



# PORTLAND MAINE

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Jeff Levine, AICP, Director  
Director of Planning and Urban Development

Tammy Munson  
Director, Inspections Division

### Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are **paid in full** to the Inspections Office, City of Portland Maine by method noted below:

Within 24-48 hours, upon receipt of an e-mailed invoice from Building Inspections, which signifies that my electronic permit application and corresponding paperwork have been received, determined complete, entered by an administrative representative, and assigned a permit number, I then have the following four (4) payment options:

- to provide an on-line electronic check or credit/debit card (we now accept American Express, Discover, VISA, and MasterCard) payment (along with applicable fees beginning July 1, 2014),
- call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone,
- hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall,
- or deliver a payment method through the U.S. Postal Service, at the following address:

City of Portland  
Inspections Division  
389 Congress Street, Room 315  
Portland, Maine 04101

Once my payment has been received, this then starts the review process of my permit. **After all approvals have been met and completed, I will then be issued my permit via e-mail.** No work shall be started until I have received my permit.

Applicant Signature: Steve Jones Date: 12/12/14

I have provided digital copies and sent them on: [Signature] Date: 12/12/14

NOTE: All electronic paperwork must be delivered to [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov) or by physical means ie; a thumb drive or CD to the office.

Room 315 - 389 Congress Street- Portland, Maine 04101 (207) 874-8703 - Fax: 874-8716 - TTY: 874-8936



## Commercial Interior & Change of Use Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

One (1) complete set of construction drawings must include:

Note: Construction documents for costs in excess of \$50,000.00 must be prepared by a Design Professional and bear their seal.

- Cross sections w/framing details
- Detail of any new walls or permanent partitions
- Floor plans and elevations
- Window and door schedules
- Complete electrical and plumbing layout.
- Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment or other types of work that may require special review
- Insulation R-factors of walls, ceilings, floors & U-factors of windows as per the IEBC 2009
- Proof of ownership is required if it is inconsistent with the assessors records.
- Reduced plans or electronic files in PDF format are required.
- Per State Fire Marshall, all new bathrooms must be ADA compliant.

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

For additions less than 500 sq. ft. or that does not affect parking or traffic, a site plan exemption should be filed including:

- The shape and dimension of the lot, footprint of the existing and proposed structure and the distance from the actual property lines.
- Location and dimensions of parking areas and driveways, street spaces and building frontage.
- Dimensional floor plan of existing space and dimensional floor plan of proposed space.

A Minor Site Plan Review is required for any change of use between 5,000 and 10,000 sq. ft. (cumulatively within a 3-year period)

**Fire Department requirements.**

The following shall be submitted on a separate sheet:

- Name, address and phone number of applicant **and** the project architect.
- Proposed use of structure (NFPA and IBC classification)
- Square footage of proposed structure (total and per story)
- Existing and proposed fire protection of structure.
- Separate plans shall be submitted for
  - a) Suppression system
  - b) Detection System (separate permit is required)
- A separate Life Safety Plan must include:
  - a) Fire resistance ratings of all means of egress
  - b) Travel distance from most remote point to exit discharge
  - c) Location of any required fire extinguishers
  - d) Location of emergency lighting
  - e) Location of exit signs
  - f) NFPA 101 code summary
- Elevators shall be sized to fit an 80" x 24" stretcher.

For questions on Fire Department requirements call the Fire Prevention Officer at (207) 874-8405.

**Please submit all of the information outlined in this application checklist. If the application is incomplete, the application may be refused.**

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

**Permit Fee: \$25.00 for the first \$1000.00 construction cost, \$11.00 per additional \$1000.00 cost**

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



# 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.

<b>Address/Location of Construction:</b> MAINE MEDICAL CENTER - 335 BRIGHTON AVE		
<b>Total Square Footage of Proposed Structure:</b>		
<b>Tax Assessor's Chart, Block &amp; Lot</b> Chart#      Block#      Lot#	<b>Applicant Name:</b> STEVE JANOSCO HEBERT CONSTRUCTION <b>Address</b> 9 GOULD RD <b>City, State &amp; Zip</b> LEWISTON, ME 04240	<b>Telephone:</b> 783-2091 OR 212-2177  <b>Email:</b> SJANOSCO@HEBERTCONSTRUCTION.COM
<b>Lessee/Owner Name :</b> (if different than applicant) <b>Address:</b>  <b>City, State &amp; Zip:</b>  <b>Telephone &amp; E-mail:</b>	<b>Contractor Name:</b> HEBERT CONST. (if different from Applicant) <b>Address:</b> 9 GOULD ROAD <b>City, State &amp; Zip:</b> LEWISTON, ME 04240 <b>Telephone &amp; E-mail:</b> 783-2091 OR 212-2177	<b>Cost Of Work:</b> \$ 112,000.00  <b>C of O Fee:</b> \$ _____  <b>Historic Rev \$</b> _____  <b>Total Fees :</b> \$ _____
<b>Current use (i.e. single family)</b> BATHROOMS <b>If vacant, what was the previous use?</b> _____ <b>Proposed Specific use:</b> BATHROOM RENOVATIONS / UPGRADES <b>Is property part of a subdivision?</b> ___ <b>If yes, please name</b> _____ <b>Project description:</b> EXISTING BATHROOM RENOVATIONS (SEE LOCATIONS ATTACHED)		
<b>Who should we contact when the permit is ready:</b> STEVE JANOSCO		
<b>Address:</b> 9 GOULD RD		
<b>City, State &amp; Zip:</b> LEWISTON, ME 04240		
<b>E-mail Address:</b> SJANOSCO@HEBERTCONSTRUCTION.COM		
<b>Telephone:</b> 212-2177		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

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](http://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:** Steve Janosco      **Date:** 12/12/14

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



# Certificate of Design Application

From Designer: Ann Fontaine-Fisher, PDT Architects  
 Date: 12-10-2014  
 Job Name: Maine Medical Center - Brighton Campus - Toilet Room Renovations  
 Address of Construction: 335 Brighton Avenue

## 2009 International Building Code

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

Building Code & Year 2009 IBC Use Group Classification (s) HEALTHCARE

Type of Construction TYPE I

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IRC YES

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

Supervisory alarm System? YES Geotechnical/Soils report required? (See Section 1802.2) NO

### Structural Design Calculations

NA Submitted for all structural members (106.1 - 106.11)

### Design Loads on Construction Documents (1603)

Uniformly distributed floor live loads (7603.11, 1807)

Floor Area Use	Loads Shown

### Wind loads (1603.1.4, 1609)

	Design option utilized (1609.1.1, 1609.6)
	Basic wind speed (1809.3)
	Building category and wind importance Factor, $I_w$ table 1604.5, 1609.5
	Wind exposure category (1609.4)
	Internal pressure coefficient (ASCE 7)
	Component and cladding pressures (1609.1.1, 1609.6.2.2)
	Main force wind pressures (7603.1.1, 1609.6.2.1)

### Earth design data (1603.1.5, 1614-1623)

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

	NA	Live load reduction
		Roof live loads (1603.1.2, 1607.11)
		Roof snow loads (1603.7.3, 1608)
		Ground snow load, $P_g$ (1608.2)
		If $P_g > 10$ psf, flat-roof snow load $P_f$
		If $P_g > 10$ psf, snow exposure factor, $C_e$
		If $P_g > 10$ psf, snow load importance factor, $I_s$
		Roof thermal factor, $C_t$ (1608.4)
		Sloped roof snowload, $P_s$ (1608.4)
		Seismic design category (1616.3)
		Basic seismic force resisting system (1617.6.2)
		Response modification coefficient, $R_f$ and deflection amplification factor $C_d$ (1617.6.2)
		Analysis procedure (1616.6, 1617.5)
		Design base shear (1617.4, 16175.5.1)
		<b>Flood loads (1803.1.6, 1612)</b>
		Flood Hazard area (1612.3)
		Elevation of structure
		<b>Other loads</b>
		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)



# Accessibility Building Code Certificate

Designer: Ann Fontaine-Fisher, PDT Architects

Address of Project: 335 Brighton Avenue, Portland, ME 04102

Nature of Project: Renovations of three existing toilet rooms  
and conversion of an office into a toilet room.  
New fixtures and finishes. M.E.P. is by GC.

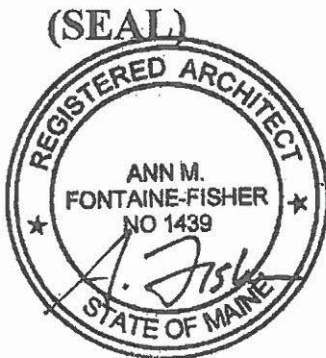
The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act. Residential Buildings with 4 units or more must conform to the Federal Fair Housing Accessibility Standards. Please provide proof of compliance if applicable.

Signature: *Ann Fontaine-Fisher*  
Principal  
Title: Maine Licensed Architect.

Firm: PDT Architects

Address: 49 Dartmouth St.  
Portland, ME 04101

Phone: 207-775-1059 x331



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# Certificate of Design

Date: 12-10-2014

From: Ann Fontaine-Fisher, PDT Architects

These plans and / or specifications covering construction work on:

Maine Medical Center - Brighton Campus - Toilet Room Renovations

335 Brighton Avenue, Portland, ME 04102

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the **2009 International Building Code** and local amendments.



Signature: Ann Fontaine-Fisher  
Principal

Title: Maine Licensed Architect.

Firm: PDT Architects

Address: 49 Dartmouth St.

Portland, ME 04101

Phone: 207-775-1059 x331

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