18850I CO
L/16 P40

Building Permit Application
City of Portland, Oregon - Bureau of Development Services
1900 SW 4th Avenue, Portland, Oregon 97201 • 503-823-7300 • TTY 503-823-6868 • www.portlandoregon.gov/bds

Type of work

- ☐ New construction
- ☑ Addition/alteration/replacement
- ☐ Demolition
- ☐ Other:

Category of construction

- ☐ 1 & 2 family dwelling
- ☑ Commercial/industrial
- ☐ Accessory building
- ☐ Multifamily
- ☐ Master builder
- ☐ Other:

Job site information and location

Job no.: Job address: 9199 NE CASCADE PKWY

City/State/ZIP: PORTLAND OR 97224

Suite/bldg./apt. no.: MAJOR C Project name: LOFT

Cross street/directions to job site: NE MT HOOD AVE
NE AIRPORT WAY

Subdivision: CASCADE STATION Lot no. Tax map/parcel no.

Description of work

INTERIOR TENANT IMPROV. FOR RETAIL STORE IN AN EXISTING RETAIL SPACE - WORK TO INCLUDE ARCH, MECH, PLUMB, ELECT

Provide RS Permit no.

☐ Property owner ☑ Tenant

Name: ANN, INC E-mail:

Address: 7 TIMES SQUARE

City/State/ZIP: NEW YORK NY 10036

Phone: FAX:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: Date:

☐ Contractor

TBD

Business name: E-mail:

Address:

City/State/ZIP:

Phone: FAX:

CCB lic. no.

Authorized signature:

Print name: Date:

☐ Applicant ☑ Contact Person

Business name: Faster Permits

Contact name: Mike Coyle

Address: 14334 NW Eagleridge Ln.

City/State/ZIP: Portland, OR. 97229

Phone: 503-680-5497 FAX:

E-mail: mike@fasterpermits.com

Authorized signature: [signature]

Print name: Mike Coyle Date: 6/16/17

Office Use Only

Permit no:

Date received:

By:

Required Data: One and Two Family Dwelling

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

Valuation:	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

Required Data: Commercial Use

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

Valuation:	$547685.16
Existing building area:	6978 square feet
New building area:	square feet
Number of stories:	1
Type of construction:	II-B
Occupancy groups	
Existing:	M-RETAIL
New:	

Notice

All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed.

Statement of Fact: I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of fact (whether intentional or not) in this application or any other required document, as well as any misleading statement or omission, may be cause for revocation of permit and/or certificate of occupancy, regardless of how or when discovered.

I acknowledge that work related to this Building Permit Application may be subject to regulations governing the handling, removal and/or disposal of asbestos and/or lead-based paint. If the work is subject to regulations governing asbestos and/or lead-based paint, I will comply with all such regulations. MC (initials)

Building Permit Fees*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

MECHANICAL PERMIT APPLICATION

City of Portland, Oregon - Bureau of Development Services

1900 SW 4th Avenue, Portland, Oregon 97201 • 503-823-7300 • TTY 503-823-6868 • www.portlandoregon.gov/bds

17-188519MT
6/16 PMP

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

Type of work

- ☐ New construction
- ☑ Addition/alteration/replacement
- ☐ Demolition
- ☐ Other:

Category of construction

- ☐ 1 & 2 family dwelling
- ☑ Commercial/industrial
- ☐ Accessory building
- ☐ Multifamily
- ☐ Master builder
- ☐ Other:

Job site information and location

Job no.:

Job address: 91199 NE CASCADE PARKWAY

City/State/ZIP: PORTLAND, OR

Suite/bldg./apt. no.: "Major C"

Project name: LOFT OUTLET

Cross street/directions to job site: NE Airport Way

Subdivision: Cascade Station

Lot no.

Tax map/parcel no.

Description of work (example: upstairs bath fan/dryer exhaust)

Replace all ductwork and HVAC units in space.

Provide RS permit no.

☐ Property owner

Name: Centercal Properties LLC

☐ Tenant

E-mail: khunter @centercal.com

Address: 7455 SW BRIDGEPORT ROAD, SUITE 215

City/State/ZIP: TIGARD, OR 97224

Phone:(503) 968-8940

FAX:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature:

Date:

☐ Contractor

TBD

Business name:

Address:

City/State/ZIP:

Phone:

Lic. no.

☐ Subcontractor

E-mail:

FAX:

CCB lic. no.

Authorized signature:

Print name:

Date:

☒ Applicant

Business name: Faster Permits

Contact name: Mike Coyle

Address: 14334 NW. Eagleridge Ln.

City/State/ZIP: Portland, OR 97229

Phone: 503-680-5497

FAX:

E-mail: mike@fasterpermits.com

☐ Contact Person

Commercial Fee Schedule - Use Checklist

Mechanical permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar of all mechanical materials, equipment, labor, overhead and profit.

Value: $ 95952.17

Residential Equipment / Systems Fees

For special information use checklist

Description	Qty.	Fee	Total
Heating / cooling			
Air conditioner (site plan required)		$26	
Furnace / burner including duct work / vent / liner		$55	
Heat pump (site plan required)	2	$51	
Air handling unit		$26	
Hydronic hot water system		$32	
Residential boiler (radiator or hydronic) includes piping		$32	
Unit heaters (fuel type, not electric) in-wall, in-duct, suspended, etc.		$26	
Vent for appliance other than furnace		$22	
Alteration of existing HVAC system		$32	
Other fuel appliances			
Decorative gas fireplace		$26	
Flue vent for water heater or gas fireplace		$22	
Wood / pellet stove		$57	
Gas or wood fireplace / insert		$57	
Chimney / liner / flue / vent		$22	
Other:		$32	
Environmental exhaust and ventilation			
Range hood / other kitchen equipment		$14	
Clothes dryer exhaust		$14	
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)		$14	
Exhaust system apart from Heating or AC		$22	
Other:		$32	
Gas fuel piping			
$15 for the first four, $2.70 for each additional. Please indicate number of fuel gas piping outlets below:			
Furnace, etc.			
Gas heat pump			
Wall / suspended / unit heater			
Water heater / boiler			
Fireplace			
Range			
Barbecue			
Clothes dryer			
Other:			
Other appliances			
Including oil tanks, gas and diesel generators, gas and electric kilns, gas appliances / equipment not included above		$32	

Mechanical permit fees

Subtotal	
Minimum permit fee ($95)	
Commercial plan review (60% of permit fee)	
State surcharge (12% of permit fee)	
TOTAL PERMIT FEE	

COM*check* Software Version 4.0.6.0

Interior Lighting Compliance Certificate

Section 1: Project Information

Energy Code: **2014 Oregon Energy Efficiency Specialty Code**
Project Title: Loft Outlet
Project Type: Alteration

Construction Site:
Cascade Station
9199 NE Casecade Parkway
Portland , OR 97224

Owner/Agent:
Ann Taylor Loft

Designer/Contractor:
Don Penn P.E.
Don Penn Consulting Engineers
1301 Solana Blvd
Ste 1420
Westlake, TX
817-410-2858

Section 2: Interior Lighting and Power Calculation

A Area Category	B Floor Area (ft2)	C Allowed Watts / ft2	D Allowed Watts (B x C)
Sales (Retail:Sales Area) (Ceiling Height 14 ft.)	5090	1.5	7635
Allowance: Furniture, clothing, cosmetics highlighting / Fix. ID: A2	1300(a)	1.4	1820(b)
BOH (Warehouse:Fine Material Storage) (Ceiling Height 14 ft.)	826	1.53	1264
		Total Allowed Watts =	10719

(a) Area claimed may exceed total floor area when Retail Merchandise Highlighting allowance(s) are specified.
(b) Allowance is (B x C) or the actual wattage of the fixtures given in Section 2, whichever is less.

Section 3: Interior Lighting Fixture Schedule

A Fixture ID : Description / Lamp / Wattage Per Lamp / Ballast	B Lamps/ Fixture	C # of Fixtures	D Fixture Watt.	E (C X D)
Sales (Retail:Sales Area 5090 sq.ft.)				
Track lighting 1: A2: Track: Wattage based on current limiting device capacity	0	0	4200	4200
LED 1: J1: 12X12 Panel: LED Panel 40W:	1	17	18	306
LED 2: B1: Sales Down Lts: Other:	1	40	55	2200
LED 3: C1: Vestibule Down Lts: Other:	1	2	40	80
BOH (Warehouse:Fine Material Storage 826 sq.ft.)				
Linear Fluorescent 1: F1/F2: 4" Strip: 48" T8 32W (Super T8): Electronic:	1	22	40	880
LED 4: EX: 2x4 LED Panel: LED Panel 38W:	1	1	38	38
			Total Proposed Watts =	7704

17.188 SOL CO

Section 4: Requirements Checklist

In the following requirements, blank checkboxes identify requirements that the applicant has not acknowledged as being met. Checkmarks identify requirements that the applicant acknowledges are met or excepted from compliance. 'Plans reference page/section' identifies where in the plans/specs the requirement can be verified as being satisfied.

Lighting Wattage:

✓ 1. Total proposed watts must be less than or equal to total allowed watts.
Allowed Wattage: 10719 Proposed Wattage: 7704
Complies: YES

Mandatory Requirements:

✓ 2. Exit signs. Internally illuminated exit signs shall not exceed 5 watts per side.

Plans reference page/section: _____

✔ 3. Daylight zone control. All daylight zones are provided with individual controls that control the lights independent of general area lighting in the non-daylight zone. In all individual daylight zones larger than 350 sq.ft., automatic daylight controls is provided. Automatic daylight sensing controls reduce the light output of the controlled luminaires at least 50 percent, and provide an automatic OFF control, while maintaining a uniform level of illumination. Contiguous daylight zones adjacent to vertical fenestration may be controlled by a single controlling device provided that they do not include zones facing more than two adjacent cardinal orientations (i.e., north, east, south, west). Daylight zones under skylights shall be controlled separately from daylight zones adjacent to vertical fenestration.

Plans reference page/section: _____

✔ 4. Interior lighting controls. At least one local shutoff lighting control has been provided for every 2,000 square feet of lit floor area and each area enclosed by walls or floor-to-ceiling partitions. The required controls are located within the area served by the controls or are a remote switch that identifies the lights served and indicates their status.

Plans reference page/section: _____

✔ 5. Sleeping unit controls. Master switch at entry to hotel/motel guest room.

Plans reference page/section: _____

✔ 6. Egress lighting. Egress illumination is controlled by a combination of listed emergency relay and occupancy sensors to shut off during periods that the building space served by the means of egress is unoccupied.

Plans reference page/section: _____

✔ 7. Additional controls. Each area that is required to have a manual control shall have additional controls that meet the requirements of Sections 505.2.2.1 and 505.2.2.2.

Plans reference page/section: _____

✔ 8. Light reduction controls. Each space required to have a manual control also allows for reducing the connected lighting load by at least 50 percent by either
1) controlling (dimming or multi-level switching) all luminaires; or
2) dual switching of alternate rows of luminaires, alternate luminaires, or alternate lamps; or
3) switching the middle lamp luminaires independently of other lamps; or
4) switching each luminaire or each lamp.

Plans reference page/section: _____

✔ 9. Buildings larger than 2,000 square feet are equipped with an automatic control device to shut off lighting in those areas. This automatic control device shall function on either:
1) a scheduled basis, using time-of-day, with an independent program schedule that controls the interior lighting in areas that do not exceed 10,000 square feet and are not more than one floor; or
2) an occupant sensor that shall turn lighting off within 30 minutes of an occupant leaving a space; or
3) a signal from another control or alarm system that indicates the area is unoccupied.

Plans reference page/section: _____

✔ 10.Occupancy sensors in rooms that include daylight zones are required to have Manual ON activation.

Plans reference page/section: _____

✔ 11.An occupant sensor control device is installed that automatically turns lighting off within 30 minutes of all occupants leaving a space.

Plans reference page/section: _____

✔ 12.Additional controls. An occupant sensor control device that automatically turns lighting off within 30 minutes of all occupants leaving a space or a locally activated switch that automatically turns lighting off within 30 minutes of being activated is installed in all storage and supply rooms up to 1000 square feet.

Plans reference page/section: _____

✔ 13.Occupant override. Automatic lighting shutoff operating on a time-of-day scheduled basis incorporates an override switching device that: 1) is readily accessible, 2) is located so that a person using the device can see the lights or the area controlled by that switch, or so that the area being lit is annunciated, 3) is manually operated, 4) allows the lighting to remain on for no more than 2 hours when an override is initiated, and 5) controls an area not exceeding 2,000 square feet.

Plans reference page/section: _____

✔ 14.Holiday scheduling. Automatic lighting shutoff operating on a time-of-day scheduled basis has an automatic holiday scheduling feature that turns off all loads for at least 24 hours, then resumes the normally scheduled operation.

Plans reference page/section: _____

✔ 15.Exterior lighting controls. Lighting not designated for dusk-to-dawn operation shall be controlled by either a combination of a photosensor and a time switch, or an astronomical time switch. Lighting designated for dusk-to-dawn operation shall be controlled by an astronomical time switch or photosensor.

Plans reference page/section: _____

✔ 16.Tandem wiring. The following luminaires located within the same area shall be tandem wired:
1. Fluorescent luminaires equipped with one, three or odd-numbered lamp configurations, that are recess-mounted within 10 feet center-to-center of each other.
2. Fluorescent luminaires equipped with one, three or any odd-numbered lamp configuration, that are pendant- or surface-mounted within 1 foot edge- to-edge of each other.

Plans reference page/section: _____

✔ 17.Medical task lighting or art/history display lighting claimed to be exempt from compliance has a control device independent of the control of the nonexempt lighting.

Plans reference page/section: _____

✔ 18.Each dwelling unit in a building is metered separately.

Plans reference page/section: _____

Interior Lighting PASSES

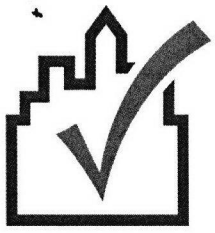
Section 5: Compliance Statement

Compliance Statement: The proposed lighting design represented in this document is consistent with the building plans, specifications and other calculations submitted with this permit application. The proposed lighting system has been designed to meet the 2014 Oregon Energy Efficiency Specialty Code requirements in COM*check* Version 4.0.6.0 and to comply with the mandatory requirements in the Requirements Checklist.

REGISTERED PROFESSIONAL ENGINEER
18896PE
OREGON
01/21/97
DONALD JAMES PENN

EXP. 12/31/18

DON PENN, P.E.		06/08/17
Name - Title	Signature	Date



COM*check* Software Version 4.0.6.0
Mechanical Compliance Certificate

Section 1: Project Information

Energy Code: **2014 Oregon Energy Efficiency Specialty Code**
Project Title: Loft Outlet
Project Type: Alteration

Construction Site:
Cascade Station
9199 NE Casecade Parkway
Portland , OR 97224

Owner/Agent:
Ann Taylor Loft

Designer/Contractor:
Don Penn P.E.
Don Penn Consulting Engineers
1301 Solana Blvd
Ste 1420
Westlake, TX
817-410-2858

Section 2: General Information

Building Location (for weather data):	Portland, Oregon
Climate Zone:	4c

Section 3: Mechanical Systems List

Quantity	System Type & Description
2	HVAC System 1 (Single Zone) : Heating: 2 each - Central Furnace, Gas, Capacity = 10 kBtu/h Proposed Efficiency = 80.00% Et, Required Efficiency = 80.00% Et Fan System: FAN SYSTEM 1 | RTU-1 -- Compliance (Motor nameplate HP method) : Passes Fans: FAN 1 Supply, Constant Volume, 4375 CFM, 1.0 motor nameplate hp FAN 2 Return, Constant Volume, 3665 CFM, 1.0 motor nameplate hp

Section 4: Requirements Checklist

In the following requirements, blank checkboxes identify requirements that the applicant has not acknowledged as being met. Checkmarks identify requirements that the applicant acknowledges are met or excepted from compliance. 'Plans reference page/section' identifies where in the plans/specs the requirement can be verified as being satisfied.

Requirements Specific To: HVAC System 1 :

✔ 1. Equipment meets minimum efficiency: Central Furnace (Gas): 80.00 % Et (or 78% AFUE)

✔ 2. Energy recovery ventilation systems. Individual fan systems that have both a design supply air capacity of 5,000 cfm or greater and a minimum outside air supply of 70 percent or greater of the design supply air quantity have an energy recovery system.

Plans reference page/section: _____

Generic Requirements: Must be met by all systems to which the requirement is applicable:

✔ 1. Calculation of heating and cooling loads. Design loads are determined in accordance with the procedures described in the ASHRAE/ACCA Standard 183. Alternatively, design loads have been determined by an approved equivalent computation procedure.

✔ 2. Equipment and system sizing. Heating and cooling equipment and systems capacity do not exceed the loads calculated in accordance with Section 503.2.1.

Plans reference page/section: _____

✔ 3. HVAC Equipment Performance Requirements. Reported efficiencies have been tested and rated in accordance with the applicable test procedure. The efficiency has been verified through certification under an approved certification program or, if no certification program exists, the equipment efficiency ratings are supported by data furnished by the manufacturer.

✔ 4. Thermostatic Controls. The supply of heating and cooling energy to each zone is controlled by individual thermostatic controls that respond to temperature within the zone.

Plans reference page/section: _____

✔ 5. Set point overlap restriction. Where used to control both heating and cooling, zone thermostatic controls provide a temperature range or deadband of at least 5°F (2.8°C) within which the supply of heating and cooling energy to the zone is capable of being shut off or reduced to a minimum.

Plans reference page/section: _____

✔ 6. Optimum Start Controls. Each HVAC system has controls that vary the start-up time of the system to just meet the temperature set point at time of occupancy.

Plans reference page/section: _____

✔ 7. Off-hour controls. Each zone is provided with thermostatic setback controls that are controlled by either an automatic time clock or programmable control system.

Plans reference page/section: _____

✔ 8. Shutoff damper controls. Both outdoor air supply and exhaust are equipped with not less than Class I motorized dampers.

Plans reference page/section: _____

✔ 9. Freeze Protection and Snow melt system controls. Freeze protection systems, such as heat tracing of outdoor piping and heat exchangers, including self-regulating heat tracing, include automatic controls capable of shutting off the systems when outdoor air temperatures meet code criteria.

Plans reference page/section: _____

✔ 10. Separate air distribution systems. Zones with special process temperature requirements and/or humidity requirements are served by separate air distribution systems from those serving zones requiring only comfort conditions; or shall include supplementary control provisions so that the primary systems may be specifically controlled for comfort purposes only.

Plans reference page/section: _____

✔ 11. Humidity control. If a system is equipped with a means to add or remove moisture to maintain specific humidity levels in a zone or zones, a humidity control device is provided.

Plans reference page/section: _____

✔ 12. Humidity control. Where a humidity control device exists it is set to prevent the use of fossil fuel or electricity to produce relative humidity in excess of 30 percent. Where a humidity control device is used for dehumidification, it is set to prevent the use of fossil fuel or electricity to reduce relative humidity below 60 percent.

Plans reference page/section: _____

✔ 13. Humidity control. Where a humidity control device exists it is set to maintain a deadband of at least 10% relative humidity where no active humidification or dehumidification takes place.

Plans reference page/section: _____

✔ 14. Ventilation. Ventilation, either natural or mechanical, is provided in accordance with Chapter 4 of the International Mechanical Code. Where mechanical ventilation is provided, the system has the capability to reduce the outdoor air supply to the minimum required by Chapter 4 of the International Mechanical Code.

Plans reference page/section: _____

✔ 15. Demand controlled ventilation (DCV). DCV is required for spaces larger than 500 ft2 for simple systems and spaces larger than 150 ft2 for multiple zone systems.

Plans reference page/section: _____

✔ 16. Kitchen hoods. Kitchen makeup is provided as required by the Oregon Mechanical Specialty Code.

Plans reference page/section: _____

✔ 17. Enclosed parking garage ventilation controls. In Group S-2, enclosed parking garages used for storing or handling automobiles employs automatic carbon monoxide sensing devices.

Plans reference page/section: _____

✔ 18. Duct and plenum insulation and sealing. All supply and return air ducts and plenums are insulated with the specified insulation. When located within a building envelope assembly, the duct or plenum is separated from the building exterior or unconditioned or exempt spaces by a minimum of R-8 insulation. All ducts, air handlers and filter boxes are sealed. Joints and seams comply with Section 603.9 of the International Mechanical Code.

✔ 19. Low-pressure duct systems. All longitudinal and transverse joints, seams and connections of low-pressure supply and return ducts are securely fastened and sealed with welds, gaskets, mastics (adhesives), mastic-plus-embedded-fabric systems or tapes installed in accordance with the manufacturer's installation instructions.

Plans reference page/section: _____

✔ 20. Medium-pressure duct systems. All ducts and plenums designed to operate medium-pressure are insulated and sealed in accordance with Section 503.2.7. Pressure classifications specific to the duct system are clearly indicated on the construction documents.

Plans reference page/section: _____

✔ 21. High-pressure duct systems. Ducts designed to operate at high-pressure are insulated and sealed in accordance with Section 503.2.7. In addition, ducts and plenums are leak-tested in accordance with the SMACNA HVAC Air Duct Leakage Test Manual.

Plans reference page/section: _____

✔ 22. Air system balancing. Each supply air outlet and zone terminal device is equipped with means for air balancing in accordance with the requirements of IMC 603.17. Discharge dampers intended to modulate airflow are prohibited on constant volume fans and variable volume fans with motors 10 horsepower.

Plans reference page/section: _____

✔ 23. Manuals. The construction documents require that an operating and maintenance manual be provided to the building owner by the mechanical contractor. See long description for specifications.

Plans reference page/section: _____

✔ 24. Air System Design and Control. Each HVAC system having a total fan system motor nameplate hp exceeding 5 hp meets the provisions of Sections 503.2.10.1 through 503.2.10.2.

Plans reference page/section: _____

✔ 25. Allowable fan floor horsepower. Each HVAC system at fan system design conditions does not exceed the allowable fan system motor nameplate hp (Option 1) or fan system bhp (Option 2) as shown and calulated in requirement details.

Plans reference page/section: _____

✔ 26. Motor nameplate horsepower. For each fan, the selected fan motor is no larger than the first available motor size greater than the brake horsepower (bhp).

Plans reference page/section: _____

✔ 27. Large Volume Fan Systems. Fan systems over 8,000 (7 m3/s) cfm without direct expansion cooling coils that serve single zones reduce airflow based on space thermostat heating and cooling demand. A two-speed motor or variable frequency drive reduces airflow to a maximum 60 percent of peak airflow or minimum ventilation air requirement as required by Chapter 4 of the International Mechanical Code, whichever is greater.

Plans reference page/section: _____

✔ 28. All air-conditioning equipment and air-handling units with direct expansion cooling and a cooling capacity at ARI conditions greater than or equal to 110,000 Btu/h that serve single zones have their supply fan operation controlled according to code specific requirements.

Plans reference page/section: _____

Section 5: Compliance Statement

Compliance Statement: The proposed mechanical alteration project represented in this document is consistent with the building plans, specifications and other calculations submitted with this permit application. The proposed mechanical alteration project has been designed to meet the 2014 Oregon Energy Efficiency Specialty Code, Chapter 8, requirements in COMcheck Version 4.0.6.0 and to comply with the mandatory requirements in the Requirements Checklist.

REGISTERED PROFESSIONAL ENGINEER 18896PE OREGON 01/21/97 DONALD JAMES PENN EXP. 12/31/18

DON PENN, P.E. — Name - Title

Signature

06/08/17 — Date

Section 6: Post Construction Compliance Statement

❑ HVAC record drawings of the actual installation, system capacities, calibration information, and performance data for each equipment provided to the owner.

❑ HVAC O&M documents for all mechanical equipment and system provided to the owner by the mechanical contractor.

❑ Written HVAC balancing and operations report provided to the owner.

The above post construction requirements have been completed.

Principal Mechanical Designer-Name _____ Signature _____ Date _____

Cheng Min Pao

Structural Checksheet Response

RECEIVED
1 4 2017
BDS
DOCUMENT SERVICES

Permit #: 17-188501-000-00-CO **Date:** 8/9/17

Customer name and phone number: Roxanna Scotto 973.377.1313 x128

Note: *Please number each change in the '#' column. Use as many lines as necessary to describe your changes. Indicate which reviewer's checksheet you are responding to and the item your change addresses. If the item is not in response to a checksheet, write* **customer** *in the last column.*

#	Description of changes, revisions, additions, etc.	Checksheet and item #
1	Will complete ~~See completed~~ special inspections form	1.
2	Lateral bracing added. See Addendum calculations and Detail 4/A5.01.	2. (a)
3	Ceiling joist to bear on stud wall at rest room wall. See Section J/A10.01.	2. (b)
4	See Addendum Calculations for lateral support of entry vestibule framing. See Detail 1/A9.11 for connection of ceiling joists to the existing concrete wall and box beam.	3.
5	See Addendum calculations and Detail 2/A9.11 for support of new partition wall against out of plane live load.	4.
6	See Detail 5/A10.11.	5
7	See Detail 2/A10.21 for angle bracket and fastener callout.	6. (a)
8	See Addendum Calculations and Details 2 & 3/A10.21 for seismic bracing.	6. (b)
9	See sheet 1 of PSE markups for locations and weights of RTUs and exhaust fans.	7. (a)
10	See Addendum Calculations for analysis of existing roof joists supporting RTUs.	7. (b)
11	See Addendum Calculations for lateral analysis of RTUs.	7. (c)
12	See PSE markups for fastening of roof curbs to the existing roof.	7. (d)

(for office use only)

Renay R-B

Life Safety Checksheet Response

Permit #: 17-188501-000-00-CO **Date:** 8/9/17

Customer name and phone number: Roxanna Scotto 973.377.1313 x128

Note: Please number each change in the '#' column. Use as many lines as necessary to describe your changes. Indicate which reviewer's checksheet you are responding to and the item your change addresses. If the item is not in response to a checksheet, write **customer** *in the last column.*

Checksheet and item number	Description of changes, revisions, additions, etc.	Location on plans
~~1A~~	Added Electrical, Mechanical and plumbing to deferred submittals table	A0.00
~~1B~~	Added a note regarding separate permit through fire marshalls office on deferred submittals table	A0.00
~~2~~	Updated construction type under project summary	A0.00
~~3~~	Updated exit notes to indicate correct building code/section	A1.11
~~4~~	Indicated sheet is approved for construction	A2.02 (On Titleblock)
~~5~~	COMcheck will be available on site for review by the inspector	N/A
~~6A~~	Occupant chart has been updated	A0.00/A1.11
~~6B~~	Updated all exiting and plumbing fixture counts as necessary	A0.00/A1.11
7	Plan has changed to include a corridor from the sales area to the rear service door	All plan sheets
~~8~~	Indicated common path of travel from most remote point in wardrobe room to an intersection of aisles is within 75'	A1.11
~~9~~	Plans have been updated to show that there is 36" clearance between the folding table and mobile hangers	A1.11
~~10~~	Provided additional information on toilet rooms to show handicapped accessibility requirements and pipe insulation	A8.11
~~11A~~	Detailed the turning space in the dressing room	A1.11
11B	Detailed the dimensions of the bench to show clear floor space	A1.11/A8.01
11C	Coordinated the bench depth dimensions	A1.11/A8.01
11D	Updated the ADA bench detail to show proper height	8/A8.01
12	Updated the cashwrap details to show the accessible checkout counter height and length	A10.12

Plan Bin Location: 01CO W/17-188519MT NEED CCB

Bron Stoll - Englewn

BES Source Control Plan Check Corrections Response

Permit #: 17-188501-000-00-CO **Date:** 8/9/17

Customer name and phone number: Roxanna Scotto 973.377.1313 x128

Note: In the spaces below, please provide specific information concerning the changes that you have made in response to the checksheet. Note the checksheet item number, your response or a description of the revision, and the location of the change on the plans (i.e. page number and/or detail number). Use as many lines as needed. *If the item is not in response to a checksheet, write **"Applicant"** in the column labeled "Checksheet item number."*

Checksheet item number	Description of changes, revisions, additions, etc.	Location on plans
1	**Added key map and photo showing location and condition of existing trash area**	**A0.00**

Plan Bin Location: 01CO W/17-188519MT NEED

Ok to trim.