FOR DEMOLITION ~~AND HVAC WORK ONLY~~

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charg
within the City, payment arrangements must be made before permits of any kind

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

Date: 06/07/16

Address/Location of Construction: 1440 Congress Street		
Total Square Footage of Proposed Structure:	4,650 sf	
Tax Assessor's Chart, Block & Lot Chart# 197 Block# B Lot# 009	**Applicant Name:** Michael R. Charek Address: 25 Hartley Street City, State & Zip: Portland, ME 04103	Telephone: 207-761-0556 Email: mcharek@me.com
Lessee/Owner Name: Rebecca Darling (if different than applicant) Casco Bay Eyecare Address: PO Box 7487 City, State & Zip: Portland, ME 04112 Telephone 207-885-8686 E-mail: rdarling@cascobayeye.com (NOTE: COPY OF LEASE IS ALREADY ON FILE)	**Contractor Name:** Not yet known (if different from Applicant) Address: City, State & Zip: Telephone E-mail:	Cost of Work: $ (325,000) Already paid C of O Fee: $_____ Historic Rev $_____ Total **Fees:** $ 25.00 PERMIT FEE ONLY

Current Use (i.e. single family) Vacant

If vacant, what was the previous use? Retail Store (Mercantile Use)

Proposed Specific use: Optometrist Office (Business Use)

Is property part of a subdivision? If yes, please Name No.

Project description: ~~Renovation of entire building for 4,650 sf to create optometrist offices including lab, office space and support spaces~~ THIS PERMIT FOR DEMOLITION AND HVAC WORK ONLY

Who should we contact when the permit is ready:	Michael R. Charek
Address:	25 Hartley Street
City, State & Zip:	Portland, ME 04103
E-mail Address:	mcharek@me.com
Telephone:	207-761-0556

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:** May 25, 2016

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

Portland, Maine | Yes. Life's good here.

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Department of Permitting and Inspections

Electronic Signature and Fee Payment Confirmation

Date: 06/07/16

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:

[X] 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: May 25, 2016

I have provided digital copies and sent them on: Date: May 25, 2016

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

FOR DEMOLITION AND HVAC WORK ONLY

Certificate of Design Application

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

From Designer: Michael R. Charek

Date: May 19, 2016

Job Name: Offices for Casco Bay Eyecare

Date: 06/07/16

Address of Construction: 1440 Congress Street, Portland, ME 04102

To the best of my knowledge and belief, this Construction project was designed to the building code criteria listed below:

2009 International Building Code

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

Type of Construction II-B

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IRC No

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

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

Structural Design Calculations

N/A 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
N/A	N/A
N/A	N/A
N/A	N/A
N/A	N/A
N/A	N/A

Wind loads (1603.1.4, 1609)

N/A Design option utilized (1609.1.1, 1609.6)

N/A Basic wind speed (1809.3)

N/A Building category and wind importance Factor, I_w table 1604.5, 1609.5)

N/A Wind exposure category (1609.4)

N/A Internal pressure coefficient (ASCE 7)

N/A Component and cladding pressures (1609.1.1, 1609.6.2.2)

N/A Main force wind pressures (7603.1.1, 1609.6.2.1)

Earth design data (1603.1.5, 1614-1623)

N/A Design option utilized (1614.1)

N/A Seismic use group ("Category")

N/A Spectral response coefficients, S_{Ds} & S_{D1} (1615.1)

N/A Site class (1615.1.5)

N/A Live load reduction

N/A Roof *live* loads (1603.1.2, 1607.11)

N/A Roof snow loads (1603.7.3, 1608)

N/A Ground snow load, P_g (1608.2)

N/A If P_g > 10 psf, flat-roof snow load P_f

N/A If P_g > 10 psf, snow exposure factor, C_e

N/A If P_g > 10 psf, snow load importance factor, I_s

N/A Roof thermal factor, C_t (1608.4)

N/A Sloped roof snowload, P_s (1608.4)

N/A Seismic design category (1616.3)

N/A Basic seismic force resisting system (1617.6.2)

N/A Response modification coefficient, R_f and

N/A deflection amplification factor C_d (1617.6.2)

Analysis procedure (1616.6, 1617.5)

N/A Design base shear (1617.4, 16175.5.1)

Flood loads (1803.1.6, 1612)

N/A Flood Hazard area (1612.3)

N/A Elevation of structure

Other loads

N/A Concentrated loads (1607.4)

N/A Partition loads (1607.5)

N/A Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404

Accessibility Building Code Certifica

FOR DEMOLITION AND HVAC WORK ONLY

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Inspections Division
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Designer: Michael R. Charek Date: 06/07/16

Address of Project: 1440 Congress Street, Portland, ME 04102

Nature of Project: Offices for Casco Bay Eyecare: Renovation of vacant 4,650 sf one-story building to create optometrist offices including lab, optical shop, and support spaces.

To the best of my knowledge and belief,
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.

REGISTERED ARCHITECT
MICHAEL R. CHAREK No. 1174
STATE OF MAINE

Signature:

Title: Principal

Firm: Michael Charek Architects

Address: 25 Hartley Street
Portland, ME 04103

Phone: 207-761-0556

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

Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936

Certificate of Design

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

Date: May 25, 2016 Date: 06/07/16

From: Michael R. Charek

To the best of my knowledge and belief,
These plans and / or specifications covering construction work on:

Offices for Casco Bay Eyecare, 1440 Congress Street, Portland, ME 04102

FOR DEMOLITION AND HVAC WORK ONLY

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

REGISTERED ARCHITECT
MICHAEL R. CHAREK
No. 1174
STATE OF MAINE

Signature:

Title: Principal

Firm: Michael Charek Architects

Address: 25 Hartley Street

Portland, ME 04103

Phone: 207-761-0556

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