



Process #: BD13-014134-001
Total Due: \$1,448.76
Permit #: BD13014134001

Angela Estrada

Job Location		Owner/Lessee Information	
Folio Number: <u>01-2134-034-0040</u>	Owner: <u>MICHAEL LIBMAN</u>	Job Address: <u>2435 NW 75th St</u> Zip: <u>33125</u>	Owner's Address: <u>2433 NW 75th St MIAMI, FL</u>
Legal Address: <u>2433 NW 75th St MIAMI, FL</u>	Phone:	Unit No:	E-Mail:
<input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Dry Run	Lessee:	<input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Lessee	Lessee Address:
Contractor Information		General Information	
Contractor's License/Registration No: <u>CQC1509797</u>	Proposed Use of Building:	Contractor's Social Security Number:	Current Use: <u>COMMERCIAL MEDICAL CENTER</u>
Qualifier's Name: <u>Freddy Pereira</u>	Job Description: <u>EXIST. MEDICAL C. TO BE IMPROVED</u>	Company Name: <u>United Construction Engineers</u>	New Construction Total Cost:
Address: <u>723 Crescent Way</u>	New Construction Sq. Ft.:	City: <u>Weston</u> State: <u>FL</u> Zip: <u>33326</u>	Lineal Ft.:
Phone: <u>954-588-9723</u>	Remodeling Total Cost: <u>6,500</u>	E-Mail: <u>uce@unitedce.com</u>	Remodeling Sq. Ft.:
	Units:		Lineal Ft.:
	Floors:		Height:
If this is related to another permit, you must provide:		Master Permit Number:	Plan No.:
Threshold Inspector		Bonding Company	
Name:	Name:	Address:	Address:
Address:	Address:	Phone:	Phone:
Permit Type		Engineer/Architect Information	
<input type="checkbox"/> Building <input type="checkbox"/> Plumbing	Engineer's Name: <u>CHARLES C MITCHELL</u>	<input type="checkbox"/> Mechanical/AC <input type="checkbox"/> Plumbing/Gas	Address:
<input type="checkbox"/> Electrical <input type="checkbox"/> Roofing	Phone:	<input type="checkbox"/> Landscaping <input type="checkbox"/> Sign	E-Mail:
<input type="checkbox"/> Electrical <input type="checkbox"/> Roofing	Architect's Name:	<input type="checkbox"/> Fire <input type="checkbox"/> Mechanical Elevator	Address:
	Phone:		E-Mail:
Change to Existing Permit		Building Permit only	
<input type="checkbox"/> Change of Contractor (CR) <input type="checkbox"/> Change of Qualifier (CQ)	<input type="checkbox"/> New Construction <input type="checkbox"/> Addition	<input type="checkbox"/> Re-certification of Plans (RC) <input type="checkbox"/> Plans revision (RV)	<input type="checkbox"/> General Repair/Remodeling <input type="checkbox"/> Misc. Building
<input type="checkbox"/> Completion Permit (CP)	<input type="checkbox"/> Change of Occupancy <input type="checkbox"/> Demolition		<input type="checkbox"/> Change of Use

I understand that separate permits must be obtained for other items (i.e., electrical, plumbing, roofing, etc.), unless specifically covered by this permit. In signing this permit, I agree to the provisions and completion of the construction in accordance with the plans and specifications and in compliance with all federal, state, and county laws applicable.

Owner's Affidavit: I certify that the foregoing information is true and correct and that the Contractor has the authorization to perform the work specified above.

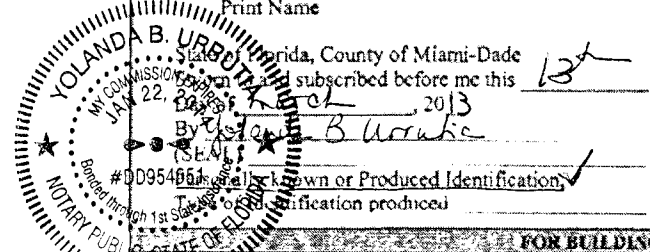
Lessee's Affidavit: Lessee certifies that he/she has all consent and authorization from owner of subject property to perform the above-mentioned work and to hire above captioned contractor.

I have read the information contained in this permit and understand that any misrepresentation may constitute fraud and could void the permit.

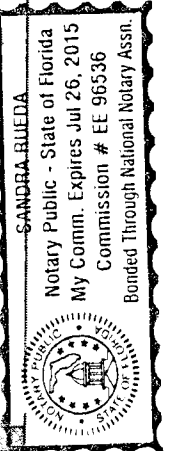
REVOKED

Signature of Owner/Lessee: Ramon Corowa
Signature of Qualifier: Freddy Pereira

Print Name: Ramon Corowa Print Name: Freddy Pereira



State of Florida, County of Miami-Dade
Sworn to and subscribed before me this 13th day of Feb, 2013.
By: [Signature]
(SEAL)
Personally known or Produced Identification:



FOR BUILDING DEPARTMENT USE ONLY

Certificates Required: C.O. C.C.

Plans: Yes No

No. of Sheets: 4

Tracking required:

Application Received by: [Signature] Date: 3/14/13 Permit Authorized by: [Signature] Date: 4-30-13

CODES AND STANDARDS	
BUILDING	FLORIDA BUILDING CODE - 2010 DATE EDITION
ELECTRIC	NATIONAL ELECTRIC CODE -
ENERGY	STATE OF FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS "ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION"
FIRE	FLORIDA FIRE PREVENTION CODE (FFPC) 2010 Edition with Broward County Amendments, NFPA 101, 2009 Edition, NFPA 1, 2009 Edition & State Statutes, 2009 Edition.
HANDICAPPED	A.) FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS: "FLORIDA ACCESSIBILITY CODE FOR BUILDING CONSTRUCTION"; B.) AMERICANS WITH DISABILITIES ACT (ADA) C.) A.N.S.I. - A117.1
LIFE SAFETY	N.F.P.A. "LIFE SAFETY CODE" - 2009 EDITION


CODE REQUIREMENTS SHALL BE INCLUSIVE OF ALL ADDENDUMS AND CLARIFICATIONS ISSUED UP TO THE TIME WHEN THE BUILDING PERMIT IS GRANTED. THE LISTED CODES AND STANDARDS SHALL NOT BE CONSTRUED TO BE THE ONLY APPLICABLE CODES AND STANDARDS GOVERNING THIS PROJECT. THE GENERAL CONTRACTOR, ALL SUB-CONTRACTORS AND SUPPLIERS SHALL VERIFY AND ADHERE TO THE REQUIREMENTS OF ALL OF THE CODES AND STANDARDS THAT GOVERN AND PERTAIN TO THEIR PRESCRIBED SCOPE OF WORK.

SCOPE OF JOB
1- EXISTING SEATING AREA TO BE REMODELED: 604 SQ.FT.
-EXIST. 4" WALL PARTITION TO BE DEMOLISHED. -PROVIDE NEW INTERIOR CAT 111 SAFETY GLAZING 3/16 TEMPERED WALL.
2- EXISTING OFFICE AREA TO BE REMODELED: 208 SQ.FT
- PROVIDE NEW INTERIOR CAT 111 SAFETY GLAZING 3/16 TEMPERED WALL ACCORDING TO DE PLANS.
3- MECHANICAL WORK: - PROVIDE NEW 24/24 RETURN AIR TO NEW OFFICE
4-ELECTRICAL WORK: -RELOCATED EXISTING ELECT.SWITCH

NO PLUMBING TO BE PERFORMED IN THIS WORK.
EXISTING UNSPRINKLERED BULDING

NOTES
- THE BUILDING IS AN EXISTING CONSTRUCTION TYPE III. - EXTERIOR & INTERIOR DOORS ARE EXISTING TO REMAIN. - ALTERATION LEVEL: 2

CODES FIRE STANDARDS
FLORIDA FIRE PREVENTION CODE (FFPC) 2010 Edition NFPA 101, 2009 Edition, NFPA 1, 2009 Edition & State Statutes, 2009 Edition.

LEGEND
 EXISTING STRUCT.BUILDING TO REMAIN

LEGAL DESCRIPTION
RIVERSIDE FARMS PB 2-88 ALL LOTE 8 & LOTS 5 THRU 7 LESS 520FT FOR R/W BLK 3 LOT SIZE 191.10 SQ FT OR 11444-2146 0482 1



LOCATION

OCCUPANCY INFORMATION	
OCCUPANCY TYPE:	B
EXISTING OFFICES & OUTPATIENTS CLINICS OCCUPANCY PER NFPA 101 (2009) SECTION 6.1.1.4.3.2)	
NAME OF PROJECT:	EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVEMENT.

OCCUPANCY LOAD (AS PER F.B.C. (AS PER F.B.C. TABLE 1004.1.1 & NFPA 7.3.1.2)				
OCCUPANCY TYPE	EXIST. USE	GROSS AREA (SQ. FT.)	AREA PER OCCUPANT (SQ. FT.)	TOTAL MAXIMUM OCCUPANCY LOAD (PERSONS)
B	EXIST. GENERAL OFFICES AREA <small>(NO STORAGE AREAS STORAGE, ALWAYS & BATHS INCLUDED)</small>	2018	100 GROSS	20
	EXIST.THERAPY ROOM	364	100 GROSS	3
	EXIST. SEATING AREA	607	100 GROSS	6
	EXIST.FRONT DESK	158	100 GROSS	1
	EXIST.OFFICE	195	100 GROSS	1
TOTAL				3

NOTE / OCCUPANCY INFORMATION
THE TOTAL OCCUPANT LOAD IS 31 PERSONS. THIS SIGN SHOULD BE POSTED NEAR THE MAIN ENTRANCE

PARKING LOAD CALCULATION				
TYPE OF BUSINESS	REQUIREMENTS	TOTAL AREA SQ.FT.	PARKING SPACES	
			PARKING REQ.	EXISTING PARK.
ADULT MEDICAL CENTER	1/500 SQ.Ft.	4617	9	32

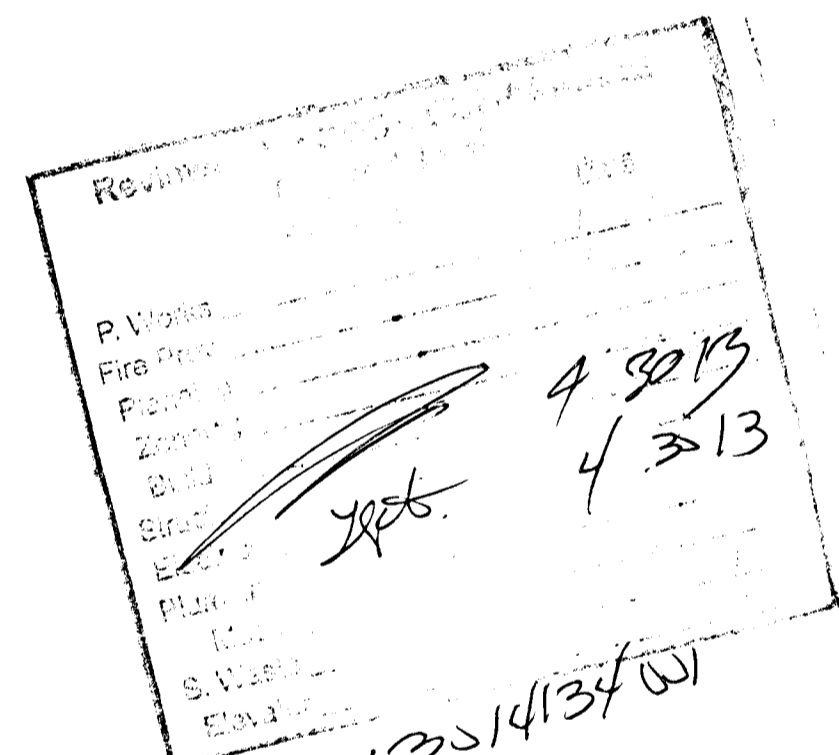
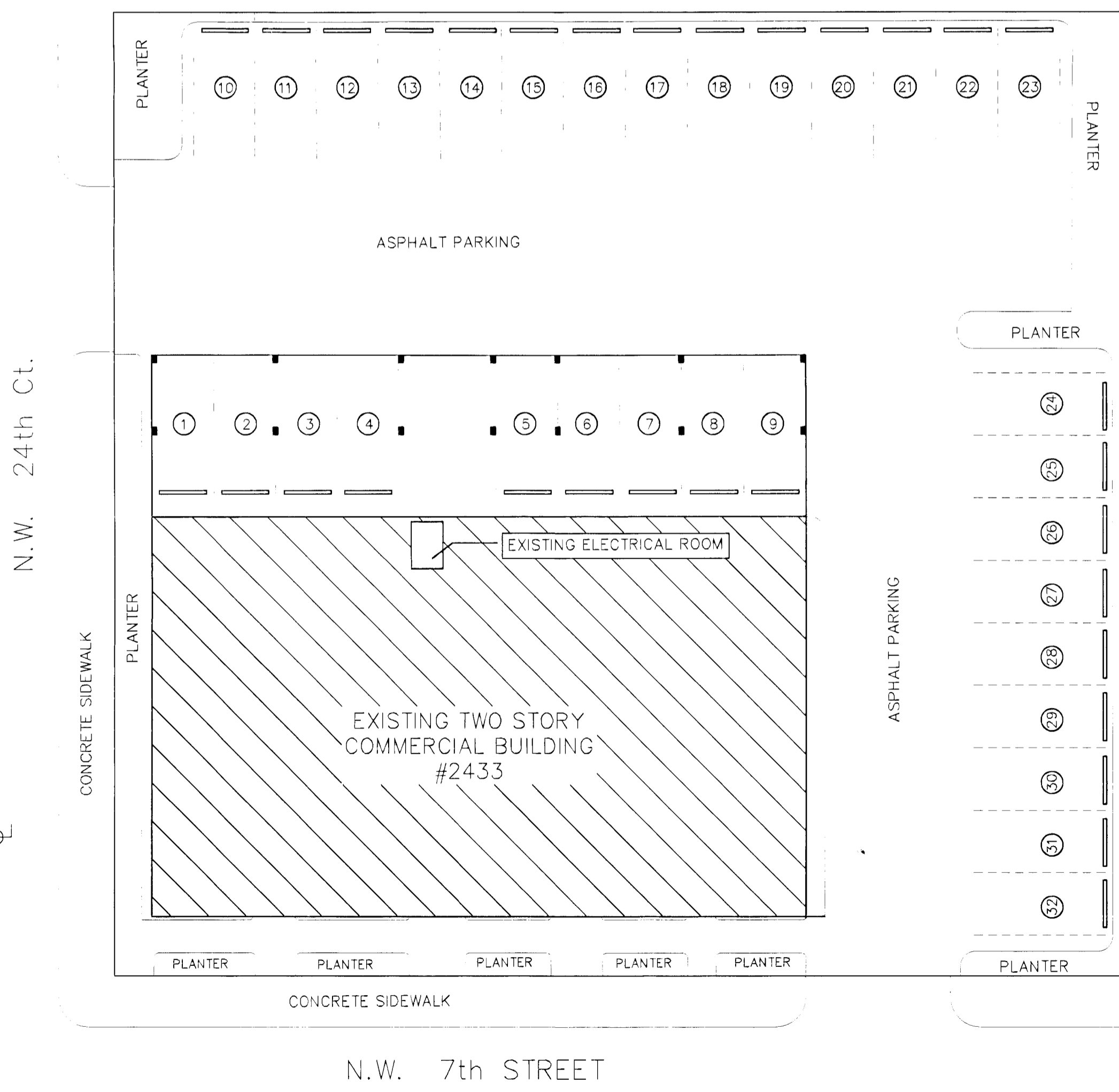
INDEX OF DRAWING	
ARCHITECTURAL	A - 1 EXISTING SITE PLAN SITE PLAN, ZONING NOTES & INDEX OF DRAWINGS
	A - 2 EXIST.FLOOR PLAN EXIST, DETAILS, SECTIONS & NOTES
	A - 3 EXIST & PROPOSED FLOOR PLAN ARCHITECTURALS, DETAILS, SECTIONS & NOTES

INTERIOR WALL AND CEILING FINISH REQUIREMENTS BY OCCUPANCY			
MIN. REQUIRED FLAME SPREAD CLASSIFICATION FOR INTERIOR FINISHED PER F.B.C. TABLE 803.5			
UNSPRINKLERED BUILDING			
GROUP	VERTICAL EXITS AND EXIT PASSAGEWAYS	EXIT ACCESS CORRIDORS AND OTHER EXIT WAYS	ROOMS AND ENCLOSED SPACES
B	B	B	C

LEGAL DESCRIPTION
VISTA CENTER PB 130-70 TR A LOT SIZE 7.761 AC ML

PROPERTY INFORMATION
Folio No.: 01-3134-038-0040 Property: 2435 NW 7 ST.
PROPERTY INFORMATION: Primary Zone: 6100 COMMERCIAL NEIGHBORHOOD CLUC: 0013 OFFICE BUILDING Beds/Baths: 0/0 Floors: 2 Living Units: 0 Adj Sq Footage: 13,933 Lot Size: 19,110 SQ FT Year Built: 1973

EXIST.CEILING NOTE
803.1 GENERAL CLASS B: FLAME SPREAD INDEX 26-75; SMOKE-DEVELOPED INDEX 0-450. CEILING IS ONE HOUR FIRE PROTECTION FOR ROOF B CONSTRUCTION CEILING FOR FLAT ROOF REQUIRE 1-1/4" THICKNESS FOR 1 HOUR FIRE RATED (TABLE 720.1(3) F.B.C. 2007



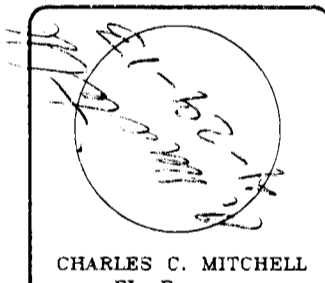
DERM PLAN REVIEW FINAL APPROVAL
DEPARTMENT OF ENVIRONMENTAL RESOURCES MANAGEMENT
CORE REVIEWER (PRINT): Esty Dia
SIGNATURE: [Signature] DATE: 4.29.13

NO PLUMBING WORK APPROVED BY THIS PERMIT AND/OR PLANS

Barcode and contact information:
Derm Number: 2013-0315-1325-5928
Contact Name: MS ANGELA ESTRADA
Contact Phone: (954) 829-2425
Folio: 01-3134-038-0040
Project Name: MEDICAL CENTER
Date Received: 03/15/2013

CHARLES C. MITCHELL
CONSULTING ENGINEERING P.E.
324 North Federal Hwy, Hollywood, Florida 33024
Phone: 305-386-5000 Fax: 305-386-5001
PE REG. NO. 00111127

EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVED
Owner: **MICHAEL I LIBMAN**
2435 NW 7 ST. Miami, FL - 33125



FOLIO
30-3134-038-0040

REVISIONS	
1	DERM 04-22-13

FILE
PLOT 100%
DRAWN GUILMIL
CHECKED LE
DATE 02-18-13

SHEET INDEX
SHEET NUMBER

A-1
OF 3

EXISTING SITE PLAN

CODES AND STANDARDS	
BUILDING	FLORIDA BUILDING CODE - 2010 DATE EDITION
ELECTRIC	NATIONAL ELECTRIC CODE -
ENERGY	STATE OF FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS "ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION"
FIRE	FLORIDA FIRE PREVENTION CODE (FFPC) 2010 Edition with Broward County Amendments, NFPA 101, 2009 Edition, NFPA 1, 2009 Edition & State Statutes, 2009 Edition.
HANDICAPPED	A.) FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS: "FLORIDA ACCESSIBILITY CODE FOR BUILDING CONSTRUCTION" B.) AMERICANS WITH DISABILITIES ACT (ADA) C.) A.N.S.I. - A117.1
LIFE SAFETY	N.F.P.A. "LIFE SAFETY CODE" - 2009 EDITION

CODE REQUIREMENTS SHALL BE INCLUSIVE OF ALL ADDENDUMS AND CLARIFICATIONS ISSUED UP TO THE TIME WHEN THE BUILDING PERMIT IS GRANTED. THE LISTED CODES AND STANDARDS SHALL NOT BE CONSIDERED TO BE THE ONLY APPLICABLE CODES AND STANDARDS GOVERNING THIS PROJECT. THE GENERAL CONTRACTOR, ALL SUB-CONTRACTORS AND SUPPLIERS SHALL VERIFY AND ADHERE TO THE REQUIREMENTS OF ALL OF THE CODES AND STANDARDS THAT GOVERN AND PERTAIN TO THEIR PRESCRIBED SCOPE OF WORK.

SCOPE OF JOB
1-EXISTING SEATING AREA TO BE REMODELED: 604 SQ.FT. -EXIST. 4" WALL PARTITION TO BE DEMOLISHED. -PROVIDE NEW INTERIOR CAT 1 I SAFETY GLAZING 3/16 TEMPERED WALL.
2- EXISTING OFFICE AREA TO BE REMODELED: 208 SQ.FT. - PROVIDE NEW INTERIOR CAT 1 I SAFETY GLAZING 3/16 TEMPERED WALL ACCORDING TO DE PLANS.
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4-ELECTRICAL WORK: -RELOCATED EXISTING ELECT.SWITCH

NO PLUMBING TO BE PERFORMED IN THIS WORK. EXISTING UNSPRINKLERED BULDING

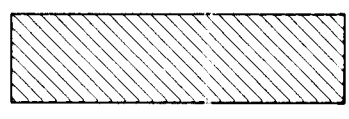
NOTES

- THE BUILDING IS AN EXISTING CONSTRUCTION TYPE III.
- EXTERIOR & INTERIOR DOORS ARE EXISTING TO REMAIN.
- ALTERATION LEVEL: 2

CODES FIRE STANDARDS

FLORIDA FIRE PREVENTION CODE (FFPC) 2010 Edition
NFPA 101, 2009 Edition, NFPA 1, 2009 Edition & State Statutes, 2009 Edition.

LEGEND

 EXISTING STRUCT.BULDING TO REMAIN

LEGAL DESCRIPTION

RIVERSIDE FARMS PB 2-88 ALL LOTS 8 & LOTS 5 THRU 7 LESS 520FT FOR R/W BLK 3 LOT SIZE 19110 SQ FT OR 11444-2146 0402 1

EXIST.CEILING NOTE

803.1 GENERAL CLASS B:
FLAME SPREAD INDEX 26-75; SMOKE-DEVELOPED INDEX 0-450. CEILING IS ONE HOUR FIRE PROTECTION FOR ROOF B CONSTRUCTION CEILING FOR FLAT ROOF REQUIRE 1-1/4" THICKNESS FOR 1 HOUR FIRE RATED (TABLE 720.1(3) F.B.C. 2007



LOCATION

N.T.S. 

OCCUPANCY INFORMATION

OCCUPANCY TYPE: B
EXISTING OFFICES & OUTPATIENTS CLINICS
OCCUPANCY PER NFPA 101 (2009) SECTION 6.1.14.3.2
NAME OF PROJECT: EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVEMENT.

OCCUPANCY LOAD (AS PER F.B.C. (AS PER F.B.C. TABLE 1004.1.1 & NFPA 7.3.1.2))

OCCUPANCY TYPE	EXIST. USE	GROSS AREA (Sq Ft)	AREA PER OCCUPANT (SQUARE FEET)	TOTAL MAXIMUM OCCUPANCY LOAD (persons)
B	EXIST.GENERAL OFFICES AREA (NO COMMON AREAS, STORAGE, HALLWAYS & BATHS INCLUDED)	2018	100 GROSS	20
	EXIST.THERAPY ROOM.	364	100 GROSS	3
	EXIST.SEATING AREA	607	100 GROSS	6
	EXIST.FRONT DESK	158	100 GROSS	1
	EXIST.HAIR SALON	195	100 GROSS	1
TOTAL				31

NOTE / OCCUPANCY INFORMATION

THE TOTAL OCCUPANT LOAD IS 31 PERSONS. THIS SIGN SHOULD BE POSTED NEAR THE MAIN ENTRANCE.

PARKING LOAD CALCULATION

TYPE OF BUSINESS	REQUIREMENTS	TOTAL AREA SQ.FT.	PARKING SPACES	
			PARKING REQ.	EXISTING PARK.
ADULT MEDICAL CENTER	1 /500 Sq.Ft.	4617	9	32

INDEX OF DRAWING

ARCHITECTURAL	DESCRIPTION
A - 1	EXISTING SITE PLAN, ZONING NOTES & INDEX OF DRAWINGS
A - 2	EXIST.FLOOR PLAN, EXIST, DETAILS, SECTIONS & NOTES
A - 3	EXIST & PROPOSED FLOOR PLAN, ARCHITECTURALS DETAILS, SECTIONS & NOTES

VOID

INTERIOR WALL AND CEILING FINISH REQUIREMENTS BY OCCUPANCY
MIN. REQUIRED FLAME SPREAD CLASSIFICATION FOR INTERIOR FINISHED PER F.B.C. TABLE 803.5

UNSPRINKLERED BUILDING			
GROUP	VERTICAL EXITS AND EXIT PASSAGEWAYS	EXIT ACCESS CORRIDORS AND OTHER EXIT WAYS	ROOMS AND ENCLOSED SPACES
B	B	B	C

LEGAL DESCRIPTION

VISTA CENTER PB 130-70 TR A LOT SIZE 7.761 AC M/L

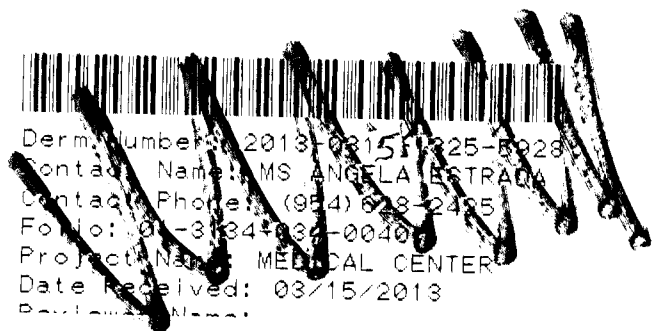
PROPERTY INFORMATION

Folio No.: 01-3134-038-0040
Property: 2435 NW 7 ST.

PROPERTY INFORMATION:
Primary Zone: G100 COMMERCIAL NEIGHBORHOOD
CLUC: 0013 OFFICE BUILDING
Beds/Baths: 0/0
Floors: 2
Living Units: 0
Adj Sq Footage: 13,933
Lot Size: 19,110 SQ FT
Year Built: 1973



EXISTING SITE PLAN 



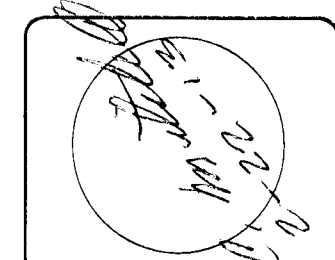
PROCESSED WORK APPROVED BY THE PERMIT ADMINISTRATOR

Reviewed for CODE COMPLIANCE
City of Miami
Signature: P. Wains Date: 3/15/17

P. Wains
Fire Prev. _____
Planning _____
Zoning _____
Building _____
Structural _____
Electrical _____
Plumbing _____
Mech _____
S. Waste _____
Elevator _____

CHARLES C. MITCHELL
CONSULTING ENGINEERING P.E.
924 North Fed Hwy Hollywood, Florida 33161
Phone: 305-334-5069 Fax: _____
TEL. REG. NO.00111127

EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVED
Owner: **MICHAEL I LIBMAN**
2435 NW 7 ST. Miami, FL-33125


CHARLES C. MITCHELL
Fl. Reg.

FOLIO
30-3134-038-0040

REVISIONS

NO.	DATE	DESCRIPTION

FILE
PLOT 100%
DRAWN G.VILLAMIL
CHECKED L.E.
DATE 02-18-13

SHEET INDEX
SHEET NUMBER

SCOPE OF JOB

- 1-EXISTING SEATING AREA TO BE REMODELED: 604 SQ.FT.
 - EXIST. 4" WALL PARTITION TO BE DEMOLISHED.
 - PROVIDE NEW INTERIOR CAT 1 1/2 SAFETY GLAZING 3/16 TEMPERED WALL.
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 - PROVIDE NEW INTERIOR CAT 1 1/2 SAFETY GLAZING 3/16 TEMPERED WALL ACCORDING TO DE PLANS.
- 3- MECHANICAL WORK:
 - PROVIDE NEW 24/24 RETURN AIR TO NEW OFFICE
- 4-ELECTRICAL WORK:
 - RELOCATED EXISTING ELECT.SWITCH

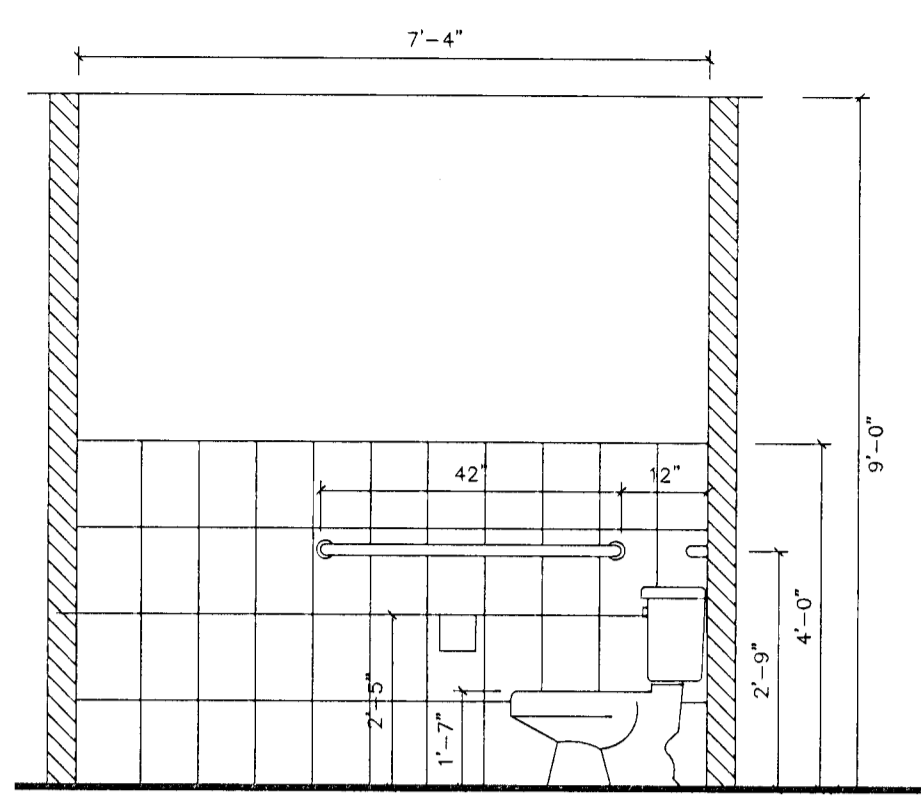
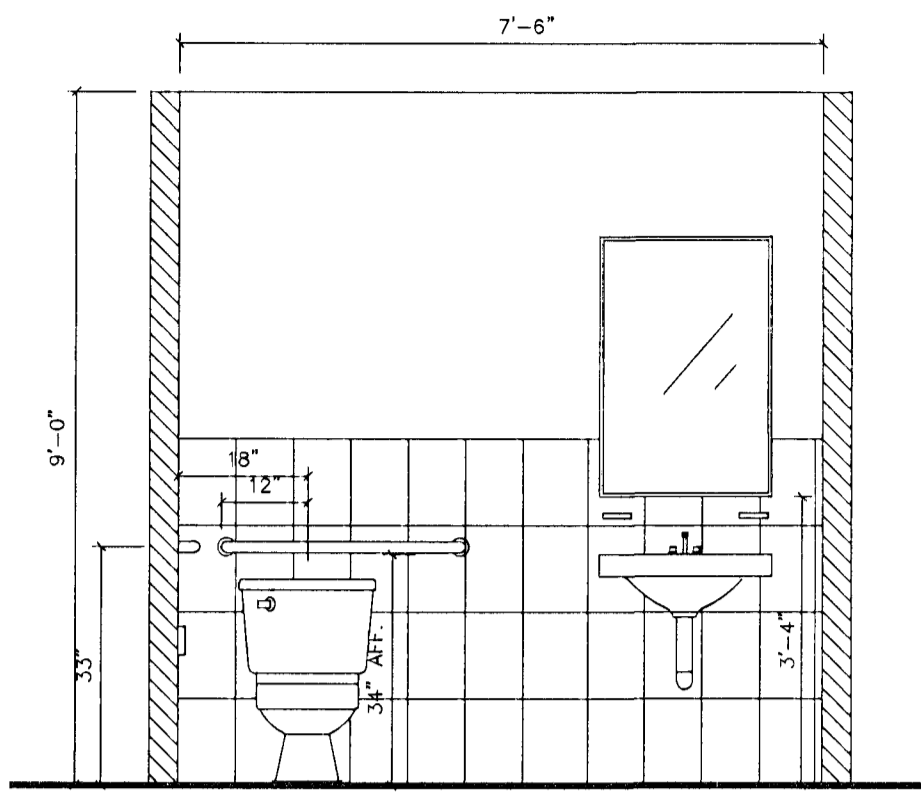
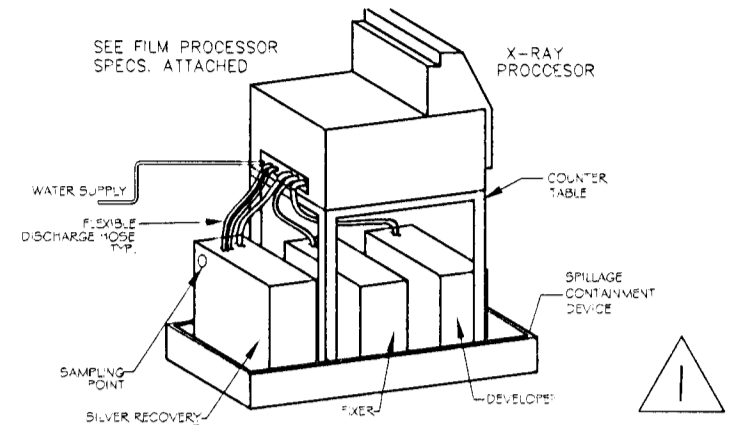
NO PLUMBING TO BE PERFORMED IN THIS WORK. EXISTING UNSPRINKLERED BUILDING

EXIST.FIRE SYMBOL LEGEND	
SYMBOL	DESCRIPTION
	EXIST.FIRE EXTINGUISHER
	SMOKE DETECTOR
	Exit Lights with Battery Pack Surelight LPX70RWH 25W 120V.
	Combination Exit Lights & Emergency Lights with Battery Pack
	Emergency Lights with Battery Pack Cooper Lighting CB1225W 120V

MECHANICAL NOTE

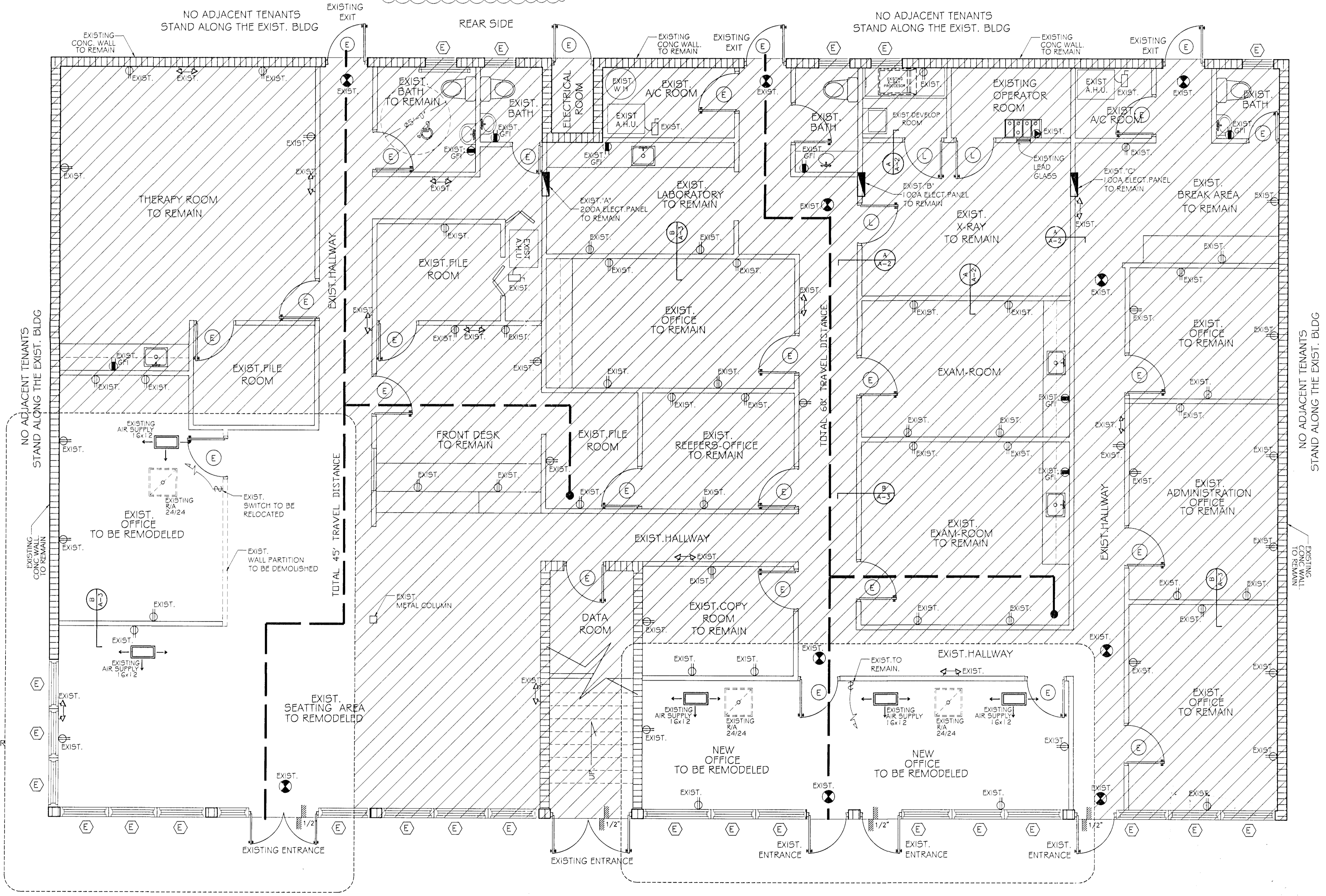
ALL A/C SYSTEM IS EXISTING TO REMAIN.
NO ACRYLICS NAILS/NO PEDICURE/ NO GENERAL NAILS SERVICE IN THE EXIST. HAIR SALON

LEGEND	
	DENOTE EXIST. AREA TO REMAIN
	EXISTING 8" C.B.S. WALL TO REMAIN
	EXISTING 4" PARTITION WALL TO REMAIN
	EXIST. 4" PARTITION WALL TO BE DEMOLISHED
	DENOTE EXIST. AREA TO BE REMODELED



GENERAL NOTES

1. THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS, ELEVATIONS ANGLES AND ALL OTHERS EXISTING CONDITIONS PRIOR TO COMMENCING ANY WORK. THE CONTRACTOR ALSO VERIFY AND APPROVE ALL INFORMATION ON DRAWINGS. ACCEPTANCE OF THESE PLANS CONSTITUTES APPROVAL. PLEASE NOTIFY ARCHITECT BY CERTIFIED MAIL OF ANY CONFLICT OR DISCREPANCY IF ANY.
2. THE CONTRACTOR SHALL FURNISH AND BE SOLELY RESPONSIBLE FOR ALL TEMPORARY BRACING AND SHORING REQUIRED FOR TO MAINTAIN PLUMBNESS AND STABILITY OF ALL STRUCTURAL ELEMENTS DURING CONSTRUCTION.
3. THE CONTRACTOR SHALL OBTAIN FROM SUBCONTRACTORS THE FINAL APPROVED SITE AND LOCATION OF ALL OPENINGS TO BE FOR RESPECTIVE TRADES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR LOCATION AND DETAILS.
4. CONTRACTOR/OWNER SHALL BE RESPONSIBLE FOR VERIFYING REQUIRED GRADE & FINISHED FLOOR ELEVATIONS WITH RESPECT TO DADE COUNTY FLOOD CRITERIA, EXISTING CROWN OF ROAD ELEVATIONS FEDERAL FLOOD CRITERIA, AND OTHER GOVERNMENT BODIES.
5. OWNER AND CONTRACTOR SHALL NOTIFY ARCHITECT IN WRITING BY CERTIFIED MAIL AND OBTAIN A NOTICE OF COMMENCEMENT REGISTERED IN COURT, BEFORE START OF CONSTRUCTION.



EXISTING WALL PARTITION LEAD/PROTECTION DETAIL (TYP.)

SCALE: N.T.S.

CHARLES C. MITCHELL
CONSULTING ENGINEERING P.E.
924 North Fed Hwy Hollywood, Florida 33111
Phone: 305-336-3069 Fax: 305-336-3069
PE. REG. NO. 0011127

EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVED
Owner: **MICHAEL I LIBMAN**
2435 NW 7 St. Miami, FL-33125

CHARLES C. MITCHELL
P.E. Reg.

FOLIO
30-3134-038-0040

REVISIONS
Δ DERM D4-11-13

FILE
PLOT 100%
DRAWN G.VILLAMIL
CHECKED LE
DATE 02-18-13

SHEET INDEX
SHEET NUMBER

A-2
OF 3

SCOPE OF JOB

- 1-EXISTING SEATING AREA TO BE REMODELED: 604 SQ.FT.
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- RELOCATED EXISTING ELECT.SWITCH

NO PLUMBING TO BE PERFORMED IN THIS WORK. EXISTING UNSPRINKLERED BUILDING

EXIST.FIRE SYMBOL LEGEND

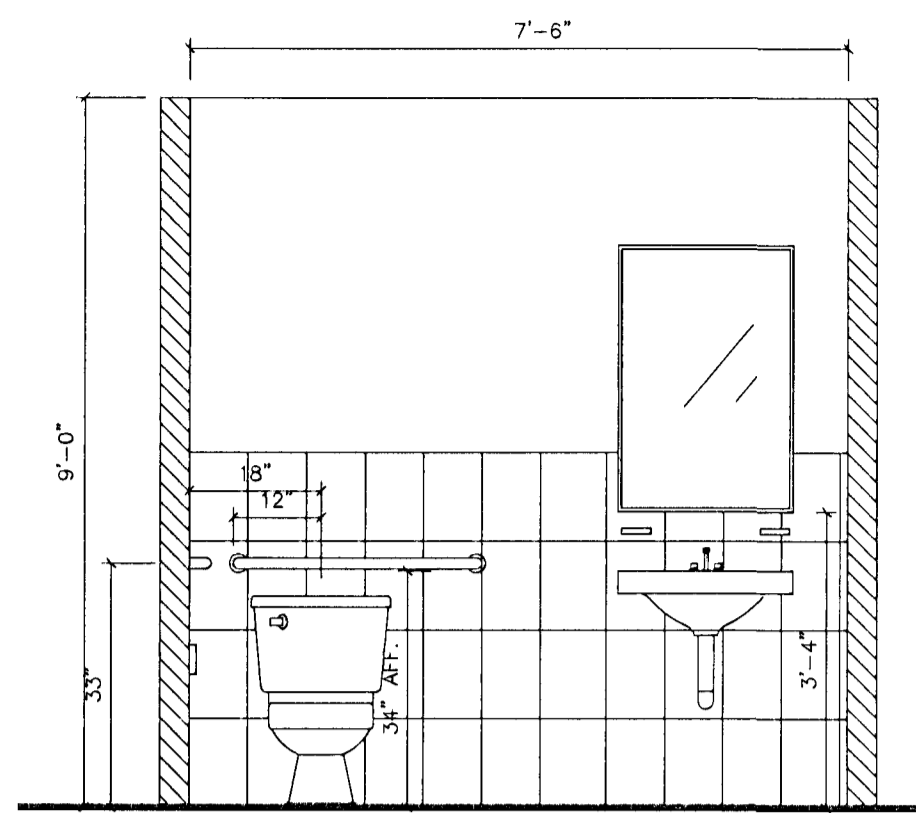
SYMBOL	DESCRIPTION
	EXIST.FIRE EXTINGUISHER
	SMOKE DETECTOR
	Ext. Lights with Battery Pack Surelight LPx70RWH 25W 120V.
	Combination Ext. Lights & Emergency Lights with Battery Pack
	Emergency Lights with Battery Pack Cooper Lighting CB1225W 120V

MECHANICAL NOTE

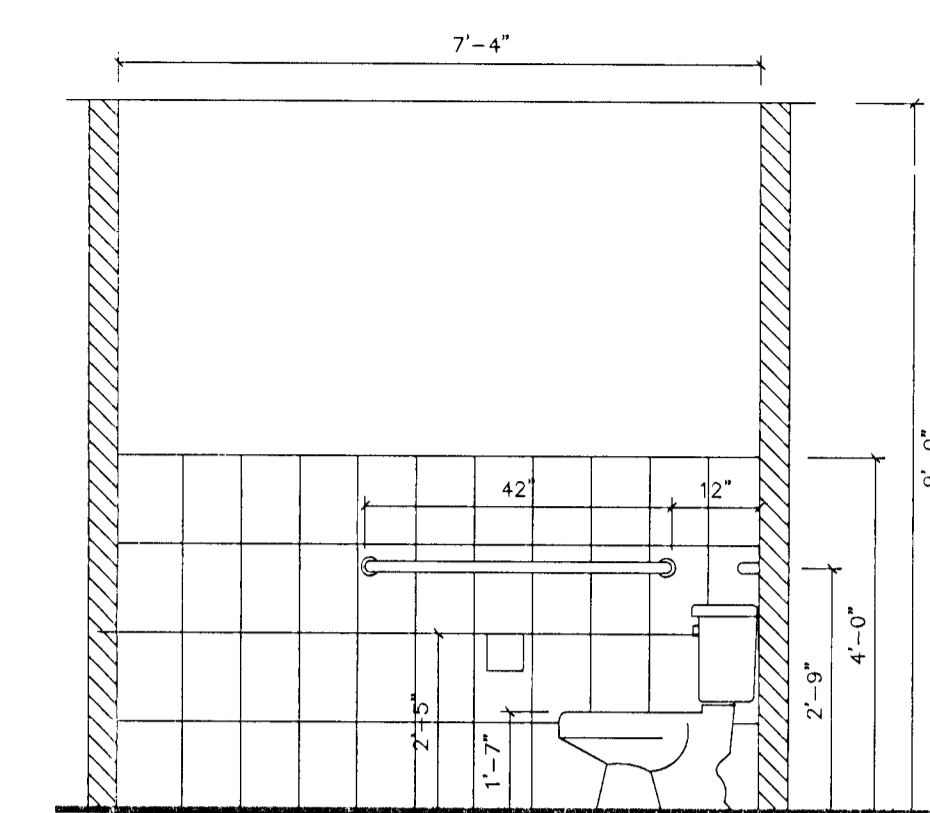
ALL AC SYSTEM IS EXISTING TO REMAIN.
NO ACRYLIC NAILS/NO PEDICURE/
NO GENERAL NAILS SERVICE IN THE EXIST.
HAIR SALON

LEGEND

	DENOTE EXIST. AREA TO REMAIN
	EXISTING 6" C.B.S. WALL TO REMAIN
	EXISTING 4" PARTITION WALL TO REMAIN
	EXIST. 4" PARTITION WALL TO BE DEMOLISHED
	DENOTE EXIST. AREA TO BE REMODELED



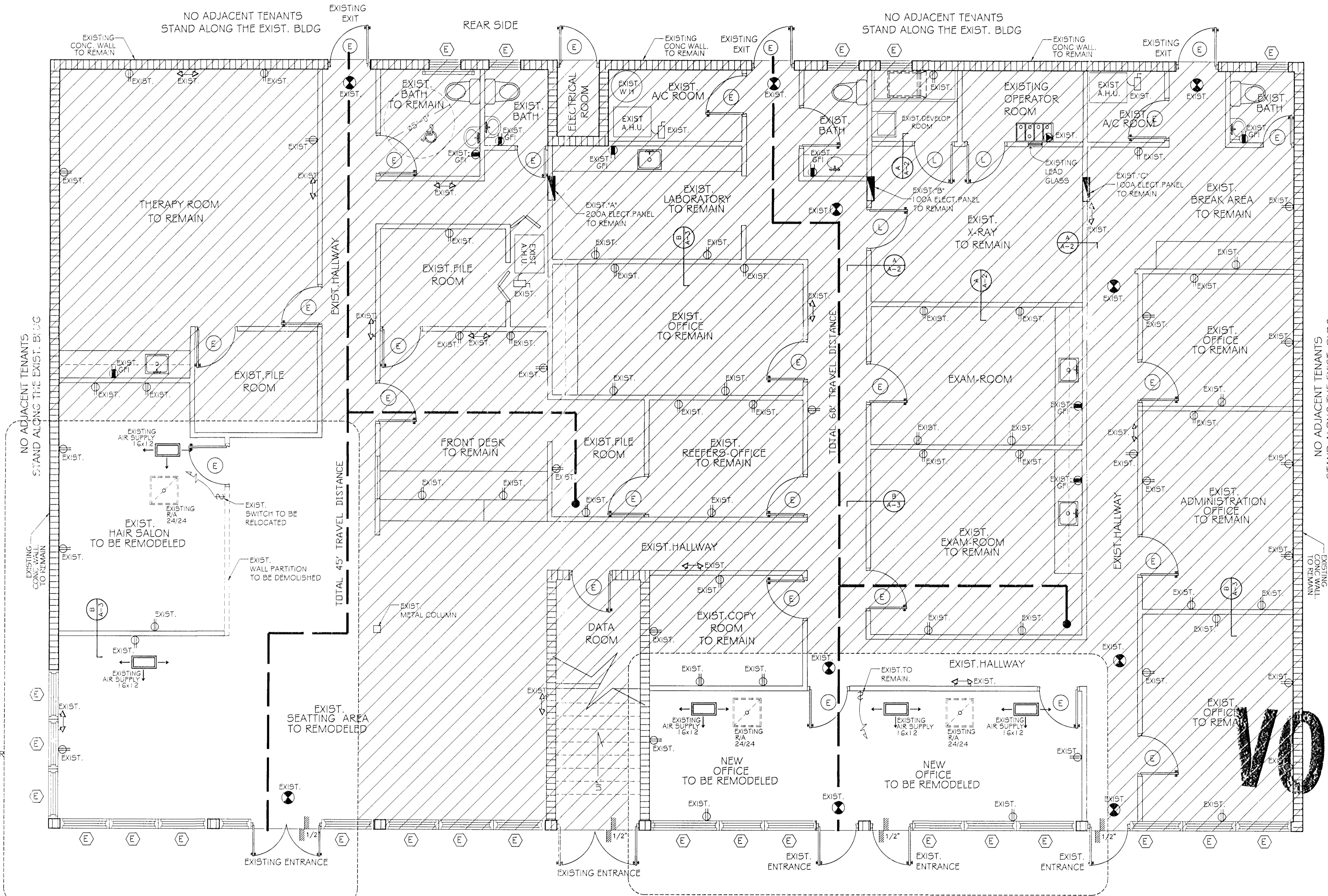
EXISTING ELEVATION "A"
SCALE: N.T.S



EXISTING ELEVATION "B"
SCALE: N.T.S

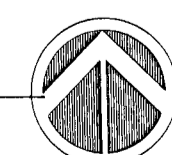
GENERAL NOTES

1. THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS, ELEVATIONS ANGLES AND ALL OTHERS EXISTING CONDITIONS PRIOR TO COMMENCING ANY WORK. THE CONTRACTOR ALSO VERIFY AND APPROVE ALL INFORMATION ON DRAWINGS. ACCEPTANCE OF THESE PLANS CONSTITUTES APPROVAL. PLEASE NOTIFY ARCHITECT BY CERTIFIED MAIL OF ANY CONFLICT OR DISCREPANCY IF ANY.
2. THE CONTRACTOR SHALL FURNISH AN BE SOLELY RESPONSIBLE FOR ALL TEMPORARY BRACING AND SHORING REQUIRED FOR TO MAINTAIN PLUMBNESS AND STABILITY OF ALL STRUCTURAL ELEMENTS DURING CONSTRUCTION.
3. THE CONTRACTOR SHALL OBTAIN FROM SUBCONTRACTORS THE FINAL APPROVED SITE AND LOCATION OF ALL OPENINGS TO BE FOR RESPECTIVE TRADES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR LOCATION AND DETAILS.
4. CONTRACTOR/OWNER SHALL BE RESPONSIBLE FOR VERIFYING REQUIRED GRADE & FINISHED FLOOR ELEVATIONS WITH RESPECT TO DADE COUNTY FLOOD CRITERIA, EXISTING CROWN OF ROAD ELEVATIONS FEDERAL FLOOD CRITERIA, AND OTHER GOVERNMENT BODIES.
5. OWNER AND CONTRACTOR SHALL NOTIFY ARCHITECT IN WRITING BY CERTIFIED MAIL AND OBTAIN A NOTICE OF COMMENCEMENT REGISTERED IN COURT, BEFORE START OF CONSTRUCTION.



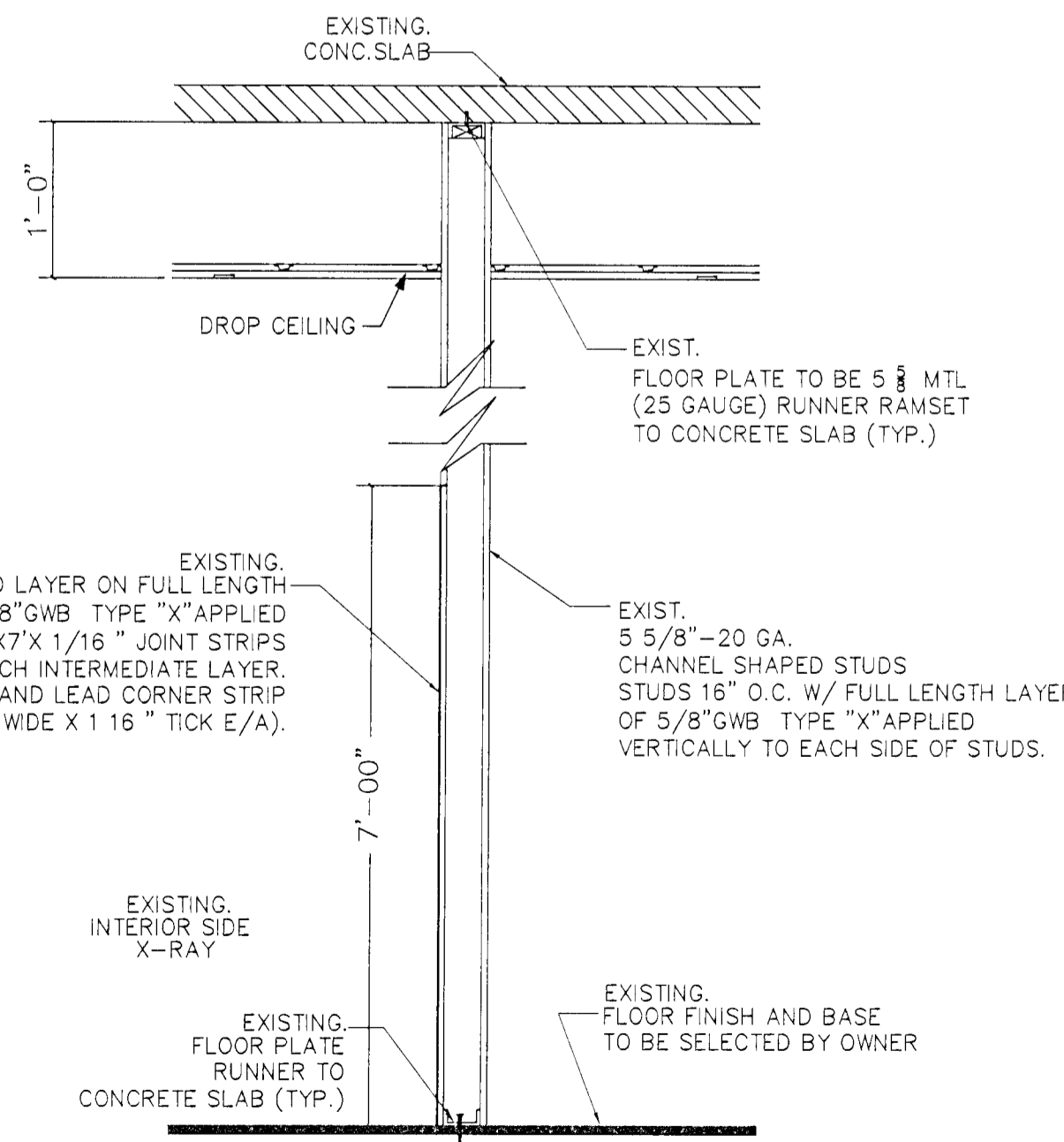
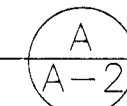
EXISTING FLOOR PLAN

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



EXISTING WALL PARTITION LEAD/PROTECTION DETAIL (TYP.)

SCALE: N.T.S



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Phone: 305-536-5069 Fax:
FE. REG. NO.0011127

EXISTING INTERIOR MEDICAL CENTER TO BE IMPROVED
Owner: **MICHAEL LIBMAN**
2435 NW 7 ST. Miami, FL-33125

CHARLES C. MITCHELL
Fl. Reg.

FOLIO
30-3134-038-0040

REVISIONS

NO.	DATE	DESCRIPTION

FILE

PLOT 100%

DRAWN G.VILLAMIL

CHECKED LE

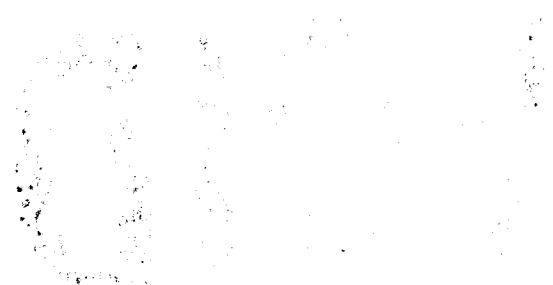
DATE 02-18-13

SHEET INDEX

SHEET NUMBER



Derm Number: 2013-0315-1325-5928
Contact Name: MS ANGELA ESTRADA
Contact Phone: (954) 628-2425
Folio: 01-3154-0315-0040
Project Name: MEDICAL CENTER
Date Received: 03/15/2018
Donor Name:



Faint, illegible text or stamp