

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 02-0094	Issue Date: FEB 12 2002	CBL: 238A B004001
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Location of Construction: 66 Hutchins Dr	Owner Name: Plc Associates	Owner Address: 10 Harry Harmon Dr CITY OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: Avery Services, Inc.	Contractor Address: 7 Thomas Drive Westbrook	Phone: 2077728687
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Commercial / Offices	Proposed Use: Commercial / Offices; Install Natural Gas Roof top Unit	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: Install Heating System		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 20 2/8/02 <i>[Signature]</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
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: gg	Date Applied For: 01/30/2002	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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 checked="" type="checkbox"/> Subdivision <i>[Signature]</i> <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 checked="" type="checkbox"/> Requires Review <i>[Signature]</i> <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____	

CERTIFICATION

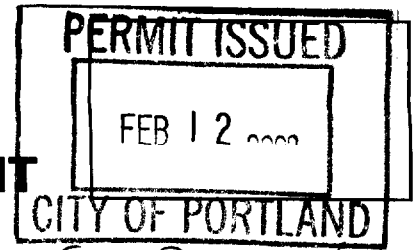
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



238 A B 004

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 66 HUTCHINS DR
~~70 Henry Thomas DR - Portland~~ Use of Building MEDICAL OFFICES/TENANT Date 1/30/02
Name and address of owner of appliance _____

Installer's name and address AVENY SERVICES, INC. 7 THOMAS DRIVE - WESTBROOK, Me 04092
Telephone 207-772-8687 (AV 874-0933)

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Roof Top Unit

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 # PNT1431
- Other _____

Type of Chimney:

Masonry Lined
Factory built N/A

Metal
Factory Built U.L. Listing # N/A

Direct Vent
Type _____ UL# _____

Type of Fuel Tank

- Oil
- Gas NAT. GAS - Northern Utility

Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

30.00

Approved

Approved with Conditions

Fire: W.M.

Ele.: _____

Bldg.: [Signature]

See attached letter or requirement

Signature of Installer Douglas C. Avery

Subcontract Agreement

This Subcontract Agreement is made between
 Maine State Builders, Inc., 245 Warren Avenue, Portland, Maine 04103,
 hereinafter referred to as CONTRACTOR, and
 Avery Services, Inc., 7 Thomas Drive, Westbrook, Maine 04092,
 hereinafter referred to as SUBCONTRACTOR

Job # 230323

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- 1. **Date of agreement:** January 25, 2002
 - 2. **Project Name:** Casco Bay Surgery
 - 3. **Project Location:** 10 Harry Harmon Drive, Portland, Maine
 - 4. **Approx. Start Date of Project:** December 17, 2001
 - 5. **Approx. Finish Date of Project:** April 7, 2002

6. Description of the Work to be performed by SUBCONTRACTOR:

Provide modifications and additions to the existing HVAC system as described by Criterium Mooney Engineers in HVAC SYSTEMS MODIFICATION, dated 12/19/01, and including addendums 1 & 2, dated 1/4/02 & 1/7/02.

Clean the interior plenums of RTU #1-3 & 5. Provide new PVC Condensate Traps on all five RTU's. Provide and replace the Air Filters in the Rooftop Units with new Filters (pleated type). Remove the existing #4 RTU and dispose of unit per EPA requirements.

For each new and existing RTU, supply and install one Carrier Comfort Zone II Controls System with 3 zones of control. Each System will consist of one Master Controller with each other zone controlled by a Carrier Smart Stat, low voltage wiring, and dampers (re-using existing components if in good working order).

Supply and install a new Carrier 48TFF (Gas/Electric-high heat) Rooftop unit with an Economizer to be set onto the existing roof curb, re-connect to the existing system i.e.; gas supply, duct, low voltage wiring. Supply and install two In-Line Exhaust Fans - one for Tenant Lavatories, one for the staff and lobby lavatories as per specs. Supply and install a Carrier HRV, standard control, duct system, with negative pressure air balance as per addendum #1 in the "Clean Utility Room". Supply and install a Carbon Dioxide Monitoring Sensor/Monitor/Recording Station.

Supply and install Galvanized metal Duct System, using as much of the existing trunks as possible. Supply new insulated flex-duct run to ceiling diffusers (new and re-used) as required.

Start up and test system operation. Supply as-built drawings and equipment information. Included a 4-hour allowance for customer orientation on system function, control, and operation.

Dispose of our refuse into a dumpster outside provided by the General Contractor.

7. Special Conditions, Allowances, Exclusions, etc:

EXCLUSIONS: Power wiring, structural, roof work, drop ceiling, carpentry, soffits, painting, overtime labor, fire dampers, fire systems, Repairs/replacements other than stated above, Air Balance of systems, adequacy of existing systems.

8. Total Price for the Work:

Thirty Three Thousand Six Hundred Forty Dollars.....(\$33,640.00)

9. Terms and Timing of Payments, Including Retainage:

Payments shall be made based upon monthly requisitions submitted by the Subcontractor by the 25th of each calendar month, and upon completion of the work. The amount of each requisition shall be commensurate with the work performed on the job plus materials delivered and properly stored at the site. An acceptable certificate of insurance must be provided prior to the disbursement of funds.

Payments shall be disbursed by the 15th of the following month and shall be subject to a ten percent retainage until fifty percent of the entire project is complete, whereupon the retained amount shall be reduced to five percent of the total work complete. All retainage shall be paid in full within 30 days of final completion of this Subcontractor's work.

Subcontractor shall provide a signed lien waiver for all payments received in hand.

The terms and conditions on the back of this page together with the terms and conditions set forth above are hereby incorporated into and become a part of this agreement and are seen and agreed to by:

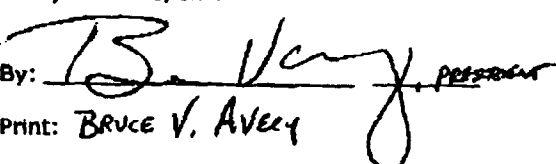
CONTRACTOR

SUBCONTRACTOR

Maine State Builders, Inc.

Avery Services, Inc.

By: 

By:  PRESIDENT

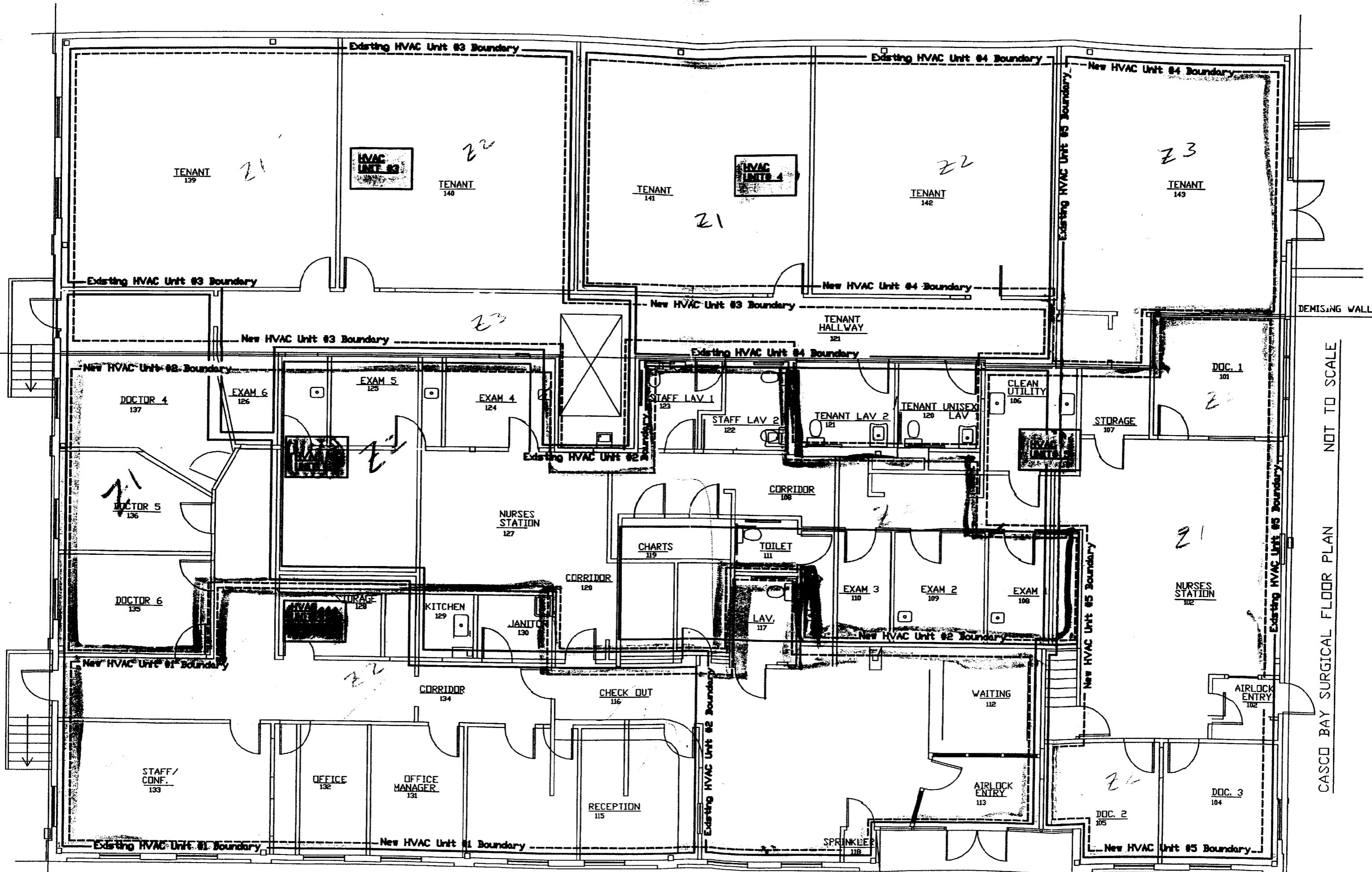
William S. Skoolicas

Print: BRUCE V. AVERY

President

Title: PRESIDENT

PLEASE SIGN & RETURN BOTH COPIES FOR EXECUTION
ONE COPY WILL BE RETURNED FOR YOUR FILES



CASCO BAY SURGICAL FLOOR PLAN NOT TO SCALE