

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND**

Please Read  
 Application And  
 Notes, If Any,  
 Attached

BU **PERMIT** IATION

Permit Number: 081345  
**PERMIT ISSUED**  
 OCT 28 2008  
 CITY OF PORTLAND

This is to certify that ST JOHN STREET ASSOCIATES LIMITED PARTNERSHIP

has permission to Demolish & Re-build (4) interior wood framed office w/ new E-OM ceiling membrane

AT 70 ST JOHN ST

070 A001001

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

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise used-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Cross CLASS

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

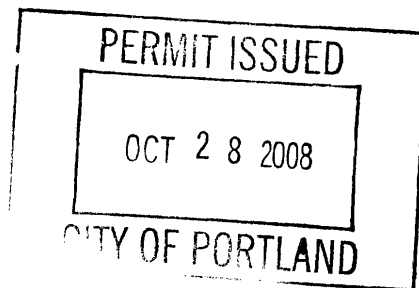
**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1345	Issue Date:	CBL: 070 A001001
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Location of Construction: 70 ST JOHN ST	Owner Name: ST JOHN STREET ASSOCIATES	Owner Address: PO BOX 4821	Phone:
Business Name:	Contractor Name: TBD	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: Iemb

Past Use: Commercial - Barbar Foods	Proposed Use: Commercial - Barbar Foods - Demolish & Re-build (4) interior wood framed offices w/ new EPDM ceiling membrane	Permit Fee: \$220.00	Cost of Work: \$20,000.00	CEO District: 2
Proposed Project Description: Demolish & Re-build (4) interior wood framed offices w/ new EPDM ceiling membrane		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: F-2 Type: ZIB <i>IBC 2003</i>	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 10/21/2008	<b>Zoning Approval</b>		
<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..</li> </ol>		<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/>	<b>Zoning Appeal</b> <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	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District 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>ok</i> 10/23/08	Date: _____	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 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

## 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.

Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

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 OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

X Michael M. Jones SR

Signature of Applicant/Designee

10-28-08

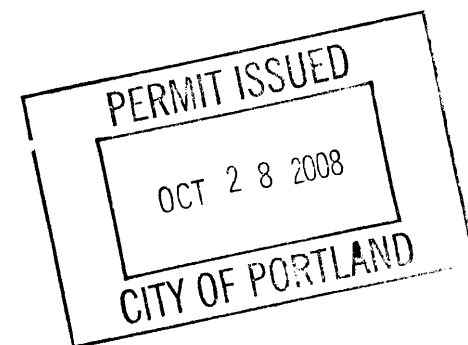
Date

[Signature]

Signature of Inspections Official

10/28/08

Date



**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 08-1345	<b>Date Applied For:</b> 10/21/2008	<b>CBL:</b> 070 A001001
------------------------------	--	----------------------------

<b>Location of Construction:</b> 70 ST JOHN ST	<b>Owner Name:</b> ST JOHN STREET ASSOCIATES	<b>Owner Address:</b> PO BOX 4821	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> TBD	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial	

<b>Proposed Use:</b> Commercial - Barbar Foods - Demolish & Re-build (4) interior wood framed offices w/ new EPDM ceiling membrane	<b>Proposed Project Description:</b> Demolish & Re-build (4) interior wood framed offices w/ new EPDM ceiling membrane
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 10/23/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 10/28/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> <li>1) Interior finishes shall be classified in accordance with ASTM E 84 for flame spread and smoke-developed indexes.</li> <li>2) All penetrations through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712.</li> <li>3) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.</li> </ol>			
<b>Dept:</b> Fire	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Capt Greg Cass	<b>Approval Date:</b> 10/24/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> <li>1) Emergency lights are required to be tested at the electrical panel.</li> <li>2) All means of egress to remain accessible at all times</li> <li>3) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.</li> <li>4) All construction shall comply with NFPA 101</li> </ol>			



# Commercial 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: <u>70 ST. JOHN STREET</u>		
Total Square Footage of Proposed Structure <u>530 SF</u>	Square Footage of Lot <u>5.9 A</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>70</u> Block# <u>A</u> Lot# <u>01</u>	Owner: <u>BARBER FOODS INC</u> <u>70 ST. JOHN STREET</u> <u>PORTLAND ME 04112</u>	Telephone: <u>541-2816</u>
Lessee/Buyer's Name (If Applicable)  <u>OCT 22 2008</u>	Applicant name, address & telephone: <u>OWNER</u>	Cost Of Work: \$ <u>20,000</u> Fee: \$ <u>201.00</u>
Current Specific use: <u>MANUFACTURING</u>		
Proposed Specific use: <u>MANUFACTURING</u>		
Project description: <u>DEMOLISH &amp; RE-BUILD (4) INTERIOR</u> <u>WOOD FRAMED OFFICES W/ NEW EPDM CEILING MEMBRANE.</u>		
Contractor's name, address & telephone: <u>TBD Mike Cushing- 232-3853</u>		
Who should we contact when the permit is ready: <u>CARL VADNAIS</u>		
Mailing address: <u>70 ST. JOHN STREET</u> <u>PORTLAND ME 04112</u>		
Phone: <u>541-2800</u>		

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections 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.

AGENT: ARON S. WILSON 878-1751

Signature of applicant: <u>[Signature]</u>	Date: <u>10.9.08</u>
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

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



# Certificate of Design Application

From Designer:

ASSOCIATED DESIGN PARTNERS INC

Date:

10.9.08

Job Name:

BARBER FOODS - MAINTENANCE OFFICES

Address of Construction:

70 ST. JOHN STREET

## 2003 International Building Code

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

Building Code & Year IBC 2003 Use Group Classification (s) F-2

Type of Construction II-B

Will the Structure have a Fire suppression system? ? ~~in accordance with Section 903.3.1 of the 2003 IRC~~ Y SECTION 903.3. 2003 IBC

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

Supervisory alarm System? Y Geotechnical/Soils report required? (See Section 1802.2) N

### Structural Design Calculations

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>OFFICE CEILING</u>	<u>20 PSF</u>

### Wind loads (1603.1.4, 1609) 5 PSF

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)

E.L.F Design option utilized (1614.1)

II Seismic use group ("Category")

0.324/0.125 Spectral response coefficients,  $S_D$ s &  $S_{D1}$  (1615.1)

D Site class (1615.1.5)

NA Live load reduction

20 PSF Roof live loads (1603.1.2, 1607.11)

N.A. 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)

N.A. Sloped roof snowload,  $P_s$  (1608.4)

B Seismic design category (1616.3)

LIGHT FRAMEWORK SHEAR WALLS Basic seismic force resisting system (1617.6.2)

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

E.L.F Analysis procedure (1616.6, 1617.5)

3.1 K Design base shear (1617.4, 16175.5.1)

### Flood loads (1803.1.6, 1612)

NA Flood Hazard area (1612.3)

NA Elevation of structure

### Other loads

NA Concentrated loads (1607.4)

NA Partition loads (1607.5)

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



# Accessibility Building Code Certificate

Designer: ASSOCIATED DESIGN PARTNERS INC.

Address of Project: 70 ST. JOHN STREET

Nature of Project: DEMOLISH & REBUILD (4) INTERIOR  
OFFICES - SAME SIZE & FOOT PRINT.

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: *Aaron S. Wilson*

Title: ENGINEER

Firm: ASSOCIATED DESIGN PARTNERS INC

Address: 80 LEIGHTON RD  
FALMOUTH ME 04105

Phone: 878-1751

For more information or to download this form and other permit applications visit the Inspections Division on our website at [www.portlandmaine.gov](http://www.portlandmaine.gov)



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

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

FROM: ASSOCIATED DESIGN PARTNERS INC.

RE: Certificate of Design

DATE: 10-7-08

These plans and / or specifications covering construction work on:

BARBER FOOD MAINTENANCE OFFICES

DEMOLITION & RECONSTRUCTION - 530 SF AREA

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



As per Maine State Law:

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

Signature: Aaron Wilson

Title: ENGINEER

Firm: ASSOC. DESIGN PARTNERS

Address: 80 LITTLETON RD  
FALMOUTH ME 04105





**ASSOCIATED DESIGN  
PARTNERS INC.**

Office: (207) 878-1751  
Fax: (207) 878-1788  
E-Mail: [assocdesigninc@gmail.com](mailto:assocdesigninc@gmail.com)  
80 Leighton Road  
Falmouth, Maine 04105

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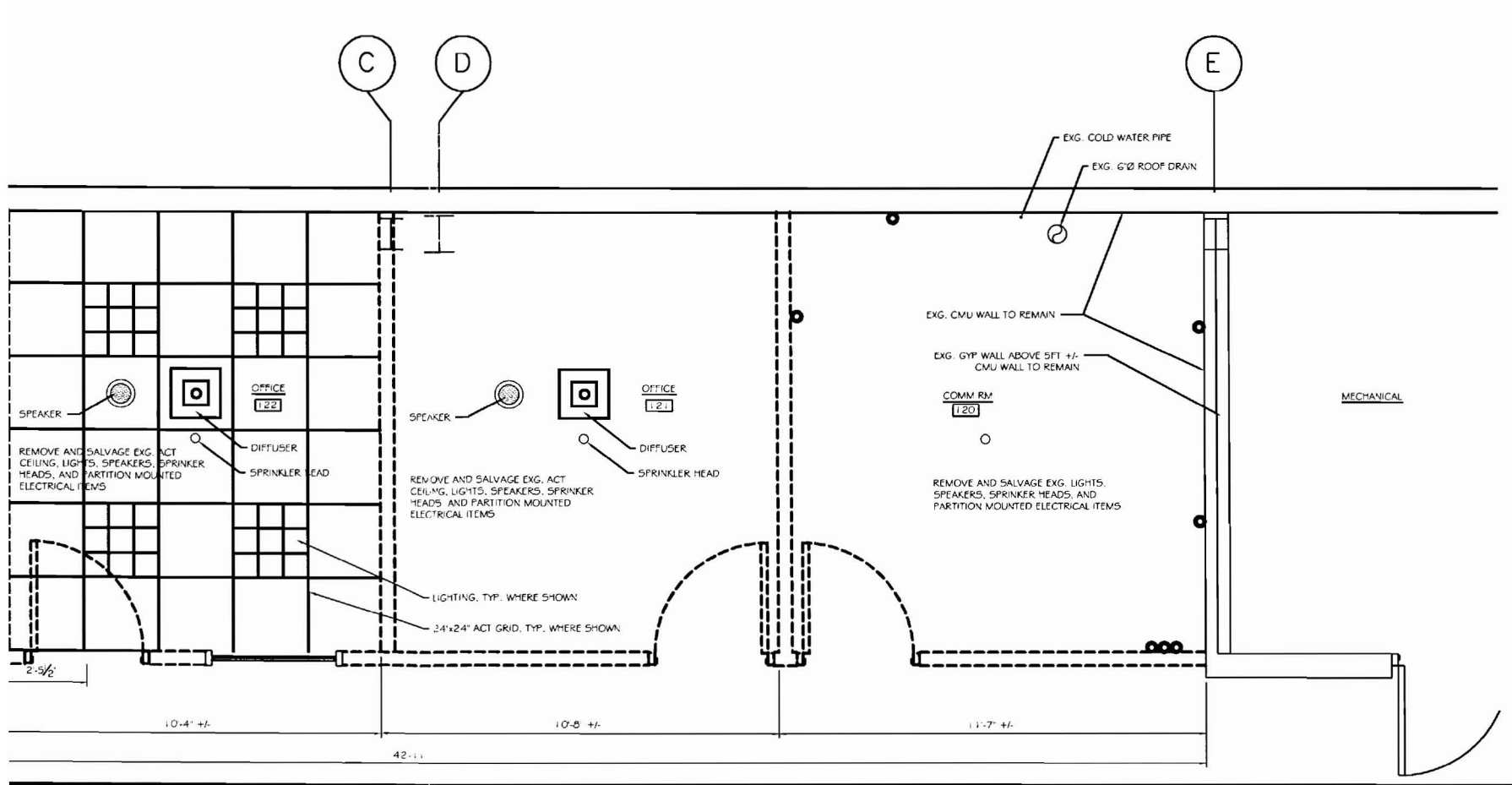
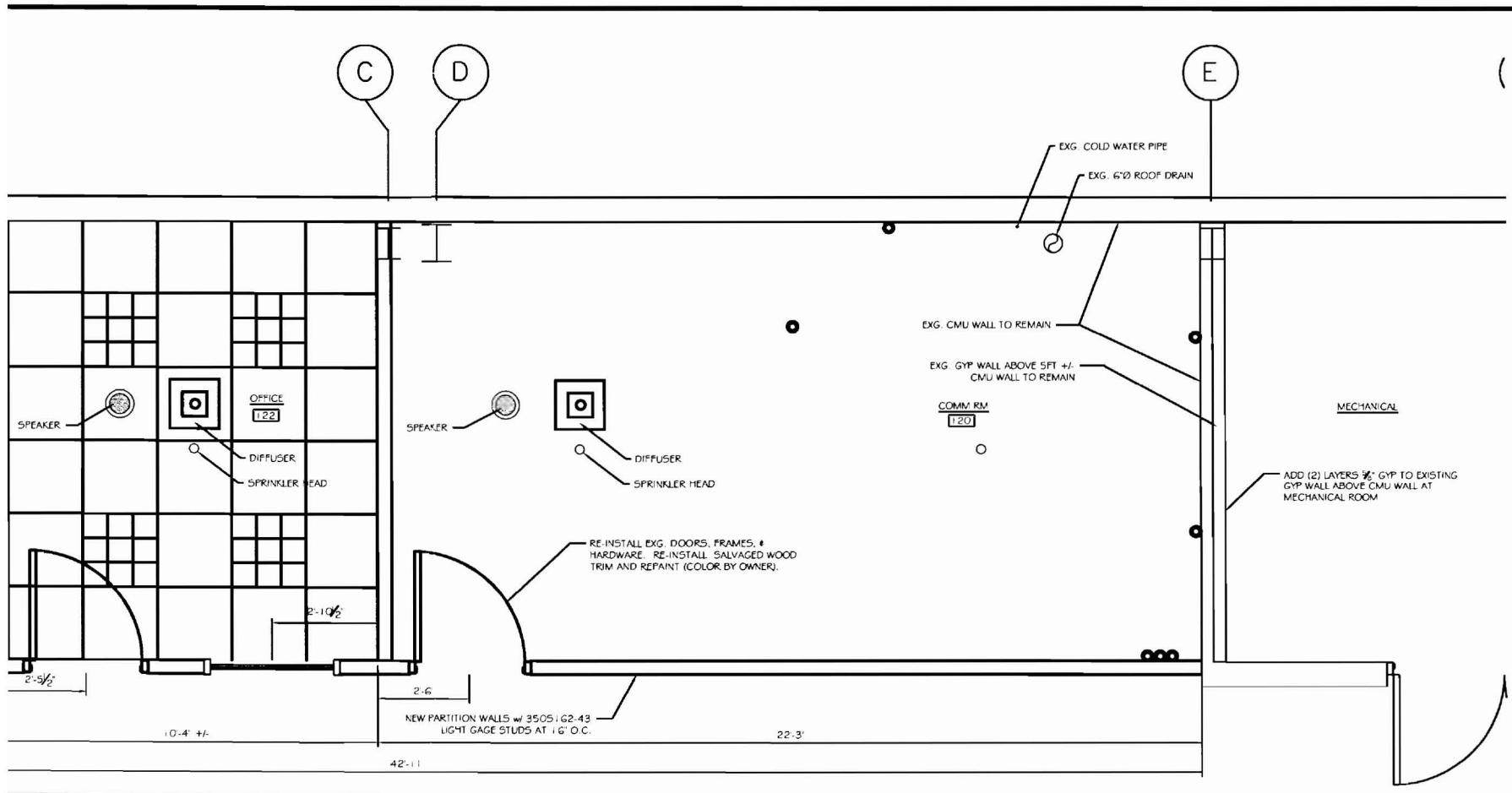
PROJECT: **MAINTENANCE OFFICES**

54 SAINT JOHN ST.  
FOR BARBER FOODS INC.

SHEET TITLE: **DEMOLITION AND FLOOR PLANS  
ISSUED FOR PERMITTING**

REVISIONS	DESCRIPTION	DATE
NO.	BY	
1	ASW	
2	ASW	
3	ASW	
4	ASW	

DATE: 10-08-08  
SCALE: AS NOTED  
DESIGN BY: ASW  
DRAWN BY: RC  
FILE #: 08253-AN01.DWG  
PROJECT NUMBER:  
**08253**  
SHEET NO:  
**A101**





**ASSOCIATED DESIGN PARTNERS INC.**

80 Leighton Road  
Falmouth, Maine 04105  
Office: (207) 878-1751  
Fax: (207) 878-1788  
E-Mail: [adp@adpengineering.com](mailto:adp@adpengineering.com)

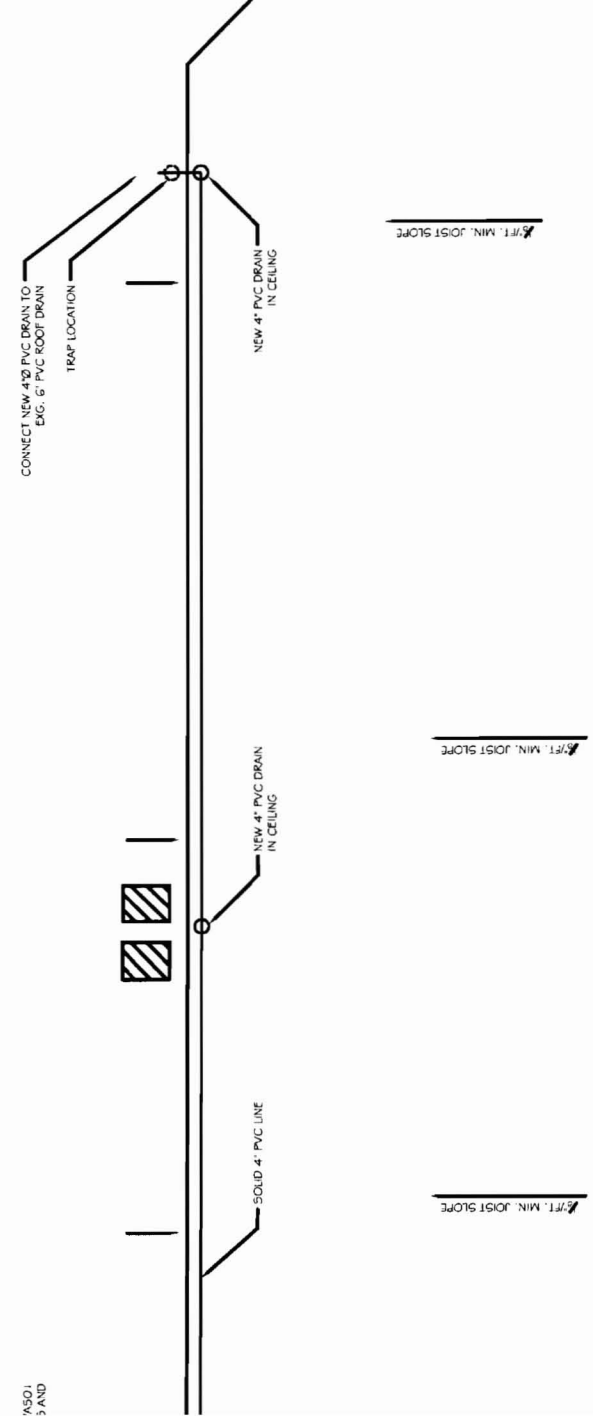
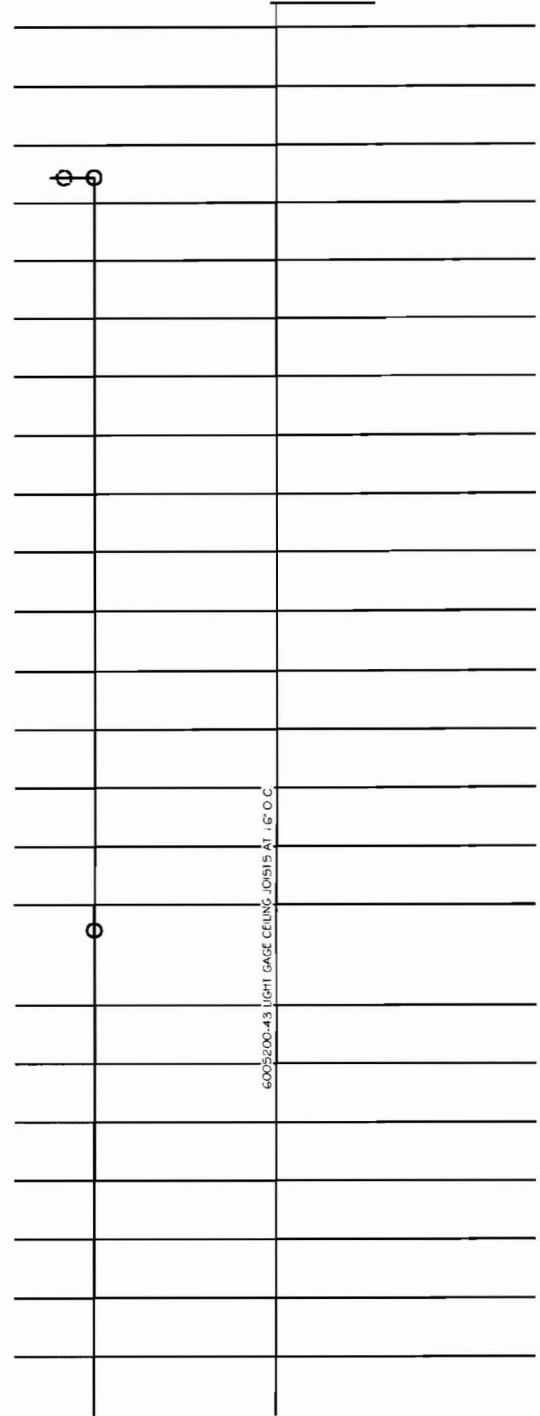
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**PROJECT: MAINTENANCE OFFICES**  
54 SAINT JOHN ST.  
FOR: BARBER FOODS INC.

**SHEET TITLE: CEILING FRAMING PLAN**  
ISSUED FOR PERMITTING

NO.	BY	DESCRIPTION	DATE

DATE: 10-09-08  
SCALE: AS NOTED  
DESIGN BY: ASH  
DRAWN BY: RC  
FILE # 0803-A101.DWG  
PROJECT NUMBER: **08253**  
SHEET NO: **A102**



42-11-41



**ASSOCIATED DESIGN PARTNERS INC.**

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 80 Leighton Road  
 Falmouth, Maine 04105

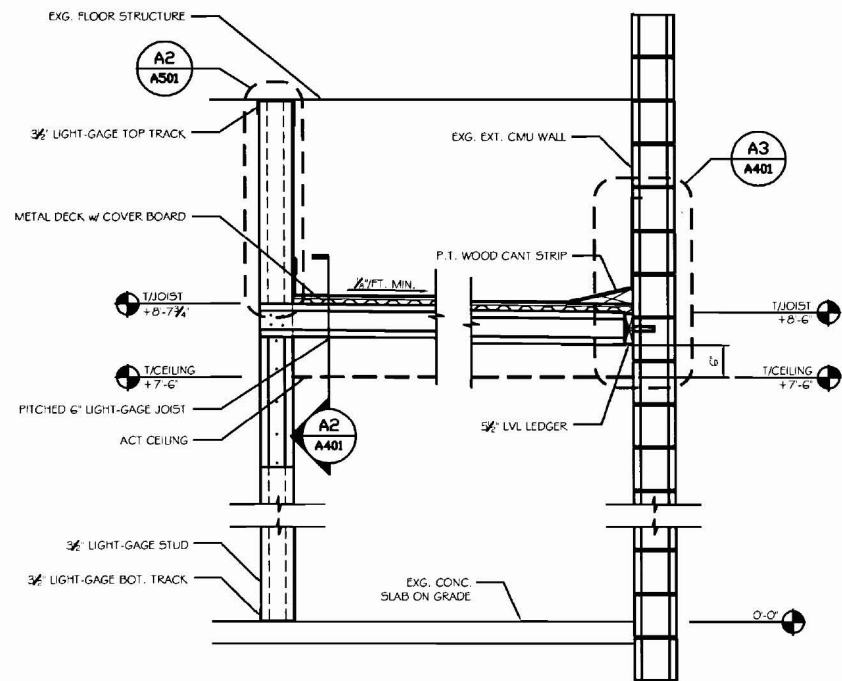
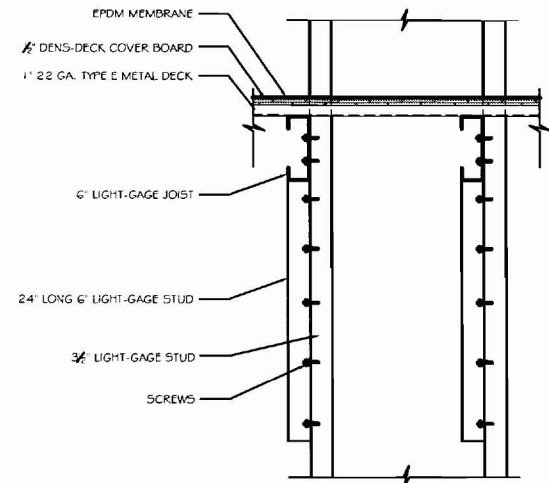
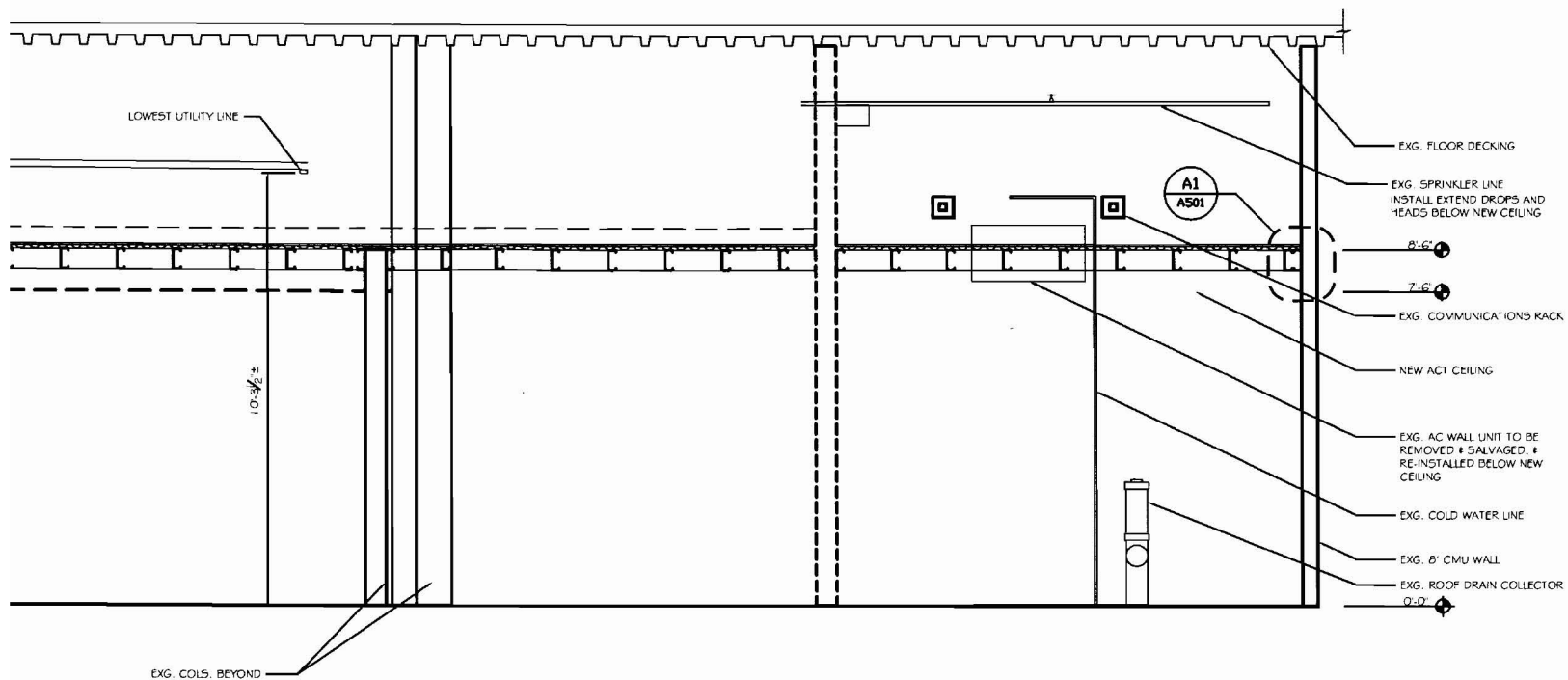
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PROJECT: **MAINTENANCE OFFICES**  
**54 SAINT JOHN ST.**  
 FOR: BARBER FOODS INC.

SHEET TITLE:  
**OFFICE SECTIONS AND DETAILS**  
**ISSUED FOR PERMITTING**

REVISIONS	DESCRIPTION	DATE
1		
2		
3		
4		

DATE : 10-08-08  
 SCALE : AS NOTED  
 DESIGN BY: ASW  
 DRAWN BY: RC  
 FILE #: 08253-A401.DWG  
 PROJECT NUMBER:  
**08253**  
 SHEET NO:  
**A401**



DETAIL AT CEILING JOIST CONNECTION

SCALE: 1/2" = 1'-0"

A1 SECTION THROUGH REPAIR AREA

SCALE: 3/4" = 1'-0"



**ASSOCIATED DESIGN PARTNERS INC.**

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 Falmouth, Maine 04105

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**PROJECT: BARBER FOODS RENOVATIONS  
 54-70 SAINT JOHN STREET, PORTLAND ME**

**SHEET TITLE: MEMBRANE DETAILS  
 ISSUED FOR PERMITTING**

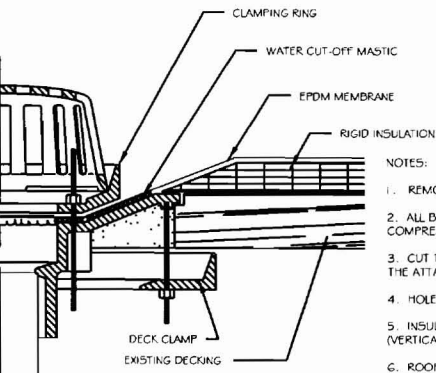
PROJECT: BARBER FOODS RENOVATIONS  
 54-70 SAINT JOHN STREET, PORTLAND ME

SHEET TITLE: MEMBRANE DETAILS  
 ISSUED FOR PERMITTING

REVISIONS	DATE
DESCRIPTION	
No. BY	
1	
2	
3	
4	

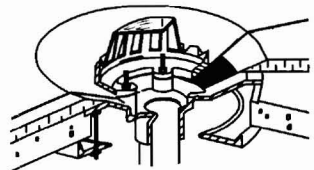
DATE: 10-9-08  
 SCALE: AS NOTED  
 DESIGN BY: ASW  
 DRAWN BY: ASB/RSC  
 FILE #: 08253-A501.DWG  
 PROJECT NUMBER:  
**08253**  
 SHEET NO:  
**A501**

FIELD SPLICES MUST BE LOCATED AT LEAST 6 INCHES OUTSIDE THE DRAIN SUMP



NOTES:

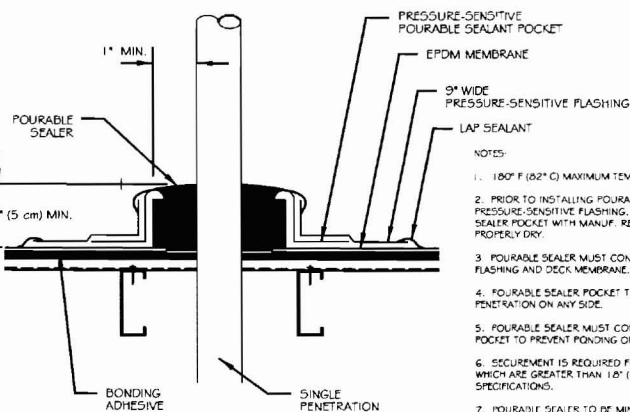
1. REMOVE ALL LEAD AND OTHER FLASHING.
2. ALL BOLTS OR CLAMPS MUST BE IN PLACE TO PROVIDE CONSTANT COMPRESSION ON WATER CUT-OFF MASTIC.
3. CUT THE MEMBRANE SO IT EXTENDS A MINIMUM OF 1/2" (1.3 mm) FROM THE ATTACHMENT POINTS OF THE DRAIN CLAMPING RING.
4. HOLE IN MEMBRANE MUST EXCEED SIZE OF DRAIN PIPE.
5. INSULATION TAPER SHALL NOT BE STEEPER THAN 6" (150 mm) (VERTICAL) IN 12" (300 mm) (HORIZONTAL).
6. ROOF DRAIN SIZE AND NUMBER OF DRAINS SHALL BE IN ACCORDANCE WITH LOCAL CODES.



**DRAIN DETAIL**

SCALE: NO SCALE

C1



NOTES:

1. 180° F (82° C) MAXIMUM TEMPERATURE.
2. PRIOR TO INSTALLING POURABLE SEALER POCKET AND PRESSURE-SENSITIVE FLASHING, PRIME MEMBRANE AND POURABLE SEALER POCKET WITH MANUF. RECOMMENDED PRIMER AND ALLOW TO PROPERLY DRY.
3. POURABLE SEALER MUST CONTACT UNCURED ELASTOFORM FLASHING AND DECK MEMBRANE.
4. POURABLE SEALER POCKET TO BE 1" (3 cm) MINIMUM FROM PENETRATION ON ANY SIDE.
5. POURABLE SEALER MUST COMPLETELY FILL POURABLE SEALER POCKET TO PREVENT PONDING OF WATER.
6. SECUREMENT IS REQUIRED FOR POURABLE SEALER POCKETS WHICH ARE GREATER THAN 1.0" (50 cm) IN DIAMETER. REFER TO SPECIFICATIONS.
7. POURABLE SEALER TO BE MINIMUM 2" (5 cm) DEEP.
8. POURABLE SEALER MUST CONTACT THE BARE SURFACE OF THE PENETRATION. ALL DEBRIS (PAINT, RUST, LEAD, OTHER FLASHINGS, ETC.) MUST BE REMOVED FROM THE PENETRATION.
9. FOR ADDITIONAL INFORMATION, REFER TO SPECIFICATIONS #MANUF. RECOMMENDED INSTALLATION INSTRUCTIONS.

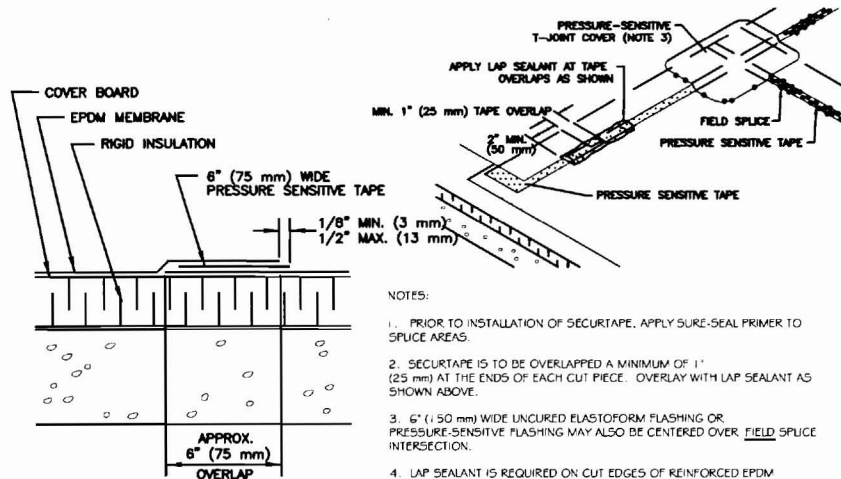
**PENETRATION FLASHING - SEALED POCKET - OPT. #2**

SCALE: NO SCALE

B1

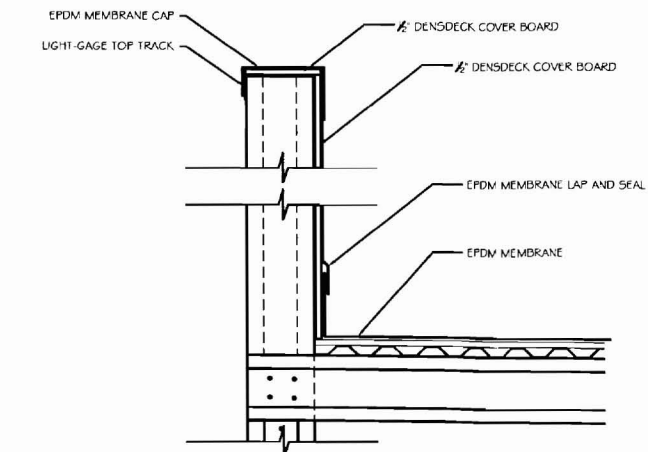
**MEMBRANE SPLICE**

SCALE: NO SCALE



NOTES:

1. PRIOR TO INSTALLATION OF SECURTAPE, APPLY SURE-SEAL PRIMER TO SPLICE AREAS.
2. SECURTAPE IS TO BE OVERLAPPED A MINIMUM OF 1" (25 mm) AT THE ENDS OF EACH CUT PIECE. OVERLAY WITH LAP SEALANT AS SHOWN ABOVE.
3. 6" (150 mm) WIDE UNCURED ELASTOFORM FLASHING OR PRESSURE-SENSITIVE FLASHING MAY ALSO BE CENTERED OVER FIELD SPLICE INTERSECTION.
4. LAP SEALANT IS REQUIRED ON CUT EDGES OF REINFORCED EPDM MEMBRANE.



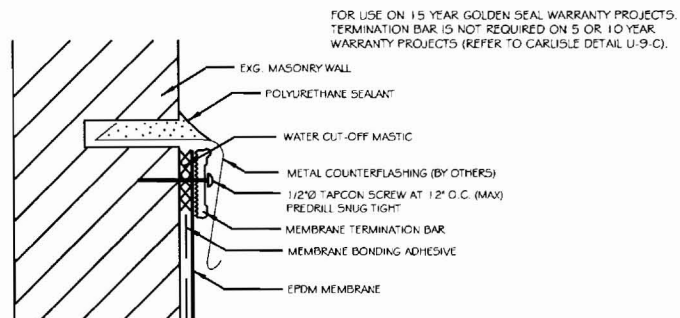
**PARAPET CAP FLASHING**

SCALE: NO SCALE

A1

**COUNTER FLASHING DETAIL**

SCALE: NO SCALE



FOR USE ON 15 YEAR GOLDEN SEAL WARRANTY PROJECTS. TERMINATION BAR IS NOT REQUIRED ON 5 OR 10 YEAR WARRANTY PROJECTS (REFER TO CARLISLE DETAIL U-9-C).

ALLOW 1/4" MIN. TO 1/2" MAX. (6 TO 13 mm) SPACING BETWEEN CONSECUTIVE LENGTHS OF TERMINATION BAR.



NOTES:

1. APPLY ON HARD SMOOTH SURFACE ONLY; NOT FOR USE ON WOOD.
2. WATER CUT-OFF MASTIC MUST BE HELD UNDER CONSTANT COMPRESSION.
3. DO NOT WRAP COMPRESSION TERMINATION AROUND CORNERS.