Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU

Notes, If Any, Attached			PERMI		Permit Number: 081538
This is to certify that	MAINE MEDICAL (CENTER	an & A"		
has permission to	Installation of Fire Pr	otection (inklers)		
AT 22 BRAMHALL	ST			C053	D007001
•	•	of Mage	and of the	aces of	this permit shall comply with al f the City of Portland regulating , and of the application on file in
Apply to Public Wo and grade if nature such information.	rks for street line	givei befo lathe	tion of spection of written ermission of spection is build gor particular of the spection of t	iereof is ed-in. 24	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
Fire Dept. Health Dept. Appeal Board Other	ED APPROVALS				MGC8 Mt M Director - Building & Inspection Services
Departi		NALTY F	OR REMOVING	,	1

City of Portland, M	aine - Bui	lding or Use	Permi	t Applicatio	Permit No:	Issue Date:	CBL:		
389 Congress Street, 0					1	12/14/	053	D007001	
Location of Construction:		Owner Name:			Owner Address:	/ /	Phone:		
22 BRAMHALL ST		MAINE MED	ICAL (CENTER	22 BRAMHALL	ST	207-6	57-5646	
Business Name:		Contractor Name	:		Contractor Address:		Phone	Phone	
		Dean & Allyn	Inc.		P.O. Box 709 Gr	ay	20765	2076575646	
Lessee/Buyer's Name		Phone:	Permit Type:					Zone:	
		Ì		l	Additions - Com	mercial		(-41	
Past Use:		Proposed Use:		'	Permit Fee:	Cost of Worl	c: CEO Distric	<u></u>	
Maine Medical Ctr/2nd	loor.	Maine Medica	ıl Ctr/2r	nd Floor.	\$450.00	\$42,80			
Richard Bldg	Richard Bldg		,	SVDE S FIRST	Approved	INCRECTION			
_		Protection (Sp	rinklers	s)		_	Use Group: I-2	Type: 2B	
		ļ			, ,	Denied	TMO	-2003	
					See dit	ans	1/6	- 2083	
Proposed Project Description		·L			Conor		786	Type: 2B -2003 -2003	
Installation of Fire Prote		(lers)			Signature:	CARD	Signature:	L 12/sulpa	
	, r	,			PEDESTRIAN ACT	IVITIES DIST		1/1/00	
,		•		*		,	, ,	D:-1	
					Action: Appro	ved App	roved w/Conditions	Denied	
					Signature:		Date:		
Permit Taken By:	Date A	pplied For:			Zoning	Approva			
lmd	12/1	0 ′2008			Zoning	, ripprova	_		
1. This permit applicat	ion does not	preclude the	Spe	cial Zone or Revi	ews Zoni	ng Appeal	Historic	Historic Preservation	
Applicant(s) from m Federal Rules.			☐ St	noreland	☐ Variano	e	Not in D	Not in District or Landmar	
2. Building permits do septic or electrical v		plumbing,	☐ Wetland ☐ Miscellaneous			Does No	☐ Does Not Require Review		
3. Building permits are within six (6) month	void if worl		☐ Flood Zone ☐ Conditional Use			Requires	Requires Review		
False information m permit and stop all v		a building	☐ Sı	ıbdivision	Interpre	etation	Approved	Approved	
			☐ Si	te Plan	_ Approv	ed	Approved	d w/Conditions	
pro 10 - 10 10 10 10 10 10 10 10 10 10 10 10 10			Maj	Minor MN	Denied		☐ Denied	\bigcirc	
PERI,	11 1881	ED	Date:		Date:		Date:		
	The second second second second second		Date.	~\\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date.		Date.	/	
CITA C		217	C	CERTIFICAT	ION				
I hereby certify that I am I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to	o make this appl or work describe	med proication and in the	operty, or that t as his authorize application is	the proposed work in the dagent and I agree issued, I certify that	to conform t	o all applicable la icial's authorized i	ws of this representative	
SIGNATURE OF APPLICANT	Γ			ADDRES	SS	DATE	Ī	PHONE	
RESPONSIBLE PERSON IN C	CHARGE OF V	WORK TITLE				DATE		PHONE	

City of Portland, M	aine - Bu	ilding or Use Permit	t		Permit No:	Date Applied For:	CBL:
•		(207) 874-8703, Fax: (-8 716	08-1538	12/10/2008	053 D007001
Location of Construction:		Owner Name:		C	Owner Address:		Phone:
22 BRAMHALL ST		MAINE MEDICAL C	ENTER]:	22 BRAMHALL S	ST	207-657-5646
Business Name:		Contractor Name:		(Contractor Address:		Phone
		Dean & Allyn Inc.]	P.O. Box 709 Gra	y	(207) 657-5646
Lessee/Buyer's Name		Phone:		P	ermit Type:		<u> </u>
					Additions - Comm	nercial	
Proposed Use:		<u> </u>	P	roposed	Project Description:		
Maine Medical Ctr/2nd Protection (Sprinklers)	Floor, Richa	ard Bldg - Installation of	Fire	Installa	ition of Fire Protec	ction (Sprinklers)	
Dept: Zoning Note:	Status:	Approved	Revi	ewer:	Marge Schmucka	al Approval C	Oate: 12/11/2008 Ok to Issue: ✓
Dept: Building	Status:	Approved with Condition	ns Revi	ewer:	Chris Hanson	Approval D	Date: 12/16/2008
	Status:	Approved with Condition	ns Revi	ewer:	Chris Hanson	Approval D	Date: 12/16/2008 Ok to Issue: ✓
Note:		••				Approval D	
Note: 1) Equipment must be	installed in o	compliance with the manu	ıfacturer's s	specific	cations		Ok to Issue:
Note: 1) Equipment must be 2 2) All penetratios through	installed in our state of the contract of the	compliance with the manu	nfacturer's s	specific	cations		Ok to Issue:
Note: 1) Equipment must be a constant of the c	installed in our state of the contract of the	compliance with the manuemblies must be protected on 712.	nfacturer's s	specific	cations firestop system in	istalled in accordanc	Ok to Issue:
Note: 1) Equipment must be a constant of the c	installed in one of the control of t	compliance with the manuemblies must be protected on 712.	nfacturer's s d by an app	specific proved ewer:	firestop system in Capt Greg Cass	istalled in accordanc	Ok to Issue: ee with ASTM 814 Date: 12/11/2008
Note: 1) Equipment must be a constant of the c	installed in oragin rated ass C 2003 Section Status: drawings " s	compliance with the manuemblies must be protected on 712. Approved with Condition	nfacturer's s d by an app ns Revi	specific proved ewer:	cations firestop system in Capt Greg Cass	Approval D	Ok to Issue: ee with ASTM 814 Date: 12/11/2008
Note: 1) Equipment must be in a constant of the constant of th	installed in oragh rated ass 2 2003 Section Status: drawings " seprinkler system required.	compliance with the manuemblies must be protected on 712. Approved with Condition hall be provided to the firm	d by an apple of the second of	proved ewer: ob com d contr	cations firestop system in Capt Greg Cass	Approval D	Ok to Issue: ee with ASTM 814 Date: 12/11/2008
Note: 1) Equipment must be in a compliance letters a complete source suppose in the complete	installed in origh rated associated Status: drawings " s Sprinkler system required. olier should	compliance with the manuemblies must be protected on 712. Approved with Condition thall be provided to the firstems shall be reviewed by	d by an apple of the second of	ewer:	cations firestop system in Capt Greg Cass	Approval D	Ok to Issue: ee with ASTM 814 Date: 12/11/2008

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 Final inspection required at completion of work.

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

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

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

Signature of Applicant/Designee Date

Date

CBL: 053 D007001 **Building Permit #:** 08-1538

Signature of Inspections Official

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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: 22	BRAMHALL STREET PORTLA	AND ME								
Total Square Footage of Proposed Structure	Square Footage of Lot									
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 53 D 001 Owner: MAINE MEDICAL CONTER Telephone:										
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: 207 - 657 5646 DEAN F ALLYN INC PO. BOX 709 GRAY, ME 04039	Cost Of Work: \$ 42,800.00 Fee: \$ 450.00								
Current legal use (i.e. single family) HOSPITAL If vacant, what was the previous use? Proposed Specific use: PATIENT CARE Is property part of a subdivision? INSTAURTION OF FIRE PROTECTION (SPRINKLERS) IN THE ZND FLOOR OF THE RICHARDS BLDG AT THE MMC HOSPITAL										
IN THE ZMD FLOOR OF TH	te lacitatos bido iti ite	MMC HOSPITAL								
Contractor's name, address & telephone: Who should we contact when the permit is rea Mailing address:	ndy: JAMES VYHTE Phone: 207-657-5646	MMC HOSPITAL								
Contractor's name, address & telephone: Who should we contact when the permit is rea Mailing address: Please submit all of the information out	ndy: JAMES VYHTE Phone: 207-657-5646 DEAN & NLYN, INC P.D. BOX 709 GRAY, ME 04039 tlined in the Commercial Application									
Contractor's name, address & telephone: Who should we contact when the permit is rea Mailing address: Please submit all of the information out Failure to do so will result in the autom In order to be sure the City fully understands the fur request additional information prior to the issuance other applications visit the Inspections Division on-	ndy: JAMES VYHTE Phone: 2-7-657-5646 PEAN & NLYN, INC P.D. BEX 759 GRAY, ME 04039 tlined in the Commercial Application atic denial of your permit. all scope of the project, the Planning and Develop of a permit. For further information or to downless	Checklist. oment Department may load copies of this form and								
Contractor's name, address & telephone: Who should we contact when the permit is rea Mailing address:	Phone: 207-657-5646 Phone: 20	Checklist. Oment Department may load copies of this form and aspections Division office, e proposed work and that I have plicable laws of this jurisdiction.								

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

FIRE PROTECTION · SPECIAL HAZARD

P.O. Box 709 • 32 Lewiston Road • Bldg. 1C Gray, ME 04039-0709 207/657-5646 • fax 657-5647

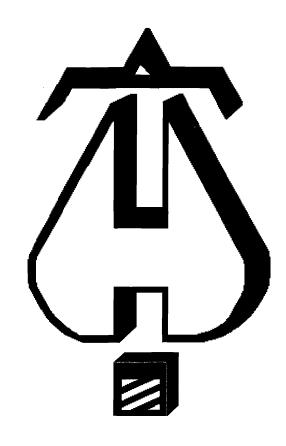
LETTER	OF	TRANSMITTAL
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DONNA (PORTLAND BLOG DERT)

ATTENTION

C818

то Р	ortland	City 1	tall (Plan	REVIEW)	SIMN	ILLER SYSTEM	PERMIT
2	80 CANE	10651 GT	Foom 315	3RD FIERL	PLEASE	FIND ENCLOS	ED -
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. . . Fire Protection by Computer Design

DEAN & ALLYN, INC. 32 LEWISTON ROAD BUILDING 1C P.O. BOX 709 GRAY, ME 04039 207-657-5646

Job Name : MMC 2CND FLOOR RICHARDS

Building : Richards Building

Location : Maine Medical Center-22 Bramhall St-Portland, Me

System: WX1

Contract: C0810818
Data File: MMC---2C.WX1

Hydraulic Design Information Sheet

Loc Bui Con Cal Con	ne - Second Floor Fire Protection Upgrade Date - 11/7/08 cation - Maine Medical Center-22 Bramhall St-Portland, Me clding - Richards Building System No WX1 ctractor - Dean & Allyn, Inc Contract No C0810818 culated By - James R White Drawing No 1 of 1 cstruction: () Combustible (X) Non-Combustible Ceiling Height - 8'-0" cupancy - Hospital- PATIENT HOLDING ROOM
S Y S T E M	(X) NFPA 13 (X) Lt. Haz. Ord.Haz.Gp. () 1 () 2 () 3 () Ex.Haz. () NFPA 231 () NFPA 231C () Figure Curve Other Specific Ruling Made By Date Area of Sprinkler Operation - 12 HEADS System Type Sprinkler/Nozzle Density1 (X) Wet Make VIKING
D E S I G N	Density1 (X) Wet Make VIKING Area Per Sprinkler - 138 () Dry Model VK462 Elevation at Highest Outlet - 8'-0" () Deluge Size 1/2" Hose Allowance - Inside - 100 () Preaction K-Factor 5.6 Rack Sprinkler Allowance - 0 () Other Temp.Rat.155 deg Hose Allowance - Outside - 0 Note SAFETY MARGIN = 78.04 PSI - LARGEST ROOM +2 (12 HEADS)
	culation Flow Required - 347.20 Press Required - 81.76 mary C-Factor Used: 120 Overhead 120 Underground
W A T E R S U P P L Y	Water Flow Test: Pump Data: Tank or Reservoir: Date of Test - 10/11/07 Cap Time of Test - Rated Cap Elev Static Press - 170 @ Press - Residual Press - 75 Elev Well Flow - 1160 Proof Flow Elevation - 0 Location - RICHARDS FIRE PUMP Source of Information - ANNUAL PUMP TEST
C O M M	Commodity N/A Class Location Storage Ht. N/A Area Aisle W. Storage Method: Solid Piled % Palletized % Rack
S F T F O C	A () Mult. Row () Open Shelf
A G E	Longitudinal N/A Transverse N/A Horizontal Barriers Provided: N/A

Fittings Used Summary

DEAN & ALLYN, INC.
MMC 2CND FLOOR RICHARDS

	& ALLYN, INC. 2CND FLOOR RICHARDS																		ge 2 ite 1	110308	
Fitting L Abbrev	egend Name	1/2	3/4	1	11/4	1½	2	2½	3	3½	_4	5	6	8	10	12	.14	16	18	20	24
В	Generic Butterfly Valve	0	0	0	0	0	0	7	10	0	12	9	10	12	19	21	0	0	0	0	0
E	90' Standard Elbow	2	2	2	3	4	5	6	7	8	10	12	14	18	22	27	35	40	45	50	61
Fsp	Flow Switch Potter VSR	Fittin	ig gener	ates a Fig	xed Los	s Basec	on Flow	/													
G	Generic Gate Valve	0	0	0	0	1	1	1	1	1	2	2	3	4	5	6	7	8	10	11	13
Mbb	B Ball Milw BB-SC100			2.25	2	2.5	2.25	10													
N	CPVC 90'Ell Harvel-Spears	7	7	7	8	9	11	12	13	0	0	0	0	0	0	0	0	0	0	0	0
0	CPVC Tee - Branch	3	3	5	6	8	10	12	15	0	0	0	0	0	0	0	0	0	0	0	0
S	Generic Swing Check Valve	4	5	5	7	9	11	14	16	19	22	27	32	45	55	65	76	87	98	109	130
T	90' Flow thru Tee	3	4	5	6	8	10	12	15	17	20	25	30	35	50	60	71	81	91	101	121

Pressure / Flow Summary - STANDARD

DEAN & ALLYN, INC. MMC 2CND FLOOR RICHARDS

Page 3 Date 110308

Node No.	Elevation	K-Fact	Pt Actual	Pn	Flow Actual	Density	Area	Press Req.	
D001	16.0	5.6	7.0	na	14.82	0.1	115	7.0	
D002	16.0	5.6	7.0	na	14.82	0.1	115	7.0	
D003	30.083	5.6	8.03	na	15.87	0.1	80	7.0	
D004	30.083	5.6	8 .28	na	16.11	0.1	80	7.0	
D005	30.083	5.6	12.94	na	20.15	0.1	96	7.0	
D006	30.083	5.6	12.68	na	19.94	0.1	94	7.0	
D007	30.083	5.6	13.33	na	20.45	0.1	94	7.0	
D008	30.083	5.6	15.81	na	22.26	0.1	120	7.0	
D009	30.083	5.6	23.31	na	27.04	0.1	80	7.0	
D010	30.083	5.6	23.22	na	26.99	0.1	80	7.0	
D011	30.083	5.6	18.21	na	23.9	0.1	138	7.0	
D012	30.083	5.6	19.36	na	24.64	0.1	138	7.0	
27	31.083	0.0	12.78	na	21.01	0.1	100	7.0	
28	31.083		13.32	na					
29	31.083		15.87	na					
26	31.083		7.11	na					
26 25	31.083		8.21	na					
24	31.083	•	7.95	na					
24 22	31.083		18.54						
23	31.083		19.52	na					
5	31.083		23.37	na .					
17	31.083		23.42	na					
17			23.42	na					
18	31.083		23.59	na					
19	31.083		24.03	na					
20	31.083		43.22	па					
21	31.083		43 .31	na					
8	31.083		4 9.81	na					
15	31.083		63.14	na					
16	31.083		68.78	na					
14B	11.5		77.31	na					
1	31.083		6.88	na					
2	31.083		7.39	na					
3	31.083		8.53	na					
4	31.083		12.92	na					
6	31.083		23.5	na					
7	31.083		24.81	na					
9	31.083		4 9.4	na					
10	31.083		4 7.58	na					
11	31.083		51.58	na					
12	31.083		54.73	na	100.0				
13	31.083		68.35	na					
14	11.5		76.91	na					
14A	3.0		81.24	na					
TEST	3.0		8 1.76	na					

The maximum velocity is 27.63 and it occurs in the pipe between nodes 4 and 5

Hyd.	Qa	Dia.		ting	Pipe	Pt	Pt	
Ref. Point	Qt	"C" Pf/Ft	Eq	or v. Ln .	Ftng's Total	Pe Pf	Pv Pn	****** Notes *****
							<u> </u>	
D001	29.63	1.049 120	1T	5.0 0.0	1.000 5.000	7.000 6.099		K Factor = 5.60
to _EQ01	29.63	0.2693		0.0	6.000	1.616		Vel = 11.00
	0.0 29.63					14.715		K Factor = 7.72
D002	29.63	1.049	1E	2.0	1.000	7.000		K Factor = 5.60
to EQ02	29.63	120 0.2693		0.0	2.000 3.000	6.099 0.808		Vel = 11.00
	0.0 29.63					13.907		K Factor = 7.95
D001	14.82	1.101	1N	7.0	1.000	7.000		K Factor = 5.60
to 1	14.82	150 0.0390		0.0 0.0	7.000 8.000	-0.433 0.312		Vel = 4.99
	0.0							
	14.82	1.101		7.0	1.000	6.879 7.000		K Factor = 5.65 K Factor = 5.60
D002 to	15.04	150	1N	0.0	7.000	-0.433		K Factor - 5.00
26	15.04	0.0674		0.0	8.000	0.539		Vel = 5.07
	0.0 15.04					7.106		K Factor = 5.64
D003	15.87	1.101	1N	7.0	1.000	8.031		K Factor = 5.60
to 24	15.87	150 0.0444		0.0	7.000 8.000	-0.433 0.355		Vel = 5.35
	0.0 15.87					7.953		V Footor - F.62
D004	16.11	1.101	1N	7.0	1.000	7.933 8.279		K Factor = 5.63 K Factor = 5.60
to		150		0.0	7.000	-0.433		
25	16.11 0.0	0.0455		0.0	8.000	0.364		Vel = 5.43
	16.11					8.210		K Factor = 5.62
D005 to	20.15	1.101 150	10	5.0 0.0	1.000 5.000	12.943 -0.433		K Factor = 5.60
4	20.15	0.0690		0.0	6.000	0.414		Vel = 6.79
	0.0 20.15					12.924		K Factor = 5.61
D006	19.94	1.101	1N	7.0	1.000	12.675		K Factor = 5.60
to 27	19.94	150 0.0676		0.0 0.0	7.000 8.000	-0.433 0.541		Val = 6.70
	0.0	0.0070		0.0	0.000	0.541		Vel = 6.72
	19.94					12.783		K Factor = 5.58
D007 to	20.45	1.101 150	10	5.0 0.0	1.000 5.000	13.332 -0.433		K Factor = 5.60
28	20.45	0.0708		0.0	6.000	0.425		Vel = 6.89
	0.0 20.45					13.324		K Factor = 5.60
D008	22.26	1.101	10	5.0	1.000	15.806		K Factor = 5.60
to 29	22.26	150 0.0830		0.0 0.0	5.000 6.000	-0.433		
20	22.20	0.0000		0.0	0.000	0.498		Vel = 7.50

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Hyd. Ref.	Qa	Dia. "C"		ting or	Pipe Ftng's	Pt Pe	Pt Pv	****** Notes *****
Point	Qt	Pf/Ft		v. Ln.	Total	Pf	Pn	
	0.0 22.26					15.871		K Factor = 5.59
D009 to	27.04	1.101 150	10	5.0 0.0	1.000 5.000	23.307 -0.433		K Factor = 5.60
_18	27.04 0.0	0.1188		0.0	6.000	0.713		Vel = 9.11
D010	27.04 26.99	1.101	10	5.0	1.000	23.587		K Factor = 5.57 K Factor = 5.60
to 6	26.99	150 0.1185		0.0	5.000 6.000	-0.433 0.711		Vel = 9.10
	0.0 26.99				4.000	23.502		K Factor = 5.57
D011 to 22	23.90 23.9	1.101 150 0.0946	1 N	7.0 0.0 0.0	1.000 7 <u>.</u> 000 8.000	18.214 -0.433 0.757		K Factor = 5.60 Vel = 8.05
	0.0 23.90	0.0940		0.0	0.000	18.538		K Factor = 5.55
D012 to	24.64	1.101 150	10	5.0 0.0	1.000 5.000	19.355 -0.433		K Factor = 5.60
23	24.64 0.0	0.1000		0.0	6.000	0.600		Vel = 8.30
	24.64					19.522		K Factor = 5.58
27 to 28	19.94 19.94	1.101 150 0.0676		0.0 0.0 0.0	8.000 0.0 8.000	12.783 0.0 0.541		Vel = 6.72
28 to	20.44	1.101 150	10	5.0 0.0	5.200 5.000	13.324		VGI - 0.72
29 29	40.38 22.27	0.2497 1.101	10	0.0 5.0	10.200 9.500	2.547 15.871		Vel = 13.61
to 19	62.65	150 0.5626	10	0.0 0.0	5.000 14.500	0.0 8.157		Vel = 21.11
	0.0 62.65					24.028		K Factor = 12.78
26 to	15.04	1.101 150	10	5.0 0.0	2.000 5.000	7.106 0.0		
2	15.04 0.0	0.0401		0.0	7.000	0.281		Vel = 5.07
	15.04	4.404			0.000	7.387		K Factor = 5.53
25 to 3	16.11 16.11	1.101 150 0.0457	10	5.0 0.0 0.0	2.000 5.000 7.000	8.210 0.0 0.320		Vel = 5.43
	0.0 16.11			3.3		8.530		K Factor = 5.52
24 to 3	15.87 15.87	1.101 150 0.0444	10	5.0 0.0 0.0	8.000 5.000 13.000	7.953 0.0 0.577		Vel = 5.35
	0.0	<u> </u>			13.00	0.511		VEI ~ 0.30

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Hyd. Ref. Point	Qa Qt	Dia. "C" Pf/Ft	Fitting or	Pipe Ftng's	Pt Pe Pf	Pt Pv Pn	****** Notes *****
			Eqv. Ln.	Total			
	15.87				8.530		K Factor = 5.43
22	23.90	1,101	0.0	10.410	18.538		7.7 40.001
to	20.00	150	0.0	0.0	0.0		
_23	23.9	0.0945	0.0	10.410	0.984		Vel = 8.05
23	24.64	1.101	10 5.0	10.080	19.522		
to 7	48.54	150 0.3509	0.0 0.0	5.000 15.080	0.0 5.291		Vel = 16.36
	0.0	0.0000	3.0	10.000	0.201		10.00
	48.54				24.813		K Factor = 9.74
5	28.51	1.598	0.0	2.100	23.371		
to	00.54	150	0.0	0.0	0.0		Val = 4.50
17	28.51	0.0214	0.0	2.100	0.045		Vel = 4.56
17 to	0.0	1.598 150	0.0 0.0	8.000 0.0	23.416 0.0		
18	28.51	0.0214	0.0	8.000	0.171		Vel = 4.56
18	27.04	1.598	0.0	6.000	23.587		
to		150	0.0	0.0	0.0		V 1 0 00
19	55.55	0.0735	0.0	6.000	0.441		Vel = 8.89
19 to	62.65	1.598 150	1O 8.0 0.0	56.700 8.000	24.028 0.0		
20	118.2	0.2966	0.0	64.700	19.193		Vel = 18.91
20	0.0	1.598	0.0	0.310	43.221		
to	440.0	150	0.0	0.0	0.0		10.04
_21	118.2	0.2968	0.0	0.310	0.092		Vel = 18.91
21 to	0.0	1.598 150	1O 8.0 0.0	6.370 8.000	43.313 0.0		
10	118.2	0.2967	0.0	14.370	4.263		Vel = 18.91
	0.0						
	118.20				47.576		K Factor = 17.14
8	150.24	1.598	20 16.0	12.830	49.807		
to 15	150.24	150 0.4624	0.0 0.0	16.000 28.830	0.0 13.331		Vel = 24.03
15	0.0	2.469	3E 18.0	6.450	63.138		VCI 24.00
to		120	1B 7.0	25.000	3.000		* Fixed loss = 3
16	150.24	0.0840	1Fsp 0.0	31.450	2.641		Vel = 10.07
16	0.0	6.065	1E 14.0	31.100	68.779		
to 14B	150.24	120 0.0011	0.0 0.0	14.000 45.100	8.481 0.048		Vel = 1.67
14B	0.0	6.065	6E 84.0	91.000	77.308		1.07
to		120	2T 60.0	147.000	3.681		
14A	150.24	0.0011	1G 3.0	238.000	0.252		Vel = 1.67
	0.0 150.24				81.241		K Factor = 16.67
1	14.82	1.101	10 5.0	8.000	6.879		
to	14.00	150	0.0	5.000	0.0		Val - 400
2	14.82	0.0391	0.0	13.000	0.508		Vel = 4.99
to	15.04	1.101 150	0.0 0.0	8.000 0.0	7.387 0.0		
3	29.86	0.1429	0.0	8.000	1.143		Vel = 10.06

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Hyd. Ref.	Qa	Dia. "C" Pf/Ft	Fitting or	Pipe Ftng's	Pt Pe	Pt Pv Pn	******	lotes **	****
Point	Qt		Eqv. Ln		Pf				
3	31.98	1.101	0.0	8.000	8.530				
to 4	61.84	150 0.5492	0.0 0.0	0.0 8.000	0.0 4.394		Vel = 20.84		
4 to	20.15	1.101 150	1O 5.0 0.0	6.290 5.000	12.924 0.0				
5	81.99 -28.51	0.9253 1.598	0.0	11.290 1.910	23.371		Vel = 27.63		
to 6	53.48	150 0.0686	0.0	0.0 1.910	0.0 0.131		Vel = 8.56		
6 to 7	26.99 80.47	1.598 150 0.1457	0.0 0.0 0.0	9.000 0.0 9.000	23.502 0.0 1.311		Vel = 12.87		
7 to	48.53	1.598 150	1O 8.0 0.0	63.660 8.000	24.813 0.0				
8 8 to	129.0 -150.24	0.3488 1.598 150	0.0 10 8.0 0.0	71.660 24.910 8.000	24.994 49.807 0.0		Vel = 20.64		Anna Selection (Consumers
9	-21.24 0.0	-0.0124 1.598	0.0 0.0 2N 18.0	32.910 129.120	-0.408 49.399		Vel = 3.40		
to 10	-21.24	150 -0.0124	0.0 0.0	18.000 147.120	0.0 -1.823		Vel = 3.40		
10 to 11	118.20 96.96	1.598 150 0.2057	1O 8.0 0.0 0.0	11.450 8.000 19.450	47.576 0.0 4.000		Vel = 15.51		
11 to	0.0	1.598 150	1N 9.0 0.0	6.330 9.000	51.576 0.0		Ver - 10.01		
12 12	96.96 100.00	0.2056 2.067	0.0 3E 15.0	15.330 4.020	3.152 54.728		Vel = 15.51 Qa = 100		
to 13	196.96	120 0.3293	1Mbb 2.25 1S 11.0 1Fsp 0.0	28.250 32.270	3.000 10.625		* Fixed loss = Vel = 18.83	3	
13	0.0	6.065 120	1E 14.0 0.0	31.100 14.000	68.353 8.481				
14	196.96 0.0	0.0018 6.065 120	7E 98.0 2T 60.0	45.100 207.000 164.000	0.079 76.913 3.681		Vel = 2.19		
0 14A	196.96	0.0017	2G 6.0	371.000	0.647		Vel = 2.19		
14A to TEST	150.24 347.2	6.065 120 0.0050	2E 28.0 1T 30.0 1G 3.0 1S 32.0	12.000 93.000 105.000	81.241 0.0 0.521		Vel = 3.86		
	0.0 347.20				81.762		K Factor = 38	.40	