Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BU

Please Read Application And Notes, If Any, Attached

PERMIT

anon an

P-REMITISSUED

or cd

provided that the person or persons, fi of the provisions of the Statutes of Ma the construction, maintenance and use this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Not ation o must b spectio nd writt give bermissi brocure befo this bu ng or p hereof i sed-in. 2 lath or oth HOI NOTICE IS REQUIRED.

e and of the

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

pting this permit shall comply with all

aces of the City of Portland regulating

f buildings and structures, and of the application on file in

OTHER REQUIRED APPROVAUS

Fire Dept. CAT. O. Saulesw

Health Dept. _____

Appeal Board _

Other _____ Department Name

PENALTY FOR REMOVING THIS CARD

389 Congress Street, Location of Construction:	07101 1Cl.		o, rax:	(207) 874-871		09-1191			184 A	001001
619 BRIGHTON AVE	2	Owner Name:	WODI.	atromps co	1	r Address:			Phone:	
Business Name:	<u> </u>	CREATIVE V		SYSTEMS	+	CONGRESS				
Dusiness Hame.		Contractor Name	2:		Contr	actor Address:			Phone	
Lessee/Buyer's Name					<u> </u>					
Ecseci Bayer s Manie		Phone:		ļ	1	t Type:				Zone:
				<u> </u>	Alte	erations - Cor	mmercial			1
Past Use:	~	Proposed Use:			Permi	it Fee:	Cost of Wo	r k:	CEO District:	
Vacant Medical Office	Building	Commercial -				\$1,020.00	\$100,0	00.00	5	
		Building Reno			FIRE	DEPT:	Approved	INSPEC	CTION:	
		office building			1	i	Denied	Use Gro	oup:	Type:
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Proposed Project Description					1	(G			T. A.	lala
Professional Office Bu	Ilding Renova	te for Creative W	Vork Sy	stems a	Signat		<u>{/</u>	Signatu		418109
building interior demo	& renovations	i			PEDE	STRIAN ACT	IVITIES DIS	TRICT (P	(A.D)	7
					Action	n: Approv	ved [Ap	proved w/0	Conditions	Denied
						L.: • •	V	•	;	
					Signat	ture:			Date:	
Permit Taken By:		pplied For:	l			Zoning	Approva	al		
Ldobson	10/2	3/2009								
1. This permit application does not preclude			ne Special Zone or Revie		ws Zoning Appeal			Historic Preservation		
Applicant(s) from	meeting applic	cable State and	Sh	oreland		Varianc	e		Not in Distri	ict or Landmari
Federal Rules.			1					Ī		
2. Building permits d	lo not include	plumbing,	Ŭ₩	etland		Miscella	aneous	1	Does Not Re	quire Review
septic or electrical	work.		ļ							
3. Building permits a	re void if worl	k is not started	Flo	ood Zone		[] Condition	onal Use		Requires Re	view
within six (6) mon										
False information		a building	☐ Su	bdivision		Interpre	tation		Approved	
permit and stop all	work					ļ				
			Sit	e Plan		Approve	ed		Approved w	/Conditions
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	NOV 20	2009		->1	Mo	4				
•	1101 2 3					1				
	City of Po	rtland								
			C	ERTIFICATION	ON					
I hereby certify that I ar	n the owner of	record of the na	med pro	operty, or that th	ne prop	posed work is	s authorized	by the	owner of reco	rd and that
I have been authorized I										
jurisdiction. In addition										
shall have the authority	to enter all are	eas covered by su	ich pern	nit at any reasor	nable h	our to enfor	ce the prov	ision of	the code(s) ap	oplicable to
such permit.										
SIGNATURE OF APPLICA	NT			ADDRESS	<u> </u>		DATE	3	PHO	ONE
RESPONSIBLE PERSON II	N CHARCE OF Y	VODY TITLE					DATE	,	DUIC	ONE

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 09-1191 10/23/2009 184 A001001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Owner Address: Phone: **CREATIVE WORK SYSTEMS** 443 CONGRESS ST 619 BRIGHTON AVE Business Name: Contractor Name: Contractor Address: Phone **TBD** Phone: Permit Type: Lessee/Buyer's Name Alterations - Commercial Proposed Project Description: Proposed Use: Commercial - Professional Office Building Renovate existing Professional Office Building Renovate for Creative Work Systems a medical office building to a professional office building for building interior demo & renovations therapeutic services interior demo & renovations 10/29/2009 Dept: Zoning **Status:** Approved with Conditions Reviewer: Marge Schmuckal **Approval Date:** Ok to Issue: Note: 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that Separate permits shall be required for any new signage. 3) This property shall remain a professional office use. Any change of use shall require a separate permit application for review and approval. This property is located within an R-P Residential Professional Zone which limits the type of offices allowed. 11/19/2009 Dept: Building **Status:** Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** Ok to Issue: ✓ Note: 1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process. 2) All penetratios through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712. 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approrval prior to work. Dept: Fire **Status:** Approved with Conditions Reviewer: Capt Keith Gautreau **Approval Date:** 11/03/2009 Note: Ok to Issue: 1) Installation of a Fire Alarm system requires a Knox Box to be installed per city crdinance 2) All fire alarm records required by NFPA 72 should be stored in an approved cabinet located at the FACP and keyed alike, labeled "FIRE ALARM RECORDS". 3) All construction shall comply with NFPA 101

- 4) Fire Alarm system shall be maintained. If system is to be off line over 4 hours a fire watch shall be in place. Dispatch notification required 874-8576.
- 5) The fire alarm system shall comply with NFPA 72 and Fire Department Technical Standard. A compliance letter is required.
- 6) Any cutting or welding operations require a seperate permit from the Fire dept.
- The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 8) Occupancies with an occupant load of 100 persons or more require panic harware on all doors serving as a means of egress.
- 9) Emergency lights and exit signs are required. Emergency lights and exit signs are required to be labeled in relation to the panel and circuit.
- 10 Emergancy lights are required to be tested at the electrical panel on the same circuit as the lighting for the area they serve.

Location of Construction:	Owner Name:	-	Owner Address:	Phone:	
619 BRIGHTON AVE	CREATIVE WORK SY	STEMS	443 CONGRESS ST		
Business Name:	Contractor Name:		Contractor Address:	Phone	
	TBD				
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Commercial		

- 11 Sprinkler protection shall be maintained.
 - Where the system is to be shut down for maintenance or repair, the system shall be checked at the end of each day to insure the system has been placed back in service.
- 12 System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

Comments:

10/28/2009-mes: this looks like a general office use now - general offices are not permitted, only professional offices - I left a message with the architect. - on hold

10/29/2009-mes: Received a description of the use - It is for professional offices which is allowed and a continued use. - passing permit on for further review.- Creative Works System has a P & S on the property

11/18/2009-jmb: Left vcmsg for Ann C. For details, stamped plans, closet under middle communicating stair A1.1, roof reference details for new RTU's, skylights and laundry shoot on A2.1, chases on A1.1 and A1.2

11/19/2009-jmb: Anne C. Clarified code questions and will come in to stamp the plans, ok toi issue

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

ngnature of Applicant/Designee

Signature of Inspections Official

Data

11/19/09

PERMIT ISSUED

NOV 2 0 2009

City of Portland

CBL: 184 A001001

Building Permit #: 09-1191

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: 619	Brighton Ave	
Total Square Footage of Proposed Structure/A	1 7 - 4	5 SF
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	-
Chart# Block# Lot#	Name Creative Work Systems	207.879.1140
184 A I	Address 443 Congress St	
	City, State & Zip Portland ME 0410) l
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
	Name Mercy Hospital	Work: \$ 100,000
	Address 144 State St	C of O Fee: \$
	City, State & Zip Portland ME 04101	Total Fee: \$
Current legal use (i.e. single family) VACA If vacant, what was the previous use? MEDI Proposed Specific use: OFFICE Is property part of a subdivision? NO Project description: RENOVATION TO AN OFFICE BUILDING: REMOVAL ENUALISE LOOMS, 2 NEW DATHR	Thurplife BUILDING Thurplife Building If yes, please name EXISTING MEDICAL OFFICE BOOF CABINETRY & SINKS, SELECT	tive Demo to
Contractor's name: TBP		
Address:		
City, State & Zip	T	elephone:
Who should we contact when the permit is read	dy: Anne Callender armited	elephone: 775.2696 x 105
Mailing address: 19 Commercial 5	St Portland ME 04101	
Please submit all of the information	outlined on the applicable Checkli	st. 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 nenț Department may request additional information prior to the issuance of a permit. For f download copies of this form and other applications visit the Inspections Division on-line at www. 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 that I have been authorized by the owner to make the owner the owner to make the owner to make the owner to make the owner the owner to make the owner to make the owner to make the owner the owner to make the owner to make the owner to make the owner the owner to make the owner the owner to make the owner the owner to make the owner t that I have been authorized by the owner to make this application as his/her authorized agent laws of this jurisdiction. In addition, if a permit for work described in this application authorized representative shall have the authority to enter all areas covered by this provisions of the codes applicable to this permit.

_ Date: 10.14.09

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

From:

"Susan Percy" <spercy@creativeworksystems.com>

To:

"Marge Schmuckal" <MES@portlandmaine.gov>, <anne@whipplecallender.com>

Date: Subject:

10/29/2009 11:06:32 AM RE: 619 Brighton Avenue

Hi Marge.

- msidered to be a buildy with offers
Professional Offers I've just left you a message confirming that it was indeed Joe Malone and me that met with you early August regarding the property at 619 Brighton Ave. As we discussed at that meeting, CWS provides therapeutic services to people with disabilities on a scheduled basis through a recommendation from physicians. We would be using the building for speech therapy, physical therapy and other clinical services Monday through Friday. We would have billing and support services of a professional nature on the second floor that manages the health care service obtained. Eleven people in the operations department would be there on a full time basis. Clinicians are in the building based on appointments with clients.

If I recall you thought that this continued under the previous use as a Health Care Facility.

We won't be doing surgery though!

Let me know if there's anything else you need from me

Thanks.

Susan

----Original Message----

From: Marge Schmuckal [mailto:MES@portlandmaine.gov]

Sent: Thursday, October 29, 2009 9:36 AM To: Susan Percy; anne@whipplecallender.com

Subject: Re: 619 Brighton Avenue

Thank you, Anne. I did meet with a woman and the realtor. I didn't remember the name of organization. I look forward to her call. I think I left her a message also. What was described at that time would be considered a professional office. I look forward to getting this resolved quickly.

Marge

>>> Anne Callender <anne@whipplecallender.com> 10/28/2009 5:04:12 PM

Hello Marge -

I received your voice message this afternoon in regard to 619 Brighton

Avenue's building permit application. You did meet with Susan Percy of

Creative Work Solutions about this application. She will give you a call tomorrow to clarify the application and answer your questions.

Sincerely, Anne

Anne Callender, RA, LEED AP Whipple - Callender Architects 19 Commercial Street Portland, ME 04101

P 207.775.2696 ext 105 F 207.775.3631 www.whipplecallender.com



Certificate of Design Application

From Designer:	Anne Callender		
Date:	10.14.09		
Job Name:	Creative Work Syst	IMS	
Address of Construction:	619 Brighton Ave		
	J		
Const	2003 International I ruction project was designed to the	_	is listed below.
	ruction project was designed to the 35 / INTERLOC CENOVATK		Ta listed below:
1971 1901 1901 1971 1990 - Philippe Code 8- Vocation	1984? Use Group Classification	(a) 13	
	•	(S) <u>10</u>	
Type of Construction \underline{TY}			estimate a solomonia.
Will the Structure have a Fire sup	opression system in Accordance with So	ection 903.3.1 of the	2003 IRC <u>EXISTING SYSTEM</u>
Is the Structure mixed use? N	O If yes, separated or non sepa	rated or non separate	d (section 302.3)
Supervisory alarm System?YE	Geotechnical/Soils report re	quired? (See Section	1802.2) <u>NO</u>
		_	
Structural Design Calculations	S EXISTING NO STRUCTU	RAL	Live load reduction
Submitted for all	structural members (106.1 – 106.11)		Roof live loads (1603.1.2, 1607.11)
Design Loads on Construction	Documents (1603)		Roof snow loads (1603.7.3, 1608)
Uniformly distributed floor live load			Ground snow load, <i>Pg</i> (1608.2)
Floor Area Use	Loads Shown		If $Pg > 10$ psf, flat-roof snow load pf
			If $P_g > 10$ psf, snow exposure factor, C_e
			If $P_g > 10$ psf, snow load importance factor,
			Roof thermal factor, $_{G}$ (1608.4)
			Sloped roof snowload, P ₅ (1608.4)
Wind loads (1603.1.4, 1609)			Seismic design category (1616.3)
Design option utili	zed (1609.1.1, 1609.6)		Basic seismic force resisting system (1617.6.2)
Basic wind speed (,		Response modification coefficient, R and
Building category a	and wind importance Factor, _b , table 1604.5, 1609.5)		deflection amplification factor $_{G}$ (1617.6.2)
Wind exposure cat			Analysis procedure (1616.6, 1617.5)
Internal pressure coe			Design base shear (1617.4, 16175.5.1)
	ding pressures (1609.1.1, 1609.6.2.2) sures (7603.1.1, 1609.6.2.1)	Flood loads (1	1803.1.6, 1612)
Earth design data (1603.1.5, 16	,		Flood Hazard area (1612.3)
Design option utili	•		Elevation of structure
Seismic use group		Other loads	
•	coefficients, SDs & SDI (1615.1)		Concentrated loads (1607.4)
Site class (1615.1.5)			Partition loads (1607.5)
			Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404



Certificate of Design

Date:

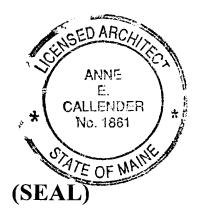
From:

Whipple Callender Amchitects

These plans and / or specifications covering construction work on:

Renovations to 619 Brighton Are Office Building for Creative Work Systems

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the 2003 International Building Code and local amendments.



Title:

Architect, Principal

Firm:

Whipple Callender Architects

Address: 19 Commercial St

Portland ME 04101

Phone:

207.775.2696 X 105

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov



(SEAL)

Accessibility Building Code Certificate

Anne Callender for Whipple Callender Architects Designer:

619 Brighton Avenue Address of Project:

ANNE

CALLENDER

Renovation of existing medical office Nature of Project:

building to office building for Creative Work

Systems. Selective demo, 2 new bathrooms, enlarging rooms & cosmetic fixes.

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.

Title:

Whipple-Callender Architects Firm:

Address: 19 Commercial St

Portland ME 04101

207 775. 2696 x 105

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov

Continental Consulting

415 Wilson Pond Road North Monmouth, Maine 04265 PH/FAX: 207-933-3877 Email: john.dumont@fairpoint.net

www.continentalconsulting.net

September 16, 2009

Mr. Stephen Fortier Creative Work Systems 443 Congress St. Portland, ME 04101

Re: Bulk Asbestos Sampling of Selected Interior Wall Areas at 619 Brighton Avenue

Dear Mr. Fortier:

On September 8, 2009, Continental Consulting collected three bulk samples of wallboard material removed from areas where planned demolition activities will commence in the near future at 619 Brighton Avenue. Two of the sample locations were selected on the 1st floor, and are referred to as Sample area "A" and "B". The third area, referred to as sample area "C", was located on the 2d floor. The first floor area was reportedly renovated in 1997. A site plan provides the exact location of the test areas.

Each of the areas evaluated were breeched so as to provide visual inspection of the interior surface materials. Areas "A" and "B" revealed that the wall surface consisted of interior metal wall studs and fiberglass insulation, with exterior windows and masonry located beyond. Area "C" consisted of 1-1/2" rigid foam insulation with concrete masonry units (CMUs) located beyond.

Test results were submitted to AmeriSci of Carson CA on September 8, 2009. The samples were tested for the presence of asbestos. Results from AmeriSci, including an additional analysis of the joint compound, revealed that there was no asbestos presence in any of the sample materials analyzed. A copy of the Lab Report is provided with the Phase II Limited Subsurface Investigation.

The results of this report are limited to the areas tested for asbestos. Should demolition activities extend beyond the scope of this report, those areas should be similarly evaluated for the presence of suspect asbestos containing materials.

Sincerely,

John W. Dumont, Jr



AmeriSci Los Angeles

24416 S. Main Street, Ste 308 Carson, California 90745 TEL: (310) 834-4868 • FAX: (310) 834-4772

FACSIMILE TELECOPY TRANSMISSION

To: John Dumont

From:

Arturo A. Aldana

Continental Consulting

AmeriSci Job #:

909091258

Fax #:

Subject:

PLM 48 hour Results

Client Project: Brighton Ave.

john.dumont@fairpoint.net

Date: Saturday, September 12, 2009

Number of Pages:

Time: 13:29:51

Comments:

CONFIDENTIALITY NOTICE: Unless otherwise indicated, the information contained in this communication is confidential information intended for use of the individual named above. If the reader of this communication is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is prohibited. If you have received this communication in error, please immediately notify the sender by telephone and return the original message to the above address via the US Postal Service at our expense. Preliminary data reported here will be verified before final report is issued. Samples are disposed of in 60 days or unless otherwise instructed by the protocol or special instructions in writing. Thank



AmeriSci Los Angeles

24416 S. Main Street, Ste 308 Carson, California 90745 TEL: (310) 834-4868 • FAX: (310) 834-4772

PLM Bulk Asbestos Report

Continental Consulting

Attn: John Dumont 415 Wilson Pond Rd Date Received 09/10/09

AmeriSci Job #

909091258

Date Examined 09/12/09

P.O. # Page

1 **of** 2

RE: Brighton Ave.

N. Monmouth, ME 04265

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
A Location: F	909091258-01 irst Floor Wall - S.R	No	NAD (by CVES) by Arturo A. Aldana on 09/12/09
Asbestos Types:	own, Homogeneous, Fibrous, Shee 5 %, Fibrous glass Trace, Non-fib		
B Location: F	909091258-02 irst Floor Wall - S.R	No	NAD (by CVES) by Arturo A. Aldana on 09/12/09
Asbestos Types:	own, Homogeneous, Fibrous, Shee 3 %, Fibrous glass Trace, Non-fib		
C Location: S	909091258-03.1 econd Floor Wall - S.R	No	NAD (by CVES) by Arturo A. Aldana on 09/12/09
Analyst Description: White/Bro Asbestos Types: Other Material: Cellulose	own, Homogeneous, Fibrous, Shee 3 %, Non-fibrous 97 %	trock	GII 03/12/03
C Location: S	909091258-03.2 econd Floor Wall - S.R	No	NAD (by CVES) by Arturo A. Aldana on 09/12/09
Analyst Description: White, Ho Asbestos Types: Other Material: Non-fibro	omogeneous, Non-Fibrous, Joint Co us 100 %	ompound	

AmeriSci Job #: 909091258

Client Name: Continental Consulting

PLM Bulk Asbestos Report

Brighton Ave.

Reporting Notes	>
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= not analyzed / positive stop; NVA = No Visible Asbestos; PLM (polarized light microscopy) Bulk Asbestos Analysis by EPA 600/M4-82-020 per 40 CFR 763 (NVLAP Lab #200346-0, CA ELAP lab #2322); Note: PLM is not consistently reliable in detecting asbestos in floor coverings and similar NOB materials. TEM is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos-containing in New York State (also see EPA Advisory for floor tile, FR 59, 146, 38970, 8/1/94). NIST Accreditation requirements mandate that this report must not be reproduced except in full with the approval of the laboratory. This PLM report relates ONLY to the items tested.

Reviewed By:

AMERISCI www.amerisci.com

Asbestos, Lead Analysis Chain of Custody

AMERISCI JOB #:

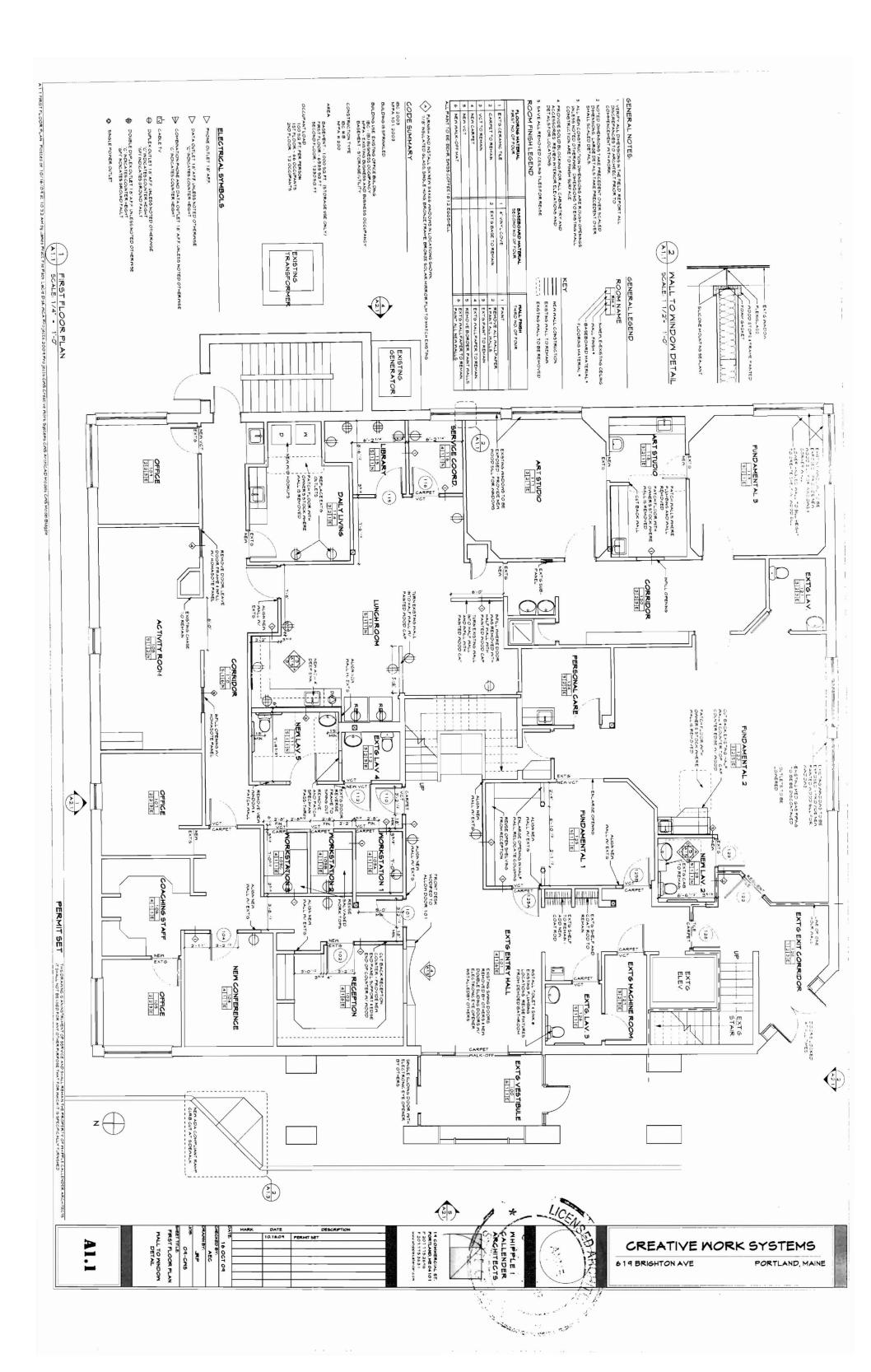
909091258

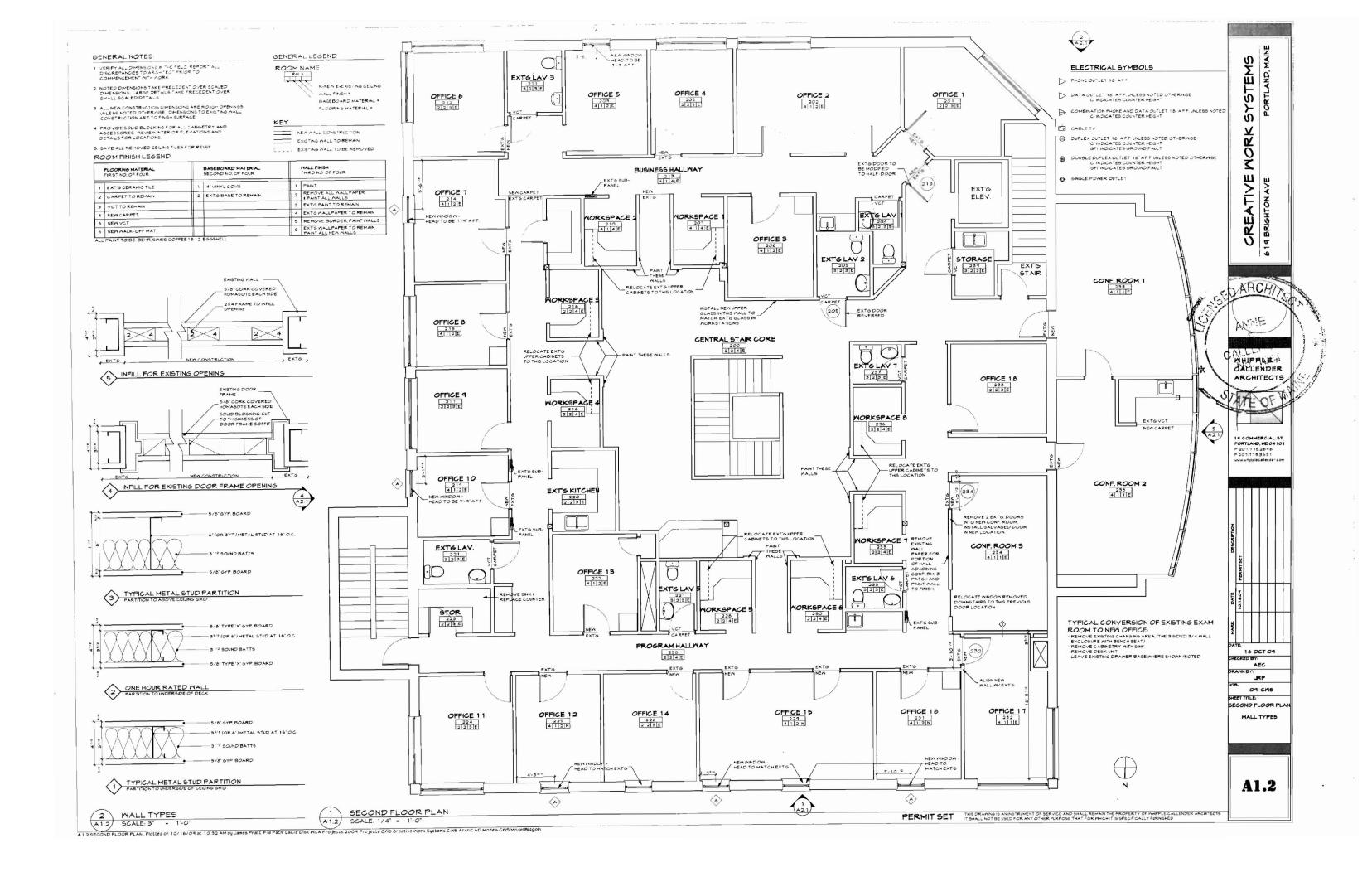
AMERISCI LOS ANGELES

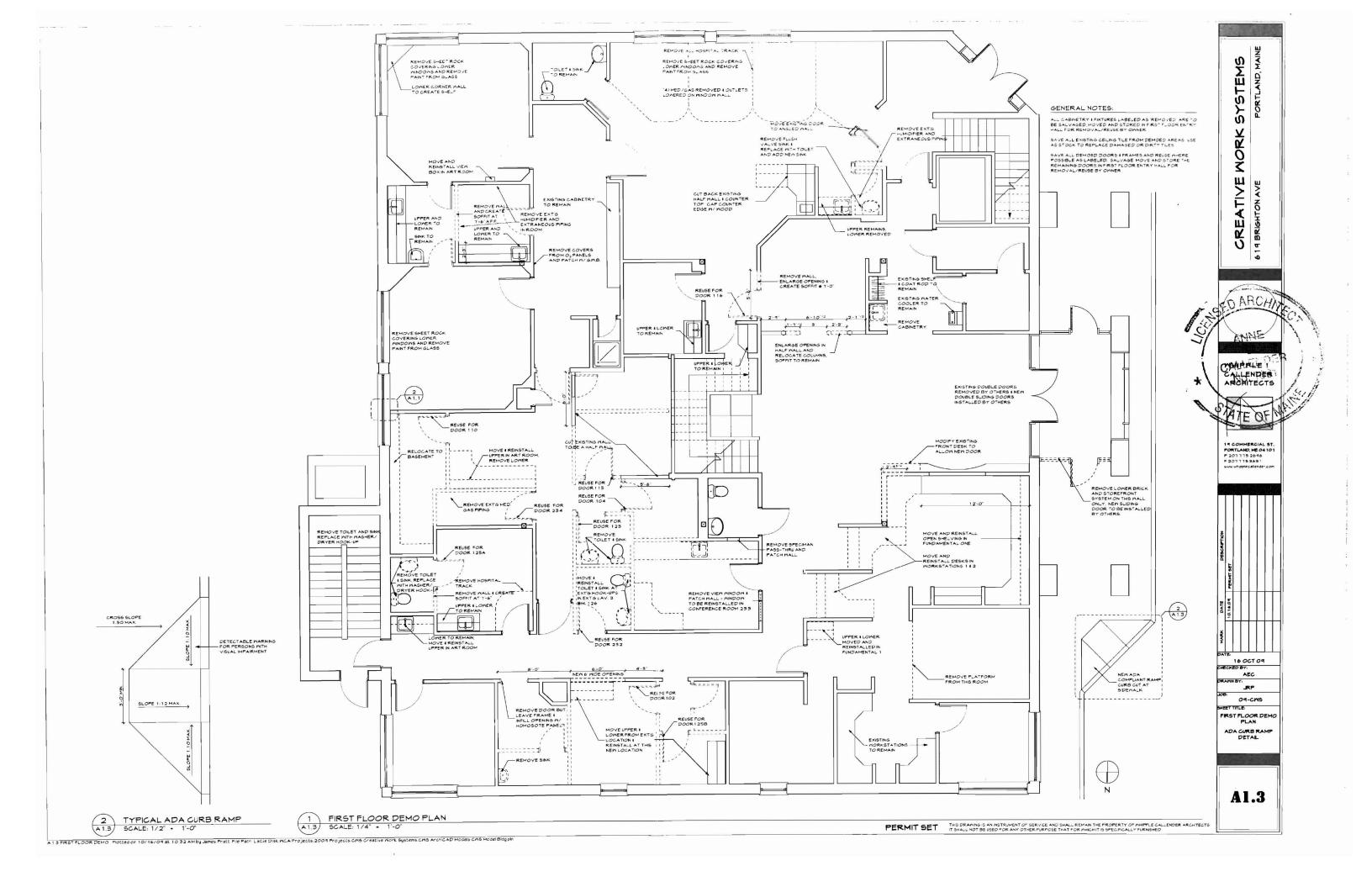
24416 S Main St. Suite 308 Carson, CA 90745 Phone (310) 834-4868 Fax (310) 834-4772

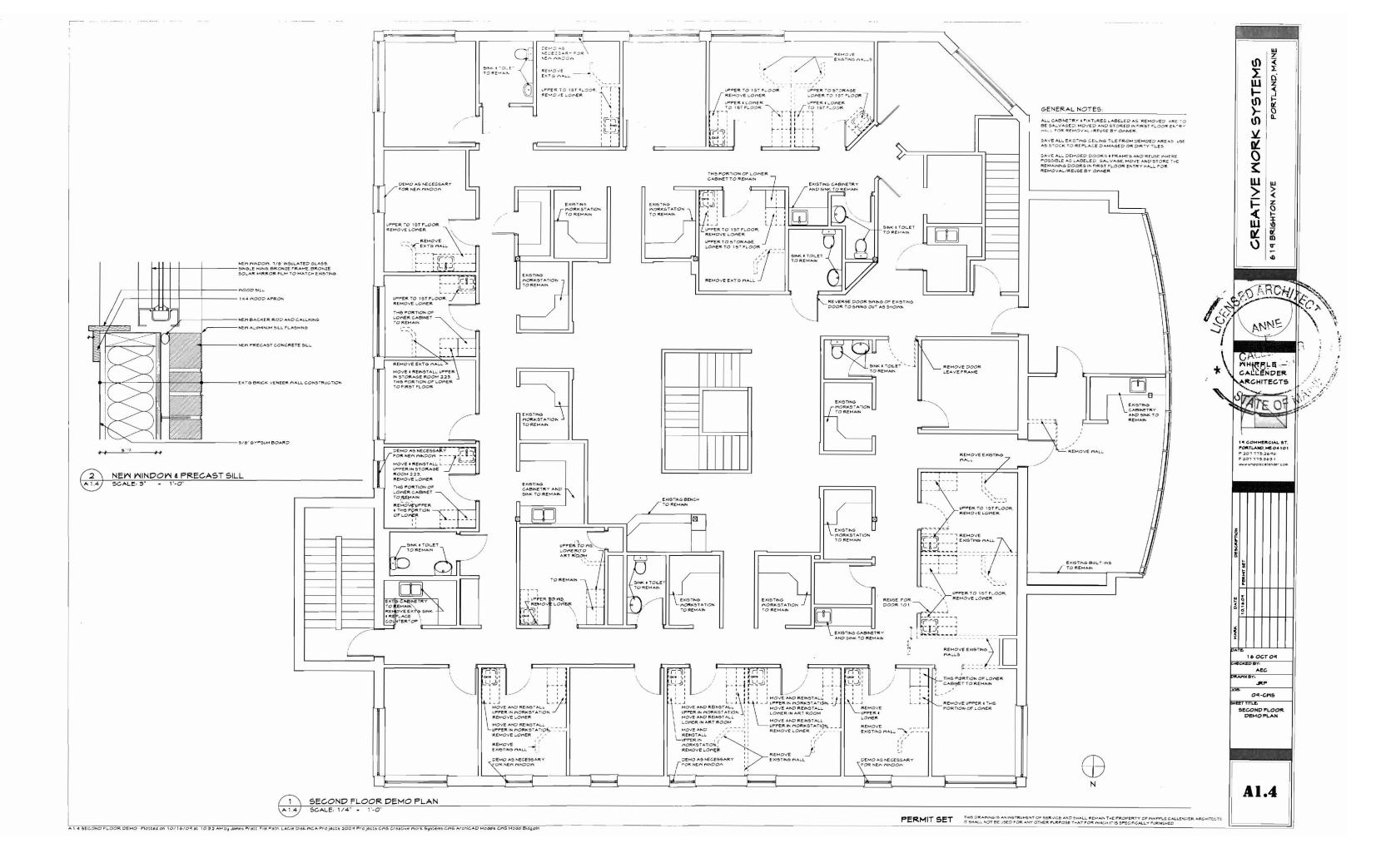
COMPANY:	pasui ting	ADDRESS:	1 K	2/				P.O.#:	
PROJECT IN		ANALYSIS	1	TUR	NARQUN	D TIME		AIR	FILTER
PROJECTINE	ORMATION /	TYPE	Rush	24 HR	48 HR	72 HR .	5 DAY		
JOB NAME;	1	ASBESTOS TEM AHERA		46147	****			MCE	
	we	ASBESTOS PLM BULK			X		ļ <u>.</u>	PC	
OB NUMBER:		ASBESTOS PCM AIR		1 2		•		25 mm	
		ASBESTOS PLM 1000 P.C.						37 mm	i.
OB MANAGER:	1.22	LEAD AIR	,				<u> </u>	0:45 um	
ODA LAUNCE	ext	LEAD WIPE		- nhugr	_{, g}	· · · · · ·		0.80 um	<u> </u>
OB DESCRIPTION:		LEAD PAINT / SOLID			······			TEMP:	
Prose TT		OTHER:						OTHER:	
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VOICE TO:	tra) sonta 11	Consulting.				FAX:	uu		3217
OMMENTS:	The Dinoi	Ut C. FAIR POINT	+ No	<u></u>			TONO	Dino	NCA
SAMPLE ID	mo anyo	SAMPLE LOCATION	. 110	START	STOP	TOTAL	LITERS /MIN.	TOTAL	AREA
SAMPLEID		the state of the s		TIME	TIME	TIME A	/Min.	VOLUME	SQUARE F
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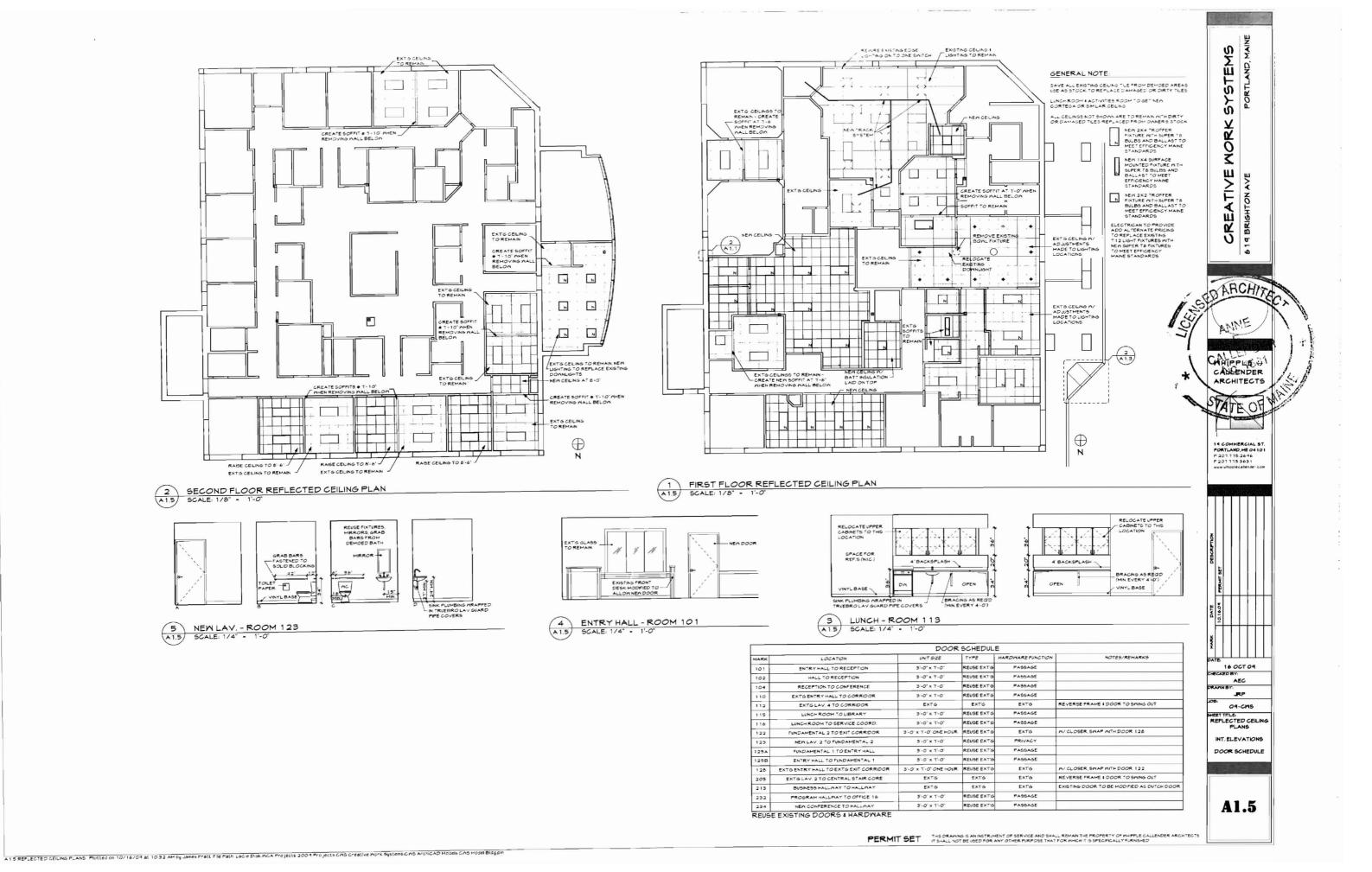
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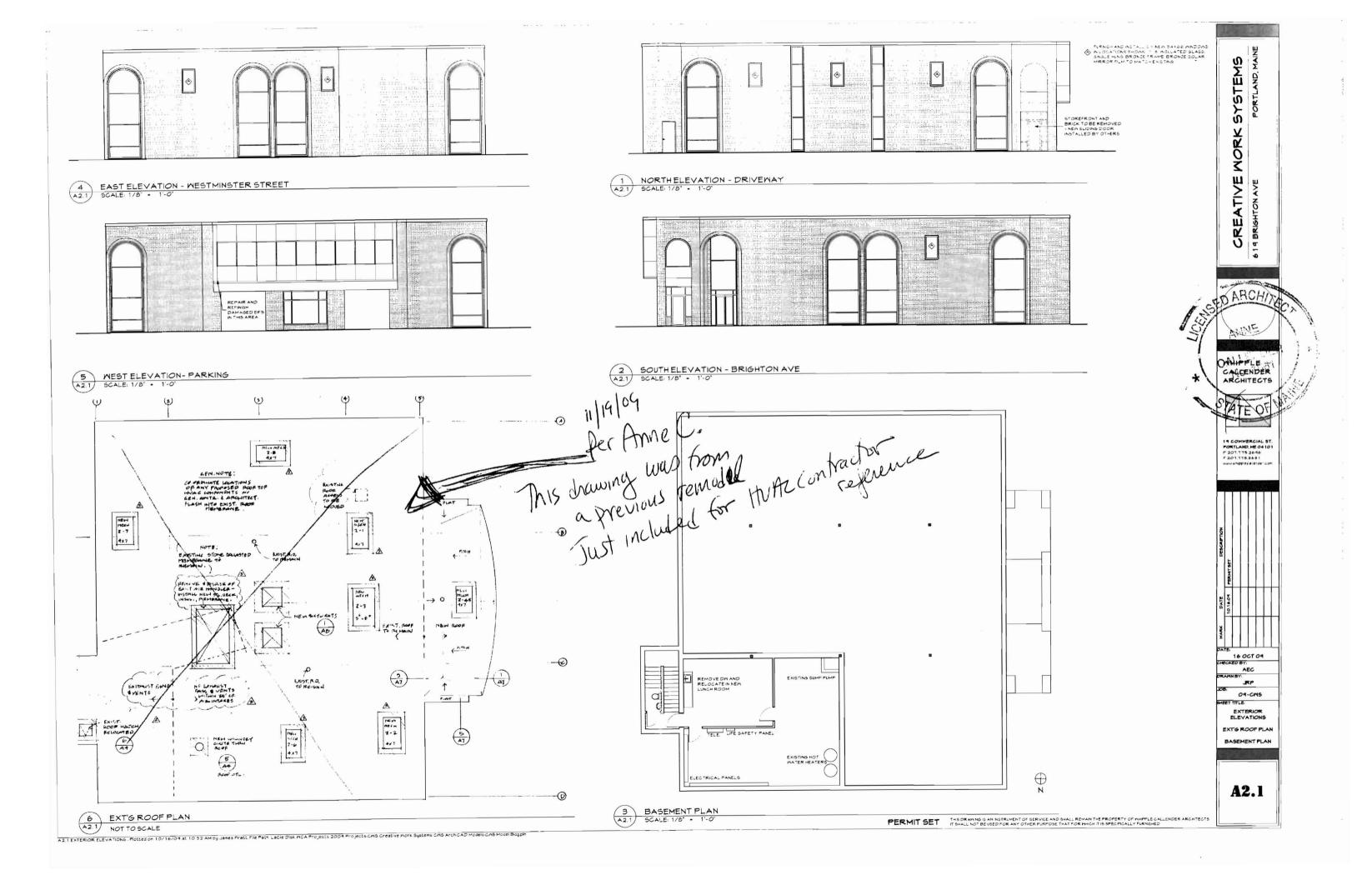


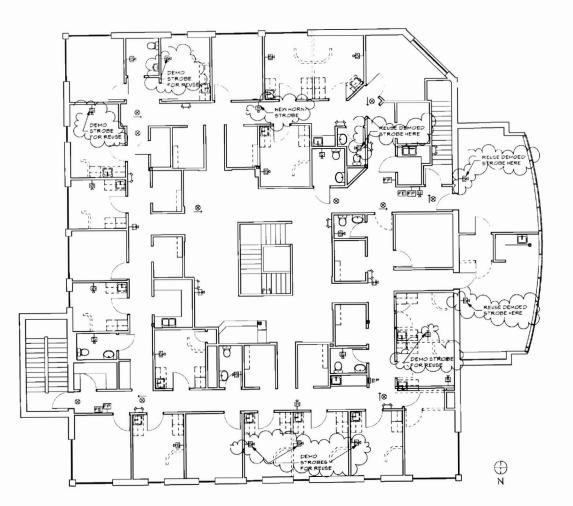








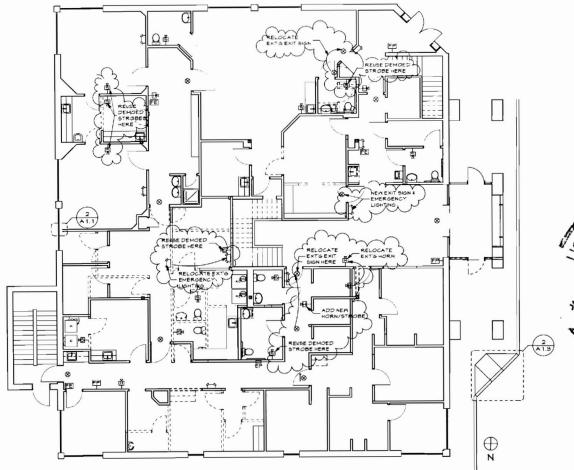




2 SECOND FLOOR LIFE SAFETY PLAN

SCALE: 1/8" • 1'-0"

LS 1 1 LFE SAFETY PLANS Plotted on 10/16/04 at 10 32 AM by James Pratt. File Patn. LaCle Disk.NCA Projects 2004 Projects CMS Creative Mork Systems CMS ArchicaD Models CMS Model Biogrin



1 FIRST FLOOR LIFE SAFETY PLAN (51.1) SCALE: 1/8" - 1'-0"

GENERAL NOTES

ALL LIFE SAFETY EQUIPMENT IS SHOWN AT EXISTING LOCATIONS EXCEPT WHERE CHANGES ARE NOTED WITHIN REVISION CLOUDS

LIFE SAFETY SYMBOLS

- ⊗ EXIT SIGN
- PP PULL STATION
- FE FIRE EXTINGUISHER
- -S STROBE
- EMERGENCY LIGHTING

LS1.1

16 OCT 09
CHECKED BY:
AEC
DRAWN BY:
JRP
JOB:
09-CMS
SHEET TITLE:
LIFE SAFETY PLANS

SYSTEMS PORTLAND, MAINE

CREATIVE MORK S

WHIPPLE -

14 COMMERCIAL ST. PORTLAND, ME 04101 P 201.115.2646 F 201.115.3631 www.wh.ppiccallender.com

GENERAL STRUCTURAL NOTES

SI Job # 09-0091 619 Brighton Ave Portland, ME 04101

DESIGN LIVE LOADS:

2006 IBC, U.O.N. * Snow * Wind 50 psf., (Pg) 100 mph, exp B, 3 second gust

MASONRY:

* Concrete masony units (CMU) ASTM C90-N-1.
* Mortar: Type S or N
* Grout: 2000 psi at 28 days. Vibrate to co Type S or N 2000 psi at 28 days. Vibrate to consolidate.

Grout: 2000 psi at 28 days. Vibrate to consolicate. Reinforcement: Standard Dur-O-Wall at 16" o.c. in CMU walls.

LOOSE LINTELS:

Minimum intel except as noted, one angle for each 4" of wall thickness to bear 6" each end:

Openings to 4" 0

1.3 -1/2 x 3-1/2 x 1/4

4"-0 to 5"-4

1.5 x 3-1/2 x 1/4

5"-5 to 6"-6

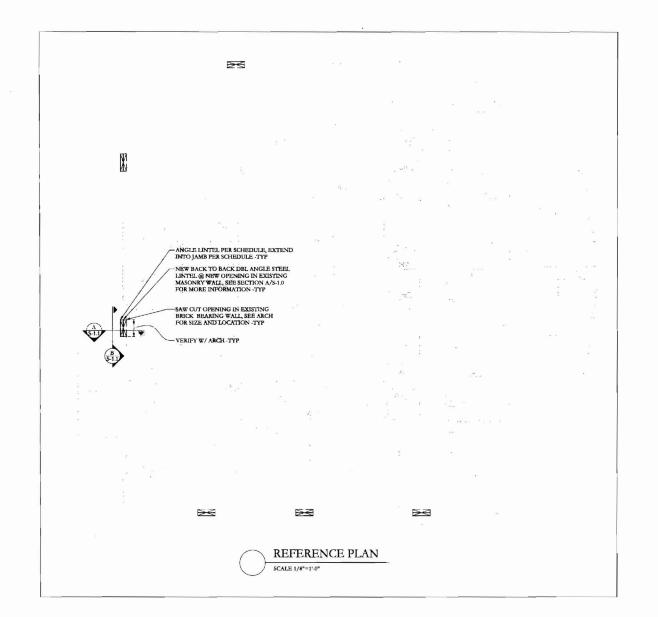
L6 x 3-1/2 x 5/16

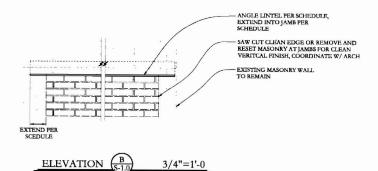
- STRUCTURAL ERECTION AND BRACING REQUIREMENTS

 The structural drawings illustrate the complexed structure with all elements in their final positions, properly supported and braced. The contractor, in the proper sequence, shall provide proper shoring and bracing as may be required to achieve the final completed structure.

 These plans have been engineered for construction at one specific building site. Builder assumes ALL responsibility for use of these plans at Any Other building site. Plans shall not be used for construction at any other building site without specific review by the engineer.

 Observations of reinforcing required by the owner, lender, insurer, building department or any other party will be accomplished by the engineer at the owner's expense. At least 24 hours advance notice is requested.



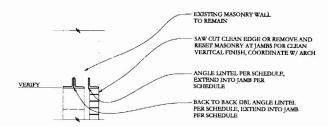


 OPENING SIZE
 LINTEL SIZE
 JAMB EXTENSION

 LESS THAN 4°-0
 L3 1/2x 3 1/2x 1/4
 6°

 4°-1 TO 5'-4
 L5x 3 1/2x 1/4
 6°

 5'-5 TO 7'-0
 L6x 5 1/2x 1/4
 10°







Structural **Integrity**

77 Oak Street Portland, ME, 0410; p. 207-774-4614 f. 866-793-7835

BUILD WITH CONFIDENCE SI JOB# 09-0091

THIS DRAWING IS AN INSTRUMENT OF SERVICE AND SHALL REMAIN THE PROPERTY OF ARCHITECTS. IT SHALL NOT BE USED FOR ANY OTHER PURPOSE THAT FOR WHICH IT

CREATIVE

WHIPPLE -CALLENDER ARCHITECTS

SYSTEMS PORTLAND, MAIN



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PORTLAND, ME 04101
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www.whipplecallender.com

CHECKED BY 8 DCT 09

)CS 09-CW\$ SHEET TITLE

STEEL LINTELS FOR NEW OPENING IN EXISTING MASONRY WALLS

S1.1