

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

Location of Construction: 367 Brighton Ave.		Owner: Maine Medical Center		Phone: 793-7536		Permit No: 000859	
Owner Address: C/O CFI 46 Gray Road, Falmouth, Me		Lessee/Buyer's Name: Omni Point Communications		Phone:		BusinessName:	
Contractor Name: TBD		Address:		Phone:		Permit Issued: AUG - 7 2000	
Past Use: Commercial / Hospital		Proposed Use: Commercial / Wireless Communications		COST OF WORK: \$ 25,000.00		PERMIT FEE: \$ 174.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: F-2 Type: 1B	
Proposed Project Description: Interior Renovations				Signature:		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: R-3 CBL: 121-C-006	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>[Signature]</i>	
Permit Taken By: Gayle		Date Applied For: August 4, 2000 GG				Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>see site plan exempt</i> Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

August 4, 2000

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED WITH REQUIREMENTS

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS
 CEO DISTRICT 3

ISSUED
 66 8/7

THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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 (include Portion of Building): 367 BRIGHTON AVENUE		
Total Square Footage of Proposed Structure: 154	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Number Chart# 121 Block# C Lot# 6	Owner: MAINE MEDICAL CENTER	Telephone#: (207) 793-7536 JANE LIBBY
Owner's Address: 40 CF1 46 BURY ROAD FARMINGTON ME 04105	Lessee/Buyer's Name (If Applicable) OMNIPONT COMMUNICATIONS MB OPERATIONS LLC	Cost Of Work: \$25000 Fee: \$174.00
Proposed Project Description: (Please be as specific as possible) UP TO NINE (9) PANEL - STYLE ROOF-TOP MOUNTED ANTENNAS WITH ASSOCIATED CASHING AND EQUIPMENT CABINETS		
Contractor's Name, Address & Telephone TBS		Rec'd By: Gay
Current Use: HOSPITAL	Proposed Use: WIRELESS COMMUNICATIONS	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must Include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

IF available also submit plans on ADOBE or CAD format

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

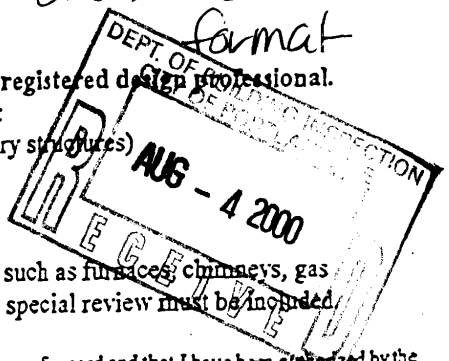
Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

Certification

I hereby certify that I am the Owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/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 of applicant: <i>[Signature]</i>	Date: 8/4/00
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Building Permit Fee: \$30.00 for the 1st \$1000.cost plus \$6.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum

BUILDING PERMIT REPORT

DATE: 6 Aug 2009 ADDRESS: 367 Brighton Ave CBL: 121-C-006
REASON FOR PERMIT: Interior Renovation (9 Rooftop Mounted Air Units)
BUILDING OWNER: Maine Medical Center
PERMIT APPLICANT: _____ (CONTRACTOR T.B. Ann)
USE GROUP: I-2 CONSTRUCTION TYPE: 1B CONSTRUCTION COST: 25000 PERMIT FEES: 174.00

The City's Adopted Building Code (The BOCA National Building code/1999 with City Amendments)
The City's Adopted Mechanical Code (The BOCA National Mechanical Code/1993)

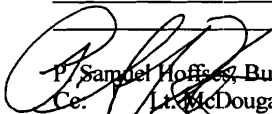
CONDITION(S) OF APPROVAL

This permit is being issued with the understanding that the following conditions are met: *1, *36, *37, *38

- *1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. Before concrete for foundation is placed, approvals from the Development Review Coordinator and Inspection Services must be obtained.
3. Foundation drain shall be placed around the perimeter of a foundation that consists of gravel or crushed stone containing not more than 10 percent material that passes through a No. 4 sieve.
4. Foundations anchors shall be a minimum of 1/2" in diameter, 7" into the foundation wall, minimum of 12" from corners of foundation and a maximum 6' O.C. between bolts.
5. Waterproofing and dampproofing shall be done in accordance with Section 1813.0 of the building code.
6. Precaution must be taken to protect concrete from freezing.
7. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed.
8. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating.
9. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code.
10. Sound transmission control in residential building shall be done in accordance with Chapter 12, Section 1214.0 of the City's Building Code.
11. Guardrails & Handrails: A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level.
12. Headroom in habitable space is a minimum of 7'6".
13. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 3/4" maximum rise.
14. The minimum headroom in all parts of a stairway shall not be less than 80 inches.
15. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue.
16. Each apartment shall have access to two (2) separate, remote and approved means of egress.
17. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hour, including fire doors with self closure's.
18. The boiler shall be protected by enclosing with (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment.

Handwritten initials or signature at the bottom right corner.

19. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the City's Building Code Chapter 9, Section 920.3.2 (BOCA National Building Code/1999), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):
 - In the immediate vicinity of bedrooms
 - In all bedrooms
 - In each story within a dwelling unit, including basements
20. A portable fire extinguisher shall be located as per NFPA #10. They shall bear the label of an approved agency and be of an approved type. (Section 921.0)
21. The Fire Alarm System shall be installed and maintained to NFPA #72 Standard.
22. The Sprinkler System shall be installed and maintained to NFPA #13 Standard.
23. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10 Section & Subsections 1023.0 & 1024.0 of the City's Building Code. (The BOCA National Building Code/1999)
24. Section 25 – 135 of the Municipal Code for the City of Portland states, "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".
25. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act Title 5 MRSA refers, shall obtain a certification from a design professional that the plans commencing construction of the facility, the builder shall submit the certification the Division of Inspection Services.
26. Ventilation and access shall meet the requirements of Chapter 12 Sections 1210.0 and 1211.0 of the City's Building Code. (Crawl spaces & attics).
27. All electrical, plumbing and HVAC permits must be obtained by Master Licensed holders of their trade. **No closing in of walls until all electrical** (min. 72 hours notice) **and plumbing inspections have been done.**
28. All requirements must be met before a final Certificate of Occupancy is issued.
29. All building elements shall meet the fastening schedule as per Table 2305.2 of the City's Building Code (The BOCA National Building Code/1996).
30. Ventilation of spaces within a building shall be done in accordance with the City's Mechanical code (The BOCA National Mechanical Code/1993). (Chapter M-16)
31. Please read and implement the attached Land Use Zoning report requirements.
32. Boring, cutting and notching shall be done in accordance with Sections 2305.3, 2305.3.1, 2305.4.4 and 2305.5.1 of the City's Building Code.
33. Bridging shall comply with Section 2305.16.
34. Glass and glazing shall meet the requirements of Chapter 24 of the building code. (Safety Glazing Section 2406.0)
35. All signage, shall be done in accordance with Section 3102.0 signs of the City's Building Code, (The BOCA National Building Code/1999).
- ~~36. All Antennas shall comply with the requirements of section 3109.0 of the Building Code BOCA 99~~
- ~~37. A roof structural analysis shall be done before install antennas~~
- ~~38. Any penetrations through fire rated assemblies shall comply with section 714.0~~


 P. Samuel Hoff, Building Inspector
 Ce. Lt. McDougall, PFD
 Marge Schmuckal, Zoning Administrator

PSH 1/26/00

****This permit is herewith issued, on the basis of plans submitted and conditions placed on these plans, any deviations shall require a separate approval.**

*****THIS PERMIT HAS BEEN ISSUED WITH THE UNDERSTANDING THAT ALL THE CONDITIONS OF THE APPROVAL SHALL BE COMPLETED. THEREFORE, BEFORE THE WORK IS COMPLETED A REVISED PLAN OR STATEMENT FROM THE PERMIT HOLDER SHALL BE SUBMITTED TO THIS OFFICE SHOWING OR EXPLAINING THAT THE CONDITIONS HAVE BEEN MET. IF THIS REQUIREMENT IS NOT RECEIVED YOUR CERTIFICATE OF OCCUPANCY SHALL BE WITHHELD.**

******ALL PLANS THAT REQUIRE A PROFESSIONAL DESIGNER'S SEAL, (AS PER SECTION 114.0 OF THE BUILDING CODE) SHALL ALSO BE PRESENTED TO THIS DIVISION ON AUTO CAD LT. 2000, OR EQUIVALENT.**

*******CERTIFICATE OF OCCUPANCY FEE \$50.00**

APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

OMNIPONT COMMUNICATIONS
MS OPERATIONS LLC
 Applicant 50 VISION BOULEVARD
E. PROVIDENCE RI 02914
 Applicant's Mailing Address
PETER COOKE AGENT (508) 554 6767
 Consultant/Agent/Phone Number

7/19/00
 Application Date
OMNIPONT ORIGIN HOSPITAL
 Project Name/Description
367 SUTTON AVENUE
 Address of Proposed Site

Description of Proposed Development:

INSTALLATION OF WIRELESS COMMUNICATIONS ANTENNAS AND ASSOCIATED
CABLE AND EQUIPMENT ON EXISTING ROOFTOP

Please Attach Sketch/Plan of Proposal/Development	Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
Criteria for Exemptions: See Section 14-523 (4)		
a) Within Existing Structures; No New Buildings, Demolitions or Additions	<u>YES</u>	<input checked="" type="checkbox"/>
b) Footprint Increase Less Than 500 Sq. Ft.	<u>YES</u>	<input checked="" type="checkbox"/>
c) No New Curb Cuts, Driveways, Parking Areas	<u>YES</u>	<input checked="" type="checkbox"/>
d) Curbs and Sidewalks in Sound Condition/ Comply with ADA	<u>NO</u>	<input checked="" type="checkbox"/>
e) No Additional Parking / No Traffic Increase	<u>YES</u>	<input checked="" type="checkbox"/>
f) No Stormwater Problems	<u>N/A</u>	<input checked="" type="checkbox"/>
g) Sufficient Property Screening	<u>YES</u>	<input checked="" type="checkbox"/>
h) Adequate Utilities	<u>YES</u>	<input checked="" type="checkbox"/>

Planning Office Use Only:

Exemption Granted Partial Exemption _____ Exemption Denied _____

Planner's Signature Janet K. [Signature] Date 7/19/00