

City of Portland, Maine - Building or Use Permit Application

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

PERMIT ISSUED		
Permit No: 06-0219	Issue Date: MAR 17 2006	CDL: 263A A001001
Location of Construction: 1032 Brighton Ave	Owner Name: Heritage Spe Llc	Owner Address: 535 Boylston St
Business Name:	Contractor Name: n/a	Contractor Address: n/a Portland
Lessee/Buyer's Name	Phone:	Permit Type: <i>Change of Use</i> Alterations - Commercial
Past Use: New Plaza, no existing tenant	Proposed Use: Dental Office / Interior fitup of existing structure	Zone: <i>B2</i>
Proposed Project Description: Interior fitup of existing structure		Permit Fee: \$1,101.00
		Cost of Work: \$120,000.00
		CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See conditions</i>
		INSPECTION: Use Group <i>B</i> Type: <i>2B</i> <i>3/16/06</i>
		Signature: <i>Grea</i>
		Signature: <i>ADJ Clout</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: <i>GG</i>	Date Applied For: <i>0211712006</i>	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>OK w/conditions</i> Date: <i>3/1/06</i> <i>Asm</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p>Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p><i>ABU</i> Date: _____</p>
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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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

PERMIT ISSUED
Permit Number: 060219
MAR 17 2006
CITY OF PORTLAND

This is to certify that Heritage Spe Llc /n/a

has permission to Interior fitup of existing stuc

AT 1032 Brighton Ave 263A A00100

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

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

Notification of inspection must be given and when permission procured before this building or part thereof is occupied or service closed-in. 4 HOUR NOTICE REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. Corey Cass 3-6-06

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature] 3/16/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

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

Permit No: 06-02 19	Date Applied For: 02/17/2006	CBL: 263A A001001
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Location of Construction: 1032 Brighton Ave	Owner Name: Heritage Spe Llc	Owner Address: 535 Boylston St	Phone:
Business Name:	Contractor Name: Benchmark	Contractor Address: 34 Thomas Dr. Westbrook	Phone (207) 591-7600
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	

	Interior fitup of existing stucture
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 03/01/2006
Note: Planning Board determined the required parking for the whole site on the original site plan approval. **Ok to Issue:**
Aspen Dental in first unit closest to Brighton Ave.

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

2) Separate permits shall be required for any new signage.

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 03/16/2006
Note: **Ok to Issue:**

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 03/06/2006
Note: **Ok to Issue:**

1) Sprinkler system to comply with NFPA 13

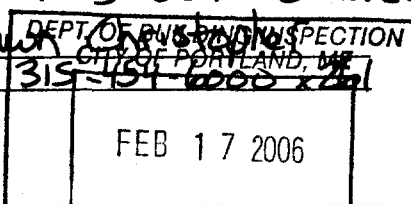
2) All building constructiuon to comply with NFPA 101

Comments:
2/17/2006-GG: Mike collins has a set of plans for reveiw. /gg
2/17/2006-GG:
3/1/2006-GG:



General Building Permit Application # 060219

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: <u>PINE TREE SHOPPING CENTER - 1036 Brighton Ave - #1</u>		
Total Square Footage of Proposed Structure <u>3095 SF OF Demised space</u>	Square Footage of Use <u>N/A</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>263 A</u> Block# <u>A001</u> Lot# <u>1</u>	Owner: <u>NEW England Deve Packard Development</u> <u>CONTACT HOWARD MINTZ</u>	Telephone: <u>617-467-3600</u>
Lessee/Buyer's Name (If Applicable) <u>Aspen Dental (Lessee)</u> <u>1 NORTHERN CONCOURSE</u> <u>N. Syracuse, NY 13212</u>	Applicant name, address & telephone: <u>Shawn Christopher</u> <u>315-454-6000 x 261</u> <u>Address is listed to the left</u>	Cost Of Work: \$ <u>120,000</u> Fee: \$ <u>1,106.00</u> C of O Fee: \$ _____
Current Specific use: <u>N/A - NEW PLAZA, ND, Existing tenant</u> Proposed Specific use: <u>BUSINESS USE, Dental office</u>		
Project description: <u>INTERIOR Fit up of Existing Structure. Aspen Dental's scope includes, interior partitions, electrical, plumbing, millwork, Flooring, CEILINGs, & HVAC Distribution of existing units.</u>		
Contractor's name, address & telephone: <u>The project is out to bid. I will get you the contractor once they are selected</u>		
Who should we contact when the permit is ready: Mailing address: <u>Aspen Dental</u> <u>1 NORTHERN CONCOURSE</u> <u>N. Syracuse, NY 13212</u>	Phone: <u>315-454-6000 x 261</u>	

Please submit all of the information outlined in the Commercial Application Checklist. 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 Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections 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 representatives 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 of applicant: <u>Shawn Christopher</u>	Date: <u>2-8-06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



Aspen Dental Management, Inc.

February 27, 2006

City of Portland
Attn. Gayle Guertine
389 Congress Street
Portland, Maine 04101

**RE: Aspen Dental building permit #06-0219 "Change of use"
Chart# Block # Lot # - 263AA001001**

To Gayle,

I received information last week that we will need to submit for a "change of use" permit for our new space at the "The Pinetree Shopping Center." I called the building department this morning and spoke with a woman by the name of Jeanie Bourke. Jeanie looked up the permit and determined the permit was entered into the computer system incorrectly. The permit was incorrect because the space we will be occupying will be a new building that has no existing use, Therefore, we will be dictating the use once we open for business. She asked me to write you this letter so you could pull the file and change the paperwork for this permit. She also informed me to send you a check for the C. of O. permit that will be needed for our occupancy after our construction is complete. The check for \$75 is attached to this letter. Please let me know if you have any questions or concerns about this matter. I can be reached at 315-454-6000x261 or if you need further clarification please speak with Jeanie Bourke.

Thank you,

Shawn Christopher
Facilities & Construction Manager

cc. Todd Phillips
Lisa Beale
Joe Pozzi



Aspen Dental Management, Inc.

February 10, 2006

City of Portland
Attn. Mike Nugent
389 Congress Street
Portland, Maine 04101

To Donna,

Attached you will find two (2) sets of Architectural, Plumbing, Electrical, Fire Protection, & Mechanical sealed drawings for our "Tenant Fit up" project at Pine Tree Shopping Center, 1036 Brighton Avenue Unit A, Portland, ME 04102. Please give one set to Mike Collins for his review. He asked that I send an extra set for his review. I have also enclosed the General Building Permit Application, New Commercial Permit Application Checklist, Certificate of Design, Accessibility Certificate, CD ROM with all drawings in PDF format, and a check for the plan review/permit in the amount of \$1 101.00. I did not include the C. of O. fee because I did not know how much it was. If you would let me know what the Fee is I will get you another check immediatly. Please let the person reviewing the drawings know that this is a new structure that is currently being built by the owner. We are just performing the interior "fit up" for the space shown on the attached drawings. The owners are responsible for the building structure and "vanillia box" for our space. We will taking the space with all perimeter walls existing, drywalled and ready for paint. We "Aspen Dental" will be required to perform the rest of the work shown on the drawings. Once you have approved the drawings please let me know. I have attached my business card with all my contact information on it. Feel free to contact me with any questions or concerns.

Thank you

Shawn Christopher
Facilities & Construction Manager

Shawn Christopher Construction Manager



Aspen Dental Management, Inc.
One Northern Concourse
North Syracuse, NY 13212
Tel: 315-454-6000 Ext. 261 Fax: 315-454-6324
Mobile: 315-415-7543
E-Mail: schristopher@aspendent.com
www.aspendent.com

course, N. Syracuse, NY 13212 Tel: 315-454-6000 Fax: 315-454-6324



New Commercial Permit Application Checklist

All of the following information is required and must be submitted. ~~Checking~~ 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
- Foundation plans with rebar specifications and required drainage and damp proofing (if applicable)
- Detail egress requirements and fire separations
- Insulation R-factors of walls, ceilings, floors and U-factors of windows as per the IEEC 2003
- Complete the Accessibility Certificate and The Certificate of Design
- A statement of special inspections as required per the IBC 2003
- Complete electrical and plumbing layout.
- Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review.
- Reduced plans or electronic files in PDF format are required if originals are larger than 11" x 17".

By Landlord
N/A
N/A

Separate permits are required for internal & external **plumbing, HVAC** and electrical installations.

Nine (9) copies of the minor (< 10,000 sf) or major (> 10,000 sf) site plan application is required that includes:

- A stamped boundary survey to scale showing north arrow, zoning district and setbacks to a scale of $\geq 1" = 20'$ on paper $\geq 11" \times 17"$
- The shape and dimension of the lot, footprint of the proposed structure and the distance from the actual property lines. Photocopies of the plat or hand draw footprints not to scale will not be accepted.
- Location and dimensions of parking areas and driveways, street spaces and building frontage
- Finish floor or sill elevation (based on mean sea level datum)
- Location and size of both existing utilities in the street and the proposed utilities serving the building
- Existing and proposed grade contours
- Silt fence (erosion control) locations

Existing Structure

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 visit us on-line at www.portlandmaine.gov, stop by the **Building** Inspections office, room 315 **City Hall** or call 874-8703.

Permit Fee: \$30.00 for the first \$1000.00 construction cost, \$9.00 per additional \$1000.00 cost

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

N/A - The Building was existing & Built by the Landlord/owner.

FROM/DESIGNER: _____

DATE: _____

Job Name: _____

Address of Construction: _____

2003 International Building Code

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

Building Code and Year _____ Use Group Classification(s) _____

Type of Construction _____

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC _____

Is the Structure mixed, if yes, separated or non separated (see Section 302.3) _____

Supervisory alarm system? Geotechnical/Soils report required? (See Section 1802.2) _____

STRUCTURAL DESIGN CALCULATIONS

_____ Submitted for all structural members (100.1, 100.1.1)

DESIGN LOADS ON CONSTRUCTION DOCUMENTS (1603)

Uniformly distributed floor live loads (7603.11, 1607)

Floor Area Use	Loads Shown
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Wind loads (1603.1.4, 1609)

- _____ Design option utilized (1609.1.1, 1609.6)
- _____ Basic wind speed (1609.3)
- _____ Building category and wind importance factor, I_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)

Earthquake design data (1609.1.5, 1614-1623)

- _____ Design option utilized (1614.1)
- _____ Seismic use group ("Category") (Table 1604.5, 1616.2)
- _____ Spectral response coefficients, S_{DS} & S_{D1} (1615.1)
- _____ Site class (1615.1.5)

- _____ Live load reduction (1603.1.1, 1607.9, 1607.10)
- _____ Roof live loads (1603.1.2, 1607.11)
- _____ Roof snow loads (7603.7.3, 1608)
- _____ Ground snow load, P_g (1608.2)
- _____ If $P_g > 10$ psf, flat-roof snow load, P_f (1608.3)
- _____ If $P_g > 10$ psf, snow exposure factor, C_e (Table 1608.3.1)
- _____ If $P_g > 10$ psf, snow load importance factor, I_s (Table 1604.5)
- _____ Roof thermal factor, C_t (Table 1608.3.2)
- _____ Sloped roof snowload, P_s (1608.4)
- _____ Seismic design category (1616.9)
- _____ Basic seismic-force-resisting system (Table 1617.8.2)
- _____ Response modification coefficient, R , and deflection amplification factor, C_d (Table 1617.8.2)
- _____ Analysis procedure (1616.8, 1617.5)
- _____ Design base shear (1617.4, 1617.5.1)

Flood loads (1603.1.5, 1612)

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

Other loads

- _____ Concentrated loads (1607.4)
- _____ Partition loads (1607.5)
- _____ Impact loads (1607.8)
- _____ Misc. loads (Table 1607.8, 1607.8.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)

JAN-27-2008 10:34 FROM:

TD:2159530811

P:2/3

FEB 6 2006 2:14PM 33081 809

No. 6184 P. 2



CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Room 315
Portland, Maine 04101

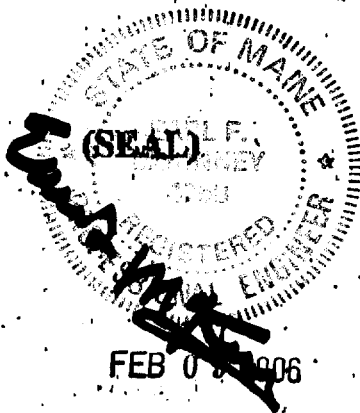
ACCESSIBILITY CERTIFICATE

Designer: Earl F. McKinney

Address of Project: 1030 Brighton Ave, Unit A

Nature of Project: Dentist office
(6 dental chairs)

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.



Signature: Earl F. McKinney

Title: President

Firm: A & E Designers Inc.

Address: 615 Nelson Plac
Suite 100, Lee KY 40503

Phone: (855) 223-1000

NOTE: If this project is a new Multi Family Structure of 4 units or more, this project must also be designed in compliance with the Federal Fair Housing Act. On a separate submission, please explain in narrative form the method of compliance.

JAN-27-2002 10:34 FROM:

TO:2159530811

P13/3

Feb. 6. 2006 2:14PM 35887 80:9

No. 0194 P. 3



CITY OF PORTLAND
BUILDING CODE CERTIFICATE
389 Congress St., Room 315
Portland, Maine 04101

TO: Inspector of Buildings City of Portland, Maine
Department of Planning & Urban Development
Division of Housing & Community Services

FROM: Earl F. McKinney

RE: Certificate of Design

DATE: Feb 9th 2006

These plans and/ or specifications covering construction work on:

Aspen Dental @ Pine Tree Shopping Center

1030 Brighton Ave, Unit A, Portland ME 04102

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



(SEAL)

Signature: Earl F. McKinney

Title: President

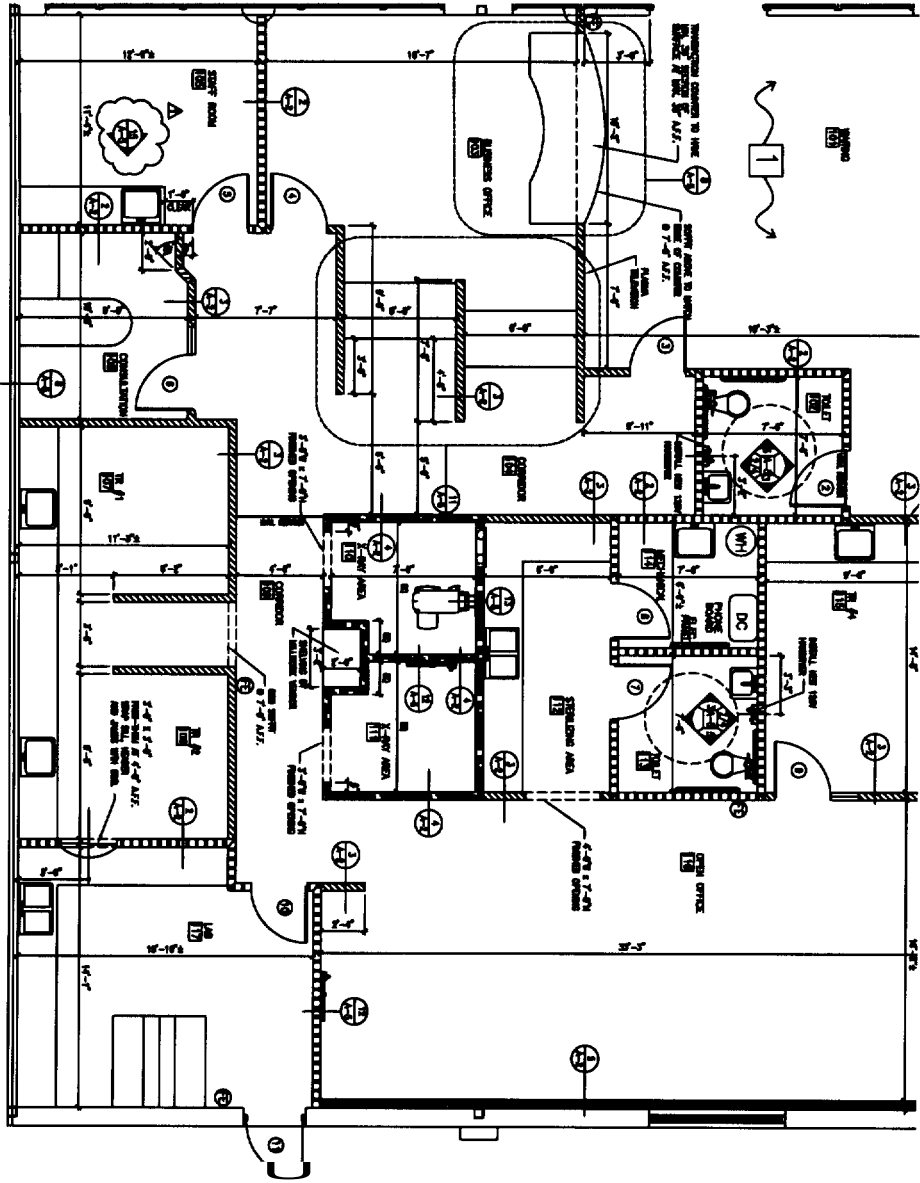
Firm: A&E Design Inc

Address: 615 Dezen Place
Suite 100
Lexington KY 40503

As per Maine State Law:

350,000.00 or more in new construction, repair
expansion, addition, or modification for
Building or Structures, shall be prepared by a
registered design Professional.

FEB 09 2006



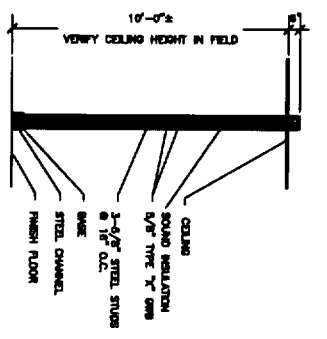
PARTITION PLAN
SCALE: 1/4" = 1'-0"

MNL'S GC WILL BE RESPONSIBLE FOR POURING THE FLOOR SLAB THROUGHOUT THE
 JAVED PRESSURE. GC TO USE 3000 PSI CONCRETE W/ 3" MAX. 1 1/2" MAX
 E. W/C RATIO: 0.24 MAX. ENHANCED AIR ONLY (NO ENHANCED) SLUMP: 4" MAX
 BY GC) THIS WILL BE LEFT ON SITE.

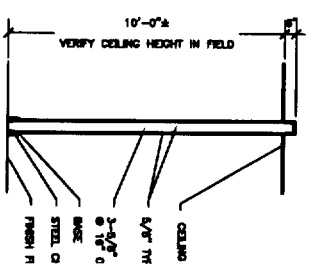
BUILDING-COORDINATE
 All dimensions, including wall thickness, shall be shown on the drawings, and the contractor shall verify the accuracy of the same and shall be responsible for any errors or omissions in the drawings. The contractor shall be responsible for any errors or omissions in the drawings. The contractor shall be responsible for any errors or omissions in the drawings.

⊕ FIRE EXTINGUISHER LOCATION

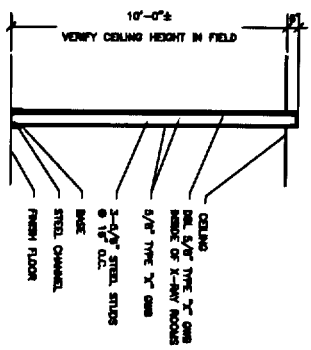
ⓐ PARTITION TYPE "A"
SCALE: 1/4" = 1'-0"



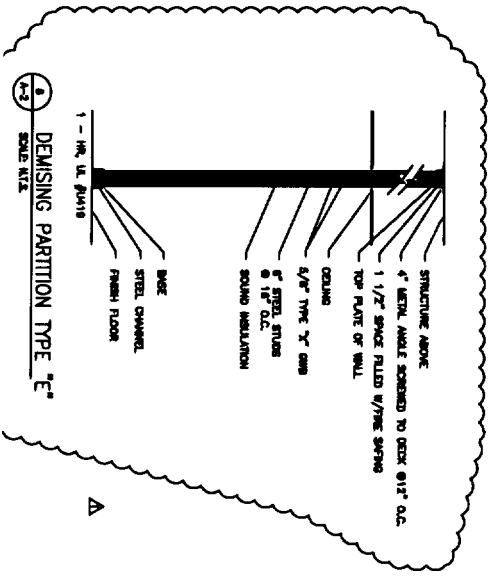
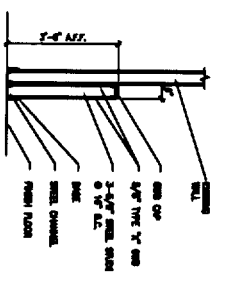
ⓑ PARTITION TYPE "B"
SCALE: 1/4" = 1'-0"



ⓒ PARTITION TYPE "C"
SCALE: 1/4" = 1'-0"



ⓓ PARTITION TYPE "D"
SCALE: 1/4" = 1'-0"



LIMITING HEIGHTS FOR INTERIOR DRYWALL PARTITIONS
 SOUNDING = 5' per
 REFLECTION = 1/260

SECTION	(H'-A)	(H'-B)	SPACING (W)	MAX. HB (H)
3 1/2" CW 20	0.644	0.285	12	15.9
3 1/2" SW 16	0.657	0.275	16	14.5
3 1/2" SW 16	0.797	0.456	24	12.8
3 5/8" CW 20	0.503	0.278	12	16.4
3 5/8" CW 20	0.714	0.284	16	14.9
3 5/8" SW 16	0.687	0.478	24	13.2
4" CW 20	0.634	0.317	12	17.7
4" SW 16	0.801	0.460	16	16.1
4" SW 16	1.095	0.548	24	15.3
6" CW 20	1.896	0.855	24	14.4