

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that GREATER PORTLAND TRANSIT
DISTRICT

Located At 91 ST JOHN ST

CBL: 068- B-012-001

Job ID: 2012-11-5408-ALTCOMM

has permission to Remove existing vehicle lifts in maintenance building and replace with new, includes new concrete & reinforcement

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

A handwritten signature in cursive script that reads "Jeannie Bonke".

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

Foundation/Rebar

Close In Elec/Plmb/Frame prior to insulate or gyp

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

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Director of Planning and Urban Development
Jeff Levine

Job ID: 2012-11-5408-ALTCOMM Located At: 91 ST JOHN ST

CBL: 068- B-012-001

Conditions of Approval:

Building

1. Application approval based upon information provided by the applicant or design professional. Any deviation from approved plans requires separate review and approval prior to work.
2. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm, HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
3. A final special inspection report shall be submitted prior to the final inspection or issuance of a certificate of occupancy. This report must demonstrate all deficiencies and corrective measures that were taken.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-11-5408- ALTCOMM	Date Applied: 11/16/2012	CBL: 068- B-012-001	
Location of Construction: 91 ST JOHN ST / 114 VALLEY STREET	Owner Name: GREATER PORTLAND TRANSIT DISTRICT	Owner Address: 114 VALLEY STREET PORTLAND, MAINE 04102	Phone: 774-0351
Business Name: RTP	Contractor Name: LAMOUNTAIN BROS., INC.- Dan Moore	Contractor Address: 37 FEDERAL HILL ROAD OXFORD, MA 01540	Phone: 508-889-4654
Lessee/Buyer's Name:	Phone:	Permit Type: Building ALT	Zone: I-Mb
Past Use: Regional Transportation District – storage & repair & fueling of fleet vehicles with offices	Proposed Use: Same: storage & repair & fueling of fleet vehicles with offices – remove existing vehicle lifts in existing maintenance bldg. and replace with new	Cost of Work: \$624,000,000.00 Fire Dept: 11/24/12 Signature: <i>[Signature]</i> (50)	CEO District: Inspection: Use Group: B/S-1 Type: 2B <i>[Signature]</i> Signature: <i>[Signature]</i>
Proposed Project Description: remove existing vehicle lifts and replace with new		Pedestrian Activities District (P.A.D.) 12/4/12	
Permit Taken By: Gayle		Zoning Approval	

<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: <i>OK - [Signature]</i> <i>11/20/12</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in Dist or Landmark <input type="checkbox"/> Does not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>
	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 appication 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

entered 708

2012-11-5408 68



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.

91 ST JOHN I-MB

Location/Address of Construction: 114 VALLEY ST. / 91 ST. JOHN ST.			
Total Square Footage of Proposed Structure/Area EXISTING STRUCTURE, PROPOSED AREA = 0		Square Footage of Lot 131513	
Tax Assessor's Chart, Block & Lot Chart# 068 Block# B Lot# 12	Applicant *must be owner, Lessee or Buyer* Name GREATER PORTLAND TRANSIT DISTRICT Address 114 VALLEY ST. City, State & Zip PORTLAND, ME 04102		Telephone: 207-774-0351
Lessee/DBA (If Applicable) N/A	RECEIVED NOV 16 2012 Dept. of Building Inspection City of Portland Maine	Owner (if different from Applicant) Name SAME Address _____ City, State & Zip _____	Cost Of Work: \$ 623,657.00 C of O Fee: \$ _____ Total Fee: \$ 6,260.00
Current legal use (i.e. single family) MOTOR VEHICLE INSPECTION & REPAIR, OFFICES If vacant, what was the previous use? N/A Proposed Specific use: UNCHANGED Is property part of a subdivision? NO If yes, please name _____ Project description: REMOVAL OF EXISTING VEHICLE LIFTS IN EXISTING MAINTENANCE BUILDING AND REPLACEMENT WITH NEW LIFTS.			
Contractor's name: LA MOUNTAIN BROS., INC.		508 889 4654	
Address: 37 FEDERAL HILL RD.		Call Dan	
City, State & Zip: OXFORD, MA 01540		508-987-5322 Telephone:	
Who should we contact when the permit is ready: DANIEL MOORE		508-889-4654 Telephone:	
Mailing address: SAME			

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 www.portlandmaine.gov, 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: **11-16-12**

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



Certificate of Design Application

From Designer:

PINKHAM & GREER CONSULTING ENGINEERS

Date:

11/14/12

Job Name:

VEHICLE LIFT REPLACEMENT PROJECT

Address of Construction:

114 VALLEY ST. / 91 ST. JOHN ST.

2009 International Building Code

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

Building Code & Year 2009 IBC Use Group Classification (s) B/S1

Type of Construction TYPE II B (EXISTING BUILDING)

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IRC EXISTING SYSTEM

Is the Structure mixed use? YES If yes, separated or non separated or non separated (section 302.3) SEPARATED

Supervisory alarm System? N/A Geotechnical/Soils report required? (See Section 1802.2) NO

Structural Design Calculations

N/A Submitted for all structural members (106.1 – 106.11)

Design Loads on Construction Documents (1603)

Uniformly distributed floor live loads (7603.11, 1807)

Floor Area Use	Loads Shown
<u>N/A</u>	

Wind loads (1603.1.4, 1609)

N/A Design option utilized (1609.1.1, 1609.6)

| Basic wind speed (1809.3)

| Building category and wind importance Factor, w table 1604.5, 1609.5)

| Wind exposure category (1609.4)

| Internal pressure coefficient (ASCE 7)

| Component and cladding pressures (1609.1.1, 1609.6.2.2)

| Main force wind pressures (7603.1.1, 1609.6.2.1)

Earth design data (1603.1.5, 1614-1623)

N/A Design option utilized (1614.1)

| Seismic use group ("Category")

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

| Site class (1615.1.5)

N/A Live load reduction

| Roof live loads (1603.1.2, 1607.11)

| Roof snow loads (1603.7.3, 1608)

| Ground snow load, P_g (1608.2)

| If $P_g > 10$ psf, flat-roof snow load P_f

| If $P_g > 10$ psf, snow exposure factor, C_e

| If $P_g > 10$ psf, snow load importance factor, I_s

| Roof thermal factor, C_t (1608.4)

| Sloped roof snowload, P_s (1608.4)

| Seismic design category (1616.3)

| Basic seismic force resisting system (1617.6.2)

| Response modification coefficient, R and deflection amplification factor, C_d (1617.6.2)

| Analysis procedure (1616.6, 1617.5)

| Design base shear (1617.4, 1617.5.1)

Flood loads (1803.1.6, 1612)

N/A Flood Hazard area (1612.3)

N/A Elevation of structure

Other loads

N/A Concentrated loads (1607.4)

| Partition loads (1607.5)

| Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)



Certificate of Design

Date: 11/14/12

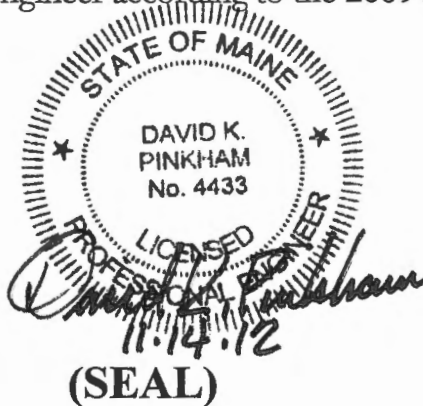
From: DAVID K. PINKHAM, P.E.

These plans and / or specifications covering construction work on:

VEHICLE LIFT REPLACEMENT PROJECT

GREATER PORTLAND TRANSIT DISTRICT, 114 VALLEY ST., PORTLAND, ME

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the **2009 International Building Code** and local amendments.



Signature: David K. Pinkham

Title: PRINCIPAL

Firm: PINKHAM & GREER

Address: 23 VANNAH AVE.

PORTLAND, ME 04103

Phone: 207-781-5242

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



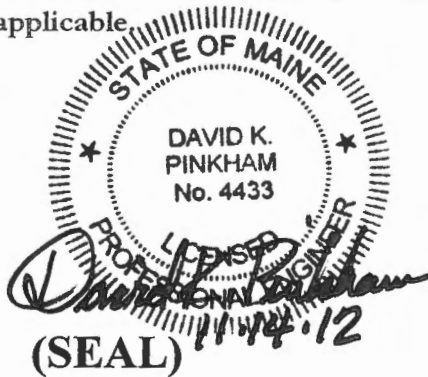
Accessibility Building Code Certificate

Designer: DAVID K. PINKHAM, P.E.

Address of Project: 114 VALLEY ST./91 ST. JOHN ST.

Nature of Project: REPLACEMENT OF EXISTING VEHICLE
LIFTS IN EXISTING BUILDING

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: David K. Pinkham

Title: PRINCIPAL

Firm: PINKHAM & GREEZ

Address: 28 VANNAH AVE.
PORTLAND, ME 04103

Phone: 207-781-5242

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/14/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Phone: (508) 987-0333 Fax: 508-987-0063

OXFORD INSURANCE AGENCY INC
P O BOX 370
OXFORD MA 01540

CONTACT NAME: **Oxford Insurance Agency Inc.**PHONE (A/C, No, Ext): **(508) 987-0333**FAX (A/C, No): **(508) 987-5517**

E-MAIL ADDRESS:

PRODUCER CUSTOMER ID: **14049**

INSURED
LAMOUNTAIN BROTHERS INC.
37 FEDERAL HILL ROAD
OXFORD, MA 01540

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : **Admiral Insurance Co.**INSURER B : **Commerce Insurance Co.**INSURER C : **Admiral Insurance Co.**INSURER D : **Commerce & Industry Insurance Co.**

INSURER E :

INSURER F :

COVERAGES

CERTIFICATE NUMBER: 76342

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY			FEIECC1083800	11/01/12	11/01/13	EACH OCCURRENCE	\$ 2,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000	
	<input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED. EXP (Any one person)	\$ 5,000	
	<input checked="" type="checkbox"/> XCU INCLUDED						PERSONAL & ADV INJURY	\$ 2,000,000	
	<input checked="" type="checkbox"/> BLANKET ADDITIONAL INS						GENERAL AGGREGATE	\$ 3,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$ 3,000,000
	POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							\$	
B	AUTOMOBILE LIABILITY			BDTJWL	11/01/12	11/01/13	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	<input checked="" type="checkbox"/> HIRED AUTOS							\$	
	<input checked="" type="checkbox"/> NON-OWNED AUTOS							\$	
	<input checked="" type="checkbox"/> MCS90 END INCLUDED							\$	
C	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			FEIEXS1083900	11/01/12	11/01/13	EACH OCCURRENCE	\$ 5,000,000	
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 5,000,000	
	DEDUCTIBLE							\$	
	RETENTION \$							\$	
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC5319881	09/30/12	09/30/13	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH ER	\$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N <input type="checkbox"/> N/A				E.L. EACH ACCIDENT	\$ 1,000,000	
							E.L. DISEASE-EA EMPLOYEE	\$ 1,000,000	
							E.L. DISEASE-POLICY LIMIT	\$ 1,000,000	
A	POLLUTION LIABILITY POLICY			FEIECC1083800	11/01/12	11/01/13	\$2,000,000 per Claim	\$3000000 Agg	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

City of Portland
389 Congress Street
Portland, ME 04104

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

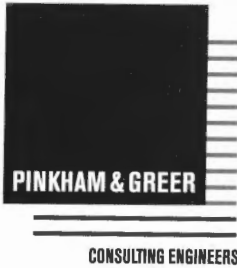
Brian M. Ravenelle
Brian M. Ravenelle

Attention:

ACORD 25 (2009/09)

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28 Vannah Avenue
Portland, Maine 04103
Tel: 207.781.5242
Fax: 207.781.4245

FIRE DEPARTMENT PERMIT REQUIREMENTS

Project: Vehicle Lift Replacement Project

Applicant: Greater Portland Transit District
114 Valley St
Portland, ME 04102
207-774-0351

Engineer: David K. Pinkham, P.E.
Pinkham & Greer Consulting Engineers
28 Vannah Ave
Portland, ME 04103
207-781-5242

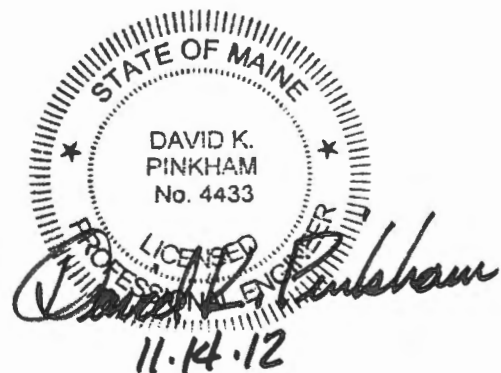
Use of Structure: Motor vehicle inspection and repair/office. IBC Group S1/B.
This is the existing use and is unchanged.

Square footage of Proposed Structure: N/A, existing vehicle lifts are being replaced with new lifts within the existing structure.

Suppression & Detection Systems: These systems exist and are unchanged.
Project has no effect on these systems.

Life Safety Plan: Existing is unchanged. Project has no effect on egress and fire separation.

Elevators: N/A





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Receipts Details:

Tender Information: Check , BusinessName: LaMountain Bros. Inc, Check Number: 248906\$6,260.00

Tender Amount: 6260.00

Receipt Header:

Cashier Id: gguertin

Receipt Date: 11/16/2012

Receipt Number: 50291

Receipt Details:

Referance ID:	8758	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	6260.00	Charge Amount:	6260.00
Job ID: Job ID: 2012-11-5408-ALTCOMM - remove existing lvehicle lists & replace			
Additional Comments: 91 St John			

Thank You for your Payment!

Statement of Special Inspections

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DEC 06 2012
Dept. of Building Inspections
City of Portland Maine

Project: *Vehicle Lift Replacement Project*
Location: *114 Valley St./91 St. John St., Portland, Maine*
Owner: *Greater Portland Transit District*

Design Professional in Responsible Charge: *David K. Pinkham, P.E.*

This *Statement of Special Inspections* is submitted as a condition for permit issuance in accordance with the Special Inspection and Structural Testing requirements of the Building Code. It includes a schedule of Special Inspection services applicable to this project as well as the name of the Special Inspection Coordinator and the identity of other approved agencies to be retained for conducting these inspections and tests. This *Statement of Special Inspections* encompass the following disciplines:

- Structural Mechanical/Electrical/Plumbing
 Architectural Other: _____

The Special Inspection Coordinator shall keep records of all inspections and shall furnish inspection reports to the Building Official and the Registered Design Professional in Responsible Charge. Discovered discrepancies shall be brought to the immediate attention of the Contractor for correction. If such discrepancies are not corrected, the discrepancies shall be brought to the attention of the Building Official and the Registered Design Professional in Responsible Charge. The Special Inspection program does not relieve the Contractor of his or her responsibilities.

Interim reports shall be submitted to the Building Official and the Registered Design Professional in Responsible Charge.

A *Final Report of Special Inspections* documenting completion of all required Special Inspections, testing and correction of any discrepancies noted in the inspections shall be submitted prior to issuance of a Certificate of Use and Occupancy.

Job site safety and means and methods of construction are solely the responsibility of the Contractor.

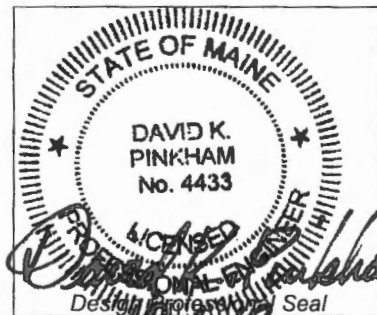
Interim Report Frequency: *Monthly* or per attached schedule.

Prepared by:

David K. Pinkham, P.E.
(type or print name)

David K. Pinkham
Signature

12/6/12
Date



Owner's Authorization:

Building Official's Acceptance:

Andy *12/06/12*
Signature Date

Signature Date

Schedule of Inspection and Testing Agencies

This Statement of Special Inspections / Quality Assurance Plan includes the following building systems:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Soils and Foundations | <input type="checkbox"/> Spray Fire Resistant Material |
| <input checked="" type="checkbox"/> Cast-in-Place Concrete | <input type="checkbox"/> Wood Construction |
| <input type="checkbox"/> Precast Concrete | <input type="checkbox"/> Exterior Insulation and Finish System |
| <input type="checkbox"/> Masonry | <input type="checkbox"/> Mechanical & Electrical Systems |
| <input type="checkbox"/> Structural Steel | <input type="checkbox"/> Architectural Systems |
| <input type="checkbox"/> Cold-Formed Steel Framing | <input type="checkbox"/> Special Cases |

Special Inspection Agencies	Firm	Address, Telephone, e-mail
1. Special Inspection Coordinator David K. Pinkham, P.E.	<i>Pinkham & Greer Consulting Engineers</i>	<i>28 Vannah Ave. Portland, ME 04103</i>
2. Inspector James A. Moran III, P.E.	<i>Pinkham & Greer Consulting Engineers</i>	<i>Same</i>
3. Inspector		
4. Testing Agency To be determined, see below		
5. Testing Agency		
6. Other		

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City of Portland Maine

Note: The inspectors and testing agencies shall be engaged by the Owner or the Owner's Agent, and not by the Contractor or Subcontractor whose work is to be inspected or tested. Any conflict of interest must be disclosed to the Building Official, prior to commencing work.

As of 12/6/12, the Owner has received proposals from testing agencies and is evaluating those proposals. A single testing agency will be retained to perform field tests. Once the testing agency is selected, the Owner will notify the Building Official.

Quality Assurance Plan

Quality Assurance for Seismic Resistance

Seismic Design Category *N/A*
Quality Assurance Plan Required (Y/N) *N*

Description of seismic force resisting system and designated seismic systems:
N/A

Quality Assurance for Wind Requirements

Basic Wind Speed (3 second gust) *N/A*
Wind Exposure Category *N/A*
Quality Assurance Plan Required (Y/N) *N*

Description of wind force resisting system and designated wind resisting components:
N/A

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Dept. of Building Inspections
City of Portland Maine

Statement of Responsibility

Each contractor responsible for the construction or fabrication of a system or component designated above must submit a Statement of Responsibility.

N/A

Item	Agency # (Qualif.)	Scope
1. Shallow Foundations	1,2	<p><i>Inspect soils below slab to determine suitability.-All</i></p> <p><i>Inspect removal of unsuitable material and preparation of subgrade prior to placement of controlled fill.-ALL</i></p>
2. Controlled Structural Fill	3	<p><i>Perform modified Proctor tests (ASTM D1557) for each source of fill material.</i></p> <p><i>Inspect placement, lift thickness and compaction of controlled fill.</i></p> <p><i>Test density of each lift of fill by nuclear methods (ASTM D2922).-ALL</i></p>
		<p style="text-align: right;">RECEIVED DEC 06 2012 Dept. of Building Inspections City of Portland Maine</p>

Cast-in-Place Concrete

Item	Agency # (Qualif.)	Scope
1. Mix Design	1, 2	<i>Review concrete mix design.</i>
2. Material Certification	N/A	
3. Reinforcement Installation	1, 2	<i>Inspect size, spacing, cover, positioning and grade of reinforcing steel. Verify that reinforcing bars are free of form oil or other deleterious materials. Verify that bars are adequately tied and supported on chairs or bolsters.- ALL</i>
4. Post-Tensioning Operations	N/A	
5. Welding of Reinforcing	N/A	
6. Anchor Rods	N/A	
7. Concrete Placement	1, 2, 3	<i>Inspect placement of concrete. Verify that concrete conveyance and depositing avoids segregation or contamination. Verify that concrete is properly consolidated.- SAMPLE</i>
8. Sampling and Testing of Concrete	3	<i>Test concrete compressive strength (ASTM C31 & C39), slump (ASTM C143), air-content (ASTM C231 or C173) and temperature (ASTM C1064).- SAMPLE</i>
9. Curing and Protection	1, 2	<i>Inspect curing, cold weather protection procedures.</i>
10. Other:	N/A	

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 DEC 06 2012
 Dept. of Building Inspections
 City of Portland, Maine

stertil® **KRON**

Hydraulic vehicle lift

SKY-200/250

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DEC 06 2012
Dept of Building Inspections
City of Portland Maine




Full
Manual in
G Drive
PDR

Installation, operation and maintenance instructions

T





**PLEASE DELIVER TO THE LIFT ALL OPERATION, INSPECTION AND
MAINTENANCE MANUALS, AND ALL OTHER INSTRUCTIONAL MATERIAL
FURNISHED WITH THE LIFT, TO THE LIFT
OWNER / USER / EMPLOYER.**

**PLEASE READ AND UNDERSTAND ALL INSTRUCTIONS IN THIS MANUAL
BEFORE INSTALLING, OPERATING OR MAINTAINING THIS LIFT.**

**Installation, operation and maintenance instructions for the Stertil-Koni
hydraulic vehicle lift**

SKY-200/250

Starting at Serial Number:

TZ141655




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Statement of conformity

Statement of conformity with the European machine guideline (06/42/EG), the ANSI/ALI ALCTV 2006, ANSI/UL201 2nd edition and CAN/CSA C22.2 No. 68-92.

Manufacturer: Steril B.V.
Postbus 23
9288 ZG Kootstertille
The Netherlands

Machine: Surface and flush mounted hydraulic vehicle lift.

Make: STERTIL - KONI

Serial Number:

Date first used:

Model	SKY-200	SKY-250
Version	Surface and flush mounted Automotive Lift with tracks	Surface and flush mounted Automotive Lift with tracks
Variants	SKY200-7 (track length 22' - 11 1/2") SKY200-8 (track length 26' - 3") SKY200-9 (track length 29' - 6 1/2") SKY200-10 (track length 32' - 9 1/2")	SKY250-8 (track length 26' - 3") SKY250-10 (track length 32' - 9 1/2") SKY250-12 (track length 39' - 4 1/2") SKY250-14,5 (track length 47' - 7")
Options	Lighting Extra long drive on ramps Jacking beam JB120 Wash bay model Double lowering speed Synchronization set for connected versions Remote control	Lighting Extra long drive on ramps Jacking beam JB160 Wash bay model Double lowering speed Synchronization set for connected versions Remote control

The manufacturer is authorised to constitute the technical documentation.

The undersigned, U. Bijlsma, director, authorised for this purpose by Stertil B.V., declares that the vehicle lift is in accordance with the 'machine guideline' 06/42/EG. The vehicle lift complies with the basic safety requirements as stipulated in this guideline. The model has undergone an EC type testing in accordance with this guideline. This EC testing was carried out by:

TÜV SÜD - Product Service GMBH - Index CE 0123
Gottlieb Daimler Strasse 7
70794 Filderstadt

SKY-200/250 EC-Type Examination Certificate No.: M6 08 01 62959 002

These vehicle lifts are also approved by:
ETL, Testing Laboratories, Inc. - Lexington,
KY 40510 USA, under report no.: 3107897CRT-001.
Date, 4 november 2007.

Stertil B.V. Kootstertille

U. Bijlsma
Director

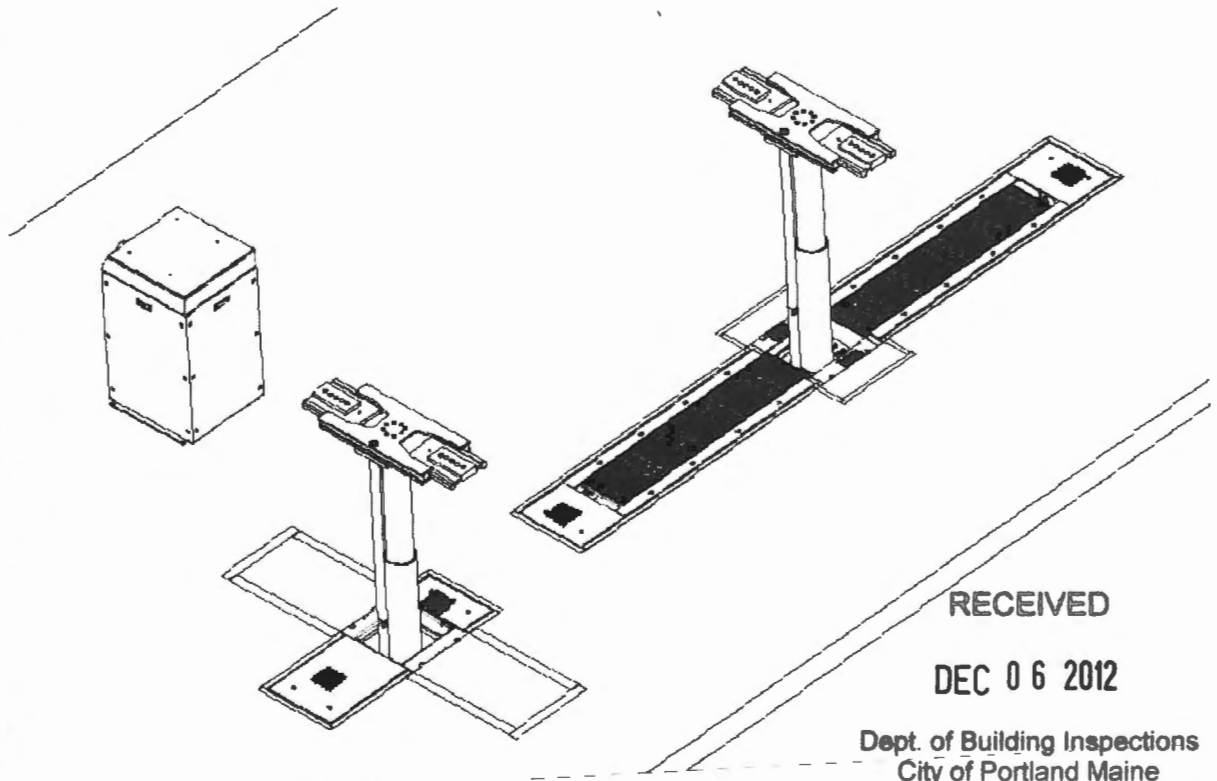
Signature:



stertil-koni

In-ground lift

Diamond 64 & Diamond 96



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Dept. of Building Inspections
City of Portland Maine

*Full manual
in G Drive
PDF*

**Safety, installation,
operation, maintenance and
troubleshooting instructions**

**ATTENTION! THOROUGHLY READ AND COMPREHEND
ALL SECTIONS OF THIS MANUAL BEFORE
INSTALLATION, OPERATION, MAINTENANCE AND
TROUBLESHOOTING THE DIAMOND 64 & 96 LIFT**

**STERTIL-KONI
200 LOG CANOE CIRCLE,
STEVENSVILLE, MD 21666
TEL. 800-336-6637 OR
410-643-9001
FAX. 410-643-8901**

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