

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-041	Issue Date: PERMIT ISSUED	CBL: 126 D001001
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Location of Construction: 555 FOREST AVE	Owner Name: CENTER FOR GRIEVING CHILD	Owner Address: PO BOX 1438	Phone:
Business Name:	Contractor Name: Johnson & Jordan	Contractor Address: 18 Mussey Road Scarborough	Phone: 807 5305 207 8838345
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: CITY OF PORTLAND

Past Use: Commercial	Proposed Use: Commercial : Install a Trane heating system	Permit Fee: \$960.00	Cost of Work: \$93,477.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: HVAC Type NA 2/19/06 C. D. King	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: dmartin	Date Applied For: 07/11/2006	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.. 	Special Zone or Reviews <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"/> Date: _____	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 Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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CERTIFICATION

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

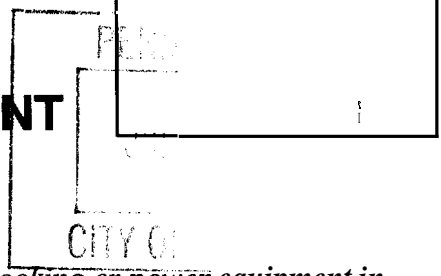
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



FILL IN AND SIGN WITH INK

126 S 001

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location / CBL 555 Forest Ave Use of Building Office Date 7-11-06
 Name and address of owner of appliance Center for Graying Children
555 Forest Ave Portland, Me
 Installer's name and address Johnson + Jordan
Searborough Me Telephone 883-8345

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Heater

U.L. Approved Yes NO

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

IF **NO** Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # _____
- Gas # PNT 5911
- Other _____

Type of Chimney:

Masonry Lined
Factory built _____

Metal
Factory Built U.L. Listing # _____

Direct Vent
Type _____ uL# _____

Type of Fuel Tank

- Oil
- Gas

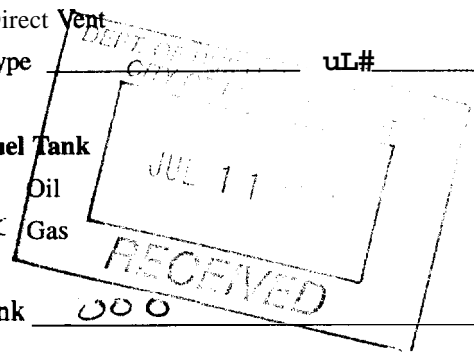
Size of Tank 000

Number of Tanks 1

Distance from Tank to Center of Flame 500 feet.

Cost of Work: \$ 4347

Permit Fee: \$ _____



Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer [Signature]

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

#17334

City of Portland, Maine - Building or Use Permit

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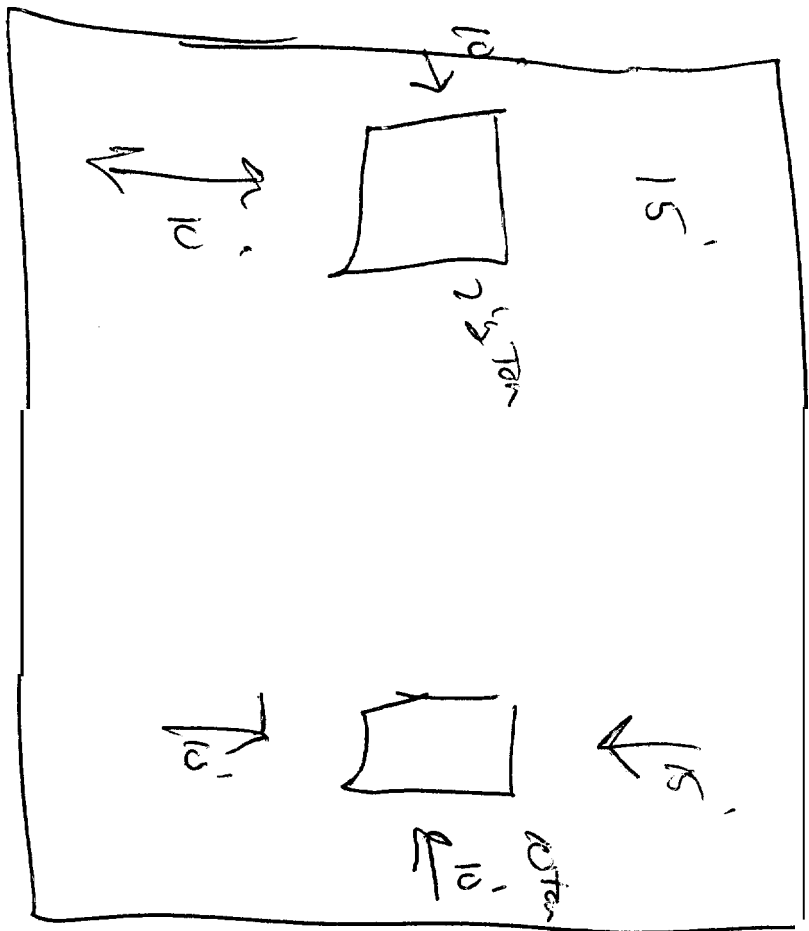
Permit No: 06-1041	Date Applied For: 07/11/2006	CBL: 126 D001001
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Location of Construction: 555 FOREST AVE	Owner Name: CENTER FOR GRIEVING CHILD	Owner Address: PO BOX 1438	Phone:
Business Name:	Contractor Name: Johnson & Jordan	Contractor Address: 18 Mussev Road Scarborough	Phone (207) 883-8345
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Commercial : Install a Trane heating system	Proposed Project Description: Install a Trane heating system w/ 1000
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Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 07/19/2006**Note:** **Ok to Issue:**

1) Tim Shelley P.E. Or other licensed engineer must provide a "special inspections" Applicant notified.



93477

SEI

SHELLEY ENGINEERING, INC.

STRUCTURAL CONSULTANTS

June 19,2006
SEI Job No. 2006-119

Mr. Mark Chaloupecky
Port City Architecture
65 Newbury Street
Portland, ME 04101

Subject: RTU Relocation

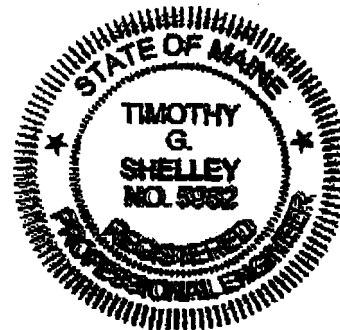
Mark:

Per your request, we have analyzed the roof framing for the building located at 555 Forest Avenue for the relocation of several RTU's. The roof framing consists of W10x19 girders spanning over the top of wide flange columns (cantilevered construction) with W10x12 beams spaced at approximately four feet on center spanning between the girders. The W10x12 roof beams support metal roof deck with 3 1/2" of lightweight air entrained concrete with a rubber membrane and ballasted roof system on top of that.

We have determined that the existing roof steel is adequate to support the RTU's in the proposed locations. However, we do not feel that the roof deck is adequate to support any additional load from the RTU's. We recommend the addition of intermediate steel between the W10x12 beams for support of the RTU's where they bear on the roof deck. Refer to sketches SK1 & SK2 for intermediate steel framing and its attachment to the existing steel. Please feel free to contact me to discuss any questions or concerns you may have.

Regards,
Shelley Engineering, Inc.

Timothy G. Shelley
Timothy G. Shelley, P.E.

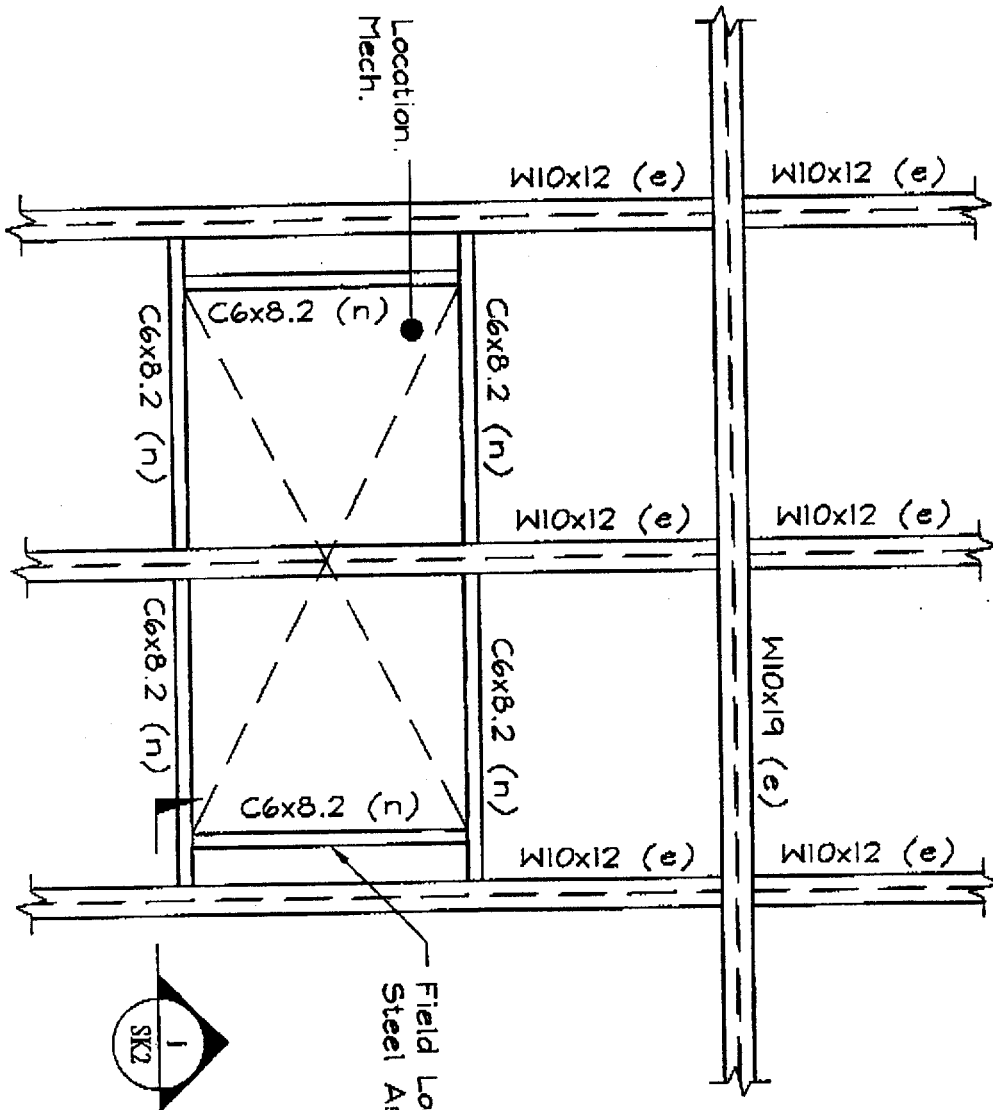


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New RTU Location.
Refer To Mech.
Drawings.

PART PLAN - RTU SUPPORT FRAMING

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



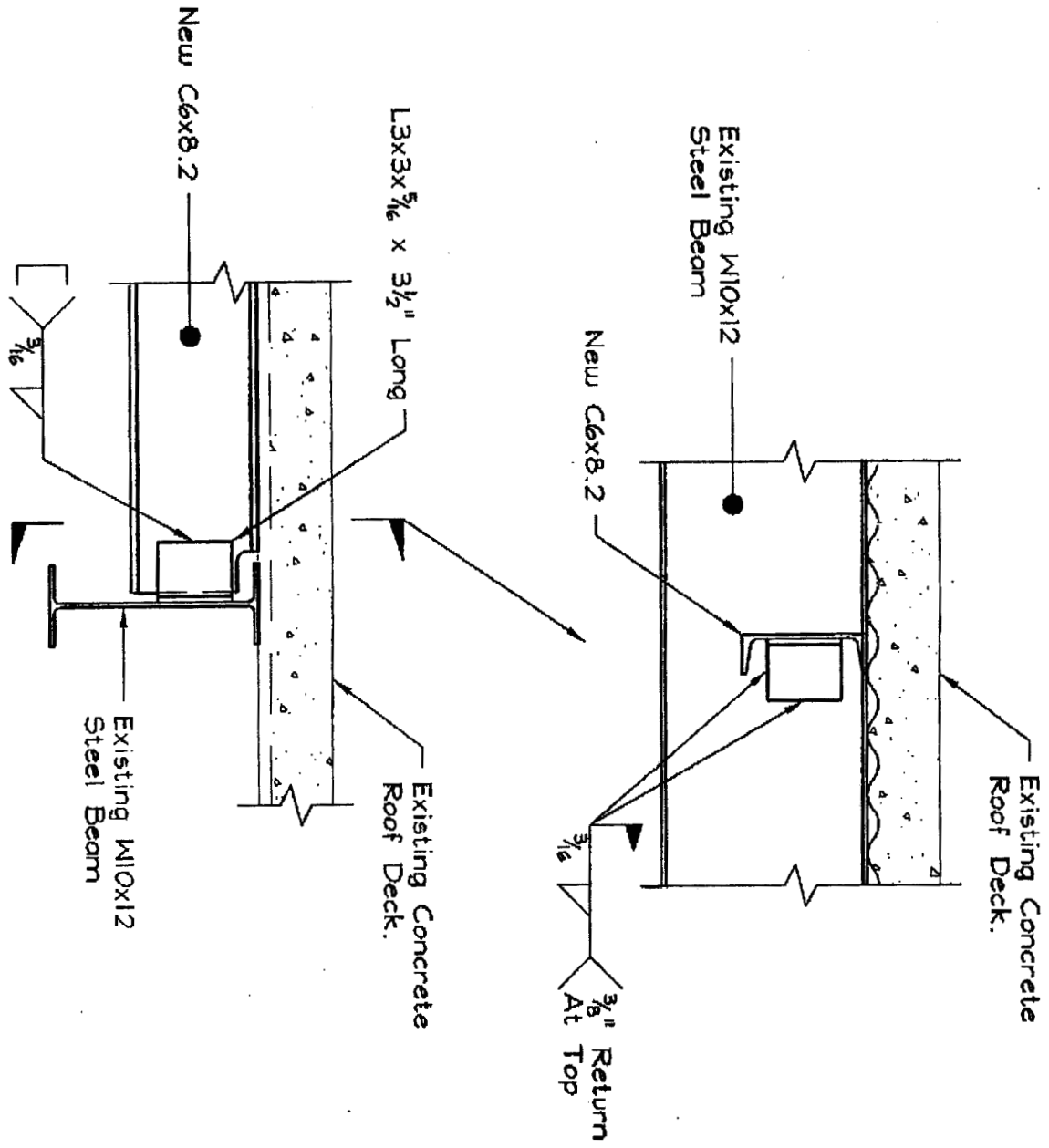
M:\2006-119\Drawings\2006-119sl.dwg PLOTTED: Jun 20, 2006 - 10:36am

SEI
SHELLEY ENGINEERING, INC.
 STRUCTURAL CONSULTANTS
 90 BRIDGE STREET
 WESTBROOK, MAINE 04092
 PHONE (207) 854-5465
 FAX (207) 854-8706
 WWW.SHELLEYENGINEERING.COM

555 FOREST AVENUE
RTU RELOCATION

DRAWN BY: PHF	DATE: 06-20-06	SKETCH: SK1
CHECKED BY: TGS	SCALE: AS NOTED	JOB No.: 2006-119

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SECTION

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

1
SKI

TYPICAL C6x8.2 END CONNECTION

SEI

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 FAX (207) 854-8706
 WWW.SHELLEYENGINEERING.COM

**555 FOREST AVENUE
 RTU RELOCATION**

DRAWN BY: PHF	DATE: 06-20-06	SKETCH: SK2
CHECKED BY: TGS	SCALE: AS NOTED	JOB NO.: 2006-119

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