City of Aurora
Building Codes Division
15151 E Alameda Pkwy
Aurora, CO 80012
(303) 739-7420

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Building Permit Application

Permit Center - 15151 E Alameda Pkwy ❖ Ste 2400❖Aurora, CO 80012❖(303)739-7420
Email buildingplans@auroragov.org

Project Address: 1501 So. Potomac St. Unit # 3RD Floor Zip code: 80012
Project Name: The Medical Center of Aurora
Contractor Company Name: Empire Fire & Safety, Phone: 3) 451-0975 Fax: 3) 920-9298
Contact Person: Dave Walker Phone: 3) 217-1438
Email: empirefiresafety@msn.com Fax: 3) 920-9298
Architect and/or Engineer Contact information for correction items:
Architect or Engineer Name: Email:
Phone #: Fax #:
Owner:(Required for Certificate of Occupancy) only:
Owner address:
Email:
Valuation / FDA$ 225.00 **Materials cost $** NONE

FDA = Fee Determination Assessment. (Also known as the value of project. The Fee Determination Assessment, FDA has no relationship to the construction costs for the building which can vary greatly. Rather, the Assessment is used only to determine the appropriate level of fees to fund our code compliance activities.

Describe the work you will be doing: Remove two pull stations that are within 15' feet of each other.

~~NOT~~ MEDICAL CENTER OF AURORA ~~**~~

I declare under penalty that this application has been examined by me; and that the statements made herein are made in good faith pursuant to City of Aurora tax and licensing regulations; and to the best of my knowledge and belief are true, correct and complete.

Print Name: Dave Walker **Signature:** Dave Walker **Date:** 12/14/11

BOARD OF APPEALS - Contractor's Appeals and Standards Board. Applicants have the right to have the board hear appeals of orders, decisions or determinations made by the building official relative to the application and interpretation of the building code. Any application for appeal to the board shall be based on a claim that the true intent of the code or the rules legally adopted there under have been incorrectly interpreted, the provisions of the building code do not fully apply or an equally good or better form of construction is proposed.

Sprinkler & Alarm permits are separate submittals, and the value is NOT included on main permit.

◆◆◆◆ **THIS SPACE FOR OFFICE USE ONLY** ◆◆◆◆

Change of occupancy/use: ☐ Yes ☒ No

FDA: 225-UW

Reviews		Inspections	
☐	Structural	☐	Structural
☐	Mechanical	☐	Mechanical
☐	Plumbing	☐	Plumbing
☐	Electrical	☒	Electrical
☐	Fire Life Safety	☒	Life Safety
☐	Bldg Life Safety	☐	Gate/Haz.

Intake Date: 12-15-11 PE Initial UW

Balance Due: $ 26 50

CT

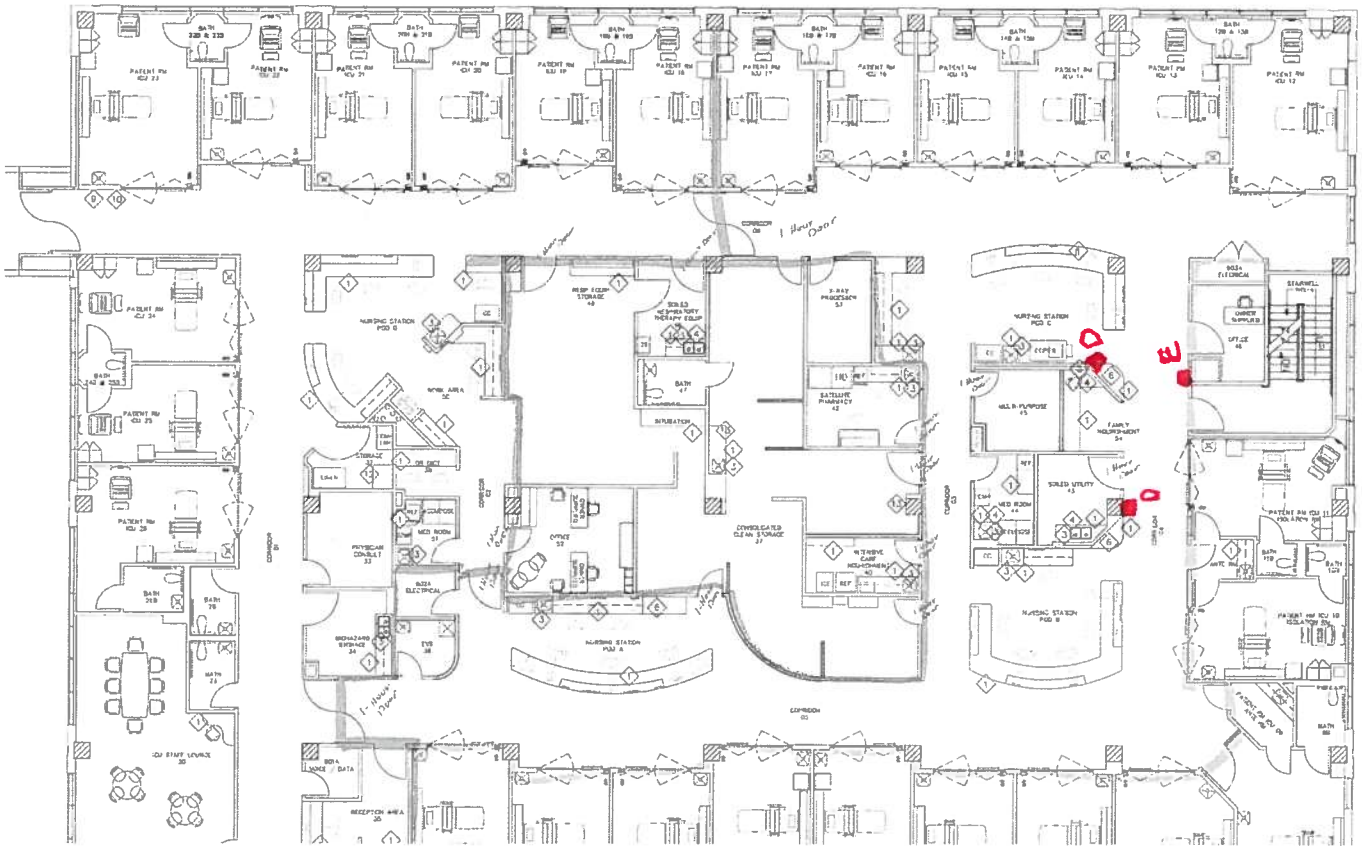
APPROVED
City of Aurora Building Division
UW 12-15-11

Pre-approval(s): Zoning: ☐ Initials N/A
Water: ☐
Exterior changes? ☐ Yes ☒ No N/A
Homeowner Verified ☐ ~~Yes~~ N/A
Permit Type CT
Mid roof /Avg. bldg height —
Parent Permit RSN 624289
Plans Examiner UW
Sub Type ~~624290~~
RSN: 635226

Plans Picked up by
Company Nam
Phone #

See reverse side for Fence/sign/Public Improvements application

CT



1	NEW CASEWORK RE: ELEVATIONS
2	NEW LOCKERS @ 12"w x 12"D x 12"H. RE: ELEVATIONS
3	REBUILD EXISTING FAUCETS FOR SINKS TO REMAIN AND RELOCATED SINKS
4	NEW PLUMBING LOCATIONS REUSE EXISTING SINKS FROM A-1, KEYNOTE 5.
5	FREE STANDING, WIRE STORAGE RACKS. OWNER SUPPLIED
6	NEW DATA GUARD LOCATION
7	NEW DRY MARK ERASER BOARDS. OWNER SUPPLIED
8	P-LAM FOR COUNTER LOCATIONS
9	REMOVE DOUBLE DOOR PUSH PLATE / REPLACE WITH ELECTRONIC EYE SENSOR
10	APPLY SOUND BATTING INSULATION TO PATIENT ROOM/HALL WALL
11	FAMILY MESSAGE BOARDS
12	INSTALL WATER LINE FOR REFRIGERATOR/ICE MAKER
13	INVENTORY SCANNER LOCATION

■ - Existing (to remain)

■ - Demo

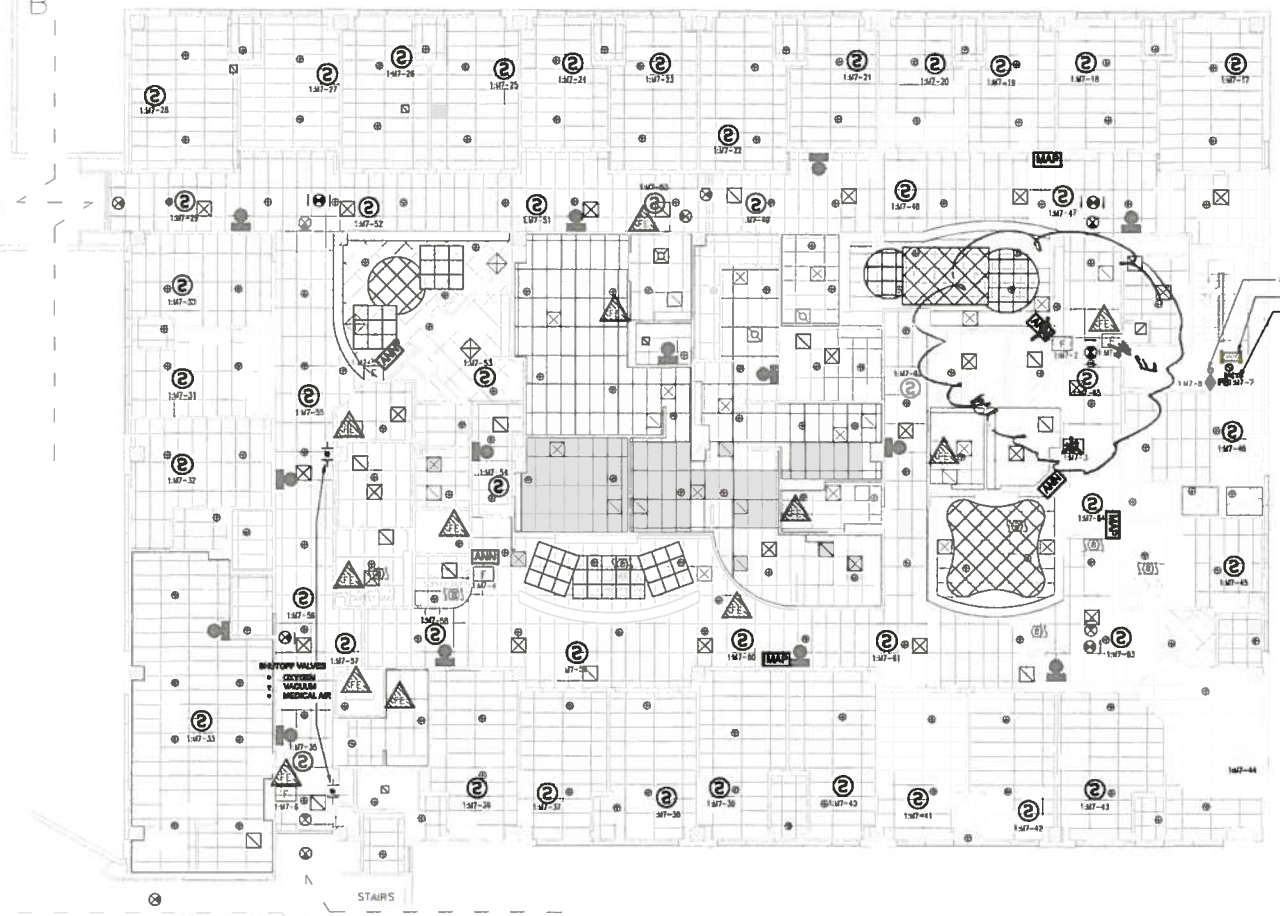
GENERAL NOTES:	
A.	ALL PATIENT ROOM DOORS INSTALLED BY STANLEY DOOR VENDOR
B.	INSTALL BIN SUPPORT RACKS AS A FINAL ELEMENT TO ALLOW FOR APPROPRIATE LOCATIONS
C.	NEW CASEWORK IN EACH PATIENT ROOM. RE: ELEVATIONS
D.	INSTALL NEW WALL MOUNT BRACKET FOR FLAT SCREEN TV (TV BY OWNER, INSTALLATION BY GC). INSTALL AT PREVIOUS TV LOCATION. FIELD VERIFY LOCATION OF PREVIOUS TELEVISION MOUNTING BRACKET
E.	REINSTALL CUBICLE CURTAINS AND TRACK AS INDICATED BY DASHED LINE. RE: CEILING PLAN
F.	ALL DOORS TO BE ACROVYN WITH STAINLESS STEEL BEVELED EDGE ON LATCH SIDE. DOOR FINISH: REAL MAHOGANY # 374.
G.	REPLACE DOOR IN EXISTING FRAME W/SAME SIZE DOOR. COORDINATE ALL HARDWARE GROUPS WITH HOSPITAL FACILITIES DEPT.
H.	KORESEAL TRAFFIC PATTERN WALL TREATMENT TO BE APPLIED TO ALL PATIENT ROOMS, RE: ELEVATIONS. FINISH PLAN SHOWS LOCATION OF TREATMENT IN HALLWAYS. NOTE: USE COLOR MATCH CAULK AT SEAMS & CORNERS
I.	EXISTING PATIENT ROOM SINKS TO BE REINSTALLED FROM EXISTING STOCK
J.	ALL EXISTING DOORS WILL BE REPLACED (REUSE EXISTING HARDWARE AS IS POSSIBLE) WITH NEW ACROVYN DOORS TO MATCH HOSPITAL STANDARD.
K.	CONFIRM EXISTING WALLS SHOWN TO REMAIN MEET REQUIREMENTS OF CURRENT CODES. UPGRADE TO MEET CURRENT REQUIREMENTS. SEAL ALL PENETRATIONS WITH REQUIRED SEALANT AND ENSURE ALL WALL ASSEMBLIES ARE COMPLETE
L.	PATIENT ROOM WINDOW TREATMENTS - OWNER SUPPLIED (MUST BE BLEACH TOLERANT)
M.	TUBE STATION EQUIPMENT IN CORRIDOR 3 - OWNER SUPPLIED
N.	ALL TELEVISIONS, TELETRACKER MONITORS, AND WAYFINDER ALONG WITH MOUNTING HARDWARE - OWNER SUPPLIED / CONTRACTOR INSTALLED.
O.	LOCKERS WILL BE FURNISHED AND INSTALLED BY OWNER

CT

APPROVED

City of Aurora Building Division

NEIW 12-15-11



FIRE PROTECTION PLAN
1/8" = 1'

CEILING LEGEND:

- SUSPENDED 2' X 4' ACOUSTICAL CEILING SYSTEM: ARMSTRONG FISSURED - ITEM #755 CEILING TILE FOR ALL RESTROOMS T.B.D.
- GYPSUM BOARD CEILING OR SOFFIT TO TOP OF CABINET (OR AS NOTED) RE. ELEVATIONS.
- EXISTING SUPPLY AIR - RELOCATED
- NEW SUPPLY AIR
- EXISTING RETURN AIR - RELOCATED
- NEW RETURN AIR
- NEW EMERGENCY EXIT SIGNS, EDGE LIT DUAL LITE LE SERIES OR APPROVED EQUIVALENT

FIRE PROTECTION SYMBOL LEGEND

SCHEMATIC SYMBOL	SYMBOL DESCRIPTION
F	FIRE SERVICE LINE (ABOVE OR BELOW FLOOR SLAB/GRADE)
A/S	AUTOMATIC SPRINKLER LINE (ABOVE FLOOR SLAB)
	IN-LINE O.S.&Y. GATE CUTOFF VALVE
A/S	AUTOMATIC SPRINKLER
F.E.	FIRE EXTINGUISHER
F.E.C.	FIRE EXTINGUISHER CABINET
F.H.E.C.	FIRE HOSE/EXTINGUISHER CABINET
	FIRE EXTINGUISHER CABINET
	FIRE HOSE/EXTINGUISHER CABINET
	FIRE DEPARTMENT SIAMESE CONNECTION
	FLOW SWITCH
	SERVICE PIPE TURNED DOWN (ABOVE OR BELOW FLOOR SLAB)
	SERVICE PIPE TURNED UP (ABOVE OR BELOW FLOOR SLAB)
	DROP OR RISE IN SERVICE PIPING (ABOVE FLOOR SLAB)
	EXISTING PIPING TO BE REMOVED (ABOVE OR BELOW FLOOR SLAB)
	EXISTING PIPING TO REMAIN (ABOVE OR BELOW FLOOR SLAB)
DOWN UP	IN-LINE CUTOFF VALVE IN VERTICAL PIPE (BALL, GATE, OR O.S.&Y.)
	IN-LINE CHECK VALVE
	REFER TO NOTE(S)
	NEW CONNECTION TO EXISTING SERVICE PIPING
	AUTOMATIC SPRINKLER HEAD - CONCEALED
DSW	AUTOMATIC SPRINKLER HEAD - DRY SIDEWALL
ASD	AUTOMATIC SPRINKLER DRAIN LINE
PLAN SYMBOLS	
F	MANUAL PULL STATION
S	SMOKE DETECTOR
D	DUCT DETECTOR
H	HEAT DETECTOR
ANN	LCD ANNUNCIATOR
MAP	GRAPHIC MAP
NAC	4009 IO NET NAC EXTENDER
FATC	FIRE ALARM TERMINAL CABINET
FS	WATER FLOW SWITCH
TS	TAMPER SWITCH
	STROBES

FYI ONLY

The Medical Center of Aurora
HealthONE

THE DESIGN PLOT
PARKER, CO 80138
DESIGN PLOT

THE MEDICAL CENTER OF AURORA
1501 S. POTOMAC ST.
AURORA, CO 80012

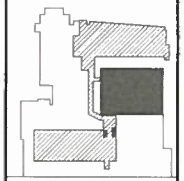
REVISION & DESCRIPTION

DRAWN BY:
TH
JM

PROJECT
3RD FLOOR
EAST TOWER B
ICU RENOVATION

SHEET DESCRIPTION
FIRE PROTECTION PLAN

KEY PLAN



UPDATED
JUNE 21, 2011

SCALE
1/8" = 1'

SHEET NUMBER
FP-1