Pressure Method.
- 15. ASTM C 567-91, Test Method for Unit Weight of Structural Lightweight Concrete
- 16. ASTM C 1007-83, Specification for Installation of Load Bearing (transverse and Axial) Steel Studs and Related Accessories.
- 17. ASTM C 1064-86, Test Method for Temperature of Freshly Mixed Portland Cement Concrete.
- 18. ASTM C 1090–96, Test Method for Measuring Changes in Height of Cylindrical Specimens from Hydraulic Cement Grout.
- ASTM C 1314-97, Test Method for Constructing and Testing Masonry Prisms Used to Determine Compliance with Specified Compressive Strength of Masonry.
- 20. ASTM D 3963-97, Specification for Epoxy-Coated Reinforcing Steel.
- 21. AWS D1.1-96, Structural Welding Code Steel.
- 22. International Building Code, 2003
- 23. PCI MNL-116-85, Manual for Quality Control for Plants and Prestressed Concrete Products.
- 24. RCSC-2000, Specification for Structural Joints Using A325 or A490 Bolts.
- 25. SDI, Steel Deck Institute Specifications and Commentaries for Composite Steel Floor Deck and Specifications and commentaries for Roof Deck.
- 26. SSPC, Steel Structures Painting Council Steel Structures Painting Manual Vol. 2, Systems and Specifications.
- 27. CFSD-ASD-86, Specification for Design of Cold-Formed Steel Structural Members, with 1989 Addendum.
- 28. CCFSS, AISI Specification Provisions for Screw Connections.

Maine Medical Center	PROGRAM SPECIAL TESTS & INSP	PECTIONS
Emergency Department		
Expansion and Renovations - 4696	04160-11	12/14/07

Nov 18 08	3 05:42p	b N	Naine N	Aedical C	Center			91207	6626516		p.1			
·····	- #		5	54 42	1010x //	RECA	5	tatporer − •	···· //	1		·····		
il defects sh certificate i i< undersio	all be co sholl be f ed the or	irrected (illed out wher's re	and syste and sign presental	em left in ned by bo tive's sign	service befor oth representa ature in no v	by the contractors p tives. Copies sha ay prejudices an cal ordinances.	trsonnel finali 4 þ€ prepara v claim anair	y leave the job d for approving 1st contractor f	authorities, c or foulty mat	whers, and	contracto	>rs. hip, ar		
PROPERTY NA	ME	MAIN	EM	EN. (ENTER	CHARI	ES 57	Γ.		DATE 2	178/0	28		
PROPERTY AD			HARI	65	57	- Pa	TTAN	0 MF						
- 7 - 1811 - 1	ACCEPTE	D BY	State	Fire	Marsh	ial's Offic		~ <u>~</u>	•					
PLANS	ADDRESS					se Statio	······	ista. Ma	ine 04	333-0	164			
	Installati	on confe	ms to	accepted		1. A.			· · · · · · · · · · · · · · · · · · ·	면 Yes 면 Yes				
	Has per	son in c rol valves	harge of	fire equi	pment been i	nstructed as to i this new equipm	ecation ient?		· · ·	12 Yes				
NSTRUCTIONS	Has Cor 1	oies of t System	ind main	nents instr	structions	remises?				IZ Yes IZ Yes IZ Yes I⊋ Yes		ła ła		
LOCATION OF	Supplies	s building	is								-			
		MAKE			DDEL	YEAR OF MANUE	CTURE ORI	FICE SIZE	QUANTITY	TEMF	ERATURE	RATING		
SPRINKLERS	VICTAULIC			<u>V380</u> 2	CONCHEN	1. 2008		1/2	14-2	5	155	7 		
	WCL	AUL		<u>12704</u>	VPRIDAD			12	4-9-		20	• • • • • •		
•										/	<u> </u>			
PIPING &	Type o	f pipe f fittings		BLAC	K IRON	J CAST IRE	7.			<u>_</u>				
FILINGS		- interinge						Maximum tin	ne to operate	through le	st connec	tion.		
ALARM VALVE	E .	Туре		Mc	ke	Mode	1 .s	Minute	15	Se	cands ·			
FLOW INDICT.	- F	low		fo	Yer	VSR				3	5			
				Dry v	alve		<u></u>		Q.O.D.					
		Make		Modei		Serial no.	Make		Viodel		Serial as.			
OPERATION TEST		Time to trip through test Connection 1		Water pressure		Air pressure	Trip point air pressure		Time v reache test of	Las mar		m roted perly		
	Without	1	Seconds		Psi	Pai		Psi	Mirrutes	Seconds	Yes	No 1		
	Without										1			
		a.o.o. If no, exploin									-I	L		
· ·		explain		Deeration Decompatic Delectric Hydraulic										
	lf no,				D Presentic	🗆 Electri	•	Hydraulic						
DELUGE &	lf no, Operat Piping		ed		C Presentic			Hydraulic		🗆 Yes		1 0		
DELUGE & PREACTION VALVES	lf no, Operat Piping Does	tion supervis volve ope	erate from		nual trip, rom	ote, or oth cont	rol stations?			C Yes				
PREACTION	lf no, Operat Piping Does	tion supervis volve ope	erate from		nual trip, rem each circuit f Does each a	ote, or oth cont griesting?	rol stations? Yes Does eac	No if no, ex		C Yes	10	No		
PREACTION	If no, Operat Piping Does Is the	tion supervis volve ope	erate from	facility in	nual trip, rem each circuit f	ote, or oth cont griesting?	rol stations? Yes 🗆	No if no, ex	e Maximu		10	No		
PREACTION	If no, Operat Piping Does Is the	tion supervis volve ope re an ac	erate fror cessible	facility in	nual trip, rem each circuit f Does each a supervision	ote, or th con gr testing? birouit operate loss alarm?	rol stations? Yes Dobe eac valve rek	No líf no, ex h circuit operat	e Maximu	TYes Im time of	operate r	No		
PREACTION VALVES	If no, Operat Piping Does Is the	tion supervis volve ope re an ac	erate fror cessible Moo	facility in	nual trip, rem each circuit f Does each a supervision	ote, or oth con ar lesting? bircuit operate loss alarm? No	rol stations? Yes Dobe eac valve rek	No lí no, ex h circuit operat tase? No Residual	e Maximu Minu	TYes im time of utes	operate r	No		
PREACTION VALVES	If no, Operat Piping Does Is the	tion supervis volve ope re an ac Make cotion	erate fror cessible Moo	facility in del	nual trip, rem each circuit f Does each a supervision Yes	ote, or oth con ar lesting? bircuit operate loss alarm? No	Yes Does eac valve rea Yes	No líf no, ex h circuit operat tose? No Residual (flor		I Yes	operate r Second	No		

ZONE B.Z. BASEMENT

SC JPTION		Medical Cente			91207	76626516	p.2	
SC IPTION 1	ه. چاپیانستانست، پارت ا	ni uuunayinoonin pi	เริ่มหน้าเอกหาศักราช	un re schien.		4	۲.	• ₹,
, e	Pneumatic: Establi Test pressure tan (0.1 bar) in 24 h	ks. at normal wate	ar) air pressure er level and air	and measure drop, which pressure and measure	ich shall not (air pressure c	exceed 1 1/2 psi Irop, which shall r	(0.1 bar) in 24 not: exceed 1 1/2	hours. 1 pși
· · · · · · · · · · · · · · · · · · ·	All piping hyderste Dry piping pneum Equipment operate	ctically tested	<u>ZZ5 psi (_</u> ' □ Yes ¥ Yes		11 no, sta			10/2
· · · · · · · · · · · · · · · · · · ·	Do you certify as brine, or other co	- the_sprinkler_cor prosive_chemicals	ntractor likat ad were not used	ditivas- and -corrasive ch for testing systems of	emicals, sodiy stopping leak	n silicate or deriv s? 🗆 Yes	atives of sodium	siicole,
TEST	Droin test	Reading of a supply test	gauge localed r connection:	tear water Zpsi (bar).	Rea	idual pressure with nection open wide	valve in test ASS psi (_bar).
Ĩ	Underground mai	ns-and lead in co	onnections to sy	stem riser flushed befor	e connection	made to sprinkier	piping?	
	Verified by copy flushed by install	of the U Form N ler of underground	o. 85B I sprinkler pipin	g? ⊡Yes ≰ g?		ier Explain	other 5	
· · · · ·	representative so	fasteners ars used mpla tasting be s	atisfactorily con	ncs nplated? <table-cell> Yes</table-cell>	🗆 No 🛛 If	no, explain		
ANK TESTING GASKETS	Number_used	Location:	S		·····	Number ren	ioved	
00 ps	Welding piping	20 Yes	□ No					<i>سلوکر .</i>
	lf	Yes	· · · · · · · · · · · · · · · · · · ·				-	
₩ELDING	camply with the	requirements of a	at least AWS 82 as performed b	v welders qualified		Tes Yes	no No	
	in compliance wi Do you certify th quality control p are smooth, tha	ith the requirement that the welding we	nts of at least as carried out i e that all discs welding residue	AWS B2.1? in compliance with a do are retrieved, that open are removed, and that	nincs in pipina	2 Yes	□ No	
CUTOUTS (DISCS)				a ensure that all autout	s (discs) are	retrieved?	res ⊏ !	No
						Α.		
HYDRAULIC DATA NAMEPLATE	Nomepiele-provi		⊡ No	I na explain				
HYDRAULIC	4	ded SK Yes vice with all contr						
HYDRAULIC DATA NAMEPLATE	4	X Yes	ol velves open					
HYDRADLIC DATA NAMEPLATE REWARKS	Date left in ser	X Yes	ol velves open	11-17-08				
HYDRAULIC DATA NAMEPLATE	Date left in ser	Vice with all controller, controctor	ol velves open	11-19-08	Title	SUAT	Dette	/-/8-
HYDRADLIC DATA NAMEPLATE REMARKS	Date left in sen Name of sprinkl For property ow	Vice with all controller, controctor	ol velves open	11-19-08			Date (Dote)	
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-17-x
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			//-/8- -/2-
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-x
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-x
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-x
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/-/8- -/2-
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/-/8- -/2-
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/-17-
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-x
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/-17- -17-
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/18- -12-<
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			-12-x
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler, contractor	ol velves open	11-19-08	Title			/-17- -17-
HYDRADLIC DATA NAMEPLATE REWARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler contractor	ol velves open	11-19-08	Title			/-18- -12-
HYDRADLIC DATA NAMEPLATE REMARKS SIGNATURES	Date left in sen Name of sprinkl For property ow For sprinkler co	Vice with all contro ler contractor	ol velves open	11-19-08	Title			/-/8- -/2-<

	14-NOV-2008	04:11PM	FROM-BER	RY MAINE MED		· ·	1207 FC	7 5749	- -		! • • • •	
:					•		+207 66	2 3245	T-538	P-001/081	F-685	
	WG N		Wm. C	J. FRA	NK					• • •		
· · · · · · · · · · · · · · · · · · ·		N	MEDICA	L GAS S						CONCO	RD, NH	BOX
•	<u> </u>		• .	(ERTIFICA port is reco		•	•	1-84	6-633-4
	•••••	· · · ·	. 1172461	_			8 - 2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		· · · · ·	•	NFPA AS	
		Date:	<u>11/14</u>	08	· · · ·		•		···· ·		174° 674, Au) E Dj (43
••		Facility	r: <u>Ma</u>	ne Mer	<u>1.c.) (</u>	intor			••••••••••••••••••••••••••••••••••••••	· .	-	
	-				J	eniy De	V			· .		
				d for Certifi rification ps			Systems accor	ding to NFI	PA 99, 2005	edition		
		1. 134	SS DFAIL	INot Apple	cable Standi	ing Pressure Te	r, Paragraph 5.1.	12.3.2.	8 - J.		•	•
•		/					est, Paragraph S.)					
	•	3. 202	ISS CIFAIL	LINot Appl	cable Valve	Test, Pacagraph	5.1,12.3.4.			· .	-	
, <u>1</u>	· .	4. DF/	SS DFAT	DNet Appli	cable Maste	Alemas, Para	raph 5.1.12.3.5.5	2.			<i>,</i>	
		5. STP	SS DRAIL	DNot Appli	able Area	Alamas, Farager	ph 5.1,12.3.5.3.	•	· · ·			
		6. EP	SS OFAIL	CINet Appli	imble Piping	e Purge Test, Pa	ragraph 5.1.123	.6,			٠	
		7. Dr		, ElOther Pi a A5-mieros su	ing Patical	to Test, Perage	ph 5.1.12,3.7.	2	·			
			b. LT Whi	ite cloth only	utilita ranear i	(9445 IN 1124 1	401- 	•		· .•		
	, -	8, Ci p ,	a. 🖬 Par	DOther Pi ity icats samples site rengent tab	S WORT NEEDL SO	tsi, Paragraph : third party lab	5.1.12.3.8. metory for analys	is, results in fir	ui report.	• .	· ·	
•		9. L'IR ,		UNOT Appli	icebic Final	Tio-In Test, Pa	agreeph 5,1,12,3,	9.	· .	46 ST		•
-	•	10. G	S DFAU	. INot Appli	icable Open	nianti Pressure	Test, Paragraph	5,1,123,10,		• * *•	•	
		11. 102	ASS CIFAL	, DNot Appl	icable Medi	cal Gas Concen	mition Test, Para	igraph 5.1,12.3	.n.			•
		12. CTP.	ASS OFAD	Divo: Appl	icable Label	ling, Paragraph	5.1.12.3.13					
· ·		13. DP.	ASS CIFAII	. Dever Appl	icabic Medi	cal Air Purity T	en 5.1,12.3.12				•	
		14. CIP/	ASS URAD	Divit Appl	icable Sourc	e Equipment V	critication 5.1.12	2.3.14	•	•	•	
		Scope o	frenovation	Eur.			പ	- at t	Ŀ	5 A 4		•
				161.67.00	<u>ua</u> n	<u>er 101</u>	regening Cl	(a line and the second s	LT?	· · · · · · · · · · · · · · · · · · ·		
		Comme	T) 14"		1.			<u>с</u>	•	(i		
			Need	-to (e-lchel	Servie	Valves.	wrest	y they	Gre		
	•		l'abeled	C.SY V	ebry	<u>. </u>						
	•		•									•
		•••••	· · · · · · · · · · · · · · · · · · ·	·····								
		read files	e carefully.	Only those on	rdefs and the	at portion of a	i will provide a le systems are i	citic indication	in this contril	cato. This		
		certifica above sy		indered void i	t any time i	alfustments;	nodifications (P maintenan	ce is perform	ect on any of	' <i>the</i>	
				· · · · · · · · · · · · · · · · · · ·		Comple	ed by:	Test	THE STATE	·	-	
					*'			Tason D. Thomas	. Sweatt	, N		
				•	•.		•	Neil Ga		• •	÷	
	· · •·				Complet	MEDICAL	GAS SYSTE	M SERVIC	Ē			
				ļ		* * * ** * KNE 10	urcus to the ou					• .
				· · · ·		······································	 	•••••	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · ·		·
				5° 1			· •					
				•		. *	••					
									•			

Youngblood Co., Inc.

32 Ashland Street

Haverhill, MA 01830

Phone: 978-373-5607 Fax: 978-521-1572

PROJECT: Maine Medical Center Emergency Dept

TO: William A Berry & Son, Inc. 99 Conifer Hill Drive Danvers, MA 01925

DATE: 11/14/2008

REF: MEDICAL GAS TEMPORARY CERTIFICATE

Katie Lamb ATTN:

WE ARE SENDING:	SUBMITTED FOR:	ACTION TAKEN:
Shop Drawings	Approval	Approved as Submitted
Lctter	Vour Use	Approved as Noted
Prints	As Requested	Returned After Loan
Change Order	Review and Comment	Resubmit
Plans		Submit
Samples	SENT VIA:	Returned
Specifications	Attached	Returned for Corrections
Other:	Scparate Cover Via:	Due Date:

ITEM PACKAGE SUBMITTAL DRAWING REV. ITEM NO. COPIES DATE DESCRIPTION STATUS

> 001 11/14/2008 TEMPORARY MEDICAL GAS 1 AAN CERTIFICATE

CC:

Signed:

Peter Viens

Printavera 3

p.4

TRANSMITTAL

No. 00014

4/4-

		Anni Jon KIDUX/ GREG CASS	874-8716
	FIRE ALARM SYSTEM RECO		
To be completed		at the time of system acceptance and appr	oval.
L PROTUCTED PROPERT	Y INFORMATION		
Name of property: Emerg	ency Dept basement of Fast Tower		
Address: 22 Bramhall St.,	Portland, Me.		
Description of property: 1	Business		
Occupancy type: Hospita.			
Name of property represen	tative: HankDum	கலகுதுக்கிக் திரப்பட்டியால் அது ஆர்ப்பு நடி பலின் நலதுப்பு நகைக்குதும்பு பில் அன்றும் பத்ததை. 1	n gan mananananan karananan karananan karanan karananan karananan karananan karanan karanan karanan karana
Address: "same"	a a serie da la de junior companya estas de la de la de la como se de la companya en estas de la destas company	ntra as an a comunita con tara a activita a constructiva del constructiva del constructiva del construcción del	таа алылылылы <mark>лық қ</mark> аралары, тақ қаралары жаралары ал
Phone:	FUX: NOT SUBJECT FOR SU COLOR	Email	ogenaan der kanden in operatier en sjekter en der de konstruktier en der en staar van de staar (* 1910) (* 1910
Authority having jurisdictio:	a over this property: City of Portland		
Phone: 207-874-8400	l'àx:	E-mail:	······································
DENERT AT ADM OVENTIAN D	NSTALLATION, SERVICE, AND	TRETTNET INDUDATATION	
		E-mail:	
service organization for this		anan menyakan menyakan menyakan kerintakan kerintakan di kerintakan di kerintakan di kerintakan di kerintakan d	a ang kang mang sa
Addison SOL County D.I.	W. A. M.		
	Westbrook, Mc.)	₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩
Phone: <u>207-879-2011</u> Location of as-built drawing Location of system operatio	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> m and maintenance manuals: Hospit		iral test reports: Hospi <u>tal Eag</u>
Phone: <u>207-879-2011</u> Location of as-built drawing Location of system operatio A contract for test and inspe Address:	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> or and maintenance manuals: Hospit ection in accordance with NFPA stand	Location of histor at Engineering	iral test reports: Hosp <u>ital Eag</u>
Phone: <u>207-879-2011</u> Location of as-built drawing Location of system operatio A contract for test and inspe Address: Phone: <u>Fast</u> 1	Fax: 207-879-2078 s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand S-mail:	Location of histor al <u>Engineering</u> dards is in effect as of: N/A	
Phone: <u>207-879-2011</u> Location of as-built drawing Location of system operatio A contract for test and inspe Address:	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> or and maintenance manuals: Hospit ection in accordance with NFPA stand	Location of histor at Engineering	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe Address: Fhone: Fax: 1 Contract expires:	Fax: <u>207-879-2078</u> s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand demail: Contract number:	Location of histor al <u>Engineering</u> dards is in effect as of: N/A	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> or and maintenance manuals: Hospit ection in accordance with NFPA stand Smail: Contract number: SYSTEM OR SERVICE	Location of histor al <u>Engineering</u> dards is in effect as of: N/A	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe Address: Fhone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> on and maintenance manuals: Hospit ection in accordance with NFPA stand E-mail: Contract number: SYSTIEM OR SERVICE cc of System Type: n/a	Location of histor al <u>Engineering</u> dards is in effect as of: N/A <u>Frequency of routine ins</u>	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe Address: Phone: Fax: 1 Contract expires: 3. TYPE OF PIRE ALARM S NFPA 72 Chapter Reference Name of organization received	Fax: <u>207-879-2078</u> s: Hosp <u>ital Engineering</u> on and maintenance manuals: Hospit ection in accordance with NFPA stand E-mail: Contract number: SYSTIEM OR SERVICE cc of System Type: n/a	Location of histor al Engineering dards is in effect as of: N/A Frequency of routine ins es (if applicable):	
Phone: <u>207-879-2011</u> Location of as-built drawing Location of system operatio A contract for test and inspe Address: Phone: Fax: <u>1</u> Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receive Alarm:	Fax: <u>207-879-2078</u> s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand E-mail: Contract number: SYSTEM OR SERVICE ce of System Type: n/a ving alarm signals with phone number	Location of histor al Engineering dards is in effect as of: N/A Frequency of routine ins with applicuble: Proone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Fbone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NEPA 72 Chapter Reference Name of organization receiv Alarm; Supervisory:	Fax: <u>207-879-2078</u> s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand E-mail: Contract number: SYSTEM OR SERVICE ce of System Type: n/a ving alarm signals with phono-number	Location of histor al Engineering dards is in effect as of: N/A Prequency of routine ins s. (if applicable): Phone: Phone:	cetions
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe Address: Fhone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receiv Alarm: Supervisory:	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand E-mail: Contract number: SYSTEM OR SERVICE cold System Type: n/a ving alarm signals with phone number System Syste	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins (if applicable): Phone: Phone: Phone:):Cetionis:
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NEPA 72 Chapter Reference Name of organization recei Alarm: Supervisory: Trouble: Entity to which alarms are re-	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA state Smail: Contract number; Contract number; SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number; ctransmitual;	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins as (if applicable): Phone: Phone: Phone: Phone: Phone: Phone: Phone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NEPA 72 Chapter Reference Name of organization recei Alarm: Supervisory: Trouble: Entity to which alarms are re-	Fax: <u>207-879-2078</u> s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Semail: Contract number: SYSTEM OR SERVICE ce of System Type: n/a ving alarm signals with phone number commendation.	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:): : : : : : : : : : : : : :
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NEPA 72 Chapter Reference Name of organization recei Alarm: Supervisory: Trouble: Entity to which alarms are re-	Fax: <u>207-879-2078</u> s: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Semail: Contract number: SYSTEM OR SERVICE ce of System Type: n/a ving alarm signals with phone number commendation.	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receiv Alarm: Supervisory:	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Email: Contract number: Email: Contract number: Email: SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number Emails etransmitted: Emails with phone number	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:): : : : : : : : : : : : : :
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receiv Alarm: Supervisory:	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Email: Contract number: Email: Contract number: Email: SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number Emails etransmitted: Emails with phone number	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receiv Alarm: Supervisory:	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Email: Contract number: Email: Contract number: Email: SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number Emails etransmitted: Emails with phone number	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Phone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NIFPA 72 Chapter Reference Name of organization recei Alarm: Supervisory: Trouble: Entity to which alarms are re-	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Email: Contract number: Email: Contract number: Email: SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number Emails etransmitted: Emails with phone number	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:	
Phone: 207-879-2011 Location of as-built drawing Location of system operatio A contract for test and inspe- Address: Fbone: Fax: 1 Contract expires: 3. TYPE OF FIRE ALARM S NFPA 72 Chapter Reference Name of organization receiv Alarm: Supervisory:	Fax: 207-879-2078 st: Hospital Engineering on and maintenance manuals: Hospit ection in accordance with NFPA stand Email: Contract number: Email: Contract number: Email: SYSTEM OR SERVICE ce of System Type: ving alarm signals with phone number Emails etransmitted: Emails with phone number	Location of histor a) Engineering dards is in effect as of: N/A Frequency of routine ins s (if applicable): Phone: Phone: Phone: Phone: Phone: Phone:	

Nov	18	08	05:23p	Maine	Medical	Center
-----	----	----	--------	-------	---------	--------

p.2

. TYPE OF FIRE ALARM SYSTEM OR SERVICE (continued)	
If Chapter 8, note the means of transmission from the protected premises to the central station: Digit.J.a.arm communicator <u>McCulloh</u> Multiplex <u>2-way radio</u> <u>1-way ra</u>	udio 🗖 N/A
If Chapter 9, note the type of connection: X Local energy \Box Shout \Box N/A	
3.1 System Soliware	
Operating system (executive) software revision level: 010.008.008	
Site-specific software revision date: 11/17/2008 Revision completed by: GSW/MRB	
L SIGNALING LINE CIRCUITS Chrackeristics of signaling line circuits connected to this system (see NFPA 72, Table 6.6.1):	
Quantity: 6 Style: 7 Class: A	
5. ALARM-INITIATING DEVICES AND CIRCUITS	
Characteristics of initiating device circuits connected to this system (see NFPA 72, Table 6.5):	
Quantity: 0 Class:	
5.1 Manual Initiating Devices	
	ons: 4
Type of devices: X Addressable Conventional Coded Transmitter N/A	n
5.2 Automatic Initiating Devices	
5.2.1 Area Smoke Detectors Number of smoke detectors: 48	
Type of coverage: \Box Complete area X Partial area \Box Non-required partial area \Box N/A	
Type of devices: X Addressable \Box Conventional \Box Coded \Box Transmitter \Box N/A.	
Type of smoke detector sensing technology: I lonization Photoelectre	
5.2.2 Duct Smoke Detectors Number of duct smoke detectors: 17	
Type of coverage:	
Type of devices: X Addressable 🗖 Conventional 🗖 Coded 🗖 Transmitter 🗖 N/A	
Type of smoke detector sensing technology: 🗖 louization 🗖 Photoelectric	
5.2.3 Heat Detectors Number of heat detectors: 0	· · · · · · · · · · · · · · · · · · ·
Type of coverage:	
Type of devices: X Addressable \Box Conventional \Box Coded \Box Transmitter \Box N/A	
5.2.4 Sprinkler Water flow Detectors Number of water flow detectors:	
Type of devices X Addressable 🗉 Conventional 🖬 Coded - 🗖 Transmitter 🗖 N/A	
5.2.5 Alarm Verification Number of devices subject to alarm verification: 65	
	an a
Alarm ventication on this system is: X Enabled Disabled Set for 15 seconds	
2007 National Fire Protection Association	NFPA 72 (p. 2 of 3

p.3

Type of devices X Addressable Conventional Coded Transmater NA 62 Fire Parap Type of live parap supervisely reviews	SUPERVISORY SIGNAL/INITIATING DEVICES AND CIR	
62 Fire Paop Type of the pump Electric Desd Type of the pump supervisery coviers: Addressable Conventional Cuded Transmitter N/A Fire Pamp Functions Supervisery coviers: Addressable Conventional Cuded Transmitter N/A Fire Pamp Functions Supervisery devices: The pump plase reversal Scleetor switch not in auto Edgine or control panel translat Low fuel Colles:	6.1 Sprinklet System Type of devices: X Addressable Conventional	Number of valve supervisory switches:
Type of fire jumps Events Deset Type of fire jumps supervisary ceiters: Addressable Conventional CodedTransmitter NA Fire tump Functions Supervisary ceiters: Fire pump place reversal Scleetor switch not in auto = Fire pump power Fire pump totaning Fire pump place reversal Scleetor switch not in auto = Fire pump power Fire pump totaning Fire pump place reversal Scleetor switch not in auto = Fire pump supervisary devices: Addressable Conventional Coded Transmitter NA = Eugeneor control panel trouble Addressable Conventional Coded Transmitter NA = Eugeneor control panel trouble Generator running Scleetor switch not in auto Low fuel Cubri:		
Type of the pump supervisory cevices: Addressable Conventional Coded Transmitter NA Free Pump Functions Supervised Free pump power Free pump numans Free pump place reversal Selector switch not in auto Expine or control panel trouble Low faet Ode: Get Equipe Often Generator: Type of generator supervisory deveces Addressable Conventional Carled Tronsmitter NA Expine or control panel trouble Centerator running Selector switch not in auto NA ANNUNCIATIONS 7.1 Amuniciator 1 X Local Remote Type: X Addressable Directory Craphie NA Location: MAINILLIBAY		
Fice pamp powerFee pump naturaryFlee pump place reversalSkettor switch not in auto Engine or control panel trouble Low fuel Oden:		Conventional Code: Code: Transmitter N/A
Engine or control panel trouble Low fuel Odie:: Generator Type of generator supervisory devees Addressable Conventional Coded Transmitter N/A Engine or control panel trouble Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator running Selector switch toot in auto Low fuel Other: Generator Selector switch toot in auto Low fuel Other: Generator Selector switch toot in auto Low fuel Other: Generator Selector switch toot in auto Low fuel Other: Generator Selector switch toot in auto Low fuel Other: Selectory Selector	Fire Pump Functions Supervised	
Odie:::		2 pump phase reversal
6.4 Engine-Driven Generator Type of generator supervisory devices: Addressable Conventional Coded Transmitter N/A Engine or control panel trouble Generator running Sciencer switch not in auto Low fuel Other: ANNUNCIATORS 7.1 Amunitator i X Local Remote Type: X Addressable Directory Graphie N/A Location: CRD FLCOR FACP 2.2 Annuariator 2 Local X Remote Type: X Addressable Directory Graphie N/A Location: MAINLADBAY Z.3 Agauncianor 3 Local X Remote Type: Addressable Directory Graphie N/A Location: MAINLADBAY Z.3 Agauncianor 3 Local Remote Type: Addressable Directory Graphie N/A Location: ALARM NOTIPICATION DEVICES AND CIRCUITS R Ensergency Voice Alarm Service Number of multiple voice alarm channels: Number of speakers zones Signe of single voice alarm channels: Number of idephone jacks Number of idephone bandsets stored on site: Type of klephone system astabled: Elecurcally powered Nounder of talephone parks Signe A/A Signe K/A Class	, .	
Engine or control panel trouble Generator running Selector switch not in auto Low fuel Other: ANNUNCLATORS 7.1 Annumeriator i X Local Remote Type: X Addressable Directory Graphie N/A Location: <u>MAINICIDERY</u> 7.2 Annumeriator 2 Local X Remote Type: X Addressable Directory Graphie N/A Location: <u>MAINICIDERY</u> 7.3 Annumeriator 3 Local Remote Type: A Addressable Directory Graphie N/A Location: <u>MAINICIDERY</u> 7.3 Annumeriator 3 Local Remote Type: A Addressable Directory Graphie N/A Location: <u>MAINICIDERY</u> 7.3 Annumeriator 3 Local Remote Type: Addressable Directory Graphie N/A Location: 7.4 Location: 7.5 ALARM NOTHFICATION DEVICES AND CIRCUITS 8.1 Entergency Voice alarm channels: Number of multiple voice alarm channels: Number of speakers 8.2 Telephone Jacks Number of telephone facks Number of telephone is acks installed: Electionally powered Sound powered N/A 8.3 Nonroke Addible System Characteristics of notification device incruits connected to this system (see NFPA 72, Table 6): Quantity:		
Other:		
ANNUNCLATORS 7.1 Annunciator i X Local Remote Type: X Addressable Directory Craphie N/A Location: CRD_FLOOR PACP		ng 🗖 Selector switch not in auto 🗖 Low fuel
7.1 Annunciator i X Loral Remote Type: N Addressable Directory Oraphic N/A Location: CRD FLOOR FACE 7.2 Annunciator 2 I. Local X Remote Type: N Addressable Directory Graphic N/A Location: MAIN LOB 3Y 7.3 Annunciator 3 I. Local Remote Interview Graphic N/A Location: MAIN LOB 3Y 7.3 Annunciator 3 I. Local Remote Interview Graphic N/A Location: MAIN LOB 3Y 7.3 Annunciator 3 I. Local Remote Interview NA Location: Interview 7.4 Addressable Directory Graphic N/A Location: Interview 7.4 Addressable Directory Graphic N/A Location: Interview ALARM NOTTPICATION DEVICES AND CIRCUITS 8.1 Entengency Voice Alarm Service Number of multiple voice alarm channels: Interview Number of speakers: Number of speaker zones: Number of speaker zones: Interview Interview 8.2 Telephone Jacks Number of telephone jacks Interview Interview	CUICI:	· · · · · · · · · · · · · · · · · · ·
Type: N. Addressable Directory Graphic N/A Location: GRD.FLCOR.FACP	ANNUNCIATORS	
7.2 Annuaciator 2 □ Local X Remote Type: X Addressable □ Directory □ Graphie □ N/A Locaton: MAIN LOB 3Y		
Type: N Addressable Directory Graphic N/A Location: MAIN LOB2Y 2.3 Annunciator 3 □ Local □ Remote Type: □ Addressable □ Directory □ Graphic N/A Location: Type: □ Addressable □ Directory □ Graphic N/A Location: ALARM NOTIFICATION DEVICES AND CIRCUITS 8.1 Emergency Voice Alarm Service Number of multiple voice alarm channels:	Type: X Addressable 🗖 Directory 🗖 Graphic	□ N/A Location: CRD FLOOR FACP
7.3 Anumeiator 3 □ Local □ Remote Type: □ Addressable □ Directory □ Graphic □ N/A Locaton:		
Type: Addressable Directory Graphic N/A Locaton: ALARM NOTIFICATION DEVICES AND CIRCUITS ALARM NOTIFICATION DEVICE Alarm Service Number of subscripts of speaker zones: Alarm channels: Number of speaker zones: Alarm Chapter of telephone jacks Alarm installed: Blecuncally powered Blecun	Type: X Addressable 🗖 Directory 🖻 Graphie	D N/A Location: MAIN1.0B3Y
ALARM NOTIFICATION DEVICES AND CIRCUITS S.1 Energency Voice Alarm Service Number of single voice alarm channels:		
8.1 Emergency Voice Alarm Service Number of single voice alarm channels: Number of speakers: Number of speaker zones: 8.2 Telephone Jacks Number of telephone jacks installed: Provide a larm installed: Provide alarm installed:	Type: AutressanceUrectoryGraphic	E N/A KARADON:
Number of single voice alarm channels:	ALARM NOTIFICATION DEVICES AND CIRCUITS	
Number of speakers:		
82'Telephone Jacks Number of telephone bandsets stored on site: Type of telephone system installed: Electrically powered Sound powered N/A 8.3 Nonvoice Audible System Characteristics of notification device circuits connected to this system (see NFPA 72, Table 6.5): Quantity: Style: N/A		
Number of telephone jacks installed:		. Taking of speaker zones.
Type of telephone system installed: Electrically powered Sound powered N/A 8.3 Nonvoice Audible System Characteristics of notification device circuits connected to this system (see NFPA 72, Table 6.5): Quantity: Class Style: N/A Class		Number of telephone bandsets stored on site:
Characteristics of notification device circuits connected to this system (see NFPA 72, Table 6.5); Quantity:Style: N/AClass		
Churacteristics of notification device circuits connected to this system (see NFPA 72, Table 6.5); Quantity:	8.3 Nonvoice Audible System	
		em (see NFPA 72, Table 6.5);
9 2007 National Fre Protection Association NFPA 72 (p. 3 of 5)	Quan.ity: Style: N/A	
2007 National Fre Protection Association NFPA 72 (p. 3 of 5)		
	2007 National Free Protection Association	NFPA 72 (5. 3 of 5

3			
	· · · · ·		
			····
8. ALARM NOT	TFICATION DEVICES AND CIRC	UITS (continued)	
8.1 Types and	Quantities of Nonvoice Notification A	Appliances Installed	
Bells:	With visual device:	Homs:	With visual device: 28
Coimes:	With visual device:	Bells:	With visual device:
Visual devices	without audible devices: 23	Other (describe):	
9. EMERGENCY	CONTROL FUNCTIONS ACTIV	/ATED	
	pen door releasing devices	Smoke management or smoke e	онцој
g Deor u	nlocking	x Elevator recall	Other
10. SYSTEM POW	VER SUPPLY		
10.1 Primary P	Yower.		
Nomi al voltag		Amps	
Overcurrent pr	rotection: Type:	Anaps:	
Location (of pr	rimary supply panel board):		
Disconnecting	means location:		
10.2 Secondary	y Power		
Localion		Type: Battery Nominal volta	age: 24 Current rating
Numbe: of sta	andby batteries: 2	Amp hour rating: 55	
Location of em	nergency generator:		
Location of fue	·····		
-	acity of secondary power to drive the s	iysteni	
In standby mo	de:	in alarm mode:	
11. RECORD OF	SYSTEM INSTALLATION		
		has been checked for opens, shorts, g	round faults, and improper branching, but
before conduct	ting operational acceptance tests.		
	is been justailed in accordance with 117	e following NFPA standards: (Note any	or all that apply.)
The system ha			· · · ·
The system ha n FPA 72	E	NFPA 70, National Electrical Code, .	Article 760
The system ha a NFPA 72 a Manufactur	erer's published instructions	Other (please specify):	Article 760
The system ha a NFPA 72 a Manufactur	E	Other (please specify):	Article 760
The system ha a NFPA 72 a Manufactur	erer's published instructions	Other (please specify):	Article 760
The system ha NFPA 72 Manufactur System deviaiç	rer's published instructions B ons from referenced NFPA standards <i>USAUC Charley</i>	Printed name: Russ-Chesley	1997 - 1997 -
The system ha n NFPA 72 n Manufactur System deviation Signed: Organization:	E rer's published instructions E ons from referenced NSPA standards (15 51) (Hurberg F.S. Bouloes	Printed name: Russ-Chesley	Date: Nov. (7, 2008
The system ha n NFPA 72 n Manufactur System deviaus Signed: Organization: 12. RECORD OF 2	E Ter's published instructions E ons from referenced NFPA standards <u>AUSTUE (Marking</u> F.S. Boulogs SYSTEM OPERATION	Printed name: Russ-Chesley Title:	Date: Nov. 17, 2008 <u>Date: Nov. 17, 2008</u> <u>Date: 2017</u> J
The system ha n NFPA 72 n Manufactur System deviation System deviation Signed: Organization: 12. RECORD OF 3 All operational	Entry published instructions Entry published instructions Entry Standards System OPERATION If calors of this system of the syst	Printed name: Russ-Chesley	Date: Nov. 17, 2008 <u>134464</u> Phone: <u>2017464</u> -31 J signer shown below, on
The system ha n NFPA 72 n Manufactur System deviation System deviation Signed: Organization: 12. RECORD OF 3 All operational	Entry published instructions Entry published instructions Entry Standards System OPERATION If calors of this system of the syst	Other (please specify): Printed name: Russ-Chesley Title: 1999 1999 1999 Were tested by or in the presence of the	Date: Nov. (7, 2008 <u>inagea</u> Phone: <u>2017</u> 444-3 j signer shown below, on irements of:
The system ha NFPA 72 Manufactur System deviation System devia	Entry published instructions Entry published instructions Entry Standards System OPERATION If calors of this system of the syst	Other (please specify): Printed name: Russ-Chesley Title: <u>1522056747777</u> were tested by or in the presence of the Ig properly in accordance with the require	Date: Nov. (7, 2008 <u>inagea</u> Phone: <u>2017</u> 444-3 j signer shown below, on irements of:
The system ha NFPA 72 Manufactur System deviation System deviation Signed: Organization: 12. RECORD OF 3 All operational the date shown NFPA 72 Manufactor	E rer's published instructions E ons from referenced NFPA standards (1511) Charley FaS. Boulous SYSTEM OPERATION I features and functions of this system v r below, and were found to be operating rer's published instructions	Printed name: Russ-Chesley Title: 1992 Chesley Title: 1992 Chesley were tested by or in the presence of the 19 properly in accordance with the requi NFPA 70, National Electrical Code	Date: Nov. 17, 2008 <u>Phone: 2017444-37</u> J signer shown below, on irements of: c, Article 760
The system hat NFPA 72 Manufactur System deviation System deviation Organization 12. RECORD OF 3 All operational the date shown NIPA 72 Manufactur E Documenta	E rer's published instructions E ons from referenced NFPA standards (15 1111) (15 1111) F.S. Boulops SYSTEM OPERATION I features and functions of this system v i below, and were found to be operatin rer's published instructions ation in accordance with Inspection an	Printed name: Russ-Chesley Title: <u>Graduate with the require</u> were tested by or in the presence of the ig properly in accordance with the require a NFPA 70, National Electrical Code b Other (please specify): ad Testing Form (Figure 10.6.2.3) is attac	Date: Nov. 17, 2008 <u>Date: Nov. 17, 2008</u> <u>Phone: Dot 1464-37</u> J signer shown below, on irements of: c, Article 760 wheed
The system ha n NFPA 72 n Manufactur System deviation System deviation Organization: 12. RECORD OF All operational the date shown n NFPA 72 n Manufactur n Documents Signed:	Erer's published instructions ons from referenced NFPA standards (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Other (please specify): Printed name: Russ Chesley Title: <u>14.2 April 1996</u> were tested by or in the presence of the 1g properly in accordance with the require NFPA 70, National Electrical Code Other (please specify): ad Testing Form (Figure 10.6.2.3) is attaced name: <u>Gary Wood</u>	Date: Nov. 17, 2008 <u>134464</u> Phone: <u>3074464-31</u> Signer shown below, on irements of: c, Article 760 iched Date: Nov. 17, 2008
The system ha n NFPA 72 n Manufactur System deviation System deviation Organization: 12. RECORD OF All operational the date shown n NFPA 72 n Manufactur n Documents Signed:	E rer's published instructions E ons from referenced NFPA standards (15 1111) (15 1111) F.S. Boulops SYSTEM OPERATION I features and functions of this system v i below, and were found to be operatin rer's published instructions ation in accordance with Inspection an	Printed name: Russ-Chesley Title: <u>Graduate with the require</u> were tested by or in the presence of the ig properly in accordance with the require a NFPA 70, National Electrical Code b Other (please specify): ad Testing Form (Figure 10.6.2.3) is attac	Date: Nov. 17, 2008 <u>Date: Nov. 17, 2008</u> <u>Phone: Dot 1464-37</u> J signer shown below, on irements of: c, Article 760 wheed
The system ha NFPA 72 Manufactur System deviation System deviation Organization: 12. RECORD OF All operational the date shown NFPA 72 Manufactor Document: Signed: Organization:	Erer's published instructions ons from referenced NFPA standards (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Other (please specify): Printed name: Russ Chesley Title: <u>14.2 April 1996</u> were tested by or in the presence of the 1g properly in accordance with the require NFPA 70, National Electrical Code Other (please specify): ad Testing Form (Figure 10.6.2.3) is attaced name: <u>Gary Wood</u>	Date: Nov. 17, 2008 <u>134464</u> Phone: <u>3074464-31</u> Signer shown below, on irements of: c, Article 760 iched Date: Nov. 17, 2008

15

5/5

<u> </u>	UNDAMENTALS OF FIRE ALARM SYSTEMS	72-37
13. CERTIFICATIONS AND APPROVALS		· ·
13.1 System Installation Contractor		
The system as specified berein has been ansi	talled and tested according to all NFPA standards cited	d hereita.
Signedi Alexalla Cal	C Printed neme: Russ Ches.cr.	Date: Nov. 17, 2008
Organization: E.S. Boulous	Printed name: Russ Ches.cv. 1/ Printed name: Russ Ches.cv. 1/ Dille: <u>Mai part Hankard</u>	21 Prone: <u>207-464-2706</u>
7 13.2 System Service Contractor	$\psi \in \mathcal{O}$	
This system as specified herein has been inst	alled and tested according to all NFPA standards cited	l herein.
Signed Harry Wing		IN 4 Nº 15 0000
Signed: 2 CC 2 CC CC	Printed name: Gary Wood	1.5 Di 007.077.0010
Organization: $\frac{\gamma + c_{H-\gamma+\omega} e_{H}}{1}$	-ut Inte: Systems Joeched	<u>74</u> Phone: <u>207-879-2010</u>
13.3 Central Station		
This system as specified herein will be monit	tored according to all NFPA standards cited herein.	
Signed: <u>N/A</u>	Printed name:	Date:
Organization:		
13.4 Property Representative		
	and tested to its specifications and all NFPA standards	cited herein.
Signed:	Printed name:	Date:
	Title:	
19 C. Andrain Harden Taria Dates		
13.5 Authority Having Juriscliction Have witnessed a satisfuctory accentance test	t of this system and find it to be installed and operating	manety
	ecilications, its approved sequence of operations, and	
signed:	Printed name:	Date:
Otganization:	Title:	Phone:
+ (nor-product - Un production - anglesing - F-F-Scholl - and data, relation - NA re	Anamonia ana ana ana ana ana ana ana ana ana	анар анарадан (рег ФСРОК, сканалинан ареодого).
· · · · · · · · · · · · · · · · · · ·		
3 2007 National Fire Protection Association		NFPA 72 (p. 5 of 5)
New		
		200- X. U. S
		2007 Edition 👩

BUILDING KNOWLEDG	e • Since :	1857			99 CONIFER HILL DRIVE DANVERS, MASSACHUSETTS 01923 T: 978.774.1057 T: 877.774.1057 (toll-free outside ma) F: 978.777.8217 WWW.BERRY.COM
	Letter of Transmittal #1				
To: Mike Nugent City Of Portland 389 Congress Street Portland, ME Subject: Geotechnical Re	eport	ittal #: 1 Date: 3/27/2008 Job: 06-358-0 MM	IC: ER Expansion & Reno		
	– A#a	abad		arata aquar via Mail t	he following items :
	r⊽ Atta			barate cover via Mail t	
Shop drawings	F Print		F Plans	F Samp	
Copy of letter	i Cha	nge order	☐ Specificati		echnical Report
Document Type	Copies	Date	No.	Description	
Submittal	1	3/27/08	02-0067.1	SWCole Geotechnic	cal Report
THESE ARE TRANSMITTE □ For approval □ For your use □ As requested □ For review and comm □ PRICING DUE	r r	Approve Approve Returne	d as submitted d as noted d for corrections		bmit copies for approval nit copies for distribution m corrected prints
Remarks: Mike, Please find geo Thanks, Geoff	otechnical r	eport as req	uested . I will follow	up with balance of inf	
From:			Signat	ture:	the Mitte

WILLIAM A. BERRY & SON, INC.

Copy To:



State of Maine **Department of Public Safety Construction Permit**



Reviewed for Barrier Free

17523

Sprinkled

Sprinkler Supervised 21843

MAINE MED CTR EMERGENCY DEPT EXP & RENO

Located at: 22 BRAMHALL STREET

PORTLAND

Occupancy/Use: HOSPITAL

Permission is hereby given to: HANK DUNN

22 BRAMHALL STREET PORTLAND, ME 04102

to construct or alter the afore referenced building according to the plans hitherto filed with the Commissioner and now approved.

No departure from application form/plans shall be made without prior approval in writing. This permit is issued under the provision

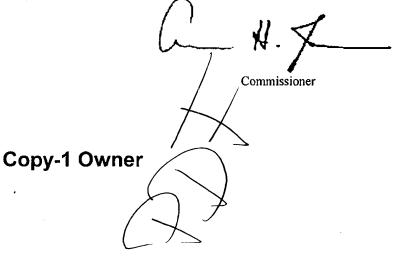
of Title 25, Chapter 317, Section 2448 and the provisions of Title 5, Section 4594 - F.

Nothing herein shall excuse the holder of this permit for failure to comply with local ordinances, zoning laws, or

other pertinent legal restrictions. Each permit issued shall be displayed/available at the site of construction.

13 th of September 2008 This permit will expire at midnight on the

Dated the 14 th day of March A.D. 2008



Comments:

HANK DUNN

22 BRAMHALL STREET PORTLAND, ME 04102

RECEIVED	
----------	--

MAR 18 2008

FACILITIES DEVELOPMENT

10-8-09 One in cashing inop. - med to put how rating above cashing, relacate pull station entrance, respray born for fire protection my chy 10-29-09 Final inspection CO (sosier timp, see Philip Difseino) MEM 10-5-09 hist of correction completed - OP-to search 11-5-09 MEM