

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that 1321 ASSOCIATES, LLC – MAINE
ORTHODONTICS

Located At 15 NORTHPORT DR

Job ID: 2012-06-4222-ALTCOMM

CBL: 401- A-005-015

has permission to Upgrade the orthodontic unit on the 2nd fl; relocate partitions, new administrative, reception, staff areas 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

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**

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-06-4222-ALTCOMM	Date Applied: 6/12/2012	CBL: 401- A-005-015	
Location of Construction: 15 NORTHPORT DR (1321 Washington Ave.) – 2 nd floor	Owner Name: 1321 ASSOCIATES, LLC – Peter Hogland	Owner Address: 1976 WASHINGTON AVE PORTLAND, ME 04103	Phone:
Business Name:	Contractor Name: Turner Contracting – Bob Turner	Contractor Address: PO Box 2106, Windham, ME 04062	Phone: (207) 892-2056
Lessee/Buyer's Name: Maine Orthodontics	Phone: 207-878-5918	Permit Type: BLDG - Building	Zone: B-2
Past Use: Professional Office	Proposed Use: Same – Professional Office – interior renovations – left side, 2 nd floor	Cost of Work: 35000.00	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: B Type: 2B IBC 2009 Signature: <i>[Signature]</i>
Proposed Project Description: Upgrade space; relocate partitions etc.		Pedestrian Activities District (P.A.D.) <i>[Signature]</i> 6/2/12	
Permit Taken By: brad		Zoning Approval	

<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 informatin 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"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: <i>06/12/12</i> <i>ABM</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><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in Dist 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>Date: <i>ABM</i></p>
	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

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.**

Close In Elec/Plmb/Frame prior to insulate or gyp

Final Inspection

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

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Acting Director of Planning and Urban Development
Gregory Mitchell

Job ID: 2012-06-4222-ALTCOMM

Located At: 15 NORTHPORT DR

CBL: 401- A-005-015

Conditions of Approval:

Fire

1. Installation shall comply with City Code Chapter 10.
2. All construction shall comply with City Code Chapter 10.
3. <http://www.portlandmaine.gov/citycode/chapter010.pdf>
4. Street addresses shall be marked on the structure and shall be as approved by the City E-911 Addressing Officer. Contact Michelle Sweeney at 874-8682 for further information.
5. All outstanding code violations shall be corrected prior to final inspection.
6. Central Station monitoring for addressable fire alarm systems shall be by point.
7. Any Fire alarm or Sprinkler systems shall be reviewed by a licensed contractor(s) for code compliance. Compliance letters are required.
8. A separate Fire Alarm Permit is required for new systems; or for work effecting more than 5 fire alarm devices; or replacement of a fire alarm panel with a different model. This review does not include approval of fire alarm system design or installation.
9. Fire Alarm system shall be maintained. If system is to be off line over 4 hours a fire watch shall be in place. Dispatch notification required 874-8576.
10. The fire alarm system shall comply with the City of Portland Standard for Signaling Systems for the Protection of Life and Property. All fire alarm installation and servicing companies shall have a Certificate of Fitness from the Fire Department.
11. All fire alarm records required by NFPA 72 should be stored in an approved cabinet located at the FACP labeled "FIRE ALARM RECORDS".
12. Records cabinet, FACP, annunciator(s), and pull stations shall be keyed alike.
13. All smoke detectors and smoke alarms shall be photoelectric.
14. A separate Suppression System Permit is required for all new suppression systems or sprinkler work effecting more than 20 heads. This review does not include approval of sprinkler system design or installation.
15. A sprinkler supervisory system shall be provided in accordance with NFPA 101, *Life Safety Code*, and NFPA 72, *National Fire Alarm and Signaling Code*. Sprinkler supervisory systems shall monitor for water flow and sprinkler supervisory signals via an approved fire alarm panel to central station. One smoke detector shall be located over the panel, a manual pull station located at the front door, and an audible water flow alarm provided.
16. 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.
17. Fire department connection type and location shall be approved in writing by fire prevention bureau. The Fire Department will require Knox locking caps on all Fire Department Connections on the exterior of the building.
18. System acceptance and commissioning must be coordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

19. Installation of a sprinkler or fire alarm system requires a Knox Box to be installed per city ordinance.
20. Fire extinguishers are required per NFPA 1.
21. Notification: Two means of egress are required from every story. "MRSA Title 25 § 2453"
22. Occupancies with an occupant load of 100 persons or more require panic hardware on all doors serving as a means of egress.
23. Emergency lights and exit signs are required. Emergency lights and exit signs are required to be labeled in relation to the panel and circuit and on the same circuit as the lighting for the area they serve.
24. Any cutting and welding done will require a Hot Work Permit from Fire Department.

Building

1. Application approval based upon information provided by the applicant or design professional. Any deviation from approved plans requires separate review and approval prior to work. As per Bob Turner, an as built plan will be submitted for minor changes in the scope of work.
2. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm, HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.

COPY A1

B-2 2012-06-4222

Entered 6/12/12

(B)



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.

15 Northport

Location/Address of Construction: <u>1321 Washington Ave Northport Prof. Bldg.</u>	
Total Square Footage of Proposed Structure/Area	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>402</u> Block# <u>A022</u> Lot# <u>401-A05015</u>	Applicant *must be owner, Lessee or Buyer* Name <u>MAINE ORTHODONTICS</u> Address <u>1321 Washington Ave</u> City, State & Zip <u>Portland ME</u>
Telephone: <u>878 5918</u>	
Lessee/DBA (If Applicable) <u>MAINE ORTHODONTICS</u>	Owner (if different from Applicant) Name <u>PETER HOGLUND</u> Address <u>1321 Washington Ave</u> City, State & Zip <u>Portland, ME</u>
Cost Of Work \$ <u>35,000.-</u>	C of O Fee: \$ _____
Total Fee: \$ <u>370.00</u>	
Current legal use (i.e. single family) <u>BUSINESS - ORTHODONTIC OFFICE</u>	
If vacant, what was the previous use? _____	
Proposed Specific use: <u>RENOVATION</u>	
Is property part of a subdivision? <u>NO</u> If yes, please name _____	
Project description: <u>Upgrade of professional space. Relocation of interior partitions, New flooring, paint, lighting.</u>	
Contractor's name: <u>TURNER CONTRACTING</u>	
Address: <u>PO Box 2106</u>	
City, State & Zip <u>WINDHAM, ME 04062</u>	Telephone: <u>892-2056</u>
Who should we contact when the permit is ready: <u>Bob Turner 329-4217</u>	Telephone: _____
Mailing address: <u>PO Box 2106 WINDHAM, ME 04062</u>	

Please submit all of the information outlined on the applicable 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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspection Division 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 with 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: [Handwritten Signature] Date: 6/4/12

This is not a permit; you may not commence ANY work until the permit is issued

RECEIVED
JUN 12 2012
Dep. of Building Inspections
City of Portland Maine



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Receipts Details:

Tender Information: Check , Check Number: 3170
Tender Amount: 370.00

Receipt Header:

Cashier Id: bsaucier
Receipt Date: 6/12/2012
Receipt Number: 44893

Receipt Details:

Referance ID:	6868	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	370.00	Charge Amount:	370.00
Job ID: Job ID: 2012-06-4222-ALTCOMM - Upgrade space; relocate partitions etc.			
Additional Comments: 1321 Washington			

Thank You for your Payment!



Accessibility Building Code Certificate

Designer:

Don Dyer, ARCHITECT

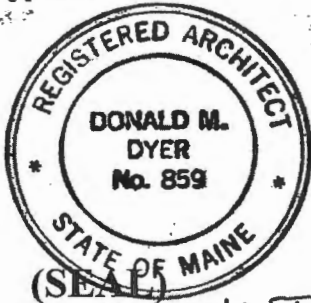
Address of Project:

1321 Washington Ave. - Northport Professional Building

Nature of Project:

INTERIOR RENOVATIONS and
Upgrade of Professional Offices -
MAINE ORTHODONTICS

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.



(SEAL)
Donald M. Dyer

Signature:

Donald M. Dyer

Title:

Principal

Firm:

Don Dyer, ARCHITECT

Address:

21 Papoose Lane

Limington, Maine

Phone:

207-423-5371

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:

JUNE, 2012

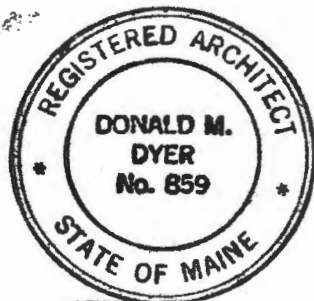
From:

VON DYER, ARCHITECT

These plans and / or specifications covering construction work on:

INTERIOR
Renovations to MAINE ORTHODONTICS at 1321
Washington Avenue - Northport Professional Building

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)

Donald M. Dyer

Signature:

Donald M. Dyer

Title:

Principal

Firm:

VON DYER, ARCHITECT

Address:

21 Papoose Lane
Limington, Maine

Phone:

207-423-5371

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