



General Building Permit Application

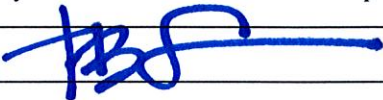
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/Location of Construction: 513 Warren Ave., Portland, ME 04103		
Total Square Footage of Proposed Structure:		5245 Affected
		104,000 TOTAL FLOOR
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 304 B033001		Applicant Name: Ideal Due Diligence Address: 5843 Harrison Ave, Suite 301A City, State & Zip: Cincinnati, OH 45248 Telephone: (513) 389-1059 Email: amandac@idealdd.com
Lessee/Owner Name: BJ's Wholesale Club (if different than applicant) Address: 25 Research Blvd. City, State & Zip: Westborough, MA 01581 Telephone: 774 512 1921 E-mail: jchisholm@bjs.com		Contractor Name: TBD (if different from Applicant) Address: City, State & Zip: Telephone: E-mail: Cost of Work: \$150,000.00 C of O Fee: \$ Historic Rev \$ Total Fees: \$2310.00
Current Use (i.e. single family) <input type="checkbox"/> (M) Mercantile <input checked="" type="checkbox"/>		
If vacant, what was the previous use? _____		
Proposed Specific use: _____		
Is property part of a subdivision? If yes, please Name _____		
Project description: Interior alteration of existing BJ's Wholesale Club		
Who should we contact when the permit is ready: Amanda Caldwell, Ideal Due Diligence		
Address: 5843 Harrison Ave, Suite 301A		
City, State & Zip: Cincinnati, OH 45248		
E-mail Address: amandac@idealdd.com		
Telephone: (513) 389-1059		

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: 3/18/2016
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This is not a permit; you may not commence ANY work until the permit is issued.



Certificate of Design Application

From Designer: Timothy B. Seaman (AGI Principal Architect)
 Date: 3/18/2016
 Job Name: BJ's Wholesale Club Portland Maine
 Address of Construction: 513 Warren Ave. Portland

2009 International Building Code

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

Building Code & Year 2009 IBC Use Group Classification (s) M
 Type of Construction 2B
 Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IBC Existing Systems
 Is the Structure mixed use? Retail If yes, separated or non separated or non separated (section 302.3) Non
 Supervisory alarm System? Yes Geotechnical/Soils report required? (See Section 1802.2) No, Interior work only

Structural Design Calculations

NA 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

Wind loads (1603.1.4, 1609)

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)
 Main force wind pressures (7603.1.1, 1609.6.2.1)

Earth design data (1603.1.5, 1614-1623)

Design option utilized (1614.1)
 Seismic use group ("Category")
 Spectral response coefficients, S_D & S_{D1} (1615.1)
 Site class (1615.1.5)

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 (1617.6.2)
 Response modification coefficient, R_f and deflection amplification factor, C_d (1617.6.2)
 Analysis procedure (1616.6, 1617.5)
 Design base shear (1617.4, 16175.5.1)

Flood loads (1803.1.6, 1612)

Flood Hazard area (1612.3)
 Elevation of structure

Other loads

Concentrated loads (1607.4)
 Partition loads (1607.5)
 Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)



Accessibility Building Code Certificate

Designer: Timothy B. Seaman (AGI Principal Architect)

Address of Project: 513 Warren Ave. Portland ME

Nature of Project: Interior Remodel of Deli and Chicken Dept.

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:  3118116

Title: Architect

Firm: AGI

Address: 15 West Seventh St

Covington KY 41011

Phone: 859-261-5400

(SEAL)

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



Certificate of Design

Date: 3/18/2016

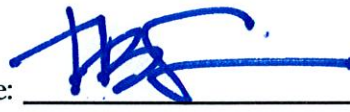
From: Timothy B. Seaman

These plans and / or specifications covering construction work on:

553 Warren Ave. Portland ME

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

Signature: _____

 3/18/16

Title: Architect

Firm: AGI

Address: 15 West Seventh St.

Covington KY 41011

Phone: 859-261-5400

(SEAL)

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PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 513 Warren Ave
 CBL: 304 B 033001

PROPERTY OWNER(S) NAME
 OWNER NAME: BJ's Wholesale Club
 Applicant Name: Scott Kyle

Mailing Address of Owner/Applicant (if Different) 15 West Seventh St

E Mail: skyle@agi-us.com

Owner/Applicant Statement
 I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.
Scott Kyle-Applicant 3/18/16
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # _____
 Date Permit Issued 3/1/16 Fee: \$ _____ Double Fee Charged

Local Plumbing Inspector Signature _____ L.P.I. # 360

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Caution: Inspection Required
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER-SPECIFY _____</p> <p style="background-color: #90EE90; text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>TBD Upon Bid Award</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # </p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	<input type="checkbox"/> 0 Hosebib / Sillcock	<input type="checkbox"/> 0 Bathtub (and Shower)
	<input type="checkbox"/> 1 Floor Drain	<input type="checkbox"/> 0 Shower (separate)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> 0 Urinal	<input type="checkbox"/> 3 Sink
	<input type="checkbox"/> 0 Drinking Fountain	<input type="checkbox"/> 0 Wash Basin
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> 2 Indirect Waste	<input type="checkbox"/> 0 Water Closet (Toilet)
	<input type="checkbox"/> 0 Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> 0 Clothes Washer
OR	<input type="checkbox"/> 1 Grease / Oil Separator	<input type="checkbox"/> 0 Dish Washer
	<input type="checkbox"/> 0 Roof Drain	<input type="checkbox"/> 0 Garbage Disposal
<input type="checkbox"/> TRANSFER FEE \$10.00	<input type="checkbox"/> 0 Bidet	<input type="checkbox"/> 0 Laundry Tub
	<input type="checkbox"/> 0 Other: _____	<input type="checkbox"/> 0 Water Heater
	4 Fixtures (Subtotal) Column 2	3 Fixtures (Subtotal) Column 1
		<input type="checkbox"/> 7 TOTAL FIXTURES
	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/> Fixture Fee
		<input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		PERMIT FEE (TOTAL)

ELECTRICAL PERMIT

City of Portland, Maine

To the Electrical Inspector, Portland Maine :

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland's Electrical Ordinances, National Electrical Code and the following specifications:



Date: 3/18/16

Permit #: _____

CBL#: _____

ADDRESS: 513 Warren Avenue, Portland ME 04103

METER MAKE/MODEL #: _____

CMP Work Order #: _____

OWNER: BJ's Wholesale Club

TENANT: BJ's Wholesale Club

PHONE #: 774-512-5818

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

						TOTAL EACH FEE		
OUTLETS:	26	Receptacles	4	Switches	0	Smoke Detector	0.20	6
FIXTURES:		Incandescent	101	Flourescent		Strips	0.20	20.2
SERVICES:		Overhead		Underground		TTL Amps <800	15.00	0
						TTL Amps >800	25.00	0
TEMPORARY SERVICE:		Overhead		Underground		TTL Amps	25.00	0
METERS:		(Number of)					1.00	0
MOTORS:	1	(Number of)					2.00	2
RESID/COMMER:		Electric Units					1.00	0
HEATING:		Oil/Gas Units		Interior		Exterior	5.00	0
APPLIANCES:		Ranges		Cook Tops		Wall Ovens	2.00	0
		Insta-hot		Water Heaters		Fans	2.00	
		Dryers		Disposals		Dishwasher	2.00	
		Compactors		Spa		Washing Machine	2.00	
		Others (denote)					2.00	
MISC. (# of):		Air Cond (Window)					3.00	0
		Air Cond (Central)				Pools	10.00	0
		HVAC		EMS		Thermostat	5.00	0
		Signs					10.00	0
		Alarms/Resident					5.00	0
		Alarms/Commer					15.00	0
		Heavy Duty (CRKT)					2.00	0
		Alterations					5.00	0
		Fire Repairs					15.00	
	1	Emergency Lights					1.00	1
		Emer Generators					20.00	0
		Circus/Carnival					25.00	0
PANELS:		Service	1	Remote		Main	4.00	4
TRANSFORMER:		0-25 Kva					5.00	0
		25-200 Kva					8.00	0
		Over 200 Kva					10.00	0

MINIMUM COMMERCIAL FEE: \$55.00

MINIMUM RESIDENTIAL FEE: \$45.00

Brief Description of work:

TOTAL DUE:

\$ 55.00

Addition of chicken oven and chicken prep area

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

CONTRACTOR INFORMATION:

Contractor Name: _____ Master License #: _____

Address: _____ Limited License #: _____

Telephone & E Mail: _____

Contractor Signature:

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

CBL :



Department of Permitting and Inspections

Commercial Hood / Exhaust Application

Dear Applicant,

The following is a checklist to assist you in filing for a permit for a Kitchen Exhaust system. Please complete this and submit job specific construction documents that demonstrate compliance.

1. Type of System:

Type I X Type II _____

Type I systems are systems that vent fryers, grills, broilers, ovens or woks.

Type II systems are systems that vent steamers and other non-grease producing appliances.

2. Type of Materials:

Is the hood Stainless steel or other type of steel? ⁴³⁰ Stainless Steel

If other, what type? —

Is the duct work Stainless steel or other type of steel? —

If other, what type? Aluminum

Thickness of the steel for the hood: _____ Thickness of the duct for the hood: _____

Type of Hood and Duct Supports Exhaust Only Canopy Hood

Type of seams and Joints Enclosure to outermost perimeter, directs and captures grease laden vapor

Grease Gutters provided? Yes Hood Clearance reduction to Combustibles design /specs: 1

Hood shall be provided with an integral front and rear clearance

Duct Clearance reduction to Combustibles design /specs:

Vibration Isolation System: —



Department of Permitting and Inspections

Air Velocity within the duct system 1091 Fpm

Grease accumulation prevention system: integral front baffle to direct grease laden vapors toward the exhaust filter banks

Cleanouts: Removable grease cup, deep grease trough

Grease Duct enclosure: deep grease trough

Exhaust Termination: Roof X Wall _____

Fire Suppression System: UL-300 integral Plenum and duct Fire system

Exhaust fan mounting and clearance from the roof / wall or Combustibles:

Please ref. detail 2 & 3 on sheet M201

Exhaust fan distance from property lines: 55'

Exhaust fan distance from other vents or openings: N/A

Exhaust fan distance from adjacent buildings: N/A - Standalone building

Exhaust fan height above adjoining grade: 21' + Curb

3. Hood Specs

Style of Hood: Exhaust only Canopy Hood

Type of Filter: Stainless Steel SS Baffle with handles

Height of filter above nearest cooking surface: 73"

Capacity of hood CFM: Mm CFM/Ft - 150

Make up Air system description and capacity:

Factory installed AC-PSP which delivers 80% make-up air, provides

termination point for the air in separate insulated plenum.



FILL IN AND SIGN WITH INK

Application for Heating, Ventilation, Air Conditioning (HVAC) or Power Equipment

To the Inspector of Buildings, Portland Maine:

The undersigned hereby applies for a permit to install the following HVAC, or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Address and CBL: 513 Warren Ave, Portland, ME Use of Building: Whole sale Date: 3/22/16

Name & Address of Owner: BJ's Wholesale Club

Phone # of Owner: 774 512 1921 Email: jchisholm@bjs.com

Name & Address of Installer: TBD

Phone # of Installer: _____ Email: _____

Is this an EXACT replacement? (ie: SAME PRODUCT in the SAME LOCATION?)

(If so, you do NOT need to provide any plans, etc, just this form. NOTE: a final inspection is still a requirement)

<p>Location of Appliance:</p> <p><input type="checkbox"/> Basement <input checked="" type="checkbox"/> Floor <input type="checkbox"/> Wall</p> <p><input type="checkbox"/> Attic <input type="checkbox"/> Roof</p> <p>Fuel or Power Source:</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Solid</p> <p>Appliance Name: <u>Captive Air NCA14FA</u></p> <p>Name of Listed Approval Entity (ie; UL Approval): <u>UL 181 - UL 181</u></p> <p>Will appliance be installed in accordance with the manufacturer's instructions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Type of License of Installer:</p> <p>Master Plumber#: _____</p> <p>Solid Fuel : _____</p> <p>Oil #: _____</p> <p>Gas #: _____</p> <p>Other: _____</p>	<p>Type of Venting: (Plan required for submittal)</p> <p><input type="checkbox"/> Masonry Lined</p> <p><input type="checkbox"/> Factory Built: _____</p> <p><input type="checkbox"/> Metal</p> <p><input type="checkbox"/> Factory Built Listing #: _____</p> <p><input type="checkbox"/> Direct Vent</p> <p style="text-align: right;">Type: _____ (ie: UL)</p> <p># of Tanks: _____</p> <p>Type of Fuel Tank:</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> K1 <input type="checkbox"/> N/A</p> <p>Size of Tank: _____</p> <p>Distance from tank to center of flame: _____</p> <p>Cost of Work: \$ _____</p> <p>Permit Fee: \$ _____</p>
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Signature of Installer: _____ Date: _____