

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED
Permit Number: 081013

SEP 30 2008

CITY OF PORTLAND

This is to certify that LANDMARK HEALTHCARE FACILITIES LLC / Ledgewood Con
 has permission to Tenant fit-up for Coffee Shop Suite 170
 AT 195 FORE RIVER PKWY Suite 170 L 075 A00500

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 when permission is procured before this building or part thereof is occupied or service is rendered. YOUR NO. NOT REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. Craig Cross
 Health Dept. _____
 Appeal Board _____
 Other _____
 Department Name

9/30/08 [Signature]
 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: 08-1013	Issue Date: 9/30/08	CBL: 075 A005001
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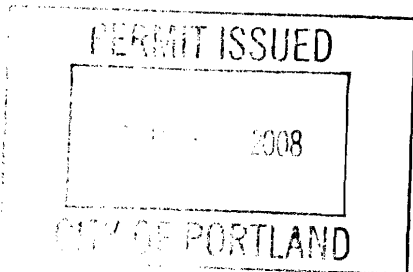
Location of Construction: 195 FORE RIVER PKWY Suite 170	Owner Name: LANDMARK HEALTHCARE FA	Owner Address: 839 NORTH JEFFERSON	Phone:
Business Name:	Contractor Name: Ledgewood Construction	Contractor Address: 27 Maine St. So. Portland	Phone: 2077671866
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone: C-76

Past Use: Commercial/Fore River Medical Complex - Vacant Space	Proposed Use: Commercial/Fore River Medical Complex - Coffee Shop - Tenant fit-up for Coffee Shop Suite 170 1st floor	Permit Fee: \$695.00	Cost of Work: \$60,000.00	CEO District: 3
Proposed Project Description: Tenant fit-up for Coffee Shop Suite 170 1st floor		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>Gregory CLASS</i>	INSPECTION: <i>Blidy</i> Use Group: <i>B w/A-2</i> Type: <i>2B</i> <i>Accessory</i> <i>IBC-2003</i> <i>(M)</i>	
		Signature: <i>J/2/08</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: 08/13/2008	Zoning Approval		
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- 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 information may invalidate a building permit and stop all work..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>9/2/08</i>	Date: _____	Date: _____



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



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: <u>195 Fore River Parkway, Portland me 04101</u>		
Total Square Footage of Proposed Structure/Area <u>930 S.F.</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>75 A S</u>	Applicant * must be owner, Lessee or Buyer* Name Address City, State & Zip	Telephone:
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>60,000</u> C of O Fee: \$ <u>75</u> Total Fee: \$ <u>60,075</u>
Current legal use (i.e. single family) <u>Business - medical office building</u> If vacant, what was the previous use? <u>N/A</u> Proposed Specific use: <u>Coffeeshop</u> Is property part of a subdivision? <u>NO</u> If yes, please name <u>N/A</u> over \$15k Project description: <u>Tenant fit out space for Coffeeshop (suite 170) on the 1st floor of the newly constructed medical office bldg.</u>		
Contractor's name: <u>Ledgewood Construction</u>		
Address: <u>27 Main St</u>		Telephone: <u>(207) 415-7993</u>
City, State & Zip: <u>South Portland me 04106</u>		Telephone: <u>(207) 615-4446</u>
Who should we contact when the permit is ready: <u>Dan Di Pietro</u>		Telephone: <u>(207) 615-4446</u>
Mailing address: <u>Same as above</u>		

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: [Signature] Date: 7/28/08

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

Nick C...

LANDMARK HEALTHCARE FACILITIES LLC

- 839 NORTH JEFFERSON STREET, MILWAUKEE, WI 53202 (414) 277-0500 FAX (414) 277-1055
 7825 FAY AVENUE, SUITE 200, SAN DIEGO, CA 92037 (858) 551-7888 FAX (858) 551-4514

LETTER OF TRANSMITTAL

To: Lannie Dobson
Company: Planning & Development Dept.
Address: 389 Congress Street
 Portland, ME 04101

From: Jim Hartmann
Date: August 14, 2008
Project: Mercy Hospital - New Medical Office Building, Coffee Shop

Sent Via: U.S. Mail U.S. Priority Mail Hand Deliver

Federal Express: Early A.M. (before 8:30 AM) Priority (before 10:30 AM)
 Standard (before 5:00 PM) Priority (Saturday delivery)
 2nd Day Express Saver (3 to 4 day)

Items Sent: Plans Contract Payment Application
 Shop Drawings Specifications Copy of Letter
 Samples Change Order Other Check, Permit Applications

Copies	Dated	Description of Items Being Sent
1	08/14/08	Check #4184
1	07/28/08	General Building Permit Application, Coffee Shop
1	07/28/08	Certificate of Design Application, Coffee Shop
1	07/28/08	Certificate of Design, Coffee Shop
1	07/28/08	Accessibility Building Code Certificate, Coffee Shop
1	07/28/08	Project Information Sheet, Coffee Shop
1	07/28/08	New Commercial Permit Application Checklist, Coffee Shop
1	07/28/08	100% Construction Document Set, Coffee Shop

Reason for Sending: As Requested For Your Information For Review and Comment
 For Your Use For Approval Return _____ Signed Copies

Remarks:

Lannie -

If you have any questions please contact me at (414) 277-0500.

Thank you,

Jim

cc:

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

389 Congress Street
 Portland, Maine 04101

INVOICE FOR PERMIT FEES

Application No: 8-1013	Applicant: LANDMARK HEALTHCARE FAC
Project Name: Tenant fit-up for Coffee Shop Suite	Location: 195 FORE RIVER PKWY Suite 170
CBL: 075 A005001	Development Type:
Invoice Date: 08/15/2008	

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$695.00		\$680.00		\$15.00	On Receipt

First Billing

Previous Balance	\$0.00
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Fee Description	Qty	Fee/Deposit Charge
Certificate of Occupancy	1	\$75.00
Building Permit Fee First \$1000	1	\$30.00
Building Permit Fee Add'l \$1000	1	\$590.00
		<hr/> \$695.00
Total Current Fees:	+	\$695.00
Total Current Payments:	-	\$680.00
Amount Due Now:		\$15.00

 Detach and remit with payment

Bill to: LANDMARK HEALTHCARE FACILITIES LLC
 839 NORTH JEFFERSON
 MILWAUKEE , WI 53202

CBL 075 A005001
Application No: 8-1013
Invoice Date: 08/15/2008
Invoice No: 32144
Total Amt Due: \$15.00
Payment Amount:

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.



Certificate of Design Application

From Designer:

Gawron Turgeon Architects

Date:

July 28, 2008

Job Name:

Fore River Medical Pavilion - Coffeeshop

Address of Construction:

195 Fore River Parkway Portland, ME 04101

2003 International Building Code

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

Building Code & Year IBC 2003 Use Group Classification (s) B-Business w/new accessory assembly space A-2

Type of Construction 2B

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC yes

Is the Structure mixed use? NO If yes, separated or non separated or non separated (section 302.3) N/A

Supervisory alarm System? yes Geotechnical/Soils report required? (See Section 1802.2) no

Reference "core shell" permit no. (061802) for the info. listed below

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

Wind loads (1603.1.4, 1609)

- Design option utilized (1609.1.1, 1609.6)
- Basic wind speed (1809.3)
- Building category and wind importance factor, I_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)

- Design option utilized (1614.1)
- Seismic use group ("Category")
- Spectral response coefficients, S_a & S_{D1} (1615.1)
- Site class (1615.1.5)

- 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)

- Flood Hazard area (1612.3)
- Elevation of structure

Other loads

- 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:

July 28, 2008

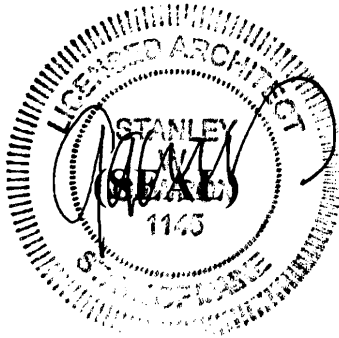
From:

Gawron Turgeon Architects

These plans and / or specifications covering construction work on:

Coffee Shop (suite 170) - 1st floor of Fore River
Medical office building @ 195 Fore River Parkway,
Portland, Maine

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



Signature:

Stan Jones

Title:

President

Firm:

Gawron Turgeon Architects

Address:

29 Black Point Rd.

Scarborough, Me. 04074

Phone:

207-883-6307

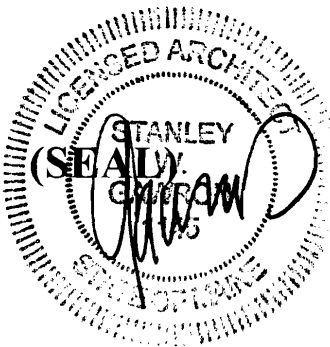
For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



Accessibility Building Code Certificate

Designer: Gawron Turgeon Architects
Address of Project: 195 Fore River Parkway, Portland me 04101
Nature of Project: Tenant fitout space for Coffee Shop (suite 170) on the 1st floor of the newly constructed medical office 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: Stan Gawron
Title: President
Firm: Gawron Turgeon Architects
Address: 29 Black Point Rd.
Scarborough, me 04074
Phone: 207-883-6307

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



STATE OF MAINE
Department of Public Safety
Bureau of Building Codes and
Standards
State House Station
Augusta, ME 04333-0052

JOHN ELIAS BALDACCI
GOVERNOR

ANNE H. JORDAN
COMMISSIONER

Project Information

Project Name: Fore River medical office building - coffeeshop
Street Location: 195 fore river Parkway Town: Portland
Square Footage: 930 Building Code Surcharge: _____

Sec. 13. 25 MRSA §2450-A is enacted to read:

§ 2450-A. Surcharge on plan review fee for Uniform Building Codes and Standards Fund

In addition to the fees established in section 2450, a surcharge of 4¢ per square foot of occupied space must be levied on the existing fee schedule for new construction, reconstruction, repairs, renovations or new use for the sole purpose of funding the activities of the Technical Building Codes and Standards Board with respect to the Maine Uniform Building and Energy Code, established pursuant to the Title 10, chapter 1103, the activities of the Bureau of Building Codes and Standards under chapter 314 and the activities of the Executive Department, State Planning Office under Title 30-A, section 4451, subsection 3-A, except that the fee for review of a plan for the renovation of a public school, including the fee established under section 2450, may not exceed \$450. Revenue collected from this surcharge must be deposited into the Uniform Building Codes and Standards Fund established by section 2374.

Date Fee Received: _____

Check #: _____



New Commercial 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.

- N/A Cross sections w/framing details
- Detail of any new walls or permanent partitions
- Floor plans and elevations
- Window and door schedules
- N/A Foundation plans with rebar specifications and required drainage and damp proofing (if applicable)
- Detail egress requirements and fire separations
- Insulation R-factors of walls, ceilings, floors and U-factors of windows as per the IECC 2003
- Complete the Accessibility Certificate and The Certificate of Design
- A statement of special inspections as required per the IBC 2003
- Complete electrical and plumbing layout.
- Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review.
- 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.

Info. listed
in core &
shell
package
submission

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

Nine (9) copies of the minor (< 10,000 sf) or major (> 10,000 sf) site plan application is required that includes:

- A stamped boundary survey to scale showing north arrow, zoning district and setbacks to a scale of $\geq 1'' = 20'$ on paper $\geq 11'' \times 17''$
- The shape and dimension of the lot, footprint of the proposed structure and the distance from the actual property lines. Photocopies of the plat or hand draw footprints not to scale will not be accepted.
- Location and dimensions of parking areas and driveways, street spaces and building frontage
- Finish floor or sill elevation (based on mean sea level datum)
- Location and size of both existing utilities in the street and the proposed utilities serving the building
- Existing and proposed grade contours
- Silt fence (erosion control) locations

Fire Department requirements.

The following shall be submitted on a separate 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
- 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.

City of Portland, Maine - Building or Use Permit

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

Permit No: 08-1013	Date Applied For: 08/15/2008	CBL: 075 A005001
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Location of Construction: 195 FORE RIVER PKWY Suite 17	Owner Name: LANDMARK HEALTHCARE FAC	Owner Address: 839 NORTH JEFFERSON	Phone:
Business Name:	Contractor Name: Ledgewood Construction	Contractor Address: 27 Maine St. So. Portland	Phone (207) 767-1866
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	

Proposed Use: Commercial/Fore River Medical Complex - Coffee Shop - Tenant fit-up for Coffee Shop Suite 170 1st floor	Proposed Project Description: Tenant fit-up for Coffee Shop Suite 170 1st floor
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 08/22/2008**Note:** **Ok to Issue:**

- 1) Separate permits shall be required for any new signage.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 09/30/2008**Note:** Permit on hold requested large set of plans----Told to hold by Dan Depetro **Ok to Issue:**

- 1) Approval of license is subject to health inspections per the Food Code.
- 2) Equipment must be installed in compliance with the manufacturer's specifications
- 3) 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.
- 4) 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.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Greg Cass **Approval Date:** 08/25/2008**Note:** **Ok to Issue:**

- 1) The installation of a hood will require a separate permit.
- 2) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 3) All construction shall comply with NFPA 101

Fore River Medical Office Building Coffee Shop

First Floor Tenant Fit-Up Suite 170

Portland

Maine

ABBREVIATIONS

ALUM OR AL	ALUMINUM	GALV	GALVANIZED	S	SOUTH
AMP	ACOUSTICAL WALL PANEL	GB	GRAB BARS	SC	SHOWER CURTAIN
ACT	ACOUSTICAL CEILING TILE	GC	GENERAL CONTRACTOR	SD	SOAP DISPENSER
BIT	BITUMINOUS	GWB	GYP-SUM WALL BOARD	SCHED	SCHEDULE
BM	BENCH MARK	HC	HANDICAP	SECT	SECTION
BOT	BOTTOM	HD WD	HARDWOOD	SHT	SHEET
BRK	BEARING	HR	HEADER	SIM	SIMILAR
BRK	BRICK	HOWE	HARDWARE	SND	SANITARY NAPKIN DISPOSAL
C	CARPET	HM	HOLLOW METAL	SO	SQUARE
CAB	CABINET	HORIZ	HORIZONTAL	SSS	SYNTHETIC SPORTS SURFACE
CB	CHALK BOARD	HT	HEIGHT	STD	STANDARD
CC	CENTER TO CENTER	ID	INSIDE DIAMETER	STL	STEEL
CH	CONCRETE HARDENER	IF	INSIDE FACE	STRUCT	STRUCTURAL
CL	CONTROL JOINT	IN	INCHES	SV	SHEET VINYL
CLG	CEILING	INSUL	INSULATION	T	TEMPERED (GLASS)
CMU	CONCRETE MASONRY UNITS	INT	INTERIOR	TB	TACK BOARD
CONC	CONCRETE	LOC	LOCATION	THK	THICKNESS
CONT	CONTINUOUS	M	MARBLE	TO	TOP OF
CONSTR	CONSTRUCTION	MAS	MASONRY	TOB	TOP OF BEAM
CONTR	CONTRACTOR	MAX	MAXIMUM	TOM	TOP OF MASONRY
CT	CERAMIC TILE	MB	MARKER BOARD	TOW	TOP OF WALL
DBL	DOUBLE	MECH	MECHANICAL	TP	TYPICAL
DF	DRINKING FOUNTAIN	MFR	MANUFACTURER	UNO	UNLESS NOTED OTHERWISE
DN	DIA	MISC	MISCELLANEOUS	VB	VAPOR BARRIER
DNM	DIMENSION	MO	MASONRY OPENING	VCT	VINYL COMPOSITION TILE
DNA	DOES NOT APPLY	MR	MOP RECEPTOR	VERT	VERTICAL
DTL	DETAIL	MROB	MOISTURE RESISTANT GYPSUM BOARD	VWC	VINYL WALL COVERING
DWG	DRAWING	MTL	METAL	W	WEST
E	EAST	N	NORTH	WC	WATER CLOSET
EA	EACH	NA	NOT APPLICABLE	WD	WOOD
EF	EACH FACE	NIC	NOT IN CONTACT		
EJ	EXPANSION JOINT	NO	NUMBER		
EL	ELEVATION	NOM	NOMINAL		
ELEC	ELECTRICAL	NTS	NOT TO SCALE		
ELEV	ELEVATOR	OA	OVERALL		
EMHO	ELECTROMAGNETIC HOLD OPEN	OC	ON CENTER		
ED	EDGE	OD	OUTSIDE DIAMETER		
EW	EACH WAY	OPNG	OPENING		
EWG	ELECTRIC WATER COOLER	OPP	OPPOSITE		
EXIT OR (E)	EXISTING	OSF	OUTSIDE FACE		
EXP	EXPANSION	P	PAINT		
EXT	EXTERIOR	PTD	PAINTED		
FD	FLOOR DRAIN	PL	PLATE		
FDN	FOUNDATION	PLY WD	PLYWOOD		
FE	FIRE EXTINGUISHER	PNL	PANEL		
FFE	FINISH FLOOR ELEVATION	P.A.	PRESSURE TREATED		
FIN	FINISH	PT & D	PAPER TOWEL AND WASTE		
FIN FL OR FF	FINISH FLOOR	DISP	DISPENSER		
FIN GR	FINISH GRADE	PTN	PARTITION		
FL	FLOOR	RDF	ROOF DRAIN		
FR	FIRE RATING	RD	REFER		
FRMG	FRAMING	RE	REFER		

LEGEND

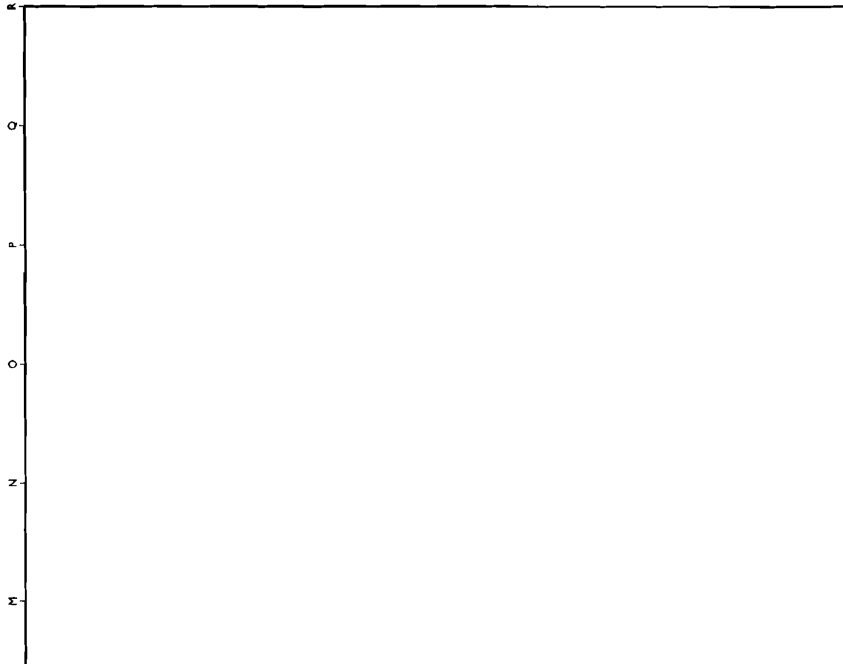
	BUILDING SECTION MARKER
	CEILING TAG
	COLUMN CENTER LINE
	DETAIL MARKER
	DOOR TAG
	EXTERIOR ELEVATION
	INTERIOR ELEVATION
	PLANT TAG
	REVISION CLOUD WITH TAG
	ROOM TAG
	SECTION MARKER
	WALL TYPE

GENERAL NOTES

1. THE GENERAL CONTRACTOR SHALL VERIFY ALL EXISTING CONDITIONS AND DIMENSIONS, AND REPORT ANY DISCREPANCIES TO THE ARCHITECT. CONTRACTOR SHALL PROCEED WITH THE WORK ONLY AFTER DISCREPANCY HAS BEEN RESOLVED WITH THE ARCHITECT.
2. THE GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR ALL PERMITS, FEES, CERTIFICATES OF INSPECTION AND APPROVAL, ETC, UNLESS OTHERWISE NOTED BY OWNER.
3. NOT USED
4. THE BUILDING SHALL BE CONSTRUCTED TO CONFORM WITH ALL APPLICABLE CODES INCLUDING, BUT NOT LIMITED TO, THE LATEST EDITIONS OF IBC 2003, NFPA 101 2006, & ANSI, AND ADA.
5. ALL WOOD IN CONTACT WITH CONCRETE SHALL BE PRESSURE PRESERVATIVE TREATED AND USE ONLY STAINLESS STEEL CONNECTORS.
6. CONTRACTOR SHALL WORK FROM GIVEN DIMENSIONS AND LARGE SCALE DETAILS ONLY. DO NOT SCALE THE DRAWINGS.
7. EXISTING BUILDING COMPONENTS WHICH ARE AFFECTED BY NEW WORK AND DEMOLITION, OR WHICH MAY BE DAMAGED BY THE CONTRACTOR OR ANY SUBCONTRACTOR SHALL BE REPLACED OR RESTORED TO ORIGINAL CONDITION AND COLOR BY METHODS DESCRIBED IN THIS CONTRACT OR APPROVED BY THE ARCHITECT. THE GENERAL CONTRACTOR SHALL SEAL, PATCH AND FILL ANY FLOOR AND/OR WALL PENETRATIONS DUE TO DEMOLITION AND/OR CONSTRUCTION.
8. NOT USED
9. INSTALL BLOCKING FOR FUTURE SURFACE APPLIED FIXTURES, TRIM, CABINETS, COUNTER TOPS, AND GRAB BARS WHEN MOUNTED ON STUD WALLS.
10. ALL GRAB BARS SHALL BE ABLE TO SUPPORT A DEAD WEIGHT OF 250 LBS AT ANY POINT.
11. NOT USED
12. METAL MOISTURE RESISTANT GYPSUM BOARD
19. BUILDING INSULATION: P AND IN ACCORDANCE WITH DETAILS OR INSULATION INSULATION PROVIDED.
20. NOT USED
21. GC TO COORDINATE AND MECHANICAL, AND SPRIN THROUGH STRUCTURAL I PENETRATION LOCATIONS
22. NOT USED
23. THE GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR ALL PENETRATIONS THROUGH FIRE STOP SYSTEMS - DET & T RATED SYSTEMS, AS & CO., NELSON FIRESTOP JOINT SYSTEM - TO BE IN CONSTRUCTION AT FLOOR TO WALL, AND HEAD OF PER UL 2079.

SITE MAP



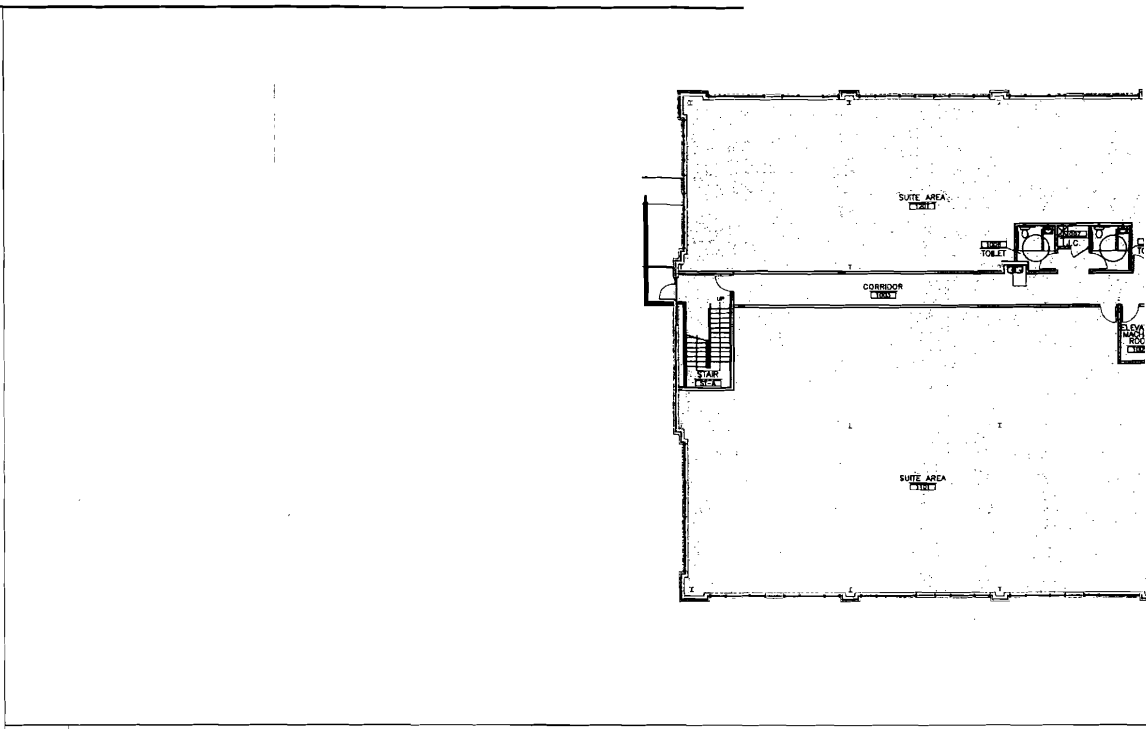


060508 - Fore River Medical Building Coffee shop suite 170
IBC 2003
OVERVIEW

Description of Project	Existing Business Occupancy B with new accessory assembly space A-2
Code Chapters	Section 303 Assembly group A with accessory use to Business (B)
Type of Construction	Type II B Existing non rated structural frame, interior and exterior bearing walls, roof structure and floor construction non rated
Fire Protection	Existing NFPA 13 sprinkler system
Occupant Load	600 s.f./15 = 40
Separation of Occupancy Table 302.3.2	2 hour

CHAPTER 10 MEANS OF EGRESS

Section Number	Title	Remark
1008.1.3.4	Access Controlled Egress doors	Must meet the requirements of 1008.1.3.4
1008.1.9	Panic Hardware	Panic Hardware is required on all stair exit doors on floors under construction
1013.3	Common Path of egress travel	A-2 Occupancy - limited to 75 ft in areas with NFPA 13 sprinkler system
1014	Exit Access and Doorways	One means of egress required in spaces with less than 50 occupants
1014.2.1	Distance between exits	Separation shall not be more than 1/3 the diagonal distance apart. Required and provided separation distances shown on plans.
Table 1015.1 A occupancy	Travel Distance	A-2 = 250 ft
Table 1016.1	Corridor Fire resistance rating	0 hr.



L7 OVERALL FLOOR PLAN
 1/16"=1'-0"

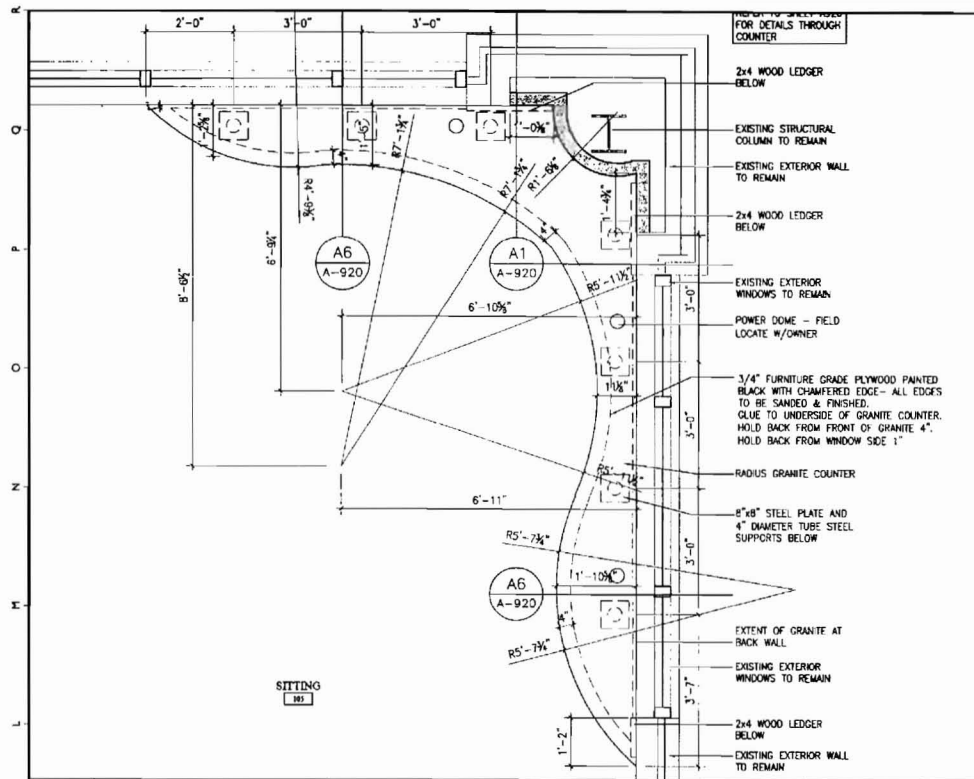
NFPA 2006
OVERVIEW

Description of Project	Tenant fit up of a new coffee shop (M mercantile occupancy) in an existing building with B occupancy. Scope of work is limited to the first floor.	
Type of Construction	Type II 0,0,0 (existing)	
Fire Protection	Existing NFPA 13 sprinkler system - supervised.	
Occupant Load	600 s.f. / 15 = 40	
Occupancy Separation NFPA 2006 Table 6.1.2.2	Small assembly uses. Occupancy of any room or space for assembly purposes by fewer than 50 persons in another occupancy and incidental to such other occupancy shall be classified as part of the other occupancy and shall be subject to the provisions apply	
NFPA Chapters	Chapter 36 AND 37 New and existing mercantile occupancies	

Means of Egress Chapter 7

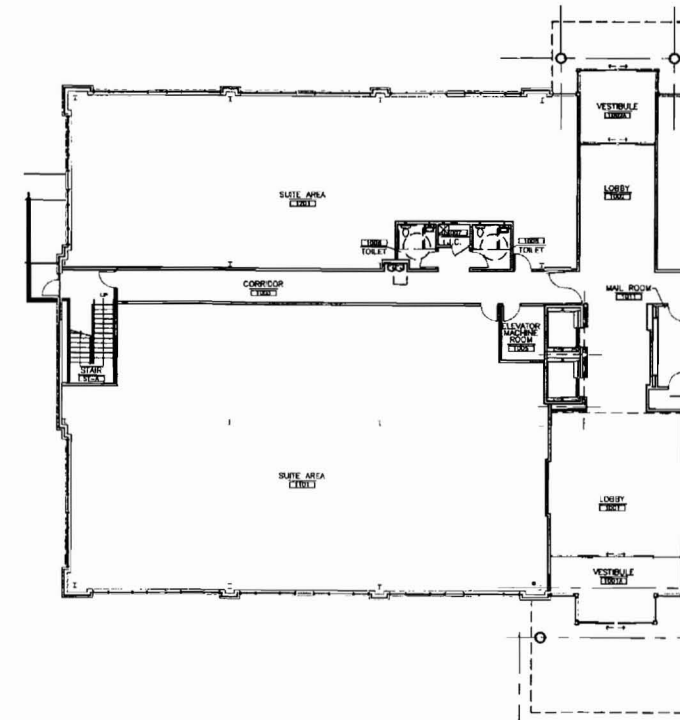
7.1.3.1.1	Exit access corridors	Existing to remain - existing area not under renovation and occupancy is not changing
7.3.2.1(1)	Exits	Existing to remain - existing area not under renovation and occupancy is not changing
7.2.1.6.2	Access - controlled egress doors	The doors shall be arranged to unlock in the direction of egress.
7.2.12.1.2	Area of Refuge	Not required - building is protected with NFPA 13 system
8.7.1.1(2)	Special Hazard Protection	Protecting the area with automatic extinguishing systems in accordance with Section 9.7. Rating: 0 hrs. Limited to 250 ft.
Mercantile (M) Table A7.6	Travel Distance	Limited to 250 ft.
38.2.2.2.5	Access controlled egress doors	comply with section 7.2.1.6.2

LEGEND :



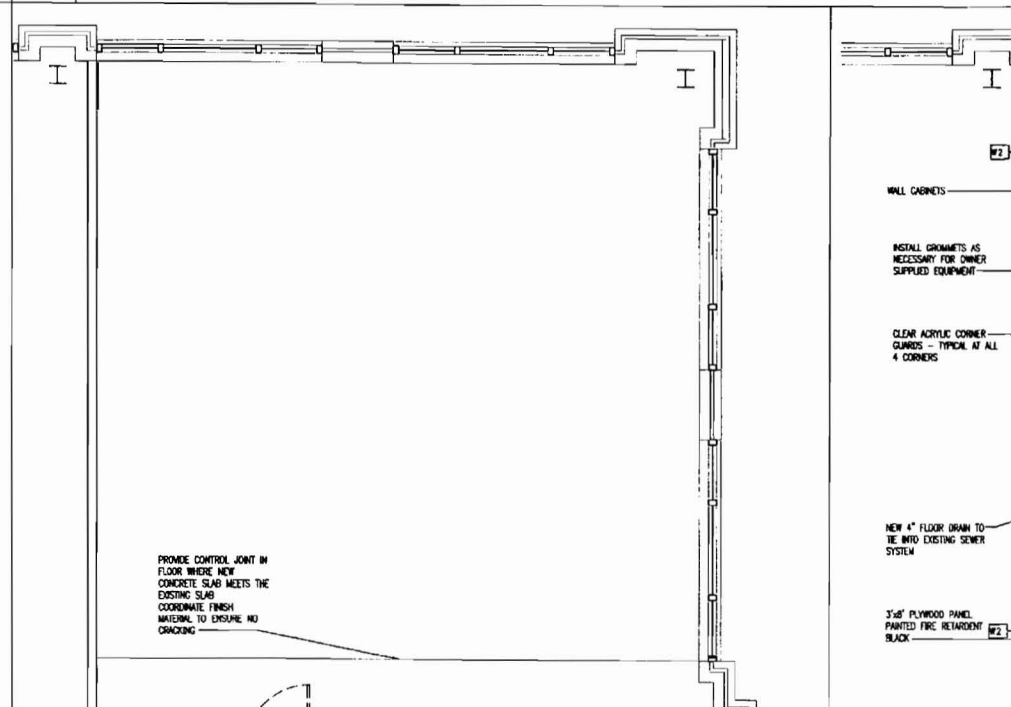
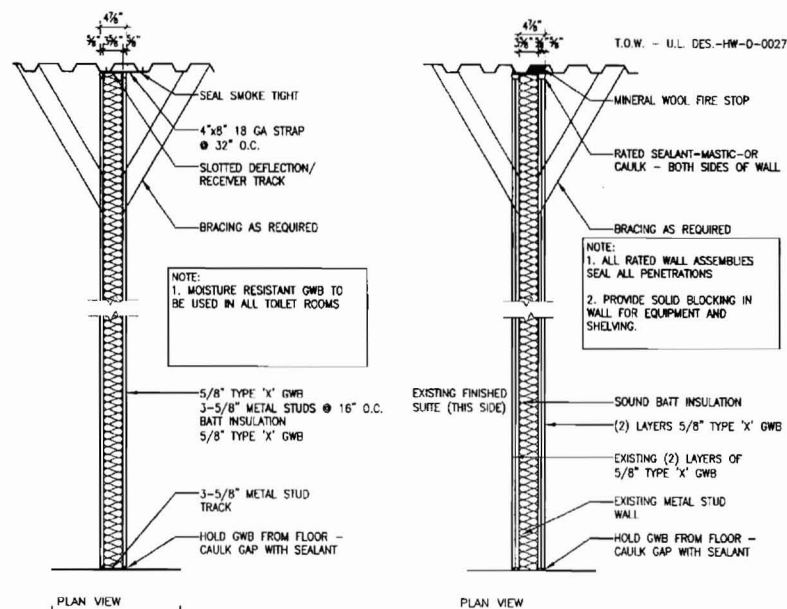
K1 ENLARGED PLAN AT SITTING 105

1/2"=1'-0"









K8 OVERALL FLOOR PLAN

1/16"=1'-0"



LIGHTING LEGEND

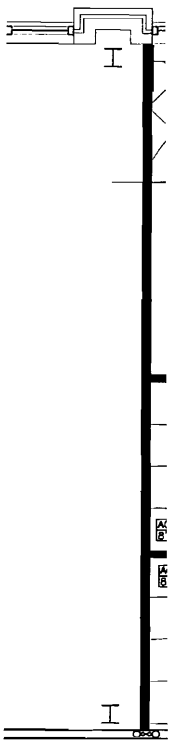
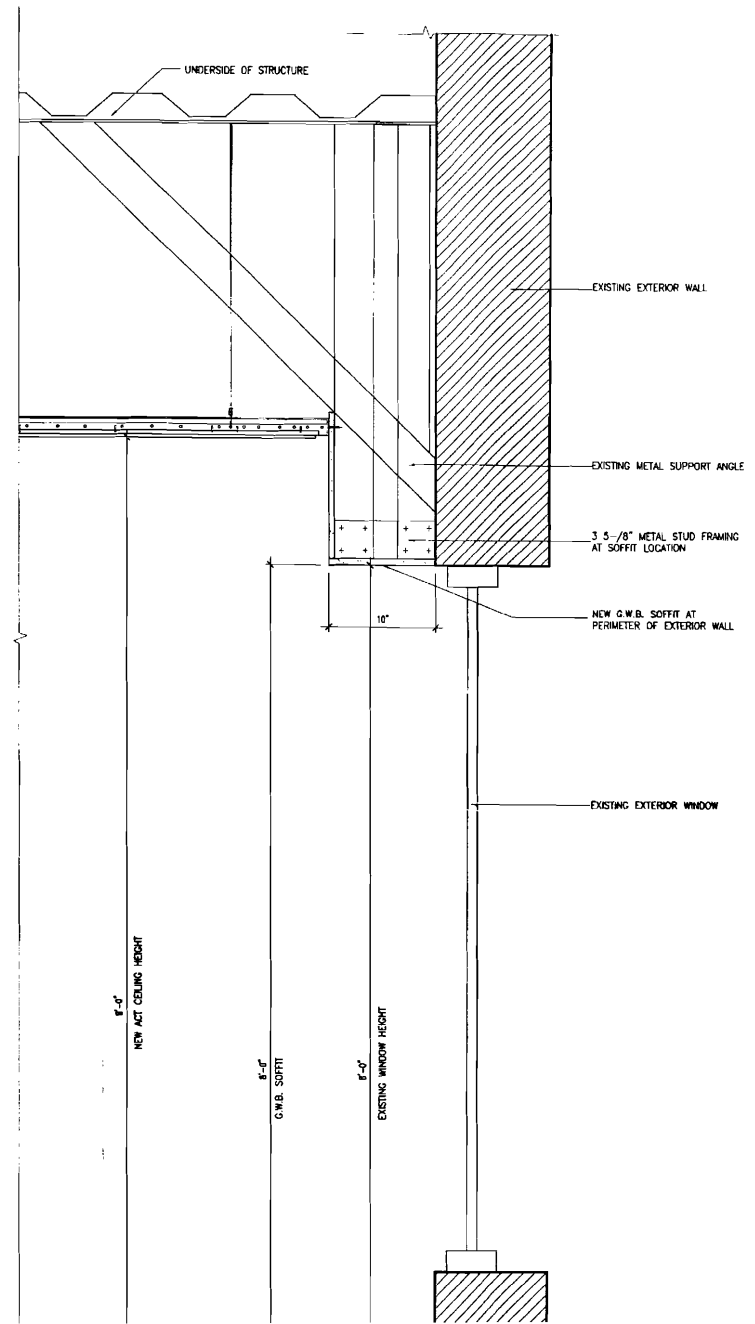
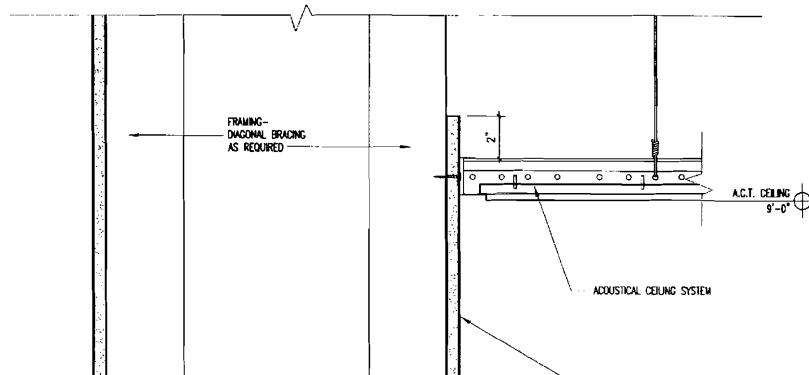
-  LITHONIA LIGHTING
2X2 2RTS
-  LITHONIA LIGHTING
2X4 2RTS
-  6" INTERIOR RECESSED
FLUORESCENT DOWNLIGHT
-  DECORATIVE PENDANT - ELK LIGHTING
406-1-ONE LIGHT CLASSICO MINI PENDANT (PART#2692910)
DARK RUST FINISH WITH ESPRESSO GLASS
<http://www.lightinguniverse.com/products/view.aspx?sku=2692910&h=nlac=recent>
-  DECORATIVE PENDANT - VAXCEL
MR-P000065N-EURO MINI TRACK LIGHT PENDANT (PART#3471834)
SATIN NICKEL FINISH WITH TAFFY SWIRL GLASS
ACCESSORY: CB31499-EURO RAIL (ELECTRICAL CONTRACTOR TO VERIFY QUANTITY OF RAIL NEEDED)
<http://www.lightinguniverse.com/products/view.aspx?sku=3471834&h=nlac=recent>
-  FLUORESCENT LIGHT STRIP

ACT1 - ARMSTRONG CEILINGS, OPTIMA OPEN PLAN #3251. - PRICE AS ALTERNATE 1
ACT2 - ARMSTRONG CEILINGS, FINE FISSURED CERAMAGUARD #607.

NOTES:

1. SWITCH PENDANT LIGHTING @ PREP AREA 104 INDEPENDENTLY. (ALL FOUR PENDANTS ON ONE SWITCH)
2. SWITCH PENDANT LIGHTING OVER SITTING 105 INDEPENDENTLY. (ALL 7 LIGHTS ON ONE SWITCH)
3. GENERAL CONTRACTOR TO LAYOUT THE LOCATION OF CIRCULAR PARTITIONS & SOFFITS BY MARKING-UP ON THE CONC. FLOOR FOR ARCHITECTS REVIEW AND APPROVAL PRIOR TO CONSTRUCTION.
4. PROVIDE CABLE MANAGEMENT TRAY AT SITTING 105.
5. ELECTRICAL CONTRACTOR SHALL COORDINATE OWNER SUPPLIED TELEPHONE & DATA BOXES WITH LOCATIONS OF OUTLETS.
6. ELECTRICAL CONTRACTOR SHALL SUPPLY POWER & COORDINATE WITH ALL OWNER SUPPLIED EQUIPMENT.
7. PROVIDE NON-BREAKABLE LAMPS FOR TYPE 'D' FIXTURE OVER SERVICE COUNTER.

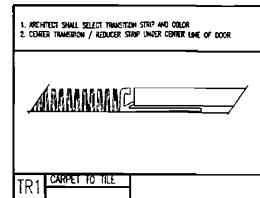
J1 LEGEND



EQUIPMENT SCHEDULE

ROOM NO.	ITEM NO.	EQUIPMENT NAME	ROOM LOCATION	SIZE	FURNISHED BY	INSTALLED BY	NOTES
100	E.01	REFRIGERATED COFFEE DISPENSER	LOBBY	16 5/8x21x22	OWNER	OWNER	
100	E.02	SODA DISPLAY	LOBBY		OWNER	OWNER	
100	E.03	JUICE DISPLAY	LOBBY		OWNER	OWNER	
101	E.04	MOP SINK	TOILET	24x20	CONTRACTOR	CONTRACTOR	CONTRACTOR TO PROVIDE FAUCET CONTROLS
101	E.05	MOP & BROOM HOLDER	TOILET		CONTRACTOR	CONTRACTOR	
103	E.06	ICE MACHINE	STORAGE	30x31.5x29.5	OWNER	CONTRACTOR	BNLH7B350, CME258W5-10
103	E.07	3-BAY POT SINK	STORAGE	61 1/2x22 1/2x40	OWNER	CONTRACTOR	CONTRACTOR TO PROVIDE GARBAGE DISPOSAL
103	E.08	METAL SHELVING	STORAGE		OWNER	OWNER	
104	E.09	STAND UP REF.	PREP AREA	58x21x83	OWNER	CONTRACTOR	MODEL RHT 2-32 WUT
104	E.10	COFFEE STATION	PREP AREA		OWNER	CONTRACTOR	
104	E.11	SANDWICH STATION	PREP AREA	48x30x37	OWNER	CONTRACTOR	TSSU-48-12
104	E.12	MICROWAVE	PREP AREA	22x14x20	OWNER	OWNER	RCS10MPSA
104	E.13	TOASTER	PREP AREA		OWNER	OWNER	
104	*E.14	UNDER COUNTER ICE BIN	PREP AREA		OWNER	CONTRACTOR	
104	*E.15	UNDER COUNTER REFRIGERATOR	PREP AREA		OWNER	CONTRACTOR	
104	*E.16	ESPRESSO MACHINE	PREP AREA		OWNER	CONTRACTOR	
104	*E.17	P.O.S	PREP AREA		OWNER	CONTRACTOR	
104	*E.18	REFRIGERATED DISPLAY CASE	PREP AREA		OWNER	CONTRACTOR	
104	*E.19	PREP SINK	PREP AREA		CONTRACTOR	CONTRACTOR	
104	*E.20	HAND SINK	PREP AREA		CONTRACTOR	CONTRACTOR	
105	E.21	POWER DOME	SITTING	3" DIAMETER	CONTRACTOR	CONTRACTOR	ROOME40 (BRETFORD 4 OUTLET POWER DOME)

* ALL PIECES OF EQUIPMENT NEED TO BE COORDINATED W/ MILLWORK



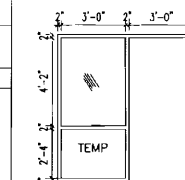
DOOR

NO	TYPE	SIZE
100	A	3'-0"x7'
101	B	3'-0"x7'
102	C	2'-4"x7'

- HARDWARE SET A (SUITE)
 (1) SUITE ENHANC
 (1) 1/2 PR-BALL
 (1) FLOOR STOP
 (1) CLOSER

N14 DOOR S

NTS



WELDED HOLLOW METAL FRAME

K14 FRAME

1/4"=1'-0"



COORDINATE PLUMBING AND CUTS THROUGH FLOOR TILE AT WALL BELOW COUNTER

NEW 4" FLOOR DRAIN TO BE INTO EXISTING SEWER SYSTEM

PROVIDE CONTROL JOINT IN FLOOR WHERE NEW CONCRETE SLAB MEETS THE EXISTING SLAB. COORDINATE FINISH MATERIAL TO ENSURE NO CRACKING.

M1 EQUIPMENT SCHEDULE

NTS

M10 TRANSITION DETAIL

NTS

INTERIOR FINISH SCHEDULE

060508

COFFEE SHOP SUITE 170

ABBREVIATIONS

C	CARPET	SYD	SQUARE YARD(S)
G	GROUT	T	TILE
N/A	NOT APPLICABLE	TBS	TO BE SELECTED
P	PAINT	VCB	VINYL COVE BASE
PL	PLASTIC LAMINATE	VCT	VINYL COMPOSITE TILE
R	RESILIENT/RUBBER/RUBBER TREAD	VSB	VINYL STRAIGHT BASE
SC	SEALED CONCRETE	WC	WALL COVERING (VINYL/PAPER)
SF	SQUARE FEET	WCB	WALL COVERING BORDER (VINYL/PAPER)
SS	SOLID SURFACE/NATURAL STONE	WD	WOOD

Room #	Room Name	Floor		Walls					Trim			Countertop/ Worksurface/ Cabinets	Remarks	
		Floor	Grout	North Wall	East Wall	South Wall	West Wall	Wainscoting	Base	Decorative Trims	Door(s)			Door & Window Moulding
FIRST FLOOR														
100	LOBBY	T1	G1	P3	P2	P6	P7						SS1	
101	TOILET	T1	G1	P3	P3	P4	P3					PL1		
102	TELEDATA	T1	G1	P3	P3	P3	P2					PL1		
103	STORAGE	T1	G1	FRP	FRP	FRP	FRP							
104	PREP AREA	T1	G1	P3	N/A	P3	T1/P5					SS1/SS2	PL2	
105	SITTING	T1	G1	P5	P2	N/A							SS1	
106	CORRIDOR	ETR												

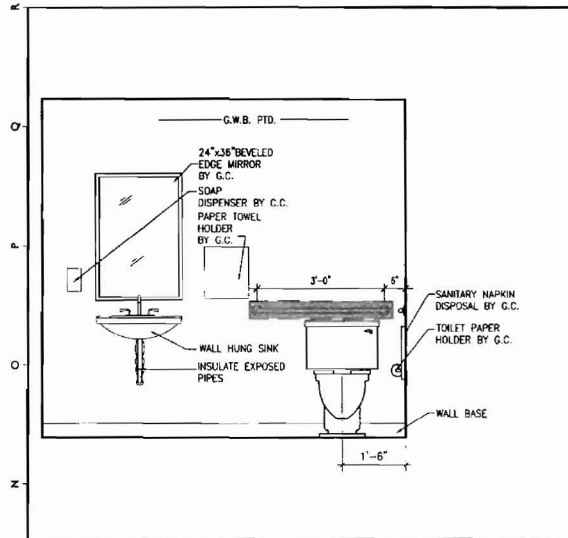
C	CARPET	T	TILE
G	GROUT	TBS	TO BE SELECTED
N/A	NOT APPLICABLE	VCB	VINYL COVE BASE
P	PAINT	VCT	VINYL COMPOSITE TILE
PL	PLASTIC LAMINATE	VSB	VINYL STRAIGHT BASE
R	RESILIENT/RUBBER/RUBBER TREAD	WC	WALL COVERING (VINYL/PAPER)
SF	SQUARE FEET	WCB	WALL COVERING BORDER (VINYL/PAPER)
SS	SOLID SURFACE/NATURAL STONE	WD	WOOD
SYD	SQUARE YARD(S)		

INTERIOR FINISH LEGEND

060508

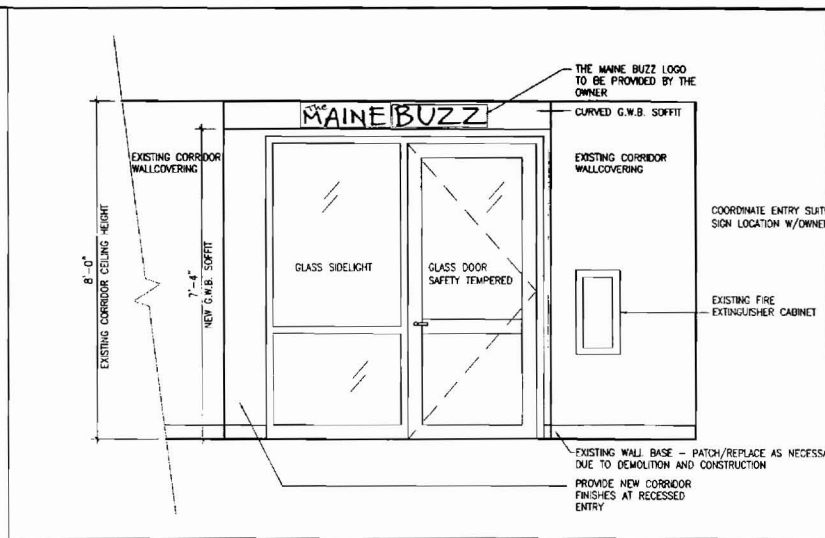
COFFEE SHOP SUITE 170

CODE	MATERIAL	MANUFACTURER	PRODUCT, STYLE AND COLOR	FINISH	REMARKS/NOTES
T1	PORCELAIN TILE	DALTE	VERANDA, GOLD P521	SEALED	13" x 13" FIELD TILE
TB1	TILE BASE	DALTE	VERANDA, GOLD P521, S-3897	SEALED	6" x 13" COVE BASE
P1	PAINT	BENJAMON MOORE COLOR PREVIEW	2154-70 VANILLA ICE CREAM	SEM-GLOSS	ALL TRIM AND HOLLOW METAL FRAMES PAINTED P1
P2	PAINT	BENJAMON MOORE COLOR PREVIEW	2154-50 STRAW	SATN	
P3	PAINT	BENJAMON MOORE COLOR PREVIEW	2154-40 YORK HARBOR YELLOW	SATN	
P4	PAINT	BENJAMON MOORE COLOR PREVIEW	2175-30 RUST	SATN	
P5	PAINT	BENJAMON MOORE COLOR PREVIEW	2172-20 WARS RED	SATN	
P6	PAINT	BENJAMON MOORE COLOR PREVIEW	3052-40 BLUE SPA	SATN	
G1	GROUT	FROVA	PR GROUT SANDED COLOR MONARQUE/MONARCH 28	SEALED	



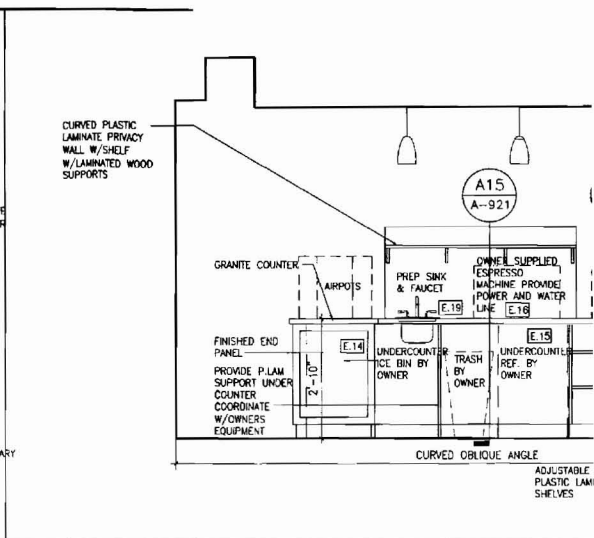
M1 INTERIOR ELEVATIONS

1/2"=1'-0" TOILET 101



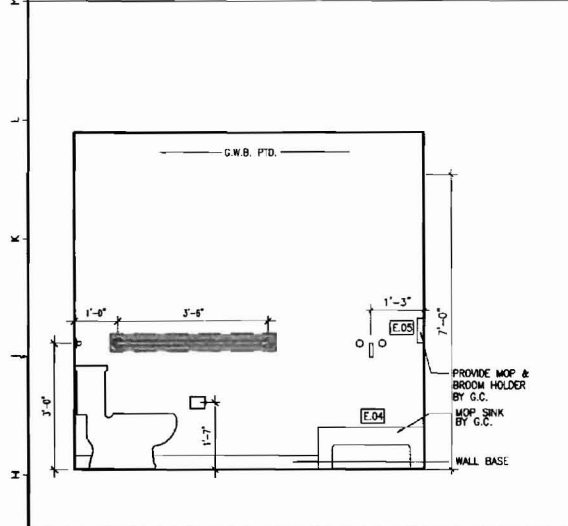
M5 INTERIOR ELEVATIONS

1/2"=1'-0" VIEW FROM CORRIDOR LOOKING AT ENTRY TO SUITE



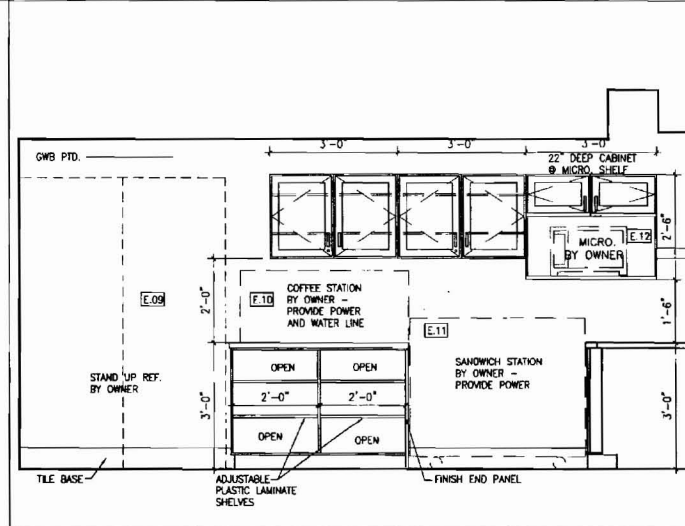
M11 INTERIOR ELEVATIONS

1/2"=1'-0" PREP AREA 104



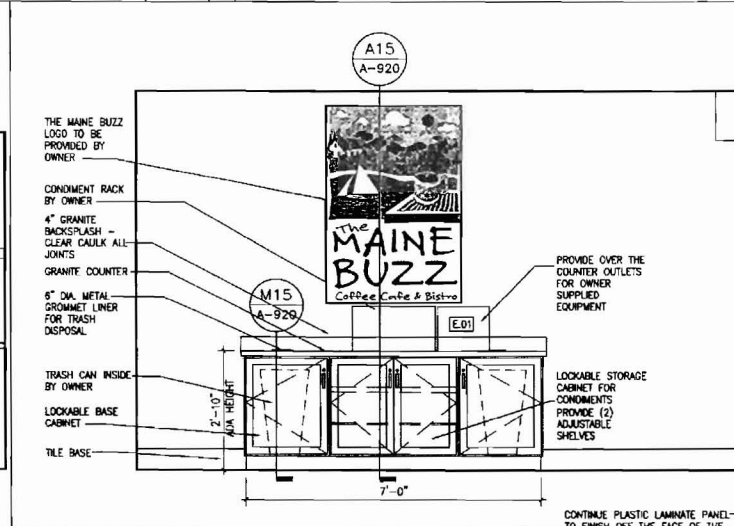
G1 INTERIOR ELEVATIONS

1/2"=1'-0" TOILET 101



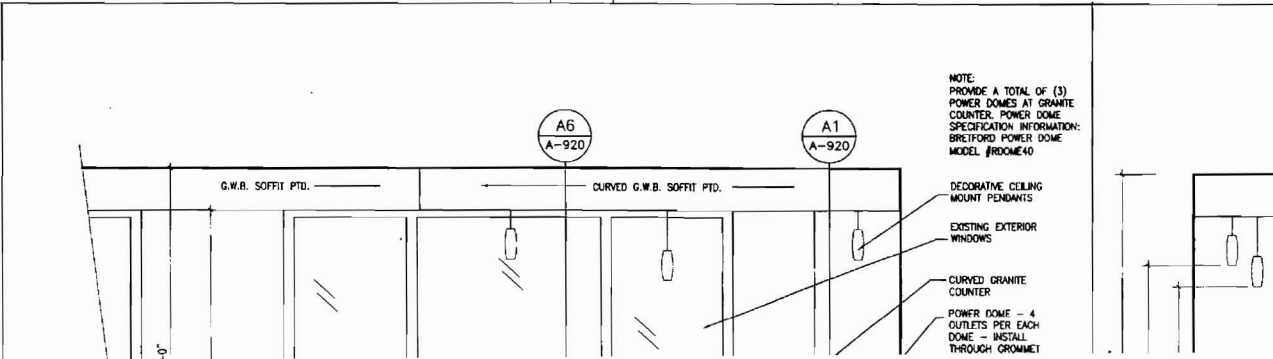
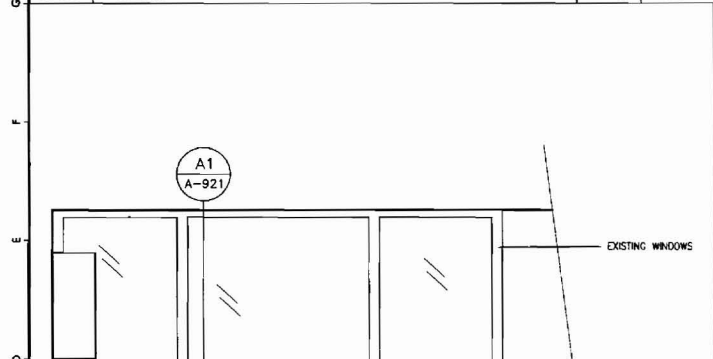
G5 INTERIOR ELEVATIONS

1/2"=1'-0" PREP AREA 104



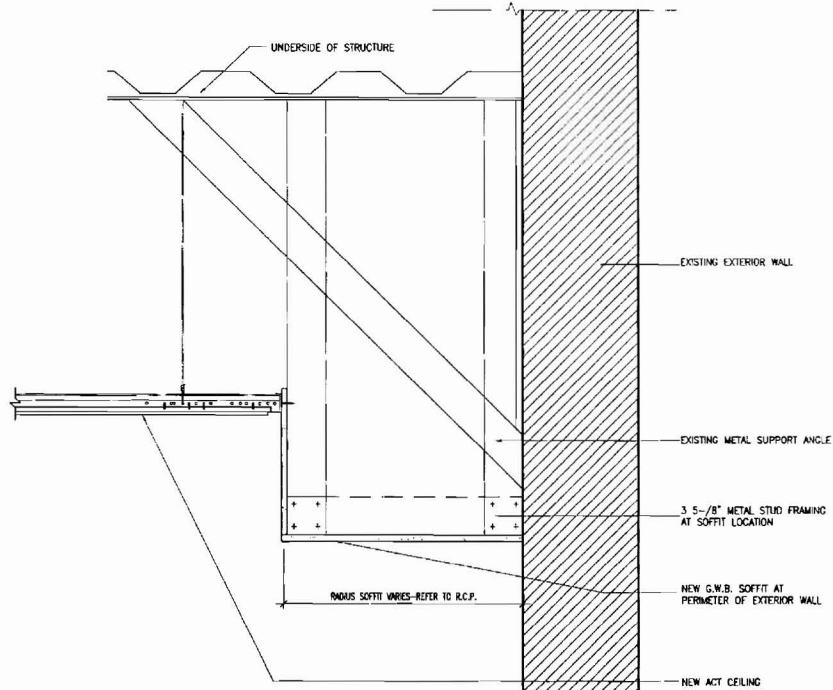
G10 INTERIOR ELEVATIONS

1/2"=1'-0" LOBBY 100



NOTE:
PROVIDE A TOTAL OF (3)
POWER DOMES AT GRANITE
COUNTER. POWER DOME
SPECIFICATION INFORMATION:
BREITFORD POWER DOME
MODEL #PDOME40

NOTE:
G.C. TO FIELD VERIFY ALL
DIMENSIONS BEFORE
INSTALLATION OF ANY MILLWORK



NOTE:
PROVIDE A TOTAL OF (3) POWER
DOMES AT GRANITE COUNTER.
POWER DOME SPECIFICATION
INFORMATION:
BRETFORD POWER DOME
MODEL #RDOME40
http://bretford.com/products/pricing.asp?d=143#dames_with_power

POWER DOME - 4 OUTLETS PER
EACH DOME - INSTALL
THROUGH GROMMET ON SITE
AND FIELD LOCATE W/OWNER

GRANITE COUNTER W/RADIUSSED
EDGES - POLISHED FINISH

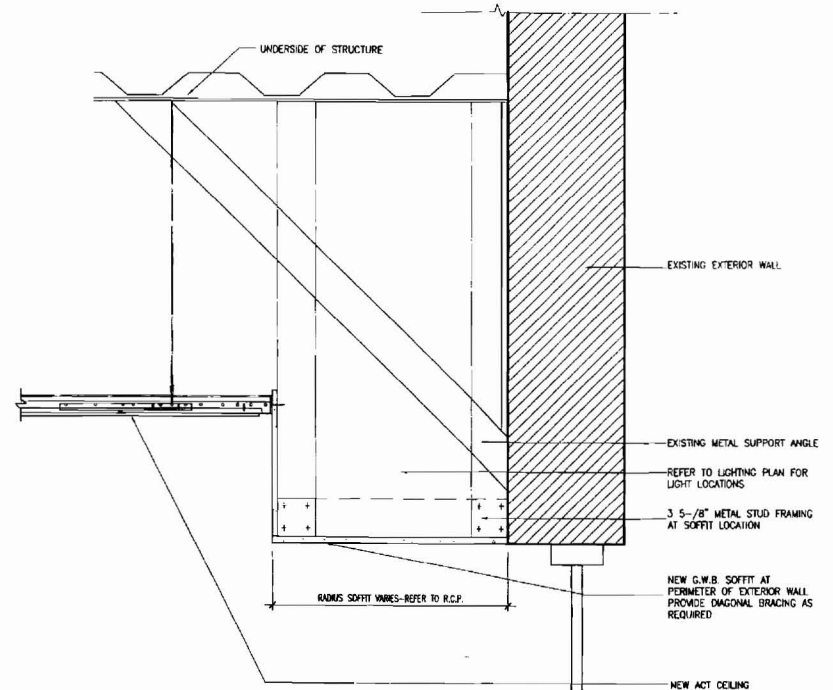
3/4" FURNITURE GRADE
PLYWOOD PAINTED BLACK WITH
CHAMFERED EDGE - ALL EDGES
TO BE SANDED & FINISHED.
GLUE TO UNDERSIDE OF
GRANITE COUNTER

RADIUS COUNTER VARIES - REFER TO ENLARGED FLOOR PLAN

NOTE:
AT FULL WALL CONDITION RUN
PLYWOOD ALL THE WAY TO THE
WALL AND PROVIDE A 2x4
LEDGER

2x4 WOOD LEDGER

WIRE MANAGEMENT TRAY -
FASTEN TO UNDERSIDE OF
PLYWOOD



NOTE:
PROVIDE A TOTAL OF (3) POWER
DOMES AT GRANITE COUNTER.
POWER DOME SPECIFICATION
INFORMATION:
BRETFORD POWER DOME
MODEL #RDOME40

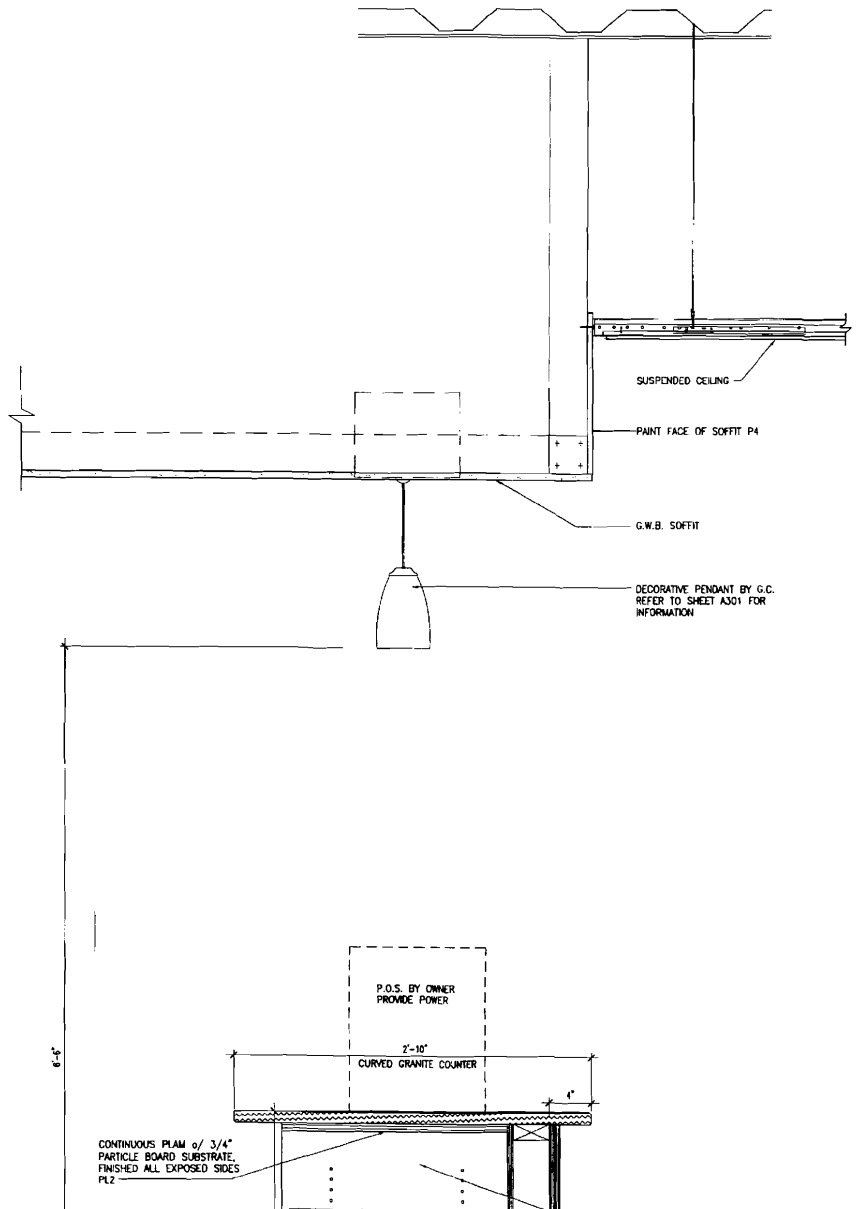
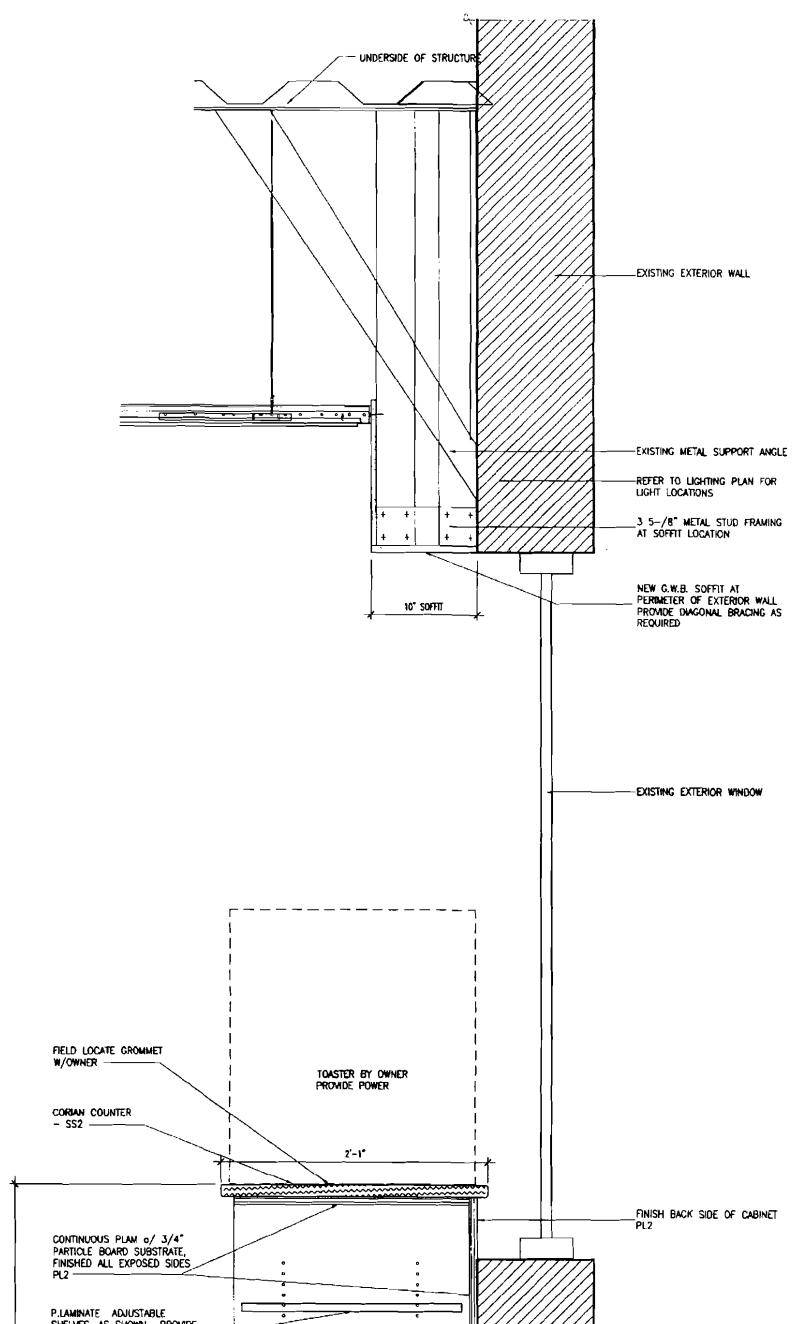
POWER DOME - 4 OUTLETS PER
EACH DOME - INSTALL THROUGH
GROMMET ON SITE AND FIELD
LOCATE W/OWNER

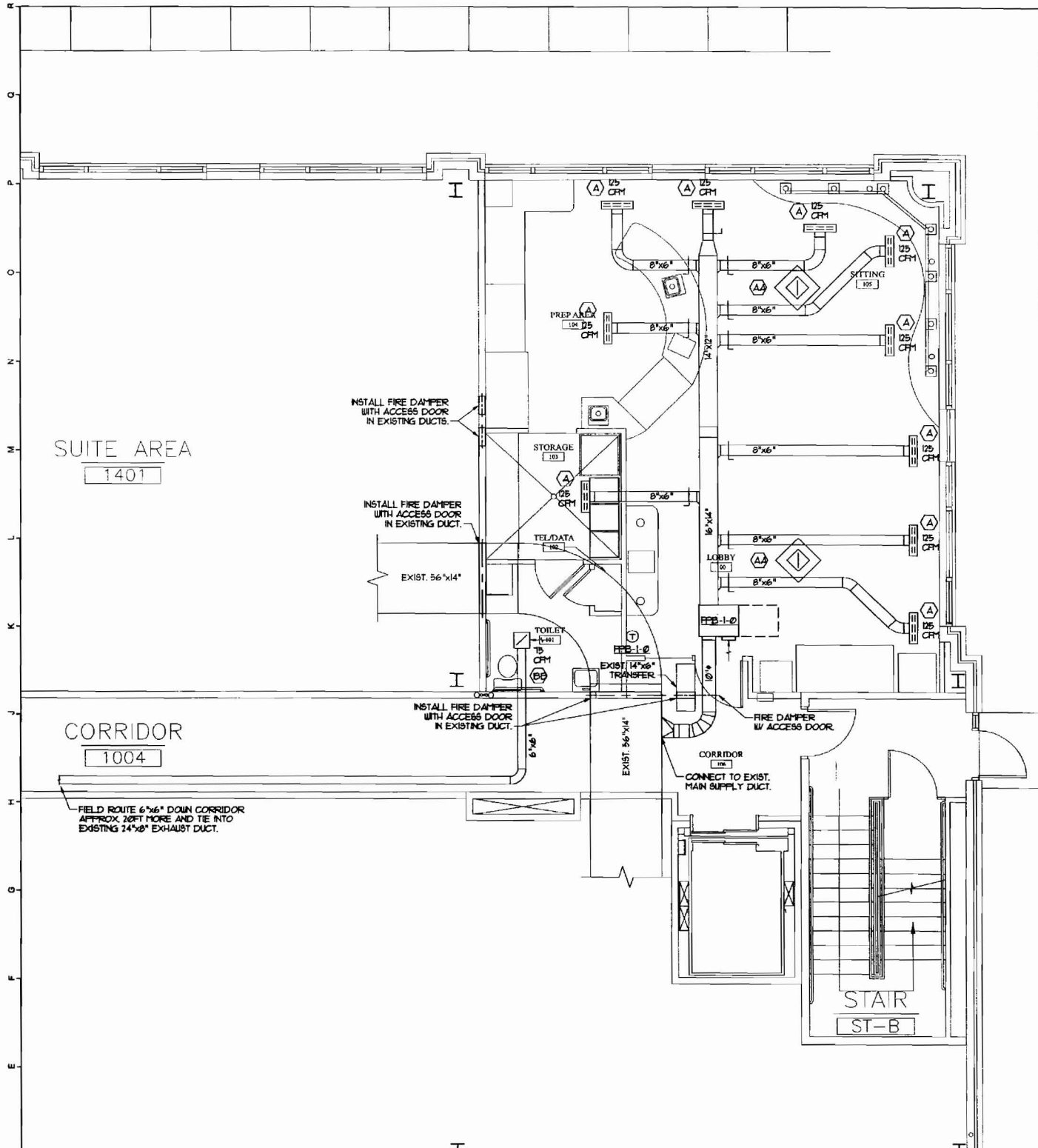
GRANITE COUNTER W/RADIUSSED
EDGES - POLISHED FINISH

3/4" FURNITURE GRADE
PLYWOOD PAINTED BLACK WITH
CHAMFERED EDGE - ALL EDGES
TO BE SANDED & FINISHED.
GLUE TO UNDERSIDE OF
GRANITE COUNTER

RADIUS COUNTER VARIES - REFER TO ENLARGED FLOOR PLAN

Q
P
O
N
M
L
K
J
I
H
G
F
E
D

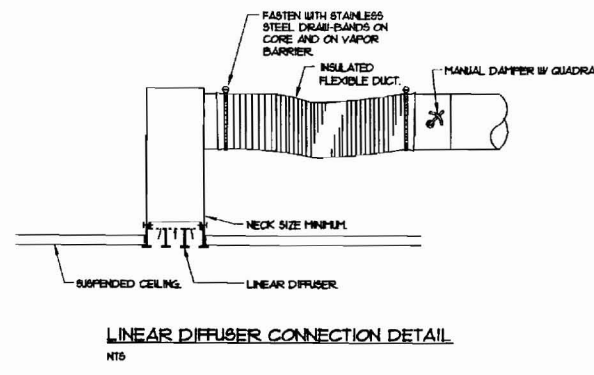




FAN-POWERED VAV BOX

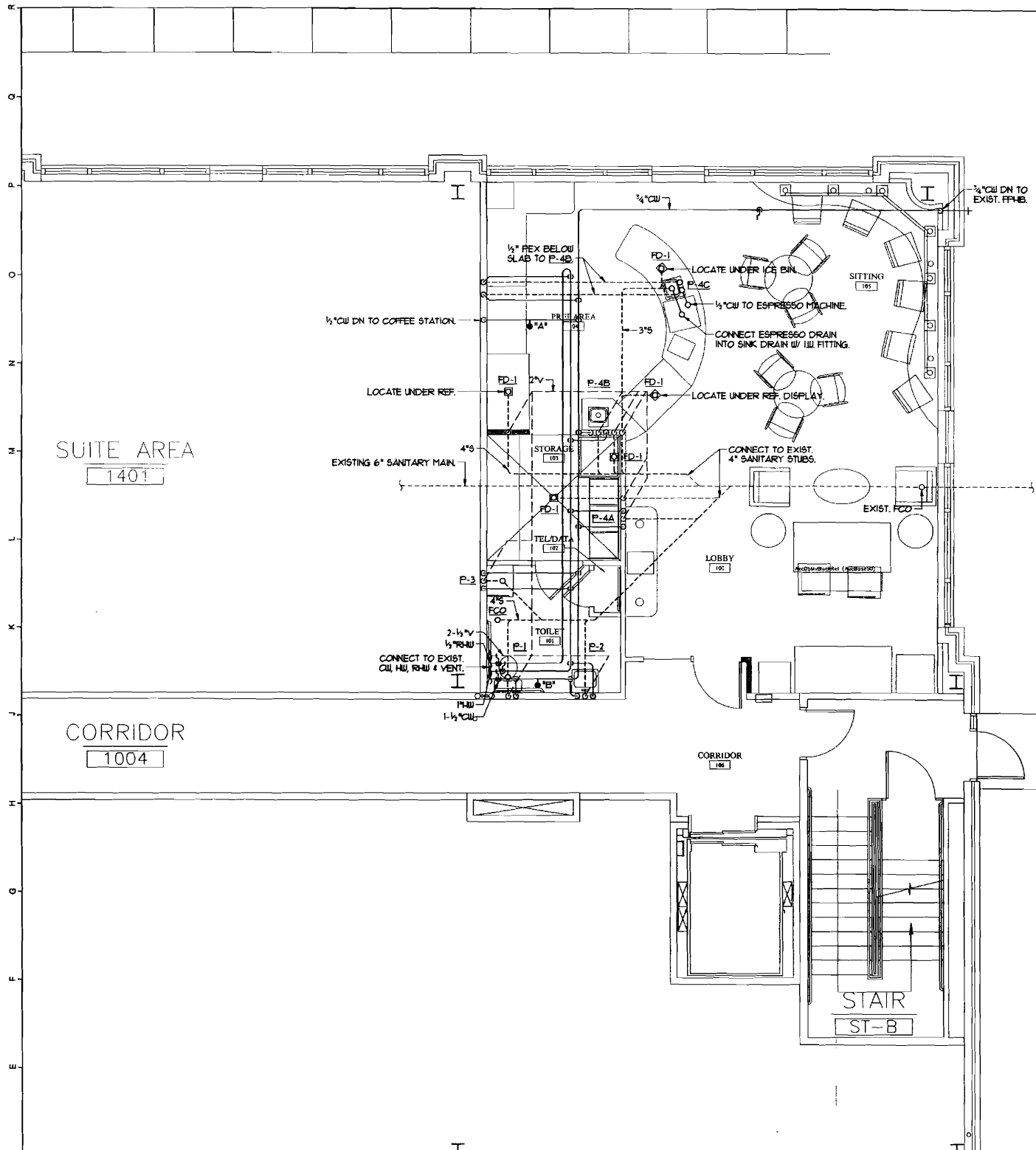
TAG	INLET SIZE (IN)	AIRFLOW DATA		
		MAX. PRIMARY AIR (CFM)	MIN. PRIMARY AIR (CFM)	MAX. RETURN AIR (CFM)
FPB-1-0	10	1250	625	1250

AIR C	
TAG	F 51
(A)	2
(AA)	2
(BB)	2



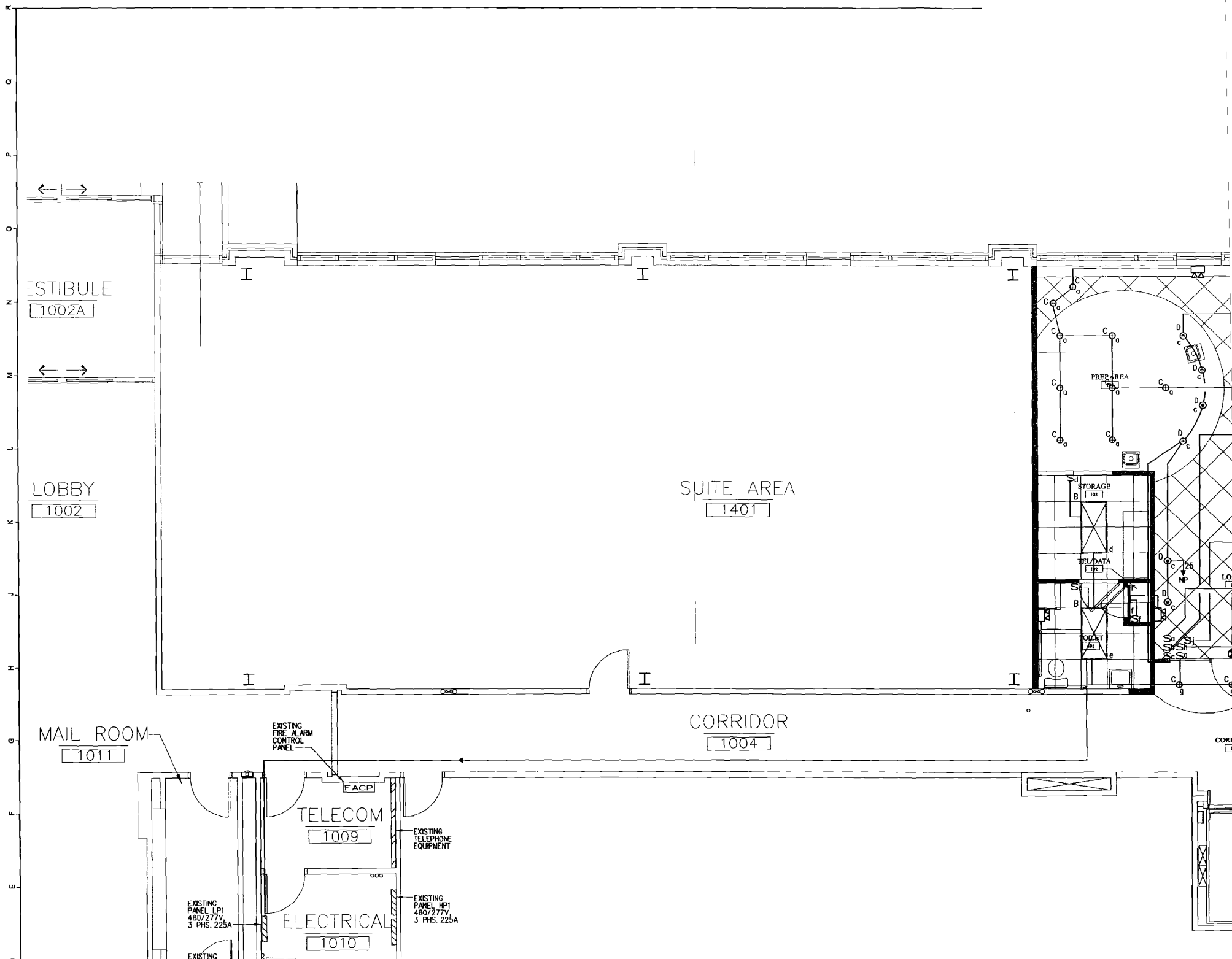
MECHANICAL NOTES

1. SPACE ABOVE "CEILING" IS A RETURN AIR FLENUM. WIRING IN FLENUMS SHALL COMPLY WITH EDITION OF THE NATIONAL ELECTRICAL CODE. LOW VOLTAGE WIRING ABOVE CEILING IN CO IN THE BASE BUILDING, WHICH ARE NON-FLENUM AREAS, MAY BE EXPOSED WHEN THE FLOOR.
2. LOW VOLTAGE WIRING IS NOT TO BE RUN IN THE CEILING SPACE ABOVE PUBLIC RESTROOMS.
3. DUCTWORK SHALL BE SEAL WITH HARD-CAST DUCT-SEAL 321 WATER BASED BRUSH-ON AND IN
4. FIRE DAMPERS SHALL BE RUSKIN MODEL 1D82 WITH RUSKIN MODEL ADCZ ACCESS DOOR.
5. VOLUME DAMPERS SHALL BE RUSKIN MODEL MD35 W/ LOCKING QUADRANT.
6. EXISTING CONDITIONS SHALL BE FIELD VERIFIED AND ALL PRODUCTS SUPPLIED SHALL BE E



PLUMBING NOTES

1. EXISTING CONDITIONS SHALL BE FIELD VERIFIED AND ALL PRODUCTS SUPPLIED SHALL BE
2. DOMESTIC WATER PIPING SHALL BE TYPE L COPPER W/ SOLDERED UJOT COPPER FITTINGS.
3. INSULATE PIPING AS FOLLOWS - COLD WATER (1" AND SMALLER) = 1/2" COLD WATER (1-1/4" AN
4. SANITARY AND VENT PIPING SHALL BE SCHEDULE 40 PVC W/ SOLVENT WELDED JOINTS.
5. P-1 SHALL BE ADA AMERICAN STANDARD CADET 23TU020 PRESSURE ASSIST W/ OLSONITE C
6. P-2 SHALL BE ADA WALL HUNG ELJER SIGNATURE 051-2101, ELJER 2510267 FAUCET, CARRIER
7. P-3 SHALL BE FIAT 1925-2424, BUMPER GUARD, HOP HANGER, HOSE & HOSE BRACKET AND C
8. P-4A SHALL BE A 3-BAY POT SINK PROVIDED BY OWNER.
9. P-4B SHALL BE ELKAY BLR50C PACKAGE WHICH INCLUDES AN ELKAY BLR5 (15"x15") SINK
10. P-4C SHALL BE ELKAY BLR50C PACKAGE WHICH INCLUDES AN ELKAY BLR5 (15"x15") SINK
11. FD-1 SHALL BE ZURN Z-4B, TYPE B POLISHED NICKEL BRONZE STRAINER AND ZURN Z-1022 /
12. CONTRACTOR SHALL VERIFY AND PROVIDE PLUMBING CONNECTIONS FOR ALL OWNER FURNI



ESTIBULE
1002A

LOBBY
1002

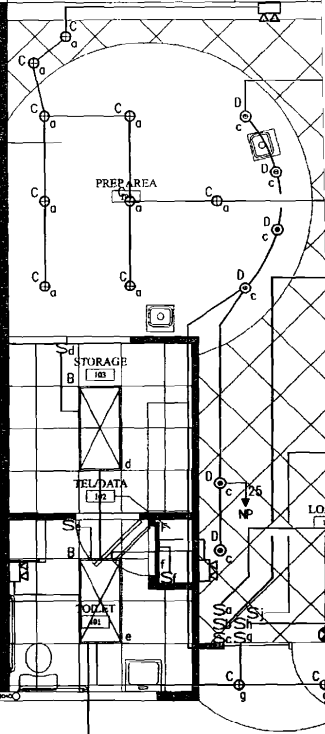
SUITE AREA
1401

MAIL ROOM
1011

CORRIDOR
1004

TELECOM
1009

ELECTRICAL
1010



EXISTING
FIRE ALARM
CONTROL
PANEL

FACP

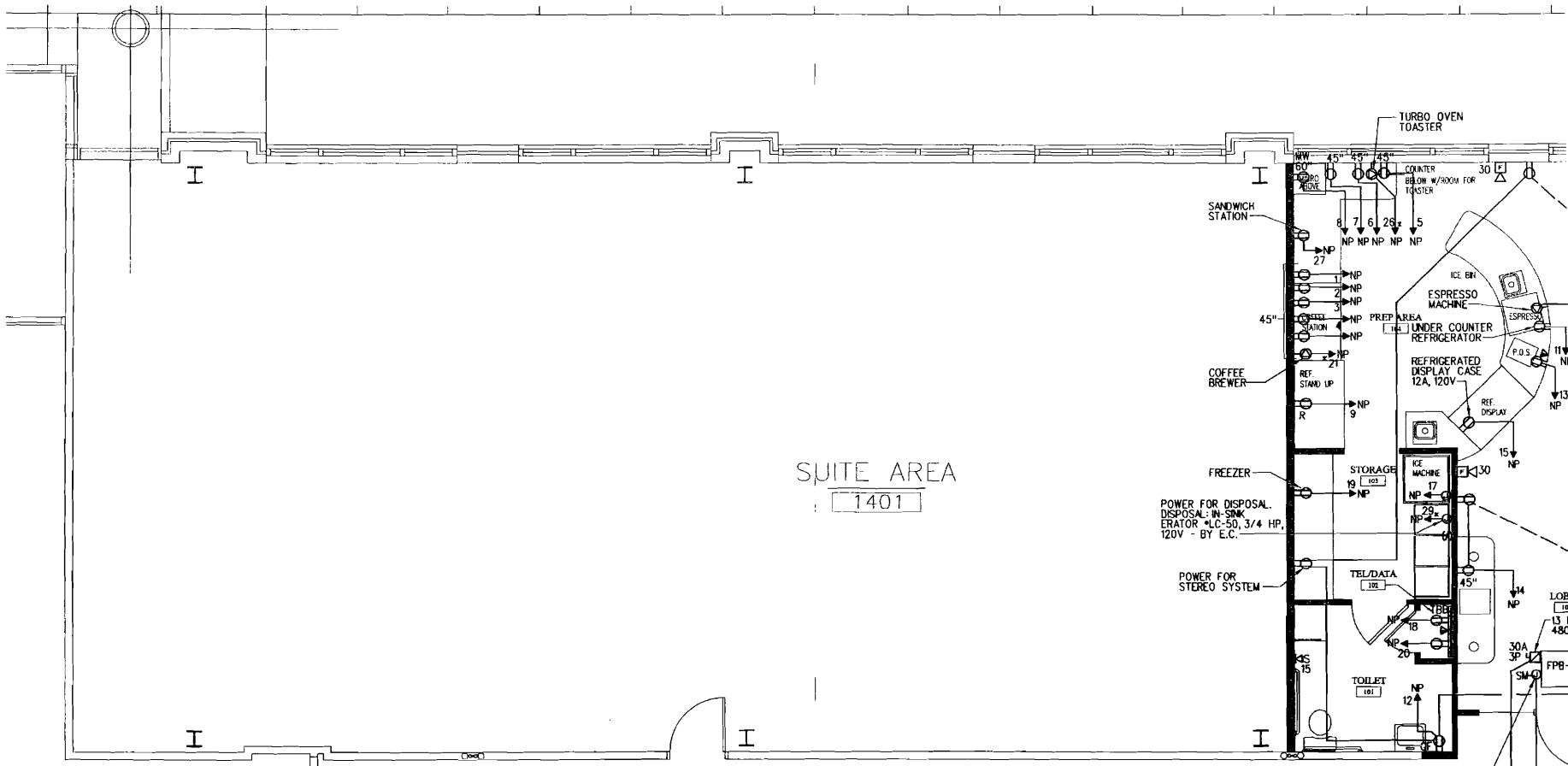
EXISTING
TELEPHONE
EQUIPMENT

EXISTING
PANEL LP1
480/277V
3 PHS. 225A

EXISTING
PANEL HP1
480/277V
3 PHS. 225A

EXISTING

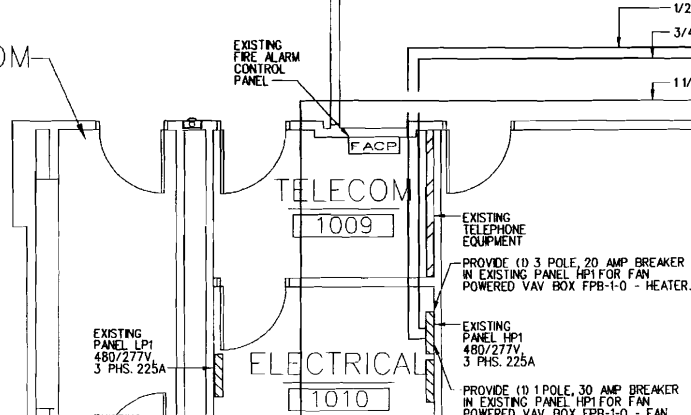
R
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H
G
F
E
D



SUITE AREA
1401

CORRIDOR
1004

DOM



TELECOM
1009

ELECTRICAL
1010

EXISTING TELEPHONE EQUIPMENT
PROVIDE (1) 3 POLE, 20 AMP BREAKER IN EXISTING PANEL HP1 FOR FAN. POWERED VAV BOX FPB-1-0 - HEATER.

EXISTING PANEL HP1
480/277V
3 PHS. 225A
PROVIDE (1) 1 POLE, 30 AMP BREAKER IN EXISTING PANEL HP1 FOR FAN. POWERED VAV BOX FPB-1-0 - FAN.

1/2" C - 2, *10 & 1, *10 GND

3/4" C - 3, *10 & 1, *10 GND

1 1/4" C - 4, *2 & 1, *8 GND

POWER FOR DISPOSAL. DISPOSAL IN SINK. ERATOR *LC-50, 3/4 HP, 120V - BY E.C.

POWER FOR STEREO SYSTEM

22.05A, 277V - FAN

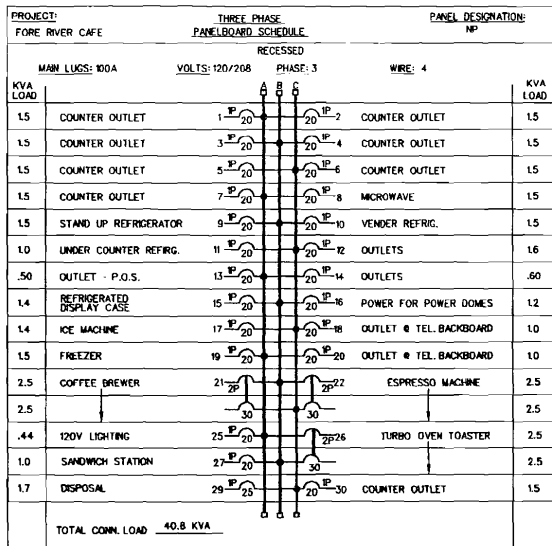
CORRIDOR
104

LOB
13, K
480

FPB-1-0

LIGHTING FIXTURE SCHEDULE

TYPE	DESCRIPTION	LAMPS QUANTITY & TYPE	REMARKS
A	LITHONIA *2RT5-2-241SHO-NVOLT-GBDPS-LP835 (277V)	(2) 2415HO	2X2 VOLUMETRIC - RECESSED
B	LITHONIA *2RT5-2-241SHO-NVOLT-GBDPS-LP835 (277V)	(2) 2415HO	2X4 VOLUMETRIC - RECESSED
C	GOITHAM *R1V32TRT GAR 277	(1) 32W TRIPLE TUBE CF	6" RECESSED OPEN DOWNLIGHT
D	ELK LIGHTING *406-ES FINISH DARK RUST, ESPRESSO GLASS (120V)	(1) 75W MED.	
E	VANDEL *48-PANORAMA FINISH SATIN NICKEL, TAFFY SWIRL GLASS (120V) ACCESSORY: CB3499-EURO RAIL TRACK KIT	(1) 20W JC G4 HAL BI-PIN	MINITRACK LIGHT PENDANT - VERIFY QUANTITY OF RAIL REQUIRED.
F	LITHONIA *SM 2 17 NVOLT ES GBDDPS (277V)	(2) F1718/SPXJ5	6" RECESSED OPEN DOWNLIGHT
G	LITHONIA *LDM S 3 R 120/277 EL N (277V)		LED EXIT LIGHT
H	LITHONIA *ELM2	(2) 5.4W WEDGE BASED KRYPTON	SELF CONTAINED EMERGENCY BATTERY UNIT - 6 VOLTS D.C., 12 WATTS FOR 90 MINUTES.



- Panel Board
- Panel Board
- Electric Motor
- Disconnect Switch
- Disconnect Switch
- Junction Box
- Dedicated Ground
- Power Dome
- Dry Type Transformer
- Variable Frequency Drive
- Manual Motor Device, Mount
- Lighting Panel Indicator Control
- Exit Light
- Self Contained Lighting
- Raceway & Run Concealed
- Raceway & Run Under Floor Finish Grade
- Home Run to Denote Circuits
- Single Pole Aff. 3-3-Way Lower Case Pilot Light Switch
- Duplex Receptacle w/ Matching "D" Denotes
- Duplex Receptacle w/ Matching Except as Noted
- Duplex Receptacle
- Equipment Outlet
- Fire Alarm Alarm Numerals Denotes
- Fire Alarm Visual Numerals Denotes
- Data/Telephone