

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that
FREEDOM FIRE PROTECTION
209 QUAKER RIDGE RD
CASCO, ME 04015

For installation at
1599 CONGRESS ST (1601)

Job ID: **2012-03-3463-ALTCOMM**

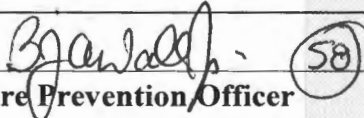
CBL: **220- C-001-001**

has permission to **renovate NFPA 13 sprinkler system**

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

 (58)
Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

Final Fire

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2012-03-3463-ALTCOMM
renovate NFPA 13 sprinkler system

For installation at:
1599 CONGRESS ST (1601)

CBL: 220- C-001-001

Conditions of Approval:

Fire

Installation shall be in accordance with NFPA 13. A signed compliance letter will be required.

A separate sprinkler permit is required from the State Fire Marshal's Office.

Sprinkler supervision shall be provided in accordance with NFPA 101, *Life Safety Code*, and NFPA 72, *National Fire Alarm and Signaling Code*.

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.

The Fire Department will require Knox locking caps on all Fire Department Connections' on the exterior of the building.

System acceptance and commissioning must be coordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

City ordinance requires a Knox Box for all structures with a sprinkler or fire alarm system.

Private fire mains and fire hydrants shall be maintained, tested and painted in accordance with City Code Chapter 10, Art IV and Chapter 2 of the Fire Department Rules and Regulations.



Water-Based Fire Suppression System Permit

C-7

If you or the property owner owes real estate or property taxes or user charges on any property within the city, payment arrangements must be made before permits of any kind are accepted.

Child 20124 2650

Installation address: 1601 Congress Street CBL: 220-C-1

Exact location: (within structure) 2ND Floor South End

Type of occupancy(s) (NFPA & ICC): Pediatrics Dentistry

Medical office Bldg / professional office
Dr Whitney Wignall Dentistry

Building owner: Greg Holden

Managing Supervisor (RMS): Tim Vess License No: 348

Supervisor phone: 207627-4109 E-mail: wwales@maine.rr.com

Installing contractor: Freedom Fire Protection License No: 295

Contractor phone: 207/671-8639 E-mail: wwales@maine.rr.com

The suppression work to be done will be: New: Renovation: Addition to existing system:

This is an amendment to an existing permit: Yes: NO: Permit no: _____

NFPA Standard this system is designed to: 13 Light Hazard Edition: 2010

*Non-NFPA systems are not approved for use within the City of Portland.

Download a new copy of this document from www.portlandmaine.gov/fire for every submittal. Attach all working documents and complete approved submittals as may be required by the State Fire Marshal's Office on electronic PDF's in addition to full sized plans.

Contractor shall verify location and type of all FDCs shall be approved in writing by the Fire Prevention Bureau.

COST OF WORK: <u>\$6,452.00</u>
PERMIT FEE: <u>\$90.00</u>
(\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000)
RECEIVED
APR 09 2012
Dept. of Building Inspections City of Portland Maine

Submit all information to the Building Inspections Department, 389 Congress Street, Room 315, Portland, Maine 04101.

Prior to acceptance of any fire protection system, a complete commissioning and acceptance test must be coordinated with all fire system contractors and the Fire Department, and proper documentation of such test(s) provided.

All installation(s) must comply with NFPA and the Fire Department Technical Standard(s).

Applicant signature: William W. Wales Date: April 09, 2012

CUNNINGHAM

Security Systems

10 Princes Point Road • Yarmouth, Maine 04096
(207) 846-3350 • Fax (207) 846-6080 • (800) 210-0257

June 29, 2012

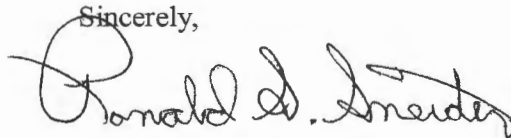
Attn: Don McPherson
Code Enforcement Officer
City of Portland
389 Congress Street
Portland, ME 04101
(207) 874-8705
Fax#: (207) 874-8716

Dear Mr. McPherson,

This letter is to inform you that on June 27, 2012, we completed the installation, programming and testing of additional horn/strobe units and replacement of existing horn/strobe units in the new Southern Maine Pediatric Dentistry office located at 1601 Street in Portland, Maine. All the horn/strobes in this space were tied into the existing building fire alarm control panel and were programmed and test to NFPA 72 standards. These devices were all found to be fully functional at that time.

Should you have any questions or comments regarding this matter, please feel free to contact me at (207) 846-3350.

Sincerely,



Ronald S. Sneider, Manager

cc: Acct. File

Planning • Installation • Monitoring • Service
Visit our web site at: www.cunninghamsecurity.com

Hydrant Flow Test Report

Location 1601 Congress St, Portland ME Date 6/20/12

Test made by Mark Radziszewski Time 1:00 PM

Representative of Freedom Fire Protection

Witness Greg Holder

State purpose of test Annual Inspection + 5 year Flow Test

Consumption rate during test NA

If pumps affect test, indicate pumps operating NA

Flow hydrants: A₁ A₂ A₃ A₄

Size nozzle 2 1/2"

Pitot reading 75

Discharge coefficient .90 Total GPM

GPM 1455

Static B 98 psi Residual B 90 psi

Projected results @20 psi Residual gpm; or @ psi Residual gpm

Remarks: Static B and Residual B were taken from the water gauge from the fire sprinkler system per the Portland Fire Department approval.

Location map: Show line sizes and distance to next cross-connected line. Show valves and hydrant branch size. Indicate north. Show flowing hydrants - Label A₁, A₂, A₃, A₄. Show location of static and residual - Label B.

Indicate B Hydrant Sprinkler Other (identify)

CITY OF PORTLAND, MAINE - FIRE PREVENTION BUREAU

Test and Maintenance Report - Private Fire Hydrant

Property/Business Information: Chart: _____ Block: _____ Lot: _____
 Property Address: 1601 Congress St. Portland Zip Code: 04012
 Hydrant # / Location (attach map): _____ / _____
 Business/Owner Name: Maine Orthopedic Center
 Contact Person: Bob Williams Phone No: 774-0342
 Mailing Address: 1601 Congress St. Portland ME Zip Code: 04012

Test Type	
New Installation	[]
Annual	[]
5 Year Flow Test	[<input checked="" type="checkbox"/>]
Other	
Describe:	

Please be advised that we (owner / contractor) have made the following maintenance and test of the fire hydrant in accordance with National Fire Protection Standards 25, 24 and 291. This form must be completed for each hydrant located on the premises.

CONTACT THE PORTLAND WATER DISTRICT TO COORDINATE PRIOR TO FLOWING ANY FIRE HYDRANT

Report of private fire hydrant service condition (new installation, annual and 5-year flow test):

Criteria	Status (Pass/Fail)	Corrective Action (Identify)
Accessibility (clear/unobstructed space all around Private fire hydrant shall be no less than three feet)	<u>PASS</u>	
Leaks in outlets or at top of hydrant (no leakage allowed)	<u>PASS</u>	
Proper drainage from hydrant barrel	<u>PASS</u>	
Cracks in hydrant barrel/flange	<u>PASS</u>	
Tightness of outlets (wrench tight)	<u>PASS</u>	
Worn or incorrect outlet threads	<u>PASS</u>	
Worn hydrant operating nut	<u>PASS</u>	
Hydrant has 4 1/2" steamer port	<u>PASS</u>	

IF THE PRIVATE FIRE HYDRANT IS FOUND NOT SERVICEABLE, IMMEDIATELY NOTIFY THE DISPATCH CENTER AT 874-8576, COVER AND SECURE THE HYDRANT WITH A BAG, AND THEN NOTIFY FIRE PREVENTION AT 874-8400.

Barrel Flow Test (new installation or annual):

Checked boxes below indicate "yes"

Hydrant fully opened [] All foreign material cleared []
 Flow duration greater than one minute [] Barrel is plugged and pumped out []

Maintenance (new installation or annual):

Weeds and obstructions cleared from within three feet of hydrant [] Hydrant caps and threads inspected []
 Rust and scale removed [] Lubricated [] flagged []

Marking (new installation or annual):

Painted [] (Bonnet - Gray) (All paint shall be Rust-Oleum brand or equal)
 (Caps- Silver)
 (Barrel- Red)
 (Bonnet Flange - per table)

Flow (gpm)	Class	Color
< 500	C	RED
500-999	B	ORANGE
1000-1499	A	GREEN
≥1500	AA	LIGHT BLUE

3" red hydrant number painted on street side of the bonnet - starting with 1 at the furthest hydrant from the complex or street entrance

High Pressure Hydrants (static pressures ≥ 125 psi) shall be marked "HP" before the hydrant number (ex. HP-1, HP-2, etc.)

Flow test (new installation, once every five years thereafter, or if previous flow report not available):

Hydrant flow testing per NFPA 24 Annex C. Attach NFPA Hydrant Flow Test Report (See NFPA 24 Figure C.4.11.2)

Certification: I hereby certify the foregoing data to be correct and the statements to be true.

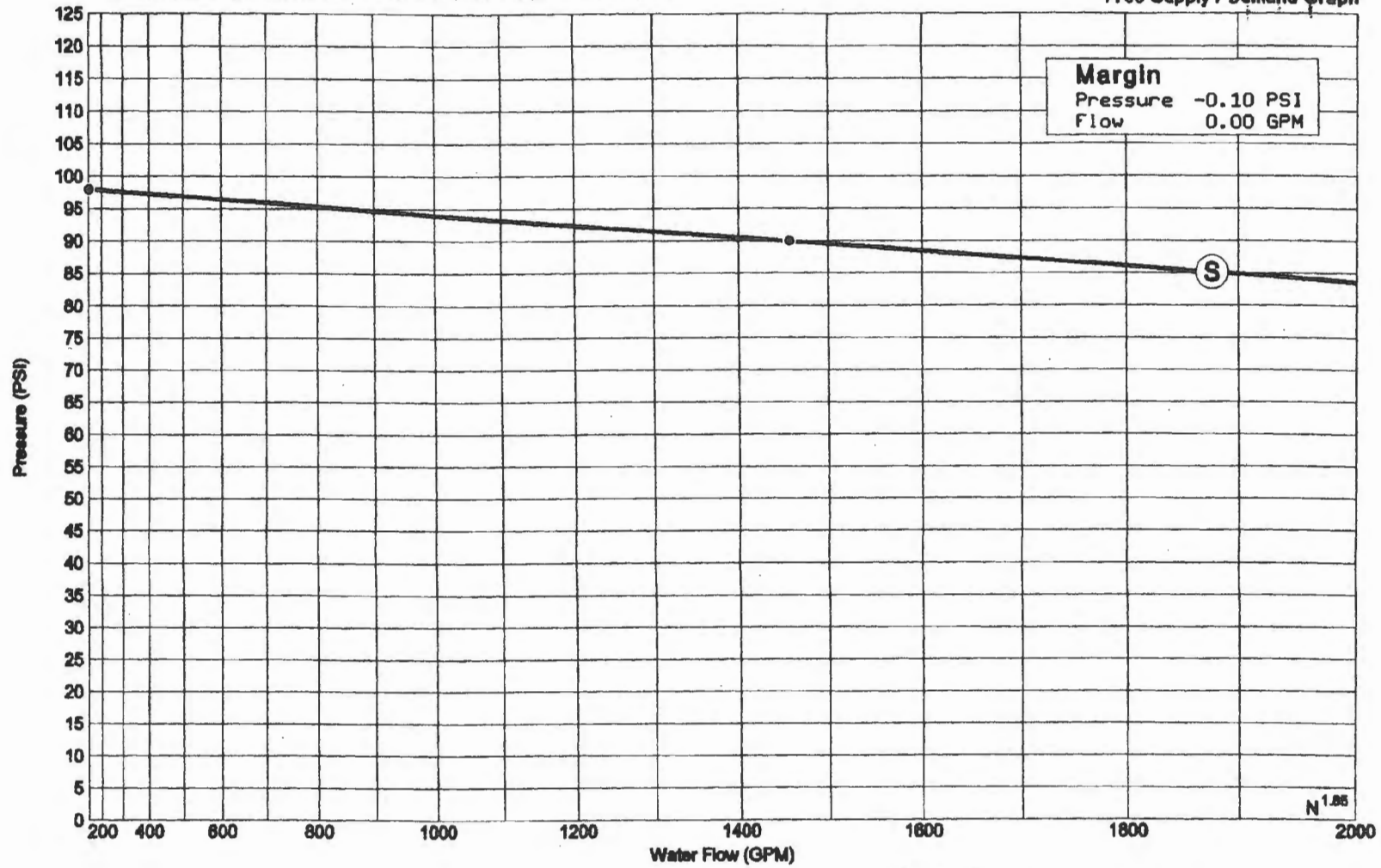
Testing company: Freedom Fire Protection Phone No: 627-4109 FAX No: 627-7340
 Address: 209 Quaker Ridge Rd City: Casco State: ME Zip Code: 04015
 Tester's name (print): Mark Radziszewski Tester's signature: Mark Radziszewski
 Test date: 06/20/12 Contractor's Lic. # 295
MM DD YY

E-MAIL COMPLETED FORM(S) AND MAP TO fireinspector@portlandmaine.gov

City of Portland Fire Department Building Regulations

MAINE ORTHOPEDICS FLOW TEST GRAPH

Sigma Dynamics Corporation
7700 Supply / Demand Graph



Water Supply..

Static 98.00 PSI
Residual 90.00 PSI @ 1455.00 GPM
Elevation 0.00 PSI

Freedom Fire Protection, Inc.

Over 30 Years of Fire Protection Experience
209 Quaker Ridge Rd. Casco, Maine 04015
Phone 207/627-4109 Fax 207/627-7340

June 29, 2012

Portland City Hall
Third Floor Room 315
Portland, Maine 04101

Atten. Captain Pirone

Ref: Southern Maine Pediatrics Dentistry
1601 Congress Street
Portland, Maine 04101

Subj: Sprinkler System Certification Letter

This letter is certification that sprinkler system was designed, calculated and installed at the above referenced location by Freedom Fire Protection, met the requirements of the National Fire Protection Association 13 Standard Light Hazard.

Sprinkler permit #9948 was issued by the State of Maine Fire Marshal's office.

This building has an existing sprinkler system and was modified in the new tenant space; the sprinkler system was left in service at the end of each work day during the construction period and is currently in service.

Regards,

Digitally signed by Mark Radziszewski
DN: cn=Mark Radziszewski, o=Freedom Fire
Protection, ou, email=markrad@maine.rr.com,
c=US
Date: 2012.06.29 14:39:05 -04'00'

Mark Radziszewski



Certificate of Occupancy



CITY OF PORTLAND, MAINE

Department of Planning and Urban Development
Building Inspections Division

Location: 1599 CONGRESS ST

CBL: 220- C-001-001

Issued to: OGH REALTY ASSOCIATES

Date Issued: 8/3/2012

This is to certify that the building, premises, or part thereof, at the above location, built-altered-changed as to use under Building Permit No. 2012-03-3463-ALTCOMM, has had a final inspection, has been found to conform substantially to the requirements of the Building Code and the Land Use Code of the City of Portland, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

SECOND FLOOR LEFT SIDE

APPROVED OCCUPANCY

USE GROUP B
MEDICAL OFFICE BUILDING / DENTISTRY

TYPE 5
IBC 2009

Approved:

8-3-2012

(Date)

Inspector

Inspections Division Director

Notice: This certificate identifies the legal use of the building or premises, and ought to be transferred from owner to owner upon the sale of the property.