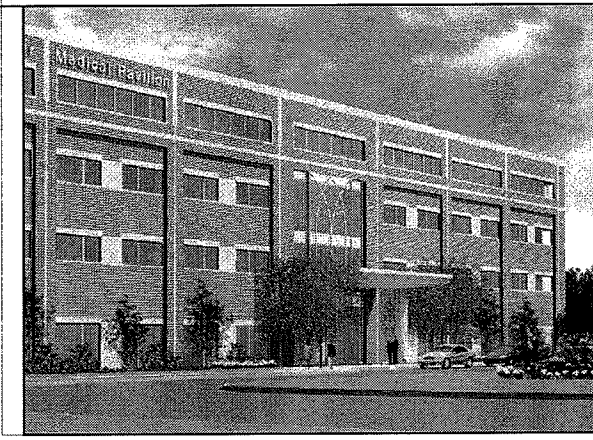


LANDMARK HEALTHCARE FACILITIES LLC

Mercy Hospital Fore River Medical Pavilion Mercy Primary Care Suite

Suite No.: 1301
Floor No.: 1st Floor

Building Rendering



LANDMARK
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Architectural

Francis Cauffman

2120 Arch Street
Philadelphia, PA 19103
Ph 215.568.8250
Fx 215.568.2639

Structural

O'Donnell & Naccarato

111 S. Independence Mall
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Mechanical/Plumbing

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Electrical

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Fire Protection

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- T1.1 Title Sheet
- T1.2 General Notes
- A12.1 First Floor - New Work Plan
- A12.2 Furniture and Equipment Plan
- A12.3 Reflected Ceiling Plan
- A12.4 Interior Elevations
- A12.5 Interior Elevations
- A12.6 Interior Elevations
- A12.7 Door Schedule and Details
- A12.8 Room Finish Schedule
- A12.8A FFE Schedule
- A12.9 Partition Types
- A12.10 Partition Types and Counter Details
- A12.11 Casework Details

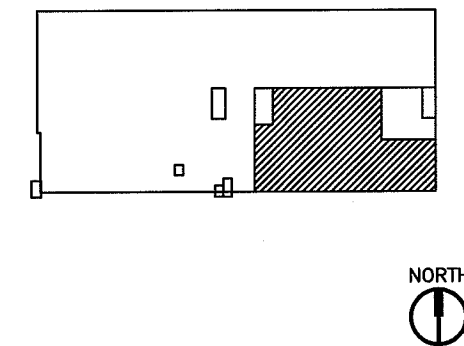
NOT USED

- H-1.0 HVAC Cover Sheet
- H-2.0 HVAC Floor Plan
- H-3.0 HVAC Schedules
- P-1.0 Plumbing Cover Sheet
- P-1.1 Plumbing General Notes
- P-2.0 Plumbing Floor Plan
- P-3.0 Plumbing Schedules
- P-4.0 Plumbing Details
- P-5.0 Plumbing Domestic Water Riser Diagram
- P-5.1 Plumbing Sanitary Riser Diagram

- E-1.0 Electrical Cover Sheet
- E-2.0 Electrical Floor Plan Power
- E-3.0 Electrical Floor Plan Lighting
- E-4.0 Electrical Schedules
- E-4.1 Electrical Schedules
- E-5.0 Electrical Details

- FP-1.0 Fire Protection Cover Sheet
- FP-2.0 Fire Protection Floor Plan
- FP-3.0 Fire Protection Schedules and Details

1st Floor Plan - Suite Location

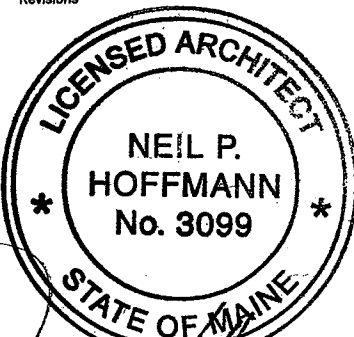


Building Data / Code Summary

4,461 S.F.

1. Code Reference: Building Code - International Building Code 2003
Accessibility Code - Maine Accessibility Code ICC / ANSI A117.1
Plumbing Code - International Plumbing Code 2003
Fire Protection Code - NFPA Code / City of Portland
Mechanical Code - International Mechanical Code 2003
Electrical Code - NEC National Electric Code 2005
2. Occupancy / Use Group: Business Use Group B (IBC Code 2003)
New Business Occupancy (NFPA-101)
3. Construction Type: Type II-B with appvd. automatic sprinkler system / IBC 2003
Type II (000) - Unprotected, Noncombustible with approved supervised automatic sprinkler system / NFPA-101/220.
NFPA 13 - Install. of Sprinkler Systems, Ordinary Hazard
4. Fire Resistance:
 - Exterior Wall - 0 Hr.
 - Shaft Wall - 1 Hr.
 - Corridor Wall - 0 Hr.
 - Demising Wall - 2 Hr.
 - Floor/Roof Construction - 0 Hr.
 - Columns/Beams - 0 Hr.
5. Fire Protection System: Fully Sprinkled, Manual Fire Alarm

Revisions



Neil P. Hoffmann

Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet

Title Sheet

Date

March 6, 2008

Project No.

07-5198

Sheet No.

T1.1

LANDMARK
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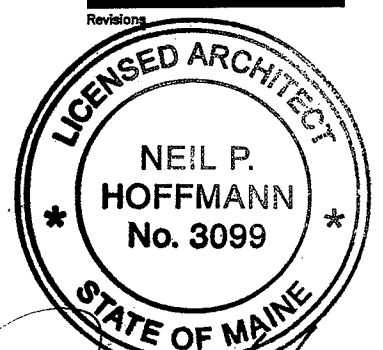
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GENERAL NOTES

1. SUITE AREAS SHALL BE FINISHED IN THE CORE AND SHELL BUILDING PHASE AS NOTED BELOW:
 - A) EXTERIOR STUD WALLS: EXPOSED STUDS, INSULATION AND VAPOR BARRIER IF INDICATED BY WALL SECTIONS
 - B) EXTERIOR CONCRETE WALLS: EXPOSED STUDS OR FURRING, INSULATION AND VAPOR BARRIER
 - C) INTERIOR FIRE RATED PARTITIONS: TAPED GYPSUM BOARD
 - D) INTERIOR NON-RATED PARTITIONS: EXPOSED STUDS (AND INSULATION IF APPLICABLE BY WALL TYPE)
 - E) CEILING: EXPOSED STRUCTURE
 - F) FLOORS ON GRADE: GRANULAR FILL OVER VAPOR BARRIER WITH CONCRETE SLAB, INCLUDE IN SHELL AND CORE CONTRACT. SLABS IN TENANT SUITES TO BE POURED AS TENANT CONSTRUCTION DRAWINGS BECOME AVAILABLE.
 - G) FLOORS AT UPPER LEVEL: EXPOSED STRUCTURE
 - H) COLUMNS UNRATED: EXPOSED STEEL OR CONCRETE
 - J) COLUMNS RATED: FIRE PROOFING ON STEEL OR EXPOSED CONCRETE
2. EXTERIOR WALL BELOW FINISH CEILING SHALL BE INSULATED WITH UN-FACED BATT INSULATION IN METAL STUDS AND VAPOR BARRIER ONLY IN SUITE AREAS. DRYWALL AND FINISH SHALL BE PROVIDED IN SUITE AREA BUILD-OUT CONTRACT AFTER OUTLETS HAVE BEEN LOCATED.
3. EXTERIOR WALL ABOVE FINISH CEILING SHALL BE SIMILAR TO NOTE 2 ABOVE PLUS EXTERIOR WALL SHALL RECEIVE 1/4" GYPSUM BOARD TO PROTECT INSULATION AND VAPOR BARRIER ABOVE CEILING. CONTRACTORS SHALL VERIFY FINISH CEILING HEIGHT WITH LANDMARK PRIOR TO START OF CONSTRUCTION AND SHALL PLACE 1/4" GYPSUM BOARD STARTING 6" ABOVE FINISH CEILINGS.
4. SPACE ABOVE "CEILING" IS A RETURN AIR PLENUM. WIRING IN PLENUMS SHALL COMPLY WITH THE REQUIREMENTS OF THE APPLICABLE EDITION OF THE NATIONAL ELECTRIC CODE. LOW VOLTAGE WIRING ABOVE CEILINGS OF CORRIDORS, TELEPHONE AND ELECTRICAL ROOMS IN THE BASE BUILDING, WHICH ARE NON-PLENUM AREAS, MAY BE EXPOSED WHEN THE FLOOR/ CEILING OR ROOF CEILING IS NOT A U.L. ASSEMBLY; BUT MUST COMPLY WITH PLENUM REQUIREMENTS WHEN PART OF A U.L. ASSEMBLY. LOW VOLTAGE WIRING IS NOT TO BE RUN IN THE CEILING SPACE ABOVE PUBLIC RESTROOMS, ELEVATOR ROOMS, OR MECHANICAL ROOMS.
5. DIMENSIONS ARE FACE OF WALL TO FACE OF WALL (NOMINAL).



Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet

General Notes

Date

March 6, 2008

Project No.

07-5198

Sheet No.

T1.2

**LANDMARK
HEALTHCARE
FACILITIES, LLC**

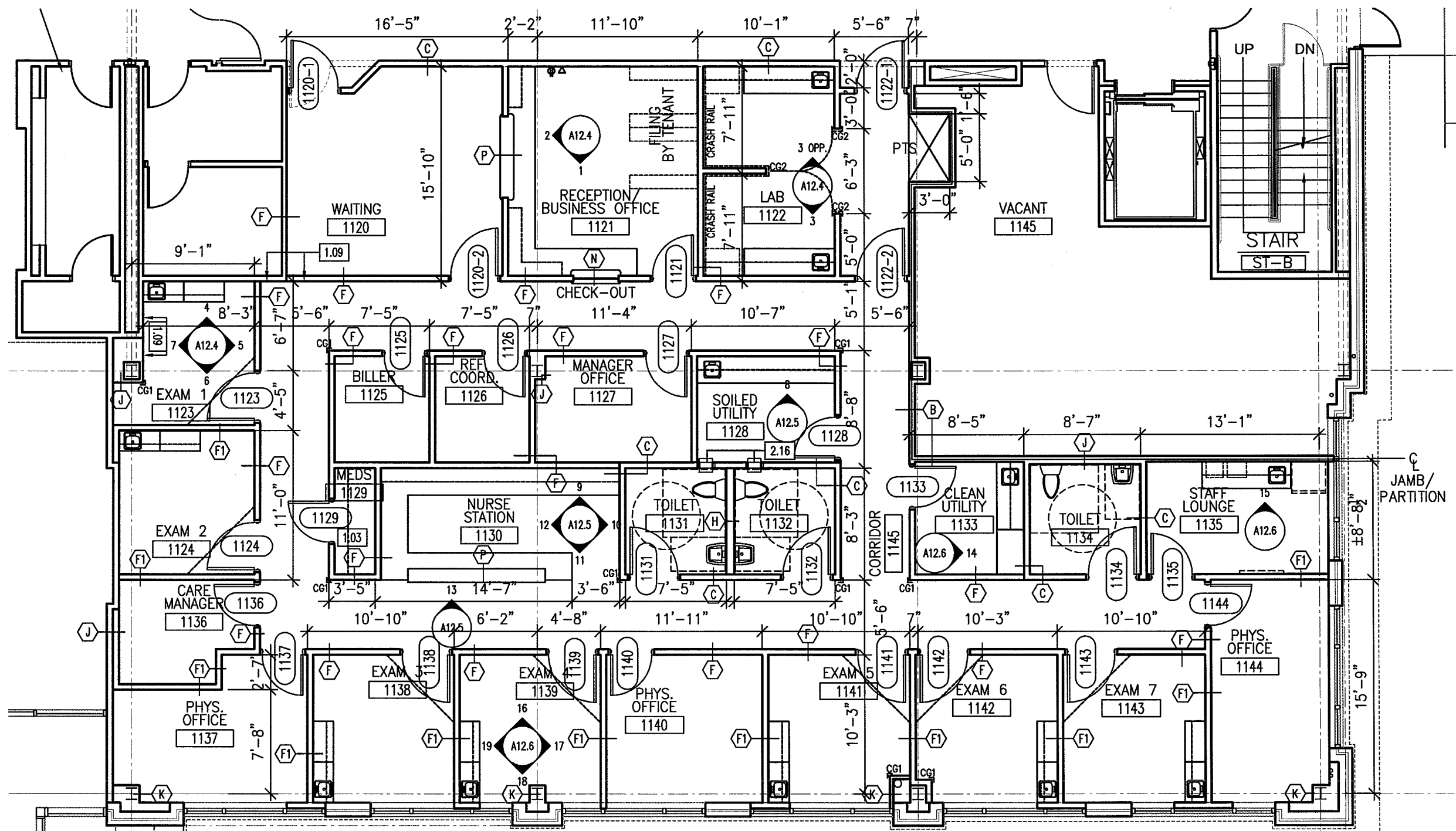
839 North Jefferson Street
Milwaukee, Wisconsin 53202
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Francis Cauffman

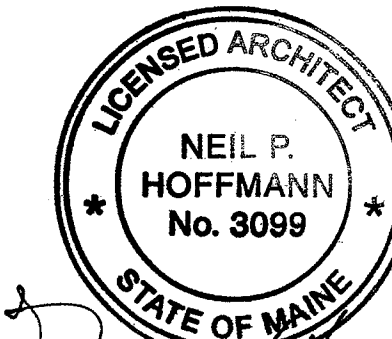
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Revisions



Project
Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

LEGEND

- ROOM NAME / NUMBER
- SHELL AND CORE WORK TO BE DEMOLISHED
- KEY NOTE SYMBOL - SEE KEY NOTE LEGEND FOR DETAILS
- DOOR REFERENCE MARK
- PARTITION REFERENCE MARK
- ELEVATION DETAIL SYMBOL
- ELEVATION NUMBER
- SHEET NUMBER
- SECTION DETAIL SYMBOL
- DETAIL NUMBER
- SHEET NUMBER
- REVISION REFERENCE MARK

KEY NOTE LEGEND

- 1.03 (5) 1'-4" PLASTIC LAMINATE SHELVES ON ADJUSTABLE STANDARDS NO SHELVING WITHIN 18" OF FINISH CEILING
- 1.04 -
- 1.05 GROMMET HOLE IN COUNTERTOP
- 1.06 TELEPHONE BACKBOARD
- 1.07 GYPSUM BOARD FINISH ON SHELL AND CORE METAL STUDS PROVIDED BY OTHERS
- 1.08 FIRE EXTINGUISHER AND BRACKET
- 1.09 ALIGN SURFACE WITH ADJACENT SURFACE
- 2.16 SPECIMEN PASS-THRU CABINET AT 3'-4" A.F.F.

GENERAL NOTES

1. PROVIDE INSULATION AND GYPSUM BOARD FINISH ON THE METAL STUDS PROVIDED IN THE SHELL AND CORE WORK - FIELD VERIFY AND CLARIFY ALL CONDITIONS PRIOR TO BIDDING
2. USE WATER RESISTANT GYPSUM BOARD IN TOILET ROOMS AND OTHER SIMILAR ROOMS
3. ALL CHANGES TO THE SHELL AND CORE WORK DUE TO TENANT WORK SHALL BE INCLUDED IN THE COST FOR TENANT WORK
4. DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE
5. PROVIDE MINI-BLINDS IN ALL TENANT SUITE WINDOWS ANCHORED TO ALUMINUM FRAME

1 NEW WORK PLAN
SCALE: 1/8" = 1'-0"

Sheet
First Floor
New Work Plan

Date
March 6, 2008

Project No.
07-5198

Sheet No.
A12.1

**LANDMARK
HEALTHCARE
FACILITIES, LLC**

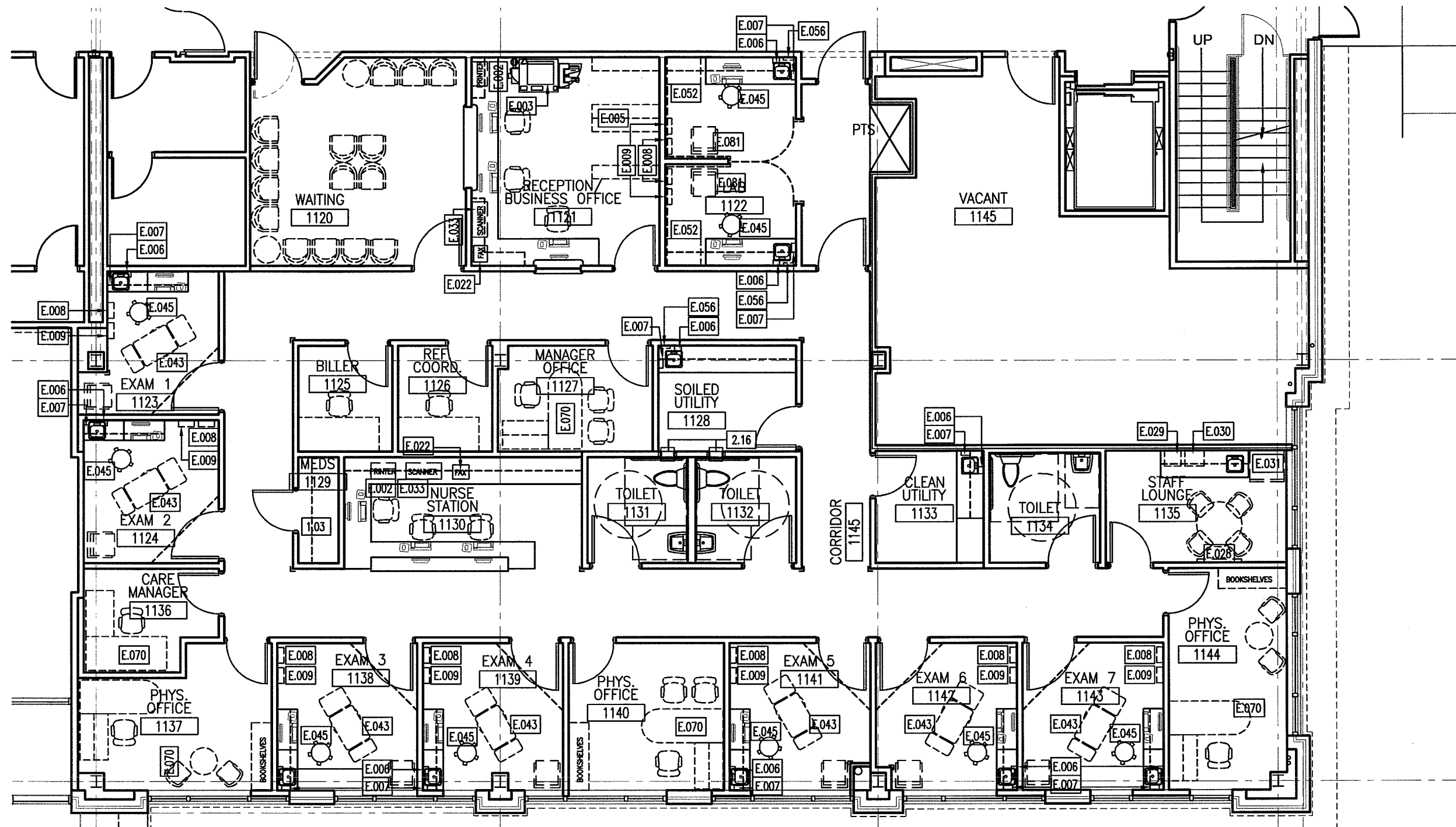
839 North Jefferson Street
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Francis Cauffman

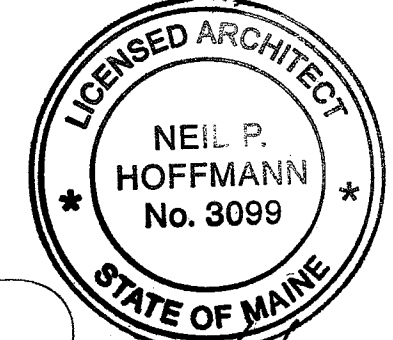
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Revisions



Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet

First Floor
Furn. & Equipment Plan

Date

March 6, 2008

Project No.

07-5198

Sheet No.

A12.2

LEGEND

ROOM NAME / NUMBER
xxx

SHELL AND CORE WORK TO BE DEMOLISHED

KEY NOTE SYMBOL - SEE KEY NOTE LEGEND FOR DETAILS
1.00

DOOR REFERENCE MARK
xxx-1

PARTITION REFERENCE MARK
X

ELEVATION DETAIL SYMBOL
AX.X

ELEVATION NUMBER
3

SHEET NUMBER
2

SECTION DETAIL SYMBOL
X
AX.X

DETAIL NUMBER
AX.X

SHEET NUMBER
2

REVISION REFERENCE MARK

KEY NOTE LEGEND

1.03 (5) 1'-4" PLASTIC LAMINATE SHELVES ON ADJUSTABLE STANDARDS NO SHELVING WITHIN 18" OF FINISH CEILING

1.04 -

1.05 GROMMET HOLE IN COUNTERTOP

1.06 TELEPHONE BACKBOARD

1.07 GYPSUM BOARD FINISH ON SHELL AND CORE METAL STUDS PROVIDED BY OTHERS

1.08 FIRE EXTINGUISHER AND BRACKET

1.09 ALIGN SURFACE WITH ADJACENT SURFACE

2.16 SPECIMEN PASS-THRU CABINET AT 3'-4" A.F.F.

GENERAL NOTES

- THE FOLLOWING WORK, INCLUDING SYSTEMS, DEVICES, AND WIRING, IS NOT INCLUDED IN THE CONTRACT BUT MAY BE PROVIDED BY OTHERS:
 - A. TELEPHONE AND COMPUTER SYSTEMS
 - B. MEDICAL GAS SYSTEM
 - C. PNEUMATIC TUBE SYSTEMS
 - D. SECURITY AND TIME CLOCK SYSTEMS
 - E. NURSE CALL / NURSE NOTIFICATION SYSTEMS
 - F. TOILET PAPER, TOWELS, SOAP DISPENSERS
 - G. CHART HOLDERS AND MAGAZINES RACKS
- JUNCTION BOX AND CONDUIT TO AN ACCESSIBLE CEILING SHALL BE PROVIDED FOR TELEPHONE / COMPUTER SYSTEMS.
- JUNCTION BOX AND CONDUIT TO AN ACCESSIBLE CEILING MAY BE PROVIDED FOR SECURITY, NURSE CALL, NURSE NOTIFICATION, AND OTHER SYSTEMS, IF REQUESTED BY TENANTS.
- ALL FREESTANDING FURNITURE AND EQUIPMENT TO BE PROVIDED BY TENANT. FREESTANDING FURNITURE SHOWN FOR REFERENCE ONLY.

1 FURNITURE AND EQUIPMENT PLAN
SCALE: 1/8" = 1'-0"

**LANDMARK
HEALTHCARE
FACILITIES, LLC**

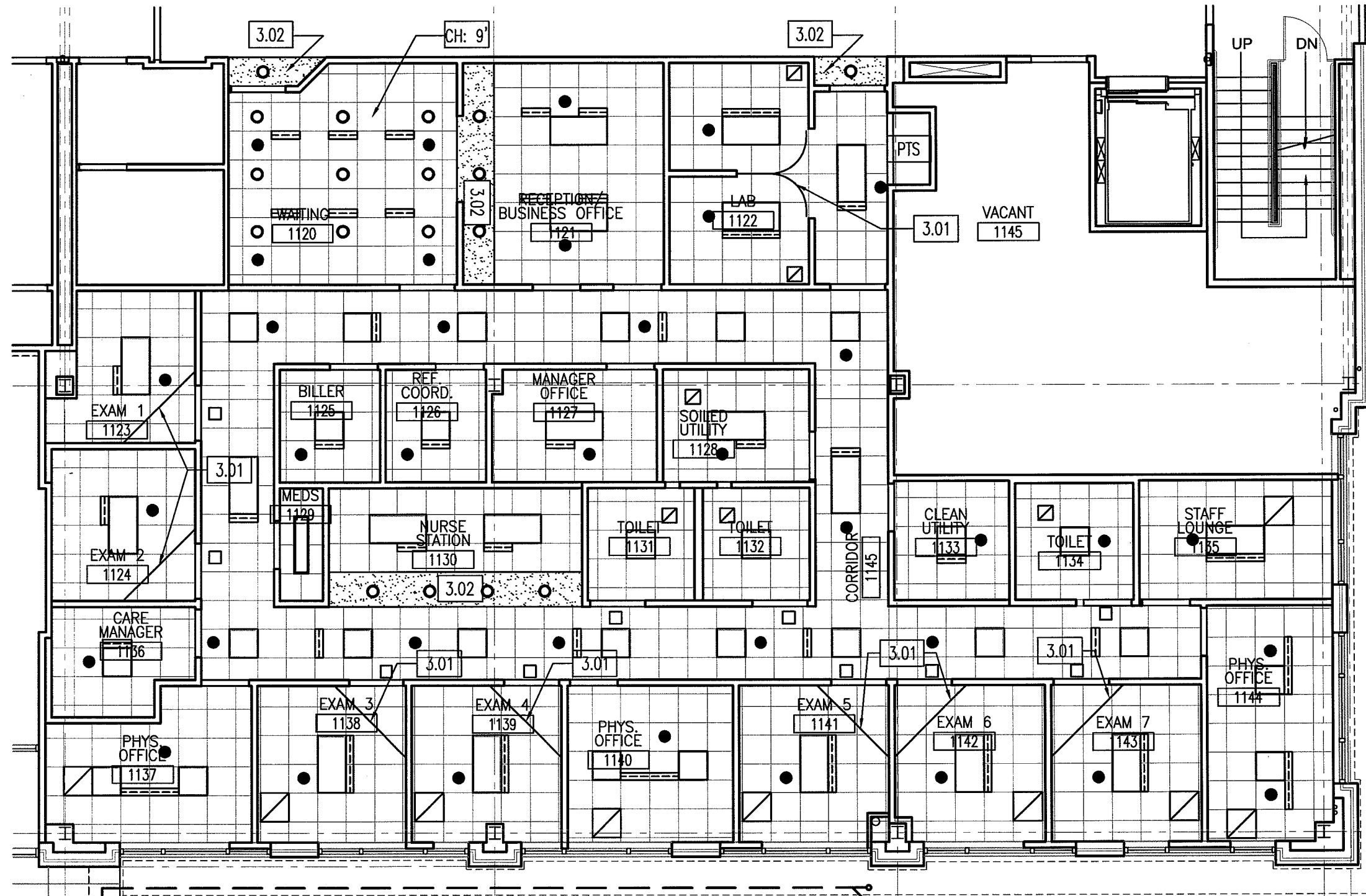
839 North Jefferson Street
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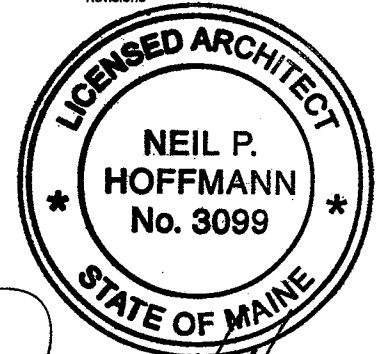
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Revisions



Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet

First Floor
Reflected Ceiling Plan

Date

March 6, 2008

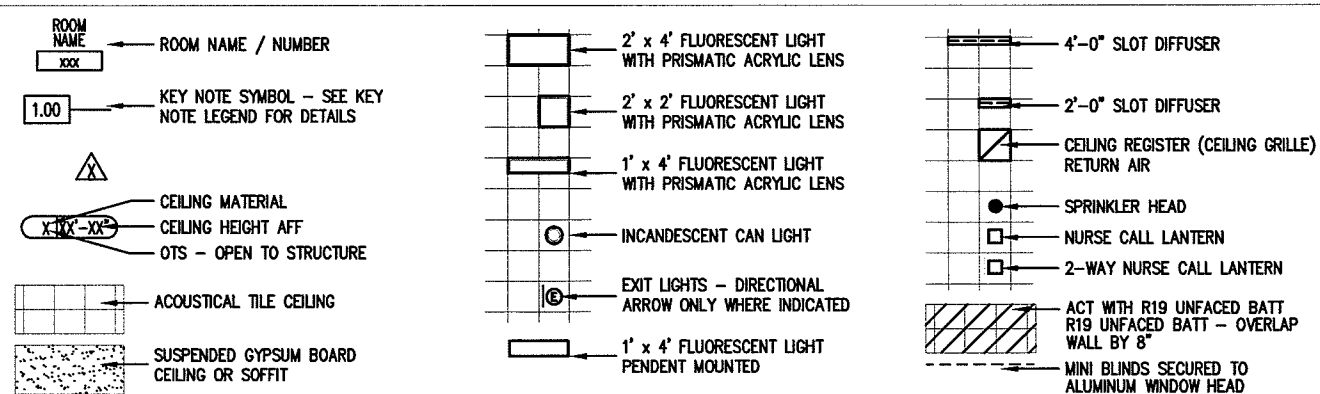
Project No.

07-5198

Sheet No.

A12.3

LEGEND



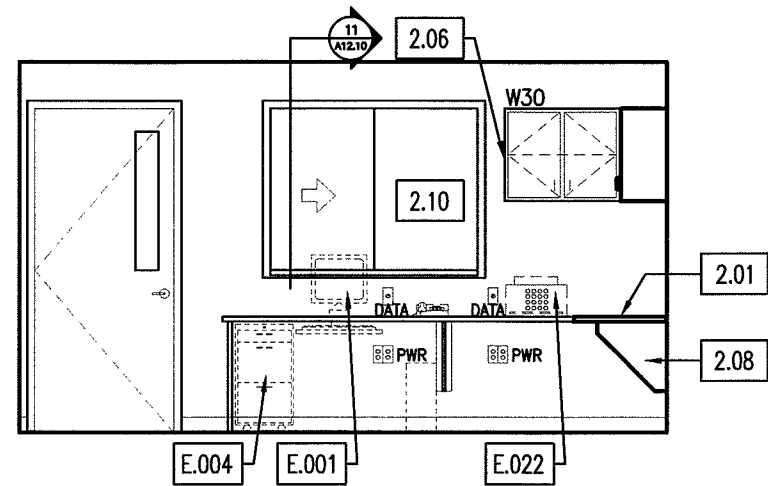
KEY NOTE LEGEND

- 3.01** CUBICAL CURTAIN TRACK
CURTAIN SHALL BE PROVIDED BY TENANT
SEE DETAIL 8/A10.3
- 3.02** 7'-2" GYPSUM BOARD SOFFIT - SEE DETAIL
DETAIL 7/A10.3
- 3.03** 7'-10" GYPSUM BOARD HEADER
- 3.04** 7'-0" GYPSUM BOARD CASSED OPENING

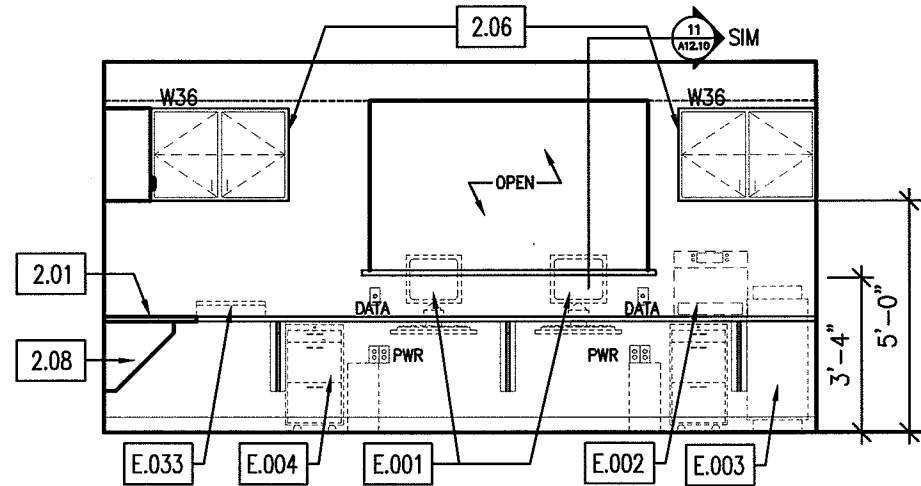
GENERAL NOTES

1. CEILING HTS TO BE 8'-0" UNLESS NOTED OTHERWISE.
2. DIFFUSER LOCATIONS FROM ENGINEER.

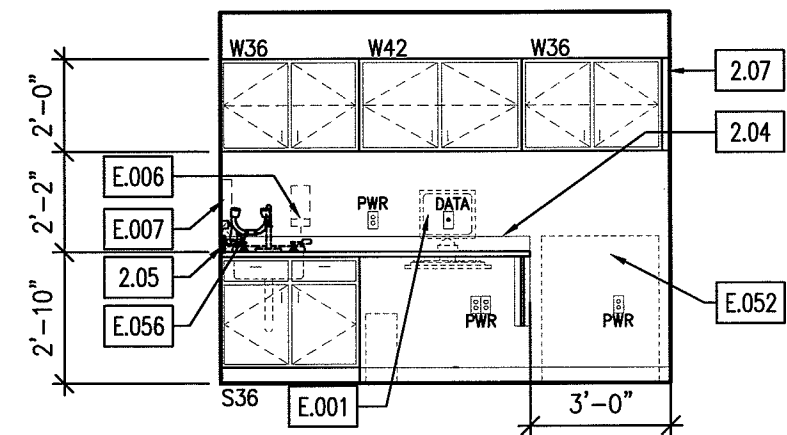
1 REFLECTED CEILING PLAN
SCALE: 1/8" = 1'-0"



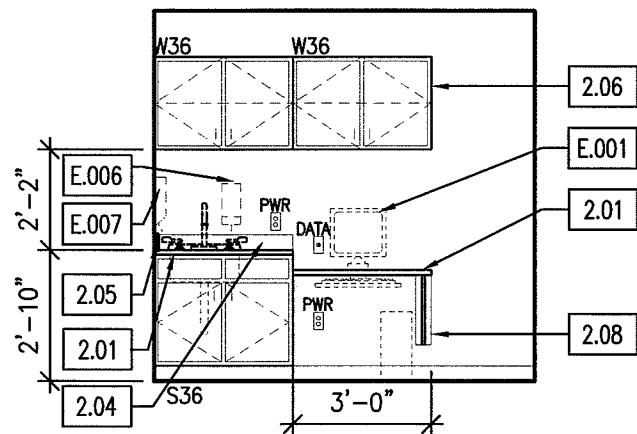
1 BUSINESS OFFICE - 1121
A12.4 1/4"=1'-0"



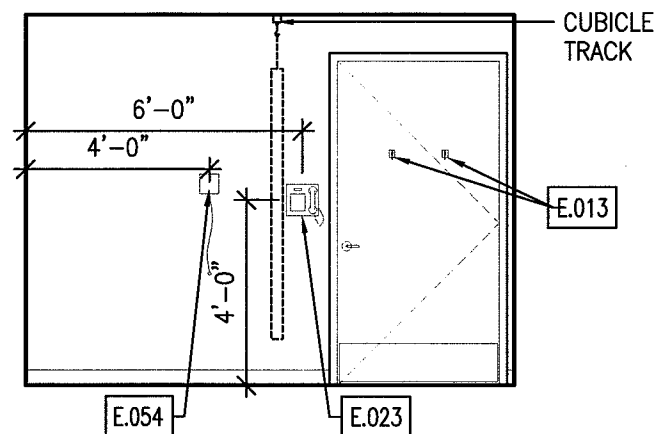
2 BUSINESS OFFICE - 1121
A12.4 1/4"=1'-0"



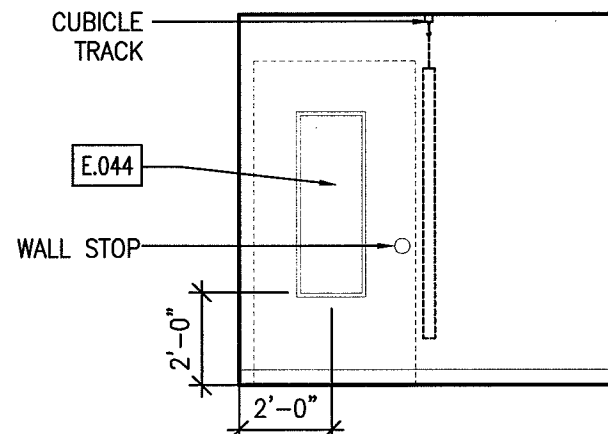
3 LAB - 1122
A12.4 1/4"=1'-0"



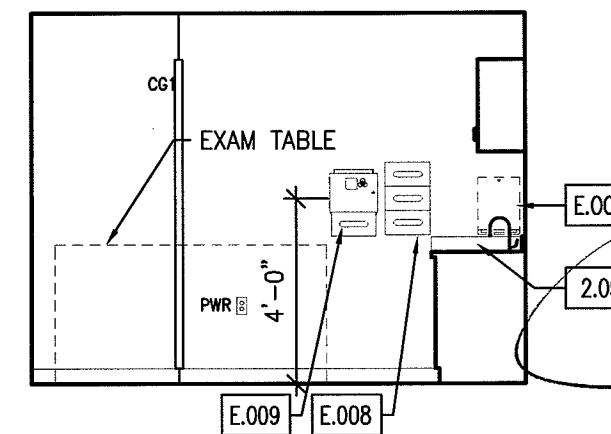
4 EXAM ROOM - 1123
A12.4 1/4"=1'-0"



5 EXAM ROOM - 1123
A12.4 1/4"=1'-0"

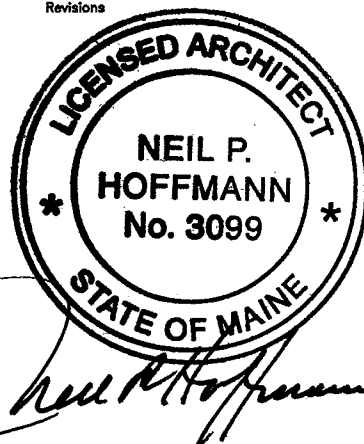


6 EXAM ROOM - 1123
A12.4 1/4"=1'-0"



7 EXAM ROOM - 1123
A12.4 1/4"=1'-0"

Revisions



Project
Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet
First Floor
Interior Elevations

Date
March 6, 2008

Project No.
07-5198

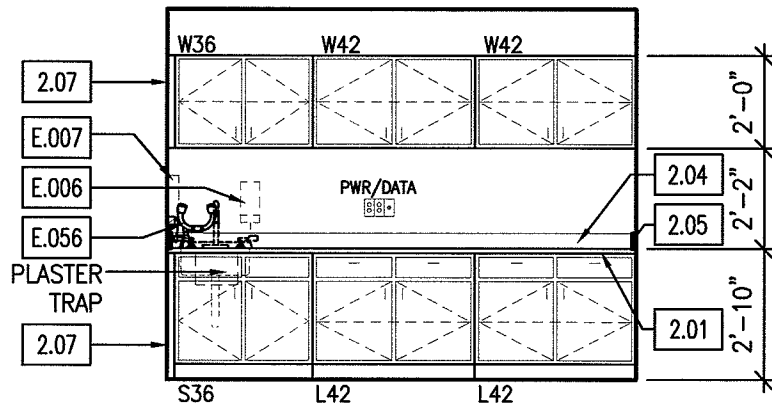
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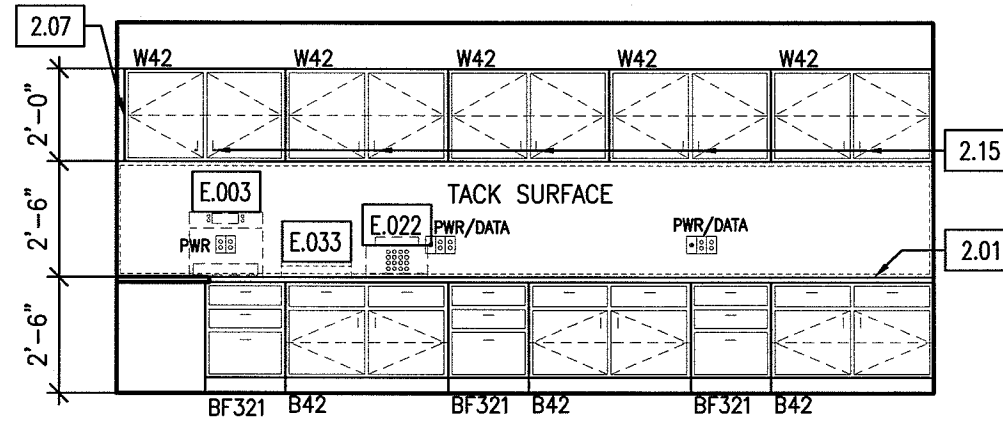
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	REVISION REFERENCE MARK
	SECTION DETAIL SYMBOL
	DETAIL NUMBER SHEET NUMBER
	KEY NOTE SYMBOL - SEE SHEET A11.3 FOR EQUIPMENT SCHEDULE

KEY NOTE LEGEND	
2.01	PLASTIC LAMINATE COUNTERTOP
2.02	3 1/2" PLASTIC LAMINATE APRON
2.03	3 1/2" PLASTIC LAMINATE VALANCE
2.04	4" PLASTIC LAMINATE BACKSPLASH
2.05	4" PLASTIC LAMINATE SIDESPLASH
2.06	PLASTIC LAMINATE END PANEL
2.07	PLASTIC LAMINATE FILLER PANEL
2.08	1'-6" PLASTIC LAMINATE SUPPORT BRACKET
2.09	1'-0" PLASTIC LAMINATE SUPPORT BRACKET
2.10	SLIDING GLASS RECEPTION COUNTER
2.11	UNDERCOUNTER REFRIGERATOR SPACE
2.12	GYPSUM BOARD CASED OPENING
2.13	12" PLASTIC LAMINATE WRITING SURFACE
2.14	GROMMET HOLE IN COUNTERTOP
2.15	CAM LOCK
2.16	SPECIMEN PASS-THRU CABINET

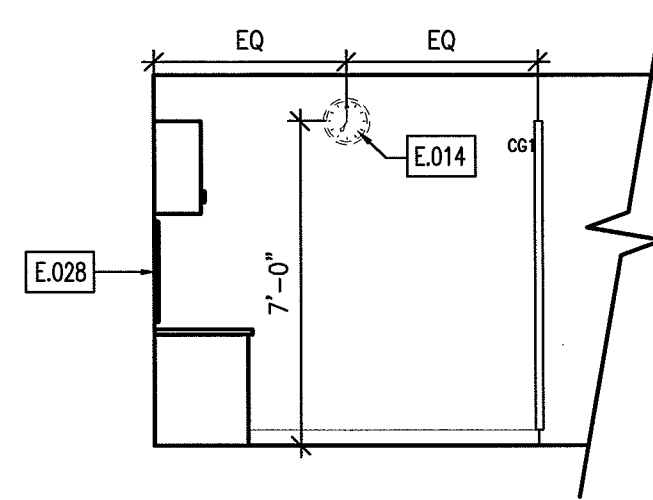
GENERAL NOTES	
1.	PLASTIC LAMINATE COUNTERTOPS SHALL BE PL-1, FORMICA # 7270-58 ALASKAN SLATE, UNLESS NOTED OTHERWISE.
2.	PLASTIC LAMINATE CABINETS SHALL BE PL-2, FORMICA # 899-58 DESERT BEIGE, UNLESS NOTED OTHERWISE.
3.	PROVIDE END SPLASH AT WALL AT COUNTERTOPS WITH BACKSPLASHES AND SINKS
4.	DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE
5.	BASE FINISH MATERIAL AND ELECTRICAL DEVICES ARE NOT INDICATED FOR DRAWING CLARITY
6.	COLOR OF SOLID SURFACE TO BE DETERMINED FROM MANUFACTURER STANDARD



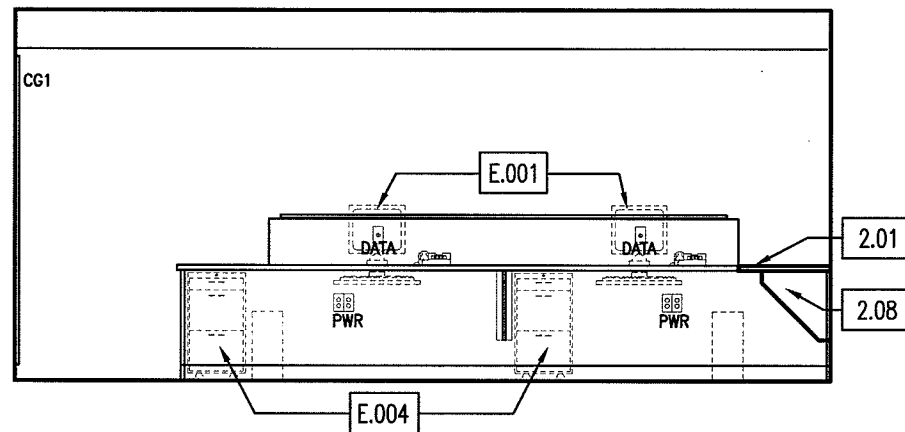
8 SOILED UTILITY - 1128
A12.5 1/4"=1'-0"



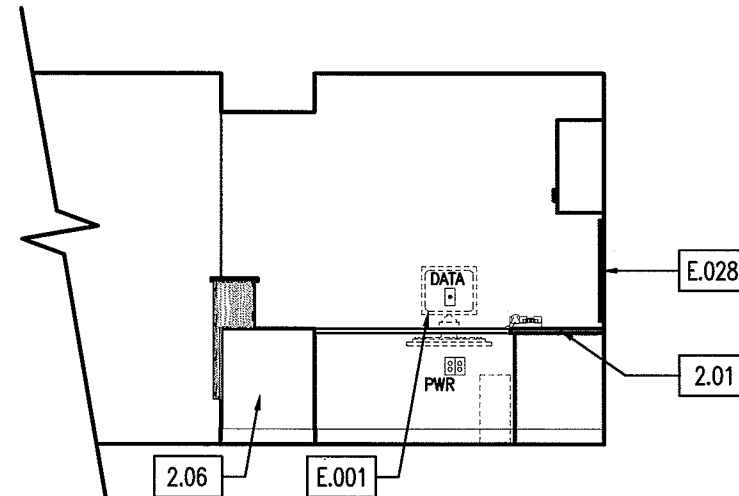
9 NURSE STATION
A12.5 1/4"=1'-0"



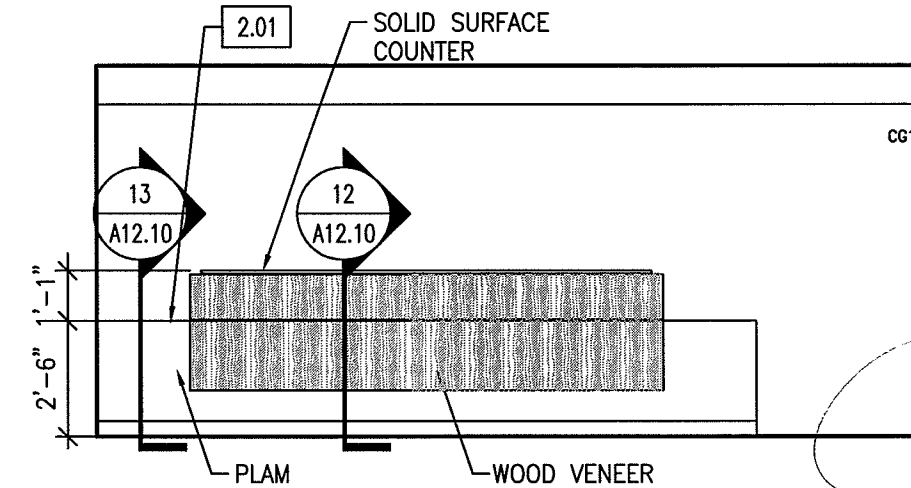
10 NURSE STATION
A12.5 1/4"=1'-0"



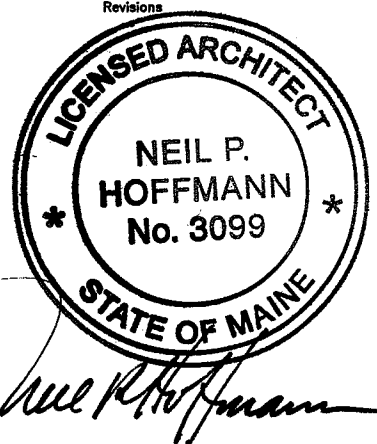
11 NURSE STATION
A12.5 1/4"=1'-0"



12 NURSE STATION
A12.5 1/4"=1'-0"



13 NURSE STATION
A12.5 1/4"=1'-0"



Project
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Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

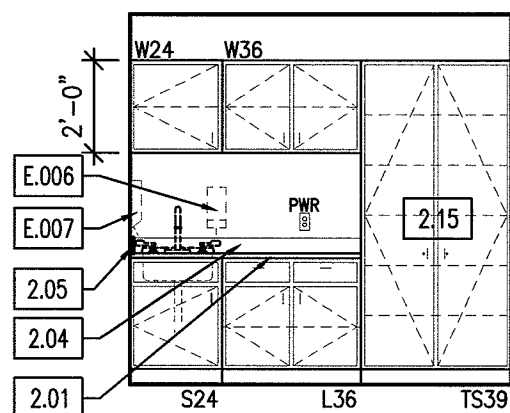
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	DETAIL NUMBER SHEET NUMBER
	KEY NOTE SYMBOL - SEE SHEET A11.3 FOR EQUIPMENT SCHEDULE

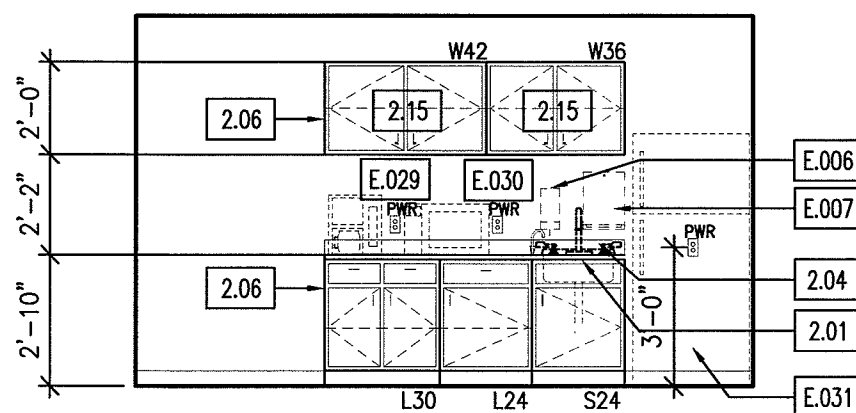
KEY NOTE LEGEND

2.01	PLASTIC LAMINATE COUNTERTOP	2.11	UNDERCOUNTER REFRIGERATOR SPACE
2.02	3 1/2" PLASTIC LAMINATE APRON	2.12	GYPSUM BOARD CASED OPENING
2.03	3 1/2" PLASTIC LAMINATE VALANCE	2.13	12" PLASTIC LAMINATE WRITING SURFACE
2.04	4" PLASTIC LAMINATE BACKSPLASH	2.14	GROMMET HOLE IN COUNTERTOP
2.05	4" PLASTIC LAMINATE SIDESPLASH	2.15	CAM LOCK
2.06	PLASTIC LAMINATE END PANEL	2.16	SPECIMEN PASS-THRU CABINET
2.07	PLASTIC LAMINATE FILLER PANEL		
2.08	1'-6" PLASTIC LAMINATE SUPPORT BRACKET		
2.09	1'-0" PLASTIC LAMINATE SUPPORT BRACKET		
2.10	SLIDING GLASS RECEPTION COUNTER		

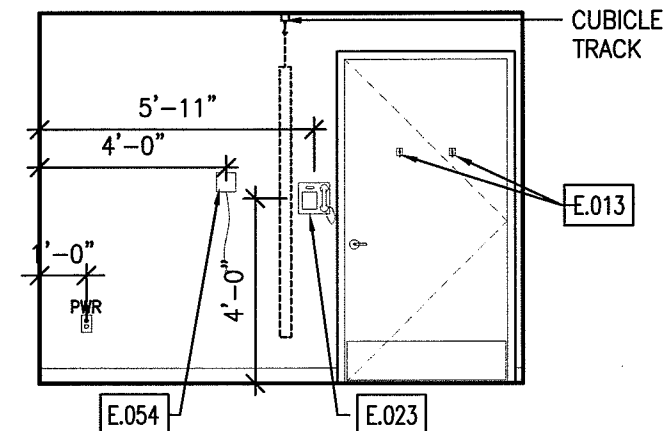
- GENERAL NOTES**
1. PLASTIC LAMINATE COUNTERTOPS SHALL BE PL-1, FORMICA # 7270-58 ALASKAN SLATE, UNLESS NOTED OTHERWISE.
 2. PLASTIC LAMINATE CABINETS SHALL BE PL-2, FORMICA # 899-58 DESERT BEIGE, UNLESS NOTED OTHERWISE.
 3. PROVIDE END SPLASH AT WALL AT COUNTERTOPS WITH BACKSPLASHES AND SINKS
 4. DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE
 5. BASE FINISH MATERIAL AND ELECTRICAL DEVICES ARE NOT INDICATED FOR DRAWING CLARITY
 6. COLOR OF SOLID SURFACE TO BE DETERMINED FROM MANUFACTURER STANDARD



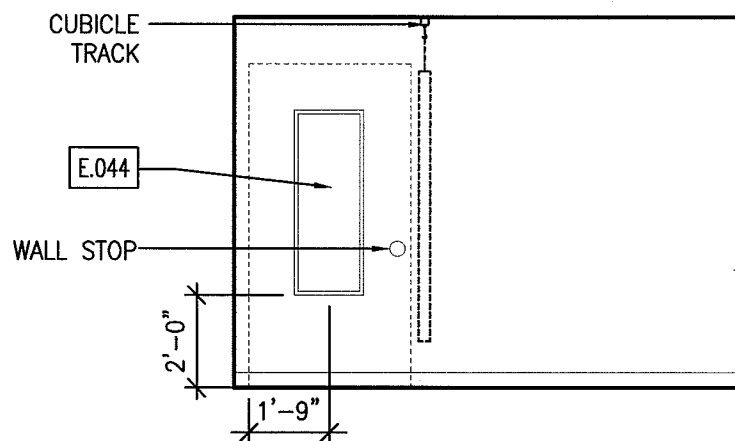
14 CLEAN UTILITY - 1133
A12.6 1/4"=1'-0"



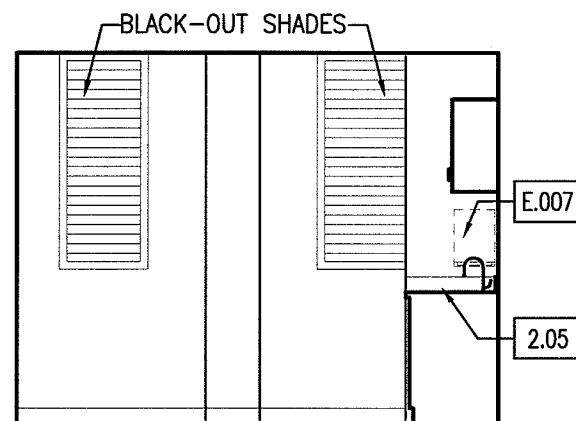
15 STAFF LOUNGE - 1135
A12.6 1/4"=1'-0"



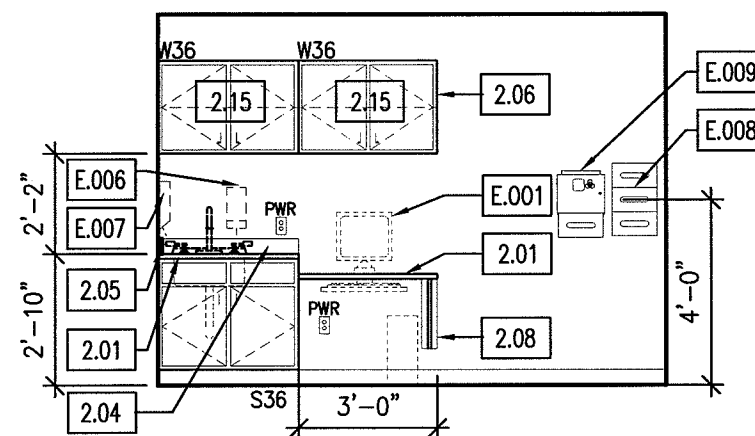
16 TYP. EXAM ROOM - 1139
A12.6 1/4"=1'-0"



17 TYP. EXAM ROOM - 1139
A12.6 1/4"=1'-0"

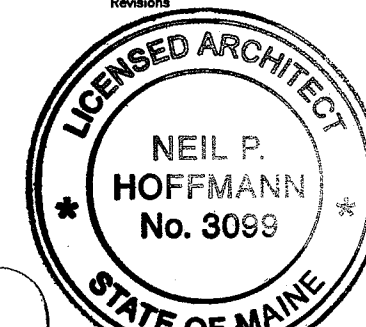


18 TYP. EXAM ROOM - 1139
A12.6 1/4"=1'-0"



19 TYP. EXAM ROOM - 1139
A12.6 1/4"=1'-0"

Revisions



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Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suite

Sheet

First Floor
Interior Elevations

Date

March 6, 2008

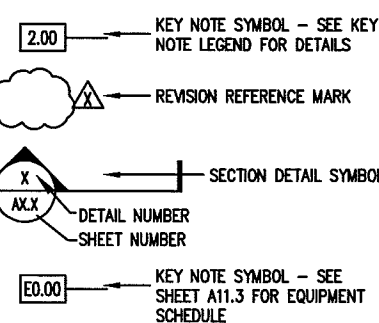
Project No.

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Sheet No.

A12.6

LEGEND



KEY NOTE LEGEND

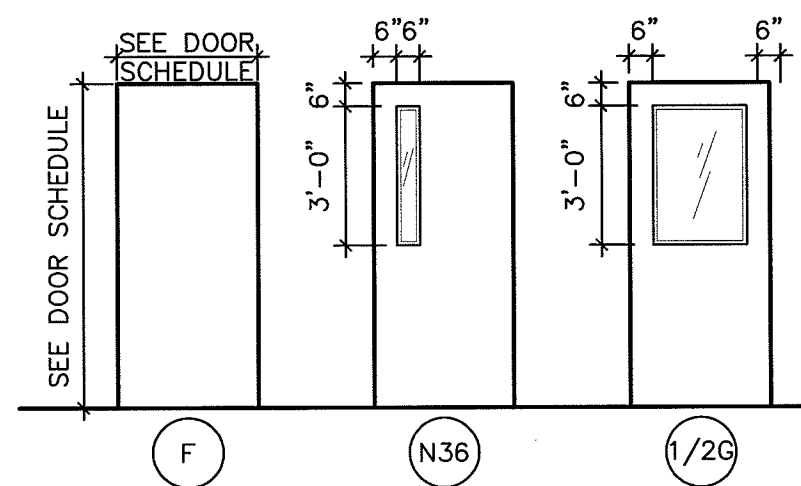
2.01	PLASTIC LAMINATE COUNTERTOP	2.11	UNDERCOUNTER REFRIGERATOR SPACE
2.02	3 1/2" PLASTIC LAMINATE APRON	2.12	GYPSUM BOARD CASSED OPENING
2.03	3 1/2" PLASTIC LAMINATE VALANCE	2.13	12" PLASTIC LAMINATE WRITING SURFACE
2.04	4" PLASTIC LAMINATE BACKSPLASH	2.14	GROMMET HOLE IN COUNTERTOP
2.05	4" PLASTIC LAMINATE SIDESPLASH	2.15	CAM LOCK
2.06	PLASTIC LAMINATE END PANEL	2.16	SPECIMEN PASS-THRU CABINET
2.07	PLASTIC LAMINATE FILLER PANEL		
2.08	1'-6" PLASTIC LAMINATE SUPPORT BRACKET		
2.09	1'-0" PLASTIC LAMINATE SUPPORT BRACKET		
2.10	SLIDING GLASS RECEPTION COUNTER		

GENERAL NOTES

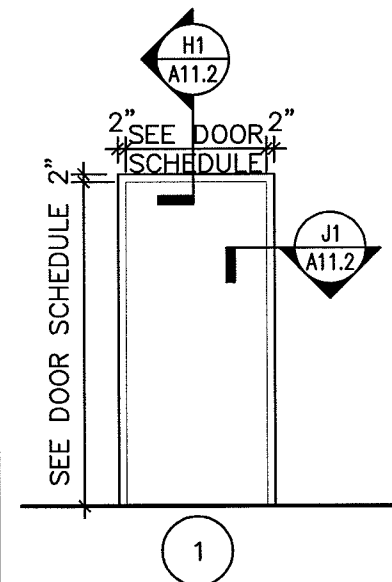
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DOOR SCHEDULE

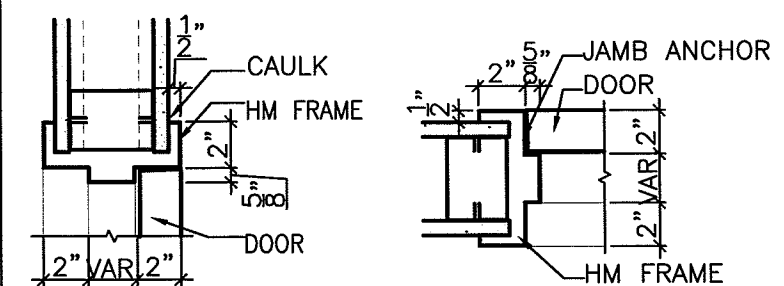
DOOR NUMBER	DOOR				FRAME			DETAILS			LABEL	LIGHT	LOUVER	HDWR SET	NOTES
	TYPE	MAT'L	FINISH	SIZE (1 3/4" T. UNLESS NOTED)	TYPE	MAT'L	FINISH	THRESH	JAMB	HEAD					
1120-1	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	-
1120-2	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	-
1121	N-36	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	Y	-	C	-
1122-1	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	B	-
1122-2	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	B	KEY ACCESS
1123	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1124	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1125	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	CH
1126	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	CH
1127	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	CH
1128	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	L	-
1129	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	B	-
1131	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	-
1132	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	-
1133	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	B	-
1134	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	-
1135	1/2G	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	Y	-	C	-
1136	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	D	CH
1137	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	C	CH
1138	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1139	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1140	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	C	CH
1141	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1142	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1143	F	WD	PL	3'-6" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	F	CH
1144	F	WD	PL	3'-0" x 7'-0"	1	HM	PT	-	J1	H1	-	-	-	C	CH



1 DOOR TYPES
SCALE: 1/4" = 1'-0"



2 DOOR FRAME TYPES
SCALE: 1/4" = 1'-0"



H1 A12.7 HEAD DETAIL TYP. DOOR
1 1/2" = 1'-0"

J1 A12.7 JAMB DETAIL TYP. DOOR
1 1/2" = 1'-0"

DOOR HARDWARE SETS

HARDWARE SET B (FILE, STOR., LAB., MED.)

- (1) STORAGE LOCK SET
- (1 1/2) PR - STANDARD BUTT HINGES
- (1) WALL OR FLOOR STOP

HARDWARE SET C (RECEPTION, PHYSICIAN OFFICE.)

- (1) OFFICE LOCK SET
- (1 1/2) PR - STANDARD BUTT HINGES
- (1) WALL OR FLOOR STOP

HARDWARE SET D (OFFICE, TOILET, WAITING)

- (1) PRIVACY LOCK SET
- (1 1/2) PR - STANDARD BUTT HINGES
- (1) WALL OR FLOOR STOP

HARDWARE SET F

(EXAM. SPECIAL PROCEDURE, CLOSET)

- (1) PASSAGE SET
- (1 1/2) PR - STANDARD BUTT HINGES
- (1) WALL, FLOOR OR OVERHEAD STOP

HARDWARE SET L (SOILED UTILITY)

- (1) STORAGE LOCK SET
- (1 1/2) PR - STANDARD BUTT HINGES
- (1) CLOSER

ABBREVIATIONS LEGEND:

PLAM	PLASTIC LAMINATE	PREF	PREFINISHED
PT	PAINT	WD	WOOD
HM	HOLLOW METAL	CH	COAT HOOK
ALUM	ALUMINUM		

GENERAL NOTES

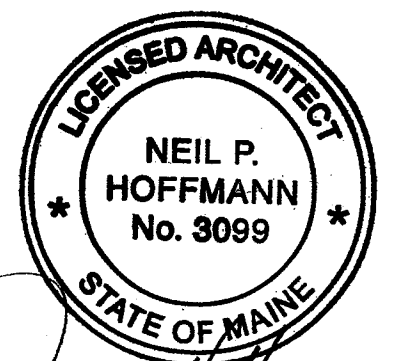
- HOLLOW METAL DOOR AND WINDOW FRAMES IN CORRIDOR WALLS SHALL BE PAINTED TO MATCH CORE AND SHELL HOLLOW METAL FRAMES
- PROVIDE COAT HOOK MOUNTED AT 4'-0" ABOVE FINISHED FLOOR

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Revisions



Project
Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
Portland, Maine

Mercy Primary Care Suites

Sheet
Door Schedule
Door Details

Date
March 6, 2008

Project No.
07-5198

Sheet No.
A12.7

**LANDMARK
HEALTHCARE
FACILITIES, LLC**

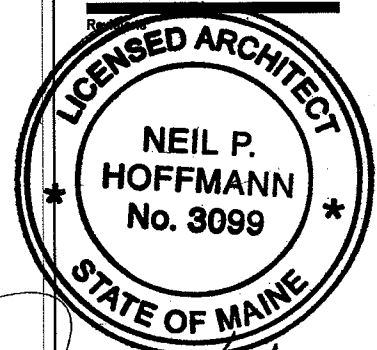
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Project
Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suites

Sheet
Room Finish Schedule

Date
March 6, 2008

Project No.
07-5198

Sheet No.

A12.8

ROOM FINISH SCHEDULE

ROOM NO.	ROOM NAME	FLOOR		WALLS				CEILING
		FINISH	BASE	NORTH	EAST	SOUTH	WEST	
1120	PRIMARY CARE WAITING PALETTE 6	CPT-6	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1121	RECEPTION/BUSINESS OFFICE	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1122	LAB	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1123	EXAM 1	VCT-1 VCT-3	RB-1	PT-4	PT-1	PT-1	PT-1	ACT-1
1124	EXAM 2	VCT-1 VCT-3	RB-1	PT-4	PT-1	PT-1	PT-1	ACT-4
1125	BILLER	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1126	REFERENCE COORDINATOR	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1127	MANAGER OFFICE	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1128	SOILED UTILITY	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1129	MEDS	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1130	NURSE STATION	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1131	TOILET	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1132	TOILET	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1133	CLEAN UTILITY	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1134	TOILET	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1135	STAFF LOUNGE	VCT-1	RB-1	PT-1	PT-1	PT-1	PT-1	ACT-1
1136	CARE MANAGER	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1137	PHYSICIAN OFFICE	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1138	EXAM 3	VCT-1 VCT-3	RB-1	PT-1	PT-1	PT-1	PT-4	ACT-1
1139	EXAM 4	VCT-1 VCT-3	RB-1	PT-1	PT-1	PT-1	PT-4	ACT-1
1140	PHYSICIAN OFFICE	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1141	EXAM 5	VCT-1 VCT-3	CB	PT-1	PT-1	PT-1	PT-4	ACT-1
1142	EXAM 6	VCT-1 VCT-3	RB-1	PT-1	PT-4	PT-1	PT-1	ACT-1
1143	EXAM 7	VCT-1 VCT-3	RB-1	PT-1	PT-4	PT-1	PT-1	ACT-1
1144	PHYSICIAN OFFICE	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1
1145	CORRIDOR	CPT-12	CB	PT-1	PT-1	PT-1	PT-1	ACT-1

GENERAL NOTES

- HOLLOW METAL DOOR AND WINDOW FRAMES IN CORRIDOR WALLS SHALL BE PAINTED TO MATCH SHELL AND CORE HOLLOW METAL FRAMES
- ALL OTHER HOLLOW METAL DOOR AND WINDOW FRAMES IN TENANT SUITE SHALL BE PAINTED TO MATCH RUBBER BASE COLOR
- RUBBER FLOOR TRANSITION STRIP COLOR SHALL MATCH RUBBER BASE COLOR
- ALL CASEWORK PLASTIC LAMINATE COLORS TO CORRESPOND WITH THE SELECTED LANDMARK COLOR PALETTE FOR THE SUITE.

INTERIOR FINISH LEGEND

CPT - CARPET
CPT-6 CAMBRIDGE, "ROYAL TROON #26803", FAIRWAY
CPT-12 CAMBRIDGE, "ST. ANDREW #26708", MASHIE
*CB CARPET BASE TO MATCH FLOORING

VCT - VINYL TILE
VCT-1 TARKETT, "DESERT SAND #1337"

RB - RUBBER BASE
RB-1 JOHNSONITE, "BEIGE #49" (THROUGHOUT)

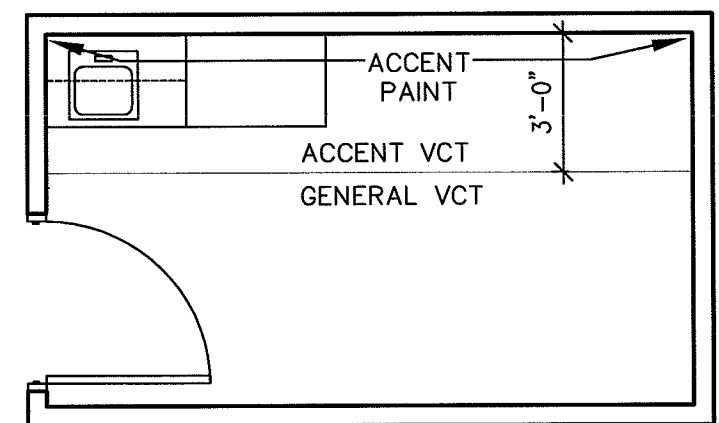
PT - PAINT
PT-1 BENJAMIN MOORE, "SEA URCHIN" #1052
PT-4 BENJAMIN MOORE, "KENNEBUNKPORT GREEN" #HC-123

ACT - ACOUSTICAL CEILING
ACT-1 USG, "F FISSURED SL #132"

PL - PLASTIC LAMINATE
PL-1 FORMICA # 7270-58 ALASKAN SLATE (COUNTERS)
PL-2 FORMICA # 899-58 DESERT BEIGE (CABINETS)

WP - WALL PROTECTION
WP-1 YOSEMITE SAND #310
(CORNER GUARDS AND CRASH RAILS)

SS - SOLID SURFACE
SS-1 CORIAN SEASHELL
(RECEPTION AND NURSE STATION COUNTERTOPS)



NOTE: ACCENT VCT AND PAINT TO OCCUR ON WALL WITH CASEWORK.

1
A12.8 **TYPICAL EXAM ROOM**
SCALE: 1/4" = 1'-0"

FFE SCHEDULE GENERAL NOTES	LEGEND:
1. ALL CONSTRUCTION SHALL BE COORDINATED WITH REQUIREMENTS OF THE TENANTS FURNISHINGS FIXTURES AND EQUIPMENT	CF CONTRACTOR FURNISHED
2. INFORMATION CONTAINED IN THESE DOCUMENTS IS FOR REFERENCE ONLY	CI CONTRACTOR INSTALLED
3. ALL FREESTANDING FURNITURE AND EQUIPMENT TO BE PROVIDED BY TENANT. FREESTANDING FURNITURE SHOWN FOR REFERENCE ONLY.	OF OWNER FURNISHED
	OI OWNER INSTALLED
	VI VENDOR INSTALLED

FURNISHINGS, FIXTURES AND EQUIPMENT SCHEDULE						
	ITEM NO.	EQUIPMENT NAME	FURNISHED BY	INSTALLED BY	ROUGH-IN ONLY BY CONTRACTOR	HOOKEED UP BY
	E.001	PC W/ MONITOR	OF	OI	-	-
	E.002	PRINTER	OF	OI	-	-
	E.003	COPIER	OF	OI	-	-
	E.004	ROLLING FILES	OF	OI	-	-
	E.005	FILE STORAGE SYSTEM	OF	VI	-	-
	E.006	SOAP DISP.	CF	CI	-	-
	E.007	PAPER TOWEL DISP	CF	CI	-	-
	E.008	GLOVE BOX (3)	OF	OI	-	-
	E.009	SHARPS	OF	OI	-	-
	E.014	CLOCK	OF	OI	-	-
	E.022	FAX	OF	OI	-	-
	E.023	PHONE	OF	OI	-	-
	E.027	WHITE BOARD	OF	OI	X	-
	E.028	TACK BOARD	OF	OI	X	-
	E.029	COFFEE	OF	OI	X	-
	E.030	MICROWAVE	OF	OI	X	-
	E.031	REF. W FREEZER (FH)	OF	OI	X	-
	E.033	FLAT BED SCANNER	OF	OI	X	-
	E.043	EXAM TABLE	OF	OI	-	-
	E.044	MIRROR	CF	CI	-	-
	E.045	STOOLS	OF	OI	-	-
	E.054	NURSE CALL	OF	VI	X	-
	E.055	FILE CAB. (5 DRAWER)	OF	OI	-	-
	E.056	EYE WASH	CF	CI	X	-
	E.063	BP CUFF	OF	OI	X	-
	E.070	WORK STATION	OF	VI	-	-
	E.081	BLOOD DRAW CHAIR	OF	OI	-	-

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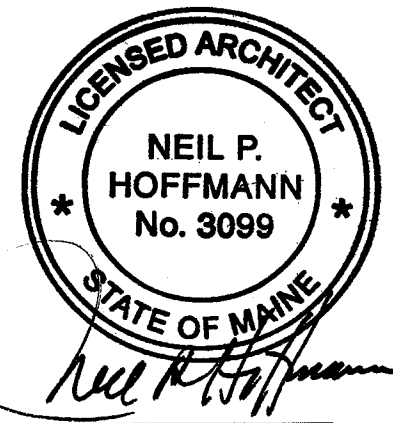
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Revisions



Project

Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
Portland, Maine

Mercy Primary Care Suites

Sheet

FFE Schedule

Date

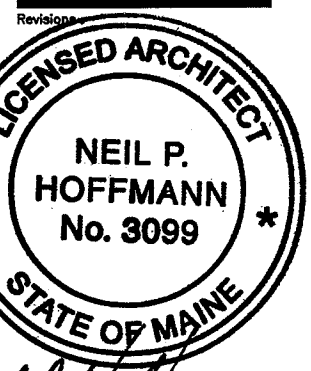
March 6, 2008

Project No.

07-5198

Sheet No.

A12.8A



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Project
Landmark Healthcare
Facilities LLC

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Pavilion
Portland, Maine

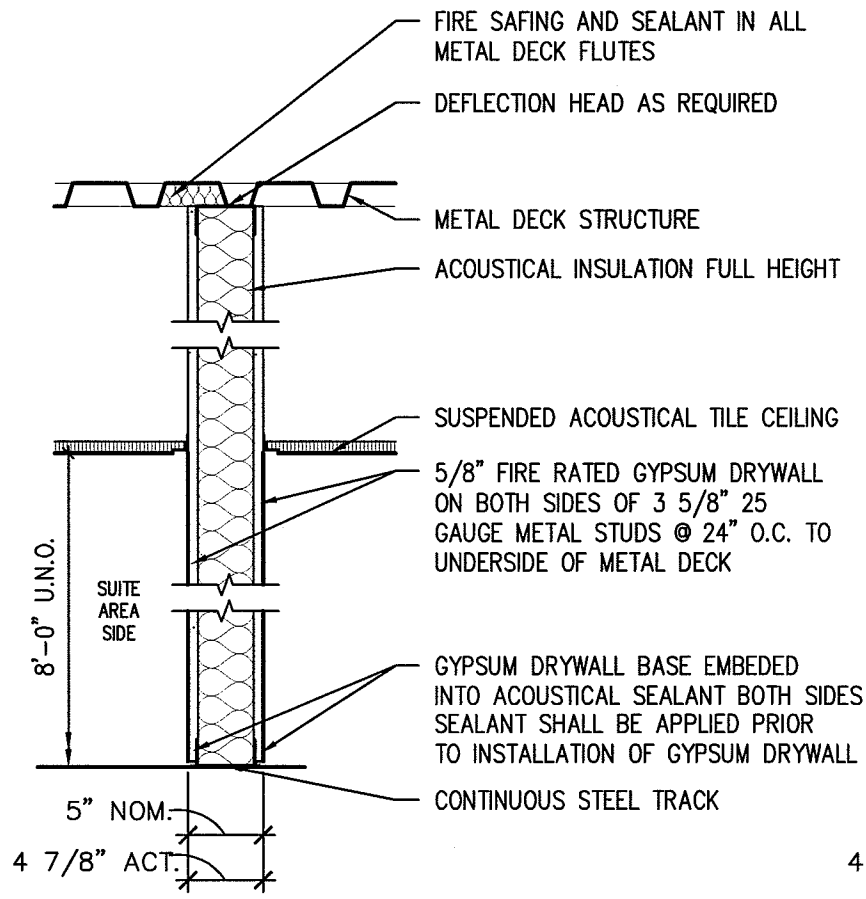
Mercy Primary
Care Suites

Sheet
Partition Types

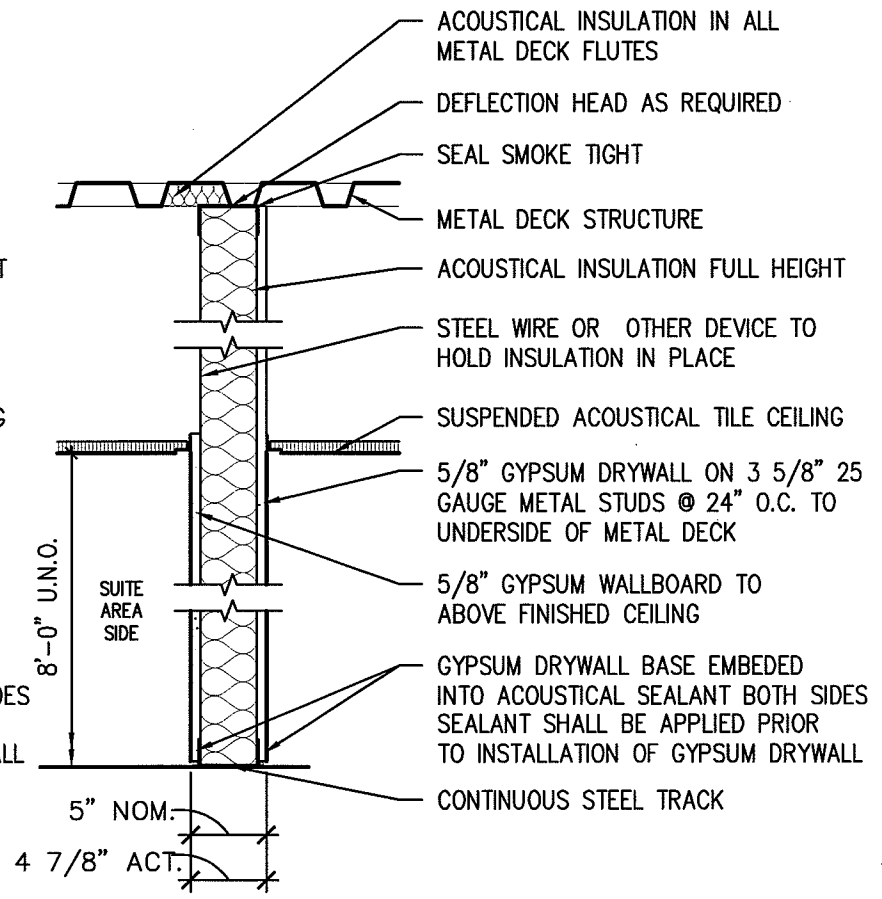
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Project No.
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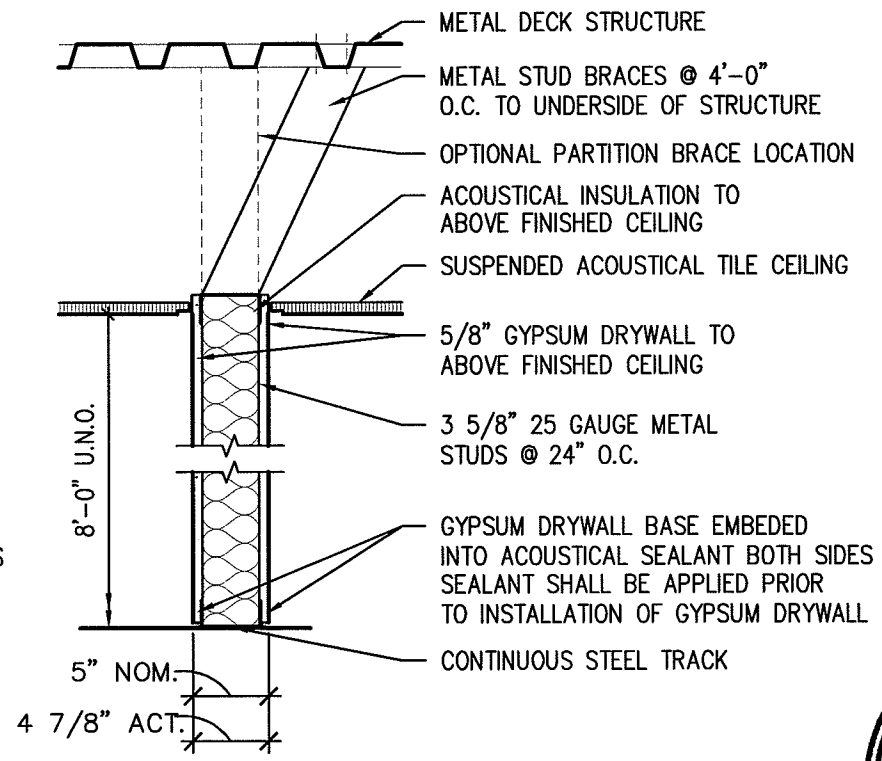
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A12.9



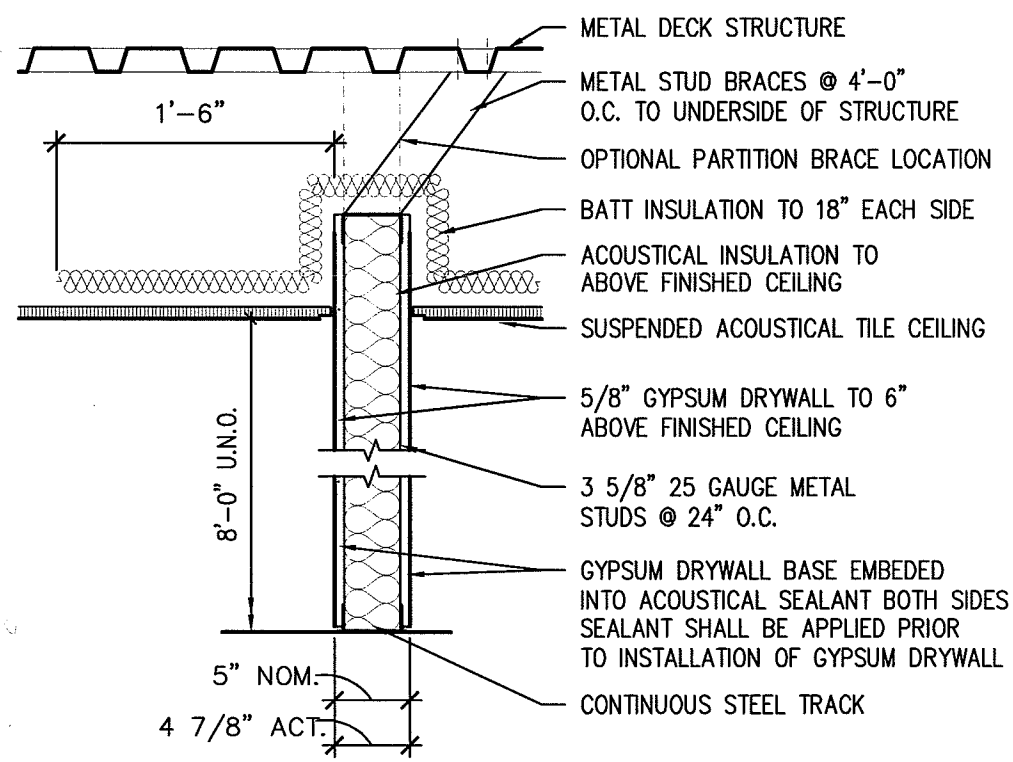
B ONE HOUR RATED PARTITION
SCALE: 1" = 1'-0" MUST MEET UL NO. U465 OR EQUAL



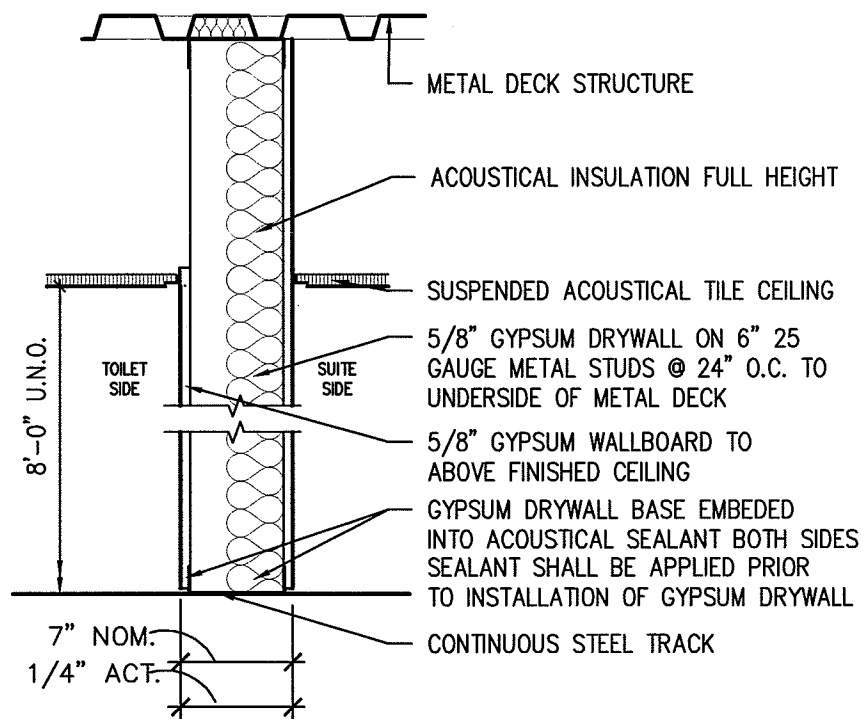
C FULL HEIGHT PARTITION
SCALE: 1" = 1'-0"



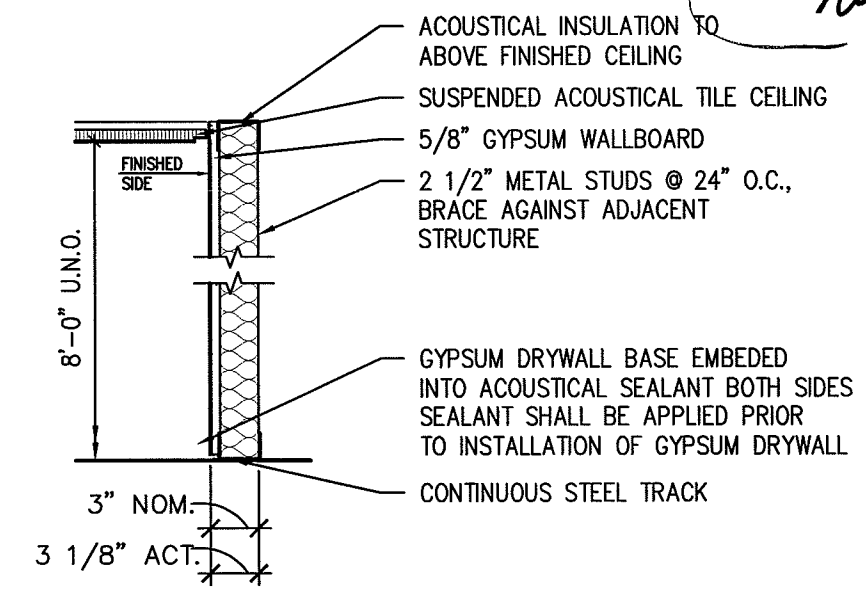
F CEILING HEIGHT INSULATED PARTITION
SCALE: 1" = 1'-0"



F1 CEILING HEIGHT INSULATED PARTITION
SCALE: 1" = 1'-0"



H FULL HEIGHT CHASE PARTITION
SCALE: 1" = 1'-0"



J INSULATED FURRING PARTITION
SCALE: 1" = 1'-0"

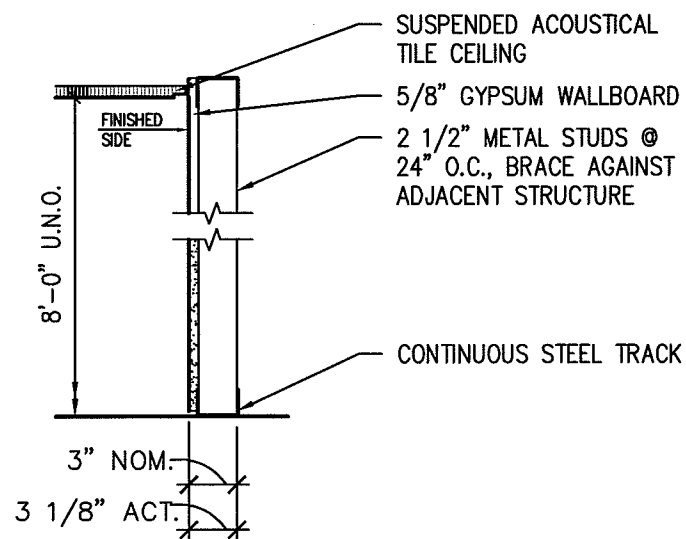
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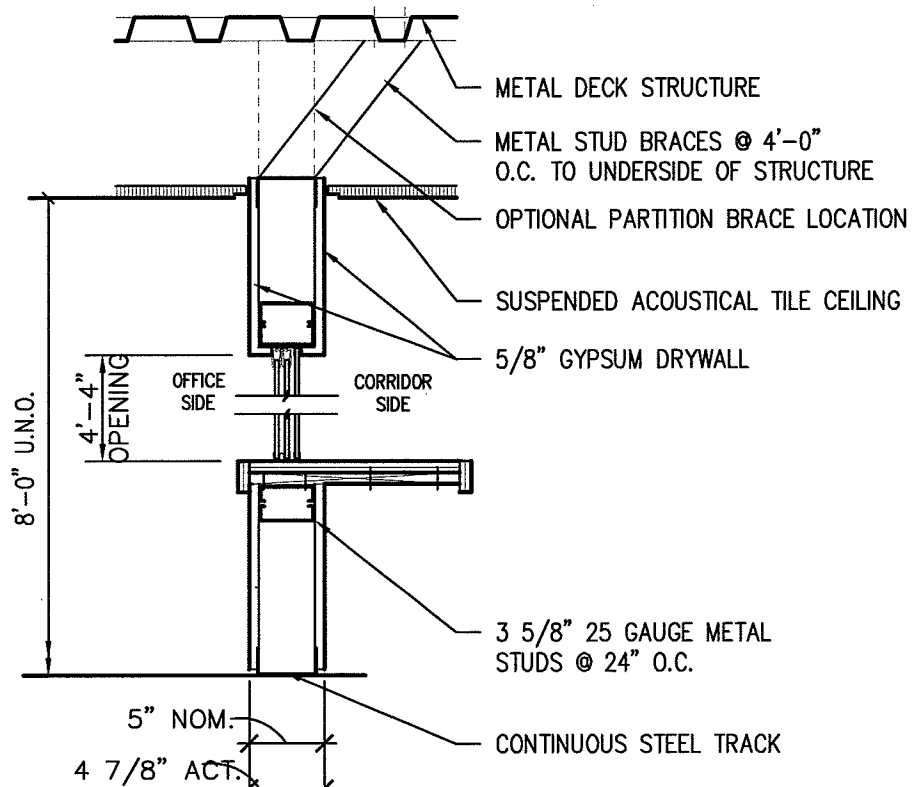
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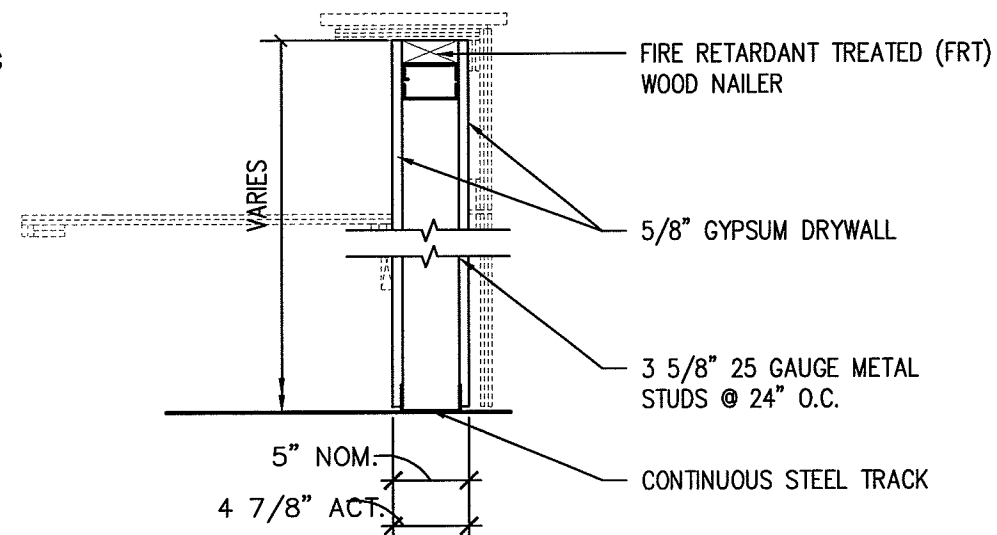


K FURRING PARTITION
SCALE: 1" = 1'-0"



N CHECK-IN/CHECK-OUT PARTITION
SCALE: 1" = 1'-0"

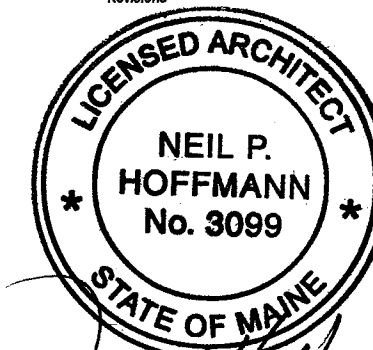
NOTE:
SEE DETAIL 11/A12.10



P NURSE COUNTER PARTITION
SCALE: 1" = 1'-0"

NOTE:
SEE DETAIL 12/A12.10

Revisions



Neil P. Hoffmann

Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Mercy Primary
Care Suites

Sheet

Partition Types
Counter Details

Date

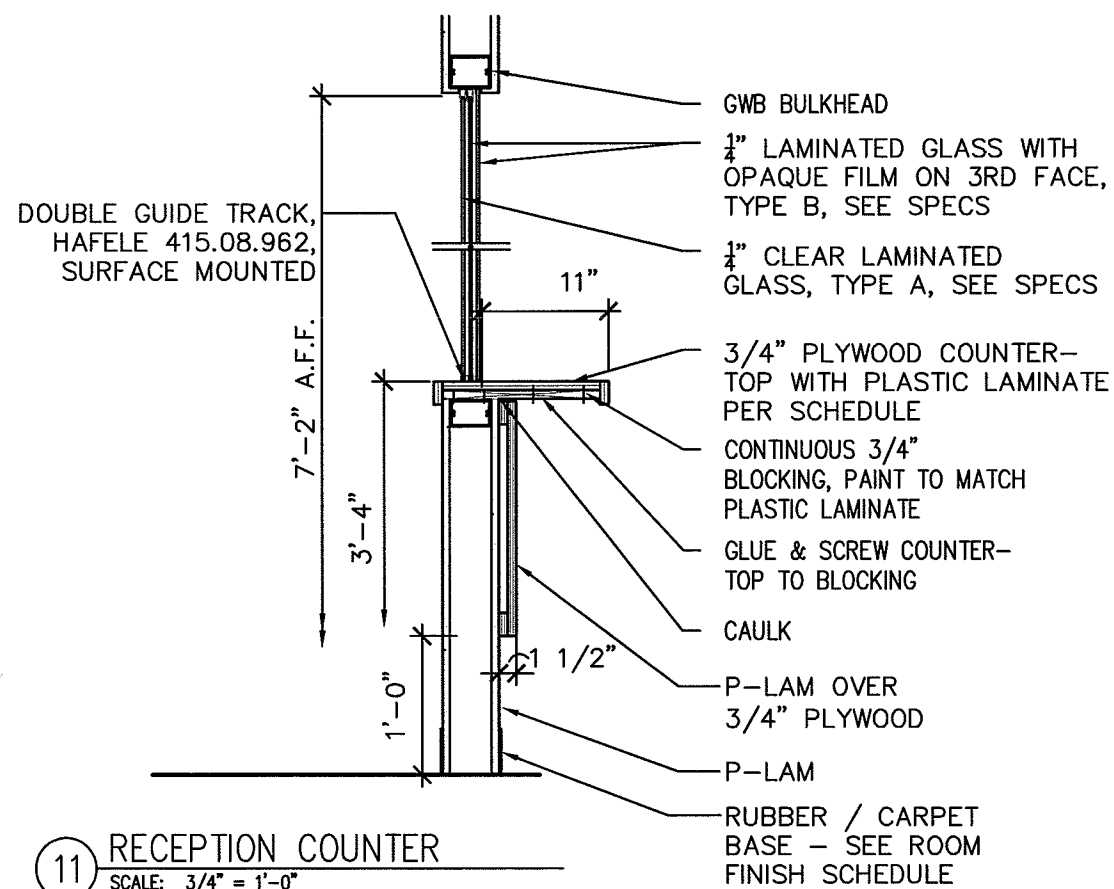
March 6, 2008

Project No.

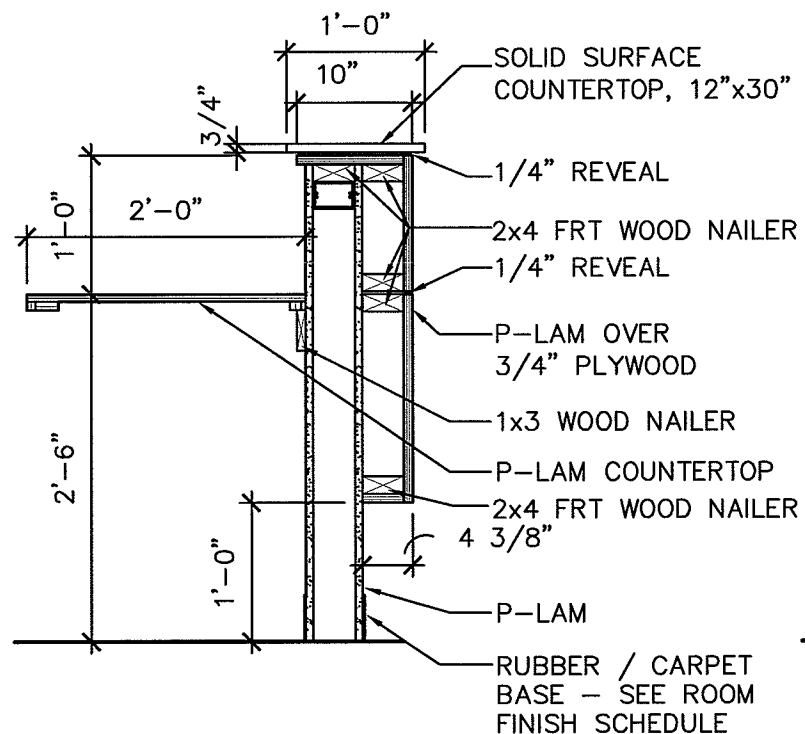
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Sheet No.

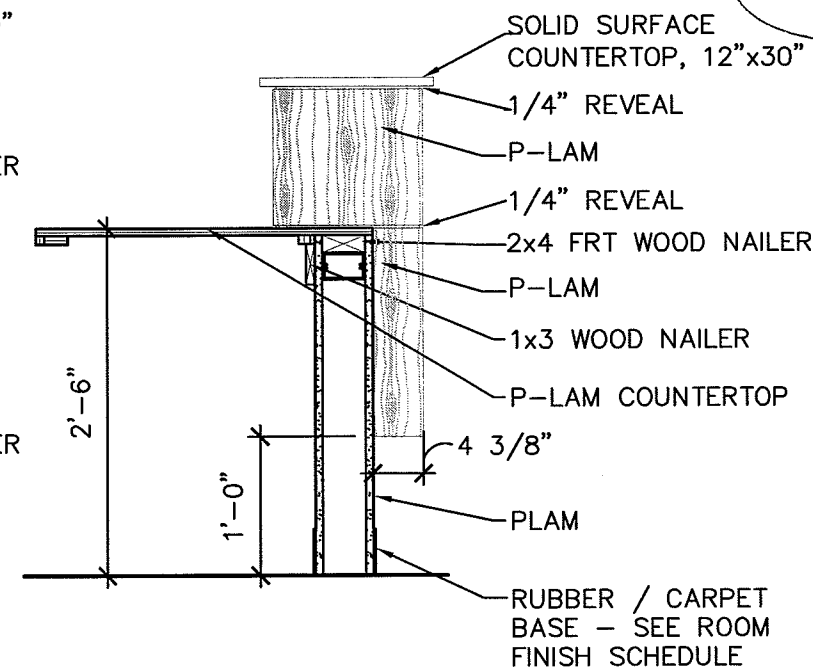
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11 RECEPTION COUNTER
SCALE: 3/4" = 1'-0"



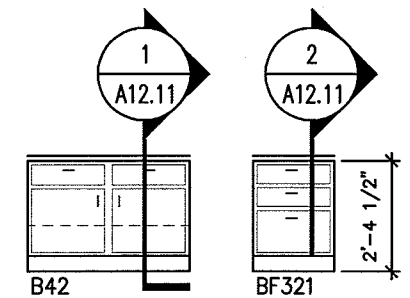
12 NURSE STATION COUNTER
SCALE: 3/4" = 1'-0"



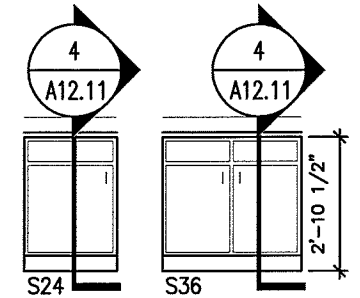
13 NURSE STATION COUNTER
SCALE: 3/4" = 1'-0"

LAB BASE CABINETS	
B324-	BUSINESS DRAWER BASE CABINET WIDTH IN INCHES NO. OF DRAWERS
BF218-	BUSINESS FILE DRAWER BASE CABINET WIDTH IN INCHES NO. OF DRAWERS
L324-	LAB DRAWER BASE CABINET WIDTH IN INCHES NO. OF DRAWERS
LF318-	LAB FILE DRAWER BASE CABINET WIDTH IN INCHES NO. OF DRAWERS
S24-	SINK BASE CABINET WIDTH IN INCHES
E24-	EXAM BASE CABINET WIDTH IN INCHES
E424-	EXAM BASE CABINET WIDTH IN INCHES NO. OF DRAWERS
W18-	WALL CABINET WIDTH IN INCHES
TS39-	TALL STORAGE CABINET

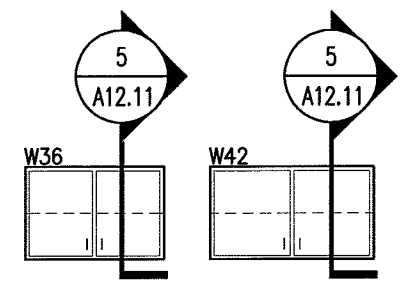
- GENERAL NOTES**
1. ALL CABINET AND COUNTERTOP MATERIAL IS 3/4" THICK UNLESS NOTED OTHERWISE.
 2. THE BOTTOM OF ALL DRAWERS IS 5/16" (8MM) ABOVE EITHER THE CABINET BOTTOM OR THE HORIZONTAL BRACES.
 3. WALL AND BASE CABINET BACKS AND DRAWER BOTTOMS ARE 1/4" THICK. ALL OTHER CABINET AND COUNTERTOP COMPONENTS ARE 3/4" THICK UNLESS NOTED OTHERWISE.
 4. ALL EXPOSED COUNTERTOP CORNERS ARE TO BE RADIUSD.



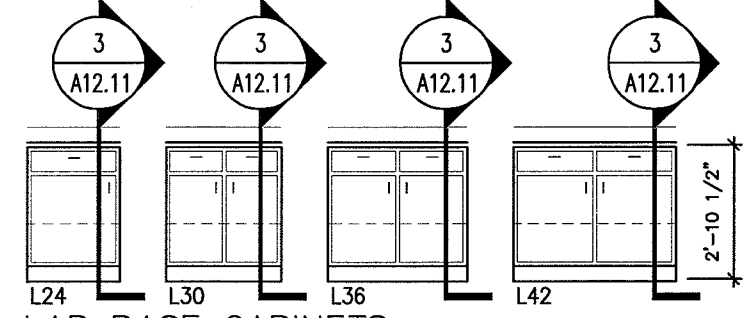
BUSINESS BASE CABINETS
(ALL UNITS 24" DEEP U.N.O.)



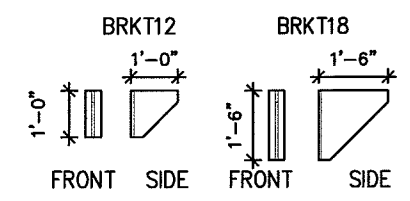
SINK BASE CABINETS
(ALL UNITS 24" DEEP U.N.O.)



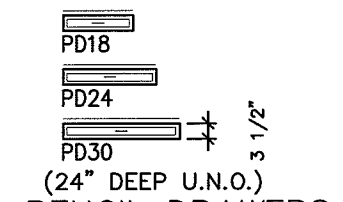
WALL CABINETS (STANDARD)
(ALL UNITS 14" DEEP U.N.O.)



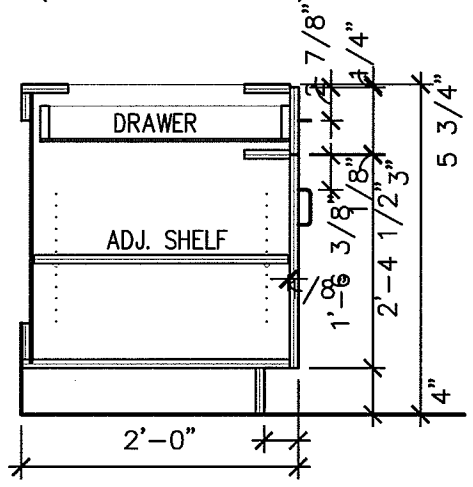
LAB BASE CABINETS
(ALL UNITS 24" DEEP U.N.O.)



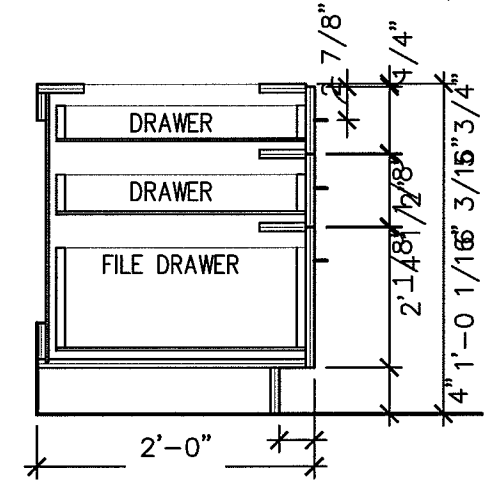
SUPPORT BRACKETS



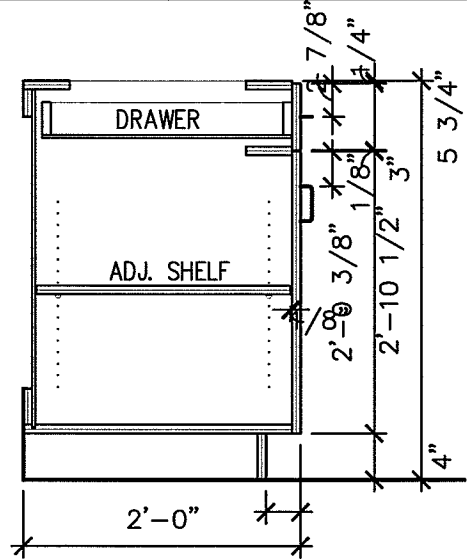
PENCIL DRAWERS
(24" DEEP U.N.O.)



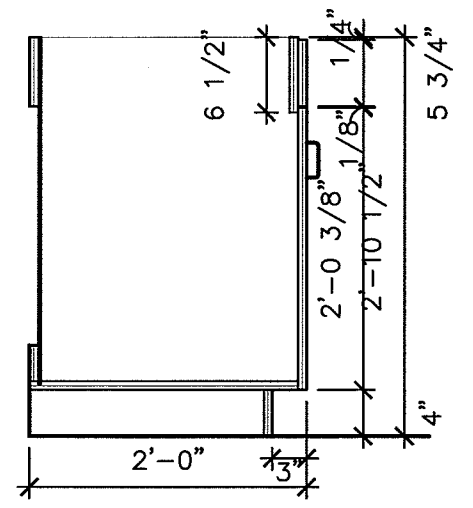
① **DOOR CABINET³ - BUSINESS**
SCALE: 3/4" = 1'-0"



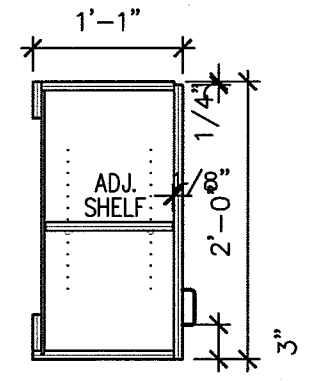
② **SINGLE FILE - BUSINESS**
SCALE: 3/4" = 1'-0"



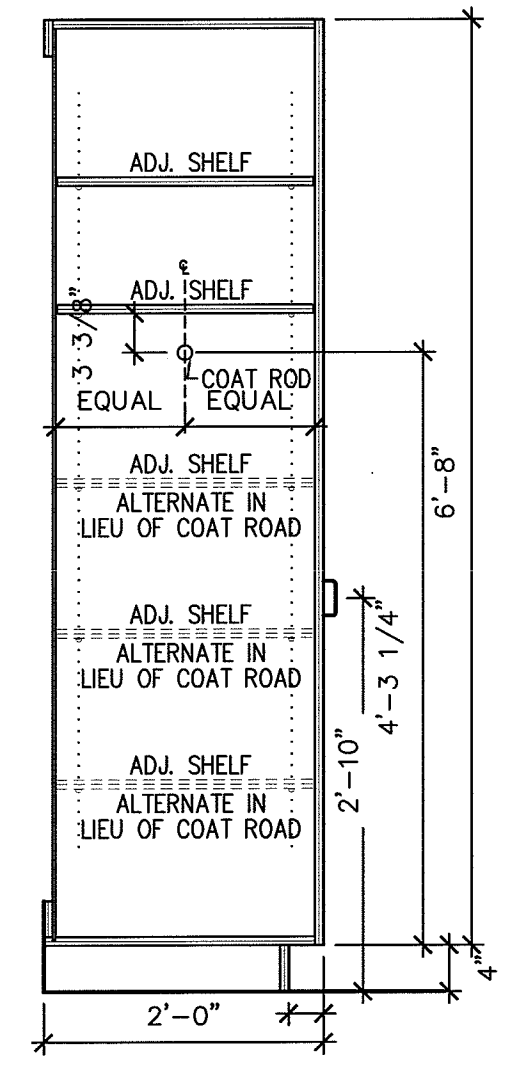
③ **DOOR CABINET³ - LAB**
SCALE: 3/4" = 1'-0"



④ **SINK BASE CABINET**
SCALE: 3/4" = 1'-0"



⑤ **STANDARD WALL CABINET**
SCALE: 3/4" = 1'-0"

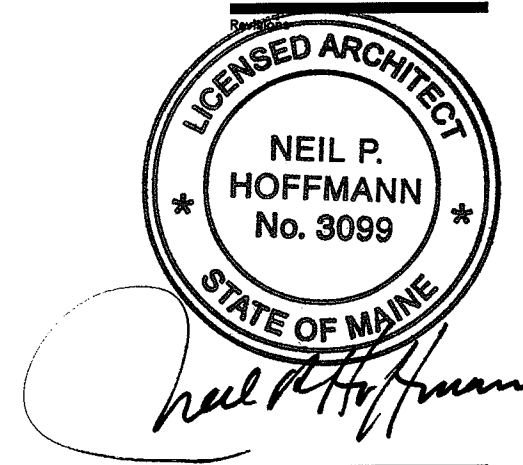


⑥ **TALL STORAGE CABINET**
SCALE: 3/4" = 1'-0"

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Project
Landmark Healthcare Facilities LLC
Fore River Medical Pavilion
Portland, Maine
Mercy Primary Care Suites

Sheet
Casework Details



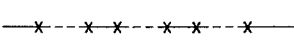
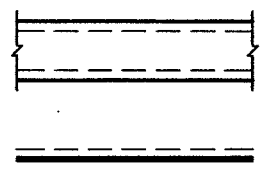


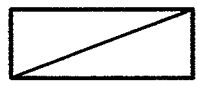


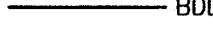
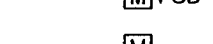
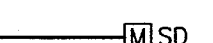


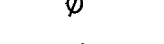


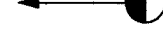
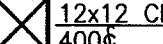
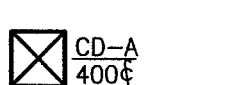
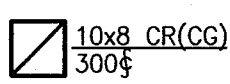


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March 6, 2008

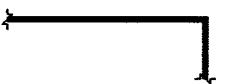


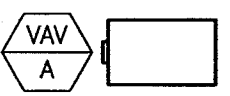
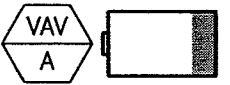

Project No.
07-5198

Sheet No.
A12.11

HVAC BASIC DUCTWORK SYMBOLS

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

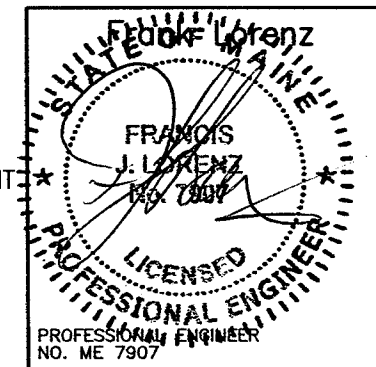
	SINGLE LINE DUCTWORK OR EQUIPMENT - NEW
	SINGLE LINE DUCTWORK OR EQUIPMENT - EXISTING
	DUCTWORK TO BE REMOVED
	DUCTWORK WITH ACOUSTIC LINING
	
	DUCT UNDER POSITIVE PRESSURE (SUPPLY AIR OR FAN DISCHARGE)
	DUCT UNDER NEGATIVE PRESSURE (RETURN, EXHAUST OR OUTSIDE AIR)
	VOLUME DAMPER
	FIRE DAMPER AND ACCESS DOOR
	BACK DRAFT DAMPER
	COMBINATION SMOKE & FIRE DAMPER W/ACCESS DOOR
	AUTOMATIC DAMPER
	AUTOMATIC SMOKE DAMPER
	CENTER LINE
	CUBIC FEET PER MINUTE
	DIAMETER
	SQUARE FEET
	POINT OF CONNECTION
	POINT OF DISCONNECTION
	RECTANGULAR CEILING DIFFUSER WITH 12" X 12" NECK 400 CFM SUPPLY AIR
	TYPE A CEILING DIFFUSER 400 CFM SUPPLY AIR
	10" BY 8" CEILING REGISTER (CEILING GRILLE) 300 CFM RETURN AIR
	RECTANGULAR DIFFUSER WITH BLANKING PLATE

	VANED ELBOW (SEE DETAIL) OR RADIUS ELBOW
	FLEXIBLE DUCT
	SLOTTED LINEAR DIFFUSER WITH PLENUM
	VAV BOX TYPE A
	VAV BOX TYPE A WITH REHEAT COIL
	THERMOSTAT

HVAC ABBREVIATIONS

(NOT ALL ABBREV. ARE NECESSARILY USED ON THIS PROJECT)

AD	ACCESS DOOR	EWB	ENTERING WET BULB
AFF	ABOVE FINISHED FLOOR	EWT	ENTERING WATER TEMPERATURE
AHU	AIR HANDLING UNIT	EXH	EXHAUST
BHP	BRAKE HORSEPOWER	'F	DEGREES FAHRENHEIT
BTU	BRITISH THERMAL UNIT	FA	FREE AREA (SQ.FT.)
BTUH	BTU PER HOUR	FC	FLEXIBLE CONNECTION
CD	CEILING DIFFUSER	FD	FIRE DAMPER
CFM	CUBIC FEET PER MINUTE	FLA	FULL LOAD AMPERES
CG	CEILING GRILLE	FPM	FEET PER MINUTE
CLG	CEILING	GAL	GALLON
CR	CEILING REGISTER	GPH	GALLONS PER HOUR
CV	CONSTANT VOLUME	GPM	GALLONS PER MINUTE
DB	DRY BULB	HT	HEIGHT
DMPR	DAMPER	HZ	FREQUENCY
DX	DIRECT EXPANSION	IN	INCH OR INCHES
(E)	EXISTING TO REMAIN	LAT	LEAVING AIR TEMPERATURE
(ER)	EXISTING TO BE REMOVED	LD	LINEAR DIFFUSER
(ERR)	EXISTING TO BE REMOVED & RELOCATED	LWB	LEAVING WET BULB TEMPERATURE
EAT	ENTERING AIR TEMPERATURE	LWT	LEAVING WATER TEMPERATURE
EDB	ENTERING DRY BULB TEMPERATURE	MBH	THOUSAND BTU PER HOUR
EF	EXHAUST FAN	MIN	MINIMUM
EL	ELEVATION	(N)	NEW
		NIC	NOT IN CONTRACT
		NO.	NUMBER
		NTS	NOT TO SCALE
		OA	OUTSIDE AIR
		OAI	OUTSIDE AIR INTAKE
		OED	OPEN END DUCT
		RA	RETURN AIR
		(RE)	RELOCATED EXISTING
		RF	RETURN FAN
		RH	RELATIVE HUMIDITY
		RHC	REHEAT COIL
		RPM	REVOLUTIONS PER MINUTE
		SA	SUPPLY AIR
SD	SMOKE DAMPER		
SP	STATIC PRESSURE		
TEMP	TEMPERATURE		
TYP	TYPICAL		
UH	UNIT HEATER		
VAV	VARIABLE AIR VOLUME UNIT		
w/	WITH		
WMS	WIRE MESH SCREEN		



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Sheet
HVAC
 Cover Sheet

Mercy Primary Care Suites

Project
Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
 Portland, Maine

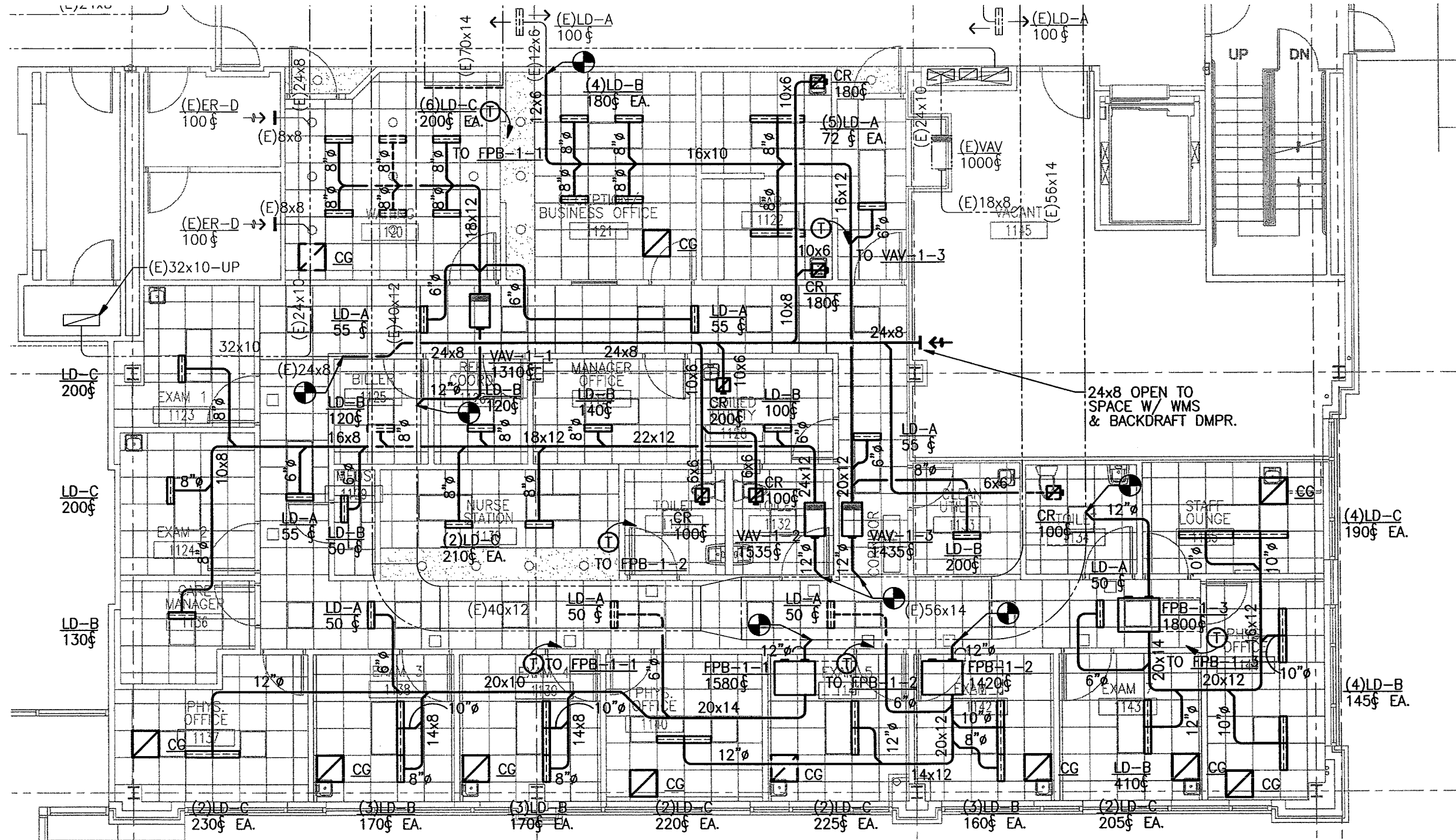
Date
March 6, 2008

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07-5198

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1 FLOOR PLAN
SCALE: 1/8"=1'-0"

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Sheet
Hvac Floor Plan

Mercy Primary Care Suites

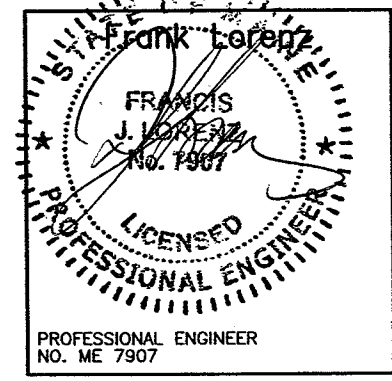
Project
Landmark Healthcare Facilities LLC

**Fore River Medical Pavilion
Portland, Maine**

Date
March 6, 2008

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07-5198

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SERIES FAN POWERED TERMINAL UNIT SCHEDULE

DESIGNATION	INLET SIZE	INDUCTION OPENING (WxH)	FILTER		DISCHARGE DUCT OPENING (WxH)	PERFORMANCE DATA		AIR DATA			FAN DATA		
			SIZE	EFFICIENCY		MIN. Δ SP	CFM @ MIN. Δ SP	MAX. PRIMARY CFM	MIN. PRIMARY CFM	MAX. RETURN CFM	CFM	EXT. SP (IN. W.G.)	FAN TYPE
FPB-1-1	12	12x18.25	14x18	30%	16.5x14.63	0.5	1580	1580	0	1580	1580	0.5	CENTRIF
FPB-1-2	12	12x18.25	14x18	30%	16.5x14.63	0.5	1420	1420	0	1420	1420	0.5	CENTRIF
FPB-1-3	12	12x18.25	14x18	30%	16.5x14.63	0.5	1800	1800	0	1800	1800	0.5	CENTRIF

SERIES FAN POWERED TERMINAL UNIT SCHEDULE (CONT.)

BASED ON: TITUS

DESIGNATION	MOTOR DATA					ELECTRIC HEATING COIL DATA						TYPE OF CONTROLS	MANUF. MODEL #	REMARKS	
	MOTOR HP	FLA	ELECTRICAL DATA			MBH	KW INPUT	VOLTS	PHASE	HZ	FULL-LOAD AMPERES				No. OF STEPS (STAGES)
			VOLTS	PHASE	HZ										
FPB-1-1	1/3	3.0	480	3	60	34.1	10.0	480	3	60	12.1	3	DDC	DTFS	-
FPB-1-2	1/3	3.0	480	3	60	30.7	9.9	480	3	60	12.0	3	DDC	DTFS	-
FPB-1-3	1/3	3.0	480	3	60	38.9	11.4	480	3	60	13.7	3	DDC	DTFS	-

TERMINAL BOX SCHEDULE

DESIGNATION	BOX TYPE	BOX SIZE (INLET SIZE)	AIRFLOW RANGE (CFM)		ELECTRIC HEATING COIL DATA						LOWEST MINIMUM HEATING CFM SETTING	MINIMUM STATIC PRESSURE ΔPS (IN W.G.)	DISCHARGE SOUND LEVEL AT MAX. CFM & Δ PS=1" (NC)	
			MIN.	MAX.	MBH	KW INPUT	VOLTS	PHASE	HZ	FULL-LOAD AMPERES				No. OF STEPS (STAGES)
VAV-1-1	VAV	12	0	1310	28.3	8.3	480	3	60	10.0	3	425	0.5	26
VAV-1-2	VAV	12	0	1535	33.2	9.7	480	3	60	11.7	3	425	0.5	26
VAV-1-3	VAV	12	0	1435	31.0	9.1	480	3	60	11.0	3	425	0.5	26

DIFFUSER SCHEDULE

BASED ON: TITUS

UNIT NO.	CFM RANGE	SERVICE	TYPE	NECK SIZE (IN.)	FACE OVERALL DIMENSIONS WxL (IN.)	BASIS OF DESIGN
LD-A	0-100	SUPPLY	LAY-IN	2-SLOT	3.75"WD. x 2'-0"	TITUS ML-38
LD-B	101-180 CFM	SUPPLY	LAY-IN	3-SLOT	5.25"WD. x 2'-0"	TITUS ML-38
LD-C	181-230 CFM	SUPPLY	LAY-IN	4-SLOT	6.75"WD. x 2'-0"	TITUS ML-38
CR	0-150	EXH	LAY-IN	6"φ	12x12	TITUS PAR
CR	151-200	EXH	LAY-IN	6"φ	24x24	TITUS PAR
CR	201-300	EXH	LAY-IN	8"φ	24x24	TITUS PAR
CG	0-1500	RET	LAY-IN	22x22	24x24	TITUS PAR

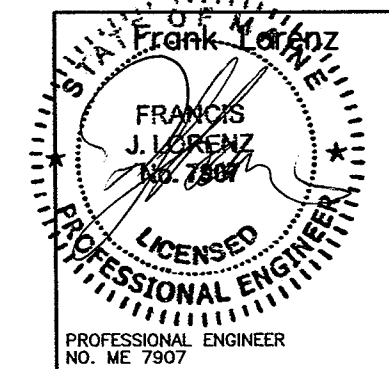
NOTES:

- NOT ALL DIFFUSER AND REGISTER TYPES ARE NECESSARILY USED. REFER TO PLANS.
- LINEAR DIFFUSERS INSTALLED IN GYP BOARD WALLS OR CEILINGS TO COME WITH OPPOSED BLADE DAMPERS ACCESSIBLE FROM FACE OF DIFFUSER.
- LINEAR DIFFUSERS TO COME COMPLETE WITH MATCHING PLENUM MP-38.

TERMINAL BOX SCHEDULE (CONT.)

BASED ON: TITUS

DESIGNATION	RADIATED SOUND LEVEL AT MAX. CFM & Δ PS=1" (NC)	TYPE OF CONTROLS	MANUF. MODEL #	REMARKS
VAV-1-1	29	DDC	DESV	-
VAV-1-2	29	DDC	DESV	-
VAV-1-3	29	DDC	DESV	-



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Sheet HVAC Schedules

Mercy Primary Care Suites

Project
Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
Portland, Maine

Date
March 6, 2008

Project No.
07-5198

Sheet No.

H-3.0

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Revisions

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Sheet
**Plumbing
Cover Sheet**

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Portland, Maine




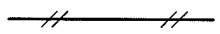











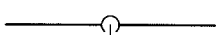
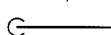









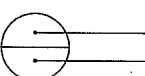
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PLUMBING BASIC SYMBOLS

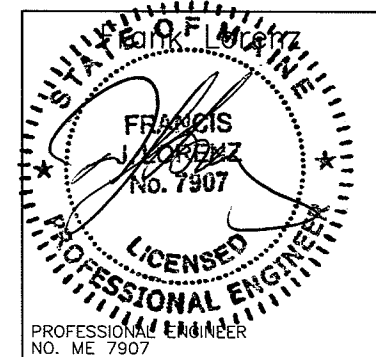
(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

	EXISTING PIPING	
	NEW SOIL, WASTE OR SANITARY PIPING	
	VENT PIPING (SANITARY)	
	PIPING BELOW SLAB	
	DOMESTIC COLD WATER PIPING	
	DOMESTIC HOT WATER PIPING (120°)	
	DOMESTIC HOT WATER CIRCULATION PIPING	
	DISCONNECT FROM EXISTING	
	CONNECT TO EXISTING	
	CLEAN OUT/PLUGGED OUTLET	
	CAPPED OUTLET	
	CLEAN-OUT DECK PLATE	
	P-TRAP	
	VACUUM BREAKER	
	BOTTOM PIPE CONNECTION	
	TOP PIPE CONNECTION	
	PIPE DOWN/DROP	
	PIPE RISE/UP	
	TRAP	
EXIST. 	NEW 	
	MIXING VALVE	
	BALL VALVE	
	REDUCED PRESSURE ZONE BACKFLOW PREVENTER ASSEMBLY	
	BALANCING VALVE ASSEMBLY	
	RISER DESIGNATION	 RISER SERVICE RISER NUMBER

PLUMBING ABBREVIATIONS

(NOT ALL ABBREV. ARE NECESSARILY USED ON THIS PROJECT)

CO	CLEANOUT
CODP	CLEANOUT DECK PLATE
CM	COFFEE MAKER
CVO	CAPPED AND VALVED OUTLET
CW	COLD WATER
CLG	CEILING
CONN	CONNECT
DN	DOWN (PENETRATES FLOOR SLAB)
DR	DRAIN
DWG	DRAWING
(E)	EXISTING
FL	FLOOR
FT	FEET
HW	HOT WATER
HWR	HOT WATER RETURN
LAV	LAVATORY
MAX	MAXIMUM
MIN	MINIMUM
(N)	NEW
PO	PLUGGED OUTLET
SAN	SANITARY
SK	SINK
TYP	TYPICAL
UP	UP (PENETRATES FLOOR SLAB)
V	VENT
W	WASTE
WC	WATER CLOSET



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Sheet
**Plumbing
General Notes**

Mercy Primary
Care Suites

Project
Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

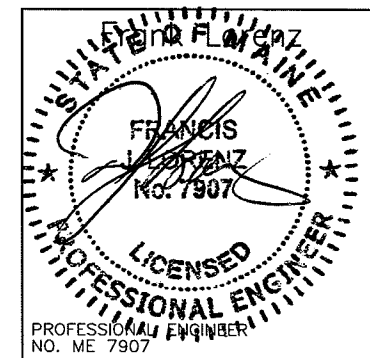
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PLUMBING GENERAL NOTES

1. GENERAL NOTES, SYMBOLS LIST AND DETAILS ARE APPLICABLE TO ALL DRAWINGS MARKED P.
2. DRAWINGS ARE DIAGRAMMATIC: DETERMINE LOCATIONS OF SYSTEMS AND COMPONENTS IN FIELD.
3. NEITHER ACCURACY NOR COMPLETION OF UTILITY LOCATIONS SHOWN ON DRAWINGS IS GUARANTEED. DETERMINE EXACT LOCATIONS OF EXISTING UTILITY IN FIELD, WHETHER OR NOT SHOWN ON DRAWINGS. EXERCISE CAUTION AND IDENTIFY LOCATIONS OF UNMARKED UTILITY LINES AS NECESSARY TO PERFORM WORK OF THIS SECTION.
4. ALL PLUMBING WORK SHALL BE IN ACCORDANCE WITH THE CURRENT PLUMBING CODE AND ALL APPLICABLE LOCAL CODES AND DRAWINGS.
5. IT SHALL BE THE RESPONSIBILITY OF THIS CONTRACTOR TO COORDINATE HIS WORK WITH THAT OF ALL OTHER TRADES, INCLUDING (BUT NOT LIMITED TO), ELECTRICAL, HVAC PROCESS PIPING, SPRINKLER, PLUMBING STRUCTURAL AND GENERAL ARCHITECTURE.
6. ANY INTERFERENCE SHALL BE BROUGHT TO THE ATTENTION OF THE CONSTRUCTION MANAGER AND THE OWNER'S REPRESENTATIVE, AND SHALL BE RESOLVED PRIOR TO THE INSTALLATION OF THE WORK INVOLVED.
7. NO WORK SHALL BE INSTALLED IN VIOLATION OF ANY GOVERNING CODES. ANY WORK SHOWN ON THE DRAWINGS WHICH IS IN VIOLATION OF SUCH CODES SHALL BE BROUGHT TO THE ATTENTION OF THE CONSTRUCTION MANAGER AND THE OWNER'S REPRESENTATIVE AND SHALL BE RESOLVED PRIOR TO THE INSTALLATION OF THE WORK INVOLVED.
8. ALL PIPING PENETRATING CEILING AND WALLS SHALL BE INSTALLED WITH CHROME (STAINLESS WHERE NOTED) PLATED ESCUTCHEONS AT THE PENETRATION. ALL PIPING PENETRATING EXTERIOR WALLS AND ROOFS SHALL BE FLASHED IN AN APPROVED MANNER AND SHALL BE SEALED WEATHER TIGHT. PIPING PENETRATING RATED PARTITIONS SHALL BE PROTECTED AS REQUIRED BY LOCAL CODE AUTHORITY. (SEE DETAILS)
9. MANUFACTURER'S MODEL NUMBERS ARE SPECIFIED SOLELY TO ESTABLISH STANDARDS OF QUALITY FOR PERFORMANCE AND MATERIALS.
10. PRODUCTION INSTALLATION SHALL ADHERE TO MANUFACTURERS' RECOMMENDATIONS.
11. PROVIDE ACCESS PANELS FOR EQUIPMENT THAT REQUIRES PERIODIC SERVICE.
12. CONTRACTOR SHALL COORDINATE ELECTRICAL CHARACTERISTICS AND REQUIREMENTS OF ALL PLUMBING EQUIPMENT WITH THE ELECTRICAL DRAWINGS AND SHALL FURNISH EQUIPMENT WIRED FOR THE VOLTAGES SHOWN HEREIN.
13. PROVIDE SHUTOFF VALVES ON ALL BRANCH PIPING AND ON ALL SUPPLIES TO INDIVIDUAL FIXTURES AND EQUIPMENT. PROVIDE BALL VALVES ON ALL WATER MAIN BRANCHES IN CORRIDORS AND WHERE INDICATED ON DRAWINGS. ALL VALVES SHALL BE ACCESSIBLE.
14. ALL SLEEVES THROUGH CONCRETE FLOORS AND ALL CORE DRILLING OF CONCRETE FLOORS AND WALLS SHALL BE BY THIS CONTRACTOR.
15. CONCRETE PADS AND PLATFORMS FOR WORK OF THIS SECTION WILL BE PROVIDED BY GENERAL CONTRACTOR. PROVIDE INFORMATION AND HARDWARE AS NECESSARY TO COORDINATE WORK.
16. SCHEDULE WORK OF THIS SECTION TO AVOID INTERFERE WITH FIRE-PROOFING WORK.
17. RUN PIPING CONCEALED, UNLESS SPECIFIED OTHERWISE, AND CLEAR OF CEILING INSERTS.
18. STRUCTURAL WELDING SHALL BE 1/4-INCH FILLET UNLESS REQUIRED OTHERWISE.
19. PROVIDE CLAMPS, OFFSETS, EXPANSION JOINTS, ANCHORS AND GUIDES AS NECESSARY TO PREVENT STRESS ON PIPING.
20. PROVIDE BALANCING VALVES AT SYSTEM LOOP RETURNS AND AT RETURN RISERS. PROVIDE SHUT-OFF VALVES AT SYSTEM LOOP SUPPLIES AND SUPPLY RISERS.
21. PROVIDE VENTS AT HIGH POINTS IN PIPING SYSTEMS AND DRAIN VALVES AT LOW POINTS.
22. PROVIDE GAUGE FITTINGS AND THERMOMETER WELLS AT HOT WATER SUPPLY AND RETURN BRANCHES AND AT PUMP INLETS AND OUTLETS.
23. VERIFY EXACT SIZES, LOCATIONS, INVERTS AND ELEVATIONS PRIOR TO RUNNING ANY PIPING. REFER TO ARCHITECTURAL DRAWINGS FOR EXACT LOCATIONS OF ALL FIXTURES AND EQUIPMENT.
24. PLUMBING SUBCONTRACTOR IS RESPONSIBLE FOR EXTENDING ALL REGULATOR VENTS TO ATMOSPHERE. REGULATORS ARE PART OF EQUIPMENT GAS TRAIN.
25. PIPING SHALL NOT RUN OVER ELECTRICAL PANELS AND SHALL BE COORDINATED WITH WORK OF OTHER TRADES.



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**Plumbing
Floor Plan**

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Care Suites

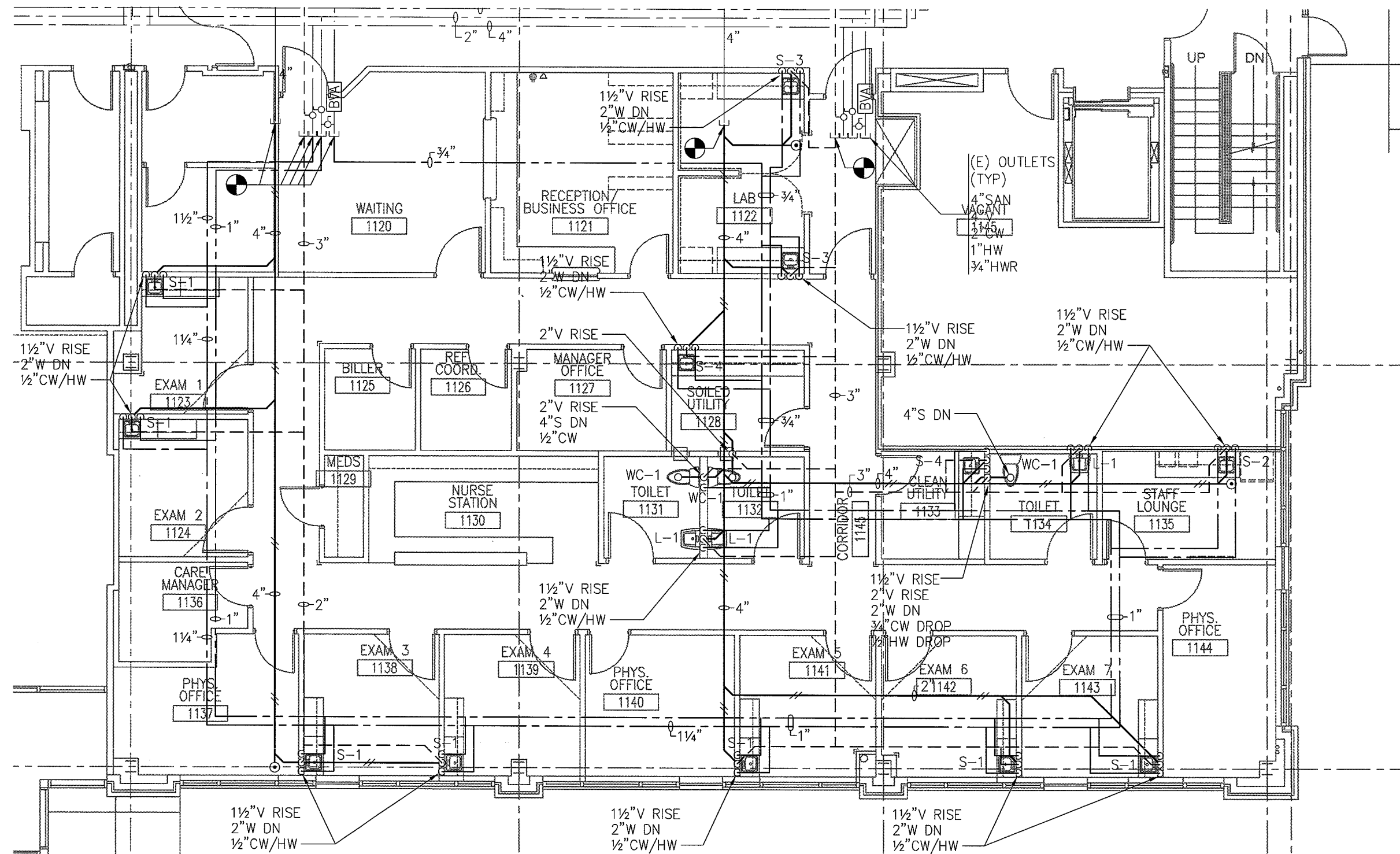
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Fore River Medical
Pavilion
Portland, Maine

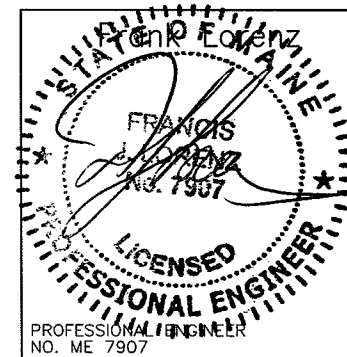
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07-5198

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1 FLOOR PLAN
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**Plumbing
Schedules**

Mercy Primary
Care Suites

Project

Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Date

March 6, 2008

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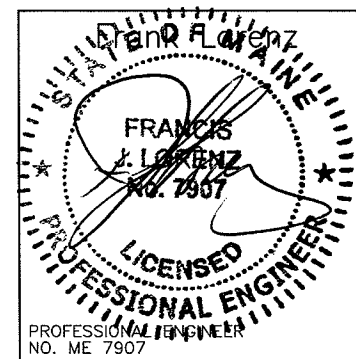
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PLUMBING FIXTURE SCHEDULE

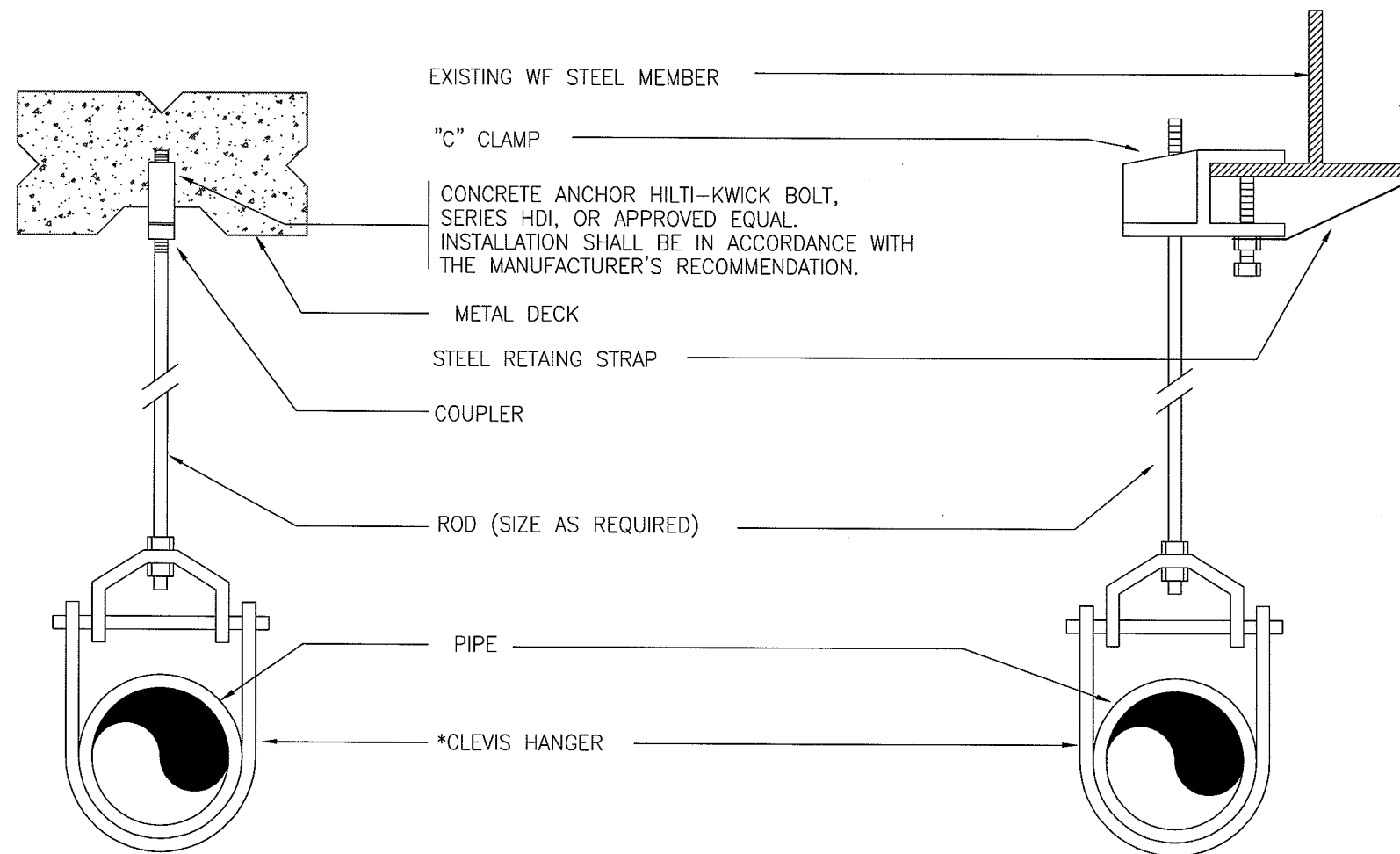
FIXTURES	FIXTURE #				SERVICE CONNECTION					MANUFACTURER AND EQUIPMENT	MODEL NO.	REMARKS
	WC-1				S	W	V	CW	HW			
WATER CLOSET	WC-1				S	W	V	CW	HW			
FLUSH TANK (BOTTOM OUTLET)	•				4"		2"	1/2"		AMERICAN STANDARD CADET OLSONITE OPEN FRONT SEAT LESS COVER	2377.100 95	
LAVATORIES	L-1	L-2	L-3									
PUBLIC	•					1 1/2"	1 1/2"	1/2"	1/2"	SK: ELJER FAUCET: ELJER DRAIN: ELJER	051-2101 3571002 POP-UP	FURNISH OFFSET TRAP, VALVE STOPS, RISERS AND INSULATION KIT.
SINKS	S-1	S-2	S-3									
EXAM	•					2"	1 1/2"	3/4"	3/4"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY	BCR-15 LK411ABH4 LK36	
PANTRY		•				2"	1 1/2"	3/4"	3/4"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY HOT WATER DISPENSER: INSINKERATOR	CR-3321 LK4380FCR (2)LK35L HOT1	FURNISH OFFSET TRAP, VALVE STOPS, RISERS AND INSULATION KIT.
LABORATORY			•			2"	1 1/2"	3/4"	3/4"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY	CR-2521 LK411ABH4 LK35	

NOTES:

1. THE EXACT LOCATION AND MOUNTING HEIGHTS OF ALL PLUMBING FIXTURES SHALL BE AS PER THE ARCHITECTURAL DRAWINGS.
2. ALL SINKS AND LAVATORIES THAT ARE HANDICAPPED ACCESSIBLE SHALL BE PROVIDED WITH THERMAL AND IMPACT INSULATION/SHIELDING KITS ON SUPPLIES, TRAPS, TAILPIECES AND WASTE OUTLETS.



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* CLEVIS HANGERS REQUIRED ON PIPING LARGER 1". GENERAL PURPOSE HANGERS MAY BE USED ON PIPING 1" OR SMALLER.

TYPICAL HANGER DETAIL

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Plumbing Details

Mercy Primary Care Suites

Project

Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
Portland, Maine

Date

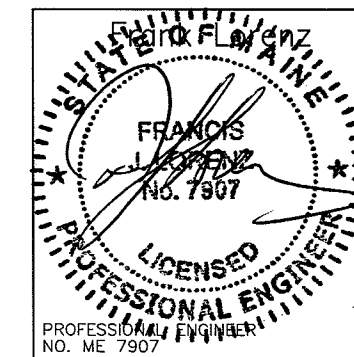
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**Plumbing
Domestic Water
Riser Diagrams**
Mercy Primary
Care Suites

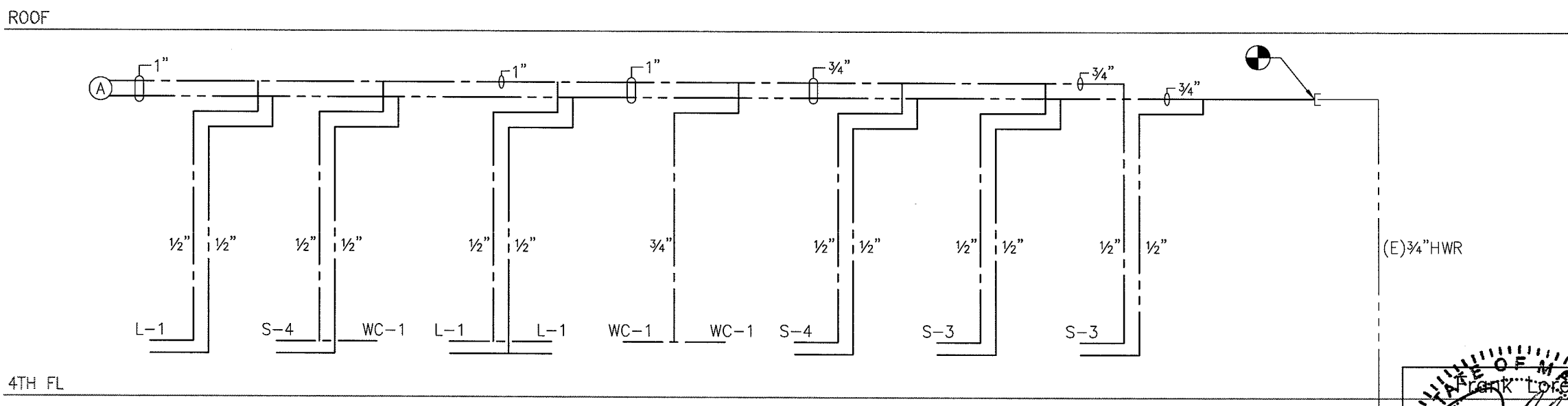
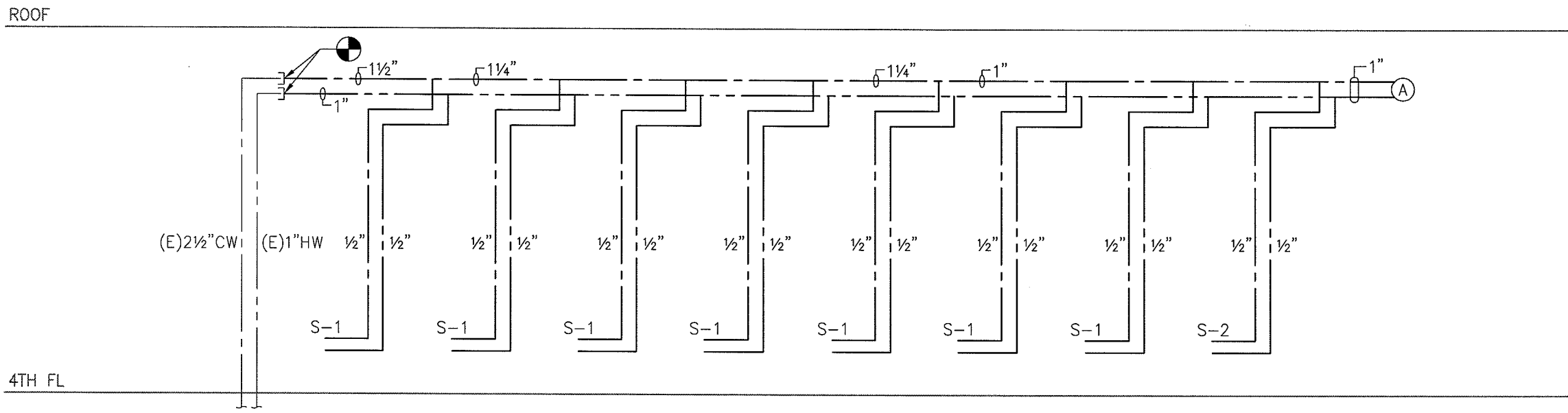
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Fore River Medical
Pavilion
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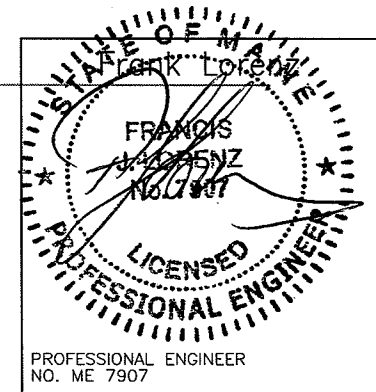
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1 DOMESTIC WATER RISER DIAGRAM
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Mercy Primary
Care Suites

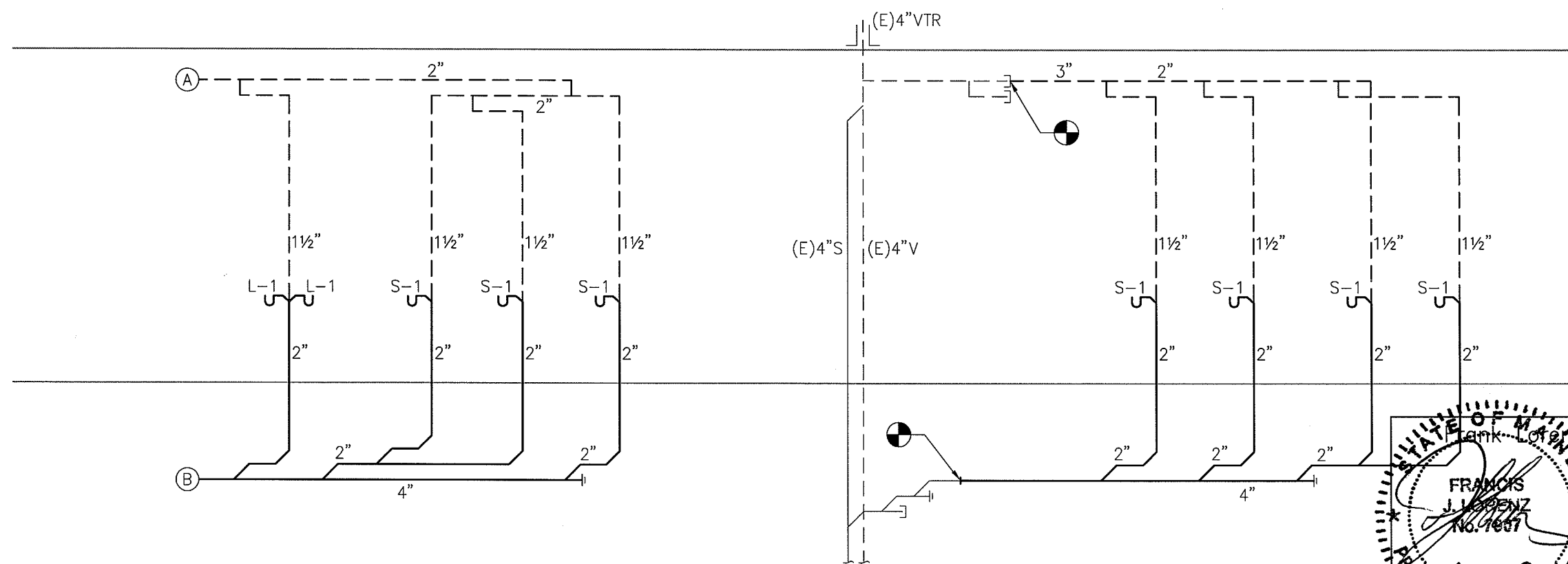
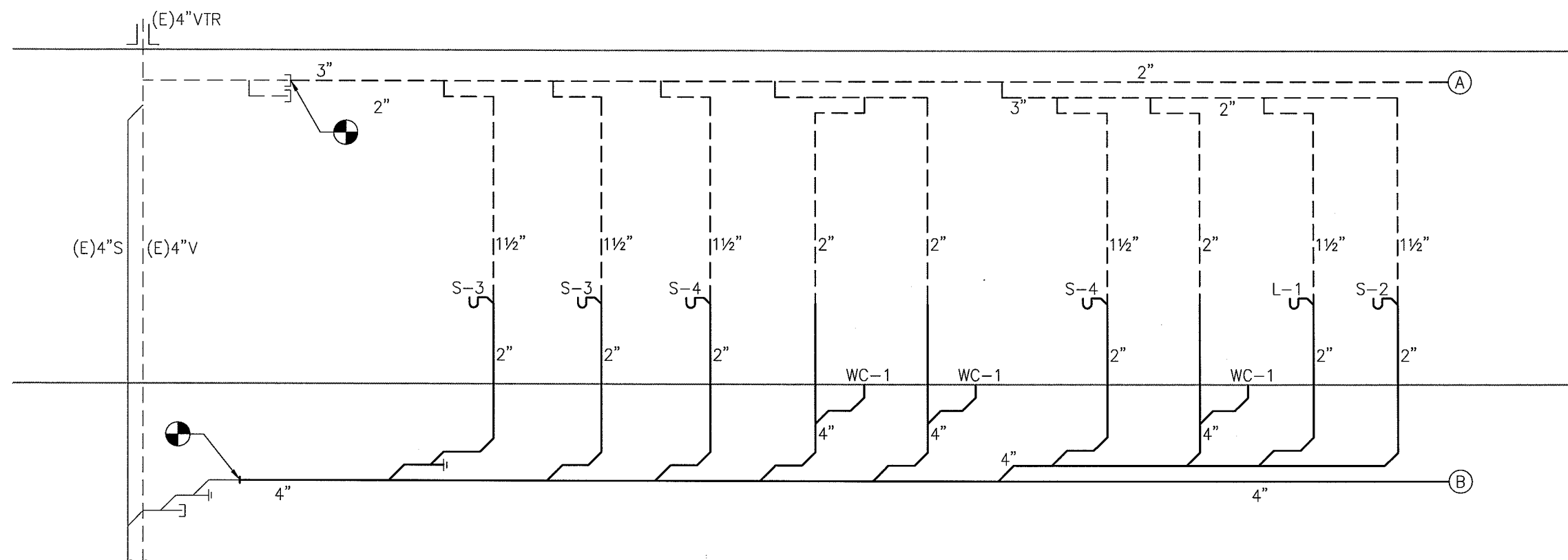
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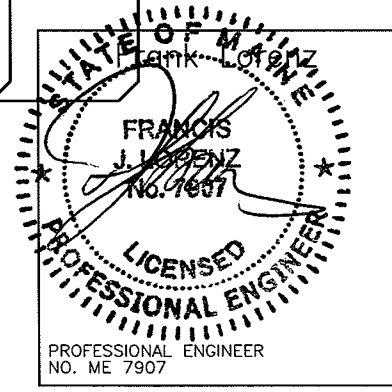
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1 SANITARY RISER DIAGRAM
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ELECTRICAL SYMBOLS LIST

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

	A,a 2'x4'/2'x2'/1'x4' FLUORESCENT CEILING MOUNTED FIXTURE 'A' = FIXTURE TYPE 'a' = CONTROLLED BY SWITCH 'a'
	A,a SIMILAR TO ABOVE WITH EMERGENCY BACKUP 'A' = FIXTURE TYPE 'a' = CONTROLLED BY SWITCH 'a'
	'A' CEILING MOUNTED FIXTURE 'A' = FIXTURE TYPE 'a' = CONTROLLED BY SWITCH 'a'
	'A' SIMILAR TO ABOVE WITH EMERGENCY BACKUP 'A' = FIXTURE TYPE 'a' = CONTROLLED BY SWITCH 'a'
	'A' CEILING MOUNTED EXIT LIGHT - DIRECTIONAL ARROWS WHERE INDICATED - SHADED AREAS INDICATE ILLUMINATED FACE/FACES 'A' = FIXTURE TYPE
	'A' WALL MOUNTED EXIT LIGHT - DIRECTIONAL ARROWS WHERE INDICATED - SHADED AREAS INDICATE ILLUMINATED FACE/FACES 'A' = FIXTURE TYPE
	S _a ³ SINGLE POLE SWITCH 3 = THREE-WAY a = CONTROLS SWITCH LEG 'a'
	\$ _m DISCONNECT SWITCH - TOGGLE TYPE MOTOR RATED, 20A, 1P, UON
	OS _H OCCUPANCY SENSOR, WALL MOUNTED
	CR _H CARD READER
	T TRANSFORMER
	⊕ _a 20A, 125V DUPLEX RECEPTACLE - FLUSH WALL MOUNTED CONTROLLED FROM WALL SWITCH 'a'
	⊕ 20A, 125V QUADRUPLEX RECEPTACLE - FLUSH WALL MOUNTED
	⊕ 20A, 125V DUPLEX RECEPTACLE FLUSH WALL MOUNTED GFI TYPE.
	HOMERUN-NUMERAL WHERE USED INDICATES CIRCUIT NUMBER FOR REFERENCE ONLY. 2#12+1#12G-3/4"C FOR ONE CKT. HOMERUN, U.O.N. 3#12+1#12G-3/4"C FOR TWO CKT. HOMERUN, U.O.N. 4#12+1#12G-3/4"C FOR THREE CKT. HOMERUN, U.O.N.
	HOMERUN - NUMERAL WHERE USED INDICATES CIRCUIT NUMBER FOR REFERENCE ONLY

	30/3 UNFUSED DISCONNECT SWITCH SWITCH AMPS/# OF POLES, VOLTAGE RATING AS REQUIRED
	100/60/3 FUSED DISCONNECT SWITCH; SWITCH AMPS/FUSE AMPS/ # OF POLES, VOLTAGE RATING AS REQUIRED
	SURFACE MOUNTED LIGHTING PANELBOARD
	SURFACE MOUNTED POWER PANELBOARD
	J CEILING MOUNTED JUNCTION BOX
	J-1 FLUSH WALL MOUNTED JUNCTION BOX
	J FLUSH FLOOR MOUNTED JUNCTION BOX
	NEW CONCEALED CONDUIT
	NEW EXPOSED CONDUIT
	EF-1 EQUIPMENT DESIGNATION
	208V, 3φ VOLTAGE, PHASE
	5HP HP, KW OR FLA OF EQUIPMENT
	S _F CEILING MOUNTED SPACE SMOKE DETECTOR F = MOUNTED UNDER RAISED FLOOR
	H COMBINATION FIRE ALARM HORN AND STROBE LIGHT UNIT FLUSH WALL MOUNTED
	F COMBINATION FIRE ALARM SPEAKER AND STROBE LIGHT UNIT FLUSH WALL MOUNTED
	F FLUSH WALL MOUNTED STROBE LIGHT UNIT
	▽ _{##} VOICE & DATA OUTLET LOCATION WITH 3/4" CONDUIT TERMINATED IN A 90 DEG. BEND 6" INTO NEAREST ACCESSIBLE CEILING ## = # OF VOICE JACKS/# OF DATA JACKS
	▽ _# VOICE OUTLET LOCATION WITH 3/4" CONDUIT TERMINATED IN A 90 DEG. BEND 6" INTO NEAREST ACCESSIBLE CEILING P = PUBLIC F = FAX W = WALL MOUNTED 48" AFF # = NUMBER OF JACKS
	TV TELEVISION OUTLET LOCATION WITH 3/4" CONDUIT TERMINATED IN A 90 DEG. BEND 6" INTO NEAREST ACCESSIBLE CEILING

SINGLE LINE DIAGRAM SYMBOLS

	480V 500KVA 120/208 POWER TRANSFORMER VOLTAGES, WINDINGS AND SIZE AS INDICATED
	PANEL NL3A2 PANELBOARD

ABBREVIATIONS

(NOT ALL ABBREVIATIONS ARE NECESSARILY USED ON THIS PROJECT)

+	SPECIAL MOUNTING HEIGHT. COORDINATE LOCATION WITH ARCHITECTURAL ELEVATIONS
A	AMPERE
AFF	ABOVE FINISHED FLOOR
AIC	AMPERE INTERRUPTING CAPACITY
(E)	EXISTING TO REMAIN
EM	EMERGENCY
(ER)	EXISTING TO BE REMOVED
(ERR)	EXISTING TO BE REMOVED & RELOCATED
(RE)	RELOCATED EXISTING
UON	UNLESS OTHERWISE NOTED
V	VOLT OR VOLTAGE
XFMR	TRANSFORMER

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Revisions

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Electrical Cover Sheet

Mercy Primary Care Suites

Project
Landmark Healthcare Facilities LLC

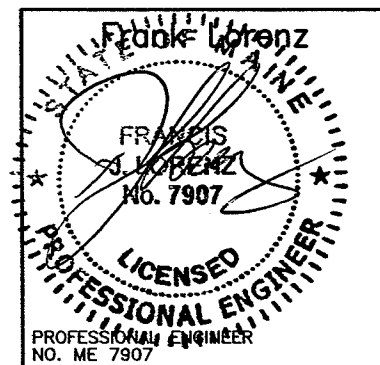
Fore River Medical Pavilion
Portland, Maine

Date
March 6, 2008

Project No.
07-5198

Sheet No.

E-1.0



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Sheet
**Electrical
Floor Plan**
Power
Mercy Primary
Care Suites

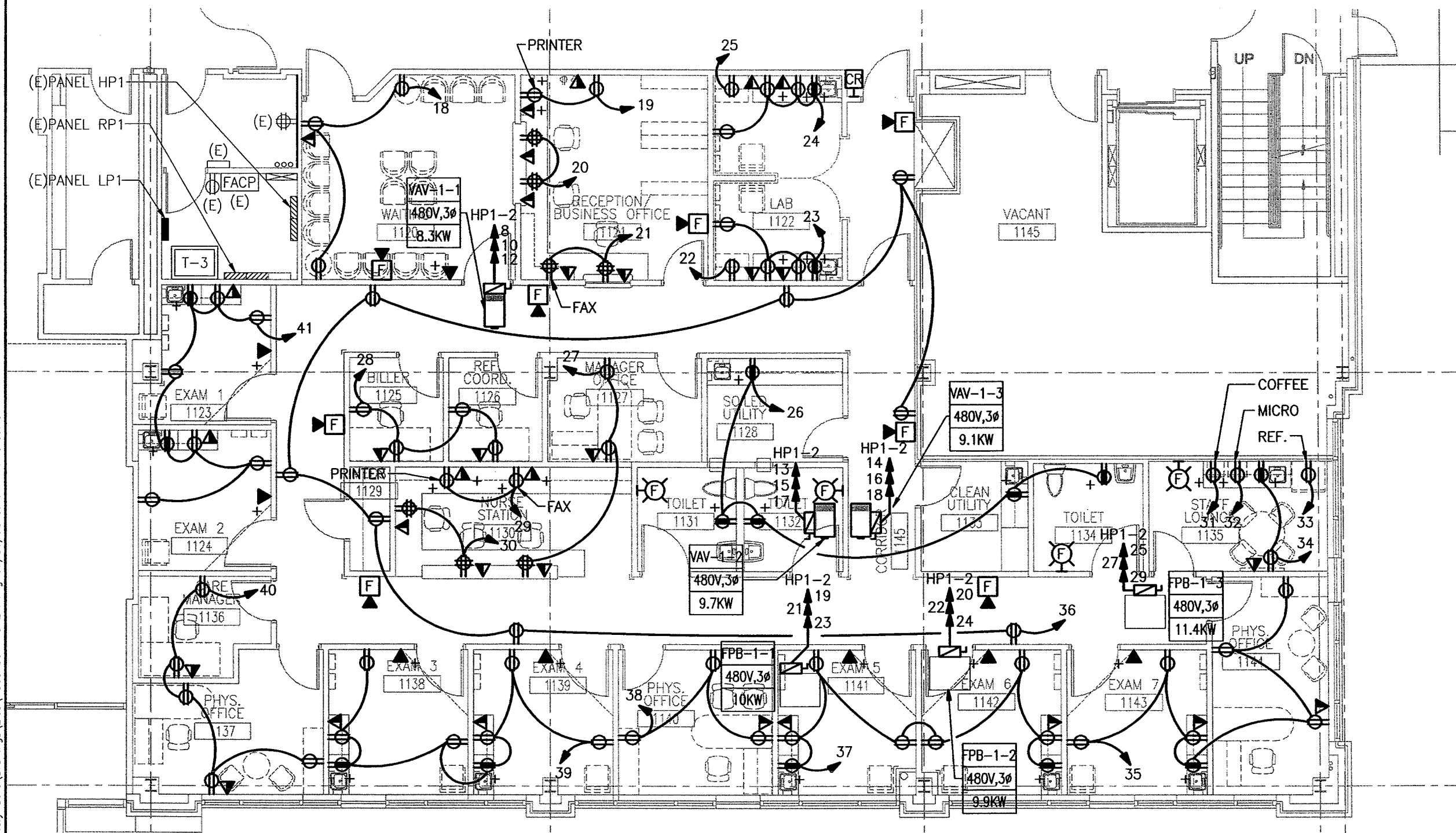
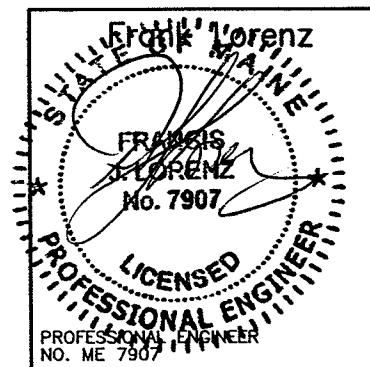
Project
**Landmark Healthcare
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**Fore River Medical
Pavilion**
Portland, Maine

Date
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Project No.
07-5198

Sheet No.
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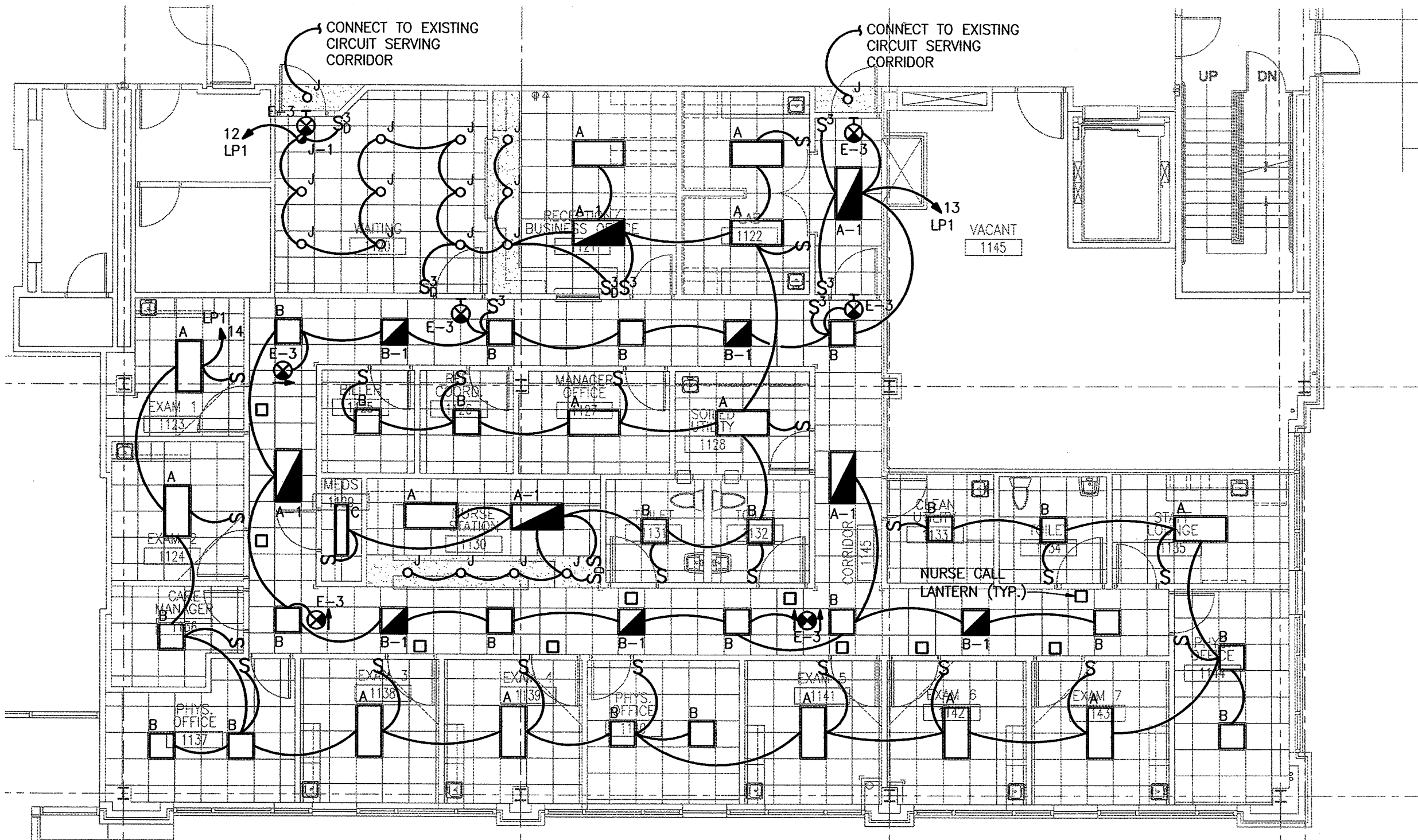


1 FLOOR PLAN
SCALE: 1/8"=1'-0"

DRAWING NOTES:

1. ALL HOMERUNS ARE TO PANEL RP1 SECTION 2 UNLESS OTHERWISE NOTED.
2. REFER TO MECHANICAL DRAWINGS FOR EXACT LOCATIONS OF MECHANICAL EQUIPMENT.

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1 FLOOR PLAN
SCALE: 1/8"=1'-0"

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Sheet
**Electrical
Floor Plan
Lighting**
Mercy Primary
Care Suites

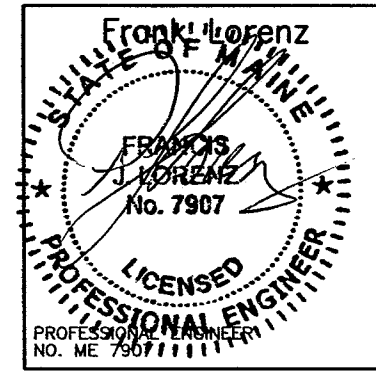
Project
**Landmark Healthcare
Facilities LLC**

Fore River Medical
Pavilion
Portland, Maine

Date
March 6, 2008

Project No.
07-5198

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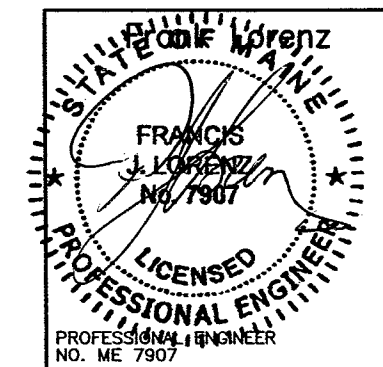


LIGHTING FIXTURE SCHEDULE

TYPE	DESCRIPTION	MANUFACTURER	CATALOG NUMBER	LAMPS		FIXTURE WATTS	VOLTS	MOUNTING
				NO.	TYPE			
A	2' X 4' FLUORESCENT LIGHT WITH PRISMATIC ACRYLIC LENS	METALUX LITHONIA	HRD2GCAV432A-EB81 2SPG4D32RWA12-1/4GEBAPB	4	32W T8	135	277	RECESSED
A-1	FLUORESCENT LIGHT FIXTURE SHALL BE SIMILAR TO FIXTURE A, WITH BATTERY POWER EMERGENCY BACK-UP BALLAST	METALUX LITHONIA	HRD2GCAV432A-EB81 2SPG4D32RWA12-1/4GEBAPB	4	32W T8	135	277	RECESSED
B	2' X 2' FLUORESCENT LIGHT FIXTURE WITH PRISMATIC ACRYLIC LENS	METALUX LITHONIA	HRD2GCAVFA2U6T8A-EB81 2SPG2DU31RWA12-GEBAPB	2	32W T8	70	277	RECESSED
B-1	FLUORESCENT LIGHT FIXTURE SHALL BE SIMILAR TO FIXTURE B, WITH BATTERY POWER EMERGENCY BACK-UP BALLAST	METALUX LITHONIA	HRD2GCAVFA2U6T8A-EB81EL4 2SPG2DU31RWA12-GEBAPBEL	2	32W T8	70	277	RECESSED
C	1' X 4' FLUORESCENT WRAPAROUND FIXTURE	LITHONIA	AW232MVOLTGEB10IS	2	32W T8	70	277	SURFACE
E-3	EXIT LIGHT, SHALL BE CEILING AND WALL MOUNTED, SINGLE OR DOUBLE FACE WITH BATTERY POWER EMERGENCY BACK UP. DIRECTIONAL ARROWS AND LETTER COLOR AS REQUIRED	LITHONIA SURE-LITES MCPHILBEN	PRECISE LRP SERIES ELX SERIES 45V SERIES	-	LED	5	277	CEILING/WALL
H	COMPACT FLUORESCENT LIGHT FIXTURE WITH 1 LAMP FOR STORAGE CLOSETS LESS THAN 50 S.F. SHALL BE FLAT ALBALITE LENS RECESSED FIXTURE WITH ELECTRONIC BALLAST	HALO	H801-277-800P	1	28W DTT	32	277	RECESSED
J	COMPACT FLUORESCENT RECESSED DOWNLIGHT FIXTURE, SHALL BE 7- $\frac{1}{2}$ " DIAMETER OPEN APERTURE WITH CLEAR ALZAK REFLECTOR	PORTFOLIO LITHONIA	C72181H7280LI AF218TRT6AR	2	18W DTT	40	277	RECESSED
J-1	COMPACT FLUORESCENT RECESSED DOWNLIGHT FIXTURE, SHALL BE 7- $\frac{1}{2}$ " DIAMETER OPEN APERTURE WITH CLEAR ALZAK REFLECTOR AND POWER EMERGENCY BACK-UP BALLAST	PORTFOLIO LITHONIA	C72181H7280LI AF218TRT6AR	2	18W DTT	40	277	RECESSED

NOTES:

1. FIXTURES MUST UTILIZE MULTILAMP BALLAST. FIXTURES INSTALLED MUST NOT EXCEED FIXTURE WATTAGE LISTED ON SCHEDULE.
2. ALL FIXTURES LISTED FIRST ON SCHEDULE TO BE TAKEN AS BASIS OF DESIGN.
3. ALL NEW FIXTURES SHALL MATCH EXISTING IN BUILDING.



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Sheet
Electrical Schedules

Mercy Primary Care Suites

Project
Landmark Healthcare Facilities LLC

**Fore River Medical Pavilion
Portland, Maine**

Date
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Project No.
07-5198

Sheet No.
E-4.1

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Electrical Schedules

Mercy Primary
Care Suites

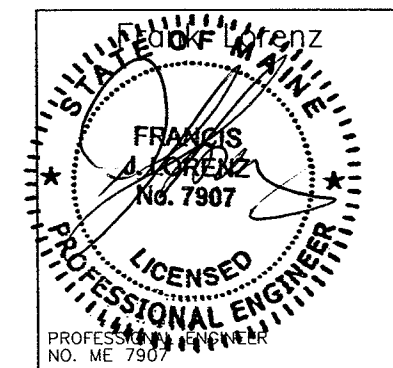
Project
Landmark Healthcare
Facilities LLC

Fore River Medical
Pavilion
Portland, Maine

Date
March 6, 2008

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07-5198

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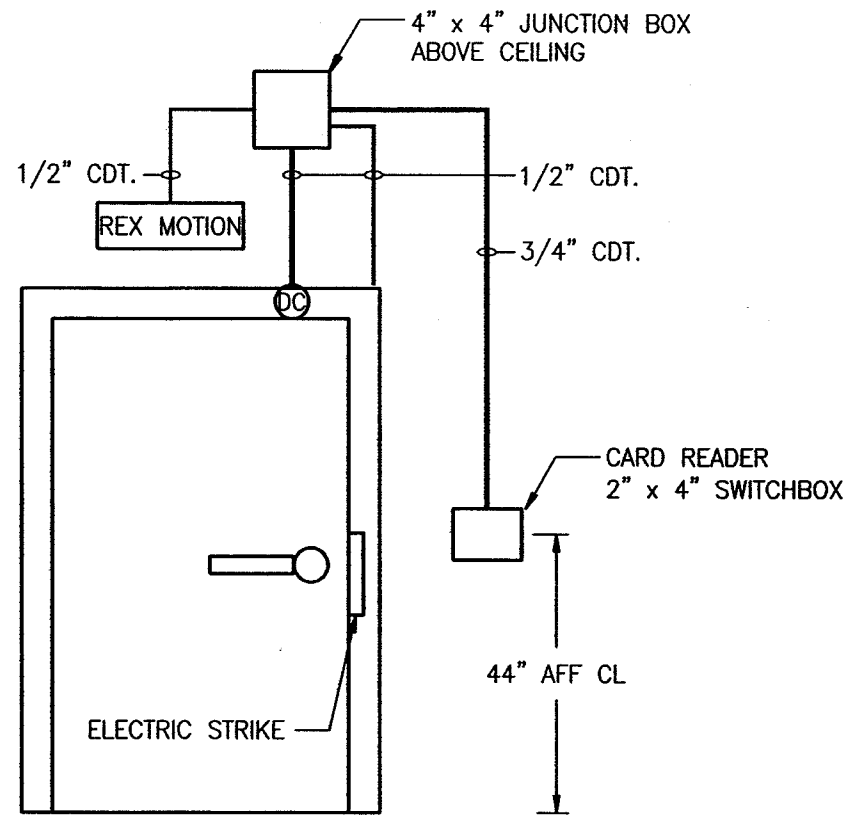


PANEL: (E)HP1 SECTION 2		480 / 277 VOLTS, 3 PHASE 4 WIRE		MAIN BUS: 225 AMPS NEUTRAL: 100%							
LOCATION:	ELECTRICAL CLOSET 1ST FLR	MOUNTING:	<input type="checkbox"/> SURFACE <input type="checkbox"/> FLUSH	<input type="checkbox"/> MAIN LUGS ONLY							
BUILDING:		BUS:	<input type="checkbox"/> COPPER <input type="checkbox"/> ALUMINUM	<input type="checkbox"/> MAIN BKR: 225 AMPS							
FED FROM:	SEE SINGLE LINE DIAGRAM	GROUND BUS:		<input type="checkbox"/> PROVIDE WITH FEED-THRU LUGS							
FEEDER SIZE:	SEE SINGLE LINE DIAGRAM	ISOL.GND. BUS:		AIC: 35000 AMPS							
CKT #	TRIP / POLE	DESCRIPTION OF LOAD	WIRE & COND SIZE	LOAD (VA)	PER PHASE (VA)	LOAD (VA)	WIRE & COND SIZE	DESCRIPTION OF LOAD	TRIP / POLE	CKT #	
1	30/3	(E)VAV	3B	3133	6066	2933	2B	(E)FPB	20/3	2	
3				3133	6066	2933				4	
5				3133		2933	6066			6	
7	20/3	(E)FPB	2B	2666	5432	2766	3B	VAV-1-1	30/3	8	
9				2666	5432	2766				10	
11				2666		2766	5432			12	
13	30/3	VAV-1-2	3B	3233	6266	3033	3B	VAV-1-3	30/3	14	
15				3233		3033	6266			16	
17				3233		3033	6266			18	
19	30/3	FPB-1-1	3B	3333	6633	3300	3B	FPB-1-2	30/3	20	
21				3333	6633	3300				22	
23				3333		3300	6633			24	
25	40/3	FPB-1-3	4B	3800	3800	0				26	
27				3800		0	3800			28	
29				3800		0	3800			30	
31				0	0	0				32	
33				0	0	0				34	
35				0		0				36	
37				0	0	0				38	
39				0	0	0				40	
41				0		0				42	
TOTAL BY PHASE				28197	28197	28197	SPARE = 0%				
TOTAL CONNECTED LOAD =				84591 VA		TOTAL DEMAND LOAD =				84591 VA	
TOTAL CONNECTED AMPS =				102 AMPS		TOTAL DEMAND AMPS =				102 AMPS	

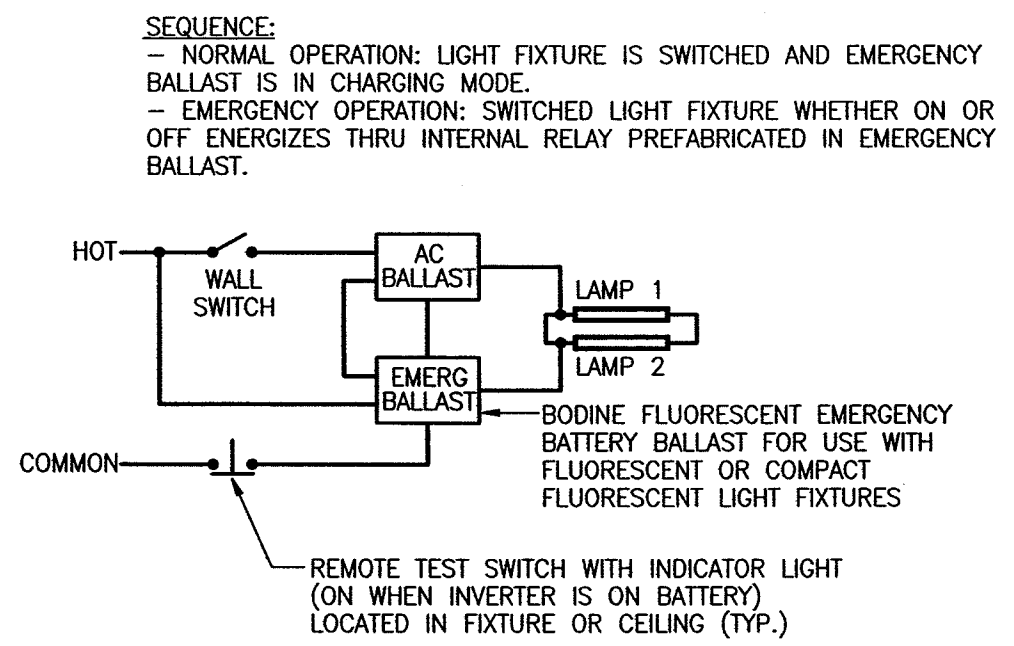
PANEL: (E)RP1 SECTION 2		208 / 120 VOLTS, 3 PHASE 4 WIRE		MAIN BUS: AMPS NEUTRAL: 100%							
LOCATION:	ELECTRICAL CLOSET 1ST FL	MOUNTING:	<input type="checkbox"/> SURFACE <input type="checkbox"/> FLUSH	<input type="checkbox"/> MAIN LUGS ONLY							
BUILDING:		BUS:	<input type="checkbox"/> COPPER <input type="checkbox"/> ALUMINUM	<input type="checkbox"/> MAIN BKR: 225 AMPS							
FED FROM:	SEE SINGLE LINE DIAGRAM	GROUND BUS:		<input type="checkbox"/> PROVIDE WITH FEED-THRU LUGS							
FEEDER SIZE:	SEE SINGLE LINE DIAGRAM	ISOL.GND. BUS:		AIC: 10000 AMPS							
CKT #	TRIP / POLE	DESCRIPTION OF LOAD	WIRE & COND SIZE	LOAD (VA)	PER PHASE (VA)	LOAD (VA)	WIRE & COND SIZE	DESCRIPTION OF LOAD	TRIP / POLE	CKT #	
1	20/1	(E)WAITING ROOM RECEPS	2A	540	1080	540	2A	(E)WAITING RM RECEPS	20/1	2	
3	20/1	(E)OFFICE/RELAXATION RM	2A	1080	1620	540	2A	(E)NURSE WORK RECEPS	20/1	4	
5	20/1	(E)REFRIGERATOR	2A	1000		1000	2A	(E)REFRIGERATOR	20/1	6	
7	20/1	(E)MICROWAVE	2A	1000	2000	1000	2A	(E)DISHWASHER	20/1	8	
9	20/1	(E)REFRIGERATOR	2A	1000	1720	720	2A	(E)PHYS. OFFICE	20/1	10	
11	20/1	(E)GENERAL RECEPS	2A	900	2340	1440	2A	(E)EXAM ROOMS	20/1	12	
13	20/1	(E)EXAM ROOMS	2A	1440	1620	180	2A	(E)TELECOM RECEPTACLE	20/1	14	
15	20/1	(E)TELECOM RECEPTACLE	2A	180	720	540	2A	(E)RECEPTION AREA RECEPS	20/1	16	
17	20/1	(E)RECEPTION AREA RECEPS	2A	360	900	540	2A	WAITING AREA RECEPS	20/1	18	
19	20/1	BUSINESS OFFICE RECEPS	2A	360	1080	720	2A	BUSINESS OFFICE RECEPS	20/1	20	
21	20/1	BUSINESS OFFICE RECEPS	2A	720	1720	1000	2A	LAB DED. RECEP	20/1	22	
23	20/1	LAB RECEPS	2A	720	1440	720	2A	LAB RECEPS	20/1	24	
25	20/1	LAB DED. RECEP	2A	1000	1900	900	2A	TOILET / UTILITY ROOM RECEPS	20/1	26	
27	20/1	MGR OFFICE & NURSE STA RECEP	2A	720	1440	720	2A	BILLER/COORD OFFICE RECEPS	20/1	28	
29	20/1	FRINTER/FAX RECEPS	2A	1000	1720	720	2A	NURSE STATION RECEPS	20/1	30	
31	20/1	COFFEE/MAKER	2A	1000	2000	1000	2A	MICROWAVE	20/1	32	
33	20/1	REFRIGERATOR	2A	1000	1360	360	2A	LOUNGE RECEPS	20/1	34	
35	20/1	EXAM RM / PHYS OFFICE RECEPS	2A	1260	2700	1440	2A	GENERAL CORRIDOR RECEPS	20/1	36	
37	20/1	EXAM ROOM RECEPS	2A	1440	1980	540	2A	PHYS OFFICE RECEPS	20/1	38	
39	20/1	EXAM ROOM RECEPS	2A	1440	2340	900	2A	MGR. PHYS OFFICE RECEPS	20/1	40	
41	20/1	EXAM ROOMS RECEPS	2A	1440	1440	0	2A	SPARE	20/1	42	
TOTAL BY PHASE				11660	10920	12540	SPARE = 0%				
TOTAL CONNECTED LOAD =				35120 VA		TOTAL DEMAND LOAD =				22560 VA	
TOTAL CONNECTED AMPS =				98 AMPS		TOTAL DEMAND AMPS =				63 AMPS	

PANEL: (E)LP1		480 / 277 VOLTS, 3 PHASE 4 WIRE		MAIN BUS: AMPS NEUTRAL: 100%							
LOCATION:	ELECTRICAL CLOSET 1ST FL	MOUNTING:	<input type="checkbox"/> SURFACE <input type="checkbox"/> FLUSH	<input type="checkbox"/> MAIN LUGS ONLY							
BUILDING:		BUS:	<input type="checkbox"/> COPPER <input type="checkbox"/> ALUMINUM	<input type="checkbox"/> MAIN BKR: 225 AMPS							
FED FROM:	SEE SINGLE LINE DIAGRAM	GROUND BUS:		<input type="checkbox"/> PROVIDE WITH FEED-THRU LUGS							
FEEDER SIZE:	SEE SINGLE LINE DIAGRAM	ISOL.GND. BUS:		AIC: 35000 AMPS							
CKT #	TRIP / POLE	DESCRIPTION OF LOAD	WIRE & COND SIZE	LOAD (VA)	PER PHASE (VA)	LOAD (VA)	WIRE & COND SIZE	DESCRIPTION OF LOAD	TRIP / POLE	CKT #	
1	20/1	(E)CORRIDOR LIGHTING	2A	484	1509	1025	2A	(E)VESTIBULE LIGHTING	20/1	2	
3	20/1	(E)VESTIBULE LIGHTING	2A	560	880	320	2A	(E)CORRIDOR LIGHTING	20/1	4	
5	20/1	(E)EMERGENCY LIGHTING	2A	1589	2229	640	2A	(E)STAIRWELL 'A' LIGHTING	20/1	6	
7	20/1	(E)BLOOD DRAW LIGHTING	2A	533	2842	2309	2A	(E)FOOT & ANKLE SUITE LIGHTING	20/1	8	
9	20/1	(E)FOOT & ANKLE SUITE LIGHTING	2A	2204	3222	1018	2A	(E)DR. MCNALLY SUITE LIGHTING	20/1	10	
11	20/1	(E)DR. MCNALLY SUITE LIGHTING	2A	1648	3718	2070	2A	PRIMARY CARE SUITE LIGHTING	20/1	12	
13	20/1	PRIMARY CARE SUITE LIGHTING	2A	1399	3109	1710	2A	PRIMARY CARE SUITE LIGHTING	20/1	14	
15	20/1	SPARE	-	0	0	0	-	SPARE	20/1	16	
17	20/1	SPARE	-	0	0	0	-	SPARE	20/1	18	
19	20/1	SPARE	-	0	0	0	-	SPARE	20/1	20	
21	20/1	SPARE	-	0	0	0	-	SPARE	20/1	22	
23	20/1	SPARE	-	0	0	0	-	SPARE	20/1	24	
25	20/1	SPARE	-	0	0	0	-	SPARE	20/1	26	
27	20/1	SPARE	-	0	0	0	-	SPARE	20/1	28	
29	20/1	SPARE	-	0	0	0	-	SPARE	20/1	30	
31	20/1	SPARE	-	0	0	0	-	SPARE	20/1	32	
33	20/1	SPARE	-	0	0	0	-	SPARE	20/1	34	
35	20/1	SPARE	-	0	0	0	-	SPARE	20/1	36	
37	20/1	SPARE	-	0	25000	25000	SEE SLD	(E)75 KVA XFMR TO PANEL RP1	123/3	38	
39	20/1	SPARE	-	0	25000	25000				40	
41	20/1	SPARE	-	0	25000	25000				42	
TOTAL BY PHASE				32460	29102	30947	SPARE = 0%				
TOTAL CONNECTED LOAD =				92509 VA		TOTAL DEMAND LOAD =				96886 VA	
TOTAL CONNECTED AMPS =				111 AMPS		TOTAL DEMAND AMPS =				117 AMPS	

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1 TYPICAL SINGLE DOOR DETAIL
SCALE: N.T.S.



2 NORMAL/EMERGENCY WIRING SCHEMATIC
SCALE: N.T.S.

WIRE & CONDUIT SIZING SCHEDULE						
AMPS	TAGS	WIRE SIZE (AWG/KCMIL)		No. OF WIRES AND CONDUIT SIZE (IN INCHES)		
		CONDUCTOR PHASE AND NEUTRAL	GROUND	A 1PH, 2W+G	B 3PH, 3W+G	C 3PH, 4W+G
15	1	14	14	3/4	3/4	3/4
20	2	12	12	3/4	3/4	3/4
30	3	10	10	3/4	3/4	3/4
40	4	8	10	3/4	3/4	3/4
50	5	6	10	3/4	1	1
60	6	4	10	1	1 1/4	1 1/4
70	7	4	8	1	1 1/4	1 1/4
80	8	3	8	1	1 1/4	1 1/4
90	9	2	8	1 1/4	1 1/4	1 1/2
100	10	1	8	1 1/4	1 1/2	2

NOTE:
 1. THE ABOVE SCHEDULE IS BASED ON 600 VOLT WIRE TYPE THWN/XHHW AND EMT/RGS CONDUIT
 2B NUMBER INDICATES FEEDER SIZE IN AMPS AND WIRE LETTER INDICATES CONDUIT SIZE AND NUMBER OF WIRES

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Sheet
Electrical Details

Mercy Primary Care Suites

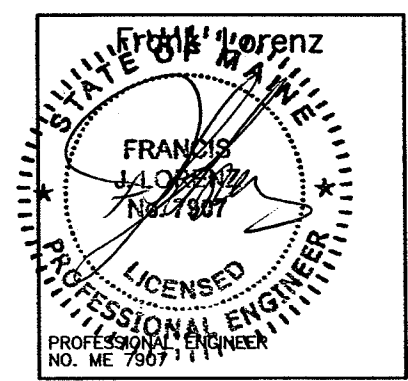
Project
Landmark Healthcare Facilities LLC

**Fore River Medical Pavilion
 Portland, Maine**

Date
March 6, 2008



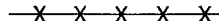















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07-5198

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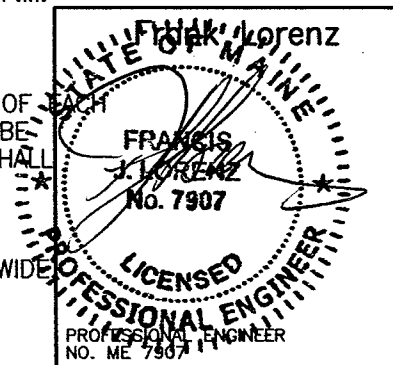
FIRE PROTECTION SYMBOLS

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

	EXISTING PIPING
	NEW PIPING
	EXISTING PIPING TO BE REMOVED
	EXISTING SPRINKLER HEAD
	EXISTING SPRINKLER HEAD TO BE REMOVED
	NEW CONCEALED SPRINKLER HEAD
	NEW PENDENT SPRINKLER HEAD
	NEW UPRIGHT SPRINKLER HEAD
	NEW SIDE WALL SPRINKLER HEAD
	EXTEND EXISTING SPRINKLER PIPING TO NEW SPRINKLER HEAD
	FIRE EXTINGUISHER IN CABINET
	FIRE EXTINGUISHER WALL HUNG
	HYDRAULIC REFERENCE POINT
	SPRINKLER CONTROL VALVE
	PIPE UP/RISE
	PIPE DN/DROP
	CONNECT TO EXISTING
	DISCONNECT FROM EXISTING
FHV	FIRE HOSE VALVE
FSP	FIRE STANDPIPE
SPKR	SPRINKLER
U.O.N.	UNLESS OTHERWISE NOTED

FIRE PROTECTION GENERAL NOTES:

1. PROVIDE WET-PIPE SPRINKLERS IN ALL AREAS. PROVIDE DRY-TYPE SPRINKLER SYSTEM IN ALL AREAS WHERE AMBIENT TEMPERATURE IS 40 DEG F OR BELOW.
2. SECURE WATER FLOW TEST DATA TAKEN FROM FIRE HYDRANTS NEAREST SITE. IF RECENT FLOW TEST DATA IS NOT AVAILABLE FROM CITY RECORDS, MAKE NECESSARY TESTS AS REQUIRED BY NFPA STANDARDS TO DETERMINE CHARACTER OF WATER SUPPLY. MINIMUM OF 20 PSI DROP IN PRESSURE BETWEEN STATIC AND RESIDUAL PRESSURE SHALL BE REQUIRED IN ORDER TO OBTAIN ACCURATE DATA.
3. SPRINKLER SYSTEM SHALL BE HYDRAULICALLY CALCULATED FOR LIGHT HAZARD OCCUPANCY EXCEPT AS NOTED.
4. SPRINKLERS FOR GENERAL AREAS SHALL BE TYPE AS SCHEDULED, 165 DEG F RATED, HYDRAULICALLY DESIGNED TO PROVIDE 0.10 GPM/SQ FT OVER MOST REMOTE 1500 SQ FT PLUS 50 GPM FOR HOSE STREAM. MAXIMUM PROTECTION AREA PER SPRINKLER SHALL BE 225 SQ FT. ROOM DESIGN METHOD ACCEPTABLE.
6. ADD 10% CONTINGENCY FACTOR TO HYDRAULIC CALCULATIONS.
7. EXACT LOCATION OF SPRINKLER HEADS IN FINISHED AREAS WITH SUSPENDED CEILING SHALL BE AS INDICATED ON REFLECTED CEILING PLANS.
8. MINIMUM PRESSURE AT END SPRINKLER HEAD 7 PSI.
9. EQUIVALENT FITTING LENGTHS USED IN HYDRAULIC CALCULATIONS SHALL BE IN ACCORDANCE WITH NFPA STANDARD NO. 13 AND FACTORY MUTUAL 0.5 2-8N.
 - A. WHEREVER FITTINGS ARE USED IN CONJUNCTION WITH LIGHTWALL PIPE, EQUIVALENT FITTING LENGTHS INDICATED IN NFPA-13 SHALL BE INCREASED BY 39%.
10. MAXIMUM FLOW VELOCITY SHALL NOT EXCEED 32 F.P.S.
11. ALL AUTOMATIC SPRINKLER HEADS, PIPE FITTINGS, PIPE HANGERS, AUTOMATIC CONTROL VALVES AND MANUAL CONTROL VALVES SHALL BEAR FACTORY MUTUAL APPROVAL AND SHALL BE APPROVED BY THE ENGINEER PRIOR TO INSTALLATION.
12. ALL EXPOSED PIPE, FITTINGS, HANGERS AND SUPPLEMENTARY STEEL SHALL BE PAINTED.
13. ENDS OF ALL CROSS MAINS SHALL BE PROVIDED WITH THREADED FLUSHING CONNECTION NO MORE THAN 2 INCHES IN DIAMETER.
14. PROVIDE AUXILIARY DRAINS FOR ALL BELOW DUCT SPRINKLERS AND OTHER TRAPPED SECTIONS. PIPING TO ONE SINGLE SPRINKLER IS EXCLUDED.
15. PROVIDE FLUSHING CONNECTIONS WHERE REQUIRED BY NFPA AND F.M.
16. COORDINATE WITH OWNER FOR ALL SHUTDOWNS.
17. PROVIDE TEST CONNECTIONS AT HIGHEST POINT OF MAIN PORTION OF EACH SPRINKLER SYSTEM, WITH 1" PIPE AND VALVE. TEST PIPE SHALL BE CONNECTED TO SPRINKLER PIPE AT LEAST 1-1/4" IN SIZE AND SHALL DISCHARGE OUTSIDE BUILDING OR THROUGH 1/2" SMOOTH BORE BRASS OUTLET, WHERE IT CAN BE EASILY SEEN.
18. PROVIDE ADDITIONAL HEADS UNDER DUCTWORK LARGER THAN 48" WIDE



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Revisions

Issued for Construction 3/6/2008

Sheet Fire Protection Cover Sheet

Mercy Primary
Care Suites

Project
Landmark Healthcare
Facilities LLC

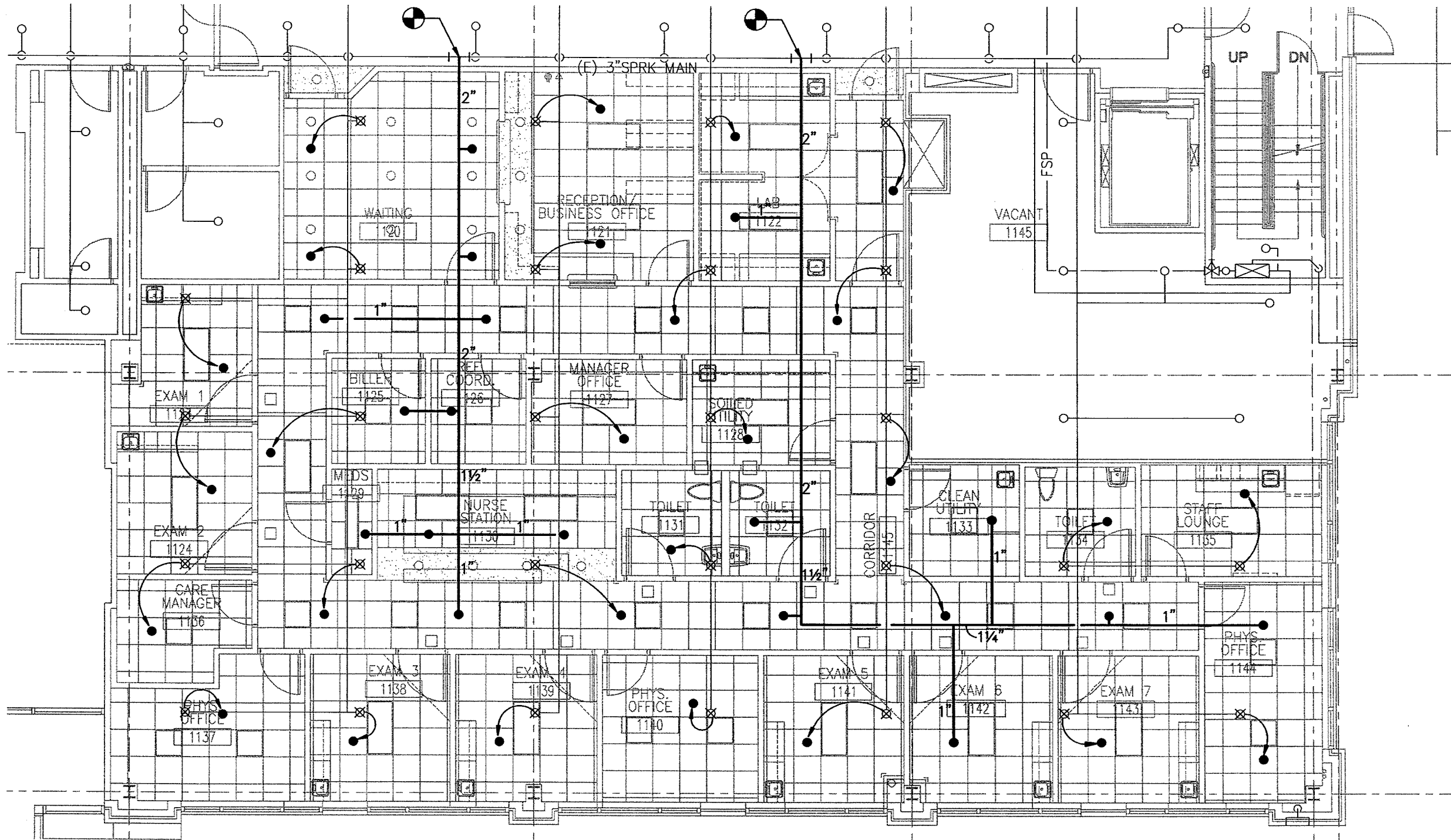
Fore River Medical
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1 FLOOR PLAN
SCALE: 1/8"=1'-0"

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Revisions

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Sheet
Fire Protection Floor Plan

Mercy Primary Care Suites

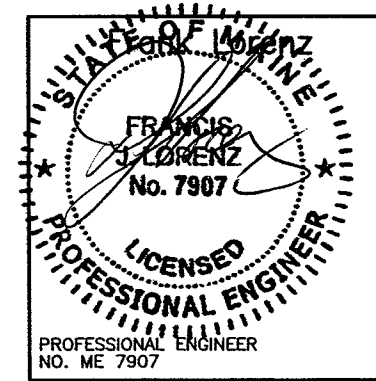
Project
Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
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Sheet No.
FP-2.0

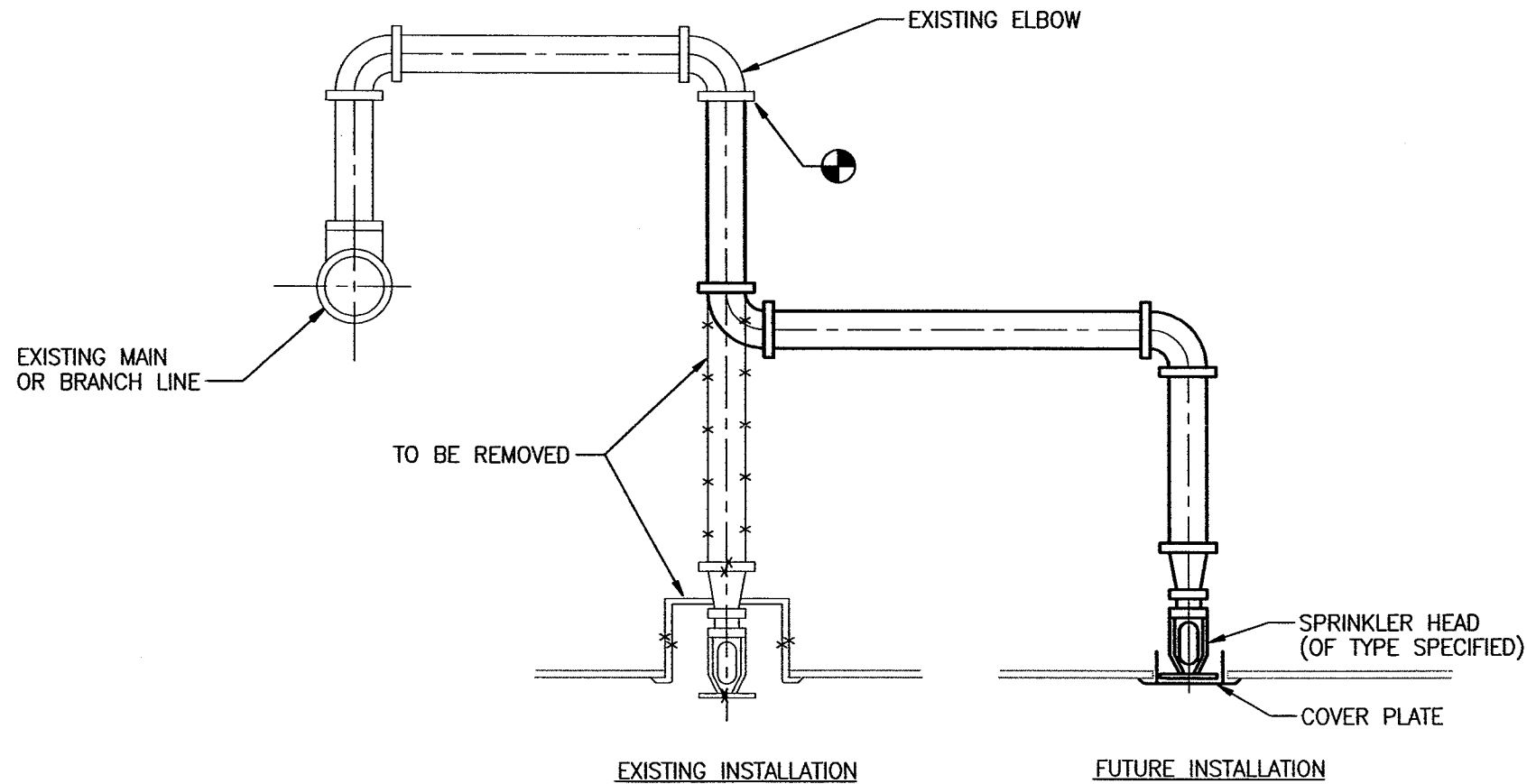


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SPRINKLER HEAD SCHEDULE																								
TYPE	DESIGNATION	UPRIGHT	PENDENT	FLUSH PLATE SPKR.	RECESSED	SIDEWALL (CHROME FINISH)	SIDEWALL (NATURAL BRONZE FINISH)	FLUSH PENDENT	DRY	QUICK RESPONSE	EXTENDED COVERAGE	EXIST SPR HO TO BE REMOVED/RELOCATED	EXIST SPRINKLER HD	MANUFACTURER					REMARKS					
														CENTRAL	RELIABLE	GRINNELL	STAR	VIKING						
														MODEL NUMBER										
	○												●											
	⊗											●												
	●			●						●								F4FR						K=5.6, 1/2" ORIFICE 165°F RATING

NOTES:

1. PROVIDE ESCUTCHEONS WHEN PENETRATING EXPOSED WALL.
2. COLOR SELECTION BY ARCHITECT.



TYPICAL SPRINKLER RELOCATION

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Sheet
Fire Protection Schedules And Details
 Mercy Primary Care Suites

Project
 Landmark Healthcare Facilities LLC

Fore River Medical Pavilion
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FP-3.0

