

## Accessibility Building Code Certificate

Designer:	MARK M. WILCOX				
Address of Project:	MAC 22 BRXMHALL ST				
Nature of Project:	RICHTEDS WING RG				
	INTERIOR RENOVATION				

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.

THE STERED ARCHIER	Signature: Herek Welcer					
* (MARK M. WILCOX No. 1299	Title:	PRINCIPA				
(SEAL)	Firm:	WINTON SCOTT ARCH ITELTS				
COF MM	Address:	5MILK ST				
		POTTLAND, ME 04101				
	Phone:	774.4811 845 2#				

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

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	Ce	ertificate of D	esign Appl	ication
From Des	signer:	WARE WILCOX,	winton sco	TARCHITECTS
Date:		UTTRCH 20, 200 9		
Job Name		· · ·		
2		NMC 22 BRAN		_
Address 0				
		2003 Internationa project was designed to t	he building code crite	ria listed below:
Building Co	ode & Year 10 L 100L	LUse Group Classification	on (s)	STAL
Type of Co	IB			
	e filme all an a state and a	and a state of the state of the state		
Is the Struct	ure mixed use?	If yes, separated or non se	eparated or non separate	ed (section 302.3)
Geotechnica	d/Soils report required? (See	e Section 1802.2)		
Stanotanal T	Design Calculations		NA	Live load reduction
	Submitted for all structur	-1 (10( 1 - 10( 11)		Roof <i>live</i> loads (1603.1.2, 1607.11)
	Submitted for all structur	al members (106.1 – 106.11)		Roof snow loads (1603.7.3, 1608)
	ds on Construction Docu			Ground snow load, Pg (1608.2)
Uniformly dis Floor Are	tributed floor live loads (7603.13 a Use Loads S			If $P_g > 10 \text{ psf}$ , flat-roof snow load $p_f$
<u> </u>			If $P_g > 10$ psf, snow exposure factor, $G_g$	
	<u>.</u> .			If $P_g > 10$ psf, snow load importance factor, $f_c$
· · ·				Roof thermal factor, G(1608.4)
<u> </u>				Sloped roof snowload, A(1608.4)
Wind loads	(1603.1.4, 1609)			Seismic design category (1616.3)
	Design option utilized (1609.	1.1, 1609.6)		Basic seismic force resisting system (1617.6.2)
	Basic wind speed (1809.3)			Response modification coefficient, <sub>RJ</sub> and
<u></u>	Building category and wind i tab	mportance Factor, j., le 1604.5, 1609.5)		deflection amplification factor <sub>Cl</sub> (1617.6.2)
	Wind exposure category (160	)9.4)		Analysis procedure (1616.6, 1617.5)
	Internal pressure coefficient (AS		·····	Design base shear (1617.4, 16175.5.1)
	Component and cladding pressu Main force wind pressures (7603		Flood loads (1	1803.1.6, 1612)
Earth design	n data (1603.1.5, 1614-1623)		NA	_ Flood Hazard area (1612.3)
NA	Design option utilized (1614.			Elevation of structure
	Seismic use group ("Categor	-	Other loads	
	Spectral response coefficient	s, SDs & SD1 (1615.1)	NA	_ Concentrated loads (1607.4)
	Site class (1615.1.5)		·	Partition loads (1607.5)
			<u> </u>	<u>Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404</u>

City of Portland, Maine - Bu	•		Permit No: 09-0223	Date Applied For: 03/23/2009	CBL: 053 D007001
389 Congress Street, 04101 Tel					
			)wner Address: 22 BRAMHALL S	۲	Phone:
22 BRAMHALL ST R-9 MAINE MEDICAL CENTER Business Name: Contractor Name:			Contractor Address:		Phone
Dusiness Ivanie.	Langford & Low, Inc.		PO Box 662 Portla	nd	(207) 797-5141
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Com	mercial	
Proposed Use: Commercial - Maine Medical R-9 new nurses station	- Interior renovations to R-9		I Project Description: r renovations to R-	9 w/ new nurses stat	ion
Dept: Zoning Status: Note:	Approved	Reviewer:	Marge Schmucka	l Approval D	eate: 03/23/2009 Ok to Issue: ☑
Dept: Building Status: Note:	Approved with Conditions	s Reviewer:	Jeanine Bourke	Approval D	Pate: 04/03/2009 Ok to Issue: ☑
<ol> <li>Separate permits are required for need to be submitted for approximately</li> </ol>			larm or HVAC or e	exhaust systems. Sep	
<ol> <li>Application approval based upo and approval prior to work.</li> </ol>	on information provided by	applicant. Any	leviation from app	roved plans requires	s separate review
Dept: Fire Status: Note:	Approved with Conditions	s Reviewer:	Capt Keith Gautr	eau Approval D	Pate: 03/26/2009 Ok to Issue: 🗹
1) A separate Sprinkler System Pe	ermit is required per the Fire	e Department.			
2) A separate Fire Alarm System	Permit is required per the F	ire Department.			
3) Fire Alarm system shall be mai If system is to be off line over 4 Dispatch notification required 8	4 hours a fire watch shall be	e in place.			
4) No means of egress shall be aff	ected by this renovation				
5) Sprinkler protection shall be m Where the system is to be shut system has been placed back in	aintained. down for maintenance or re	pair, the system	shall be checked a	t the end of each day	y to insure the
6) Emergancy lights are required t	to be tested at the electrical	panel.			
7) Emergancy lights and exit signs	s are required				
8) The Fire alarm and Sprinkler sy Compliance letters are required		a licensed contr	actor[s] for code c	ompliance.	
9) A single source supplier should	be used for all through per	netrations.	and and the second s		
10 The fire alarm system shall con Compliance letter is required.	pply with NFPA 72.		4 · · · · · · · · · · · · · · · · · · ·		
11 All construction shall comply w	vith NFPA 101				
12 The sprinkler system shall be in		NFPA 13.	mol		
				المعتدين	