



Department of Permitting and Inspections

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 IEEC 2009
- Proof of ownership is required if it is inconsistent with the assessors records.
- Reduced plans or electronic files in PDF format are required if originals are larger than 11" x 17".
- 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)



Department of Permitting and Inspections

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, 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, \$15.00 per additional \$1000.00 cost

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



Department of Permitting and Inspections

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.

1. Once the complete application package has been received by us, and entered into the system,
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

- provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment
- 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,
- deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland
Department of Permitting and Inspections
389 Congress Street, Room 315
Portland, Maine 04101**

By Signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. ***No work shall be started until I have received my permit.***

Applicant Signature: _____

Date: 12/27/16

I have provided digital copies and sent them on: 12/27/16

Date: 12/27/16

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



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.

Address/Location of Construction: 50 Sewall Street, Floors 1 and 3, Portland ME 04102		
Total Square Footage of Proposed Structure:		9,300 SF
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 189 A031 001	Applicant Name: Olympia Equity Investors II, LLC Address: 7 Custom House Street City, State & Zip: Portland, ME 04101	Telephone: (207) 520-4139 Email: charris@theocos.com
Lessee/Owner Name: Dermatology Associates (if different than applicant) Address: 50 Sewall Street City, State & Zip: Portland, ME 04102 Telephone: (207) 775-3526 E-mail:	Contractor Name: CAP Services (if different from Applicant) Address: 49 Bruce Hill Road City, State & Zip: Cumberland, ME 04021 Telephone: (207) 939-8838 E-mail: capservices@maine.rr.com	Cost of Work: \$ <u>585,000</u> C of O Fee: \$ _____ Historic Rev \$ _____ Total Fees: \$ _____
Current Use (i.e. single family) <u>Business and Office Administration</u>		
If vacant, what was the previous use? _____		
Proposed Specific use: <u>Business offices (1st Floor) and Medical Treatment Rooms (3rd Floor)</u>		
Is property part of a subdivision? If yes, please Name _____		
Project description: Re-work interior walls and finishes, plumbing, HVAC, Electrical		
Who should we contact when the permit is ready: Chris Harris		
Address: 7 Custom House Street		
City, State & Zip: Portland, ME 04101		
E-mail Address: charris@theocos.com		
Telephone: (207) 520-4139		

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 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 Department of Permitting and Inspections on-line at www.portlandmaine.gov, or stop by the 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: 	Date: 12/27/16
---	-----------------------

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



Certificate of Design Application

From Designer: WHIPPLE | CALLENDER ARCHITECTS
 Date: DECEMBER 21, 2016
 Job Name: DERMATOLOGY ASSOCIATES
 Address of Construction: 50 SEWALL STREET

2009 International Building Code

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

Building Code & Year BOCA 2003 Use Group Classification (s) BUSINESS

Type of Construction 2C

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IBC EXISTING SPRINKLER

Is the Structure mixed use? NO If yes, separated or non separated or non separated (section 302.3) _____

Supervisory alarm System? ✓ Geotechnical/Soils report required? (See Section 1802.2) N/A

Structural Design Calculations EXISTING

NO CHANGE 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, 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)

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

Flood loads (1803.1.6, 1612)

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

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)



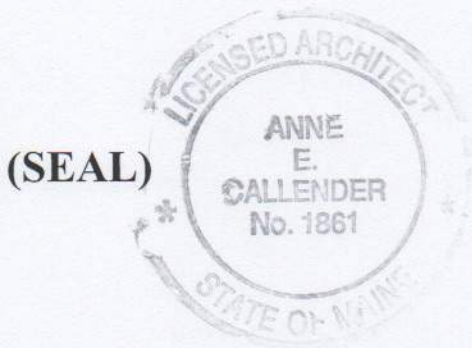
Accessibility Building Code Certificate

Designer: WHIPPLE / CALLENDER ARCHITECT

Address of Project: 50 SEWALL ST. · FIRST & THIRD FLOORS

Nature of Project: RENOVATION TO TWO TENANT SPACES
FOR DERMATOLOGY ASSOCIATES USE
FIRST FLOOR & THIRD FLOOR OFFICES

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: Anne Callender

Title: Vice President / Architect

Firm: Whipple / Callender Architects

Address: PO Box 1276
Portland ME 04104

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



Certificate of Design

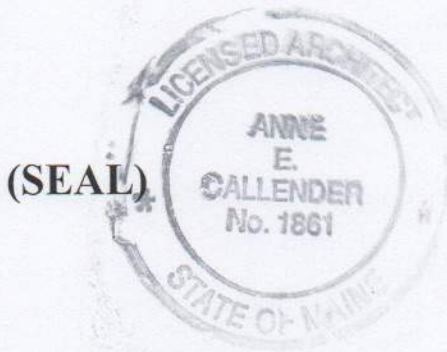
Date: DECEMBER 20, 2016

From: Anne Callender
Whipple / Callender Architects

These plans and / or specifications covering construction work on:

Dermatology Associates e 50 Sewall St. First Floor suite 2
renovations + Third floor existing Dermatology business
office renovations.

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: Anne Callender

Title: Vice President / Architect

Firm: Whipple / Callender Architects

Address: PO Box 127b

Portland ME 04104

Phone: 207-775-2696 x105

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