

Transmittal

Fore River Medical Pavilion
Project
Landmark Healthcare Facilities LLC
839 North Jefferson
Milwaukee, WI 53202
414.277.0500

Anthony Lampasona
Attention
November 27, 2007

Via: Mail Courier Express
 E-Mail Hand _____

Enclosed

- 4 sets Portland Surgical Associates, includes: Architectural signed and sealed, MEP signed and sealed
- 1 set Certificate of Design Application
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

- As requested
- For quotation
- For review
- Approved for payment
- For distribution
- For approval
- For your records
- _____

- Shop drawing review status**
 1. No exceptions noted. No further review submissions required.
 2. Note Markings. No further review submissions required.
 3. Revise and resubmit for final review.
 4. Revise and resubmit before proceeding with work.
 5. Rejected.
 6. Resubmit for record only.
- See status stamp on drawings.**

Distribution

File

F07-5256.00

Remarks

Please distribute as appropriate.

Kirsten E. Graupner
Francis Cauffman



Architecture
 Planning
 Interior Design

N:\F07-5198\04-drawings\Tenant Suites\5256.00_Ponland Surgical Associates\05-Correspondence\landmark\to Landmark-11.27.2007\Transmittal_11.27.07.doc



Certificate of Design Application

From Designer: FRANCIS CAUFFMAN
 Date: NOVEMBER 16, 2007
 Job Name: FORE RIVER MEDICAL PAVILION - PORTLAND SURGICAL ASSOCIATES
 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

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 NUMBER (061802) FOR THE INFORMATION 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

- _____ 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_f
- _____ 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_f and deflection amplification factor C_d (1617.6.2)
- _____ Analysis procedure (1616.6, 1617.5)
- _____ Design base shear (1617.4, 1617.5.1)

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)

Flood loads (1803.1.6, 1612)

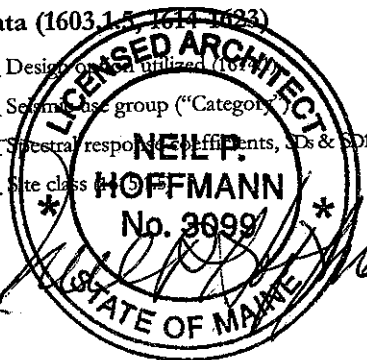
- _____ Flood Hazard area (1612.3)
- _____ Elevation of structure

Earth design data (1603.1.5, 1614, 1623)

- _____ Design option utilized (1623)
- _____ Seismic use group ("Category")
- _____ Structural response coefficients, C_s & C_{di} (1615.1)
- _____ Site class

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)





Barrier-Free Permit Fee Schedule

State Fire Marshal's Office
52 State House Station
Augusta, Maine 04333-0052

Tel: 207-626-3870
Fax: 207-287-6251

Make Check Payable to: "Treasurer, State of Maine"



Permit Fee	Construction Cost
\$25.00	For under \$100,000.00
\$50.00	From \$100,000.00 but less than \$350,000.00
\$150.00	From \$350,000.00 but less than \$600,000.00
\$200.00	From \$600,000.00 but less than \$2,000,000.00
\$250.00	From \$2,000,000.00



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>2986 SF</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant * <u>must</u> 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: \$ _____ C of O Fee: \$ _____ Total Fee: \$ _____
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>MEDICAL OFFICE SUITE</u> Is property part of a subdivision? <u>NO</u> If yes, please name <u>N/A</u> Project description: <u>TENANT FIT-OUT SPACE FOR THE PORTLAND SURGICAL ASSOCIATE ON THE 4TH FLOOR OF THE NEWLY CONSTRUCTED MEDICAL OFFICE BUILDING.</u>		
Contractor's name: <u>LEDGEWOOD CONSTRUCTION</u>		
Address: <u>27 MAIN STREET</u>		
City, State & Zip <u>SOUTH PORTLAND, ME 04106</u>		Telephone: <u>207-767-1866</u>
Who should we contact when the permit is ready: <u>KEVIN MCCOSH</u>		Telephone: _____
Mailing address: _____		

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: <u>Nick Ch...</u>	Date: <u>11/19/07</u>
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This is not a permit; you may not commence ANY work until the permit is issue

LANDMARK HEALTHCARE FACILITIES LLC

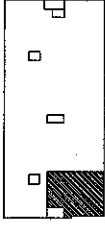
Mercy Hospital Medical Office Building Portland Surgical Associates

Suite No.: 420
Floor No.: 4th

LANDMARK
HEALTHCARE
FACILITIES, LLC

839 North Jefferson Street
Milwaukee, Wisconsin 53202
Telephone: (414) 277-0500
Facsimile: (414) 277-1035

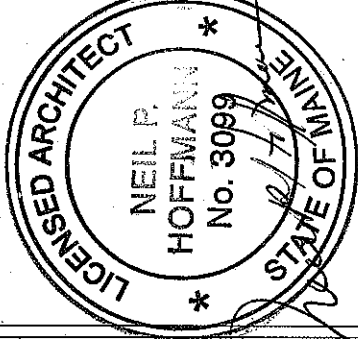
Key Plan



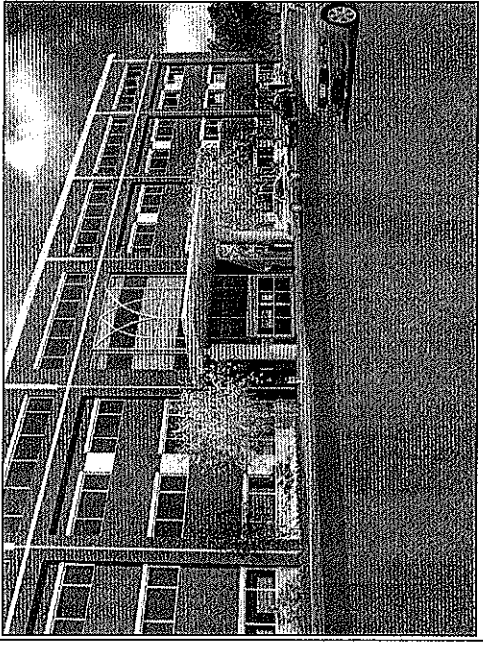
NORTH



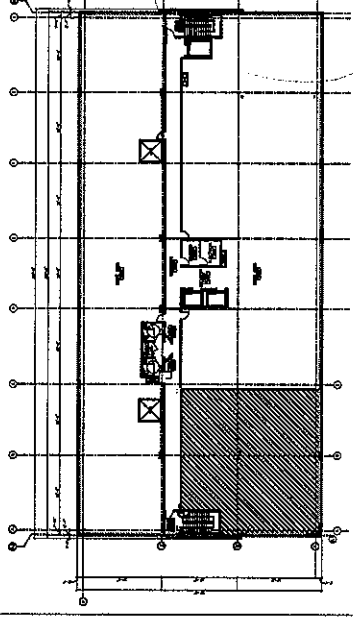
Revisions



Building Rendering



4th Floor Plan - Suite Location



T1.1 Title Sheet

T1.2 Title Sheet

A6.1 Floor Plan - Architectural (Partial)

A6.2 Floor Plan - Furnishings, Power and
Equipment Locations

A7.1 Room Finish Schedule and Details

A8.1 Interior Room Elevations

A8.2 Interior Room Elevations

A8.3 Standard Casework Elevations

A8.4 Casework Sections

A8.5 Casework and Countertop Details

A9.1 Reflected Ceiling Plan

A10.1 Partition Types

A10.2 Partition Types and Details

A10.3 Interior Details

A10.4 Interior Details

A10.5 Interior Details

A11.1 Door Schedule and Details

A11.2 Equipment by Tenant Schedule

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

Suite 950

Philadelphia, PA 19106

Ph 215-925-3788

Fx 215-627-1051

Mechanical/Plumbing

AKF ENGINEERS, LLP

1500 Walnut Street

Suite 1400

Philadelphia, PA 19102

Ph 215-735-7290

Fx 215-735-6706

Electrical

AKF ENGINEERS, LLP

1500 Walnut Street

Suite 1400

Philadelphia, PA 19102

Ph 215-735-7290

Fx 215-735-6706

Fire Protection

AKF ENGINEERS, LLP

1500 Walnut Street

Suite 1400

Philadelphia, PA 19102

Ph 215-735-7290

Fx 215-735-6706

P060106-E-H-1.0

P060106-E-H-2.0

P060106-E-H-3.0

P060106-E-P-1.0

P060106-E-P-1.1

P060106-E-P-2.0

P060106-E-P-3.0

P060106-E-P-4.0

P060106-E-P-5.0

P060106-E-E-1.0

P060106-E-E-2.0

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P060106-E-E-5.1

P060106-E-E-6.0

P060106-E-FP-1.0

P060106-E-FP-2.0

P060106-E-FP-3.0

Building Data / Code Summary

2,986 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 approved 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

Sheet

Title Sheet

Project

MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates

Suite 420

Date

November 20, 2007

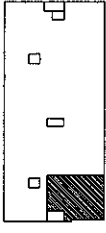
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F07-5256.00

Sheet No.

T1.1

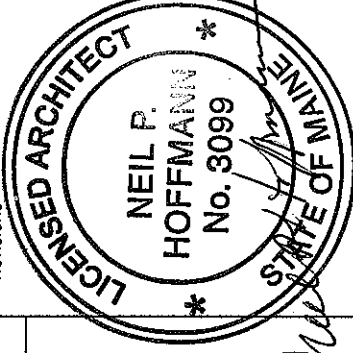
Key Plan



NORTH



Revisions



Sheet

Title Sheet

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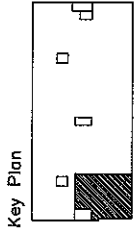
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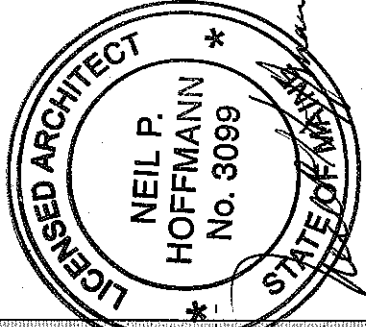
T11.2

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. EXTERIOR WALL AT BRACE FRAME SHALL BE INSULATED WITH UN-FACED BATT INSULATION AND A VAPOR BARRIER IN SUITE AREA. A SECOND PARTITION SIMILAR TO TYPE "K" SHALL BE PROVIDED AROUND BRACE FRAME. DRYWALL AND FINISH SHALL BE PROVIDED IN A SUITE AREA. BUILD-OUT AFTER OUTLETS HAVE BEEN LOCATED. REFER TO DETAIL 5 "FINISH AT STRUCTURAL BRACE FRAME" ON SHEET A10.2
6. SEE SHEETS A10.1 AND A10.2 FOR PARTITION TYPES.
7. DIMENSIONS ARE FACE OF WALL TO FACE OF WALL (NOMINAL).



Revisions



Sheet
**Floor Plan -
Architectural
(Partial)**

Project
**MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates**

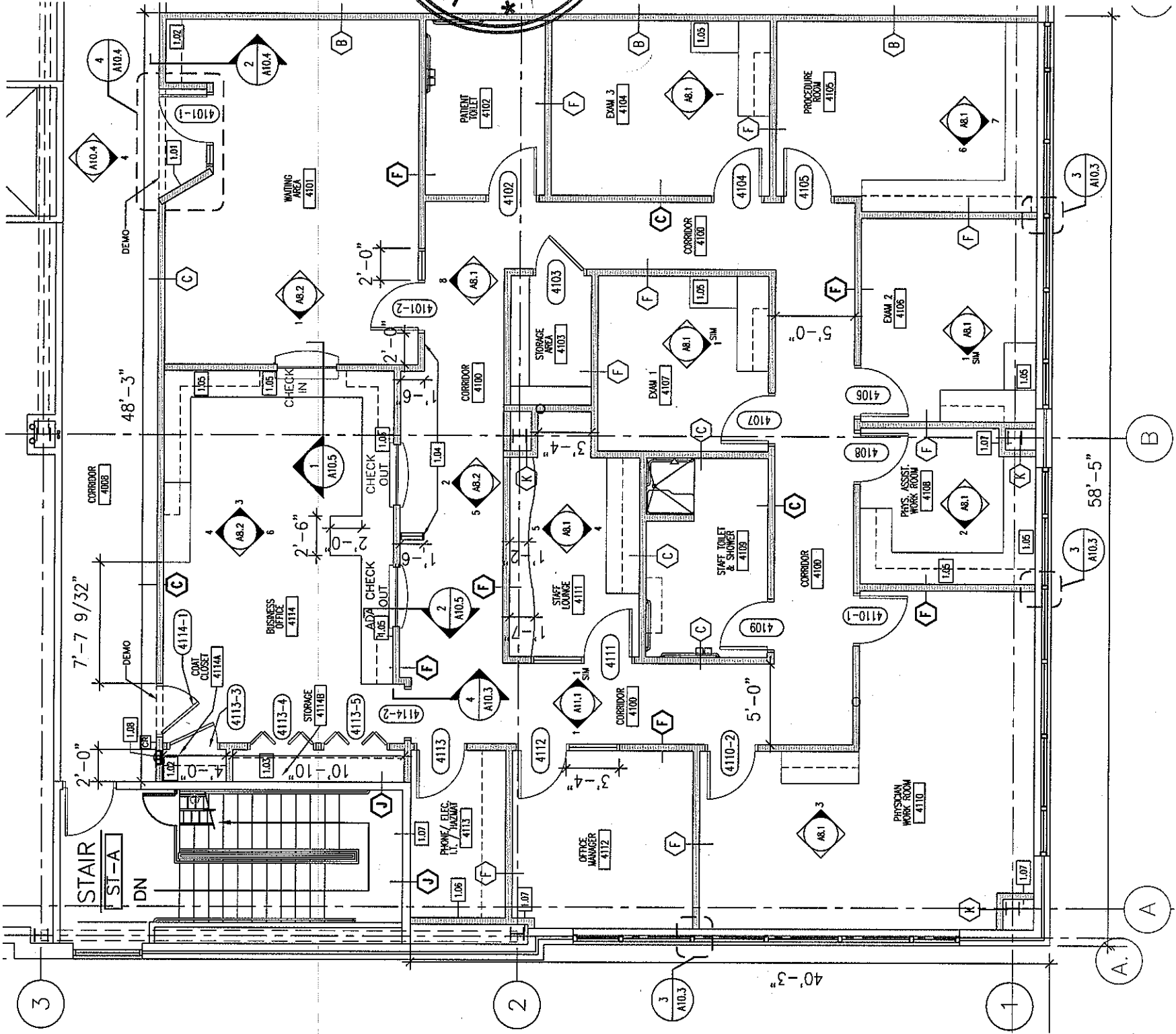
Suite 420

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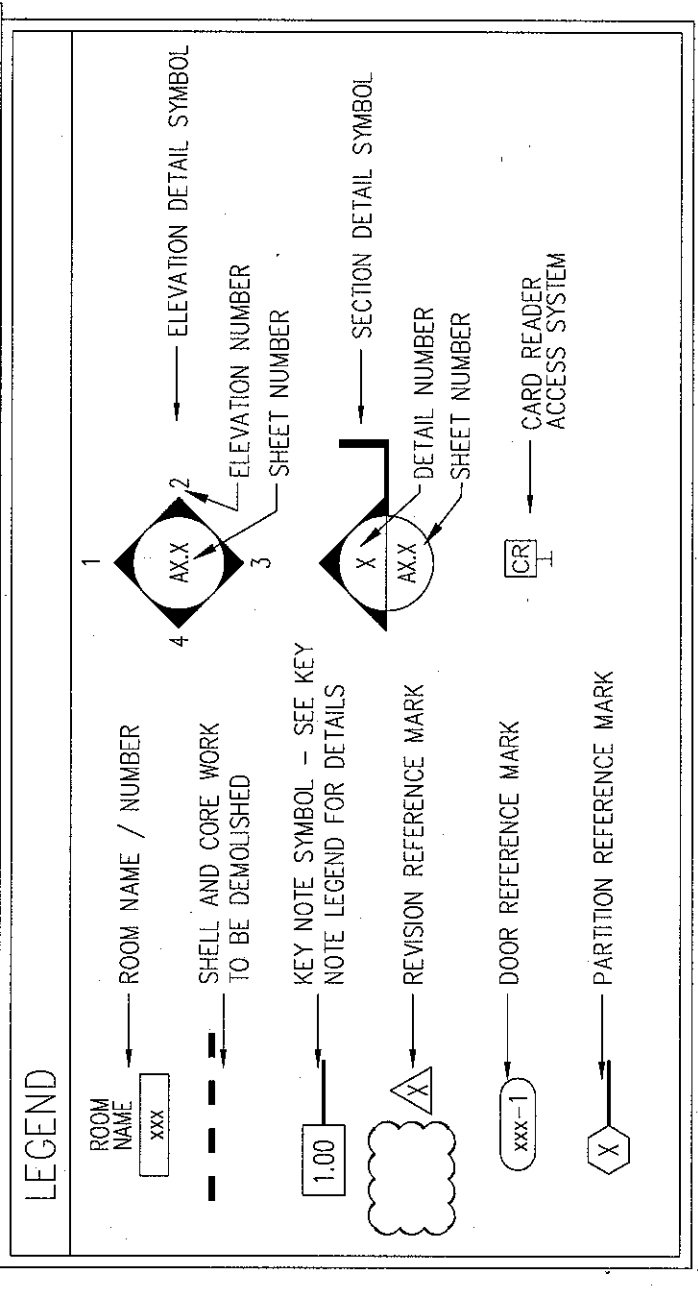
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A6.1

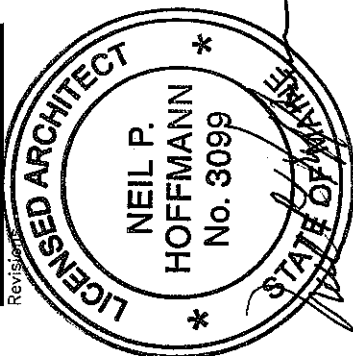
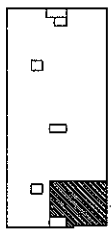


1 FLOOR PLAN
SCALE: 1/8" = 1'-0"

KEY NOTE LEGEND		GENERAL NOTES	
1.01	SUITE ENTRY PLAQUE - SEE DETAIL 4/A10.4	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
1.02	COAT RACK - SEE DETAIL 2/A10.4	2.	USE WATER RESISTANT GYPSUM BOARD IN TOILET ROOMS AND OTHER SIMILAR ROOMS
1.03	(5) 1'-6" DEEP PLASTIC LAMINATE SHELVES ON ADJUSTABLE STANDARDS	3.	ALL CHANGES TO THE SHELL AND CORE WORK DUE TO TENANT WORK SHALL BE INCLUDED IN THE COST FOR TENANT WORK
1.04	ALIGN SURFACE WITH ADJACENT SURFACE	4.	DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE
1.05	GROMMET HOLE IN COUNTERTOP IN FIELD	5.	PROVIDE MINI-BLINDS IN ALL TENANT SUITE WINDOWS ANCHORED TO ALUMINUM FRAME
1.06	TELEPHONE BACKBOARD	6.	ALL PARTITIONS ENCLOSING OFFICES AND EXAM ROOMS SHALL BE TYPE "C".
1.07	GYPSUM BOARD FINISH ON SHELL AND CORE METAL STUDS PROVIDED BY OTHERS		
1.08	FIRE EXTINGUISHER AND BRACKET		



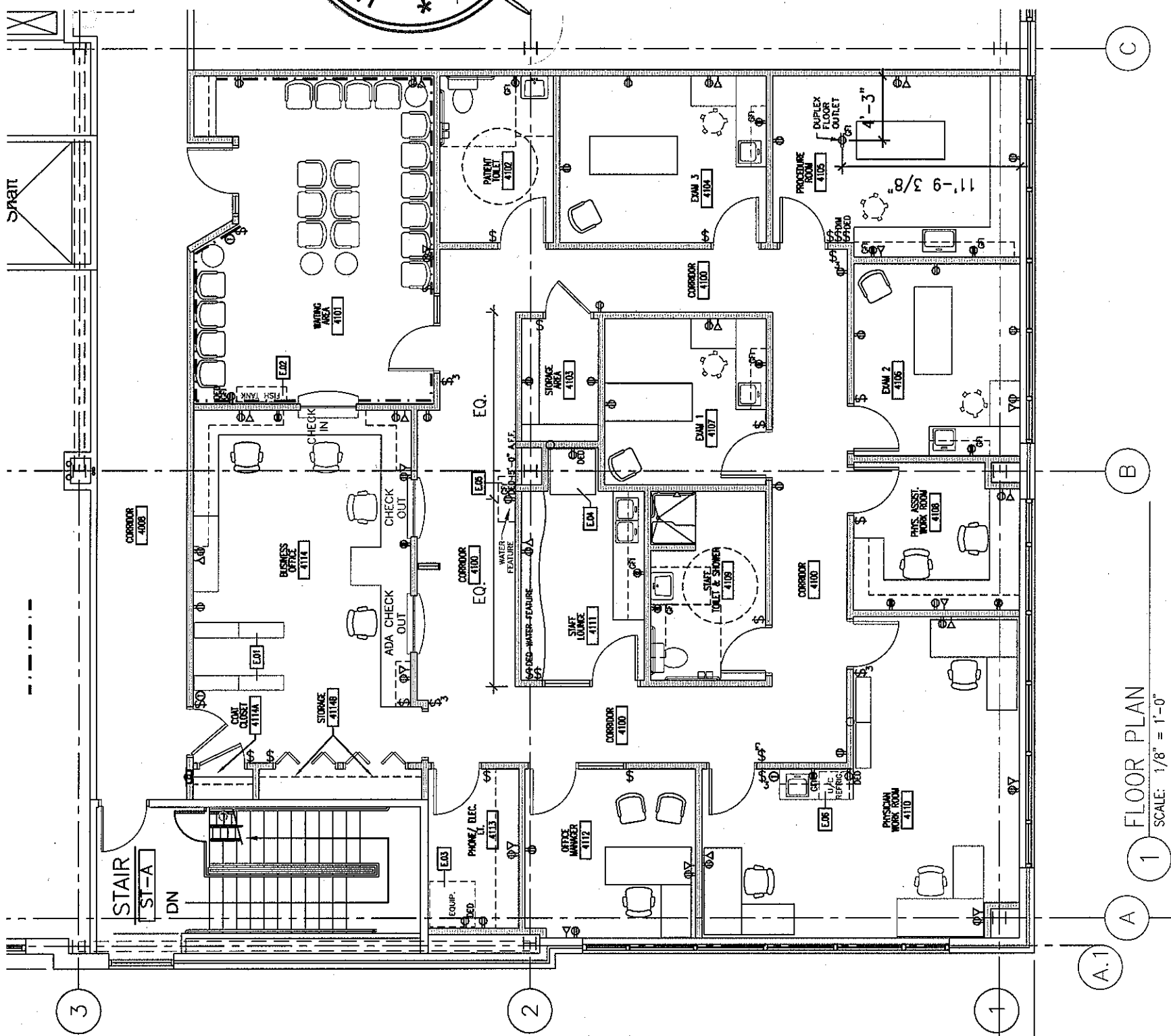
Key Plan



Sheet
**Floor Plan -
Furnishings, Power
and Equipment
Locations**

Project
**MERCY HOSPITAL
Medical Office Bldg.
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Portland Surgical
Associates
Suite 420**

Date
November 20, 2007
Project No.
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Sheet No.
A6.2



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

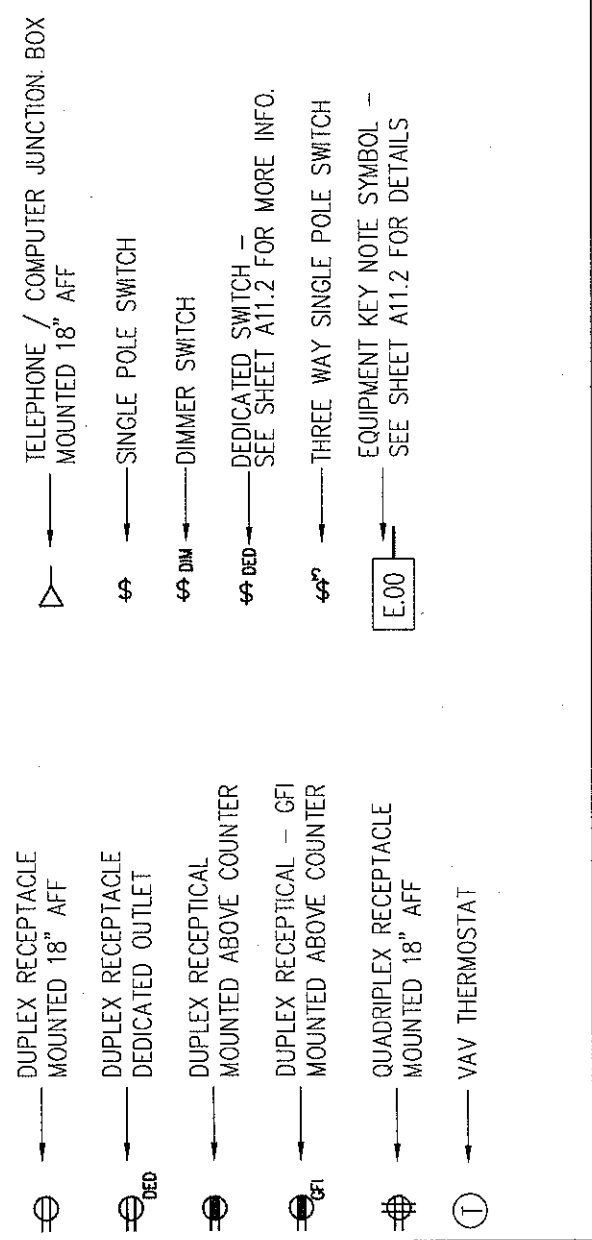
GENERAL NOTES

- 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 SYSTEMS
C. PNEUMATIC TUBE SYSTEMS
D. SECURITY AND TIME CLOCK SYSTEMS
E. NURSE CALL / NURSE NOTIFICATION SYSTEMS
F. TOILET PAPER, TOWELS, SOAP DISPENSORS
G. CHART HOLDERS AND MAGAZINE 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 THE TENANT
- ALL FREESTANDING FURNITURE AND EQUIPMENT TO BE PROVIDED BY TENANT. FREESTANDING FURNITURE SHOWN FOR REFERENCE ONLY.
- GROMMET LOCATIONS TO BE FIELD COORDINATED WITH I.T. STAFF.

MECHANICAL NOTES

- PERIMETER ROOMS WILL BE ZONED TOGETHER AND SHALL BE CONDITIONED WITH ELECTRIC REHEAT COILS IN FAN POWERED VAV TERMINAL UNITS AND CONTROLLED WITH ONE THERMOSTAT
- INTERIOR ROOMS WILL BE ZONED TOGETHER AND SHALL BE CONDITIONED WITH SHUT-OFF FAN POWERED VAV TERMINAL UNITS AND CONTROLLED WITH ONE THERMOSTAT
- RETURN AIR SHALL BE THROUGH A PLENUM TYPE RETURN AIR LIGHT FIXTURE
- ROOFTOP MOUNTED CENTRAL EXHAUST SHALL BE PROVIDED FOR TOILET ROOMS

LEGEND



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

RFS LEGEND

DESIGNATION	XX-X	COLOR
		MATERIAL
FLOORS	FIELD COLOR	ACCENT OR BORDER COLOR
WALLS	FIELD COLOR	ACCENT OR BORDER COLOR

INTERIOR FINISH LEGEND

- CPT - CARPET
 CPT-1 CAMBRIDGE, "KEW GARDENS III" #36006 PORCELAIN SAGE
- CT - CERAMIC TILE
 CT-1 DAL TILE, "VERANDA" #P505 SAND (SEALED)
 CT-2 DAL TILE (BASE), "VERANDA" #P505 SAND BULL-NOSE EDGE (SEALED)
- VB - VINYL COVE BASE
 VB-1 JOHNSONITE, #57 FLAXEN
- PT - PAINT
 PT-1 BENJAMIN MOORE, "SEMI-GLOSS/SATIN" #947, NAVAJO WHITE
 PT-2 BENJAMIN MOORE, "SATIN" #956, PALACE WHITE
 PT-3 BENJAMIN MOORE, "SATIN" #958, OCEAN BEACH
 PT-4 BENJAMIN MOORE, "SATIN" #501, MESQUITE
 PT-5 BENJAMIN MOORE, "SATIN" #836, SEA VIEW
- VWC - VINYL WALLCOVERING
 VWC-1 MAHARAM, "GLEAM" #398420-013 BAMBOO
- SV - SHEET VINYL
 SV-1 ARMSTRONG, "TIMBERLINE" #33007 BEECH NATURAL (SEALED)
 SV-2 FORBO, "SMARAGD", MARBLE #6376 (SEALED)
- PL - PLASTIC LAMINATE
 PL-1 WILSONART, #4807-60, MELON BRUSH (MATTE)
 PL-2 NOT USED
 PL-3 PIONITE, #AB121-S, OPAL IMPRESSION (SUEDE)
 PL-4 WILSONART, #7909-60, FUSION MAPLE (MATTE)
 PL-5 PIONITE, #WC421, OILED CHERRY (SUEDE)
- SS - SOLID SURFACE
 SS-1 DUPONT, "ZODIAQ" TOASTED ALMOND
 SS-2 DUPONT, "ZODIAQ" BOREALIS BLUE
- ACT - ACOUSTICAL CEILING CEILING
 ACT-1 USG, "F FISSURED SL #132"
- AP - ACRYLIC PANEL
 AP-1 3-FORM, 1/2" THICK, DRIFT BLUE, FRONT AND BACK FINISH - SANDSTONE

ROOM FINISH SCHEDULE

ROOM NO.	ROOM NAME	FLOOR		WALLS				CEILING
		FINISH	BASE	NORTH	SOUTH	EAST	WEST	
4100	CORRIDOR	CPT-1	CPT-1	WVC-1	WVC-1	WVC-1	WVC-1	ACT-1
4101	WAITING AREA	CPT-1	CPT-1	PT-1/ WVC-1	PT-1/ WVC-1	PT-1/ WVC-1	PT-1/ WVC-1	ACT-1
4102	PATIENT TOILET	CT-1	CT-2	PT-4	PT-2	PT-2	PT-2	ACT-1
4103	STORAGE AREA	SV-1	VB-1	PT-3	PT-3	PT-3	PT-3	ACT-1
4104	EXAM 3	SV-1	VB-1	PT-4	PT-2	PT-2	PT-2	ACT-1
4105	PROCEDURE ROOM	SV-2	VB-1	PT-2	PT-5	PT-2	PT-2	ACT-1
4106	EXAM 2	SV-1	VB-1	PT-2	PT-4	PT-2	PT-2	ACT-1
4107	EXAM 1	SV-1	VB-1	PT-2	PT-5	PT-2	PT-2	ACT-1
4108	PHYS. ASSISTANT WORK ROOM	CPT-1	CPT-1	PT-2	PT-2	PT-5	PT-2	ACT-1
4109	STAFF TOILET AND SHOWER	CT-1	CT-2	PT-2	PT-4	PT-2	PT-2	ACT-1
4110	PHYSICIAN WORK ROOM	CPT-1	CPT-1	PT-2	PT-2	PT-2	PT-2	ACT-1
4111	STAFF LOUNGE	SV-1	VB-1	PT-3	PT-3	PT-3	PT-3	ACT-1
4112	OFFICE MANAGER	CPT-1	CPT-1	PT-2	PT-2	PT-4	PT-2	ACT-1
4113	PHONE/ELEC./I.T./STORAGE	SV-1	VB-1	PT-3	PT-3	PT-3	PT-3	ACT-1
4114	BUSINESS OFFICE	CPT-1	CPT-1	PT-3	PT-3	PT-3	PT-3	ACT-1
4114A	COAT CLOSET	CPT-1	CPT-1	PT-1	PT-1	PT-1	PT-1	ACT-1
4114B	STORAGE	CPT-1	CPT-1	PT-1	PT-1	PT-1	PT-1	ACT-1

LANDMARK HEALTHCARE FACILITIES, LLC
 839 North Jefferson Street
 Milwaukee, Wisconsin 53202
 Telephone: (414) 277-0500
 Facsimile: (414) 277-1055

Key Plan



NORTH



Revisions



Sheet

Room Finish Schedule and Details

Project

MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical Associates

Suite 420

Date

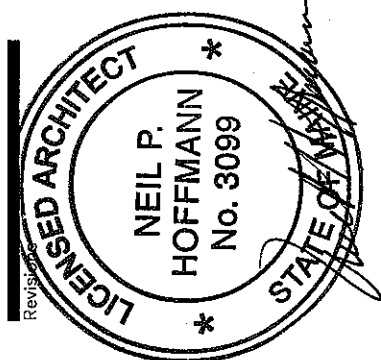
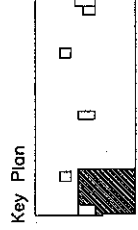
November 20, 2007

Project No.

F07-5256.00

Sheet No.

A7.1

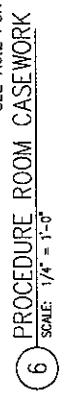
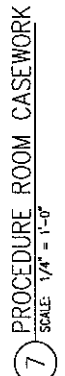
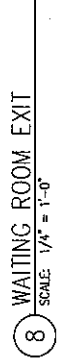
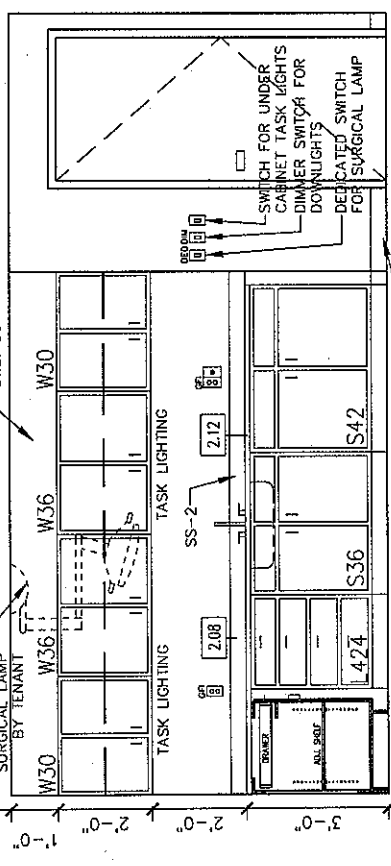
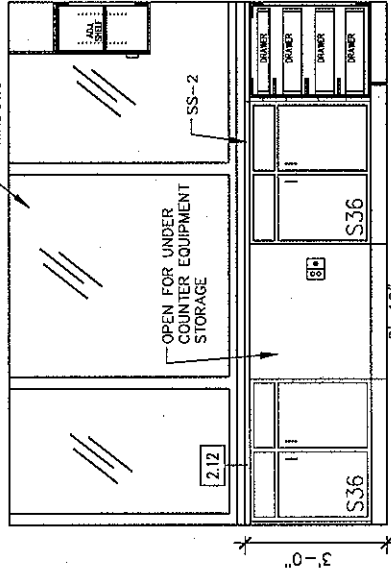
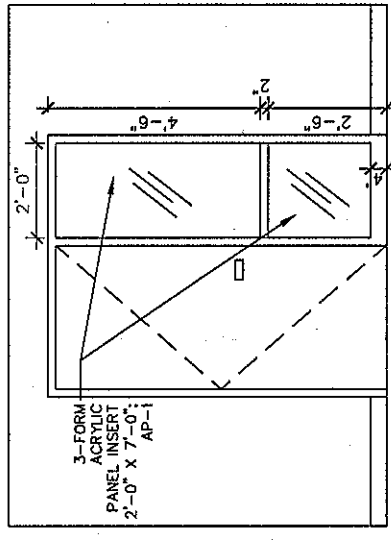
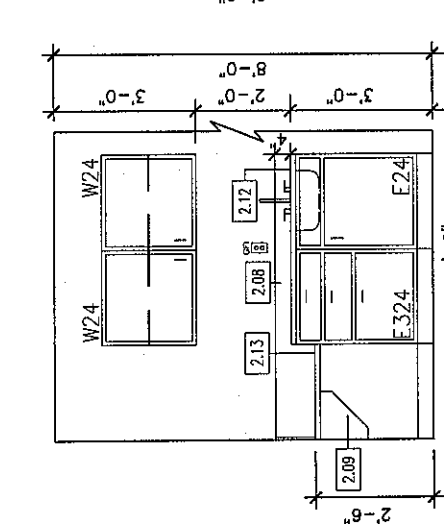
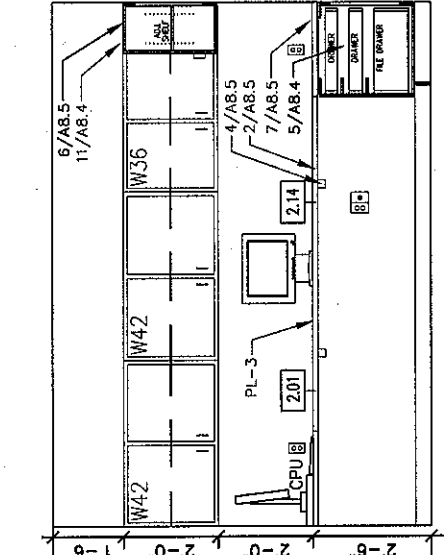
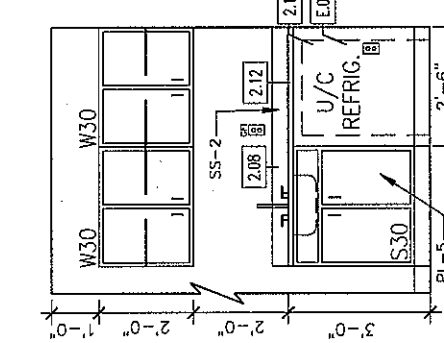
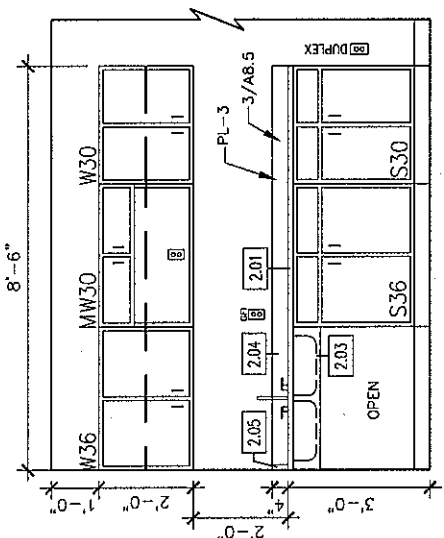
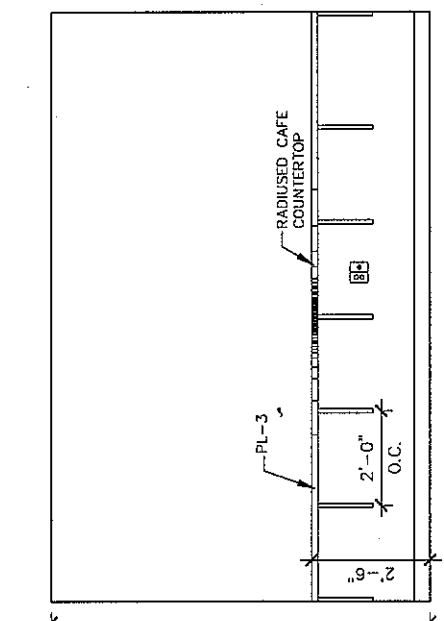


Sheet
Interior Room
Elevations

Project
MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates
Suite 420

Date
November 20, 2007
Project No.
F07-5256.00
Sheet No.

A8.1

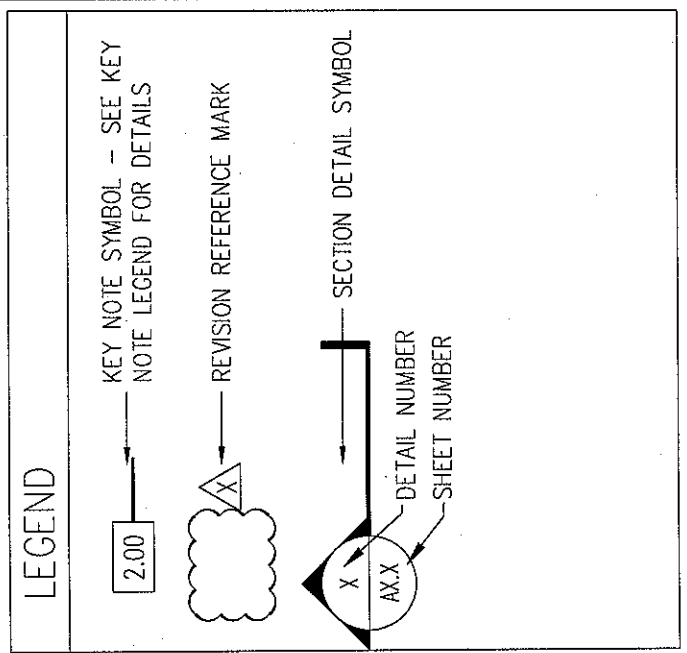


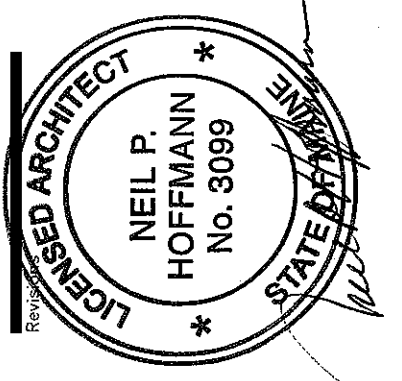
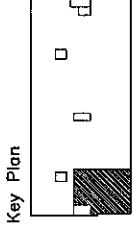
GENERAL NOTES

1. PLASTIC LAMINATE CABINETS SHALL BE PL-4 VERTICAL SURFACES, U.N.O.
2. SOLID SURFACE COUNTERTOPS, BACK AND SIDE SPLASHES SHALL BE SS-1, U.N.O.
3. PROVIDE END SPLASH AT WALL ON COUNTERTOPS WITH BACKSPLASHES AND SINKS.
4. DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE.
5. FOR DRAWING CLARITY, FREESTANDING FURNITURE NOT INDICATED.

KEY NOTE LEGEND

2.01	PLASTIC LAMINATE COUNTERTOP	2.11	UNDERCOUNTER REFRIGERATOR SPACE
2.02	3 1/2" PLASTIC LAMINATE APRON	2.12	SOLID SURFACE COUNTERTOP
2.03	3 1/2" PLASTIC LAMINATE VALANCE	2.13	3' X 2' SOLID SURFACE WRITING SURFACE
2.04	4" PLASTIC LAMINATE BACKSPLASH	2.14	GROMMET HOLE IN COUNTERTOP
2.05	4" PLASTIC LAMINATE SIDESPLASH		
2.06	PLASTIC LAMINATE END PANEL		
2.07	PLASTIC LAMINATE FILLER PANEL		
2.08	4" SOLID SURFACE BACK AND SIDESPLASH		
2.09	1'-0" PLASTIC LAMINATE SUPPORT BRACKET		
2.10	SLIDING GLASS RECEPTION COUNTER		



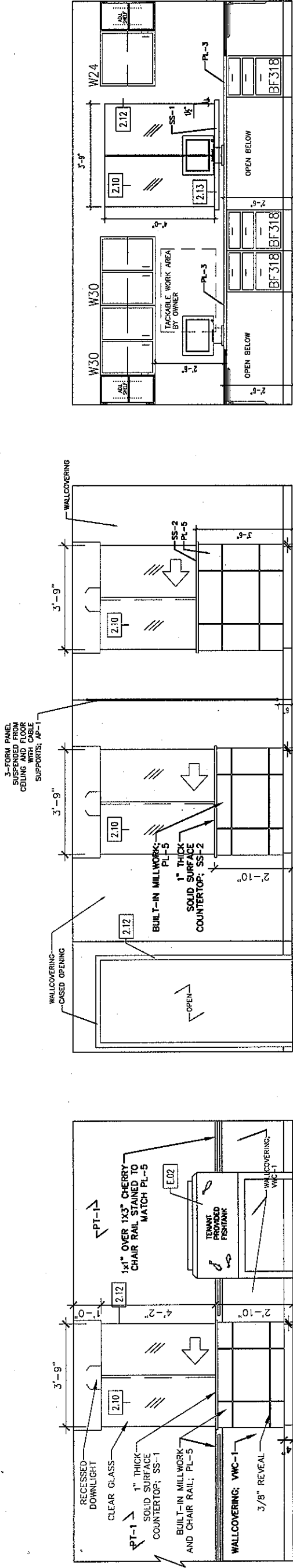


Sheet
Interior Room Elevations

Project
MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical Associates
 Suite 420

Date
November 20, 2007
 Project No.
F07-5256.00

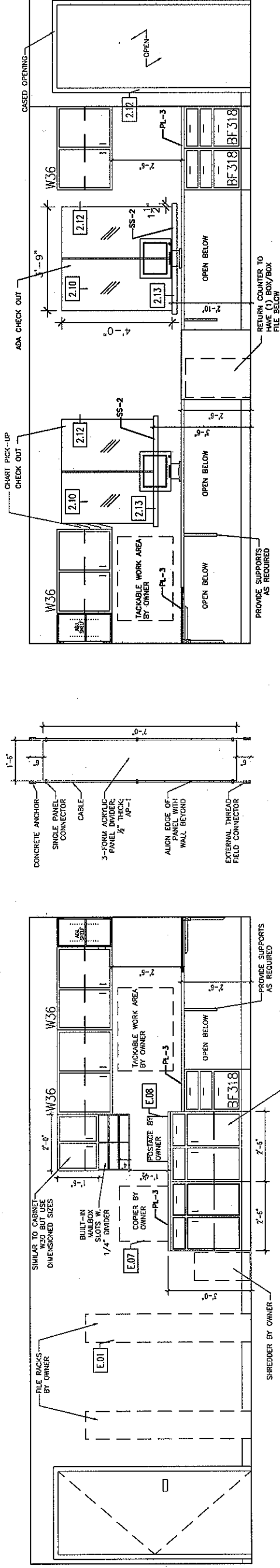
Sheet No.
A8.2



1 CHECK-IN - PATIENT SIDE
 SCALE: 1/4" = 1'-0"

2 CHECK-OUT - PATIENT SIDE
 SCALE: 1/4" = 1'-0"

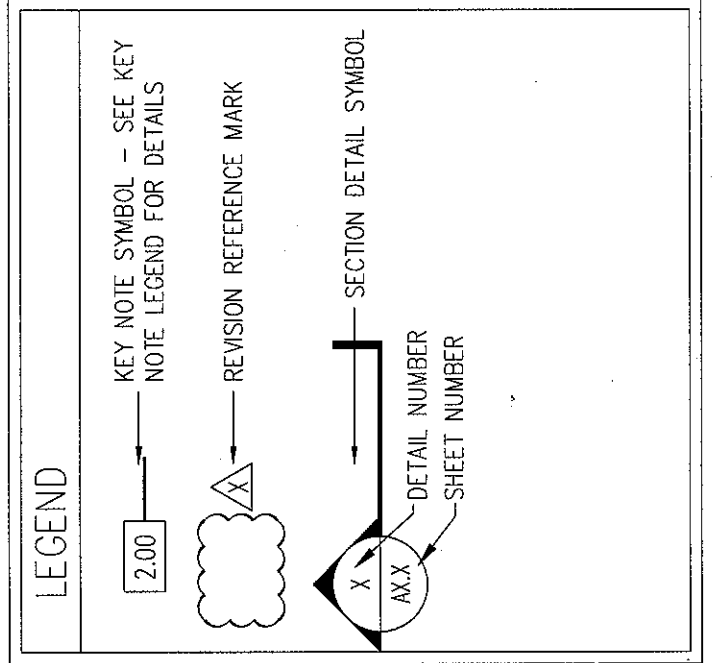
3 BUSINESS OFFICE - EAST WALL
 SCALE: 1/4" = 1'-0"



4 BUSINESS OFFICE - NORTH WALL
 SCALE: 1/4" = 1'-0"

5 ACRYLIC DIVIDER PANEL
 SCALE: 1/4" = 1'-0"

6 BUSINESS OFFICE - SOUTH WALL
 SCALE: 1/4" = 1'-0"

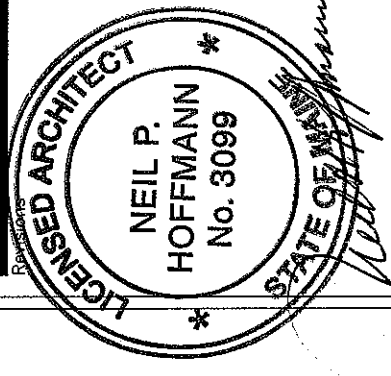


KEY NOTE LEGEND	
2.01	PLASTIC LAMINATE COUNTERTOP
2.02	3-1/2" PLASTIC LAMINATE APRON
2.03	3-1/2" PLASTIC LAMINATE VALANCE
2.04	4" PLASTIC LAMINATE BACKSPLASH
2.05	4" PLASTIC LAMINATE SIDESPLASH
2.06	PLASTIC LAMINATE END PANEL
2.07	PLASTIC LAMINATE FILLER PANEL
2.08	1'-4" PLASTIC LAMINATE SUPPORT BRACKET
2.09	1'-0" PLASTIC LAMINATE SUPPORT BRACKET
2.10	SLIDING GLASS RECEPTION COUNTER

2.12	GYPSUM BOARD CASED OPENING
2.13	3' X 2' PLASTIC LAMINATE WRITING SURFACE
2.14	GROMMET HOLE IN COUNTERTOP

GENERAL NOTES

1. PLASTIC LAMINATE CABINETS SHALL BE PL-4 VERTICAL SURFACES, U.N.O.
2. SOLID SURFACE COUNTERTOPS, BACK AND SIDE SPLASHES SHALL BE SS-1, U.N.O.
3. PROVIDE END SPLASH AT WALL ON COUNTERTOPS WITH BACKSPLASHES AND SINKS
4. DIMENSIONS ARE FACE TO FACE (NOMINAL) OF FINISH MATERIAL, UNLESS NOTED OTHERWISE
5. FOR DRAWING CLARITY, FREESTANDING FURNITURE NOT INDICATED.



Sheet
Standard Casework Elevations

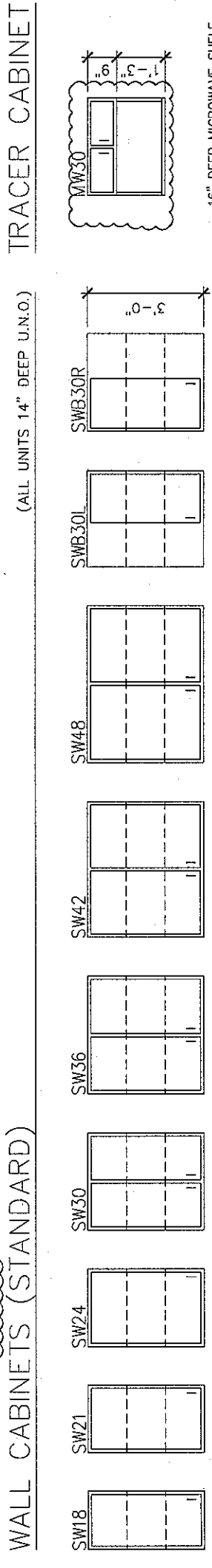
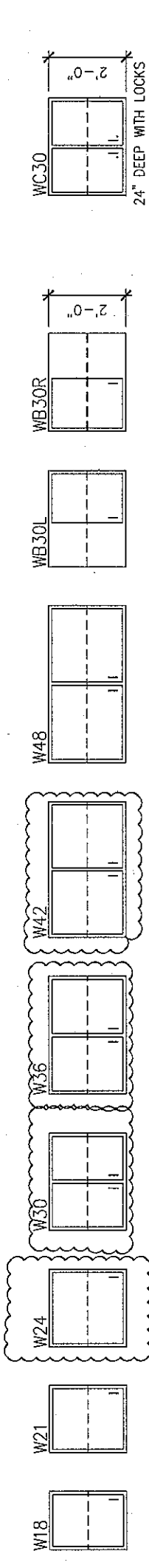
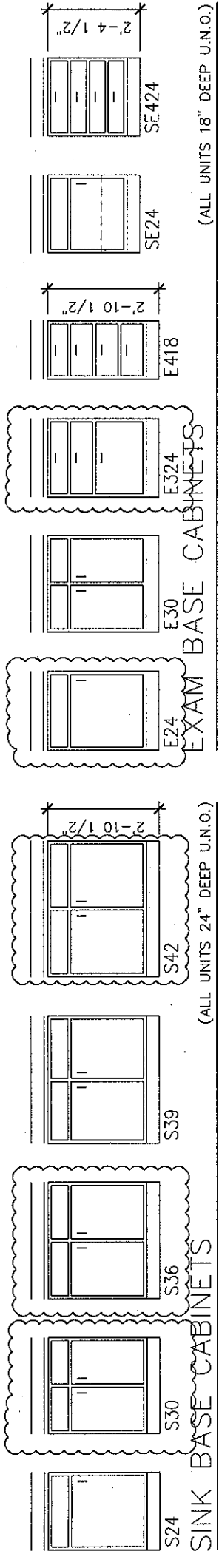
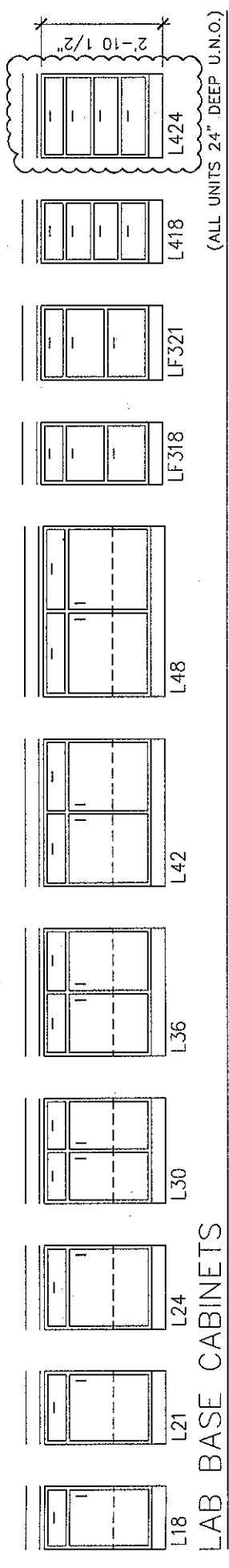
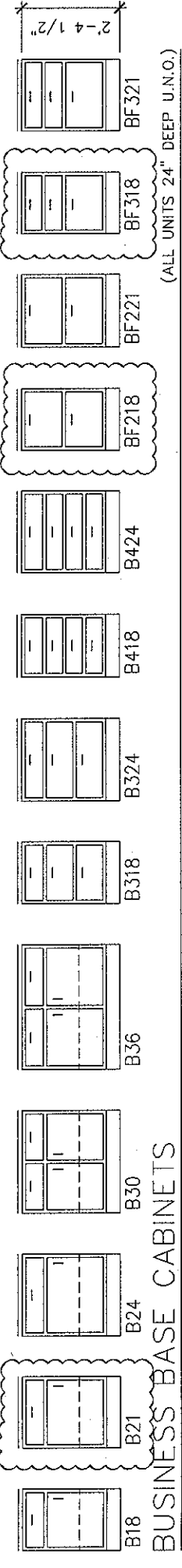
Project
MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical Associates

Suite 420
 Date
November 20, 2007
 Project No.
F07-5256.00
 Sheet No.

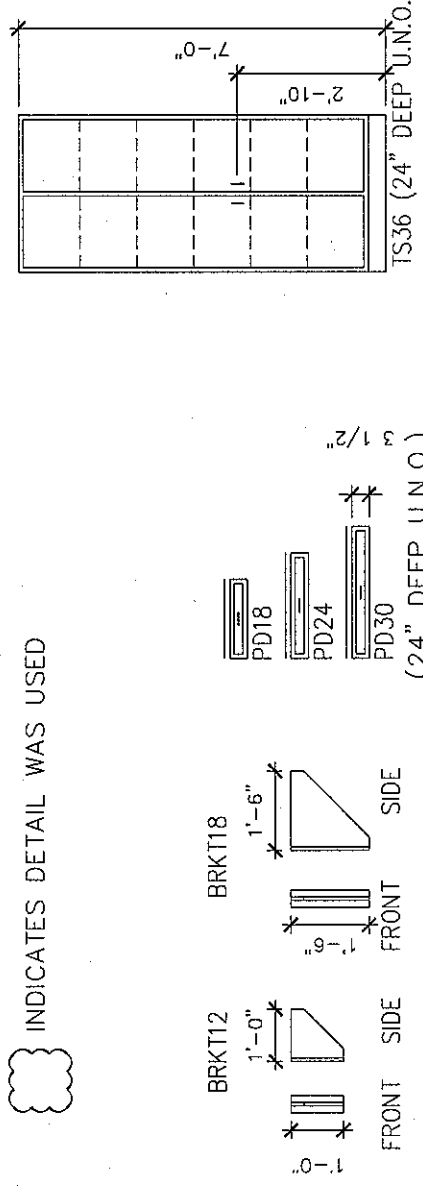
A8.3

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
- SE24— SPECIAL EXAM BASE CABINET
 WIDTH IN INCHES
- SE424— SPECIAL EXAM BASE CABINET
 WIDTH IN INCHES
 NO. OF DRAWERS
- W18— WALL CABINET
 WIDTH IN INCHES
- SW18— SPECIAL WALL CABINET
 WIDTH IN INCHES
- PD24— PENCIL DRAWER
 WIDTH IN INCHES
- TS36— TALL STORAGE CABINET
- WB30L— LEFT BLIND CORNER WALL CABINET
- WB30R— RIGHT BLIND CORNER WALL CABINET
- WC30— TRACER COMPUTER WALL CABINET
- MW30— MICROWAVE WALL CABINET

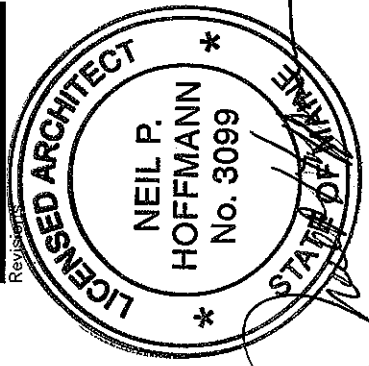
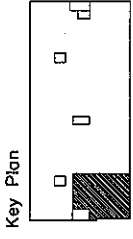


INDICATES DETAIL WAS USED



- GENERAL NOTES**
- ALL CABINET AND COUNTERTOP MATERIAL IS 3/4" THICK UNLESS NOTED OTHERWISE
 - THE BOTTOM OF ALL DRAWERS IS 5/16" (8MM) ABOVE EITHER THE CABINET BOTTOM OR THE HORIZONTAL BRACES.
 - 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.
 - ALL EXPOSED COUNTERTOP CORNERS ARE TO BE RADIUS

SUPPORT BRACKETS
PENCIL DRAWERS
TALL STORAGE



Sheet
Casework
 Sections

Project

MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical
 Associates

Suite 420

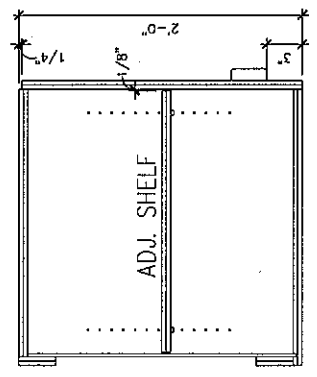
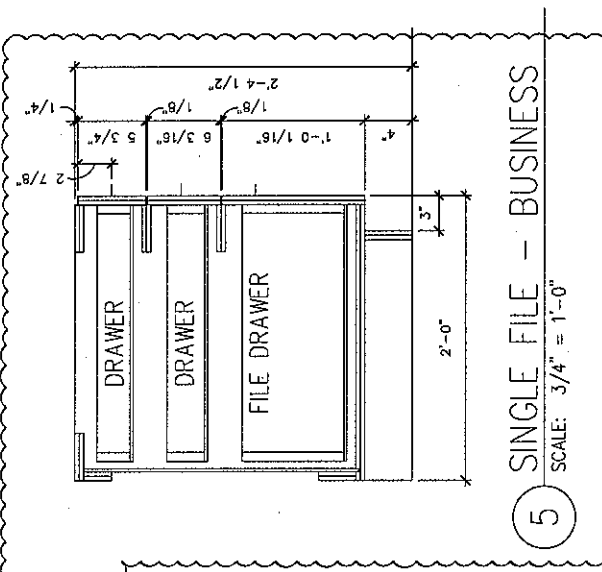
Date

November 20, 2007

Project No.
F07-5256.00

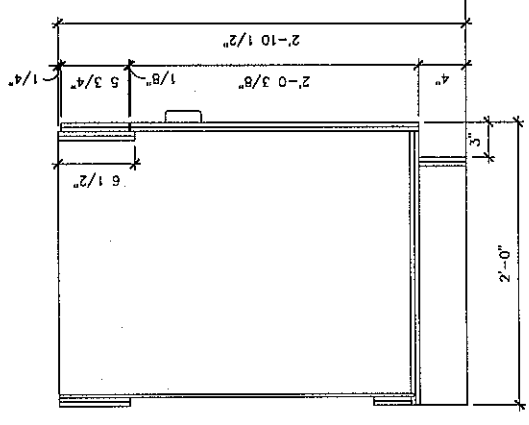
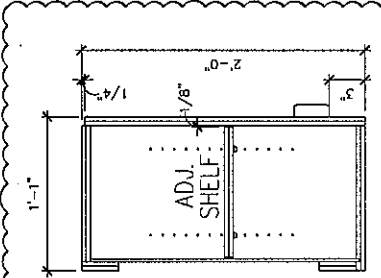
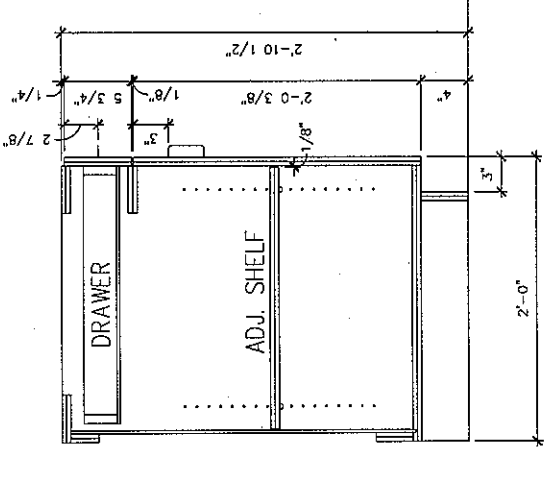
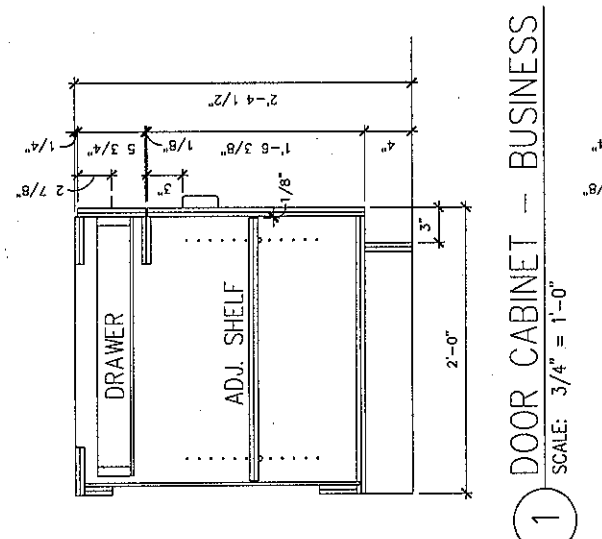
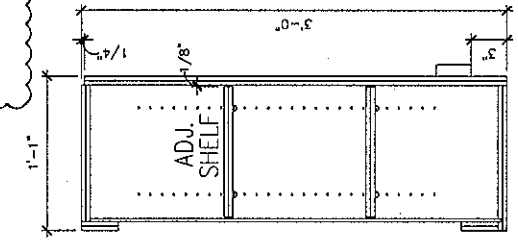
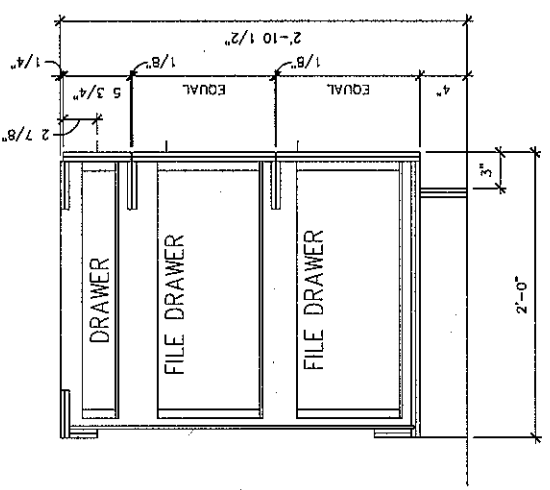
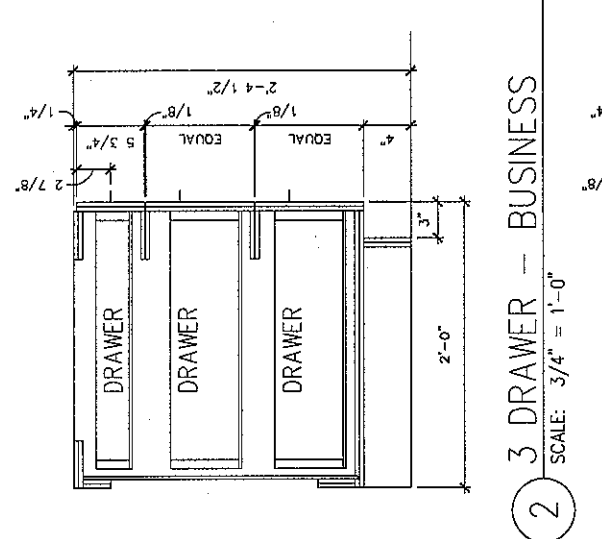
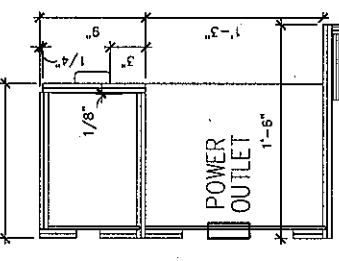
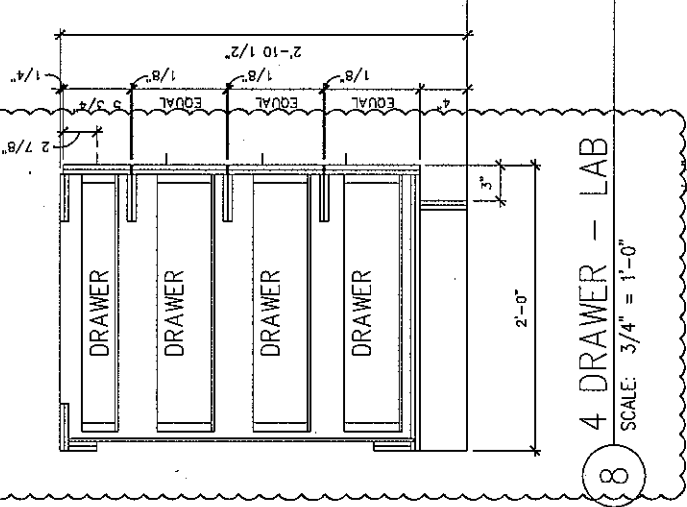
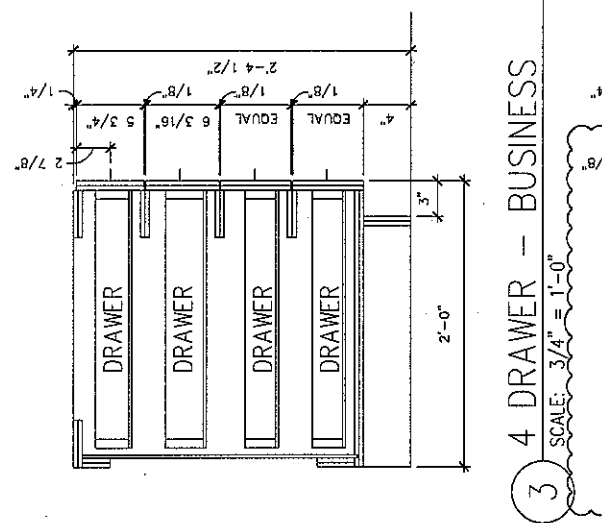
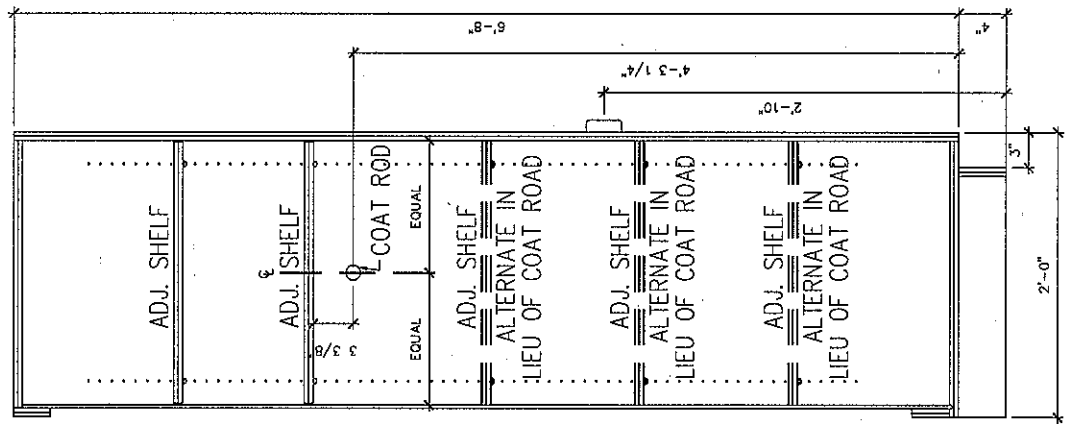
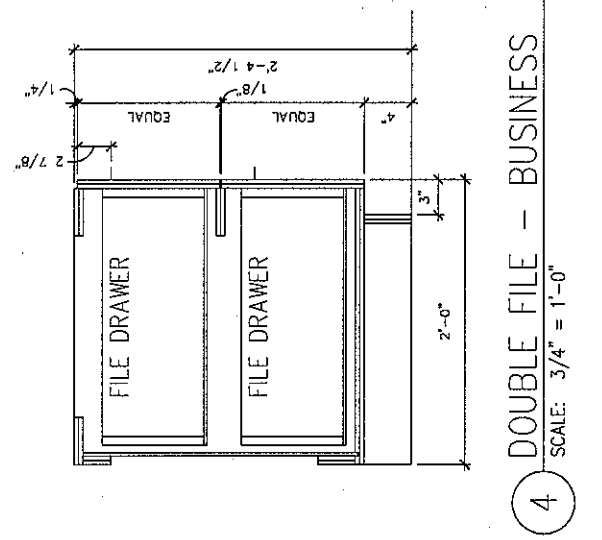
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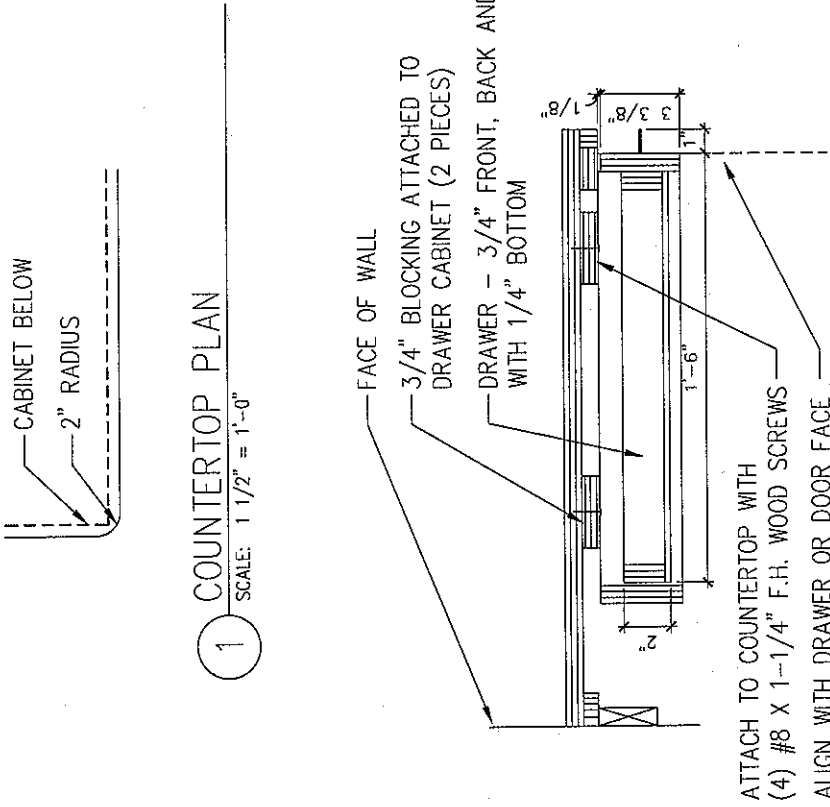


INDICATES DETAIL WAS USED

- GENERAL NOTES**
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 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 COUNTER TOP COMPONENTS ARE 3/4" THICK UNLESS NOTED OTHERWISE.
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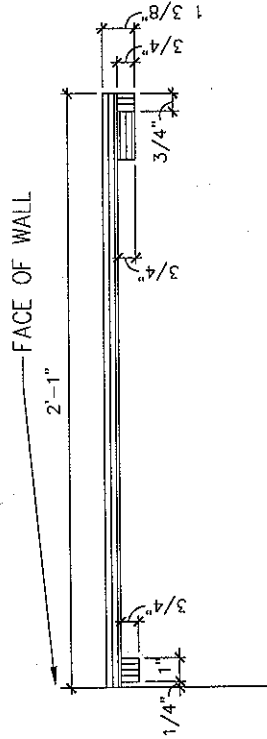


1 COUNTERTOP PLAN
 SCALE: 1 1/2" = 1'-0"

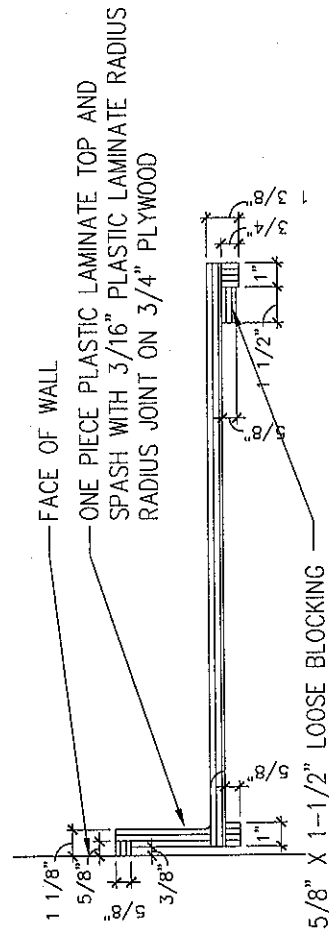


ATTACH TO COUNTERTOP WITH (4) #8 X 1-1/4" F.H. WOOD SCREWS
 ALIGN WITH DRAWER OR DOOR FACE

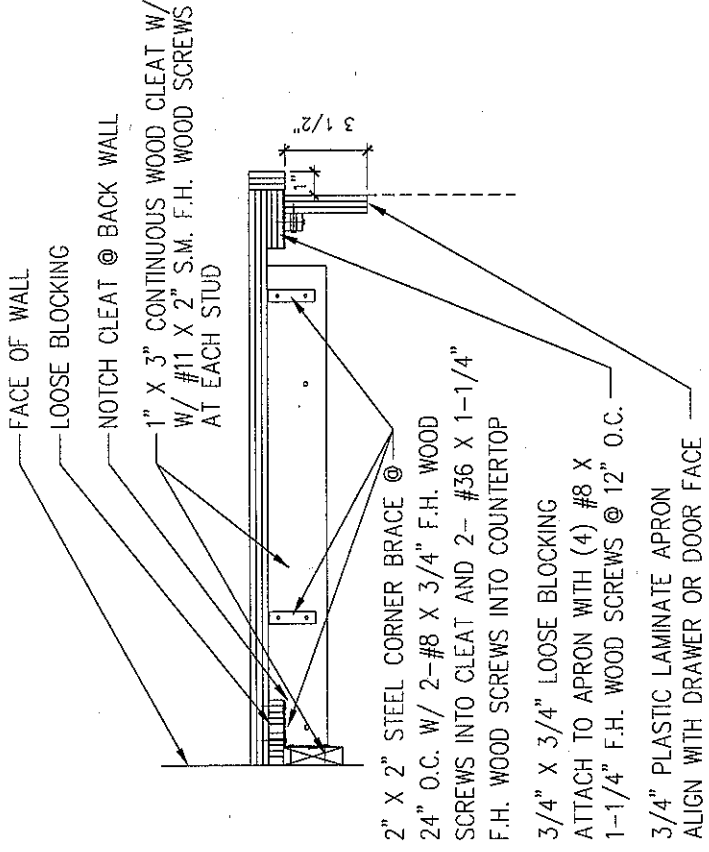
2 PENCIL DRAWER
 SCALE: 1 1/2" = 1'-0"



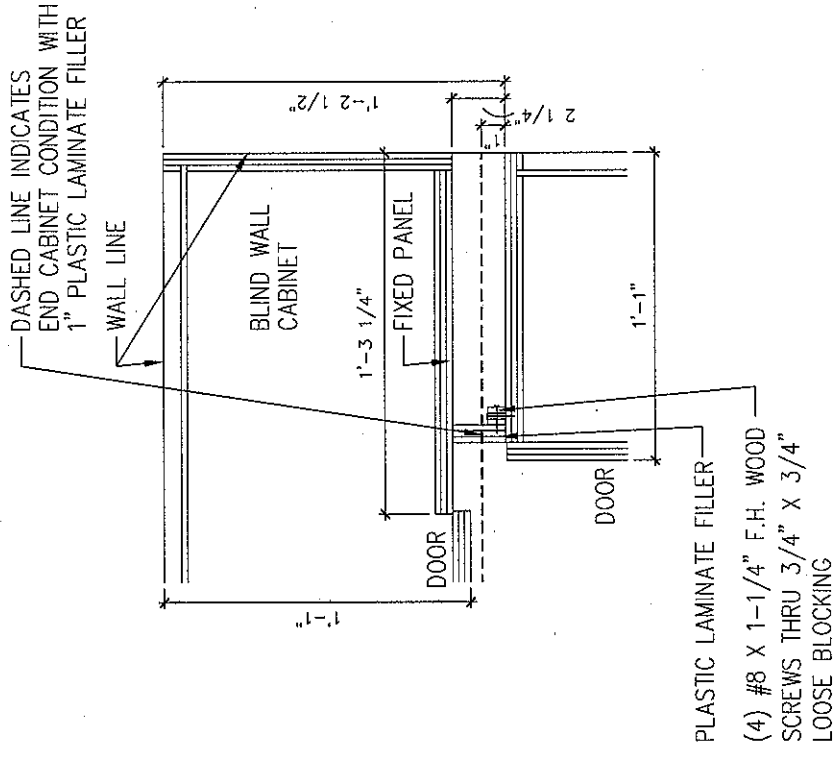
3 TYPICAL BUSINESS COUNTERTOP
 SCALE: 1 1/2" = 1'-0"



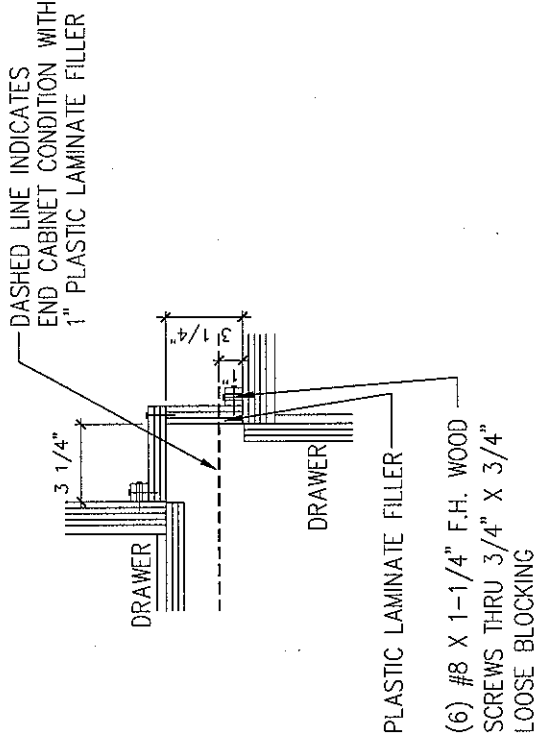
4 TYPICAL SINK COUNTERTOP
 SCALE: 1 1/2" = 1'-0"



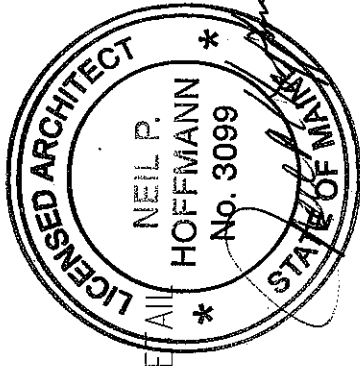
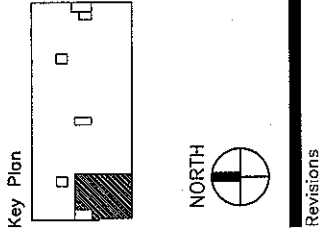
5 WALL BRACE / APRON
 SCALE: 1 1/2" = 1'-0"



6 TYPICAL UPPER CABINET CORNER DETAIL
 SCALE: 1 1/2" = 1'-0"



7 TYPICAL LOWER CABINET CORNER DETAIL
 SCALE: 1 1/2" = 1'-0"



Sheet
Casework and Countertop Details

Project
**MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical Associates**

Suite 420

Date
November 20, 2007

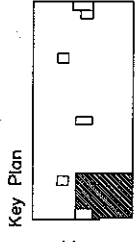
Project No.
F07-5256.00

Sheet No.

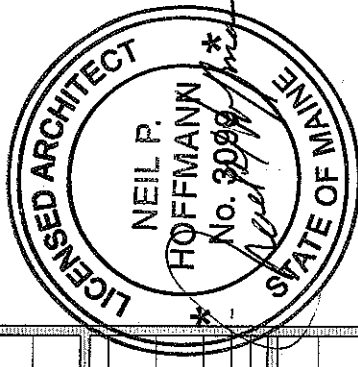
A8.5

GENERAL NOTES

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Revisions



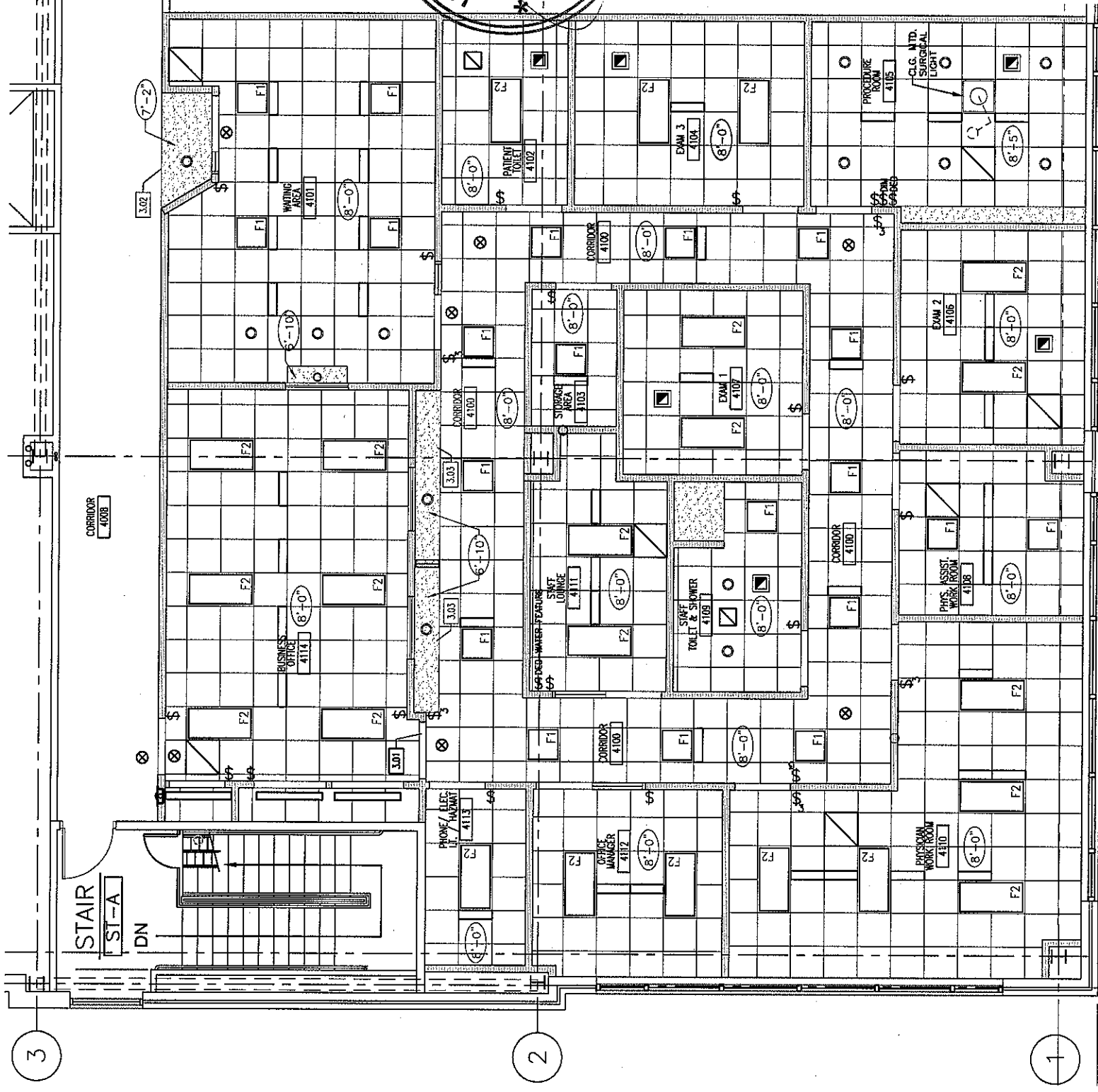
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**Reflected
Ceiling Plan**

Project
**MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates
Suite 420**

Date
November 20, 2007

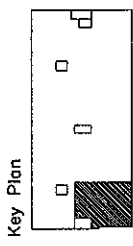
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F07-5256.00

Sheet No.
A9.1

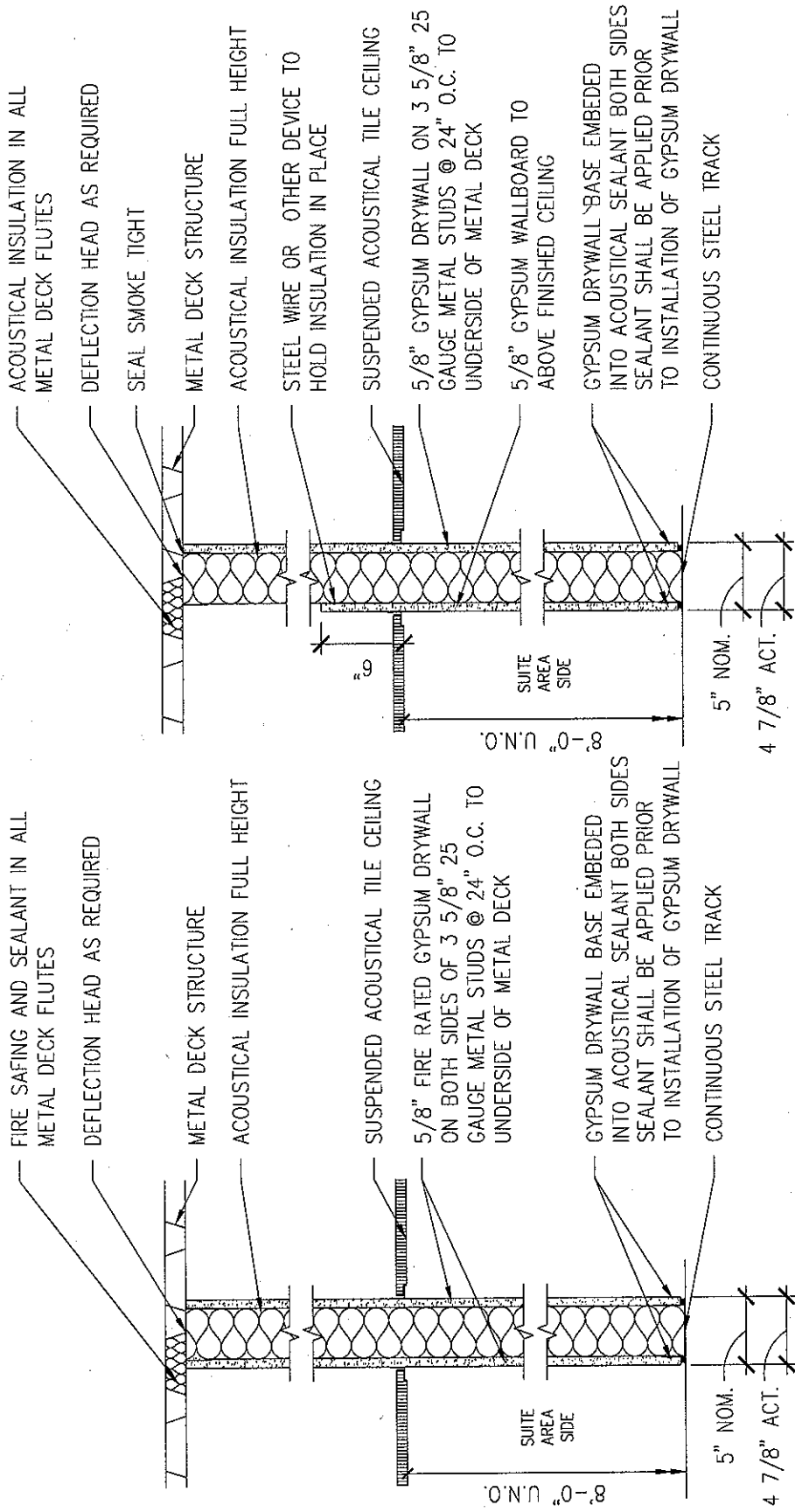
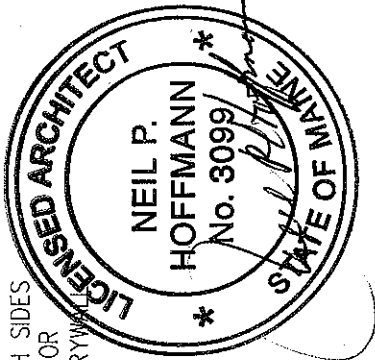


FLOOR PLAN
SCALE: 1/8" = 1'-0"

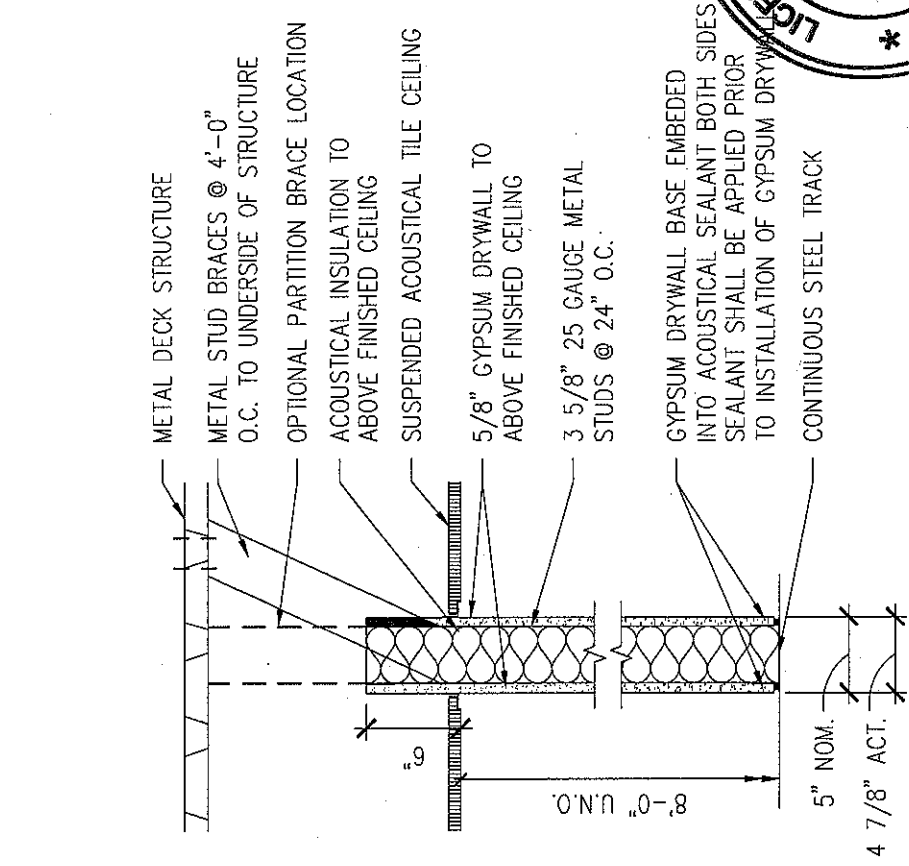
<p>KEY NOTE LEGEND</p> <p>3.01 7'-2" CASSED OPENING</p> <p>3.02 7'-2" GYPSUM BOARD SOFFIT</p> <p>3.03 6'-10" GYPSUM BOARD SOFFIT</p>		<p>LEGEND</p> <p>ROOM NAME / NUMBER xxx</p> <p>REVISION REFERENCE MARK</p> <p>CEILING HEIGHT AFF 8'-0"</p> <p>ACOUSTICAL TILE CEILING</p> <p>SUSPENDED GYPSUM BOARD CEILING OR SOFFIT</p>	
<p>LEGEND</p> <p>2' x 4' FLUORESCENT LIGHT WITH PARABOLIC LENS</p> <p>2' x 2' FLUORESCENT LIGHT WITH PARABOLIC LENS</p> <p>INCANDESCENT CAN LIGHT</p> <p>EXIT SIGNS - SEE ELEC. DWGS.</p> <p>EXHAUST FAN</p> <p>FLUORESCENT LIGHT STRIP</p> <p>VARIOUS HVAC DIFFUSERS - SEE MECH. DWGS.</p>		<p>LEGEND</p> <p>SINGLE POLE SWITCH</p> <p>DIMMER SWITCH</p> <p>DEDICATED SWITCH - SEE SHEET A11.2 FOR MORE INFO.</p> <p>THREE WAY SINGLE POLE SWITCH</p>	



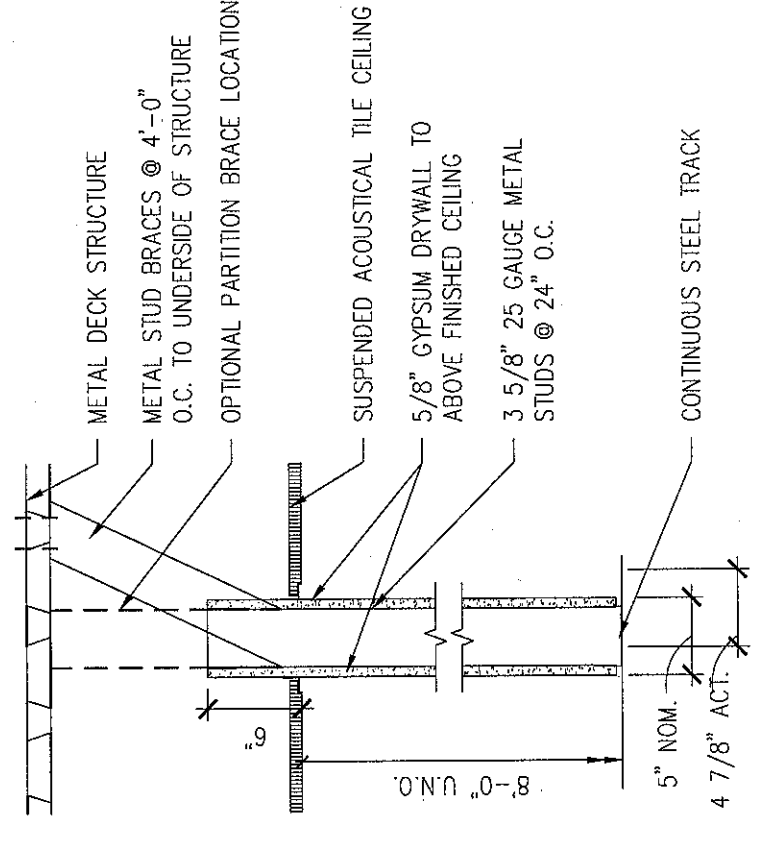
Revisions



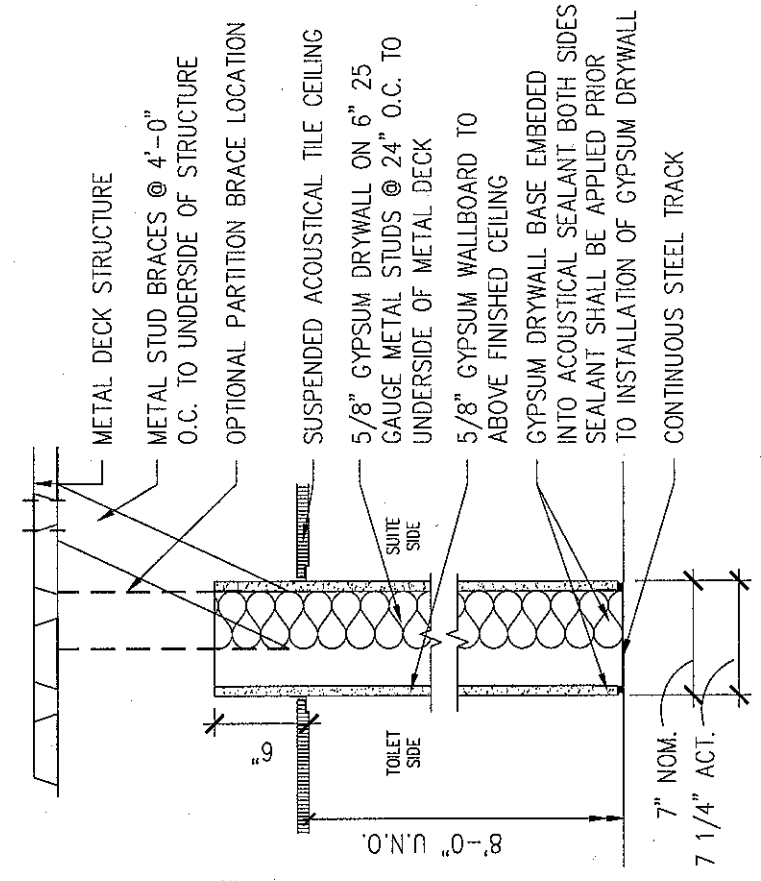
(B) ONE HOUR RATED PARTITION
 SCALE: 1" = 1'-0"
 MUST MEET UL NO. U465 OR EQUAL



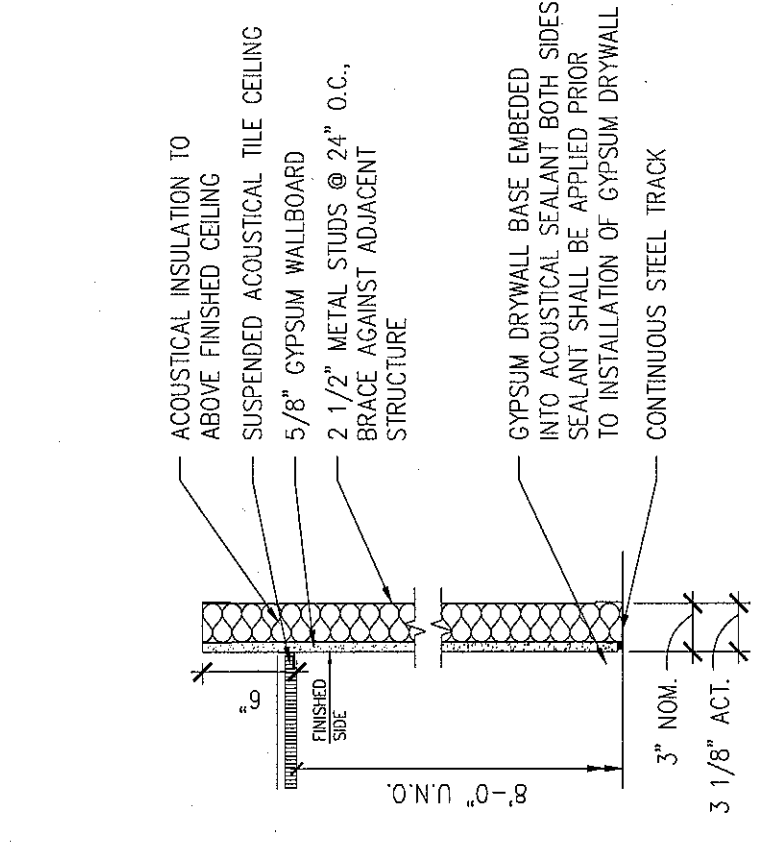
(F) CEILING HEIGHT INSULATED PARTITION
 SCALE: 1" = 1'-0"



(C) CEILING HEIGHT PARTITION
 SCALE: 1" = 1'-0"



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



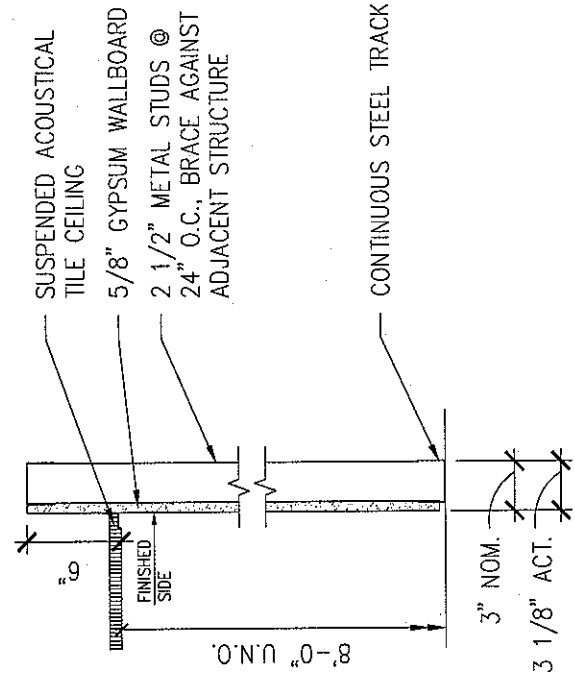
(J) INSULATED FURRING PARTITION
 SCALE: 1" = 1'-0"

Sheet
Partition Types and Details

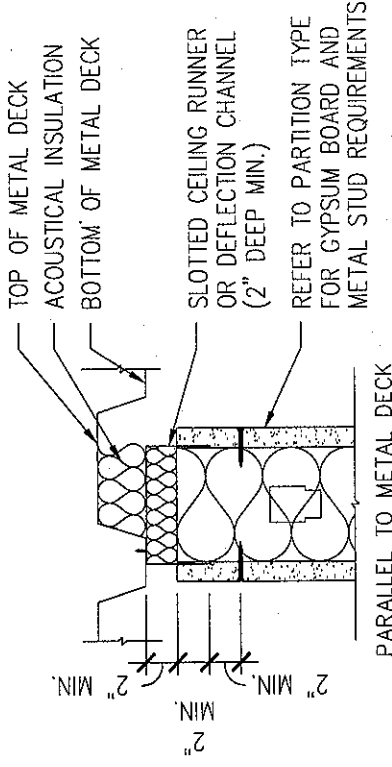
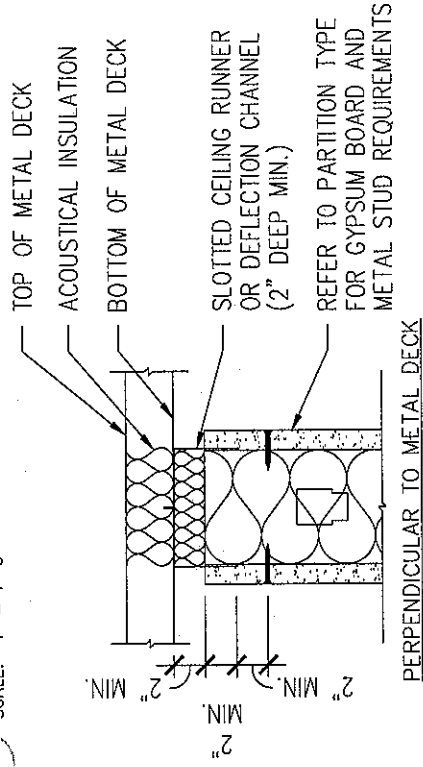
Project
MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical Associates
 Suite 420

Date
November 20, 2007
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F07-5256.00

Sheet No.
A10.1



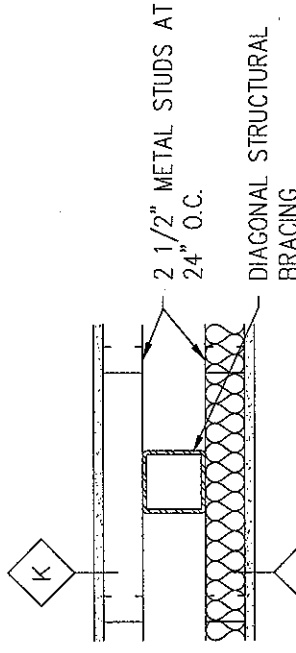
K FURRING PARTITION
SCALE: 1" = 1'-0"



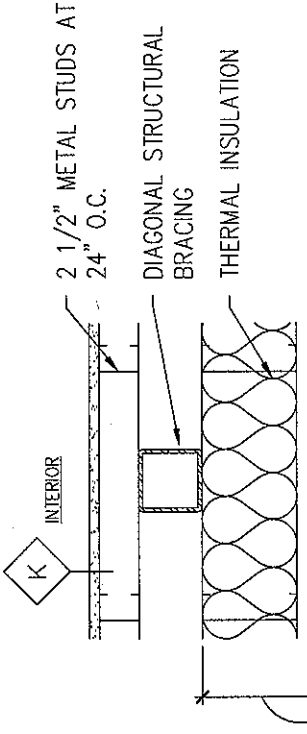
4 NON-RATED DEFLECTION HEAD
SCALE: 1" = 1'-0"

DETAIL NOT USED

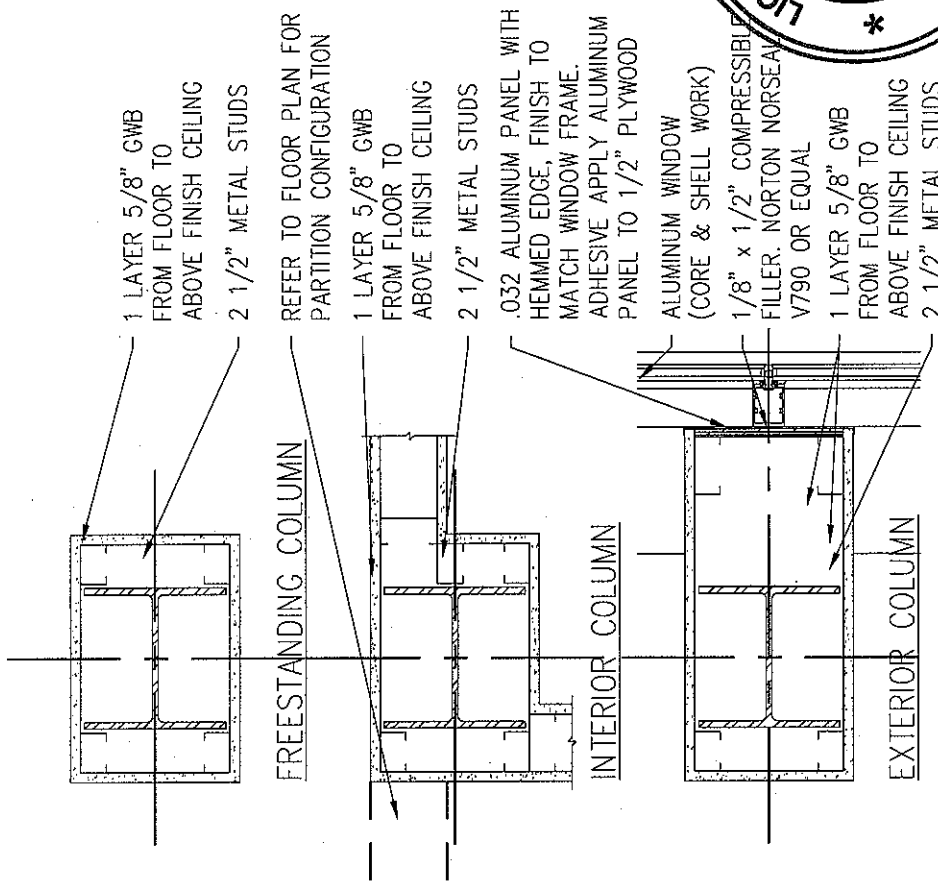
L LEAD LINED INSULATED PARTITION
SCALE: 1" = 1'-0"



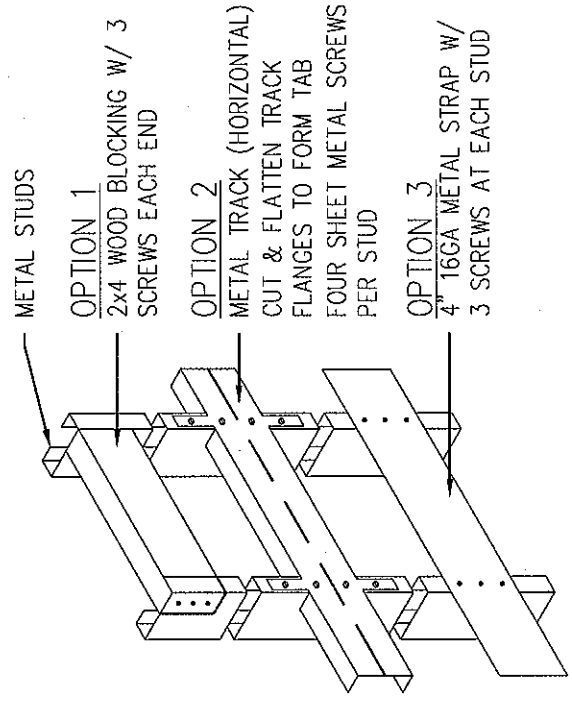
INTERIOR WALL FRAME LOCATIONS



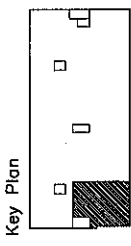
5 FINISH AT STRUCTURE BRACE FRAME
SCALE: 1" = 1'-0"



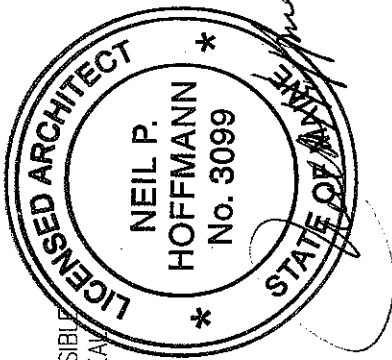
1 COLUMN ENCLOSURE
SCALE: 1" = 1'-0"



6 TYPICAL BLOCKING OPTIONS
SCALE: 1" = 1'-0"



Revisions



Sheet
Partition Types and Details

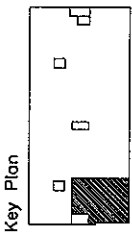
Project
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Associates**

Suite 420

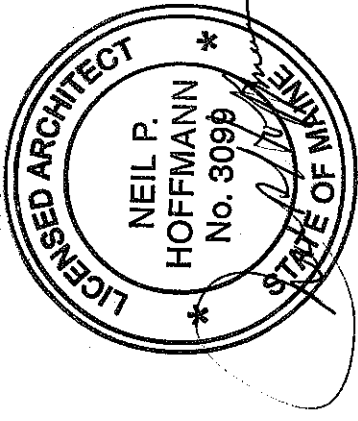
Date
November 20, 2007

Project No.
F07-5256.00

Sheet No.
A10.2



Revisions



Sheet

Interior Details

Project

MERCY HOSPITAL
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Date

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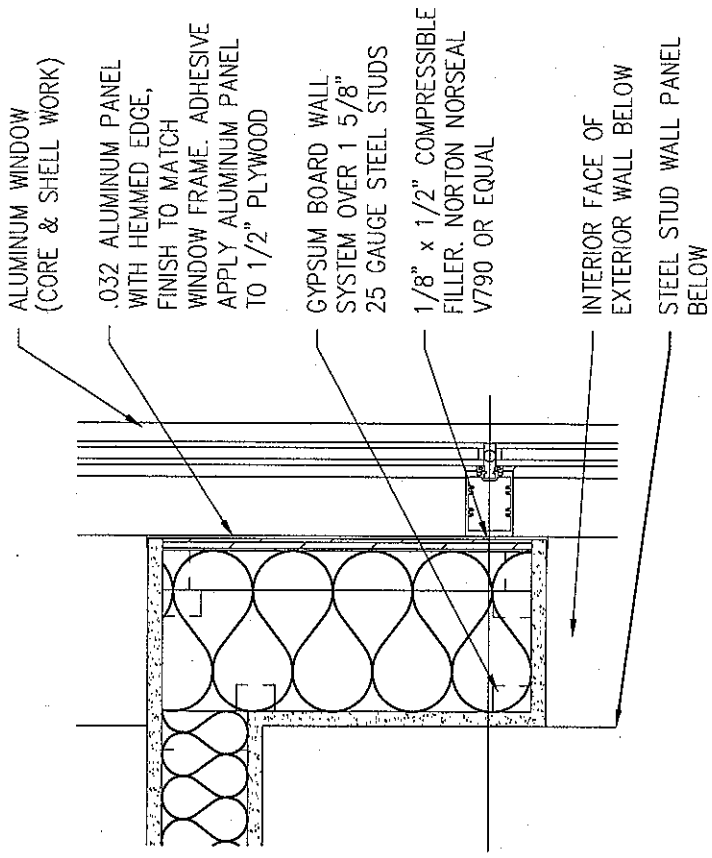
Project No.

F07-5256.00

Sheet No.

A10.3

DETAIL NOT USED

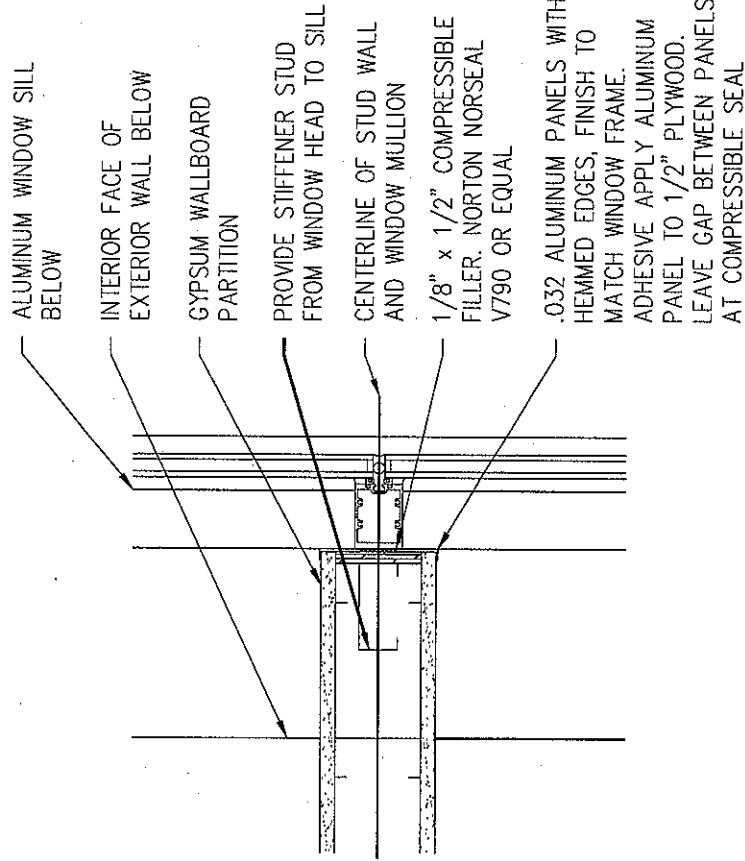
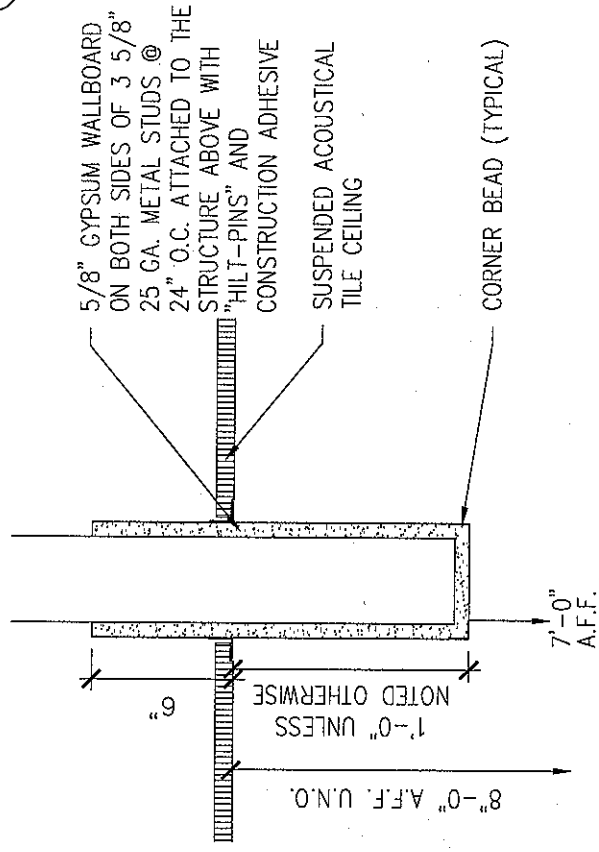


1 PARTITION TO MULLION

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

2 PARTITION AT GLAZING

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

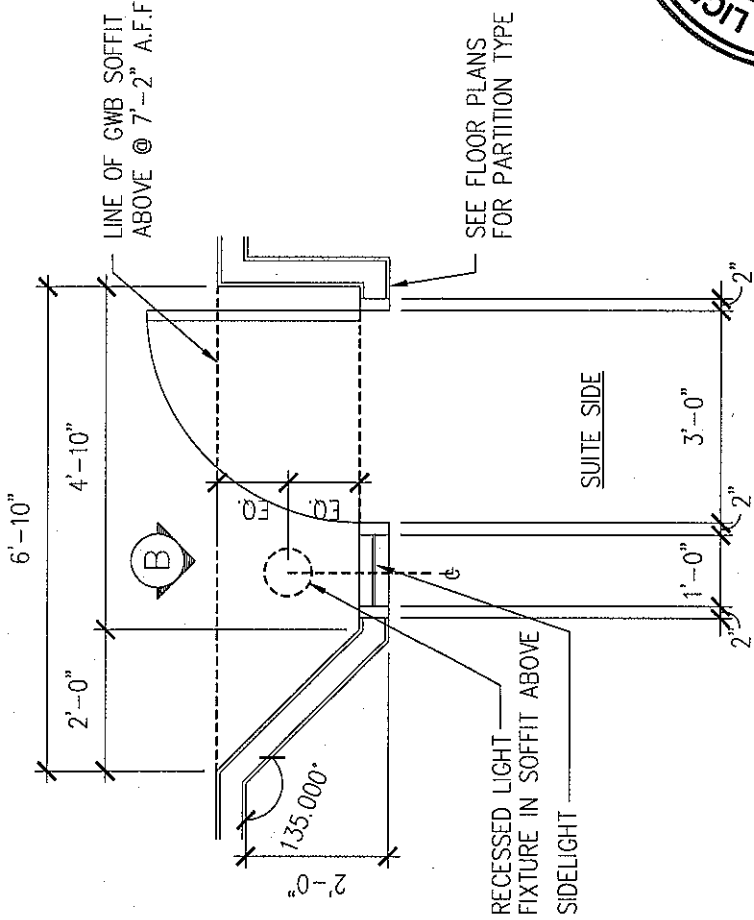
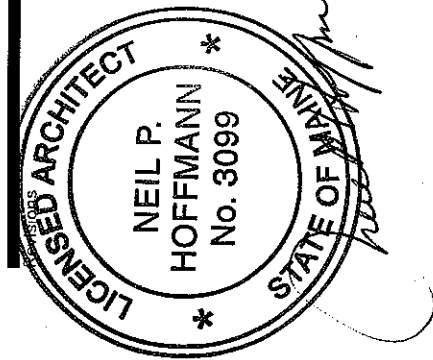
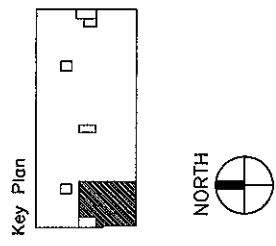


3 PARTITION AT MULLION

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

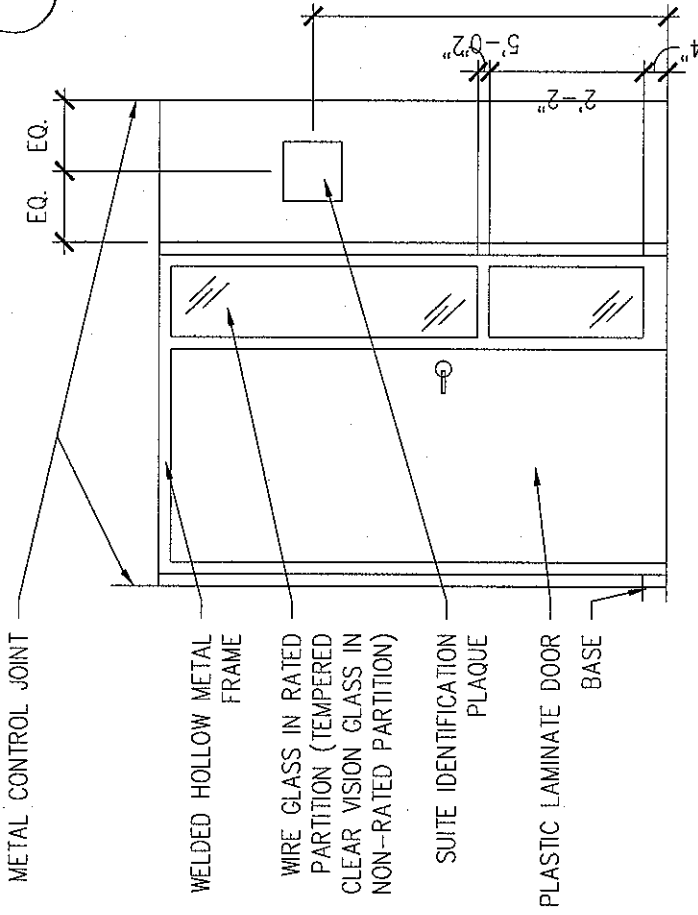
4 DROPPED HEADER

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

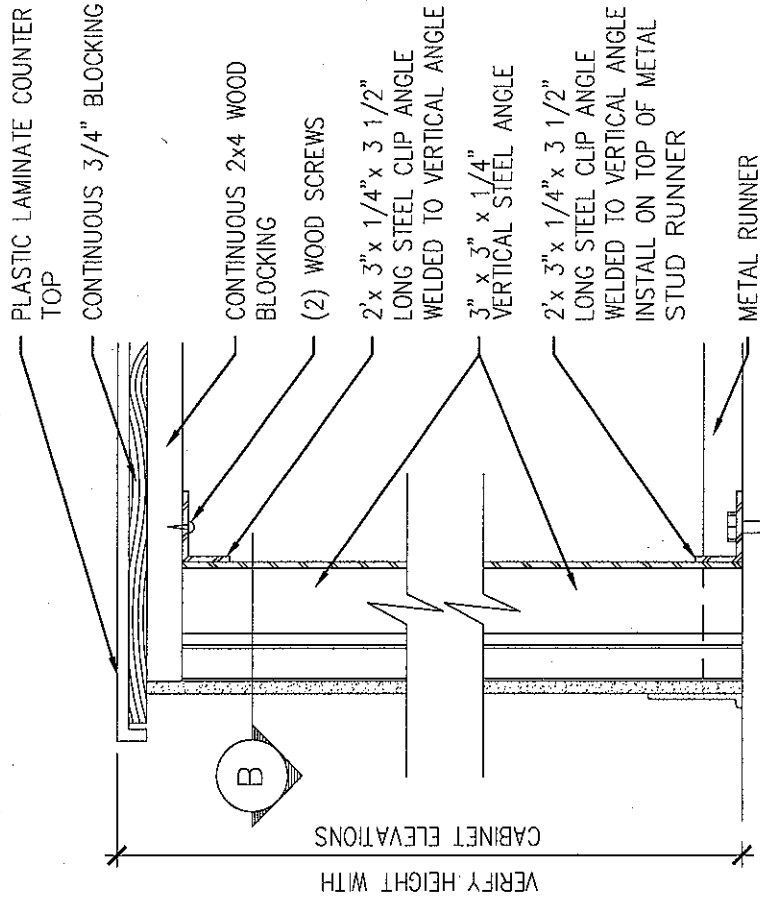


PUBLIC CORRIDOR

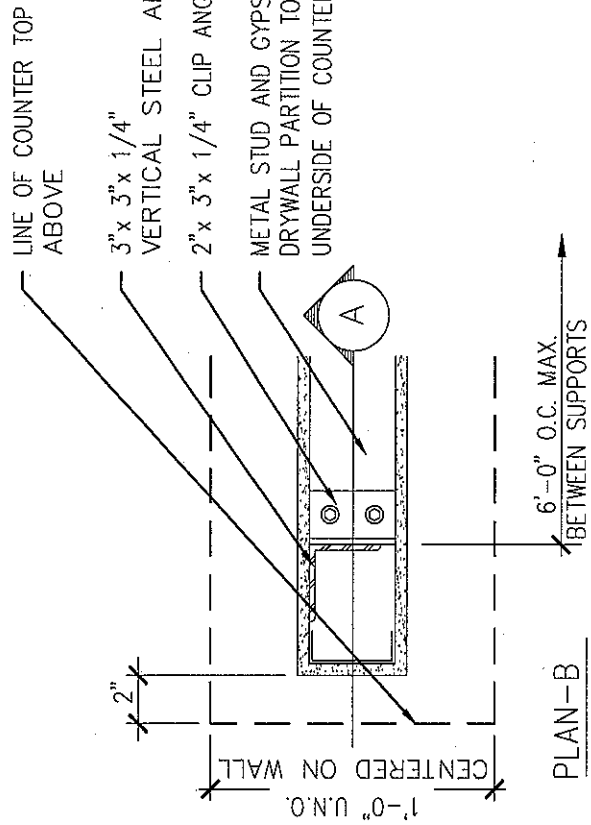
PLAN-A



ELEVATION-B



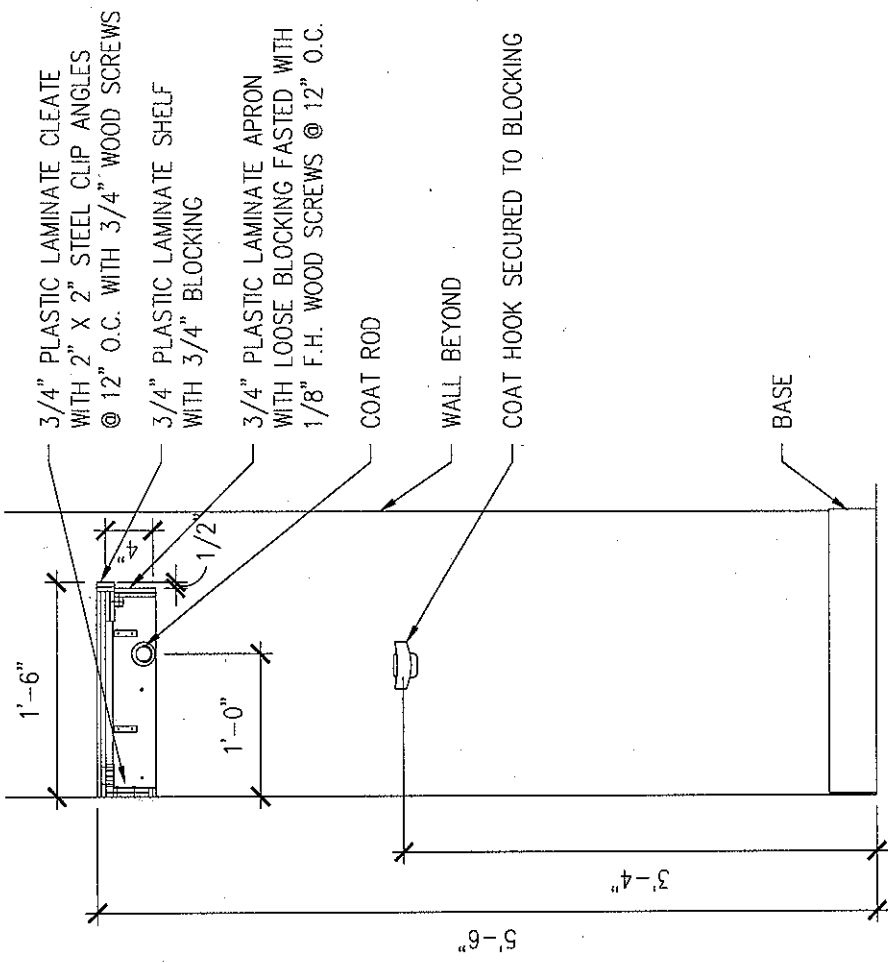
SECTION-A



PLAN-B

DETAIL NOT USED

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



2 COAT RACK
 SCALE: 3/4" = 1'-0"

3 WALL BRACE
 SCALE: 1 1/2" = 1'-0"

4 RECESSED SUITE ENTRY
 SCALE: 3/8" = 1'-0"

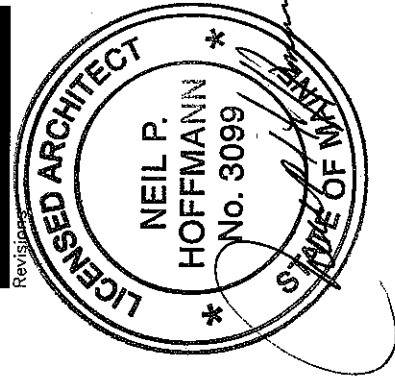
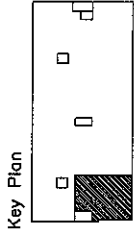
Sheet Interior Details

Project
MERCY HOSPITAL
 Medical Office Bldg.
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Date
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A10.4



Sheet
Interior Details

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MERCY HOSPITAL
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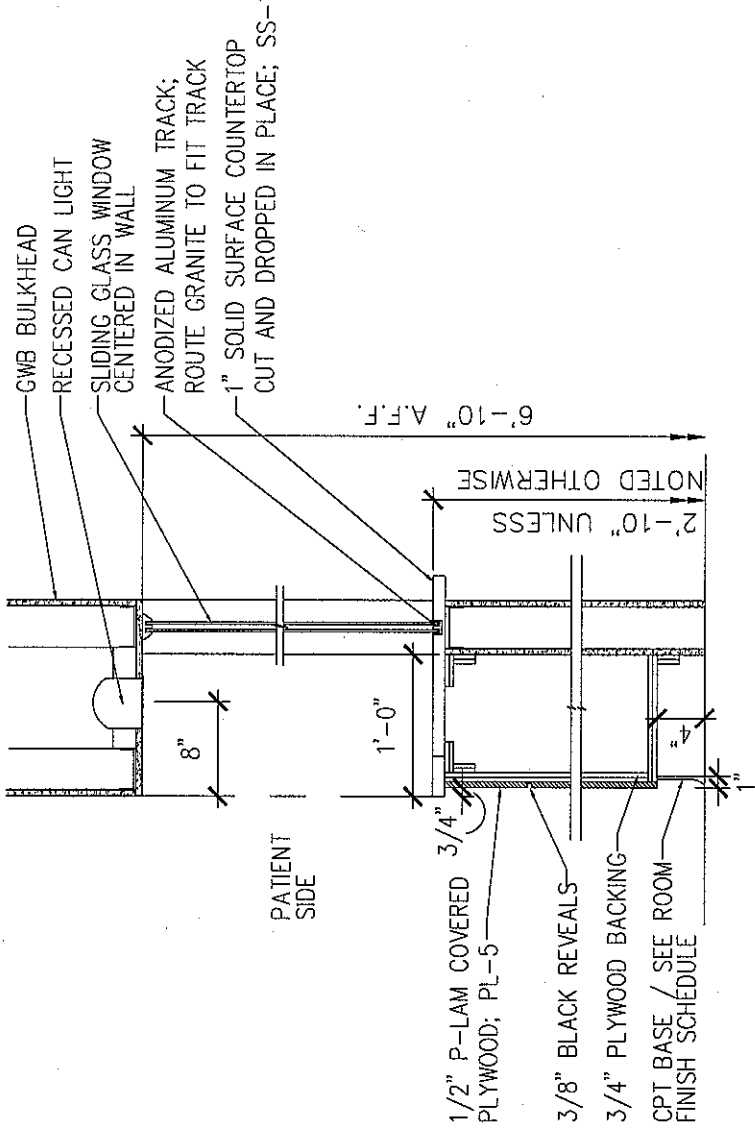
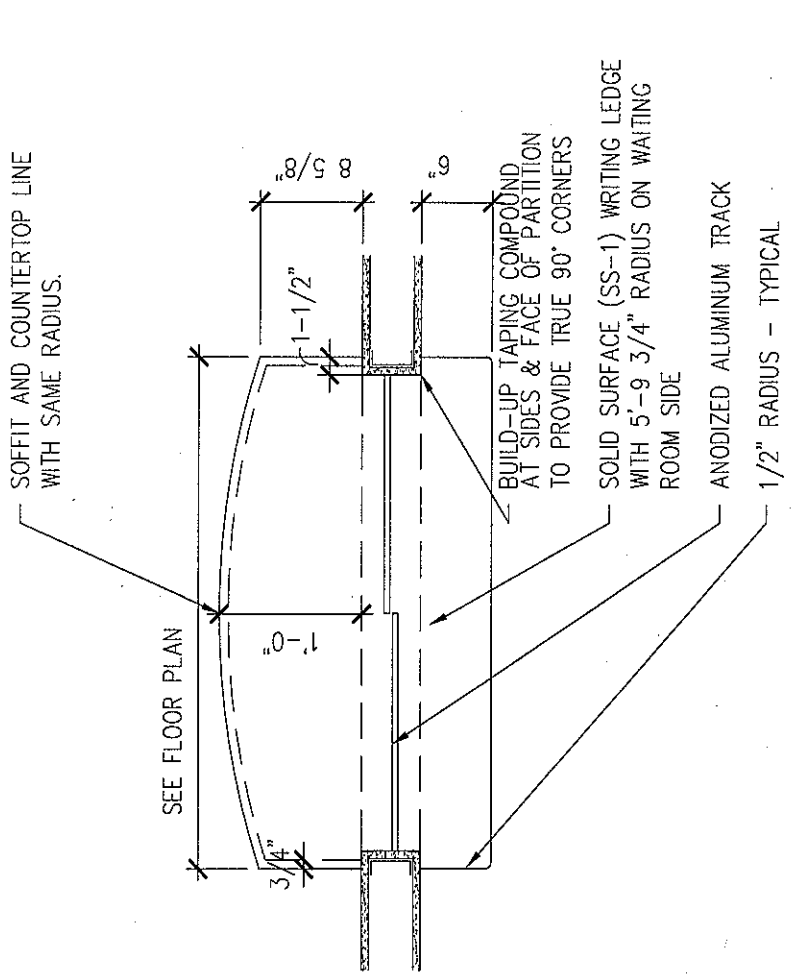
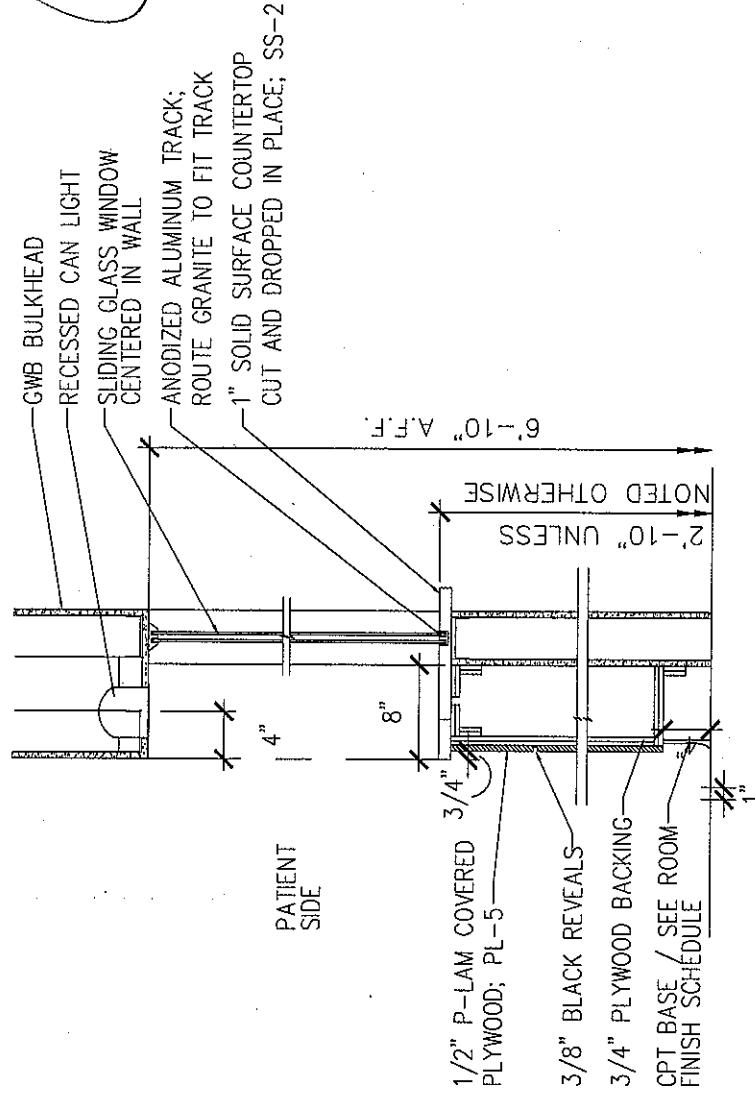
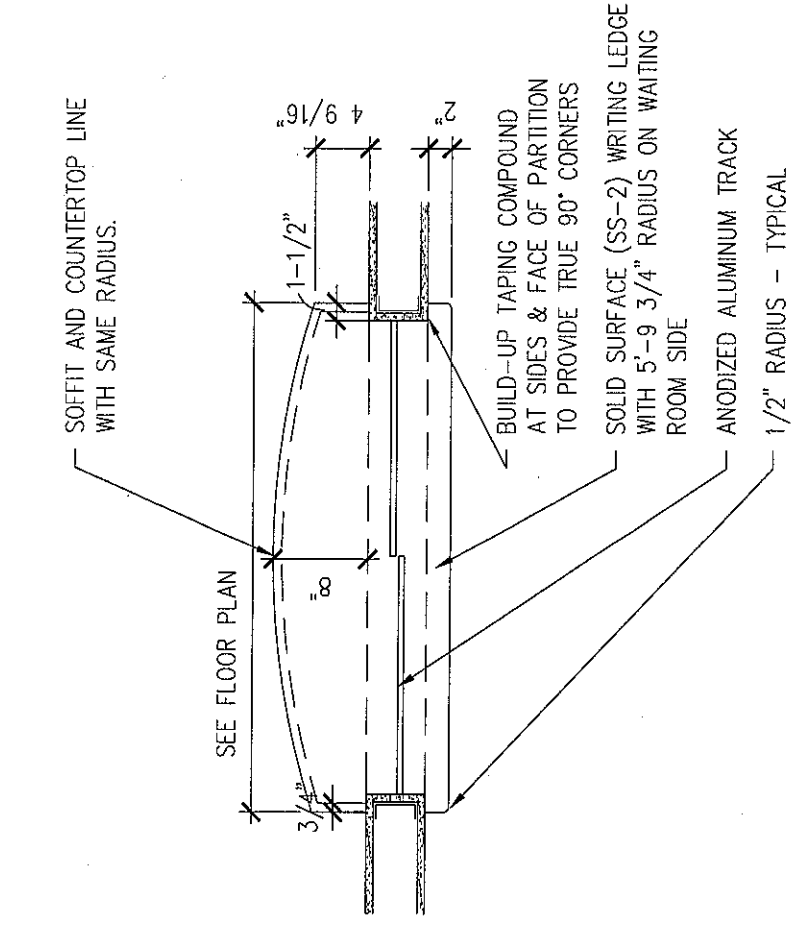
Suite 420

Date
November 20, 2007

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F07-5256.00

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A10.5



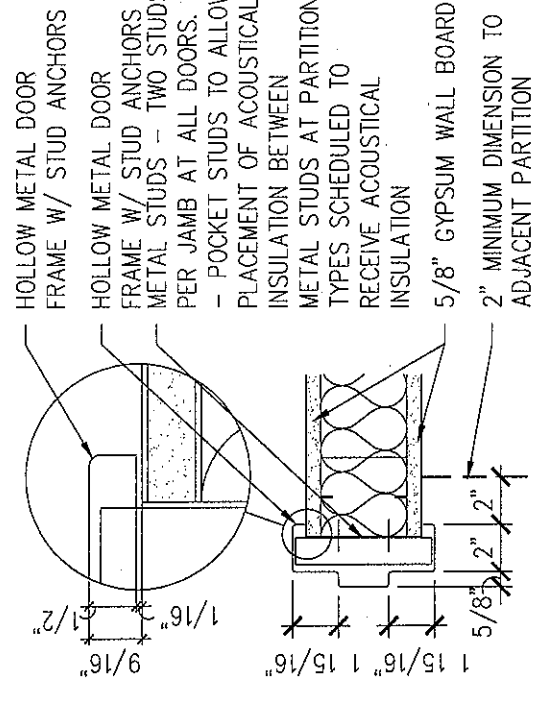
2 CHECK-OUT COUNTER
SCALE: 3/4" = 1'-0"

1 CHECK-IN COUNTER
SCALE: 3/4" = 1'-0"

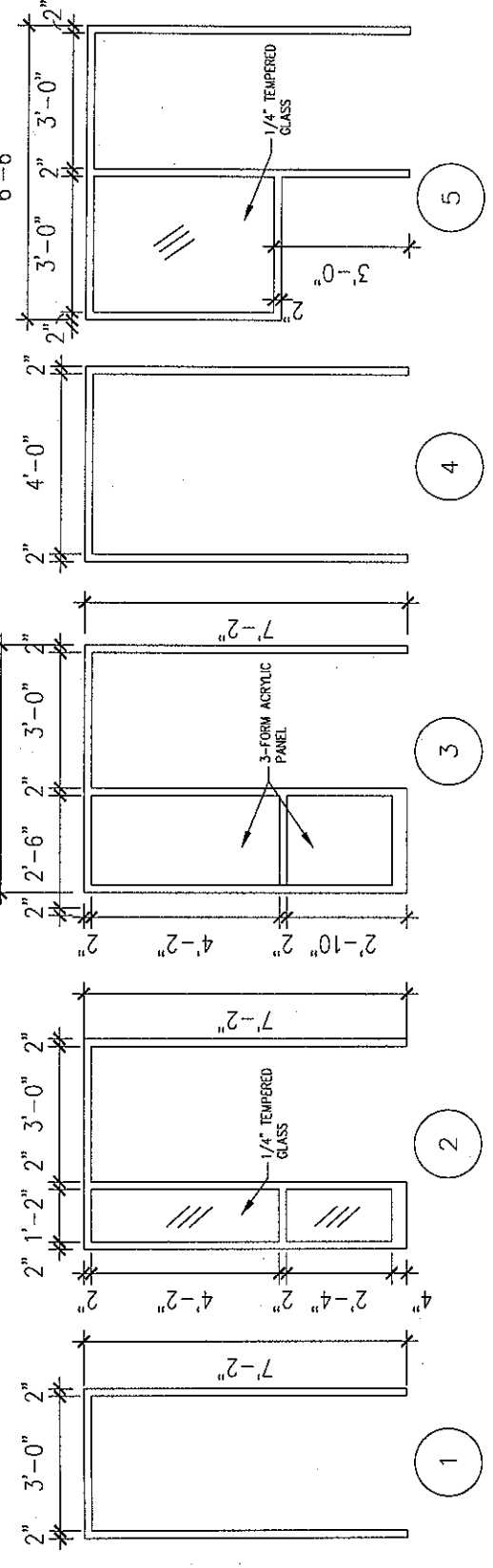
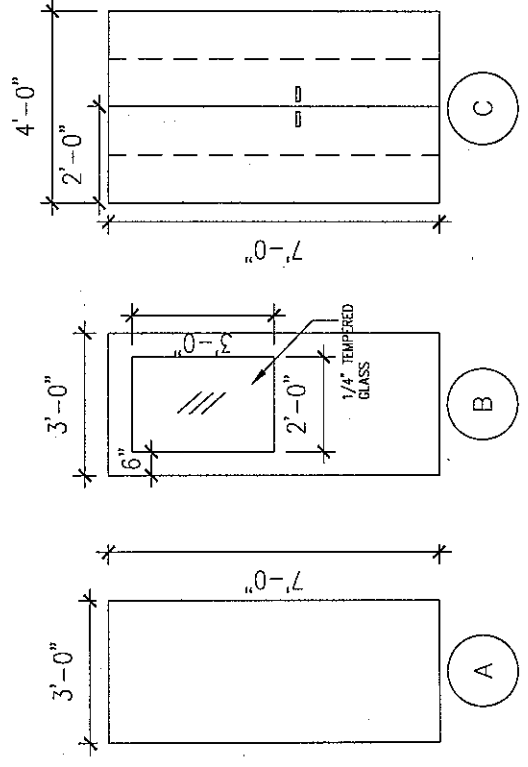
DOOR SCHEDULE

DOOR NUMBER	ROOM NAME	DOOR			FRAME		DETAIL	LIGHT	LOUVER	HDWR SET	NOTES		
		TYPE	MAT'L	FINISH	SIZE (UNLESS NOTED)	TYPE						MAT'L	FINISH
4101-1	WAITING AREA	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	2	HM	PT-1	2	YES	---	A	MAIN ENTRANCE
4101-2	WAITING AREA	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	3	HM	PT-1	2	YES	---	C	
4102	PATIENT TOILET	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	D	COAT HOOK
4103	STORAGE AREA	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	B	
4104	EXAM 3	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	F	COAT HOOK
4104	EXAM 3	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	F	COAT HOOK
4105	PROCEDURE ROOM	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	F	COAT HOOK
4106	EXAM 2	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	F	COAT HOOK
4107	EXAM 1	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	F	COAT HOOK
4108	PHYS. ASSIST. WORK ROOM	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	C	COAT HOOK
4109	STAFF TOILET & SHOWER	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	D	COAT HOOK
4110-1	PHYSICIAN WORK ROOM	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	C	COAT HOOK
4110-2	PHYSICIAN WORK ROOM	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	C	COAT HOOK
4111	STAFF LOUNGE	B	PL-5	--	3'-0" x 1-3/4" x 7'-0"	5	HM	PT-1	2	YES	---	D	
4112	OFFICE MANAGER	B	PL-5	--	3'-0" x 1-3/4" x 7'-0"	5	HM	PT-1	2	YES	---	D	COAT HOOK
4113	PHONE/ELEC/I.T./STORAGE	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	B	
4114-1	BUSINESS OFFICE	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	D	
4114-2	BUSINESS OFFICE	--	--	--	--	1	HM	PT-1	--	---	---	--	--
4114-3	BUSINESS OFFICE	A	PL-5	--	3'-0" x 1-3/4" x 7'-0"	1	HM	PT-1	2	---	---	D	
4114-4	BUSINESS OFFICE	C	PL-5	--	4'-0" x 1-3/4" x 7'-0"	4	HM	PT-1	--	---	---	B	
4114-5	BUSINESS OFFICE	C	PL-5	--	4'-0" x 1-3/4" x 7'-0"	4	HM	PT-1	--	---	---	B	

*SEE FINISH SCHEDULE SHEET A7.1 FOR MORE INFORMATION.



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



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

DOOR HARDWARE SETS

- HARDWARE SET A (SUITE ENTRY)**
- (1) SUITE ENTRANCE LOCKSET
 - (1 1/2) PR - BALL BEARING BUTT HINGES
 - (1) FLOOR STOP
 - (1) CLOSER
- 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 E (EXAM, SPECIAL PROCEDURE, CLOSET)**
- (1) PASSAGE SET
 - (1 1/2) PR - STANDARD BUTT HINGES
 - (1) WALL OR FLOOR STOP

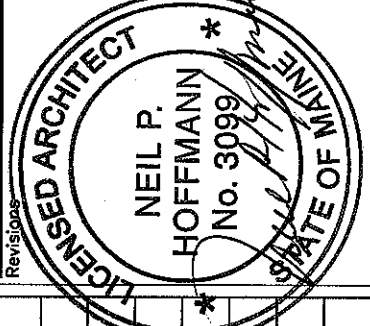
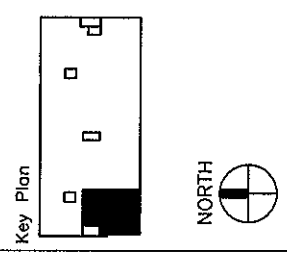
ABBREVIATIONS LEGEND:

- PL PLASTIC LAMINATE
- PT PAINT
- HM HOLLOW METAL
- AL ALUMINUM
- PREF PREFINISHED
- WD WOOD
- CH DULL CHROME FINISH

GENERAL NOTES

- NOTE NOT USED
- PROVIDE COAT HOOK MOUNTED ON BACK OF DOOR AT 4'-6" MAX. ABOVE FINISHED FLOOR.

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Facsimile: (414) 277-1055



Sheet
Door Schedule and Details

Project
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Portland, Maine
Portland Surgical Associates
Suite 420

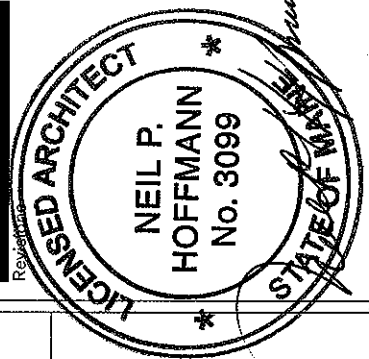
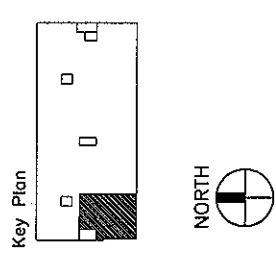
Date
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A11.1

FURNISHINGS, FIXTURES AND EQUIPMENT SCHEDULE

ROOM NO.	ITEM NO.	EQUIPMENT NAME	ROOM LOCATION	SIZE	FURNISHED BY	INSTALLED BY	ROUGH-IN ONLY BY CONTRACTOR	EQUIPMENT BOOK	NOTES
4114	E.01	FILES	BUSINESS OFFICE	36"W X 12"D X 72"H	-	-	-	-	QTY. 4 TOTAL
4101	E.02	FISH TANK	WAITING AREA	40"W X 12"D X 40"H	-	-	-	-	-
4113	E.03	EQUIPMENT	PHONE/ELEC./I.T.	36"W X 36"D	-	-	-	-	-
4114	E.04	REFRIGERATOR	STAFF LOUNGE	36"W X 36"D	-	-	-	-	-
4100	E.05	WATER FEATURE	CORRIDOR	-	-	-	-	-	-
4110	E.06	UNDERCOUNTER FRIDGE	PHYSICIAN WORK ROOM	24"W X 20"D X 32"H	-	-	-	-	-
4114	E.07	COUNTERTOP COPIER	BUSINESS OFFICE	24"W X 20"D X 21"H	-	-	-	-	-
4114	E.08	POSTAGE MACHINE	BUSINESS OFFICE	20"W X 15"D X 9"H	-	-	-	-	-
4114	E.09	SHREDDER	BUSINESS OFFICE	12"W X 18"D X 24"H	-	-	-	-	-
-	E.010	-	-	-	-	-	-	-	-

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Sheet
 Equipment by
 Tenant Schedule

Project
MERCY HOSPITAL
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 Portland, Maine
 Portland Surgical
 Associates
 Suite 420

Date
November 20, 2007

Project No.
F07-5256.00

Sheet No.
A11.2

GENERAL NOTES

- ALL CONSTRUCTION SHALL BE COORDINATED WITH REQUIREMENTS OF THE TENANTS FURNISHINGS FIXTURES AND EQUIPMENT
- INFORMATION CONTAINED IN THESE DOCUMENTS IS FOR REFERENCE ONLY
- ALL FREESTANDING FURNITURE AND EQUIPMENT TO BE PROVIDED BY TENANT. FREESTANDING FURNITURE SHOWN FOR REFERENCE ONLY.

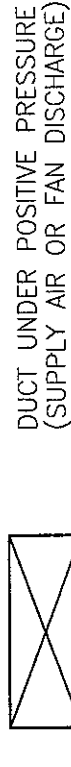
HVAC BASIC DUCTWORK SYMBOLS

(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

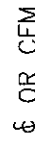
COMBINATION SMOKE & FIRE DAMPER W/ACCESS DOOR

AUTOMATIC DAMPER

AUTOMATIC SMOKE DAMPER



CENTER LINE



CUBIC FEET PER MINUTE



DIAMETER



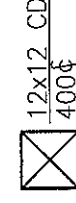
SQUARE FEET



POINT OF CONNECTION



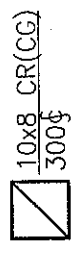
POINT OF DISCONNECTION



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

- EWB ENTERING WET BULB
- EWT ENTERING WATER TEMPERATURE
- EXH EXHAUST
- *F DEGREES FAHRENHEIT
- FA FREE AREA (SQ.FT.)
- FC FLEXIBLE CONNECTION
- FD FIRE DAMPER
- FLA FULL LOAD AMPERES
- FPM FEET PER MINUTE
- GAL GALLON
- GPH GALLONS PER HOUR
- GPM GALLONS PER MINUTE
- HT HEIGHT
- HZ FREQUENCY
- IN INCH OR INCHES
- LAT LEAVING AIR TEMPERATURE
- LD LINEAR DIFFUSER
- LWB LEAVING WET BULB TEMPERATURE
- LWT LEAVING WATER TEMPERATURE
- MBH THOUSAND BTU PER HOUR
- MIN MINIMUM
- (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

VANED ELBOW (SEE DETAIL) OR RADIUS ELBOW



SLOTTED LINEAR DIFFUSER WITH PLENUM

VAV BOX TYPE A



VAV BOX TYPE A WITH REHEAT COIL



THERMOSTAT



HVAC ABBREVIATIONS

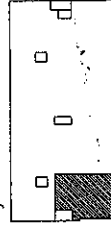
(NOT ALL ABBREV. ARE NECESSARILY USED ON THIS PROJECT)

- AD ACCESS DOOR
- AFF ABOVE FINISHED FLOOR
- AHU AIR HANDLING UNIT
- BHP BRAKE HORSEPOWER
- BTU BRITISH THERMAL UNIT
- BTUH BTU PER HOUR
- CD CEILING DIFFUSER
- CFM CUBIC FEET PER MINUTE
- CG CEILING GRILLE
- CLG CEILING
- CR CEILING REGISTER
- CV CONSTANT VOLUME
- DB DRY BULB
- DMPR DAMPER
- DX DIRECT EXPANSION
- (E) EXISTING TO REMAIN
- (ER) EXISTING TO BE REMOVED
- (ERR) EXISTING TO BE REMOVED & RELOCATED
- EAT ENTERING AIR TEMPERATURE
- EDB ENTERING DRY BULB TEMPERATURE
- EF EXHAUST FAN
- EL ELEVATION

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Key Plan



NORTH



Revisions

AKF

engineers

1509 WALNUT STREET, SUITE 1400
PHILADELPHIA, PA 19102
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AKF PROJ. NO. P060106-E

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Sheet

HVAC Cover Sheet

Project

MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates

Suite 420

Date

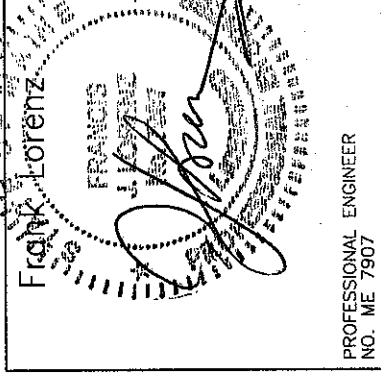
November 14, 2007

Project No.

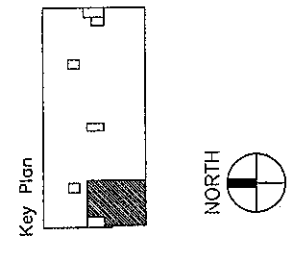
F07-5256.00

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H-1.0



PROFESSIONAL ENGINEER
NO. ME 7907



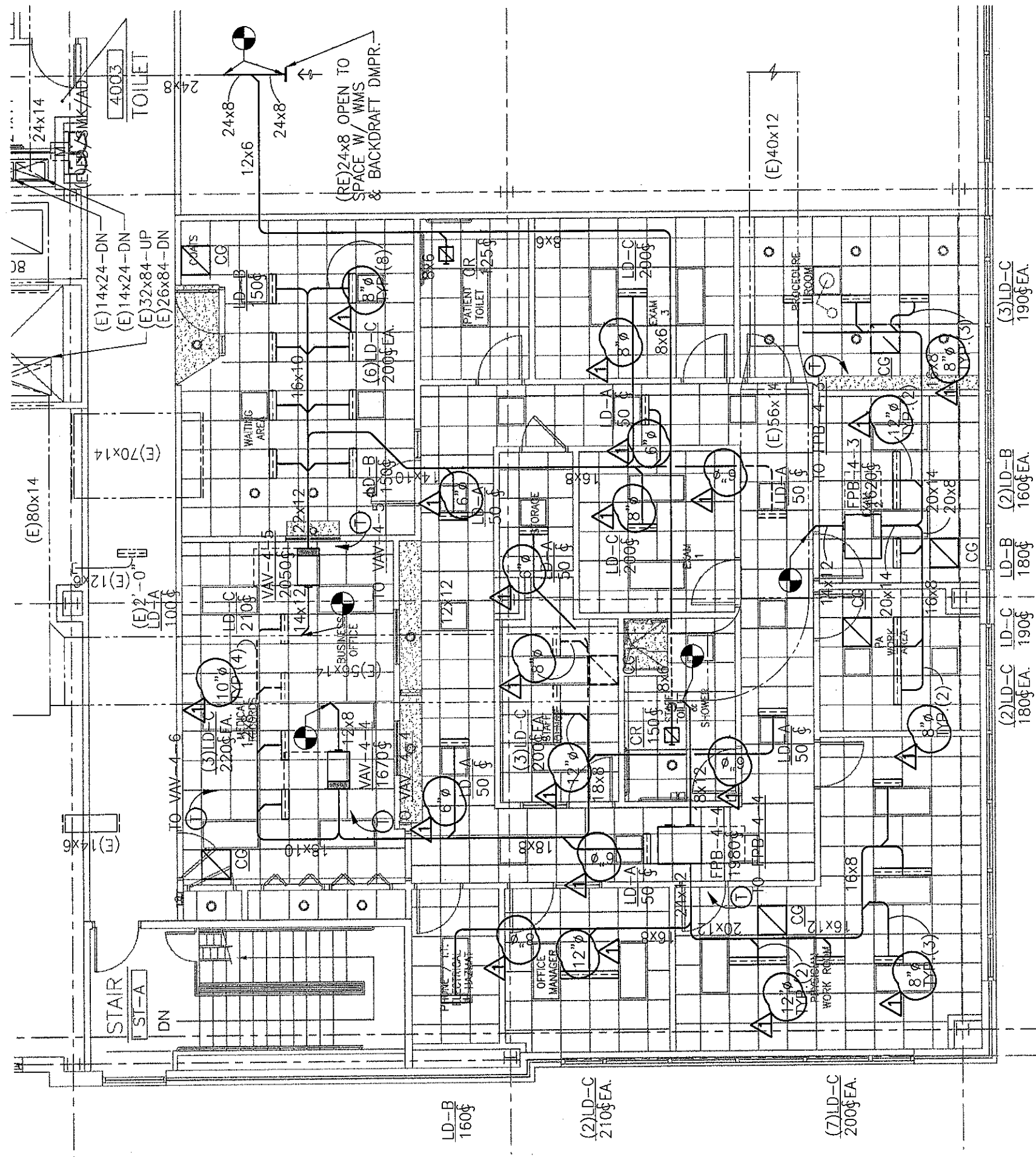
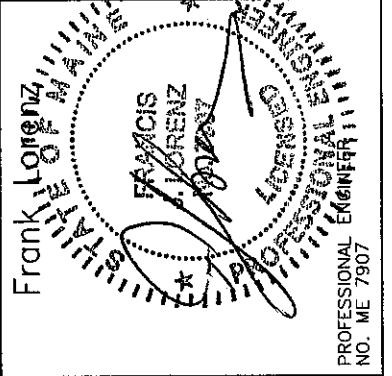
Revisions
 11-27-07
 CONSTRUCTION BULLETIN #1

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engineers
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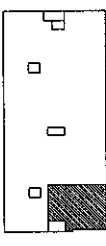
Sheet
HVAC
Floor Plan

Project
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Date
November 14, 2007
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F07-5256.00
 Sheet No.
H-2.0



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



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	WxH	MIN. Δ SP	CFM @ MIN. Δ SP	MAX. PRIMARY CFM	MIN. PRIMARY CFM	MAX. RETURN CFM	CFM	EXT. SP (IN. W.G.)	FAN TYPE			
														MIN. Δ SP	CFM @ MIN. Δ SP	MAX. PRIMARY CFM
FPB-4-3	12	12x18.25	14x18	30%	16.5x14.63	0.5	1620	1620	0	1620	1620	1620	0.5	CENTRIF		
FPB-4-4	14	12x18.25	14x18	30%	16.5x14.63	0.5	1980	1980	0	1980	1980	1980	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			KW INPUT	MBH	KW INPUT	VOLTS	PHASE	HZ	FULL-LOAD AMPERES	No. OF STEPS (STAGES)	No. OF STEPS HEATING CFM SETTING	LOWEST MINIMUM HEATING CFM SETTING	MINIMUM STATIC PRESSURE ΔPS (IN W.G.)	DISCHARGE SOUND LEVEL AT MAX. CFM & ΔPS=1" (NC)						
			VOLTS	PHASE	HZ																		
FPB-4-3	1/3	3.0	480	3	60	10.1	34.6	480	3	60	12.2	3	425	0.5	26								
FPB-4-4	1/3	3.0	480	3	60	12.7	43.2	480	3	60	15.2	3	425	0.5	26								

TERMINAL BOX SCHEDULE

DESIGNATION	BOX TYPE	BOX SIZE (INLET SIZE)	AIRFLOW RANGE (CFM)		ELECTRIC HEATING COIL DATA									
			MIN.	MAX.	MBH	KW INPUT	VOLTS	PHASE	HZ	FULL-LOAD AMPERES	No. OF STEPS (STAGES)	LOWEST MINIMUM HEATING CFM SETTING	MINIMUM STATIC PRESSURE ΔPS (IN W.G.)	DISCHARGE SOUND LEVEL AT MAX. CFM & ΔPS=1" (NC)
			VOLTS	PHASE	HZ									
VAV-4-4	VAV	12	0	1670	29.6	8.7	480	3	60	10.4	3	425	0.5	26
VAV-4-5	VAV	12	0	2050	32.8	9.6	480	3	60	11.6	3	425	0.5	26

TERMINAL BOX SCHEDULE (CONT.)

BASED ON: TITUS

DESIGNATION	RADIATED SOUND LEVEL AT MAX. CFM & ΔPS=1" (NC)	TYPE OF CONTROLS	MANUF. MODEL #	REMARKS
VAV-4-4	29	DDC	DESV	-
VAV-4-5	29	DDC	DESV	-

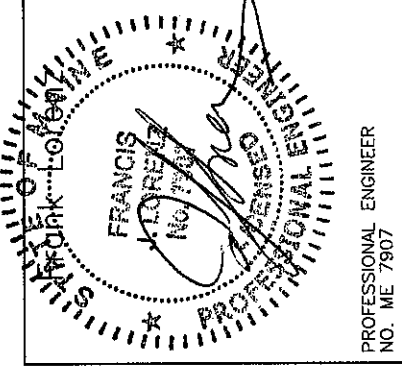
DIFFUSER SCHEDULE

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.



PROFESSIONAL ENGINEER
NO. ME 7907

ELECTRICAL SYMBOLS LIST

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

A₁, A₂

 2'x4'/2'x2'/1'x4' FLUORESCENT CEILING MOUNTED FIXTURE
 'A' = FIXTURE TYPE
 'a' = CONTROLLED BY SWITCH 'a'

A₁, A₂

 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


S₃


 SINGLE POLE SWITCH
 3 = THREE-WAY
 a = CONTROLS SWITCH LEG 'a'

\$_m

 DISCONNECT SWITCH - TOGGLE TYPE
 MOTOR RATED, 20A, 1P, UON

OSH


 OCCUPANCY SENSOR, WALL MOUNTED
 TRANSFORMER


⊖

 20A, 125V DUPLEX RECEPTACLE - FLUSH WALL MOUNTED
 CONTROLLED FROM WALL SWITCH 'a'

⊕

 20A, 125V QUADRUPLX RECEPTACLE - FLUSH WALL MOUNTED

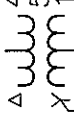
⊕

 20A, 125V DUPLEX RECEPTACLE FLUSH WALL MOUNTED
 GFI TYPE.

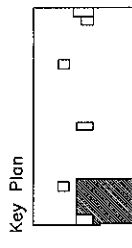
5 3 1

 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.

1

 HOMERUN - NUMERAL WHERE USED INDICATES CIRCUIT NUMBER FOR REFERENCE ONLY

SINGLE LINE DIAGRAM SYMBOLS

△ 480V
 500KVA
 120/208

 POWER TRANSFORMER
 VOLTAGES, WINDINGS AND SIZE AS INDICATED

PANEL
 NL3A2

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

PANELBOARD



Revisions

AKF
 engineers

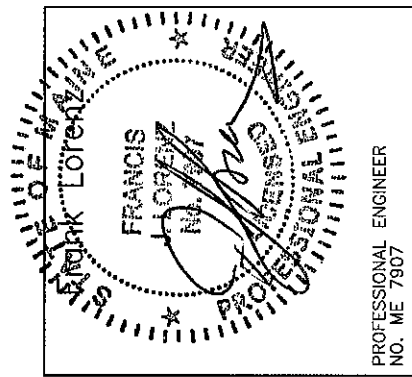
1500 WALNUT STREET, SUITE 1400
 PHILADELPHIA, PA. 19102
 215.735.7200 TEL. 215.735.6706 FAX
 AKF PROJ. NO. P060106-E
 ARLINGTON - BOSTON - NEW YORK - PHILADELPHIA
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Sheet
Electrical
Cover Sheet

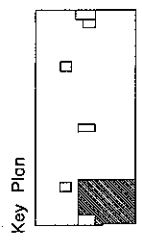
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MERCY HOSPITAL
 Medical Office Bldg.
 Portland, Maine
 Portland Surgical
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November 14, 2007
 Project No.
F07-5256.00

Sheet No.
E-1.0



PROFESSIONAL ENGINEER
 NO. ME 7807



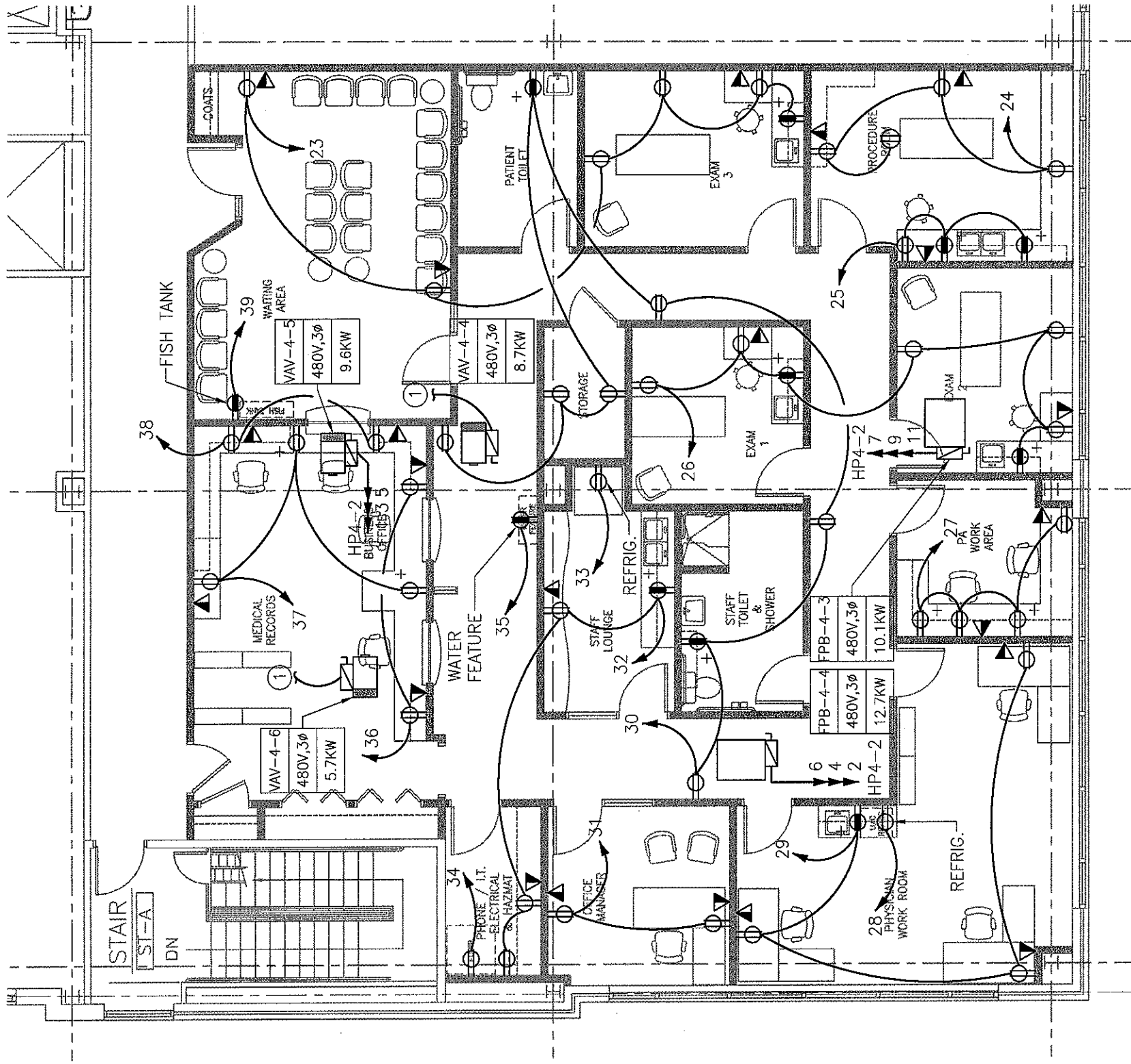
Revisions

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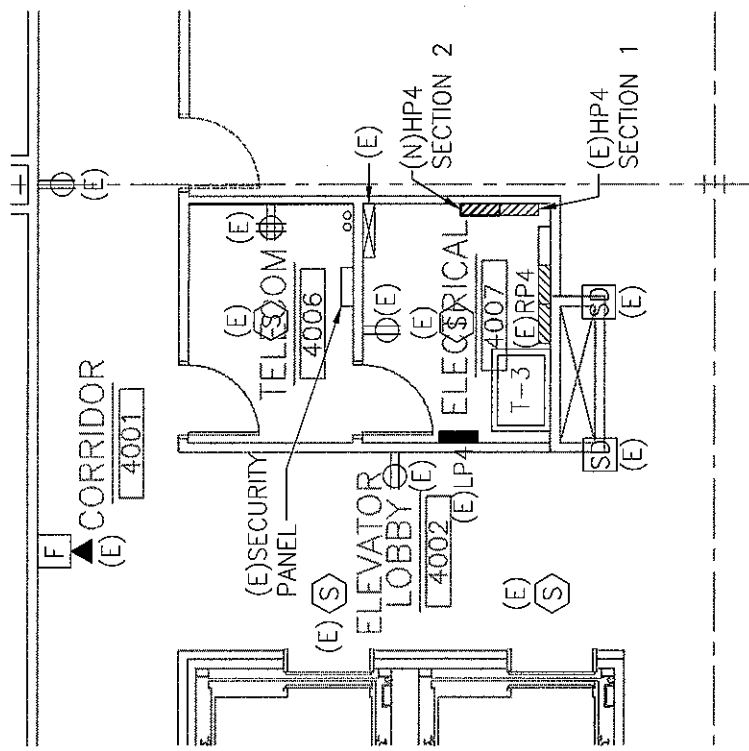
1. REFER TO ARCHITECTURAL DRAWINGS FOR EXACT MOUNTING HEIGHTS OF OUTLETS.
2. REFER TO MECHANICAL DRAWINGS FOR EXACT LOCATIONS OF ALL MECHANICAL EQUIPMENT.
3. ALL CIRCUITS ARE TO (E)PANEL RP4 UNLESS OTHERWISE NOTED.

KEYNOTES:

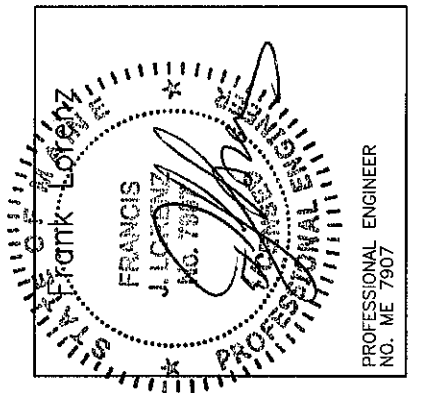
- ① CONNECT TO A NEW 20A/3P CIRCUIT BREAKER IN (E)PANEL HP4 SECTION 1.



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



2 4TH FLR ELEC. CLOSET
 SCALE: 1/8"=1'-0"



PROFESSIONAL ENGINEER
 NO. ME 7907

**LANDMARK
HEALTHCARE
FACILITIES, LLC**

839 North Jefferson Street
Milwaukee, Wisconsin 53202
Telephone: (414) 277-4500
Facsimile: (414) 277-1055



Revisions

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**Electrical
Floor Plan
Lighting**

Project

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Medical Office Bldg.
Portland, Maine
Portland Surgical
Associates

Suite 420

Date

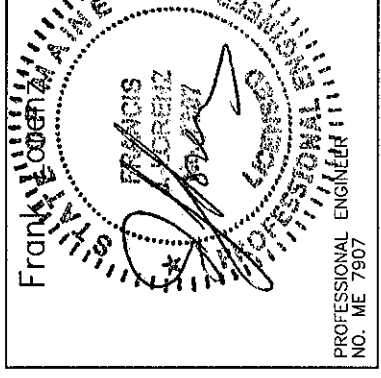
November 14, 2007

Project No.

F07-5256.00

Sheet No.

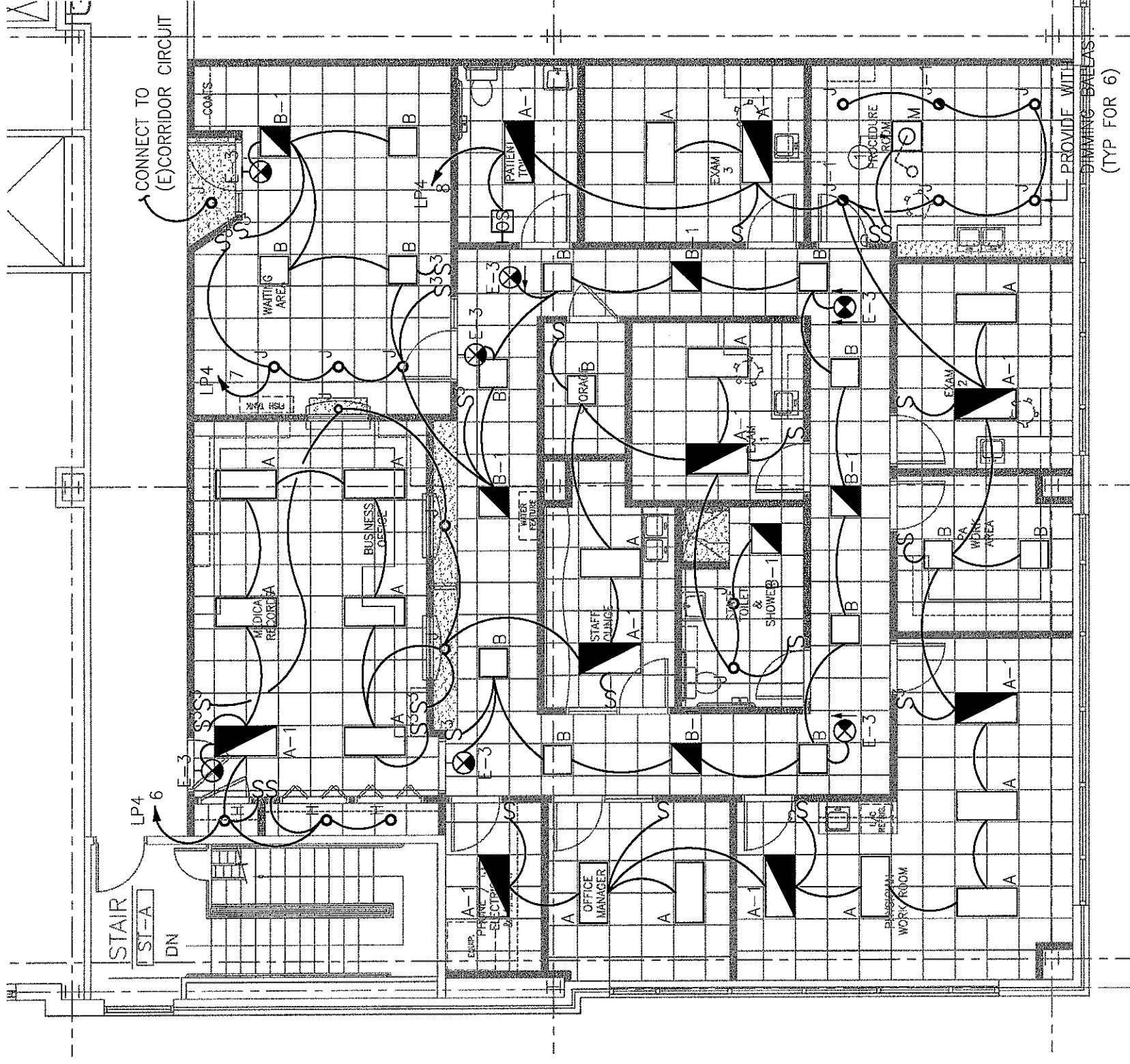
E-3.0



PROFESSIONAL ENGINEER
NO. ME 7907

KEYNOTES:

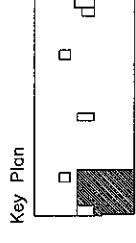
- ① CONNECT FIXTURE TO 120V RECEPTACLE CIRCUIT SERVING THIS ROOM. REFER TO DRAWING E-2.0.



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

**LANDMARK
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**Electrical
Floor Plan
Misc. Systems**

Project

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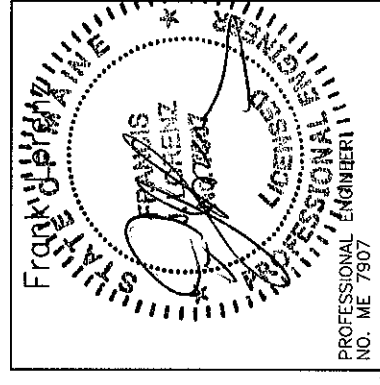
November 14, 2007

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F07-5256.00

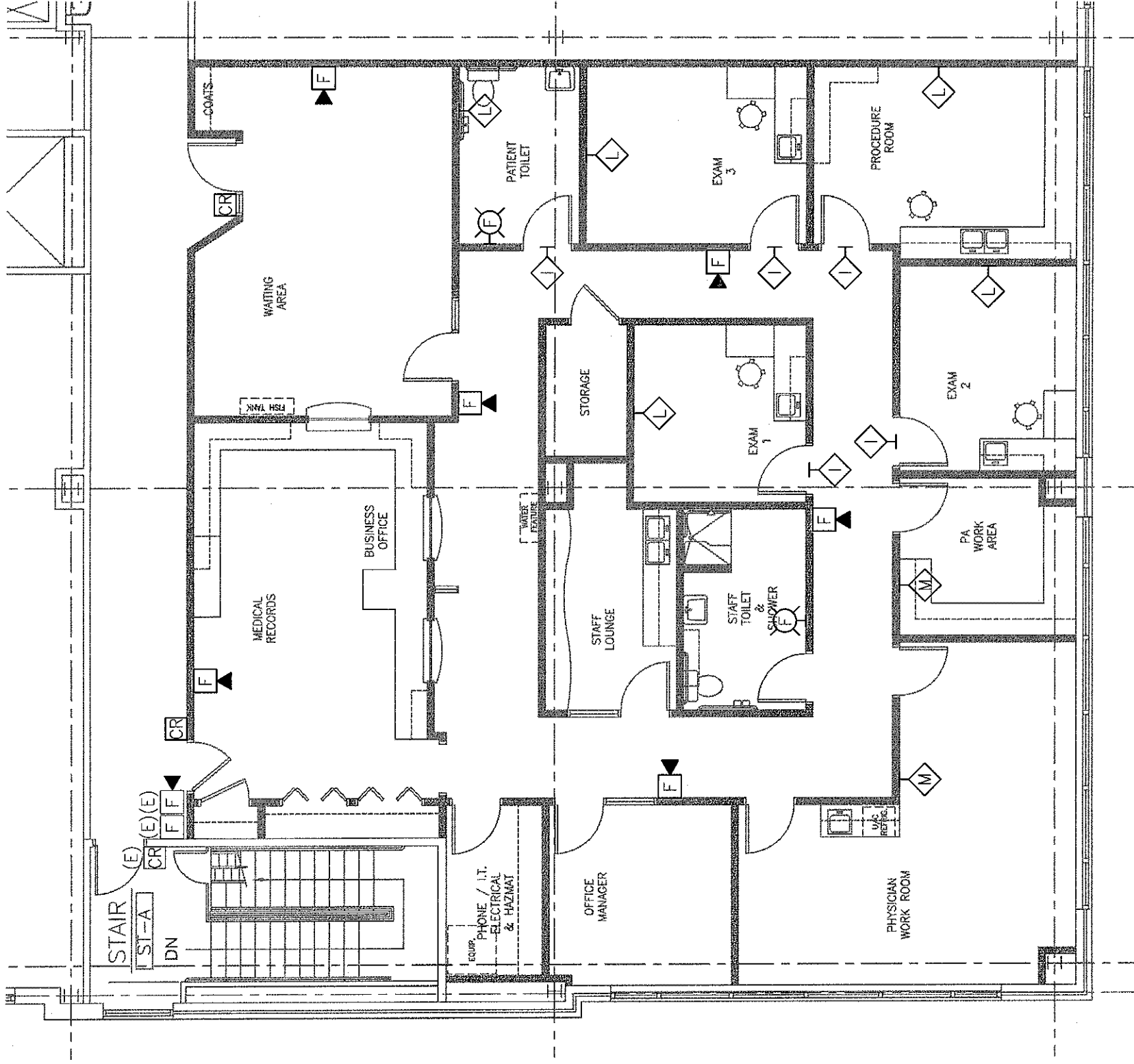
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DRAWING NOTES:

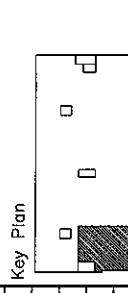
1. REFER TO ARCHITECTURAL DRAWINGS FOR EXACT MOUNTING HEIGHTS OF OUTLETS.
2. COORDINATE FINAL LOCATIONS OF ALL NURSE CALL STATIONS WITH OWNER PRIOR TO INSTALLATION.
3. REFER TO E-6.0, DETAIL 1 FOR TYPICAL SINGLE DOOR CARD READER CONFIGURATION.



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

LANDMARK HEALTHCARE FACILITIES, LLC

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AKF PROJ. NO. P060106-E
ALBANY, ARIZONA - NEW YORK - PHILADELPHIA
MANCETON, STAMFORD - MEXICO CITY

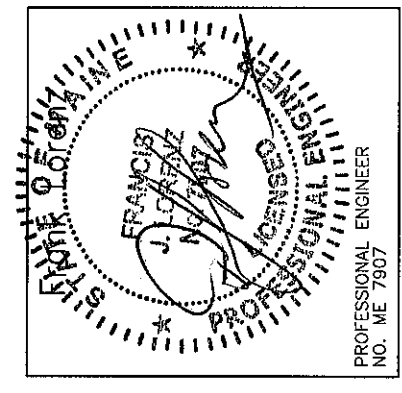
Sheet
Electrical Schedules

Project
MERCY HOSPITAL
Medical Office Bldg.
Portland, Maine
Portland Surgical Associates
Suite 420

Date
November 14, 2007

Project No.
F07-5256.00

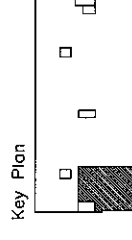
Sheet No.
E-5.0



PANEL: (E)HP4	480 / 277 VOLTS:		3 PHASE			4 WIRE		MAIN BUS: MAIN LUGS ONLY MAIN BRK: 225 AMPS PROVIDE WITH FEED-THRU LUGS AIC: 35000 AMPS	DESCRIPTION OF LOAD	TRIP / POLE	CTK #
	LOAD (VA)	PER PHASE (VA)	A	B	C	FLUSH	ALUMINUM				
LOCATION: ELECTRICAL CLOSET 4TH FL											
TRIP / POLE	LOAD (VA)	PER PHASE (VA)	A	B	C	FLUSH	ALUMINUM	DESCRIPTION OF LOAD	TRIP / POLE	CTK #	
1 20/1	1124	1875						(E)EMERGENCY LIGHTING	20/1	2	
3 20/1	2560	4288						(E)ALL ABOUT WOMEN'S LIGHTING	20/1	4	
5 20/1	2116	3750						(E)ALL ABOUT WOMEN'S LIGHTING	20/1	6	
7 20/1	1144	3152						(E)PORTLAND SURGICAL LIGHTING	20/1	8	
9 20/1	0	0						SPARE	20/1	10	
11 20/1	0	0						SPARE	20/1	12	
13 20/1	0	0						SPARE	20/1	14	
15 20/1	0	0						SPARE	20/1	16	
17 20/1	0	0						SPARE	20/1	18	
19 20/1	0	0						SPARE	20/1	20	
21 20/1	0	0						SPARE	20/1	22	
23 20/1	0	0						SPARE	20/1	24	
25 20/1	0	0						SPARE	20/1	26	
27 20/1	0	0						SPARE	20/1	28	
29 20/1	0	0						SPARE	20/1	30	
31 20/1	0	0						SPARE	20/1	32	
33 20/1	0	0						SPARE	20/1	34	
35 20/1	0	0						SPARE	20/1	36	
37 20/1	0	0						SPARE	20/1	38	
39 20/1	0	0						SPARE	20/1	40	
41 20/1	0	0						SPARE	20/1	42	
TOTAL BY PHASE									5027	4288	3790
TOTAL CONNECTED LOAD =									13105	VA	
TOTAL DEMAND LOAD =									16381	VA	
TOTAL CONNECTED AMPS =									16	AMPS	
TOTAL DEMAND AMPS =									20	AMPS	
SPARE =									0%		

PANEL: (E)HP4 SECTION 1	208 / 120 VOLTS:		3 PHASE			4 WIRE		MAIN BUS: MAIN LUGS ONLY MAIN BRK: 225 AMPS PROVIDE WITH FEED-THRU LUGS AIC: 10000 AMPS	DESCRIPTION OF LOAD	TRIP / POLE	CTK #
	LOAD (VA)	PER PHASE (VA)	A	B	C	FLUSH	ALUMINUM				
LOCATION: ELECTRICAL CLOSET 4TH FL											
TRIP / POLE	LOAD (VA) <td>PER PHASE (VA) <td>A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td></td></td>	PER PHASE (VA) <td>A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td></td>	A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td>	B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td>	C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td>	FLUSH	ALUMINUM	DESCRIPTION OF LOAD	TRIP / POLE	CTK #	
1 20/1	900	1620						(E)GEN REC - CORR 4001	20/1	2	
3 20/1	360	640						(E)ROOFTOP UNIT REC & LTS	20/1	4	
5 20/1	280	780						(E)SECURITY PANEL - TELE RM 4006	20/1	6	
7 20/1	1080	2160						(E)EXAM RMs 4414, 4416	20/1	8	
9 20/1	1080	1980						(E)OFFICE 4410, 4411	20/1	10	
11 20/1	1080	2160						(E)NURSE IN-TAKE RMs 4405, 4408	20/1	12	
13 20/1	540	1540						(E)STAFF LOUNGE RM 4407	20/1	14	
15 20/1	1000	1540						(E)CORNER RM 4402	20/1	16	
17 20/1	360	1440						(E)BUSINESS OFFICE RM 4402	20/1	18	
19 20/1	360	1080						(E)LAB & NURSE RM 4415	20/1	20	
21 20/1	180	1440						(E)WAITING AREA 4401	20/1	22	
23 20/1	1080	1800						(E)GENERAL RECEPS CORR 4400	20/1	24	
25 20/1	540	1800						(E)PROCEDURE RM 4105	20/1	26	
27 20/1	720	1720						(E)EXAM RMs 4106, 4107	20/1	28	
29 20/1	720	2160						(E)UC FROGE RM 4110	20/1	30	
31 20/1	360	1180						(E)GENERAL CORRIDOR 4100	20/1	32	
33 20/1	1000	1180						(E)STAFF LOUNGE 4111/IT, CLOS 4113	20/1	34	
35 20/1	1000	1360						(E)IT CLOSET 4113 DED REC	20/1	36	
37 20/1	540	900						(E)BUSINESS OFFICE 4114	20/1	38	
39 20/1	1000	1000						(E)BUSINESS OFFICE 4114	20/1	40	
41 20/1	0	0						SPARE	20/1	42	
TOTAL BY PHASE									10180	9500	9700
TOTAL CONNECTED LOAD =									29380	VA	
TOTAL DEMAND LOAD =									19690	VA	
TOTAL CONNECTED AMPS =									82	AMPS	
TOTAL DEMAND AMPS =									55	AMPS	
SPARE =									0%		

PANEL: (E)HP4 SECTION 2	480 / 277 VOLTS:		3 PHASE			4 WIRE		MAIN BUS: MAIN LUGS ONLY MAIN BRK: 225 AMPS PROVIDE WITH FEED-THRU LUGS AIC: 35000 AMPS	DESCRIPTION OF LOAD	TRIP / POLE	CTK #
	LOAD (VA)	PER PHASE (VA)	A	B	C	FLUSH	ALUMINUM				
LOCATION: ELECTRICAL CLOSET 1ST FL											
TRIP / POLE	LOAD (VA) <td>PER PHASE (VA) <td>A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td></td></td>	PER PHASE (VA) <td>A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td></td>	A <td>B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td></td>	B <td>C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td> </td>	C <td>FLUSH</td> <td>ALUMINUM</td> <td>DESCRIPTION OF LOAD</td> <td>TRIP / POLE</td> <td>CTK #</td>	FLUSH	ALUMINUM	DESCRIPTION OF LOAD	TRIP / POLE	CTK #	
1 20/3	3200	7433						(E)VA V-4-5	20/3	2	
3 20/3	3200	7433						(E)VA V-4-5	20/3	4	
5 20/3	3200	7433						(E)VA V-4-5	20/3	6	
7 20/3	3366	3366						(E)FB 4-3	20/3	8	
9 20/3	3366	3366						(E)FB 4-3	20/3	10	
11 20/3	3366	3366						(E)FB 4-3	20/3	12	
13 20/3	0	0						SPARE	20/3	14	
15 20/3	0	0						SPARE	20/3	16	
17 20/3	0	0						SPARE	20/3	18	
19 20/3	0	0						SPARE	20/3	20	
21 20/3	0	0						SPARE	20/3	22	
23 20/3	0	0						SPARE	20/3	24	
25 20/3	0	0						SPARE	20/3	26	
27 20/3	0	0						SPARE	20/3	28	
29 20/3	0	0						SPARE	20/3	30	
31 20/3	0	0						SPARE	20/3	32	
33 20/3	0	0						SPARE	20/3	34	
35 20/3	0	0						SPARE	20/3	36	
37 20/3	0	0						SPARE	20/3	38	
39 20/3	0	0						SPARE	20/3	40	
41 20/3	0	0						SPARE	20/3	42	
TOTAL BY PHASE									10799	10799	10799
TOTAL CONNECTED LOAD =									32397	VA	
TOTAL DEMAND LOAD =									32397	VA	
TOTAL CONNECTED AMPS =									39	AMPS	
TOTAL DEMAND AMPS =									39	AMPS	
SPARE =									0%		



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**Electrical
Schedules**

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Portland Surgical
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Suite 420

Date
November 14, 2007

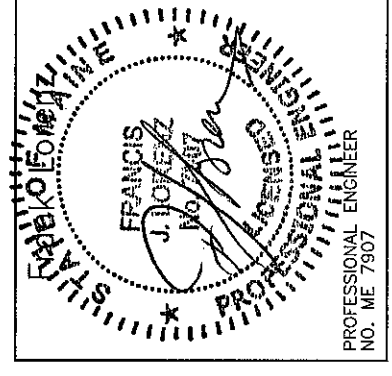
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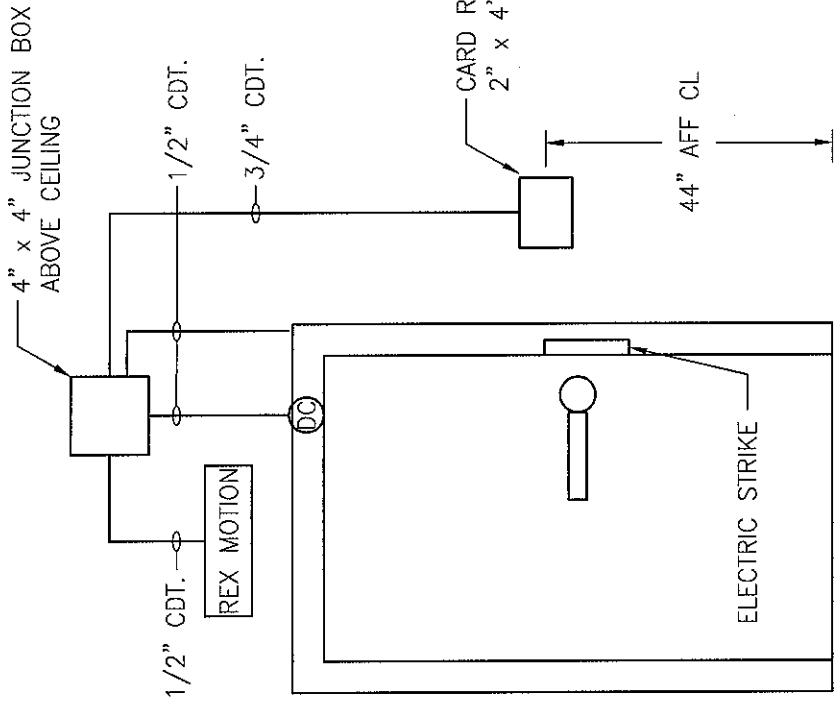
LIGHTING FIXTURE SCHEDULE

TYPE	DESCRIPTION	MANUFACTURER	CATALOG NUMBER	LAMPS		FIXTURE WATTS	MOUNTING	
				NO.	TYPE		VOLTS	
A	2' X 4' FLUORESCENT LIGHT WITH PRISMATIC ACRYLIC LENS	METALUX LITHONIA	HRD2GCAV432A-EB81 2SPG4D32RWA12-1/4GEBAPB	4	32W T8	128	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	128	277	RECESSED
B	2' X 2' FLUORESCENT LIGHT FIXTURE WITH PRISMATIC ACRYLIC LENS	METALUX LITHONIA	HRD2GCAVFA2U6T8A-EB81 2SPG2DU31RWA12-GEBAPB	2	32W T8	64	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	64	277	RECESSED
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	28	277	RECESSED
J	COMPACT FLUORESCENT RECESSED DOWNLIGHT FIXTURE, SHALL BE 7- ¹ / ₂ " DIAMETER OPEN APERTURE WITH CLEAR ALZAK REFLECTOR	PORTFOLIO LITHONIA	C72181H728OLI AF2181RT16AR	2	18W DTT	36	277	RECESSED
M	CEILING MOUNTED CHROMOPHARE PROCEDURE LIGHT	BERCHTOLD	D 540	1	150W HALOGEN	150	120	CEILING

- 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.

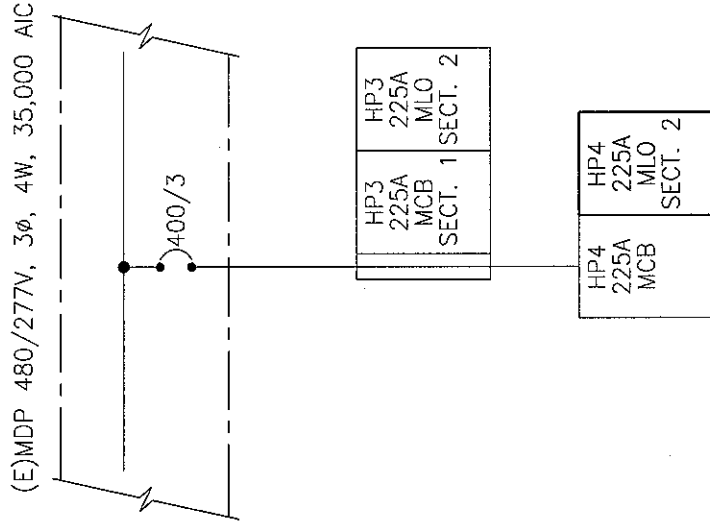


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1 TYPICAL SINGLE DOOR DETAIL

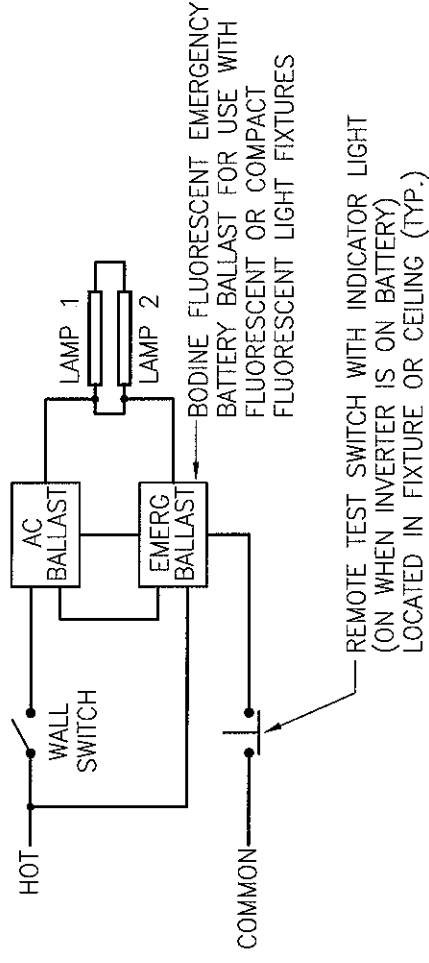
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3 PARTIAL SINGLE LINE DIAGRAM

SCALE: N.T.S.

SEQUENCE:
 - NORMAL OPERATION: LIGHT FIXTURE IS SWITCHED AND EMERGENCY BALLAST IS IN CHARGING MODE.
 - EMERGENCY OPERATION: SWITCHED LIGHT FIXTURE WHETHER ON OR OFF ENERGIZES THRU INTERNAL RELAY PREFABRICATED IN EMERGENCY BALLAST.



2 NORMAL/EMERGENCY WIRING SCHEMATIC

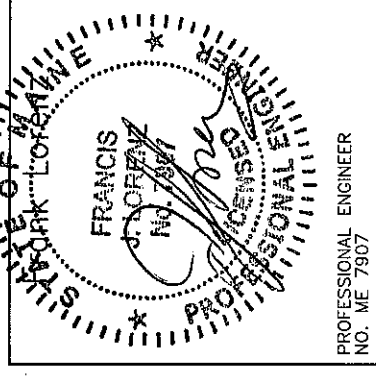
SCALE: N.T.S.

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 1/4
100	10	1	8	1 1/4	1 1/4	2

NOTE:

1. THE ABOVE SCHEDULE IS BASED ON 600 VOLT WIRE TYPE THWN/XHHW AND EMT/RGS CONDUIT

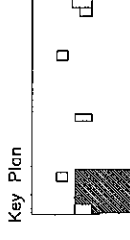
2B NUMBER INDICATES FEEDER SIZE IN AMPS AND WIRE LETTER INDICATES CONDUIT SIZE AND NUMBER OF WIRES



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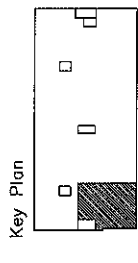
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**Plumbing
Cover Sheet**

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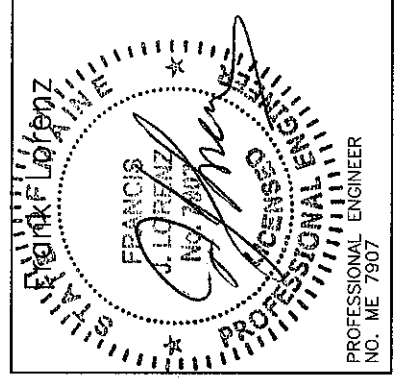
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PLUMBING BASIC SYMBOLS

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

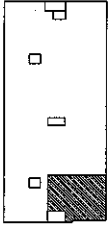
	EXISTING PIPING
	NEW SOIL, WASTE OR SANITARY PIPING
	VENT PIPING (SANITARY)
	PIPING BELOW SLAB
	DOMESTIC COLD WATER PIPING
	DOMESTIC HOT WATER PIPING (120')
	DOMESTIC HOT WATER CIRCULATION PIPING
	DISCONNECT FROM EXISTING
	CONNECT TO EXISTING
	CLEAN OUT/PLUGGED OUTLET
	CAPPED OUTLET
	CLEAN-OUT DECK PLATE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

Key Plan



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**Plumbing
General Notes**

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Associates

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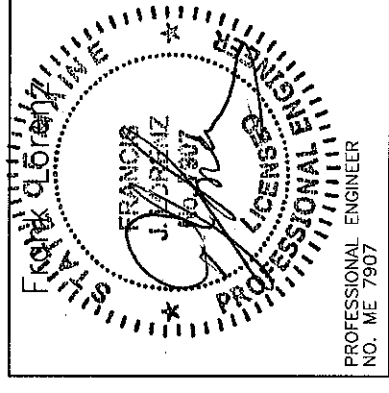
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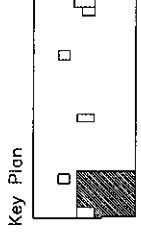
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PLUMBING GENERAL NOTES

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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Floor Plan**

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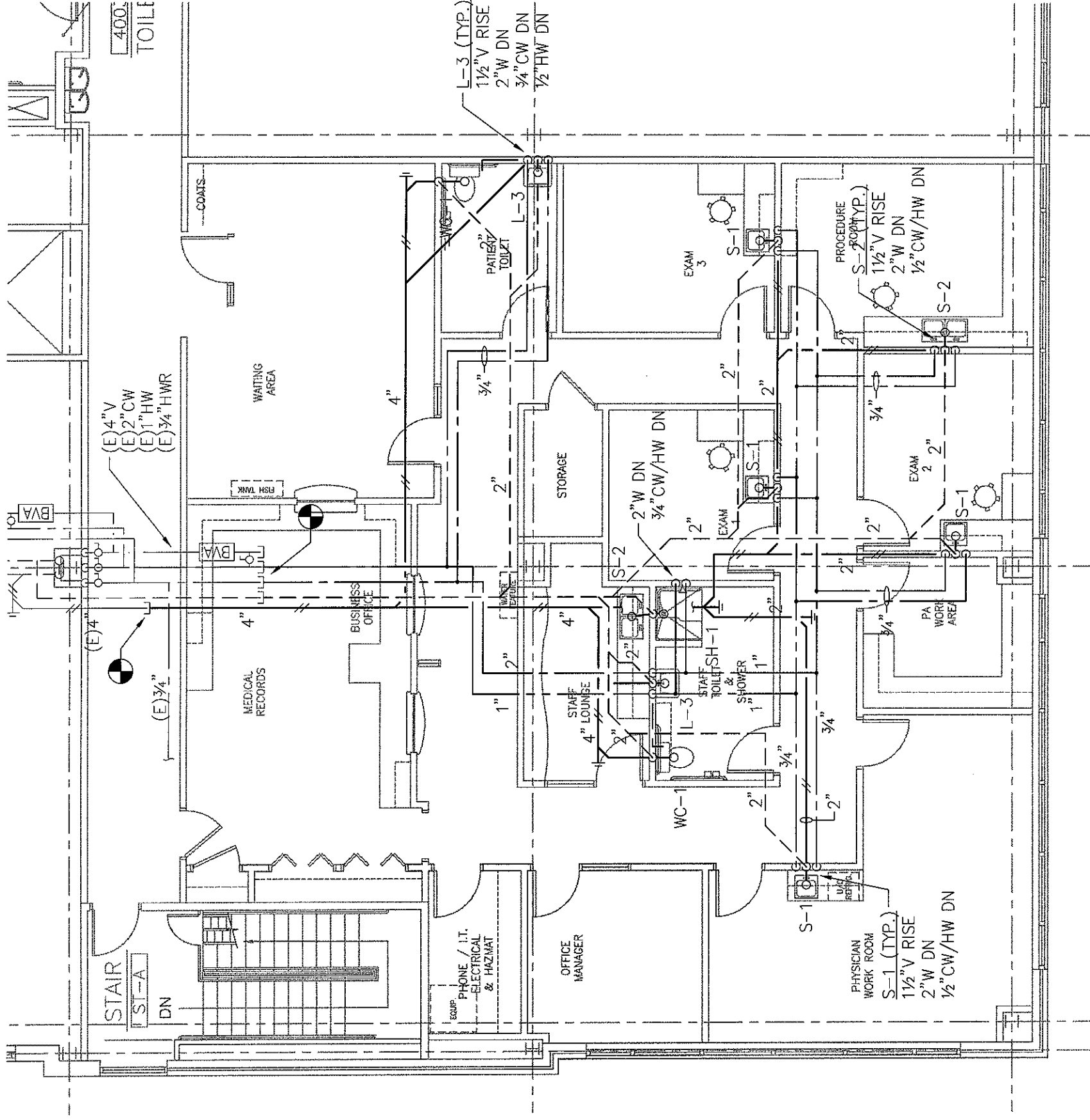
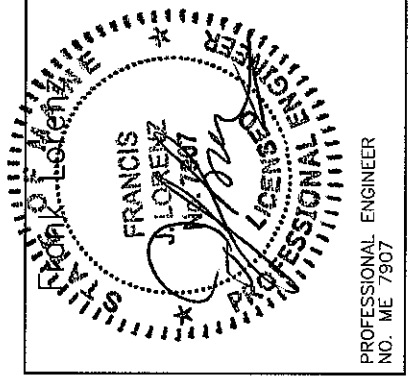
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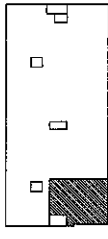
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1 FLOOR PLAN
SCALE: 1/8"=1'-0"

Key Plan



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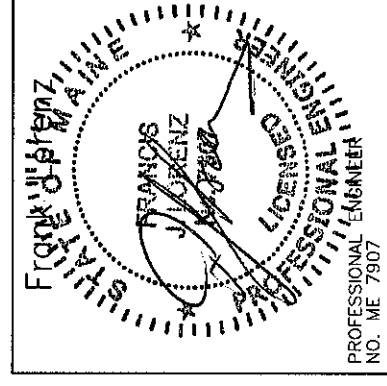
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PLUMBING FIXTURE SCHEDULE

FIXTURES	FIXTURE #		SERVICE CONNECTION				MANUFACTURER AND EQUIPMENT	MODEL NO.	REMARKS
	WC-1		S	W	V	CW			
WATER CLOSET									
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							
PRIVATE		•		1 1/2"	1 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"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY	BCR-15 LK411ABH4 LK36	
PANTRY		•		2"	1 1/2"	3/4"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY HOT WATER DISPENSER: INSINKERATOR	CR-3321 LK4380FCR (2)LK35L HOT1	
LABORATORY		•		2"	1 1/2"	3/4"	SK: ELKAY FAUCET: ELKAY DRAIN: ELKAY	CR-2521 LK411ABH4 LK35	
SHOWER	SH-1								
SHOWER	•			2"	1 1/2"	3/4"	SHOWER: LASCO BATHWARE FAUCET INCLUDED	1363BFSC	PROVIDE GRAB BAR, CUSHIONED SEAT, HAND HELD SHOWER HEAD, PRESSURE BALANCING MIXING VALVE, CURTAIN ROD & SHOWER CURTAIN

NOTES:

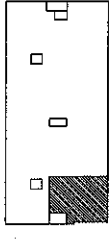
1. THE EXACT LOCATION AND MOUNTING HEIGHTS OF ALL PLUMBING FIXTURES SHALL BE AS PER THE ARCHITECTURAL DRAWINGS.
2. ALL SINKS AND LAVATORIES THAT ARE HANDICAPPED ACCESSIBLE SHALL BE PROVIDED WITH THERMAL AND IMPACT INSULATION/SHIELDING KITS ON SUPPLIES, TRAPS, TAILPIECES AND WASTE OUTLETS.



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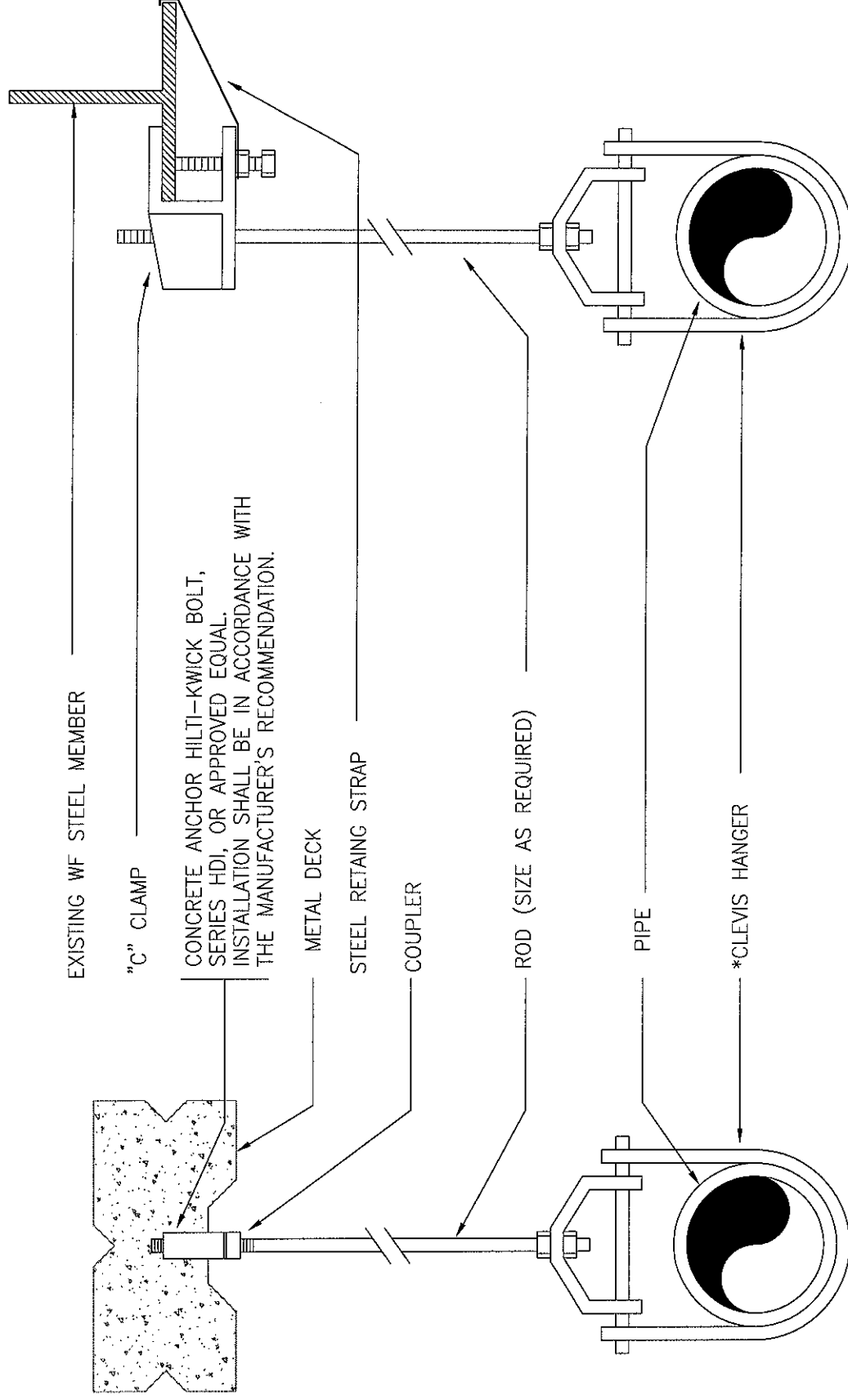
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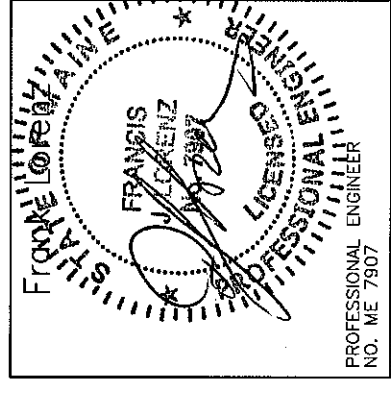
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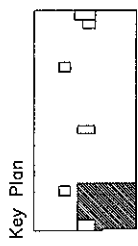


* CLEVIS HANGERS REQUIRED ON PIPING LARGER 1".
GENERAL PURPOSE HANGERS MAY BE USED ON PIPING 1" OR SMALLER.

TYPICAL HANGER DETAIL



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Portland, Maine
Portland Surgical
Associates**

Suite 420

Date

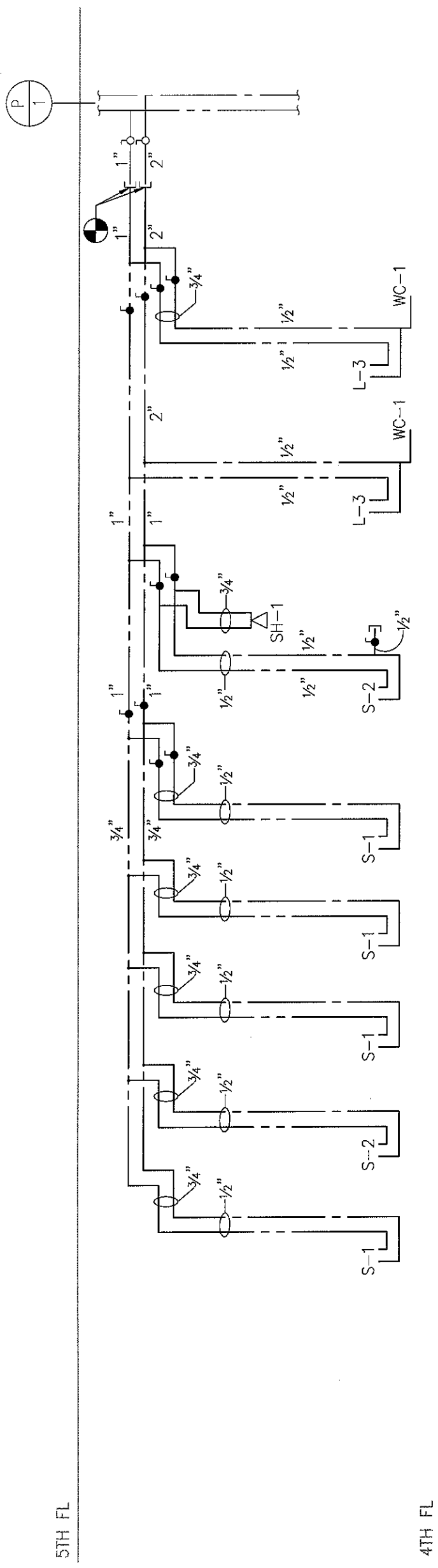
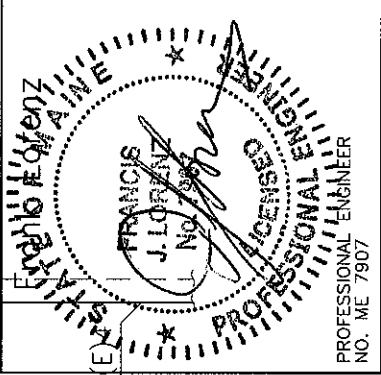
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F07-5256.00

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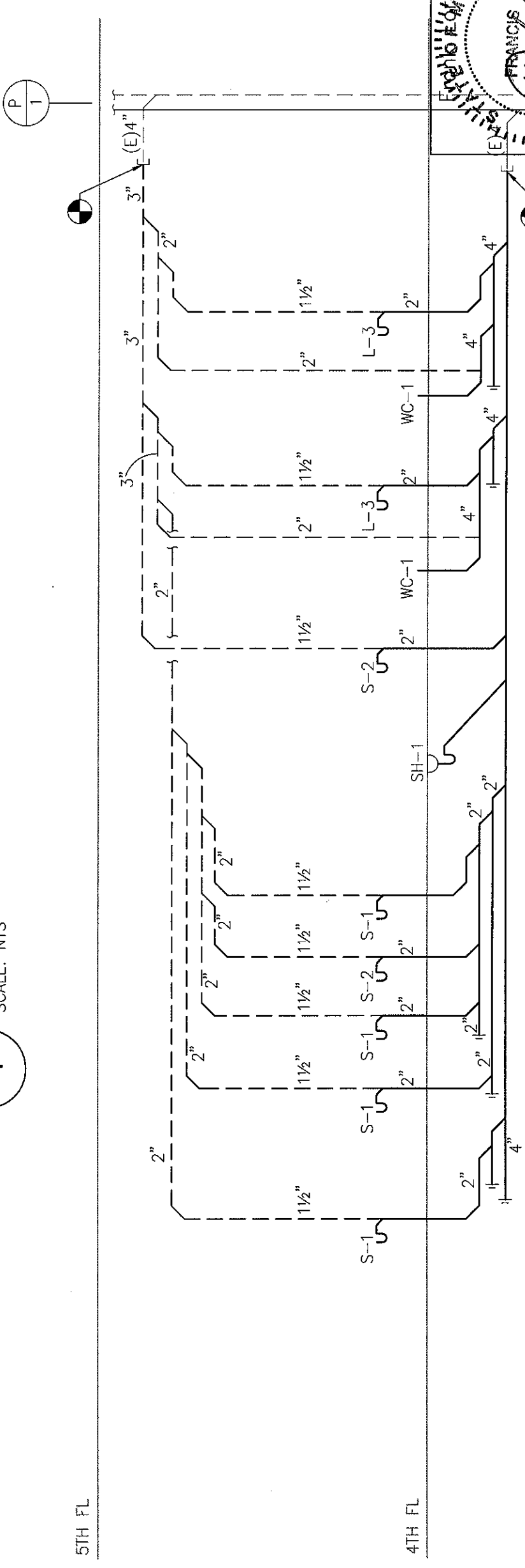
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1 DOMESTIC WATER RISER DIAGRAM

SCALE: NTS

1



2 SANITARY RISER DIAGRAM

SCALE: NTS

2

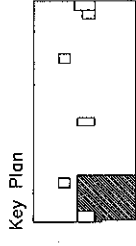
FIRE PROTECTION SYMBOLS

(NOT ALL SYMBOLS ARE NECESSARILY USED ON THIS PROJECT)

—	EXISTING PIPING
—	NEW PIPING
- X - X - X - X -	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
FE	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.



Revisions

Sheet

Fire Protection Cover Sheet

Project

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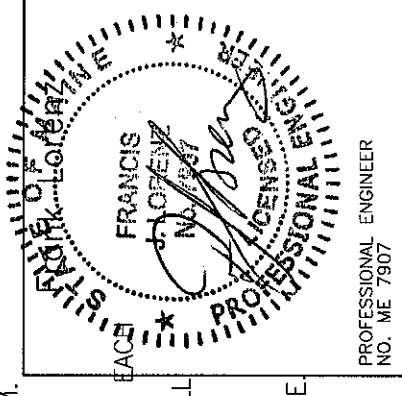
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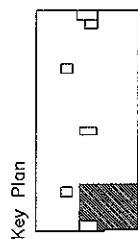
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Sheet No.

FP-1.0



PROFESSIONAL ENGINEER
NO. ME 7907



Revisions

AKF

engineers

1500 WALNUT STREET, SUITE 1400
PHILADELPHIA, PA 19102
215.735.7290 TEL. 215.735.6796 FAX
AKF PROJ. NO. P060106-E

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Sheet

**Fire Protection
Floor Plan**

Project

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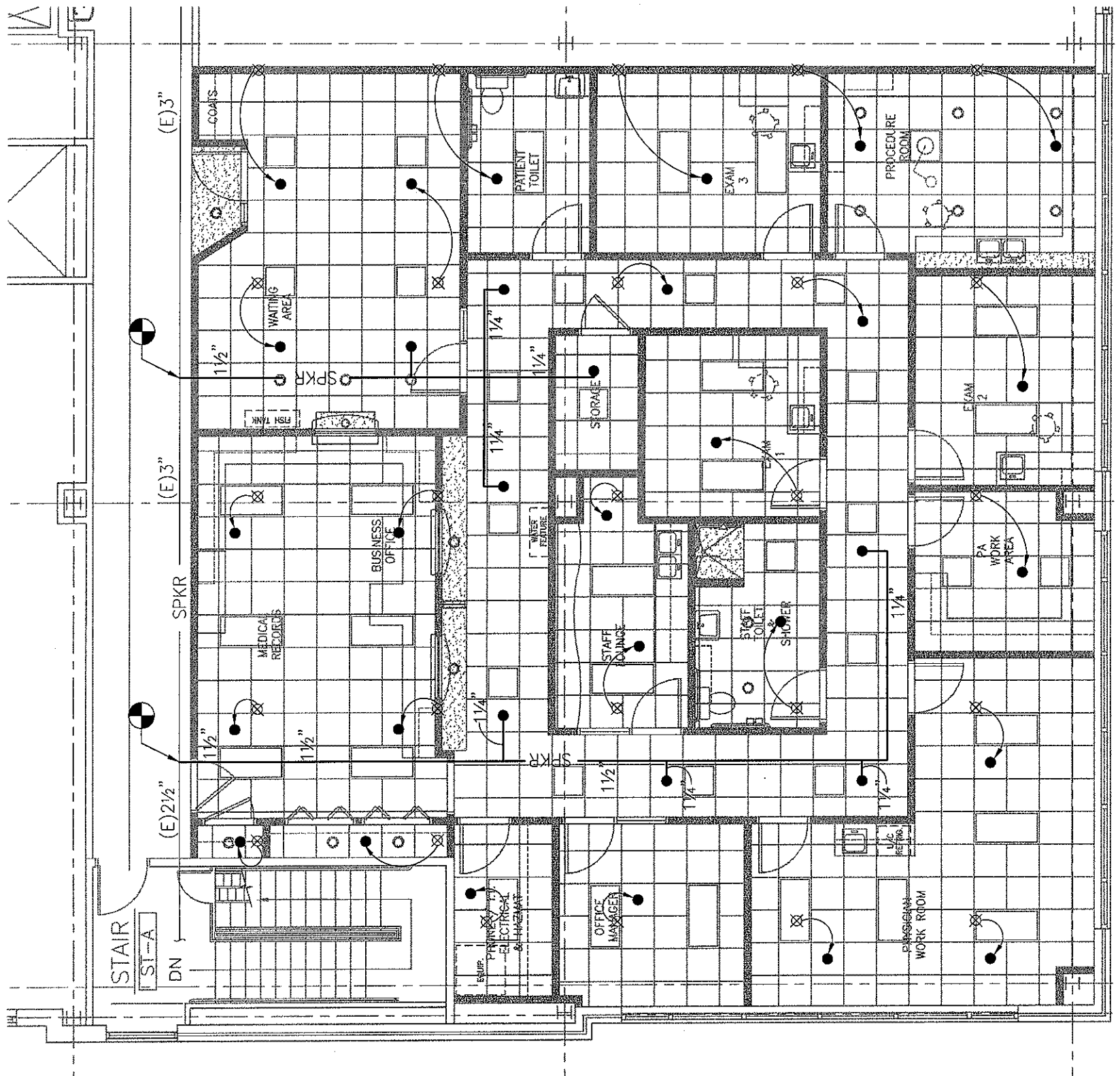
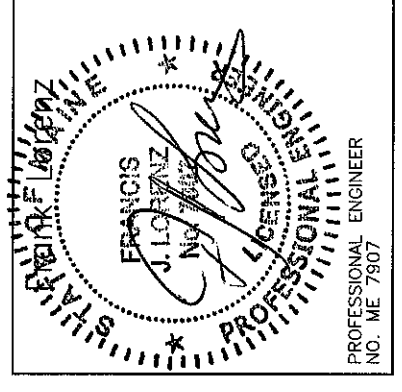
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Project No.

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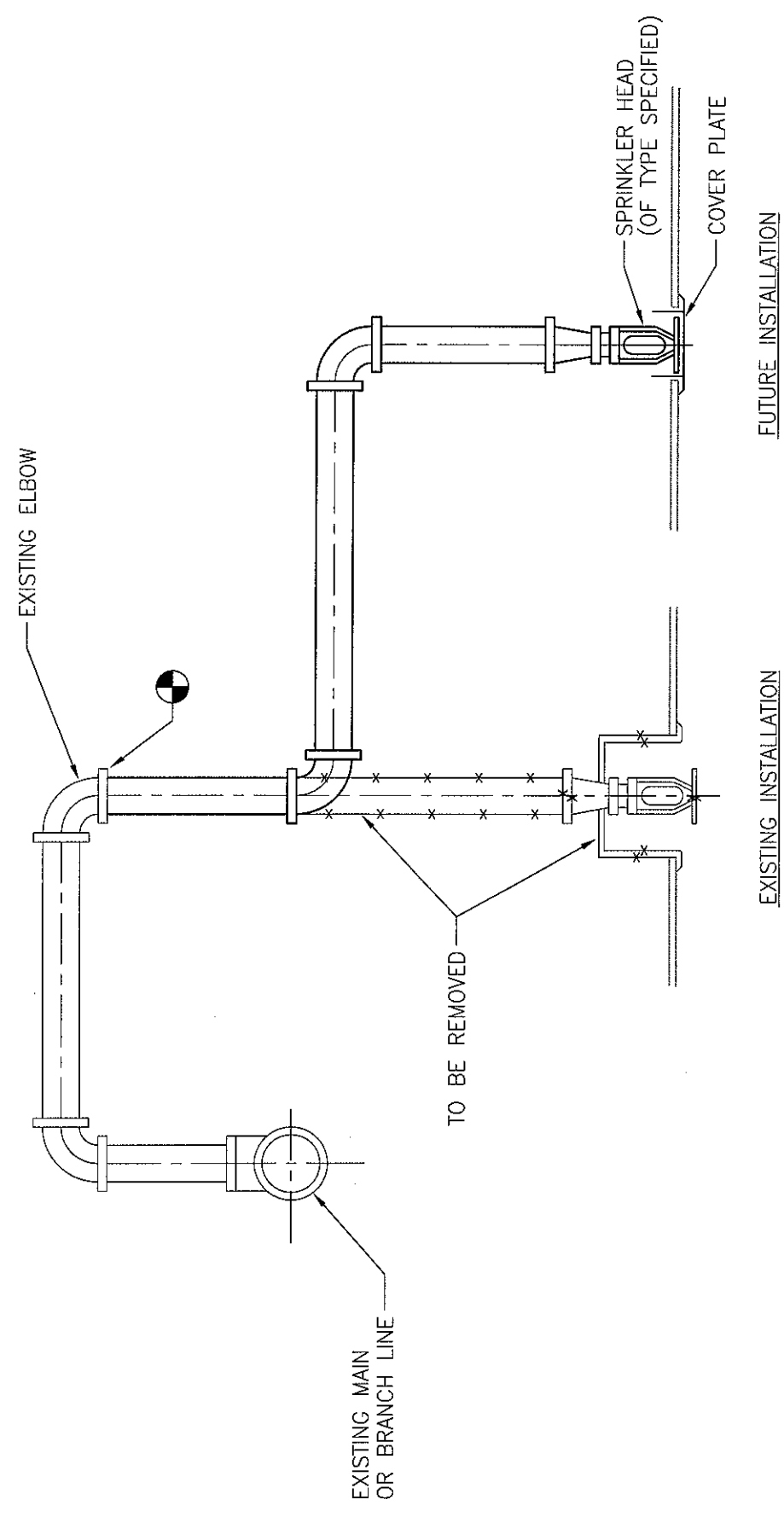


1 FLOOR PLAN
SCALE: 1/8" = 1'-0"

SPRINKLER HEAD SCHEDULE

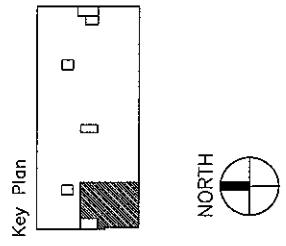
TYPE	DESIGNATION	UPRIGHT	PENDENT	FLUSH PLATE SPKR.	RECESSED	SIDEWALL (CHROME FINISH)	SIDEWALL (NATURAL BRONZE FINISH)	FLUSH PENDENT	DRY	QUICK RESPONSE	EXTENDED COVERAGE	EXIST SPR HD TO BE REMOVED/RELOCATED	EXIST SPRINKLER HD	MANUFACTURER					REMARKS			
														CENTRAL	RELIABLE	GRINNELL	STAR	VIKING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

- NOTES:**
1. PROVIDE ESCUTCHEONS WHEN PENETRATING EXPOSED WALL.
 2. COLOR SELECTION BY ARCHITECT.



TYPICAL SPRINKLER RELOCATION

LANDMARK HEALTHCARE FACILITIES, LLC
 839 North Jefferson Street
 Milwaukee, Wisconsin 53202
 Telephone: (414) 277-0500
 Facsimile: (414) 277-1055



Revisions

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Sheet
Fire Protection Schedules And Details

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F07-5256.00

Sheet No.
FP-3.0

