

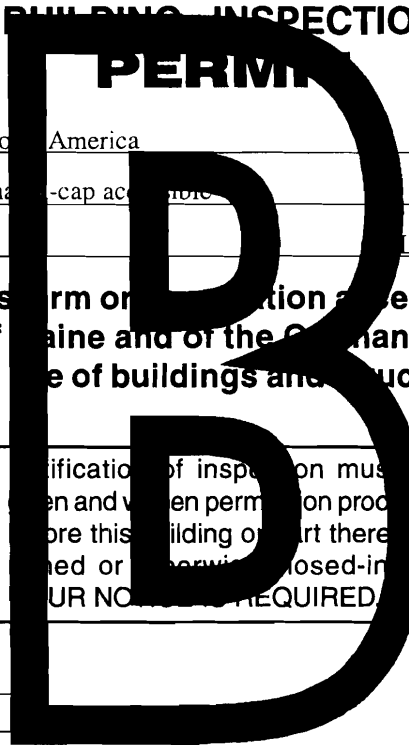
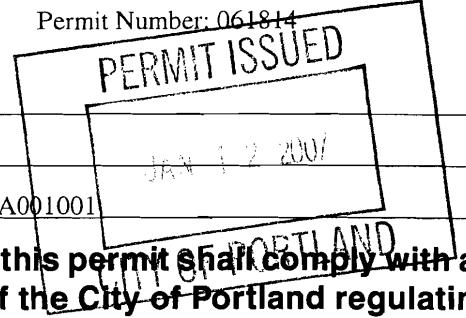
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

Permit Number: 061814



This is to certify that NH6 LR III LTD /Accor No America
has permission to Remodel Guest rooms for ha -cap acc
AT 1 RIVERSIDE ST L 266 A001001

provided that the person or persons firm or 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.

ification of inspection must be
en and when permission proce
ore this building or part there
ed or service closed-in 4
UR NOT 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
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Jeanie Bouke 1/4/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-1814	Issue Date: PERMIT ISSUED	CBL: 266 A001001
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Location of Construction: 1 RIVERSIDE ST	Owner Name: NH6 LR III LTD	Owner Address: PO BOX 117508	Phone:
Business Name:	Contractor Name: Accor North America	Contractor Address: 4001 International Pkwy Carrollton	Phone: 3122607107
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B-4

Past Use: Commercial - Motel 6	Proposed Use: Commercial - Motel 6- Remodel Guest rooms for handi-cap accessible	Permit Fee: \$570.00	Cost of Work: \$55,000.00	CEO District: 3
Proposed Project Description: Remodel Guest rooms for handi-cap accessible		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: R1 Type: SA IBC-2003	
		Signature: <i>Greg Carr</i>	Signature: <i>JMB 1/4/07</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: ldobson	Date Applied For: 12/21/2006	Zoning Approval		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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 type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>12/22/06</i>	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 checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

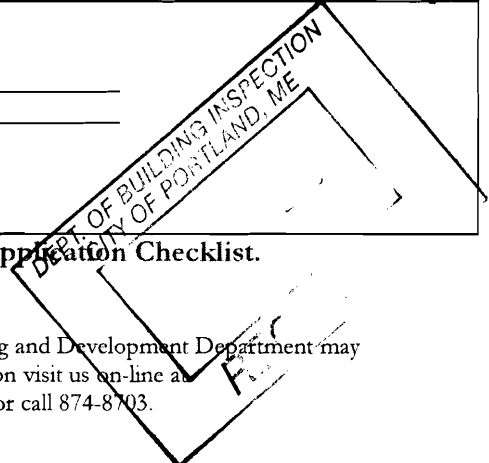
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE



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.

Location/Address of Construction: <u>ONE RIVERSIDE ST.</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot <u>3.01 ACRES</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>266 A 1</u>	Owner: <u>ACCOR NORTH AMERICA 4001 INTERNATIONAL PLWY CARROLLTON, TX 75007</u>	Telephone: <u>(972) 776-1685</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>JENNA WEGER 111 W. WASHINGTON ST. SUITE 450 CHICAGO, IL 60603 (312) 200-7107</u>	Cost Of Work: \$ <u>55,000</u> Fee: \$ <u>570.00</u> C of O Fee: \$ _____
Current Specific use: <u>MOTEL (EXISTING)</u> If vacant, what was the previous use? _____ Proposed Specific use: _____		
Project description: <u>REMODEL GUEST ROOMS TO ACCOMMODATE INDIVIDUALS WITH DISABILITIES. THE WORK WILL INCLUDE DEMOLITION OF PORTIONS OF THE EXISTING RESTROOMS, CONSTRUCTION OF NEW ROLL IN SHOWERS, RELOCATION OF PLUMBING FIXTURES, AND REFINISHING OF ALL SURFACES. SITE WORK AS NECESSARY TO PROVIDE AN ACCESSIBLE TO ACCESSIBLE ROOMS AND PARKING SPACES AND ALL PUBLIC FACILITIES ON THE PROPERTY.</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>JENNA WEGER</u> Mailing address: _____ Phone: <u>(312) 200-7107</u> <u>111 W. WASHINGTON ST. SUITE 450</u> <u>CHICAGO, IL 60603</u>		



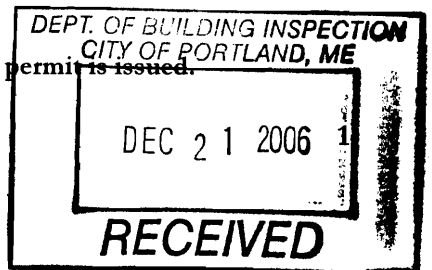
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

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 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 of applicant: <u>Jenna Weger</u>	Date: <u>12/13/2006</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



City of Portland, Maine - Building or Use Permit

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

Permit No: 06-1814	Date Applied For: 12/21/2006	CBL: 266 A001001
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Business Name:	Contractor Name: Accor North America	Contractor Address: 4001 International Pkwy Carrollton	Phone (312) 260-7107
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial - Motel 6- Remodel Guest rooms for handi-cap accessible	Proposed Project Description: Remodel Guest rooms for handi-cap accessible
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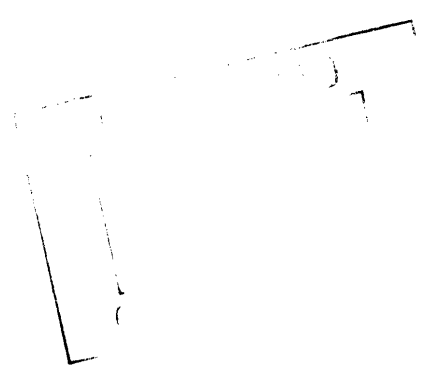
Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 12/22/2006
Note: **Ok to Issue:**

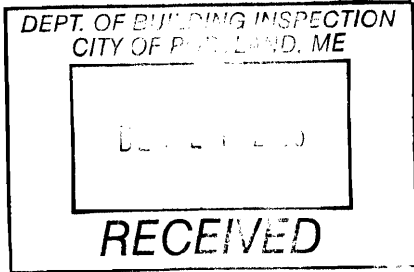
Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 01/04/2006
Note: **Ok to Issue:**

- 1) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating.
- 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 12/22/2006
Note: **Ok to Issue:**

- 1) The sprinkler system shall be installed in accordance with NFPA 13.
A fire alarm system shall be installed in accordance with NFPA 72 with a Masterbox connection.
Compliance letters are required for both installations
- 2) Application requires State Fire Marshal approval.





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

ACCESSIBILITY CERTIFICATE

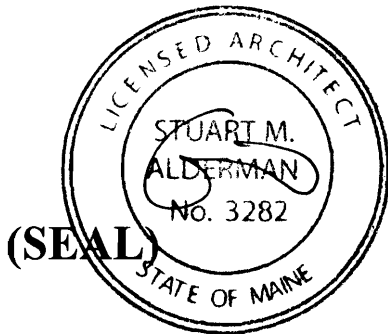
Designer: STUART ALDERMAN

Address of Project: ONE RIVERSIDE STREET

Nature of Project: REMODEL GUEST ROOMS AND
SITWORK (INCLUDING ALL PUBLIC FACILITIES)

TO ACCOMMODATE INDIVIDUALS WITH DISABILITIES.

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: [Handwritten Signature]

Title: ARCHITECT / PARTNER

Firm: ALDERMAN-PACONE

Address: 2708 S. LAMAR, STE. 200 B
AUSTIN, TX 78704

Phone: (512) 916-0041



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 & Development
Division of Inspections Services

FROM: STUART ALDERMAN

RE: Certificate of Design

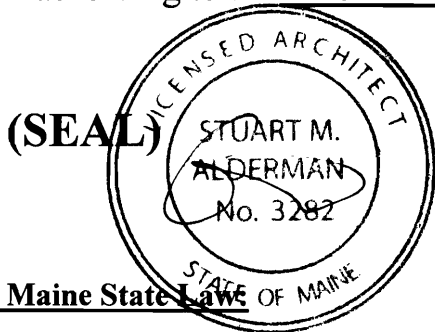
DATE: 12/18/06

These plans and / or specifications covering construction work on:

MOTEL 6 NO. 1273 - PORTLAND, MAINE

HANDICAP ACCESSIBILITY UPGRADES

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



Signature: [Handwritten Signature]

Title: ARCHITECT / PARTNER

Firm: ALDERMAN-PACCONI

Address: 2708 S. LAMAR, STE. 200B
AUSTIN, TX 78704

As per Maine State Law
\$50,000.00 or more in new construction, repair expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

FROM DESIGNER: STUART ALDERMAN
 DATE: 12/18/06
 Job Name: MOTEL 6 NO. 1273
 Address of Construction: ONE RIVERSIDE STREET

2003 International Building Code

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

Building Code & Year 2003 IBC Use Group Classification (s) R1

Type of Construction TYPE 5A - 1-HOUR

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC NO

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) 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
<u>N/A</u>	<u>N/A</u>
_____	_____
_____	_____
_____	_____
_____	_____

Wind loads (1603.1.4, 1609)

N/A Design option utilized (1609.1.1, 1609.6)
 _____ Basic wind speed (1809.3)
 _____ 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)
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)
 _____ Seismic use group ("Category") (Table 1604.5, 1616.2)
 _____ Spectral response coefficients, S_D & S_I (1615.1)
N/A Site class (1615.1.5)

N/A 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
 (Table 1617.6.2)
 _____ Response modification coefficient, R , and
 deflection amplification factor C_d Table 1617.6.2
 _____ Analysis procedure (1616.6, 1617.5)
N/A Design base shear (1617.4, 1617.5.1)

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)



SIMPLY
GETTING IT DONE >> > >

TRANSMITTAL

DATE: December 19, 2006

FROM: Jenna Weger

TO: Lannie Dobson
City of Portland - Planning & Development Department
Portland City Hall
389 Congress Street; Room 315
Portland, ME 04101

Re: **Motel 6 - 1273 - Portland**

Lannie:

Please find the following items/documents:

- Completed application.
- Two (2) sets of the original permit drawings.
- Signed and stamped Accessibility Certificate.
- Signed and stamped Building Code Certificate.
- CD with PDF file of plans.
- Check #44594 in the amount of \$570.00 for fees.
Please fax receipt to (312) 407-7915.

If you have any questions please call me at (312) 260-7107.

Thank You!

> 111 West Washington Street
Suite 450
Chicago, IL 60602
phone 312.407.7990
fax 312.407.7915
www.burnham.com