DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES

11805 SW 26 Street Miami, FL 33175-2474
(786) 315-2000

MUNICIPAL REVISE PERMIT AND INSPECTION RECORD

Municipal #: **2026007446**
Process Number: M2025023234
Issue Date: 05/14/2026
Revision Process Number: M2026009193

Job Location

Folio: 3220220090050
Job Site Address: 15255 NW 82 AVE
Legal: MIAMI LAKES BUSINESS PARK SEC 1 PB 126-54

Project Information

Application Type: ALTER INTERIOR
Proposed Use: OFFICE - PROFESSIONAL BUILDINGS
Sq. Ft.: 4500 / Units: 0 / Floors: 0
Permit Type: MUNICIPAL BLDG / Permit Category: 0001 MUNICIPAL GENERAL BUILDING

Owner & Contractor Information

Property Owner: TGC PCSC SW LLC
Contractor: DIAMOND CONTRACTORS GROUP INC
Qualifier:

Required Inspections

FIRE - 0001 FIRE INSPECTIONS RECOMMENDED

Inspection Type	Initials	Date
200 FIRE HYDRANTS		
208 FIRE TCO INSPECTION		

211 PRELIMINARY

209 FIRE FINAL

Inspection History

Inspection Type	Inspection Date	Disposition	Comments	Initials
209 FIRE FINAL	2/12/2026	002		E164643
209 FIRE FINAL	2/17/2026	002		E164643
209 FIRE FINAL	2/18/2026	003		E88884
209 FIRE FINAL	2/20/2026	068		E24211
209 FIRE FINAL	2/23/2026	007		MOLNAR
209 FIRE FINAL	2/26/2026	001		E161373

Notes

Rough, electrical, plumbing, and mechanical inspections must be made and approved before requesting a framing inspection.

Inspections can be requested online at www.miamidade.gov/building under the Inspection tab or by calling (786) 315-2100. Before scheduling the inspection, please have your ten-digit permit number and three-digit inspection type ready. The inspection type can be found on the permit card next to the required inspection. Inspectors can be reached at the office from 7 AM to 8 AM or via our website.

To schedule Fire inspections, call Fire Dept. at 786-331-4798

Warning to Owners

Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement.

You have purchased a building permit only. Separate permits are required for roofing,

plumbing, electrical, mechanical, window, and storm shutter work.

Compliance with the Florida Accessibility Code will be verified at the time of rough and final inspections where applicable.

Building permits shall expire 180 days from the date of issuance or the date of last approved inspection.

In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management district, state agencies, or federal agencies.

Back to Main Menu

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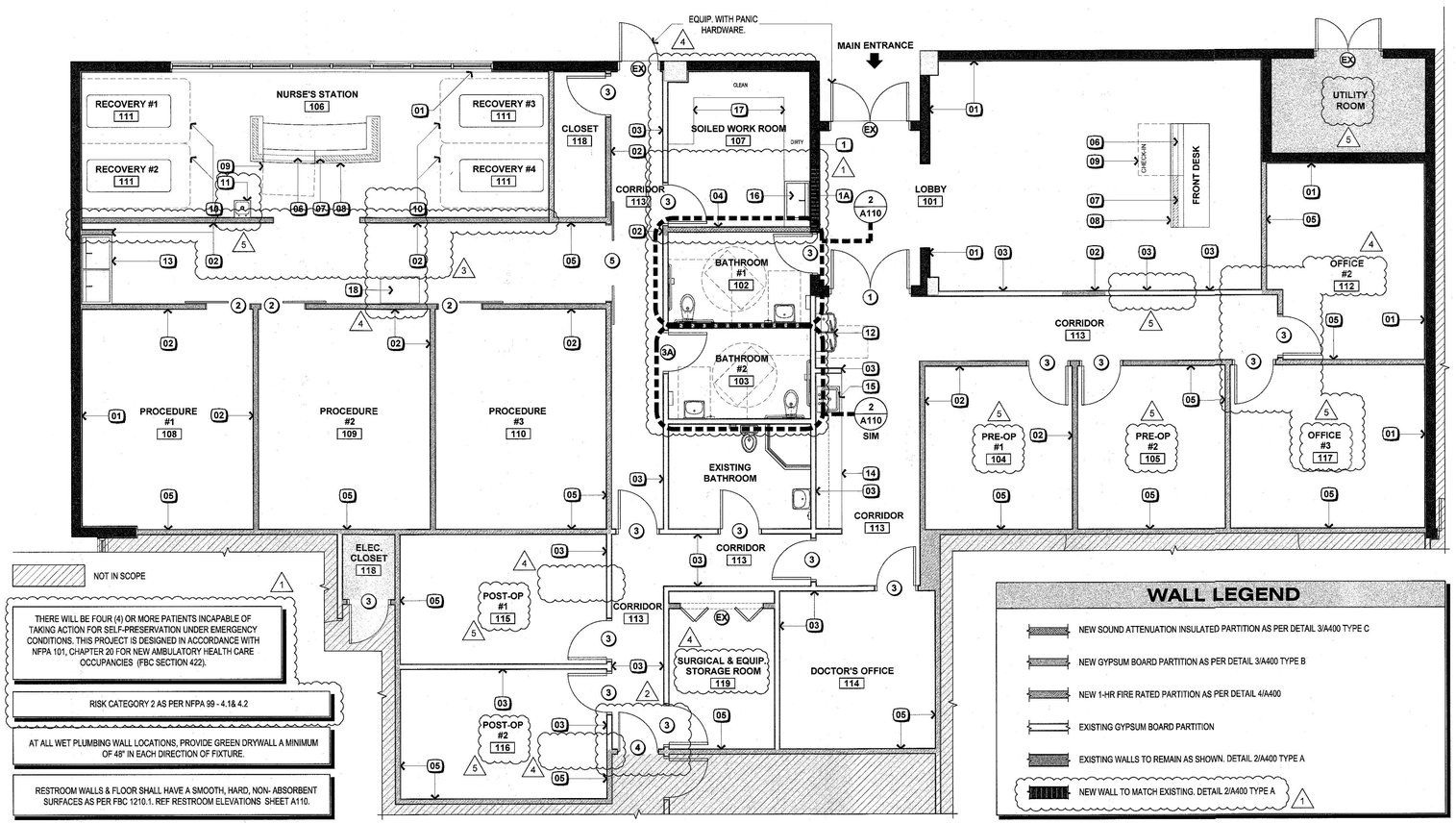
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1 GROUND FLOOR PLAN

SCALE: 3/16" = 1'-0"

WALL LEGEND

- NEW SOUND ATTENUATION INSULATED PARTITION AS PER DETAIL 3/A400 TYPE C
- NEW GYPSUM BOARD PARTITION AS PER DETAIL 3/A400 TYPE B
- NEW 1-HR FIRE RATED PARTITION AS PER DETAIL 4/A400
- EXISTING GYPSUM BOARD PARTITION
- EXISTING WALLS TO REMAIN AS SHOWN. DETAIL 2/A400 TYPE A
- NEW WALL TO MATCH EXISTING. DETAIL 2/A400 TYPE A (1)

CONSTRUCTION NOTES

CONTRACTOR TO SEE DOCTOR FOR ALL INTERIOR FINISHES WILL ALSO SUPERVISE THE LOCATION OF THOSE TEMPLATES. CONTRACTOR TO TRENCH IN CONCRETE, OR DRILL HOLES IN CONCRETE OR WOOD FLOOR WHERE NEEDED BY PLUMBER AND ELECTRICIAN, PATCH HOLES AS PER CODE AND OR BUILDING STANDARDS. CONTRACTOR TO PREP FLOOR TO ACCEPT FINISH (PATCH/SAND/LEVEL)

SUPPLY IS NOT RESPONSIBLE FOR VERBAL OR WRITTEN INFORMATION GIVEN. IT IS THE CONTRACTORS, PLUMBERS, AND ELECTRICIANS RESPONSIBILITY TO ADHERE TO ALL BUILDING CODES.

SUPPLY IS NOT RESPONSIBLE FOR VERBAL OR WRITTEN INFORMATION GIVEN. IT IS THE CONTRACTORS, PLUMBERS, AND ELECTRICIANS RESPONSIBILITY TO ADHERE TO ALL BUILDING CODES.

CONTRACTOR SHALL INSURE THAT ELECTRICIAN HAS PROVIDED PROPERLY MOUNTED AND PROPER LIGHTED EXIT SIGNS WHERE REQUIRED BY LOCAL CODES. FIRE FIGHTING AND DETECTING SYSTEMS SHALL BE PROVIDED FOR SAFETY AND AS REQUIRED BY LOCAL CODES. THE FILING OF REGISTERED ARCHITECT'S PLANS WITH THE BUILDING DEPARTMENT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR, TENANT OR OWNER. THIS SHALL BE AGREED BEFOREHAND AND INCORPORATED INTO THE LEASE, SUCH PARTY PAYING ALL FEES INCURRED.

THE CONTRACTOR SHALL COMPLY WITH ALL STATE AND CITY LAWS, ORDINANCES, RULES AND REGULATIONS PERTAINING TO THE CONSTRUCTION OF THIS OFFICE. HE SHALL ALSO FILE NECESSARY PLANS AND APPLICATIONS WITH THE CITY DEPARTMENTS AND PAY FOR,' AND OBTAIN, ALL CERTIFICATES OF APPROVAL.

DIMENSIONS AND TO FINISHED FLOORS, WALLS AND CEILINGS. THE CONTRACTOR ASSUMES ALL RESPONSIBILITY FOR ACCURACY OF FIELD MEASUREMENTS AND CONDITIONS, WRITTEN SPECIFICATIONS SHALL HAVE PRECEDENCE OVER SCALED DRAWINGS.

NO RESPONSIBILITY WILL BE ASSUMED BY ENGINEER OF RECORD COMPANY OR ANY OF IT'S EMPLOYEES, IF CONTRACTOR DEVIATES FROM PLANS AND/OR SPECIFICATIONS. CHANGES MUST BE APPROVED IN WRITING.

ALL PLUMBING AND ELECTRICAL LINES ARE TO BE CONCEALED UNLESS OTHERWISE SPECIFIED.

THE CONTRACTOR SHALL REMOVE RUBBISH AND DO ALL PATCHING AFTER ROUGHING IN IS COMPLETED.

DOCTOR SHALL MAKE ARRANGEMENTS FOR INSTALLATION OF TELEPHONES, INTERCOMMUNICATIONS, COMPUTER SYSTEMS, AND MUSIC SYSTEM BEFORE WALLS ARE CLOSED IN.

CIRCUIT BREAKER BOX FOR SUITE TO BE LOCATED IN SUITE AND CONVENIENTLY ACCESSIBLE. LOCATION TO BE APPROVED BY THE DOCTOR.

A FINAL CHECK OF ALL ROUGHING MUST BE MADE BY DENTAL REPRESENTATIVE BEFORE PARTITIONS ARE CLOSED AND/OR THE POURING OF CONCRETE FLOORS.

CLOSED AND/OR THE POURING OF CONCRETE FLOORS. OFF FOR EACH OPERATORY,LAB OR STERILIZATION AREAS. DENTAL COMPANY TECHNICIANS WILL ASSEMBLE AND CONNECT TO MECHANICAL SERVICES, SUCH AS ELECTRICAL, COLD WATER, GAS, AIR, VACUUM, WHICHEVER ARE REQUIRED FOR OPERATION OF THIS ITEM, PROVIDED SUCH MECHANICAL SERVICES ARE TO POSITIONS SPECIFIED BY DENTAL REPRESENTATIVES AND ARE SUPPLIED WITH PROPER CONNECTIONS, FITTINGS OR JUNCTIONS. WE WILL CONNECT TO SUCH FITTINGS OR JUNCTIONS PROVIDED OUR SERVICE TECHNICIANS ARE PERMITTED TO DO SO WITH STATE AND LOCAL BUILDING CODES.

OCCUPANT LOAD CALCULATION

Per FBC 8th Ed. (2023), Table 1004.5 & FFPC Table 7.3.1.2

MEDICAL OFFICE :	3,725 S.F. / 150
WAITING AREA	610 S.F. / 15
STORAGE	188 S.F. / 500
TOTAL:	24.83 + 40.67 + 0.37 = **66 OCCUPANTS**

MINIMUM NUMBER OF REQ. PLUMBING FIXTURES (FBCP TABLE 403.1)

CLASS.	OCC.	DESC.	WATER COLSETS (URINALS: SEE SECTION 4192)		LAVATORIES		DRINKING FOUNTAIN (SEE SECTION 410)	OTHERS
			MALE	FEMALE	MALE	FEMALE		
BUSSINES GROUND LEVEL	B 66 TOTAL PEOPLE (ONLY SURGICAL SUITE)	MEDICAL	1 PER 25 FOR THR FIRST 50 AND 1 FOR THE REMAINDER EXCEEDING 50. (3 REQUIRED 3 PROVIDED)		1 PER 40 FOR THE FIRST 80 & 1 PER 80 FOR THE REMAINDER EXCEEDING 80 (2 REQUIRED 3 PROVIDED)		1 PER 100 1 REQUIRED 1 PROVIDED	1 SERVICE SINK 1 REQUIRED 1 PROVIDED

KEY LEGEND

1. ON ALL CONCRETE WALL, ADD ⅝" GYPSUM BOARD ON 1x3 P.T. WOOD FURRING STRIPS @ 16" O/C. W/R4.1 INSULATION TO 6" ABOVE CEILING.SEE WALL TYPE A ON SHEET A400 FOR MORE INFO.
1A. NEW CONCRETE WALL (SAME AS KEYNOTE "1").
2. TYPICAL NEW INTERIOR PARTITION W/ (1) LAYER ⅝" GYPSUM BOARD APPLIED VERTICAL TO EACH SIDE OF 3 ⅝", 20GA STEEL STUDS AT 16" O.C. FROM FLOOR TO 6" ABOVE SCHEDULE CEILING HEIGHT. ALL DRYWALL SHALL BE TAPED, SANDED & READY FOR PAINT. SEE FINISH SCHEDULE THIS SHEET. SEE WALL DETAIL 3 ON SHEET A400.
3. EXISTING DRYWALL PARTITION NOT TO BE DISTURBED.
4. SAME AS KEYNOTE "2", EXCEPT WALLS SHALL BE FROM FLOOR TO EXISTING ROOF DECK.
5. 1 HR RATE DEMISING WALL TYP. 6", 20 GA STUDS @ 16" O.C. TO ROOF DECK W/ 6" BATT I NSULATION & 5/8" TYPE "X" DRYWALL EACH SIDE OF STUDS TO MATCH ON UL ASSEMBLY # 419. ALL DRYWALL SHALL BE TAPED, SANDED & PREPARED FOR PAINTING.
6. 34" HIGH LOW WALL.
7. 40" HIGH LOW WALL.
8. 42" HIGH COUNTERTOP.
9. ACCESSIBLE COUNTER TO HAVE A 36" WIDE MIN. x36" HIGH MAX. SECTION (TYP). SEE DETAIL 8 ON SHEET A400.
10. FURNITURE OR MILLWORK NOT A PART OF THESE DOCUMENTS, CONSULT WITH CG COSMETICS ON DETAILS & SHOP DRAWINGS. (4) (5)
11. NEW STAINLESS STEEL HAND SINK. SEE PLUMBING SHEETS FOR MORE INFORMATION.
12. NEW ACCESSORY DRINKING FOUNTAIN BY CG. COSMETICS. SEE SHEET A110 & PLUMBING SHEETS FOR MORE DETAILED INFORMATION.
13. NEW SURGICAL SCRUB SINKS (DUAL STATION). SEE SHEET A110 AND PLUMBING SHEETS FOR MORE DETAILED INFORMATION.
14. EXISTING COUNTERTOP ON BASE CABINETS NOT TO BE DISTURBED.
15. EXISTING STAINLESS STEEL SINK. SEE PLUMBING SHEETS FOR MORE INFORMATION.
16. NEW STAINLESS STEEL SINK. SEE PLUMBING SHEETS FOR MORE INFORMATION.
17. NEW COUNTERTOP ON BASE CABINETS .
18. CRASH / ANESTHESIA CARTS (4)

NOTES

- USE ⅝ MOISTURE RESISTANT GYPSUM BOARD +4.00' @ ALL WET OR RESTROOM FIXTURE LOCATION & INTERIOR WALLS.
- FIXTURE WALL OF BATHROOM SHALL BE WHITE EPOXY PAINT (NON-ABSORBENT) FROM FLOOR TO 5'-0" AFF, AND NON EPOXY PAINT FROM 5'-0" TO CEILING.
- RESTROOM WALLS & FLOOR SHALL HAVE A SMOOTH, HARD, NON- ABSORBENT SURFACES AS PER FBC 1210.1. REF RESTROOM ELEVATIONS SHEET A110.
- PRIMER SPECS: SHERWIN WILLIAMS, PREP RITE, HIGH BUILD, INTERIOR – LATEX PRIMER/SURFACER FOR SURFACES, WHITE #6401-22685 (B28 W 601).
- EGRESS PATH SHALL BE CLEAR & CONTINUOUS (NO STORAGE OR DISPLAY ALLOWED IN EGRESS PATH), AND SHALL COMPLY WITH FBC 1014.4 & 1014.4.2.
- FIRE &/OR SMOKE SEPARATION WALLS & PARTITIONS MUST BE IDENT. W/ STENCILED SIGN AS PER FBC 704.2.1.4. (ABV DISPLAY SHELVING).
- SEE LIFE SAFETY PLAN ON SHEET LS100.
- SEE FIRE PENETRATION DETAILS ON SHEET LS100

ARCHITECT OF RECORD:
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License Number AR101854
STATE OF FLORIDA JUAN MANUEL HERNANDEZ ALTAMIRANO REGISTERED AR101854 ARCHITECT
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REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd Ave - MEDICAL OFFICE
15255 NW 82nd Ave, Miami Lakes, FL 33014
OWNERS INFORMATION:

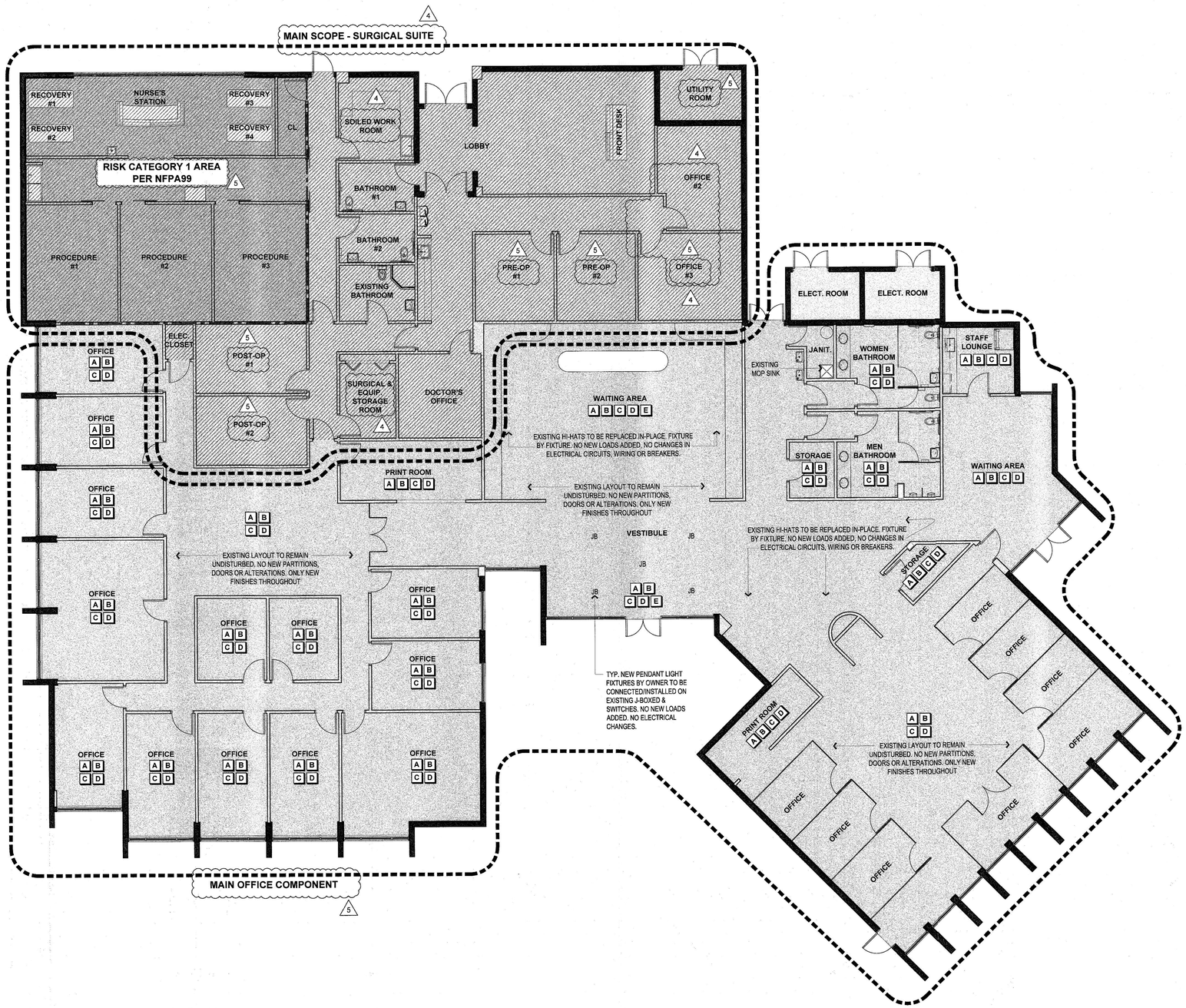
PROJECT HISTORY:	
1	09.03.2025
2	10.17.2025
3	01.13.2026
4	02.17.2026
5	03.10.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: GROUND FLOOR KEYED PLAN, KEY LEGEND & NOTES

SHEET NUMBER: A100
SHEET: 1 OF: 1

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Examiner Date Time Stamp Trade Stamp Name
MOYA, GRACE 4/20/2026 1:33:40 PM PERM Approved
DIAZ, ODON 5/14/2026 7:45:32 AM FIRE Approved



FINISH LEGEND

A. REMOVE EXISTING FLOORING AND INSTALL NEW FLOORING IN ACCORDANCE WITH THE SPACE, AS SELECTED BY THE OWNER

B. PAINT ALL INTERIOR WALLS W/ (1) COAT PRIMER & MINIMUM (2) COAT WHITE "INT LATEX "EGGSHELL" ON SMOOTH INT FINISH.

C. NO ALTERATIONS TO THE EXISTING CEILING.

D. PROVIDE 5" WOOD BASE PAINTED IN WHITE.

E. EXISTING DRYWALL CEILING. PATCH/REPAIR AS REQUIRED.

NOTES

- OTHER THAN THE ELECTRICAL SCOPE OF WORK DESCRIBED ON MEP SHEETS FOR THE PURPOSES OF CREATING THE AMBULATORY SURGICAL CENTER COMPONENT, THE EXISTING ELECTRICAL SYSTEM SHALL REMAIN AS IS THROUGHOUT THE ENTIRE FACILITY. NO MODIFICATIONS ARE PROPOSED
- THE EXISTING MECHANICAL SYSTEM SHALL REMAIN AS IS. NO MODIFICATIONS ARE PROPOSED UON ON MEP SHEETS.
- EXISTING LIGHT FIXTURES TO BE REPLACED IN PLACE WITH LITHONIA 2VTL4 2x2 LED RECESSED TROFFER, CEILING-MOUNTED, DAYLIGHT (TYP.).

MINIMUM NUMBER OF REQ. PLUMBING FIXTURES (FBCP TABLE 403.1)

CLASS.	OCC.	DESC.	WATER COLSETS (URINALS: SEE SECTION 4192)		LAVATORIES		DRINKING FOUNTAIN (SEE SECTION 410)	OTHERS
			MALE	FEMALE	MALE	FEMALE		
BUSSINES GROUND LEVEL	B 255 TOTAL PEOPLE (OVERALL)	MEDICAL	1 PER 25 FOR THR FIRST 50 AND 1 FOR THE REMAINDER EXCEEDING 50. (7 REQUIRED 8 PROVIDED)		1 PER 40 FOR THE FIRST 80 & 1 PER 80 FOR THE REMAINDER EXCEEDING 80 (MALE 5 REQUIRED 9 PROVIDED)		1 PER 100 3 REQUIRED 3 PROVIDED	1 SERVICE SINK 1 REQUIRED 1 PROVIDED

1 OVERALL EXISTING FLOOR PLAN

SCALE: 1/8" = 1'-0"

ARCHITECT OF RECORD:
Juan Alemandez
License Number AR101854
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SEAL:

DRAWN BY: RHR

REVISED BY: JAHL

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PROJECT HISTORY:
4 02.17.2026
5 03.10.2026

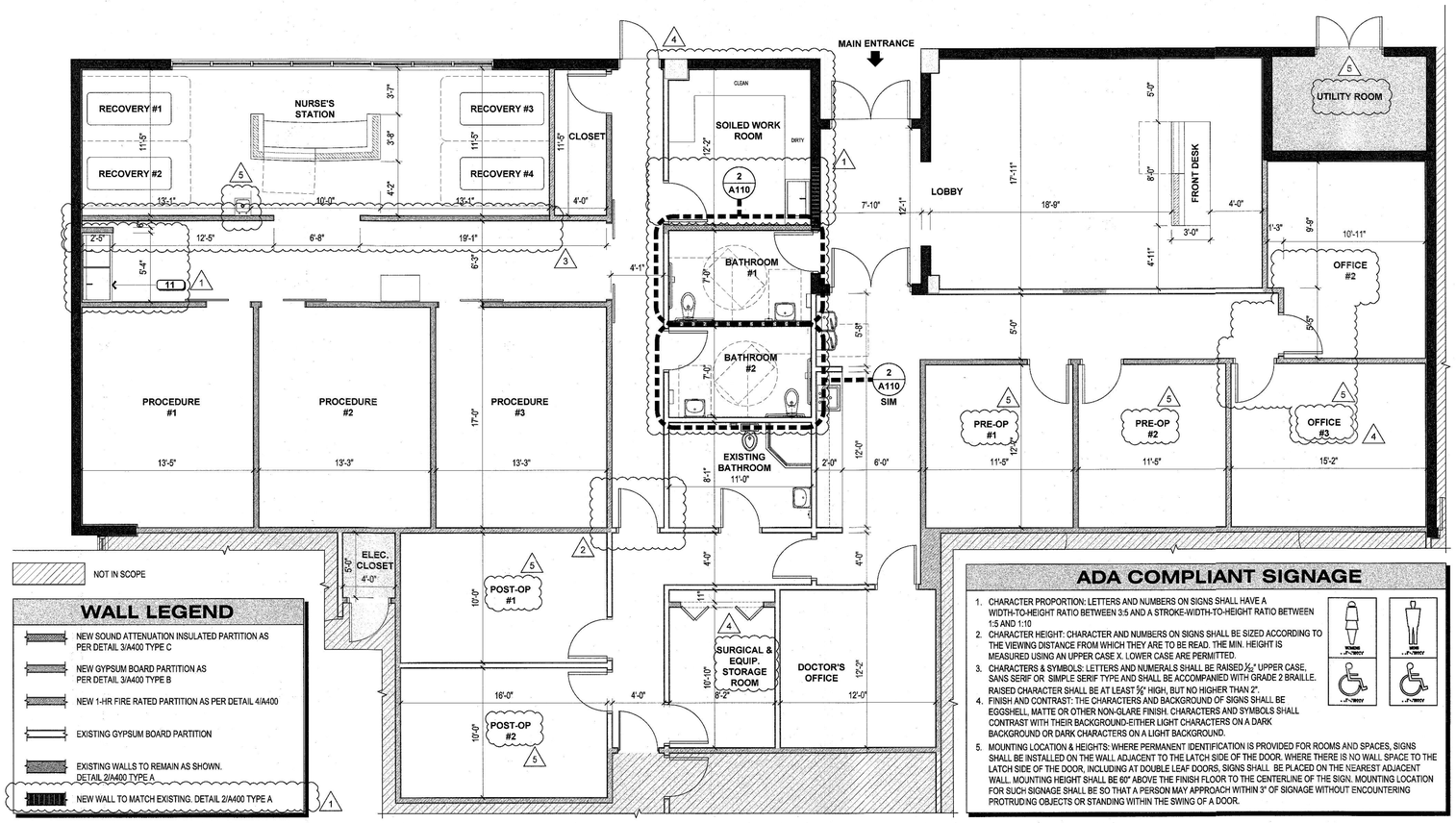
PROJECT INFORMATION:
DATE 01/23/2026
PROJECT NUMBER 25-048

SHEET TITLE: EXISTING FLOOR PLAN

SHEET NUMBER: A101

SHEET: 1 OF: 1

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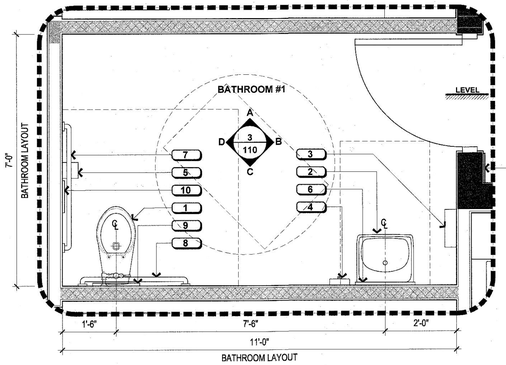
ADA COMPLIANT SIGNAGE

1. CHARACTER PROPORTION: LETTERS AND NUMBERS ON SIGNS SHALL HAVE A WIDTH-TO-HEIGHT RATIO BETWEEN 3:5 AND A STROKE-WIDTH-TO-HEIGHT RATIO BETWEEN 1:5 AND 1:10
2. CHARACTER HEIGHT: CHARACTER AND NUMBERS ON SIGNS SHALL BE SIZED ACCORDING TO THE VIEWING DISTANCE FROM WHICH THEY ARE TO BE READ. THE MIN. HEIGHT IS MEASURED USING AN UPPER CASE X. LOWER CASE ARE PERMITTED.
3. CHARACTERS & SYMBOLS: LETTERS AND NUMERALS SHALL BE RAISED ⅛" UPPER CASE, SANS SERIF OR SIMPLE SERIF TYPE AND SHALL BE ACCOMPANIED WITH GRADE 2 BRAILLE. RAISED CHARACTER SHALL BE AT LEAST ⅝" HIGH, BUT NO HIGHER THAN 2".
4. FINISH AND CONTRAST: THE CHARACTERS AND BACKGROUND OF SIGNS SHALL BE EGGSHELL, MATTE OR OTHER NON-GLARE FINISH. CHARACTERS AND SYMBOLS SHALL CONTRAST WITH THEIR BACKGROUND-EITHER LIGHT CHARACTERS ON A DARK BACKGROUND OR DARK CHARACTERS ON A LIGHT BACKGROUND.
5. MOUNTING LOCATION & HEIGHTS: WHERE PERMANENT IDENTIFICATION IS PROVIDED FOR ROOMS AND SPACES, SIGNS SHALL BE INSTALLED ON THE WALL ADJACENT TO THE LATCH SIDE OF THE DOOR. WHERE THERE IS NO WALL SPACE TO THE LATCH SIDE OF THE DOOR, INCLUDING AT DOUBLE LEAF DOORS, SIGNS SHALL BE PLACED ON THE NEAREST ADJACENT WALL. MOUNTING HEIGHT SHALL BE 60" ABOVE THE FINISH FLOOR TO THE CENTERLINE OF THE SIGN. MOUNTING LOCATION FOR SUCH SIGNAGE SHALL BE SO THAT A PERSON MAY APPROACH WITHIN 3" OF SIGNAGE WITHOUT ENCOUNTERING PROTRUDING OBJECTS OR STANDING WITHIN THE SWING OF A DOOR.

RESTROOM SCHEDULE

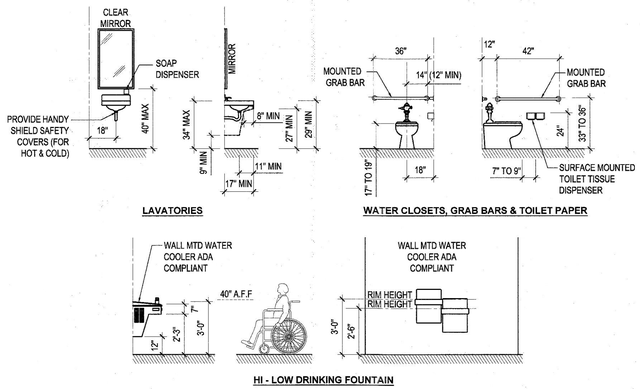
MARK	BRAND	MODEL	COLOR	WASTE SIZE	WATER SIZE C	WATER SIZE H	WATER SIZE T	DESCRIPTION
1	AMERICAN STANDARD	#3043 102 'MADERA 17"H'	WHITE	Ø 4"	1"	-	-	FLOOR MOUNTED FLUSH VALVE WATER CLOSET ADA CENTOCO #5O0CC SEAT WITH S.S. HINGE POSTS, AND SLOAN REGAL #111-XL FLUSH VALVE.
2	AMERICAN STANDARD	#0355 012 'LUCERNE'	WHITE	Ø 1½"	½"	½"	-	WALL HUNG LAVATORY A.D.A. CHICAGO #2200-4-E32 SINGLE LEVER FAUCET WITH LAMINAR FLOW OUTLET, McGUIRE # 155WC CP OFFSET OPEN GRID DRAIN WITH 17 GA. TAILPIECE, #8872 17 GA, C.P. 'P' TRAP WITH WALL BEND, #H2165LK C.P. SUPPLIES WITH LOOSE KEY STOPS, CONCEALED ARM CHAIR CARRIER, AND TRUEBRO # 103 INSULATION KIT. SEE NOTE '4' BELOW.
3	BOBRICK	B- 5262	S.S.	-	-	-	-	SURFACE PAPER TOWEL DISPENSER
4	BOBRICK	B- 2112	S.S.	-	-	-	-	SURFACE SOAP DISPENSER, WALL MOUNTED +44" MAX AFF.
5	BOBRICK	B- 2888	S.S.	-	-	-	-	SURFACE DOUBLE ADA COMP TOILET PAPER HOLDER; S.S. SATIN FINISH.
6	BOBRICK	B- 165	S.S.	-	-	-	-	MIRROR WITHIN S/S FRAME, BOBRICK OR EQ +40"AFF MAX LOWER EDGE OF MIRROR. (18" x 30")
7	BOBRICK	B-6806 (42)	S.S.	-	-	-	-	1½" DIA. ADA 42" LONG GRAB BAR, BOBRICK OR EQ.
8	BOBRICK	B-6806 (36)	S.S.	-	-	-	-	1½" DIA. ADA 36" LONG GRAB BAR, BOBRICK OR EQ.
9	BOBRICK	B-221	S.S.	-	-	-	-	SURFACE TOILET SEAT COVER DISPENSERS
10	BOBRICK	B-254	S.S.	-	-	-	-	SURFACE SANITARY NAPKIN DISPOSAL
11	FHC	FHCSS64	S.S.	-	-	-	-	DUAL STATION (27.5"D x 64"W x 37"H)

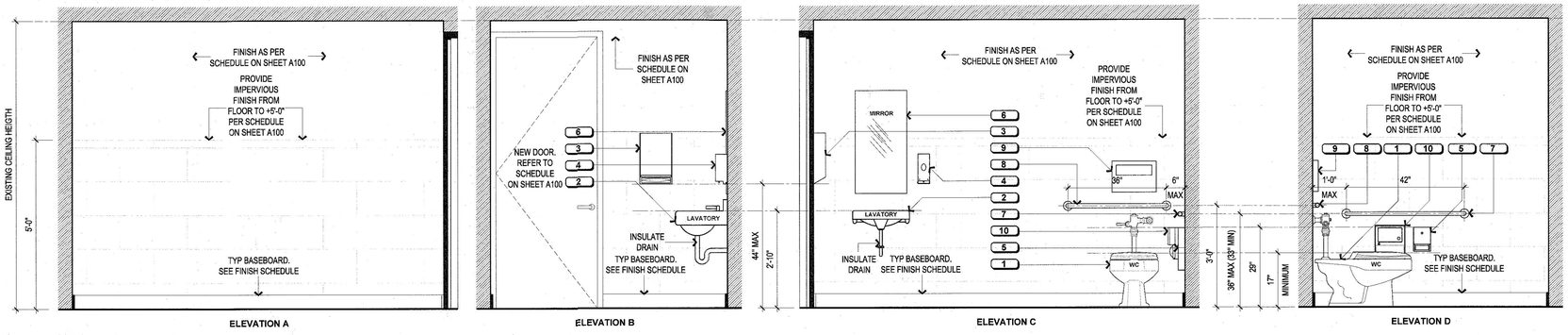
*PLUMBING FIXTURE FLOW RATES & CONSUMPTION SHALL COMPLY W/ REQUIREMENTS OF FBC TABLE 604.4 & MIAMI-DADE COUNTY ORDINANCE #08-14 MAXIMUM FLOW RATES & CONSUMPTION FOR PLUMBING FIXTURES, FITTINGS & APPLIANCES.



1 GROUND FLOOR - DIMENSIONED PLAN
SCALE: 3/16" = 1'-0"

2 ENLARGED BATHROOM #1 PLAN
SCALE: 1/2" = 1'-0"





TYP. MNT. HTS. ACCESS. FIXTURES & ACCESSORIES
SCALE: NOT TO SCALE

3 RESTROOM - INTERIOR ELEVATIONS
SCALE: 1/2" = 1'-0"

ODON DIAZ DESIGN STUDIO
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Miami Lakes, Florida 33185
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SEAL:

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REVISED BY: JAHL

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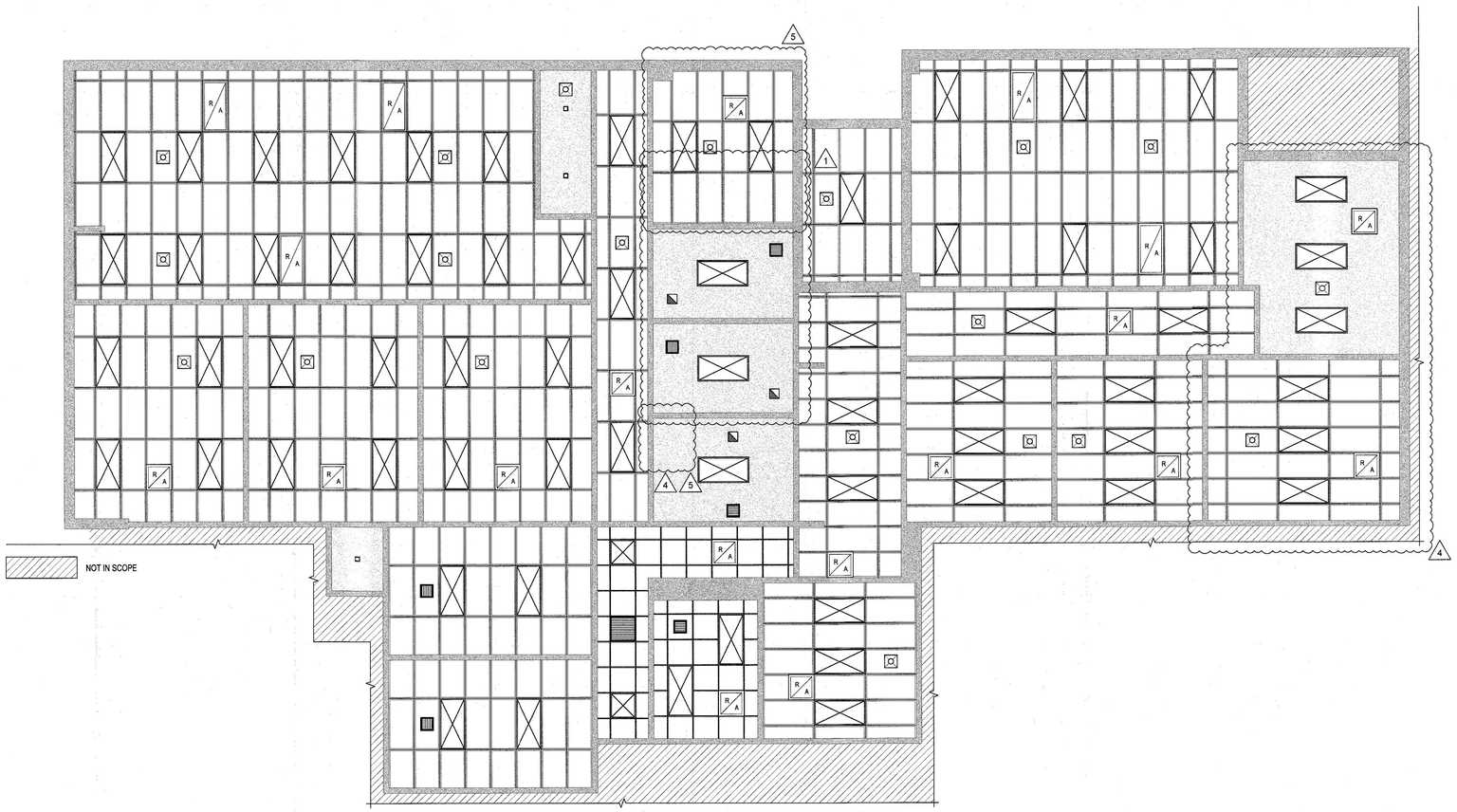
1	09.03.2025
2	10.17.2025
3	01.13.2026
4	02.17.2026
5	03.10.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: GROUND FLOOR DIMENSIONED PLAN, ENLARGED BATHROOM PLAN & ELEVATIONS

SHEET NUMBER: A110
SHEET: 1 OF: 1

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CEILING LEGEND

- 4" COMPACT LED DOWN LIGHT 5000K DAYLIGHT. (TYP.)
- 2" X 2" SUPPLY AIR DIFFUSER.
- R/A — 2" X 2" RETURN AIR DIFFUSER.
- R/A — 2" X 4" RETURN AIR DIFFUSER.
- 2' X 4', ARM TRONG, MEDIUM TEXTURE NON-DIRECTIONAL, LAY-IN ACOUSTICAL CEILING HUNG WITH STD. "T" WHITE SUSPENSION GRID SYSTEM. CLASS "A" FIRE RESISTANT RATING.
- 2' X 2', ARM TRONG, MEDIUM TEXTURE NON-DIRECTIONAL, LAY-IN ACOUSTICAL CEILING HUNG WITH STD. "T" WHITE SUSPENSION GRID SYSTEM. CLASS "A" FIRE RESISTANT RATING.
- 110 CFM RESTROOM EXHAUST FAN, "NUTONE" MODEL GTREN110 OR ED W/5" DUCT TO EXT VENT THROUGH WALL.
- LITHONIA 2VTL4 2x4-LED RECESSED TROFFER CEILING MOUNTED LIGHT FIXTURE DAYLIGHT. (TYP.)
- LITHONIA 2VTL4 2x2-LED RECESSED TROFFER CEILING MOUNTED LIGHT FIXTURE DAYLIGHT. (TYP.)
- NEW 8" x 6" SUPPLY AIR DIFFUSER
- EM/EXIT — NEW EMERGENCY LIGHT/LED LIGHT COMBO W/ BATTERY BACK UP ON SAME LIGHTING CIRCUIT AHEAD OF LIGHT SWITCH.
- NEW EMERGENCY LIGHTING BY LITHONIA, #ELM2-SD. LED BULB, 1.2W. WALL MOUNTED +7'-0"AFF.
- EM/EXIT — EXIT. LIGHT, CEILING MTD. LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP

GENERAL NOTES

1. EMERGENCY POWER SYSTEM SHALL PROVIDE POWER FROM DURATION OF NOT LESS 90MINUTES AND SHALL CONSIST OF STORAGE BATTERIES OR INJT EQUIPMENT. INSTALLATION OF EMERGENCY SYSTEM SHALL BE IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE.
2. EMERGENCY LIGHTING FACILITIES SHALL BE ARRANGED TO PROVIDE AL LEAST AN AVERAGE OF (1) FOOT-CANDLE AND A MINIMUM OF 0.1 FOOT-CANDEL MEASURED ALONG THE EGRESS ROUTE AL FLOOR LEVEL. (VERIFY LOCATION IN FIELD).
3. INSTALLATION OF LIGHTING FIXTURES TO BE ACCORDING TO MANUFACTURER'S REDOMMENDATIONS AND ACCORDING TO CODE REQUIREMENTS.
4. ALL LIGHT FIXTURES SHALL BE FURNISHED AND INSTALLED BY ELECTRICAL CONTRACTOR.
5. E.C. SHALL VERIFY ALL EXISTING FIXTURES.

CEILING FINISH CLASSIFICATION

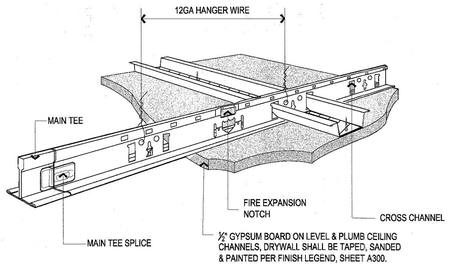
ALL CEILING FINISHES SHALL MEET OR EXCEED THE REQUIREMENTS AS SET FORTH BY THE FBC, TABLE 803.5 FOR SPRINKLERED BUILDINGS.

CEILING TYPE HEIGHT

- NEW DRYWALL CELING (EXISTING HEIGHT)
- NEW ACCOUSTIC TILE CELING (EXISTING HEIGHT)

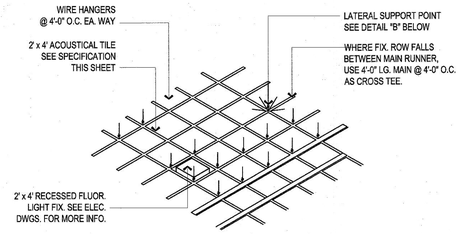
1 GROUND FLOOR - REFLECTED CEILING PLAN

SCALE: 3/16" = 1'-0"

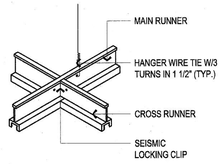


2 DRYWALL CEILING DETAIL

SCALE: NOT TO SCALE



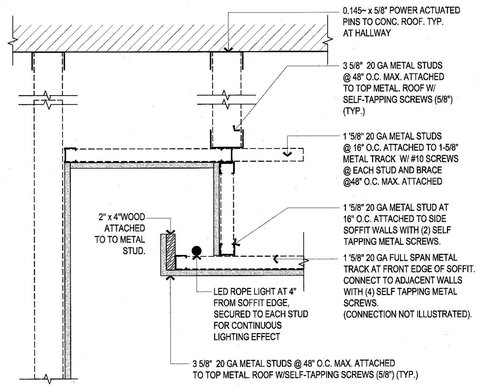
DETAIL "A"

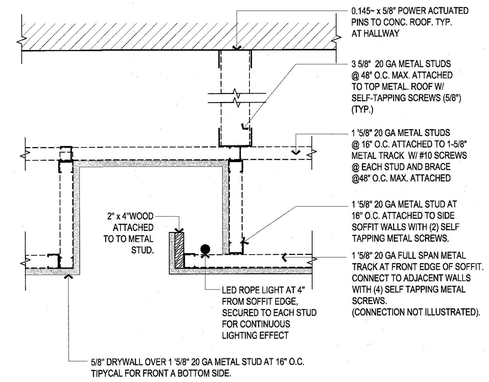


DETAIL "B"

3 ACOUSTICAL CEILING DET.

SCALE: NOT TO SCALE





4 EYEBROW DETAILS.

SCALE: 1 1/2'=1'-0"

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PROJECT NAME:
15255 NW 82nd Ave - MEDICAL OFFICE
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
1 09.03.2025
4 02.17.2026
5 03.10.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: GROUND FLOOR PLAN, REFLECTED CEILING PLAN

SHEET NUMBER: A200

SHEET: 1 OF: 1

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ROOM FINISH SCHEDULE

SPACE NO.	DESCRIPTION	FLOOR	BASE	WALLS	CEILING
101	LOBBY	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
102	BATHROOM #1	PORCELAIN TILE	1"x6" WOOD BASEBOARD	TILE & PAINT ON GYP. BOARD	5/8" DRYWALL SOFFIT
103	BATHROOM #2	PORCELAIN TILE	1"x6" WOOD BASEBOARD	TILE & PAINT ON GYP. BOARD	5/8" DRYWALL SOFFIT
104	PRE-OP #1	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
105	PRE-OP #2	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
106	NURSE'S STATION	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
107	SOILED WORK ROOM	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
108	PROCEDURE #1	PORCELAIN TILE W/ EPOXY GROUT.	INTEGRAL 6" FLASH-COVED BASE WITH RADIUS COVE STICK AND MATCHING CAP-STRIP	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
109	PROCEDURE #2	PORCELAIN TILE W/ EPOXY GROUT.	INTEGRAL 6" FLASH-COVED BASE WITH RADIUS COVE STICK AND MATCHING CAP-STRIP	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
110	PROCEDURE #3	PORCELAIN TILE W/ EPOXY GROUT.	INTEGRAL 6" FLASH-COVED BASE WITH RADIUS COVE STICK AND MATCHING CAP-STRIP	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
111	RECOVERY (4) SPACES	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
112	OFFICE #2	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	5/8" DRYWALL SOFFIT
113	CORRIDOR	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
114	DOCTOR'S OFFICE	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
115	POST-OP #1	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
116	POST-OP #2	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
117	OFFICE #3	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	5/8" DRYWALL SOFFIT
118	CLOSET	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE
119	SURGICAL & EQUIP. STO. ROOM	PORCELAIN TILE	1"x6" WOOD BASEBOARD	PAINT ON GYP. BOARD	24"x48" ACOUSTICAL TILE

DOOR SCHEDULE

MARK	DESCRIPTION	NOMINAL OPENING SIZE WIDTH	NOMINAL OPENING SIZE HEIGHT	COUNT	TYPE	FRAME MATERIAL	COLOR	REMARKS
1	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	1	A	ALUMINUM/GLASS	BY OWNER	CATEGORY 2 SAFETY GLAZING.
2	BARN DOOR	3'-6"	8'-0"	3	B	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
3	SWING DOOR	3'-0"	8'-0"	15	C	SOLID CORE WOOD	BY OWNER	LEVER TYPE HARDWARE, PRIVACY LOCK BATHROOM ONLY
3A	SWING DOOR	3'-0"	8'-0"	1	C	SOLID CORE WOOD	BY OWNER	SEE HARDWARE NOTE 3.
4	SWING DOOR	3'-0"	8'-0"	1	D	GLASS	BY OWNER	CATEGORY 2 SAFETY GLAZING
5	DOUBLE BARN DOOR	(2)3'-0"	8'-0"	1	E	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
EX	EXISTING DOOR TO REMAIN							

HARDWARE NOTES:

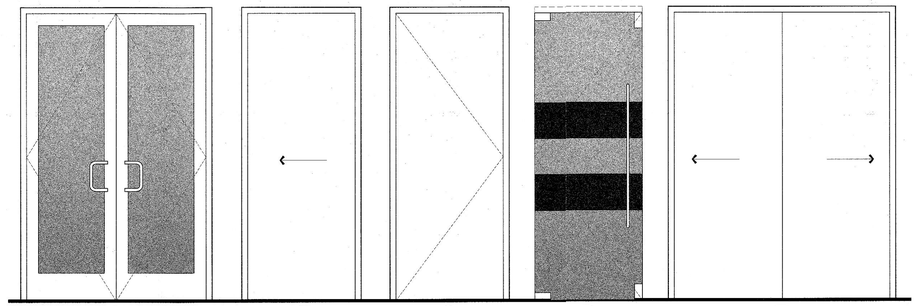
1. EGRESS DOORS SHALL NOT REQUIRE ANY USE OF KEY OR SPECIAL KNOWLEDGE IN ORDER TO OPERATE DOOR FROM EGRESS SIDE (FFPC SECTION 7.2.1.5.3).
2. ALL EGRESS DOOR TO BE SINGLE ACTION IN ORDER TO EGRESS.

NOTES: 1) ALL CLOSET & STORAGE ROOM DOORS TO BE OPERABLE FROM INSIDE.
2) ALL WOOD DOORS SHALL BE SOLID CORE WOOD DOORS.
3) SEE FLOOR PLAN FOR LOCATION OF DOORS AND QUANTITY.
4) ALL WOOD DOORS SHALL BE STAINED.
5) HARDWARE SHALL BE LEVER TYPE & COMPLY WITH ADA STANDARD

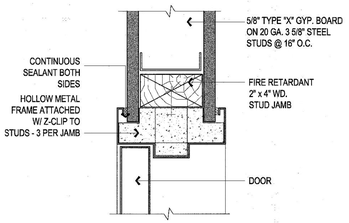
3. ETOILET ROOM DOOR [NUMBER] SHALL BE EQUIPPED WITH DOUBLE-ACTING RESCUE HARDWARE INCLUDING A DOUBLE-LIPPED STRIKE AND EMERGENCY STOP (ABH 0345 OR EQUIVALENT). HARDWARE MUST ALLOW THE DOOR TO SWING OUTWARD IN AN EMERGENCY PER FBC 489.4.8.2, PROVIDING ACCESS IF A PATIENT IS COLLAPSED AGAINST THE INTERIOR FACE OF THE DOOR.

DOOR NOTES

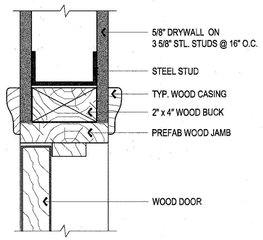
1. ALL DOORS IN THE MEANS OF EGRESS SHALL BE SINGLE ACTION RELEASE, NOT REQUIRE THE USE OF A KEY, TOOL, OR SPECIAL KNOWLEDGE TO OPEN FROM THE EGRESS SIDE. ALL INTERIOR DOORS TO HAVE SELF CLOSERS PER NFPA 101 8.5.3.4.
2. ALL DOOR HARDWARE SHALL BE LEVER ADA COMPLIANT BY SCHLAGE AL SERIES, STD. BRUSHED ALUMINUM FINISH INCLUSIVE OF HINGES AND LOCK SETS UNLESS SPECIFIED OTHERWISE.
3. DOOR HANDLES AND OTHER OPERABLE HARDWARE SHALL BE MIN. 34", MAX. 48" A.F.F. PER FBCA 404.2.7. OPERABLE PARTS SHALL BE OPERABLE WITH ONE HAND AND SHALL NOT REQUIRE TIGHT GRASPING, PINCHING, OR TWISTING OF THE WRIST. THE FORCE REQUIRED TO ACTIVATE OPERABLE PARTS SHALL BE 5 POUNDS (22.2 N) MAXIMUM PER FBCA 309.4.
4. PROVIDE SUBMITTALS FOR ALL DOOR HARDWARE FOR KEYES & ARCHITECTS APPROVALS.
5. COORDINATE ALL DOOR KEYING WITH OWNER / OWNERS REP.
6. ALL WOOD DOORS SHALL BE STAIN GRADE (UNLESS OTHERWISE NOTED).
7. GLAZED DOORS, GLASS PANELS ADJACENT TO DOORS, AND GLASS PANELS GREATER THAN 9 SQ.FT. IN AREA MUST BE OF CATEGORY II SAFETY GLAZING.
8. DOOR HARDWARE TO BE EQUIPPED FOR HANDICAP IN THE FOLLOWING MANNER:
   - HANDLES, PULLS, LATCHES, LOCKSET, & OTHER OPERATING MECHANISMS ON ENTRANCE,
   RESTROOM & TOILET ROOM DOORS, & OTHER DOORS WHICH ARE PART OF AN ACCESSIBLE ROUTE,
   SHALL HAVE A SHAPE WHICH IS EASY TO GRASP W/ 1 HAND & WHICH DOES NOT REQUIRE A TIGHT
   GRASPING, PINCHING, OR TWISTING OF THE WRIST TO OPERATE. LEVER OPERATED.
   - MECHANISMS & U-SHAPED HANDLES ARE ACCESSIBLE DESIGNS.
9. GENERAL CONTRACTOR IS TO PROVIDE HARDWARE SCHEDULE TO BE APPROVED BY ENGINEER & OWNER.



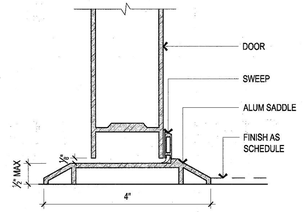
1 DOOR ELEVATION
SCALE: 1/2" = 1'-0"



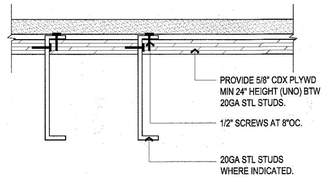
2 TYP. METAL JAMB DTL.
SCALE: NOT TO SCALE



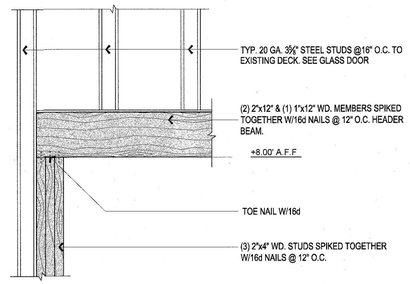
3 INTERIOR WOOD JAMB DTL.
SCALE: NOT TO SCALE



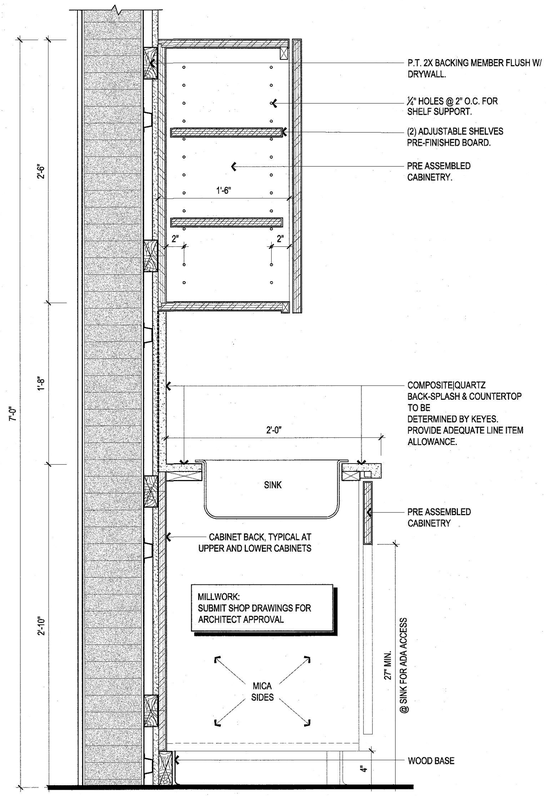
4 TYP. THRESHOLD DTL.
SCALE: NOT TO SCALE



5 TYP. BACKING DETAIL
SCALE: NOT TO SCALE



6 TYP. HEADER DETAIL
SCALE: NOT TO SCALE



7 KITCHEN CABINET DETAIL
SCALE: NTS

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SEAL:

DRAWN BY: RHR

REVISED BY: JAHL

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15255 NW 82nd Ave, Miami Lakes, FL 33014

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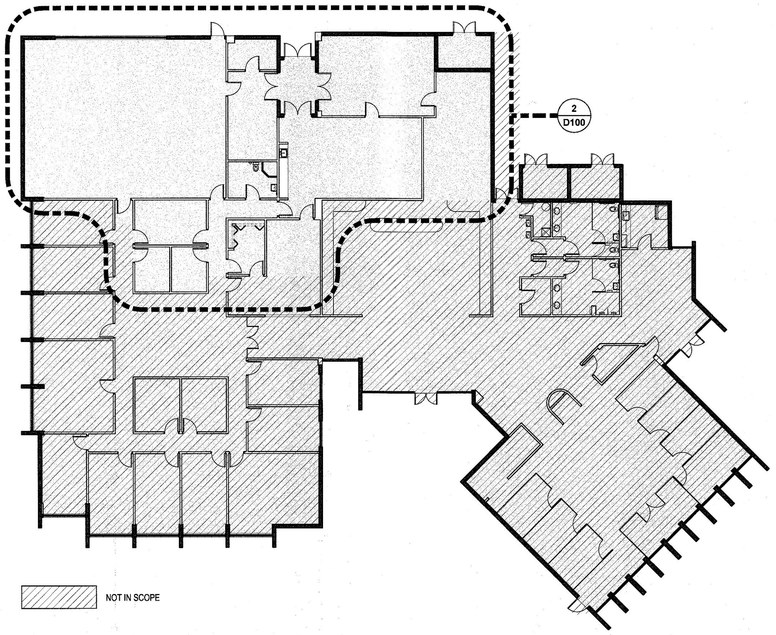
PROJECT HISTORY:
1 09.03.2025
4 02.17.2026
5 03.10.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: DOOR SCHEDULE, DOOR ELEVATIONS, FINISH SCHEDULE & DETAILS

SHEET NUMBER: A300
SHEET: 1 OF: 1

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3226012243 - 5/14/2026 9:17:54 AM
005-A300.pdf
Examiner Date Time Stamp Trade Stamp Name
DIAZ, ODON 5/14/2026 7:50:32 AM FIRE Approved



1 OVERALL EXISTING GROUND FLOOR PLAN

SCALE: 1/16" = 1'-0"

KEY LEGEND

1. EXISTING EXTERIOR MANSORY WALL NOT TO BE DISTURBED.
2. EXISTING DOORS TO REMAIN. DO NOT DISTURB.
3. EXISTING WINDOWS TO REMAIN. DO NOT DISTURB.
4. EXISTING STRUCTURAL COLUMN NOT TO BE DISTURBED.
5. EXISTING INTERIOR MANSORY WALL NOT TO BE DISTURBED.
6. REMOVE ALL EXISTING NON-BEARING INTERIOR PARTITIONS & DOORS THROUGHOUT SPACE. ANY & ALL M.E.P. SHALL BE REMOVED BACK TO SOURCE, ALL PLUMBING SHALL BE HARD-CAPPED & ABANDONED.
7. EXISTING STAINLESS STEEL SINK. NOT TO BE DISTURBED.
8. EXISTING INTERIOR PARTITIONS THAT ARE NOT TO BE DISTURBED.
9. EXISTING COUNTERTOP ON BASE CABINETS NOT TO BE DISTURBED.
10. REMOVE ALL FLOORS, WALL & CEILING COVERINGS & FINISHES THROUGHOUT THE ENTIRE SPACE.
11. ALL EXISTING HVAC DUCT WORK, ACOUSTICAL CEILINGS, LIGHTS, LOW-VOLTAGE, NIGHT LIGHTS, ETC. SHALL BE COMPLETELY REMOVED.
12. EXISTING INTERIOR MANSORY WALL TO BE REMOVED.

DEMOLITION NOTES

CONDITIONS AND REQUIREMENTS:
THE DEMOLITION CONTRACTOR SHALL OBTAIN ALL PERMITS REQUIRED FOR HAULING AND LEGALLY DISPOSING MATERIALS REMOVED IN DEMOLITION WORK.

PROCEDURES:
THE PROCEDURES PROPOSED FOR THE ACCOMPLISHMENT OF SALVAGE AND DEMOLITION WORK SHALL PROVIDE FOR: SAFE CONDUCT OF WORK, CAREFUL REMOVAL AND DISPOSITION OF MATERIALS, PROTECTION OF PROPERTY, COORDINATION OF WORK WITH OTHERS IN PROGRESS, AND TIMELY DISCONNECTION OF UTILITY SERVICES. THE PROCEDURES SHALL INCLUDE A DETAILED DESCRIPTION OF METHODS AND EQUIPMENTS TO BE USED FOR EACH OPERATION.

PARTITION:
REMOVE ALL EXISTING INTERIOR PARTITIONS AND RELATED UTILITIES AS INDICATED IN THE DEMOLITION PLAN.

DUST CONTROL:
THE AMOUNT OF DUST RESULTING FROM DEMOLITION SHALL BE CONTROLLED TO PREVENT THE SPREAD OF DUST, TO AVOID THE CREATION OF AN INCONVENIENCE IN THE SURROUNDING AREA. USE OF WATER WILL NOT BE PERMITTED WHEN IT WILL RESULT IN, OR CREATE HAZARDOUS OR OBJECTIONABLE CONDITIONS SUCH AS FLOODING.

PROTECTION OF EXISTING BUILDING:
A. EXISTING BUILDING SHALL BE PROTECTED. ANY PART DAMAGED BY THE CONTRACTOR SHALL BE REPAIRED TO MATCH EXISTING CONDITIONS AT CONTRACTOR'S EXPENSE.
B. COVER ITEMS AS NECESSARY TO PROTECT THEM FROM DUST.
C. AT THE END OF EACH WORK DAY, CLOSE DOWN AREAS FROM PUBLIC.
D. DEMOLITION CONTRACTOR SHALL PROVIDE AND MAINTAIN NECESSARY BARRICADES TO PREVENT UNAUTHORIZED PERSONS FROM ACCIDENTALLY OR INTENTIONALLY ENTERING THE WORK AREA.

ENVIRONMENTAL PROTECTION:
ALL WORK AND CONTRACTED OPERATIONS SHALL COMPLY WITH ALL THE REQUIREMENTS OF STATE AND COUNTY ENVIRONMENTAL PROTECTION REGULATIONS.

EXPLOSIVE AND BURNING:
A. USE OF EXPLOSIVES WILL NOT BE PERMITTED.
B. USE OF FIRE FOR DEMOLITION OR FOR DISPOSAL OF MATERIAL OR ANY OTHER SITUATION WILL NOT BE PERMITTED.

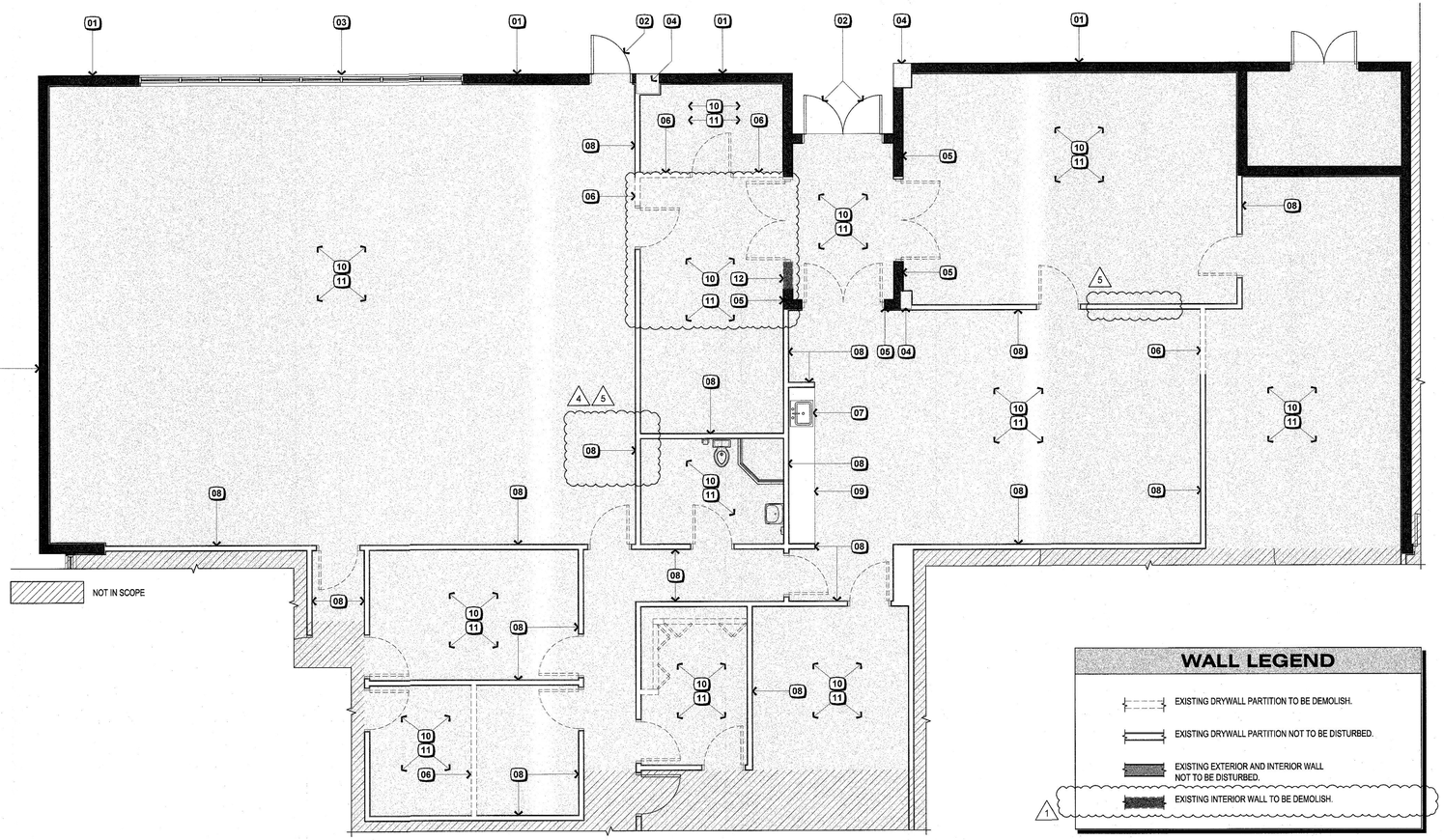
EXISTING UTILITIES:
A. CONTACT ALL UTILITY COMPANIES INCLUDING ELECTRIC, WATER, GAS AND TELEPHONE, PRIOR TO BEGINNING WORK AND REQUEST THAT ALL SERVICE BE SHUT OFF AND CAPPED AT PRIMARY SERVICE LINES.
B. REMOVE ALL EXISTING UTILITIES ACCORDING TO SEQUENCE OF OPERATIONS APPROVED AT THE START OF THE PROJECT.
C. REMOVE ALL EXISTING UTILITIES UNCOVERED BY DEMOLITION AND TERMINATE THEM IN A MANNER AND AT A TIME SATISFACTORY TO THE UTILITY COMPANIES INVOLVED. WHERE A UTILITY COMPANY DESIRES TO PROVIDE THE REMOVAL OF THEIR MATERIALS THEY SHALL BE PERMITTED TO DO SO.

D. REMOVE AND DELIVER ,METERS AND RELATED EQUIPMENT TO THE APPROPRIATE UTILITY COMPANY WITHOUT ADDITIONAL COST TO THE OWNER. WHEN UTILITY LINES ARE ENCOUNTERED THAT ARE NOT ON THE DRAWINGS OR VISIBLE, THEY SHALL BE DISPOSED IN ACCORDANCE WITH INSTRUCTIONS OF THE ARCHITECT/ENGINEER.
E. INSTALL AND LEAVE A WELL MARKED STAKE AT CAPPED END, AT EVERY UTILITY CAPPED ON THE SITE.

DISPOSING OF MATERIAL:
A. TITLE TO MATERIALS:
LABEL ALL MATERIALS AND EQUIPMENTS TO BE DEMOLISHED AND REMOVED, EXCLUDING ITEMS INDICATED TO BE TURNED OVER TO THE OWNER SPECIFIED TO THE CONTRACTOR AT START OF PROJECT. THE OWNER WILL NOT BE RESPONSIBLE FOR THE CONDITIONS, LOSS, OR DAMAGE TO SUCH PROPERTY AFTER NOTICE TO PROCEED.
B. DEBRIS CONTROL:
REMOVE AND TRANSPORT DEBRIS IN LEAK-FREE CONTAINERS, IN A MANNER TO PREVENT SPILLAGE ON ANY PART OF EXISTING BUILDING, PARKING LOT AREAS, OR CITY STREETS. C. REGULATIONS: COMPLY WITH COUNTY, MUNICIPALITY, AND CITY REGULATIONS REGARDING HAULING AND DISPOSAL OF DEBRIS. ALL SUCH MATERIAL SHALL BE DISPOSED AT A LEGAL GARBAGE DISPOSAL LOCATION.

PREPARATION:
A. PROVIDE ADEQUATE TEMPORARY SUPPORT AS NECESSARY TO ASSURE STRUCTURAL VALUE & INTEGRITY OF AFFECTED PORTION OF PROJECT.
B. PROVIDE DEVICES AND METHODS TO PROTECT OTHER PORTIONS OF PROJECT FROM DAMAGE.
C. PROVIDE PROTECTION FROM ELEMENTS FOR THE PORTION OF THE PROJECT WHICH MAY BE EXPOSED BY CUTTING AND PATCHING WORK.

PERFORMANCE:
A. EXECUTE CUTTING AND DEMOLITION BY METHODS WHICH WILL PREVENT DAMAGE TO OTHER WORK, AND WHICH WILL PROVIDE PROPER SURFACES TO RECEIVE INSTALLATION OF REPAIRS.
B. EXECUTE FITTING AND ADJUSTMENT OF PRODUCTS TO PROVIDE A FINISHED INSTALLATION TO COMPLY WITH SPECIFIED PRODUCTS, FUNCTION, TOLERANCE AND FINISHES.
C. RESTORE WORK WHICH HAS BEEN CUT OR REMOVED. INSTALL NEW PRODUCTS TO PROVIDE COMPLETED WORK IN ACCORD WITH REQUIREMENTS THROUGH DOCUMENTS.
D. FIT WORK AIR-TIGHT TO PIPES, SLEEVES, DUCTS, CONDUIT AND OTHER PENETRATIONS THROUGH SURFACES.
E. REFINISH ENTIRE SURFACES AS NECESSARY TO PROVIDE AN EVEN FINISH TO MATCH ADJACENT FINISHES.
1. FOR CONTINUOUS SURFACES, REFINISH TO NEAREST INTERSECTION.
2. FOR AN ASSEMBLY, REFINISH ENTIRE UNIT.



WALL LEGEND

- EXISTING DRYWALL PARTITION TO BE DEMOLISH.
- EXISTING DRYWALL PARTITION NOT TO BE DISTURBED.
- EXISTING EXTERIOR AND INTERIOR WALL NOT TO BE DISTURBED.
- EXISTING INTERIOR WALL TO BE DEMOLISH.

2 ENLARGED EXISTING GROUND FLOOR - DEMOLITION PLAN

SCALE: 3/16" = 1'-0"

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SEAL:

DRAWN BY: RHR

REVISED BY: JAHL

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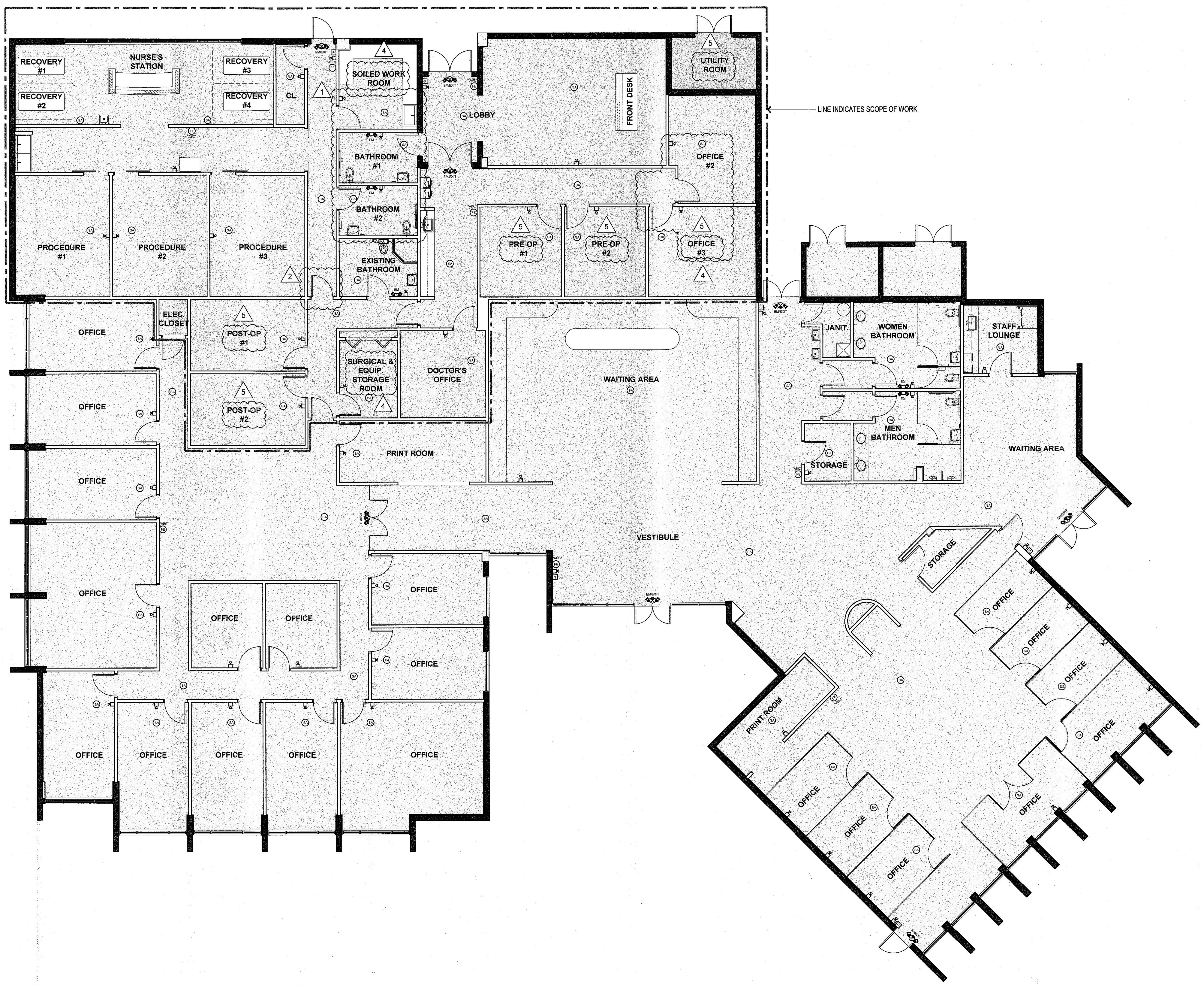
PROJECT HISTORY:
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PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: EXISTING GROUND FLOOR - DEMOLITION PLAN, KEY LEYEND & NOTES

SHEET NUMBER: D100
SHEET: 1 OF: 1

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3226012243 - 5/14/2026 9:17:54 AM
006-D100.pdf
Examiner Date Time Stamp Trade Stamp Name
CANO SALOM, CARLOS 4/17/2026 12:21:13 PM DASB Approved
DIAZ, ODON 5/14/2026 7:46:48 AM FIRE Reference Only.



SYMBOL LEGEND

Symbol	Description
FE "ABC"	"ABC" TYPE FIRE EXTINGUISHER MOUNTED +48" A.F.F.
EM/EXIT	EXIT. LIGHT, CEILING MTD. LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP.
EM	EM. LIGHT WITH (2) 3W LED, SURFACE MTD. (MIN. 7'-0" A.F.F.) LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP.
P	MANUAL FIRE ALARM PULL STATION.*
	COMBINATION HORN/STROBE NOTIFIER.*
SA	HARD - WIRED COMBINATION CARBON MONOXIDE & SMOKE ALARM. VERIFY IN FIELD PROPER OPERATION.

* FIRE ALARM ELEMENTS ARE SHOWN FOR REFERENCE PURPOSES ONLY. THEY SHALL BE FURNISHED BY FIRE ALARM LICENSED ENGINEER UNDER A SEPARATE PERMIT.

NOTE

FIRE ALARM SYSTEM SHOWN FOR SCHEMATIC DESIGN PURPOSES ONLY. DEVICES SHALL BE INSTALLED BY AN APPROVED FIRE SPRINKLERS CONTRACTOR WHO SHALL SUBMIT SHOP DRAWINGS SIGNED AND SEALED BY A REGISTERED FLORIDA ENGINEER FOR LOCAL JURISDICTION APPROVAL WHEN REQUIRED.

FIRE
F/A REQ.: FIRE ALARM WORKING PLANS SHALL BE SUBMITTED FOR APPROVAL TO MIAMI-DADE FIRE DEPARTMENT BEFORE ANY FIRE ALARM SYSTEM IS INSTALLED OR REMODELED. FIRE ALARM DEVICES IN ADDITION TO THOSE SHOWN ON THIS PLAN MAY BE REQUIRED
DIAZ, ODON, 5/14/2026 7:47:00 AM

1 SCHEMATIC FIRE ALARM PLAN

SCALE: 1/8" = 1'-0"

N

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SEAL:

DRAWN BY: RHR

REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd Ave - MEDICAL OFFICE
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:

1	09.03.2025
2	10.17.2025
4	02.17.2026
5	03.10.2026

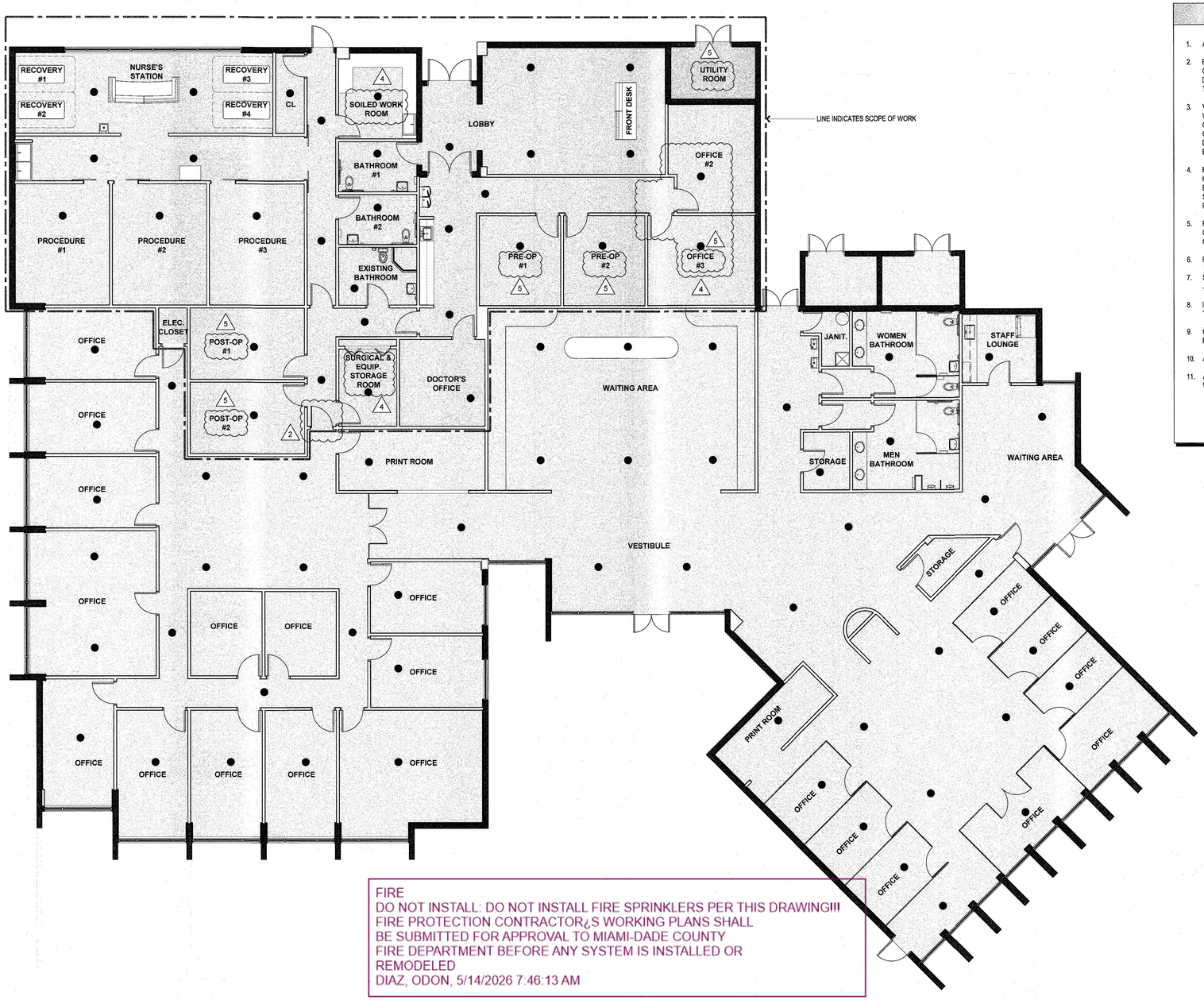
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: SCHEMATIC FIRE ALARM PLAN

SHEET NUMBER: FA100

SHEET: 1 OF: 1

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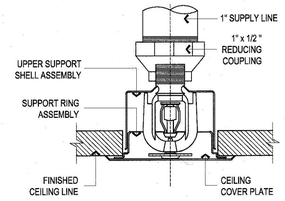
FIRE
DO NOT INSTALL: DO NOT INSTALL FIRE SPRINKLERS PER THIS DRAWING!!!
FIRE PROTECTION CONTRACTOR¿S WORKING PLANS SHALL
BE SUBMITTED FOR APPROVAL TO MIAMI-DADE COUNTY
FIRE DEPARTMENT BEFORE ANY SYSTEM IS INSTALLED OR
REMODELED
DIAZ, ODON, 5/14/2026 7:46:13 AM

1 SCHEMATIC FIRE SPRINKLER PLAN

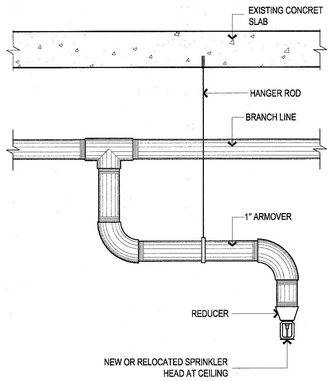
SCALE: 1/8" = 1'-0"

SPRINKLERS SPECIFICATIONS

1. ADHERE TO THE BASE BUILDING SPECIFICATIONS AND DRAWINGS.
2. EXAMINE THE ARCHITECTURAL DRAWINGS AND THE DRAWINGS OF ALL OTHER TRADES AND FIELD VERIFY THE LOCATION OF ALL LIGHTING FIXTURES, DIFFUSERS, EXISTING SPRINKLER HEADS AND OTHER EQUIPMENT THAT AFFECTS THIS WORK.
3. VISIT AND CAREFULLY EXAMINE THE EXISTING SPACE SO AS TO BECOME FAMILIAR WITH EXISTING CONDITIONS AND DIFFICULTIES. SUBMISSION OF A PROPOSAL WILL BE CONSTRUED AS EVIDENCE THAT SUCH AN EXAMINATION HAS BEEN MADE AND LATER CLAIMS FOR LABOR, EQUIPMENT, OR MATERIALS REQUIRED BECAUSE OF DIFFICULTIES ENCOUNTERED, WHICH COULD HAVE BEEN FORESEEN HAD SUCH AN EXAMINATION BEEN MADE, WILL NOT BE RECOGNIZED.
4. BASE ALL LABOR PRICING ON REGULAR TIME (NON-PREMIUM TIME). HOWEVER, ALL CONNECTION SCHEDULING MUST BE APPROVED BY THE BUILDING'S MANAGEMENT PRIOR TO INTERRUPTION OF ANY BUILDING'S SERVICES. SUBMIT ADDITIONAL COST FOR EVALUATION TO MAKE EACH NEW CONNECTION ON PREMIUM TIME.
5. PRIOR TO INSTALLING OR SUBMITTING FOR APPROVAL ANY PORTION OF THIS WORK, COORDINATE THIS WORK WITH ALL OTHER TRADES AND AFFIX INDICATION OF THIS COORDINATION TO EACH SHOP DRAWING SUBMITTED FOR APPROVAL.
6. REMOVE EXISTING SPRINKLER HEADS AND PIPING AS REQUIRED.
7. SPRINKLER HEADS INSTALLED IN HUNG CEILING WILL DE POSITIONED AS FOLLOWS:
   - LOCATED WITHIN A TOLERANCE OF ±½" OF THE CENTERLINE OF THE TILES.
8. INSTALL SPRINKLERS HEADS TIGHT TO BOTTOM OF HUNG CEILING WITH CARE THAT THE CEILING IS NOT DAMAGED.
9. CUT AND CONNECT NEW SPRINKLER HEADS TO EXISTING PIPING. ADJUST SPRINKLER PIPING SIZES WHERE REQUIRED.
10. ALL NEW SPRINKLER BRANCH LINES TO BE 1"Ø UNLESS OTHERWISE NOTED.
11. ALL NEW SPRINKLER BRANCH LINES EXCEEDING 1 FOOT IN LENGTH TO BE PROVIDED WITH HANGERS.
12. ALL NEW PIPING TO MATCH EXISTING.
13. ALL FITTINGS TO BE CAST MALLEABLE IRON THREADED OR VICTAULIC GROVED.
14. ONLY SHOULDER NIPPLES WILL BE USED. CLOSE NIPPLES WILL NOT BE ACCEPTABLE. ADJUST SPRINKLER HEAD TO THE NEW CEILING HEIGHT.
15. WHEN CONCEALED TYPE SPRINKLER HEADS ARE USED, THE COVER PLATES WILL BE FLUSH WITH THE CEILING PLANE TO LIMIT SHADOW EFFECT. TOLERANCE GREATER THAN ±⅛ INCH ARE UNACCEPTABLE.
16. USE LIGHT HAZARD SIZING AND SPACING.
17. ARRANGE THE PERMANENT INSTALLATION OF PIPING SO THAT ALL OR ANY PART OF THE WORK CAN BE COMPLETELY DRAINED. PIPING TO BI PITCHED SO AS TO DRAIN THE MAIN DRAIN OR AUXILIARY DRAIN.
18. WHEN THE INSTALLATION OF A FLOOR HAS BEEN COMPLETED, TEST IT INDEPENDENTLY OF THE REST OF THE BUILDING.
19. THE SPRINKLER SYSTEM WILL BE HYDROSTATICALLY TESTED UNDER A MINIMUM PRESSURE OF 200 PSI FOR TWO HOURS.
20. DURING THE TEST PERIOD, THE SPRINKLER SYSTEM WILL NOT BE CONNECTED TO THE DOMESTIC WATER SYSTEM OF THE BUILDING.
21. REPLACE WORK FOUND DEFECTIVE OR REPAIR IF SO DIRECTED, AFTER REPLACEMENT OR REPAIR, TEST WORK AGAIN AS SPECIFIED. REPEAT UNTIL SATISFACTORY.
22. AFTER TEST IS COMPLETED, FLUSH ALL PIPING AT THE FLOW RATE DESIGNATED IN N.F.P.A. No, 13. FLUSH PIPING USING SUFFICIENT WATER TO PRODUCE A MINIMUM WATER VELOCITY OF 2.5 FEET PER SECOND THROUGH PIPING BEING FLUSHED. CONTINUE UNTIL DISCHARGE WATER SHOWS NO DISCOLORATION. DRAIN AT LOW POINTS. AFTER FLUSHING AND CLEANING, PREPARE SYSTEM FOR SERVICE BY IMMEDIATELY FILLING PIPING.
23. USE THE FOLLOWING GENERAL DESIGN DENSITY CRITERIA:
   - LIGHT HAZARD: 0.10 GPM AT 1500 SQ. FT.
24. CONTRACTOR SHALL PROVIDE "AS BUILT" SHOP DRAWINGS OF PROJECT FOR ENGINEER APPROVAL PRIOR TO COMMENCEMENT OF ANY WORK.



CONCEALED TYPE SPRINKLER HEAD MOUNTING DETAIL



TYPICAL ARMOVER DETAIL

FIRE PROTECTON LEGEND

- NEW SPRINKLER HEAD LOCATION. (SCHEMATIC)

SPRINKLERS NOTES

1. SPRINKLERS WILL NEED TO BE RE-SET INTO NEW ACOUSTICAL CLG. ANY MODIFICATION TO EXISTING SPRINKLERS SHALL REQUIRE SEPARATE PERMIT. FIRE PROTECTION CONTRACTO'S WORKING PLAN SHALL BE SUBMITTED TO CORAL GABLES FIRE DEPARTMENT WHEN REQ'D BY NFPA 13.1-9.1 BEFORE ANY FIRE PROTECTION SYSTEM IS INSTALLED OR REMODELED.
2. THIS SPRINKLER DISTRIBUTION IN THE PLAN IS BEING PROVIDED FOR DIAGRAMATIC PURPOSES ONLY TO INDICATE PROPOSED LOCATIONS OF NEW SPRINKLER HEADS. FIRE PROTECTION CONTRACTOR SHALL BE RESPONSIBLE FOR PROVIDING FIRE SPRINKLER PLANS TO THE AUTHORITY HAVING JURISDICTION AS REQUIRED BY CODE.

GENERAL NOTES

1. FIRE SPRINKLER SYSTEM SYSTEM SHOWN FOR SCHEMATIC DESIGN PURPOSES ONLY. SPRINKLERS SYSTEM SHALL BE INSTALLED BY AN APPROVED FIRE SPRINKLERS CONTRACTOR WHO SHALL SUBMIT SHOP DRAWINGS & HYDRAULIC CALCULATIONS, SIGNED AND SEALED BY A REGISTERED FLORIDA ENGINEER FOR LOCAL JURISDICTION APPROVAL WHEN REQUIRED.
2. FIRE SPRINKLERS CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING THE LATEST WATER FLOW DATA.
3. SPRINKLERS SYSTEM SHALL BE IN FULL COMPLIANCE WITH APPLICABLE CODES INCLUDING BUT NOT LIMITED TO:
   A) NFPA 13 & 24.
   B) FLORIDA BUILDING CODE.
4. UNDERGROUND PIPING SHALL BE CLASS 52 DUCTILE IRON BELOW GRADE & IN AREAS EXPOSED TO WEATHER, PIPING SHALL BE SCHED 40 GALVANIZED.
5. ABV GRADE PIPING 2 ½" & LARGER SHALL BE SCJ. 10.
6. ABV GRADE PIPING 2" & LARGER SHALL BE ALLIED "XL" OR "BLT" W/ SCREWED FITTINGS.
7. ALL PIPING TO BE SHALL BE HYDRAULICALLY SIZED PER NFPA 13.
8. ALL PIPING TO BE FLUSHED INS ACCORDANCE W/ NFPA 13.
9. ALL PIPING SHALL BE HYDROSTATICALLY TESTED AT AT 200 PSI FOR MINIMUM (2) FOURS.
10. MAXIMUM HEAD SPACING TO BE 130'.
11. SPRINKLER DEFLECTOR TO BE LOCATED MAXIMUM 12' FROM ROOF DECK.
12. ALL CONTROL VALVES TO BE IN ACCORDANCE WITH NFPA 13.
13. HANGER TYPE & SPACING SHALL BE IN ACCORDANCE WITH NFPA 13.
14. THERE IS TO BE NO STOCK, INVENTORY OR OBSTRUCTIONS WURH - IN OG SPRINKLER HEADS.

2 SPRINKLER DETAILS (TYP.)

SCALE: N.T.S.

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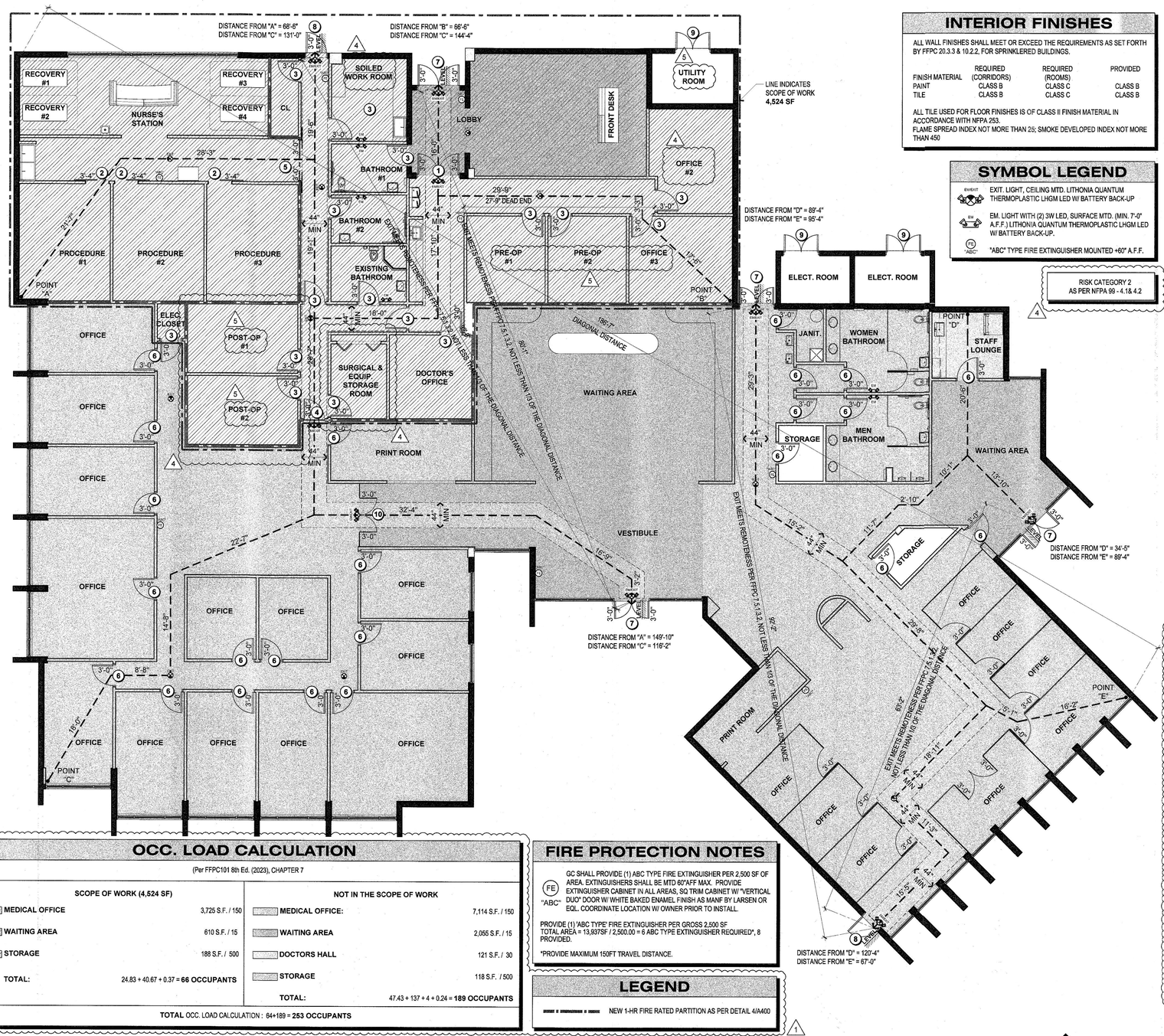
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: SCHEMATIC FIRE SPRINKLER PLAN & DETAILS

SHEET NUMBER: 1 FP100

SHEET: 1 OF: 1

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INTERIOR FINISHES

ALL WALL FINISHES SHALL MEET OR EXCEED THE REQUIREMENTS AS SET FORTH BY FFPC 20.3.3 & 10.2.2, FOR SPRINKLERED BUILDINGS.

	REQUIRED (CORRIDORS)	REQUIRED (ROOMS)	PROVIDED
FINISH MATERIAL			
PAINT	CLASS B	CLASS C	CLASS B
TILE	CLASS B	CLASS C	CLASS B

ALL TILE USED FOR FLOOR FINISHES IS OF CLASS II FINISH MATERIAL IN ACCORDANCE WITH NFPA 253.
FLAME SPREAD INDEX NOT MORE THAN 25; SMOKE DEVELOPED INDEX NOT MORE THAN 450

SYMBOL LEGEND

EXIT. LIGHT, CEILING MTD. LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP

EM. LIGHT WITH (2) 3W LED, SURFACE MTD. (MIN. 7'-0" A.F.F.) LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP.

"ABC" TYPE FIRE EXTINGUISHER MOUNTED +60" A.F.F.

RISK CATEGORY 2
AS PER NFPA 99 - 4.1& 4.2

LIFE SAFETY NOTES

TYPE II-B SPRINKLERED
BUSINESS - GROUP B

EGRESS WIDTH PER FBC 1005.3.2:
253 OCCUPANTS x 0.2" = 51"

OTHER EGRESS COMPONENTS PROVIDED:
CAPACITY OF MEANS OF EGRESS AS PER FFPC 7.3.3.1
THE REQUIRED MEANS OF EGRESS MUST ACCOMMODATE 0.2 OF THE OCCUPANT LOAD:
253 x 0.2 = 51" REQUIRED; 2 EXITS PROVIDED OF 72".
SEE PLAN THIS SHEET EXIT DOOR - SMALLEST WIDTH 36".

FIRE ALARM SYSTEM: AUTOMATIC, SPEAKERS - STROBE

NUMBER OF MEANS OF EGRESS & TRAVEL DISTANCE:
AS PER FFPC 20.2.5.2.1, NEW AMBULATORY HEALTH CARE OCCUPANCIES THAT ARE SPRINKLERED, SHALL BE ALLOWED COMMON PATH OF TRAVEL DISTANCE NOT TO EXCEED 100'-0" MAX.

AS PER PER FFPC 20.2.6.2.1, NEW AMBULATORY HEALTH CARE OCCUPANCIES OF ORDINARY HAZARD THAT ARE SPRINKLERED, SHALL HAVE A TRAVEL DISTANCE NOT TO EXCEED 200'-0"

DOOR HARDWARE: ALL DOORS IN THE MEANS OF EGRESS SHALL BE SINGLE ACTION RELEASE, NOT REQUIRE THE USE OF A KEY, TOOL OF SPECIAL KNOWLEDGE TO OPEN FROM THE EGRESS SIDE. REFER TO 'BOXED' NOTES BELOW.

ELECTRICAL: EMERGENCY/EXIT LIGHT LOCATIONS AS SHOWN ON THIS SHEET REFER TO ELECTRICAL DWGS FOR MORE INFO.

FIRE EXTINGUISHERS: CONTRACTOR SHALL PROVIDE ONE ABC TYPE FIRE EXTINGUISHER FOR EVERY 2,500 S.F. OF BUILDING AREA & NO MORE THAN 250FT TRAVEL DISTANCE. REFER TO FIRE PROTECTION & ACCESSIBILITY NOTES.

PHOTOMETRICS: INSTALL NEW EXIT WALL-MOUNTED ILLUMINATION AS REQUIRED 1FC IN THE PATH OF EGRESS LEADING TO THE PUBLIC WAY PER FBC 1008.1.1 (10FC REQUIRED AT THE INT PATH OF EGRESS).

INTERIOR WALL & CLG FINISH REQUIREMENTS: SECTION 8, TABLE 803.11
USE GROUP B & FFPC 20.3.3.2.1 & 10.2.2, SPRINKLERED BUILDING:
EXIT ENCLOSURES & OTHER EXIT WAYS - CLASS B
CORRIDORS - CLASS B
ROOMS & ENCLOSED SPACES - CLASS C
INT FLOOR FINISH SECTION 804 - CLASS II

TRAVEL DISTANCES ALLOWED & PROVIDED PER TABLE 1016.1 & FFPC 16.2.5
OCCUPANCY GROUP: GROUP B, SPRINKLERED AS PER FBC SEC 304 & FFPC 20.2.5, 20.2.6

	PROVIDED	MAX ALLOWED
OVERALL TRAVEL DISTANCE	149.83 LF (AS PER PLAN)	200 LF
COMMON PATH OF TRAVEL	63.83 LF (AS PER PLAN)	100 LF
DEAD END TRAVEL	20 LF	50 LF

GENERAL NOTES

EGRESS PATH SHALL BE CLEAR & CONTINUOUS (NO STORAGE OR DISPLAY ALLOWED IN EGRESS PATH) & SHALL COMPLY WITH FBC 1014.4 & 1014.4.2.

MAXIMUM OF ½" DIFFERENCE IN LEVEL BETWEEN OPPOSITE SIDES OF ALL EXIT DOORS IN ACCORDANCE WITH NFPA 101 7.1.6.2. DIFFERENCE IN LEVEL SHALL BE BEVELED WITH A SLOPE NO GREATER THAN 1:2

PRIMER SPECS (NON-DAMAGED SURFACES):
SHERWIN WILLIAMS, PREP RITE, HIGH BUILD, INTERIOR LATEX PRIMER/SURFACER FOR SURFACES, WHITE #6401-22685 (B28 W 601)

PRE-PRIMER SPECS (FOR DAMAGED WALL SURFACES):
KILZ 2, LATEX, INTERIOR/ EXTERIOR WATER-BASED, SEAL-PRIMER & STAINBLOCKER, MULTI-PURPOSE STAIN BLOCKING FORMULA, QUICK-DRY, RE=COAT IN 1HR, WHITE PIGMENTED.

EGRESS DOORS MUST BE READILY OPENABLE FROM EGRESS SIDE W/O USE OF KEY OR SPECIAL KNOWLEDGE OR EFFORT AS PER FBC 1008.1.8.

DOORS MUST BE OPENABLE W/ NOT MORE THAN ONE RELEASING OPERATION, FBC 1008.1.9.

THE DOOR RELEASING MECHANISM FOR ANY LATCH SHALL BE LOCATED AT LEAST 34" & NOT MORE THAN 48"AFF FAC 404.2.7.

FIRE AND/OR SMOKE SEPARATION WALLS AND PARTITIONS MUST BE IDENTIFIED WITH STENCILED SIGN "FIRE AND SMOKE BARRIER-PROTECT ALL OPENINGS" AS PER FBC 713.6

ALL FLOOR SURFACES SHALL BE MAINTAINED FOR AT LEAST THE WIDTH OF EACH DOOR PER NFPA101-7.2.1.3.2

ALL INTERIOR FINISHES SHALL HAVE A MINIMUM FLAME SPREAD CLASSIFICATION OF CLASS C PER FFPC/NFPA TABLE ANNEX A.12.5.3. INTERIOR FLOOR FINISH SHALL BE CLASS II

ALL GLASS DOORS AND GLASS PANELS/SECTIONS AT DOORS, ADJACENT TO DOORS,ABOVE DOORS & WITHIN 48" OF DOORS SHALL BE OF CATEGORY II SAFETY GLAZING AS PER FBC 2411.6.4.

ANY/ALL PENETRATIONS AT FIRE RATED DEMISING WALLS SHALL REQUIRE FIRE STOP SYSTEM/SEALANTS AS PER THE FIRE PENTRATIONS INDICATED ON THIS SHEET.

IN ACCORDANCE WITH FFPC 101:16.4.5 AND 16.6.4 ALCOHOL-BASED HAND-RUB DISPENSERS SHALL COMPLY WITH SECTION FFPC 8.7.3.1.

MEDICAL GASSES SHALL COMPLY WITH NFPA 99.

INTERIOR FINISH MATERIAL CLASS SHALL COMPLY WITH SECTION 10.2.IN ACCORDANCE WITH FFPC 101:20.3.3

DOOR SCHEDULE

MARK	DESCRIPTION	NOMINAL OPENING SIZE WIDTH	NOMINAL OPENING SIZE HEIGHT	COUNT	TYPE	FRAME MATERIAL	COLOR	REMARKS
01	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	1	A	ALUMINUM/GLASS	BY OWNER	CATEGORY 2 SAFETY GLAZING.
02	BARN DOOR	3'-4"	8'-0"	3	B	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
03	SWING DOOR	3'-0"	8'-0"	15	C	SOLID CORE WOOD	BY OWNER	LEVER TYPE HARDWARE, PRIVACY LOCK BATHROOM ONLY
04	SWING DOOR	3'-0"	8'-0"	1	D	GLASS	BY OWNER	½" SOLID-BONDED WD CORE, W/ + LATCHES. SHALL BE SELF-CLOSING & KEPT CLOSED EXCEPT WHEN IN USE.
05	DOUBLE BARN DOOR	(2)3'-0"	8'-0"	1	E	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
06	SWING DOOR	3'-0"	8'-0"	23	-	SOLID CORE WOOD	BY OWNER	EXISTING
07	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	4	-	ALUMINUM/GLASS	BY OWNER	EXISTING. EQUIP. WITH PANIC HARDWARE.
08	SWING DOOR	3'-0"	8'-0"	2	-	METAL	BY OWNER	EXISTING. EQUIP. WITH PANIC HARDWARE.
09	DOUBLE SWING DOOR	(2)2'-5"	8'-0"	3	-	METAL	BY OWNER	EXISTING
10	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	1	-	ALUMINUM/GLASS	BY OWNER	EXISTING

HARDWARE NOTES:
1. EGRESS DOORS SHALL NOT REQUIRE ANY USE OF KEY OR SPECIAL KNOWLEDGE IN ORDER TO OPERATE DOOR FROM EGRESS SIDE (FFPC SECTION 7.2.1.5.3).
2. ALL EGRESS DOOR TO BE SINGLE ACTION IN ORDER TO EGRESS.

NOTES:
1) ALL CLOSET & STORAGE ROOM DOORS TO BE OPERABLE FROM INSIDE.
2) ALL WOOD DOORS SHALL BE SOLID CORE WOOD DOORS.
3) SEE FLOOR PLAN FOR LOCATION OF DOORS AND QUANTITY.
4) ALL WOOD DOORS SHALL BE STAINED.
5) HARDWARE SHALL BE LEVER TYPE & COMPLY WITH ADA STANDARD

OCC. LOAD CALCULATION

(Per FFPC101 8th Ed. (2023), CHAPTER 7

SCOPE OF WORK (4,524 SF)		NOT IN THE SCOPE OF WORK	
MEDICAL OFFICE	3,725 S.F. / 150	MEDICAL OFFICE:	7,114 S.F. / 150
WAITING AREA	610 S.F. / 15	WAITING AREA	2,055 S.F. / 15
STORAGE	188 S.F. / 500	DOCTORS HALL	121 S.F. / 30
TOTAL:	24.83 + 40.67 + 0.37 = **66 OCCUPANTS**	STORAGE	118 S.F. / 500
		TOTAL:	47.43 + 137 + 4 + 0.24 = **189 OCCUPANTS**

TOTAL OCC. LOAD CALCULATION : 64+189 = **253 OCCUPANTS**

FIRE PROTECTION NOTES

FE "ABC" GC SHALL PROVIDE (1) ABC TYPE FIRE EXTINGUISHER PER 2,500 SF OF AREA. EXTINGUISHERS SHALL BE MTD 80"AFF MAX. PROVIDE EXTINGUISHER CABINET IN ALL AREAS, SQ TRIM CABINET W/ "VERTICAL DUO" DOOR W/ WHITE BAKED ENAMEL FINISH AS MANF BY LARSEN OR EQL. COORDINATE LOCATION W/ OWNER PRIOR TO INSTALL.

PROVIDE (1) 'ABC TYPE' FIRE EXTINGUISHER PER GROSS 2,500 SF.
TOTAL AREA = 13,937SF / 2,500.00 = 6 ABC TYPE EXTINGUISHER REQUIRED*, 8 PROVIDED.

*PROVIDE MAXIMUM 150FT TRAVEL DISTANCE.

LEGEND

NEW 1-HR FIRE RATED PARTITION AS PER DETAIL 4/A400

1 LIFE SAFETY PLAN

SCALE: 1/8" = 1'-0"

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REVISED BY: JAHL

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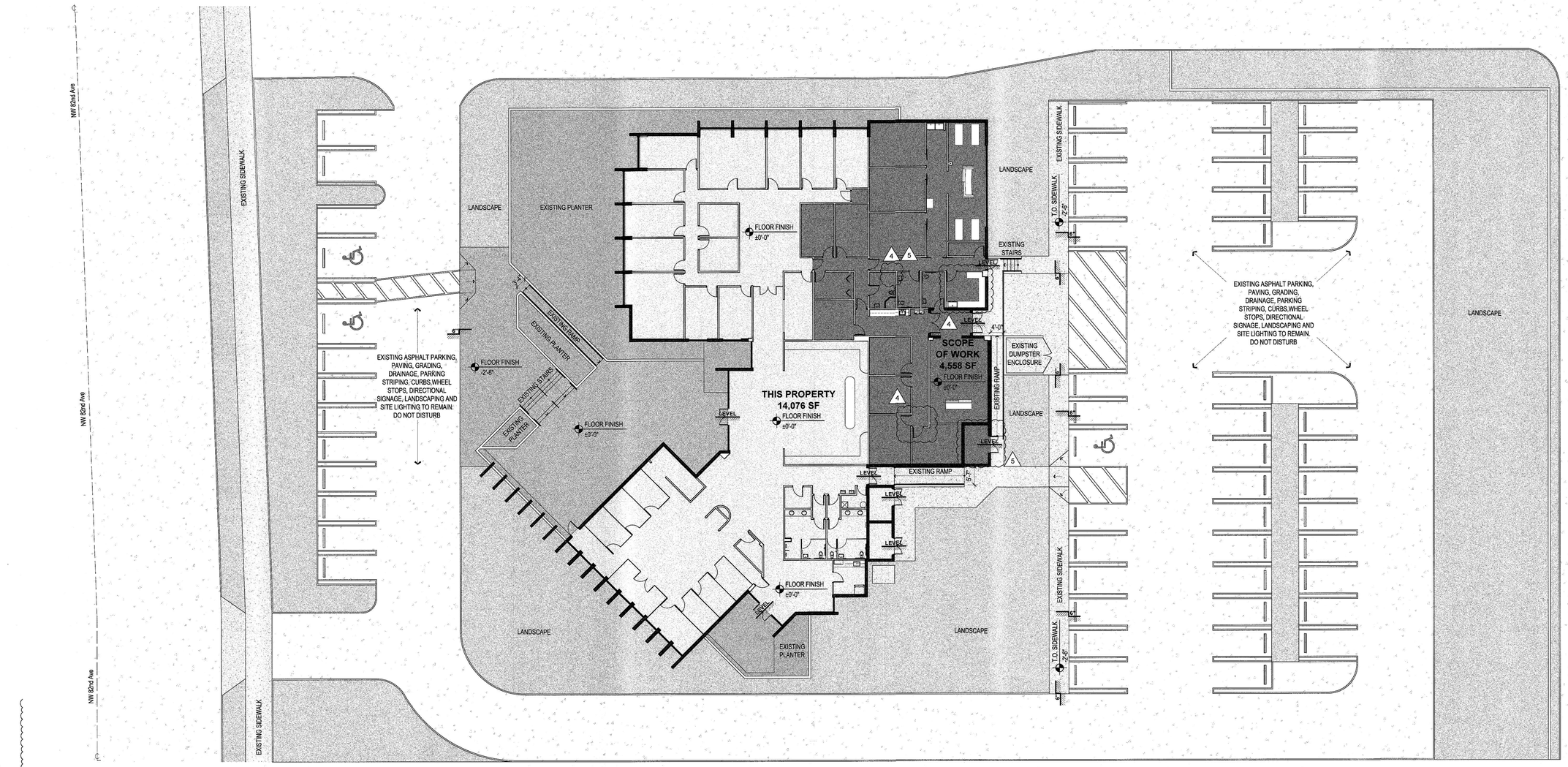
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: LIFE SAFETY PLAN

SHEET NUMBER: LS100

SHEET: 1 OF: 1

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Examiner Date Time Stamp Trade Stamp Name
MOYA, GRACE 4/20/2026 1:31:33 PM DERM Approved
DIAZ, ODON 5/14/2026 7:47:20 AM FIRE APPROVED REVISION



FLOOD PROGRAM LEGEND	
DESCRIPTION	ELEVATION (N.G.V.D.)
FEMA FLOOD ZONE	AE
BASE FLOOD ELEVATION	N/A
FLOOD INSURANCE RATE MAP (FIRM) PANEL	MAP NO. 12086C0112L DATE 9/11/2009

NOTE

NO EXTERIOR OR PUBLIC WORK AS A PART OF THIS PERMIT. INTERIOR BUILD OUT ONLY.

INTERIOR WORK ONLY AS PART OF THIS WORK/ PERMIT. NO CHANGE TO EXTERIOR EGRESS PATH, SITE/ PUBLIC ACCESS OR PARKING ALLOTMENT.

ALL PUBLIC AREAS ARE ACCESSIBLE & HAVE NO LEVEL CHANGES GREATER THAN 1/2".

1 SITE PLAN

SCALE: 1/16" = 1'-0"

N

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5 03.10.2026

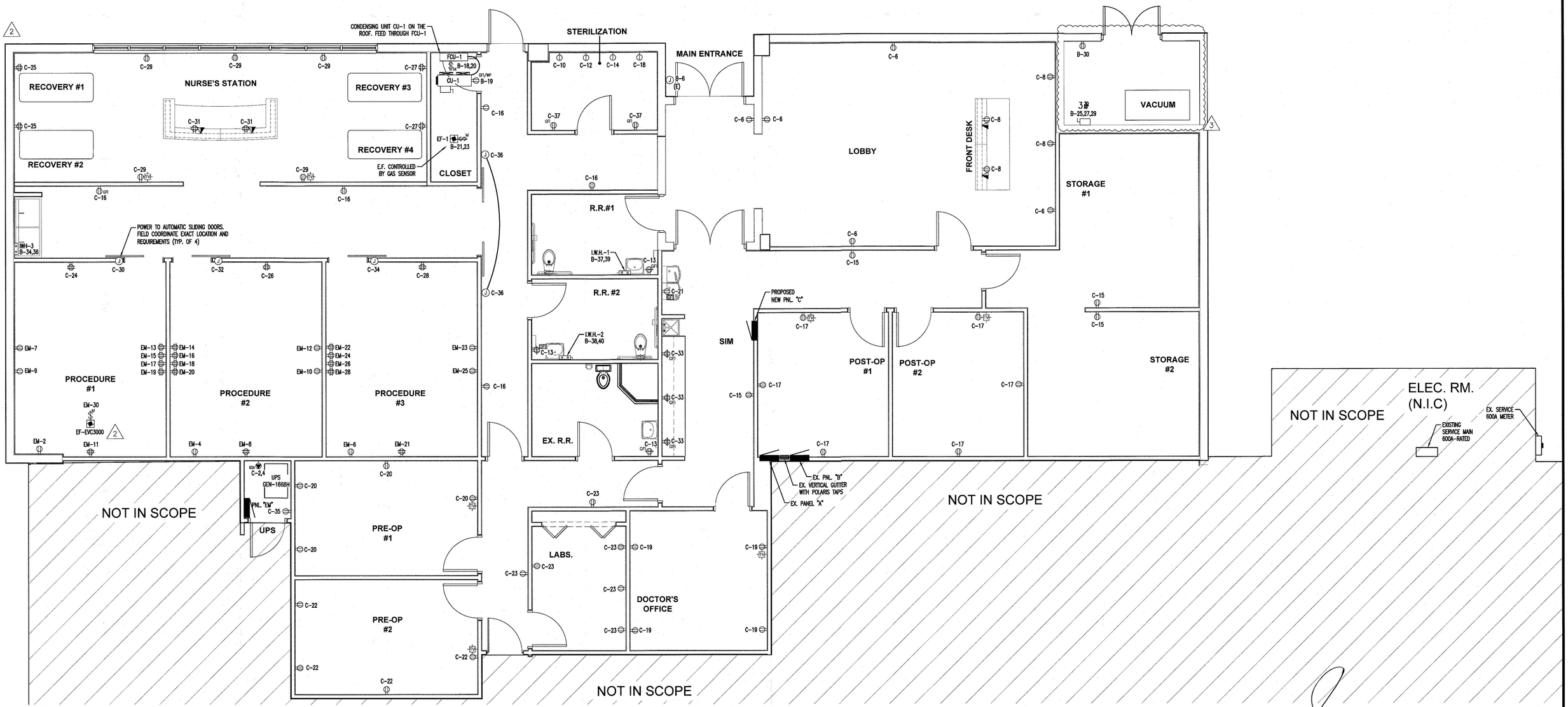
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: EXISTING SITE PLAN

SHEET NUMBER: SP100

SHEET: 1 OF: 1

Miami Dade County Department of Regulatory and Economic Resources - Job Copy
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MOYA, GRACE 4/30/2026 1:33:16 PM PERM Approved
DIAZ, ODON 4/24/2026 8:31:54 AM FIRE Reference Only.



N

Power Floor Plan

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

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SEAL:

DRAWN BY: RHR

REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd AVE AMBULATORY SURGICAL CENTER
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
1 BLDG. DEP. COMM. 09-24-2025
2 DWG. COORDINATION 01-14-2026

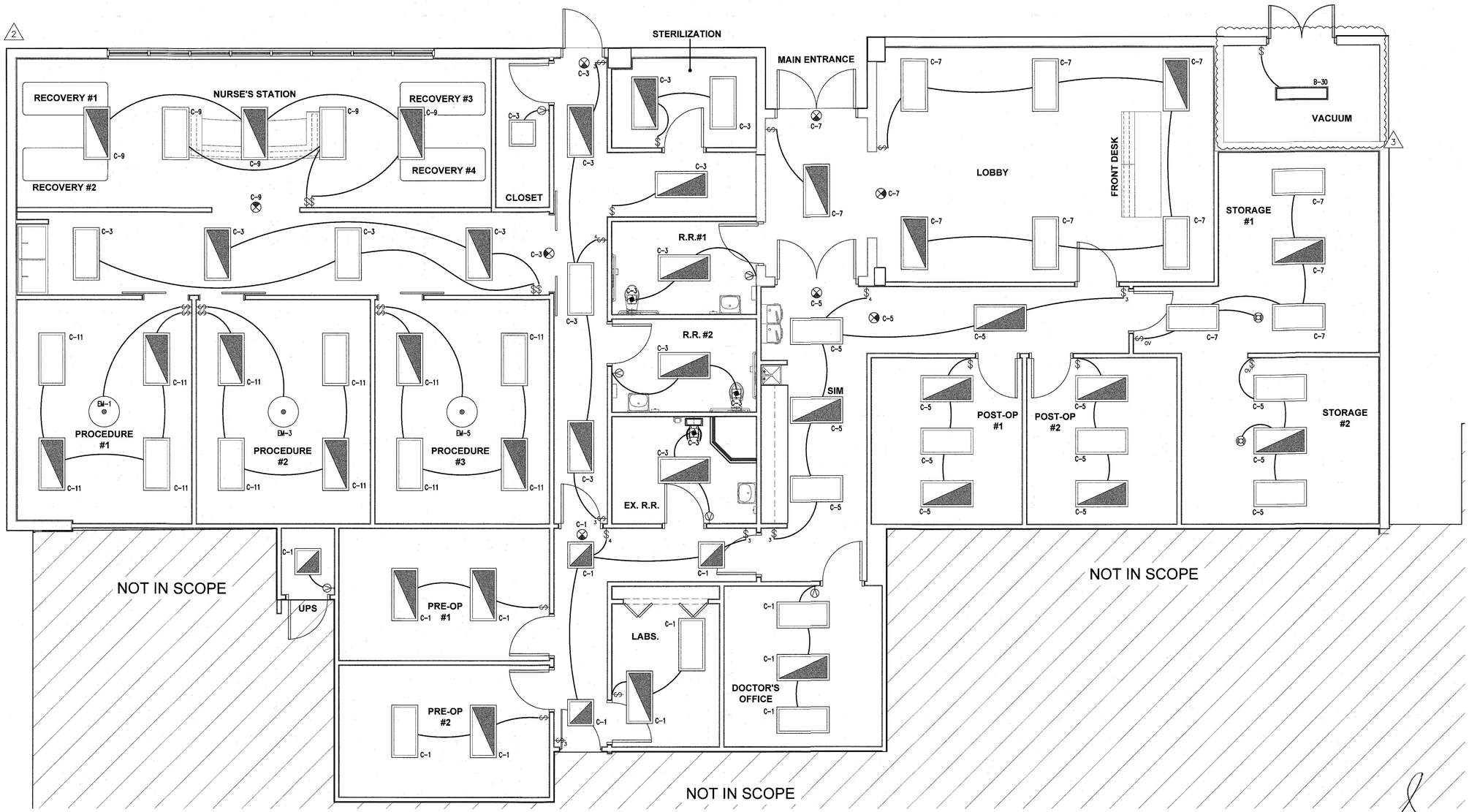
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: POWER FLOOR PLAN

SHEET NUMBER: E1.01

SHEET: OF:

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N

Lighting Floor Plan

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

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PROJECT NAME:
15255 NW 82nd AVE AMBULATORY SURGICAL CENTER
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
1 BLDG. DEP. COMM. 09-24-2025
2 DWG. COORDINATION 01-14-2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

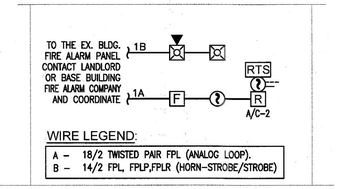
SHEET TITLE: LIGHTING FLOOR PLAN

SHEET NUMBER: E1.02

SHEET: OF:

Miami Dade County Department of Regulatory and Economic Resources - Job Copy
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012-E1-02.pdf
Examiner Date Time Stamp Trade Stamp Name
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FIRE ALARM PARTIAL RISER DIAGRAM



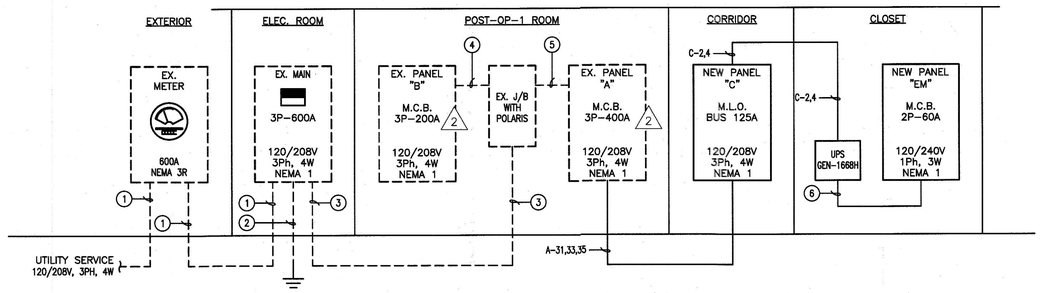
WIRE LEGEND:

A – 18/2 TWISTED PAIR FPL (ANALOG LOOP).
B – 14/2 FPL, FPLP,FPLR (HORN-STROBE/STROBE)

NOTES TO RISER:

1. FIRE ALARM SYSTEM SHALL BE MONITORED BY CENTRAL STATION.
2. THIS RISER DIAGRAM IS ONLY DIAGRAMMATIC.
3. UNLESS OTHERWISE NOTED, ALL CONDUITS ARE EMT, 3/4" AND 40% FILLED MAXIMUM.
4. FIRE ALARM SYSTEM TO BE CLASS B.

ELECTRICAL RISER DIAGRAM



FEEDER SCHEDULE

1. EX. 2 SETS OF 4–350 KCMIL THWN CU IN 3"C EACH
2. EX. GROUNDING SYSTEM
3. EX. 2 SETS OF 4–350 KCMIL THWN CU + 1–#1 CU (GND) IN 3"C
4. EX. 4–#3/0 THWN CU + 1–#4 CU (GND) IN 2"C
5. EX. 2 SETS OF 4–#3/0 THWN CU + 1–#4 CU (GND) IN 2"C
6. 3–#6 THWN CU + 1–#10 CU (GND) IN 3/4"C

—— EXISTING
—— NEW

LOAD CALCULATION

PANEL A	130.7 KVA
PANEL B	46.4 KVA
TOTAL CONNECTED LOAD	177.1 KVA
MAXIMUM DEMAND @208V, 3Ph	492.0 AMP
EXISTING SERVICE TO REMAIN	600.0 AMP

3

EX. PANEL "A"

MOUNTING: SURFACE — RATING: 400A — MAINS: M.C.B. — VOLTAGE: 120/208V, 3Ph, 4W
ENCLOSURE: NEMA 1 — A.I.C.: 10kA — CKT. BKR: 3P-400A — LOCATION: -

ID	LOAD SERVED	COND	GND	THWN	TRIP	CKT	A, [kVA]		B, [kVA]		C, [kVA]		CKT	TRIP	THWN	GND	COND.	LOAD SERVED	ID
R	EX. RECEP.	EX.	EX.	EX.	20	1	0.7	0.7					2	20	EX.	EX.	EX.	EX. RECEP.	R
R	EX. RECEP.	EX.	EX.	EX.	20	3			0.7	0.7			4	20	EX.	EX.	EX.	EX. RECEP.	R
R	EX. RECEP.	EX.	EX.	EX.	20	5					0.7	0.7	6	20	EX.	EX.	EX.	EX. RECEP.	R
R	EX. RECEP.	EX.	EX.	EX.	20	7	0.7	0.7					8	20	EX.	EX.	EX.	EX. RECEP.	R
R	EX. RECEP.	EX.	EX.	EX.	20	9			0.7	0.7			10	20	EX.	EX.	EX.	EX. RECEP.	R
	SPARE	-	-	-	20	11					-	0.4	12	20	EX.	EX.	EX.	EX. FACP EQ.	O
	SPARE	-	-	-	20	13	-	-					14	20	-	-	-	SPARE	
	SPARE	-	-	-	20	15			-	-			16	20	-	-	-	SPARE	
	SPARE	-	-	-	20	17					-	-	18	20	-	-	-	SPARE	
O	EX. FACP EQ.	EX.	EX.	EX.	20	19	0.4	-					20	20	-	-	-	SPARE	
	SPARE	-	-	-	20	21			-	-			22	20	-	-	-	SPARE	
	SPARE	-	-	-	20	23					-	-	24	20	-	-	-	SPARE	
C						25	4.7	3.1					26						C
C	EX. RTU	3/4"	10	6	50/3	27			4.7	3.1			28	35/3	8	10	3/4"	EX. RTU	C
C						29					4.7	3.1	30						C
P						31	10.3	0.8					32						P
P	NEW PANEL "C"	1-1/4"	8	3	100/3	33			10.3	0.8			34	20/2	EX.	EX.	EX.	EX. RECEP.	R
P						35					10.3	4.8	36	-	-	-	-	SPACE	O
	SPACE	-	-	-	-	37	-	0.1					38	20	EX.	EX.	EX.	EX. EMERGENCY/EXIT LTS.	L
	SPACE	-	-	-	-	39			-	-			40	-	-	-	-	SPACE	
	SPACE	-	-	-	-	41					-	-	42	-	-	-	-	SPACE	
C						43	8.1	12.6					44						C
C	EX. RTU 12.5 TON	EX.	EX.	EX.	150/3	45			8.1	12.6			46	200/3	EX.	EX.	EX.	EX. RTU 20 TON	C
C						47					8.1	12.6	48						C
							42.9		42.4		45.4								

DEMAND LOAD CALCULATION:

TOTAL CONNECTED LOAD	130.7	KVA
RECEP. TOTAL LOAD	8.6	KVA
1ST 10 KVA @100%	8.6	KVA
REMAINING @50%	0.0	KVA
LIGHTING LOAD @125%	0.1	KVA
OTHER LOADS @100%	36.5	KVA
AIR CONDITIONING LOADS @100%	85.5	KVA
TOTAL DEMAND LOAD	130.7	KVA
MAX. DEMAND CURRENT	363	AMPS

LOAD TYPE:
(R) RECEPTACLE LOAD
(L) LIGHTING LOAD
(O) OTHER LOAD
(C) A/C (COLD OR HEAT)
GF - GROUND FAULT PROTECTION

2

EX. PANEL "B"

MOUNTING: SURFACE — RATING: 200A — MAINS: M.C.B. — VOLTAGE: 120/208V, 3Ph, 4W
ENCLOSURE: NEMA 1 — A.I.C.: 10kA — CKT. BKR: 3P-200A — LOCATION: -

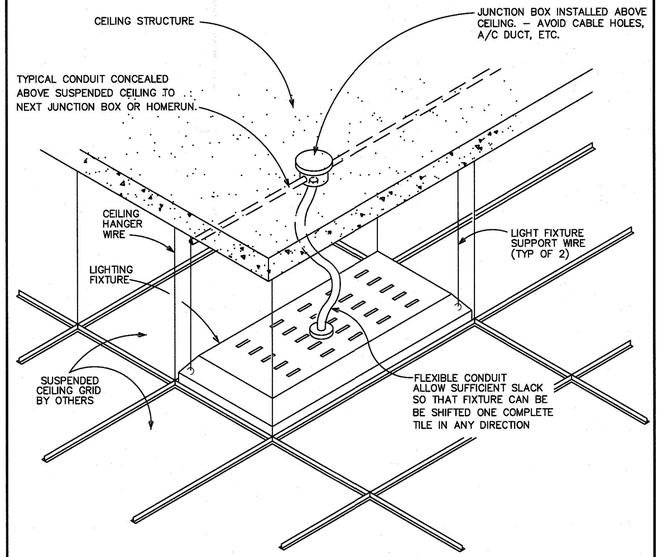
ID	LOAD SERVED	COND	GND	THWN	TRIP	CKT	A, [kVA]		B, [kVA]		C, [kVA]		CKT	TRIP	THWN	GND	COND.	LOAD SERVED	ID
L	EX. LTS.	EX.	EX.	EX.	20/2	1	1.0	1.0					2	20/2	EX.	EX.	EX.	EX. LTG.	L
L						3			1.0	1.0			4						L
L	EX. LTS.	EX.	EX.	EX.	20/2	5					1.0	1.0	6	20	EX.	EX.	EX.	EX. RECEP. (SIGN)	L
L						7	1.0	0.3					8	20	EX.	EX.	EX.	EX. LTG. (WALL RAMP STEP LTS.)	L
L	EX. LTG.	EX.	EX.	EX.	20	9			0.5	0.5			10	20	EX.	EX.	EX.	EX. LTG.	L
L	EX. LTG.	EX.	EX.	EX.	20	11					0.5	0.5	12	20	EX.	EX.	EX.	EX. LTG.	L
L	EX. LTG.	EX.	EX.	EX.	20	13	0.5	0.5					14	20	EX.	EX.	EX.	EX. LTG.	L
L	EX. LTG.	EX.	EX.	EX.	20	15			0.5	0.5			16	20	EX.	EX.	EX.	EX. LTG.	L
L	EX. LTG.	EX.	EX.	EX.	20	17					0.5	1.0	18	20/2	12	12	3/4"	MINI-SPLIT (FCU/CU-1)	C
R	ROOF RECEP.	1/2"	12	12	20	19	1.5	1.0					20						C
O	EXHAUST FAN EF-1	3/4"	12	12	20/2	21			0.4	0.6			22	20/20	EX.	EX.	EX.	EX. LTG. / EX. LTG.	L
O						23					0.4	0.6	24	20/20	EX.	EX.	EX.	EX. LTG. / EX. LTG.	L
Mx						25	0.9	0.6					26	20/20	EX.	EX.	EX.	EX. LTG. / EX. LTG.	L
Mx	VACCUM COMPRESSOR	3/4"	12	12	20/3	27			0.9	-			28	20				SPARE	
Mx						29					0.9	0.3	30	20	12	12	1/2"	LTG. & RECEP. VACUUM ROOM	L
R	EX. RECEP.	EX.	EX.	EX.	20	31	0.7	-					32	20				SPARE	
R	EX. RECEP.	EX.	EX.	EX.	20	33			0.7	2.4			34	30/2	10	10	3/4"	IWH-3	O
R	EX. RECEP.	EX.	EX.	EX.	20	35					0.7	2.4	36						O
O	IWH-1	3/4"	10	10	30/2	37	2.4	4.8					38	50/2	6	10	3/4"	IWH-2	O
O						39			2.4	4.8			40						O
							16.2		16.2		9.8								

DEMAND LOAD CALCULATION:

TOTAL CONNECTED LOAD	42.2	KVA
RECEP. TOTAL LOAD	3.6	KVA
1ST 10 KVA @100%	3.6	KVA
REMAINING @50%	0.0	KVA
LIGHTING LOAD @125%	17.4	KVA
OTHER LOADS @100%	20.0	KVA
LARGEST MOTOR LOAD @125%	3.4	KVA
AIR CONDITIONING LOADS @100%	2.0	KVA
TOTAL DEMAND LOAD	46.4	KVA
MAX. DEMAND CURRENT	129	AMPS

LOAD TYPE:
(R) RECEPTACLE LOAD
(L) LIGHTING LOAD
(O) OTHER LOAD
(C) A/C LOAD

3



NOTES:

1. PROVIDE #12 GREEN GROUND WIRE IN FLEXIBLE CONDUIT WITH BRANCH CIRCUIT WIRING AND BOND TO OUTLET BOX AND FIXTURE HOUSING.
2. SECURELY FASTEN FIXTURE TO CEILING STRUCTURE ABOVE WITH TWO (2) FIXTURE SUPPORT WIRES PER FIXTURE.

1 / E3.00 — LIGHTING FIXTURE MOUNTING DETAIL — N.T.S.

NEW PANEL "EM"

MOUNTING: SURFACE — RATING: 100A — MAINS: M.C.B. — VOLTAGE: 120/240V, 1Ph, 3W
ENCLOSURE: NEMA 1 — A.I.C.: 10kA — CKT. BKR: 2P-60A — FED FROM: UPS (GEN-1668H)

ID	LOAD SERVED	COND	GND	THWN	TRIP	CKT	A, [kVA]		B, [kVA]		CKT	TRIP	THWN	GND	COND.	LOAD SERVED	ID
L	SURGERY LAMP	1/2"	12	12	20	1	0.1	0.1			2	20	12	12	1/2"	RECEP. ANESTHESIA MACHINE #1	O
L	SURGERY LAMP	1/2"	12	12	20	3			0.1	0.1	4	20	12	12	1/2"	RECEP. ANESTHESIA MACHINE #2	O
L	SURGERY LAMP	1/2"	12	12	20	5	0.1	0.1			6	20	12	12	1/2"	RECEP. ANESTHESIA MACHINE #3	O
R	RECEP. PROCEDURE #1	1/2"	12	12	20	7			0.2	0.4	8	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	9	0.2	0.2			10	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	11			0.4	0.2	12	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	13	0.4	0.4			14	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	15			0.4	0.4	16	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	17	0.4	0.4			18	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #1	1/2"	12	12	20	19			0.4	0.4	20	20	12	12	1/2"	RECEP. PROCEDURE #2	R
R	RECEP. PROCEDURE #3	1/2"	12	12	20	21	0.4	0.4			22	20	12	12	1/2"	RECEP. PROCEDURE #3	R
R	RECEP. PROCEDURE #3	1/2"	12	12	20	23			0.2	0.4	24	20	12	12	1/2"	RECEP. PROCEDURE #3	R
R	RECEP. PROCEDURE #3	1/2"	12	12	20	25	0.2	0.4			26	20	12	12	1/2"	RECEP. PROCEDURE #3	R
	SPACE	-	-	-	-	27			-	0.4	28	20	12	12	1/2"	RECEP. PROCEDURE #3	R
	SPACE	-	-	-	-	29	-	0.3			30	20	12	12	1/2"	EF-EVC3000 PROCEDURE #1	O
							3.6		3.5								

DEMAND LOAD CALCULATION:

TOTAL CONNECTED LOAD	7.1	KVA
RECEP. TOTAL LOAD	6.5	KVA
1ST 10 KVA @100%	6.5	KVA
REMAINING @50%	0.0	KVA
LIGHTING LOAD @125%	0.2	KVA
OTHER LOADS @100%	0.5	KVA
TOTAL DEMAND LOAD	7.1	KVA
MAX. DEMAND CURRENT	30	AMPS

LOAD TYPE:
(R) RECEPTACLE LOAD
(L) LIGHTING LOAD
(O) OTHER LOAD

2

NEW PANEL "C"

MOUNTING: SURFACE — RATING: 125A — MAINS: M.L.O. — VOLTAGE: 120/208V, 3Ph, 4W
ENCLOSURE: NEMA 1 — A.I.C.: 10kA — CKT. BKR: - — FED FROM: PANEL "A", CKT-31,33,35

ID	LOAD SERVED	COND	GND	THWN	TRIP	CKT	A, [kVA]		B, [kVA]		C, [kVA]		CKT	TRIP	THWN	GND	COND.	LOAD SERVED	ID
L	LTG. PRE-OP/LABS/DOC. OFF.	1/2"	12	12	20	1	0.5	3.6					2	60/2	6	10	3/4"	PANEL "EM" THRU UPS GEN-1668H	O
L	LTG. RESTROOMS	1/2"	12	12	20	3			0.5	3.6			4						O
L	LTG. POST-OP/STORAGE 2	1/2"	12	12	20	5					0.5	0.9	6	20	12	12	1/2"	RECEP. LOBBY	R
L	LTG. LOBBY/STORAGE #1	1/2"	12	12	20	7	0.4	0.7					8	20	12	12	1/2"	RECEP. LOBBY	R
L	LTG. NURSE'S STATION	1/2"	12	12	20	9			0.2	1.5			10	20	12	12	1/2"	AUTOCLAVE	O
L	LTG. PROCEDURE ROOMS #1, #2, #3	1/2"	12	12	20	11					0.5	1.5	12	20	12	12	1/2"	AUTOCLAVE	O
R	RECEP. RESTROOMS	1/2"	12	12	20	13	0.5	1.5					14	20	12	12	1/2"	AUTOCLAVE	O
R	RECEP. STORAGES/CORRIDOR	1/2"	12	12	20	15			0.7	0.9			16	20	12	12	1/2"	RECEP. GEN. CONV.	R
R	RECEP. POST-OP	1/2"	12	12	20	17					1.1	1.5	18	20	12	12	1/2"	AUTOCLAVE	O
R	RECEP. DOCTOR OFFICE	1/2"	12	12	20	19	0.7	0.7					20	20	12	12	1/2"	RECEP. PRE-OP #1	R
O	DRINKING FOUNTAIN	1/2"	12	12	20	21			0.3	0.7			22	20	12	12	1/2"	RECEP. PRE-OP #2	R
R	RECEP. LABORATORY	1/2"	12	12	20	23					1.1	0.7	24	20	12	12	1/2"	RECEP. GEN. CONV. PROCEDURE#1	R
R	RECEP. RECOVERY AREA #1 & #2	1/2"	12	12	20	25	0.7	0.7					26	20	12	12	1/2"	RECEP. GEN. CONV. PROCEDURE#2	R
R	RECEP. RECOVERY AREA #3 & #4	1/2"	12	12	20	27			0.7	0.7			28	20	12	12	1/2"	RECEP. GEN. CONV. PROCEDURE#3	R
R	RECEP. NURSE STATION	1/2"	12	12	20	29					0.9	0.5	30	20	12	12	1/2"	AUT. SLIDING DOOR	O
R	RECEP. NURSE STATION	1/2"	12	12	20	31	0.7	0.5					32	20	12	12	1/2"	AUT. SLIDING DOOR	O
R	RECEP. GEN. CONV.	1/2"	12	12	20	33			0.5	0.5			34	20	12	12	1/2"	AUT. SLIDING DOOR	O
R	RECEP. GEN. CONV.	1/2"	12	12	20	35					0.2	0.6	36	20	12	12	1/2"	AUT. SLIDING DOOR	O
R	RECEP. GEN. CONV.	1/2"	12	12	20	37	0.4	-					38	20	-	-	-	SPARE	
	SPARE	-	-	-	20	39			-	-			40	20	-	-	-	SPARE	
	SPARE	-	-	-	20	41					-	-	42	20	-	-	-	SPARE	
							11.6		10.8		10.0								

DEMAND LOAD CALCULATION:

TOTAL CONNECTED LOAD	32.3	KVA
RECEP. TOTAL LOAD	14.2	KVA
1ST 10 KVA @100%	10.0	KVA
REMAINING @50%	2.1	KVA
LIGHTING LOAD @125%	3.3	KVA
OTHER LOADS @100%	15.5	KVA
TOTAL DEMAND LOAD	30.9	KVA
MAX. DEMAND CURRENT	86	AMPS

LOAD TYPE:
(R) RECEPTACLE LOAD
(L) LIGHTING LOAD
(O) OTHER LOAD

2





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REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd AVE AMBULATORY SURGICAL CENTER
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:

1	BLDG. DEP. COMM.	09–24–2025
2	DWG. COORDINATION	01–14–2026
3	DWG. COORDINATION	03–18–2026

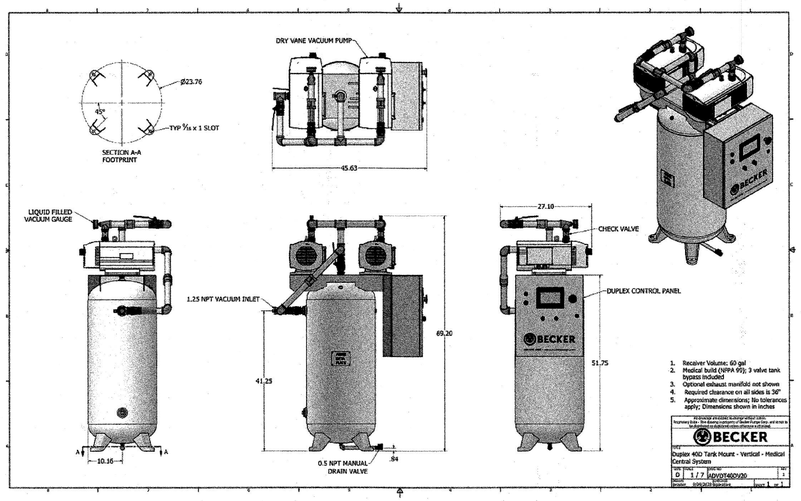
PROJECT INFORMATION:
DATE
06/26/2025
PROJECT NUMBER
25-000

SHEET TITLE:
RISER DIAGRAMS
PANEL SCHEDULES
& ELECTRICAL DETAIL

SHEET NUMBER:
E3.00
SHEET: OF:

Miami Dade County Department of Regulatory and Economic Resources - Job Copy
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VACUUM



Misc. Parts Charge
P/N ADVDT040DV2
Becker Model 40 Dry Rotary Vane, Medical Duplex Vacuum System

Pump Capacity: 28.3 SCFM open flow per pump. Maximum Vacuum: 25.1"HgV

Pump Description: G027221 Model VT 4.40 Oil less rotary vane vacuum pump with carbon vanes, built-in suction filter, vacuum regulating valve, and integrally flanged to a 2 HP, 3 phase, IE3 motor.

System Includes: (2) vacuum pumps w/motor, 60-gallon Vertical receiver with drain, inlet check valves, isolation valves, flexible connectors, inlet vacuum gauges, pump vibration isolators, and 3-valve receiver bypass.

Control Panel: 208/230/460V/60Hz/3 Ph NEMA enclosure, UL listed, NFPA 99 compliant, Automatic lead/lag controls, Motor protection and amperage monitoring.

Instrumentation: PLC w/7" color HMI display screen, HOA switch per pump, dual control voltage transformers, 95 dBA audible alarm signal (can be muted), alarm light indicator, remote alarm contacts for 'All pumps running' and 'Low vacuum' alarms, motor management system per pump including programable motor controller, manual motor starter and contactor, pressure transducer, and emergency shutoff button with twist release.

Operator Interface: Includes current vacuum level, system vacuum setpoints, pump status, alarm silence and reset buttons, programable motor starter settings, total pump run hours, pump start counter, pump maintenance schedule, real-time pump motor amperage, alarm log, password protected system settings.

Included: Exhaust manifold

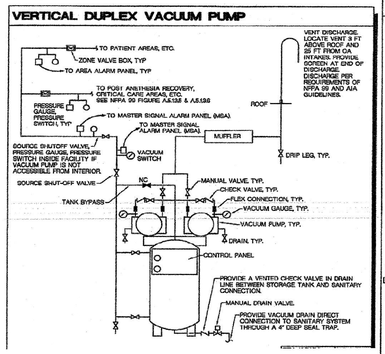
Ohanes for Freight

MEDICAL GAS TABLE

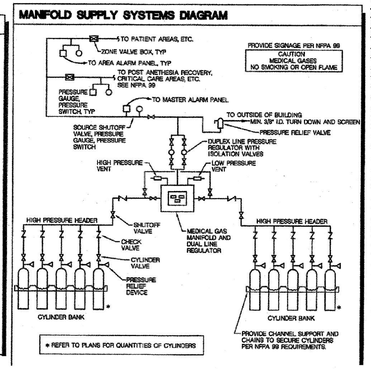
Gas	No. of Outlets	Flow per Outlet (SCFM)	Total Demand (SCFM)	Diversity Factor	Design Demand (SCFM)	Pipe Size	Developed Length (ft)	Pressure Drop (psi)	Required Pressure
Oxygen (O2)	9	10	90 100%	630	80	4.9	50 psi		
Nitrous Oxide (N2O)	8	10	80 100%	80	70	1.3	50 psi		
Vacuum (VAC)	9	20	90 100%	180	70	1.9	11 in Hg		

Notes:
Medical gas calculations provided per NFPA 99 Section 5.1.3.6.
Flow rates shown are design basis values.
Diversity factor used: 100%.
Pipe sizing based on developed length including fittings.
Maximum allowable pressure drop: 5 psi.
System designed for 50 psi nominal outlet pressure (O2 and N2O).
Pressure drop calculated to most remote outlet.

VERTICAL DUPLEX VACUUM PUMP



MANIFOLD SUPPLY SYSTEMS DIAGRAM





Roll over image to zoom.

MERET PRODUCTS H Medical Oxygen Cylinder: 7,079 L Capacity, 25 lpm Flow Rate - Max, Steel

Item **19MN18** Mfr. Model **CYL250-5400R**

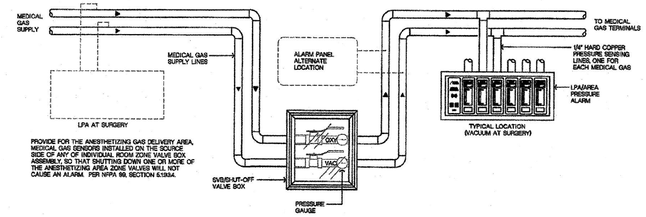
Table 5.1.3.3.2.5 Storage Quantities for Medical Gas and Cryogenic Fluid Central Supply Systems in Health Care Facilities

Gas	Maximum Allowable Quantity, Connected and in Storage		
	Outdoor Enclosures[a]	Indoor Nonsprinklered[b]	Indoor Sprinklered[c]
Oxygen and nitrous oxide[d]	No limit	283 m^3 (10,000 ft^3)	566 m^3 (20,000 ft^3)
Carbon dioxide, helium, medical air, and nitrogen	No limit		

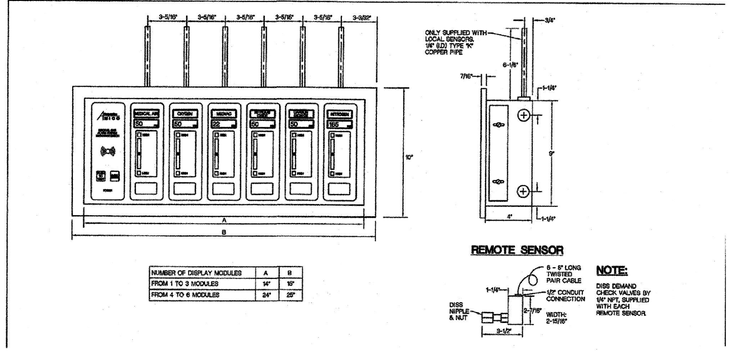
[a]Outdoor enclosure constructed and ventilated in accordance with this code and NFPA 55.
[b]Indoor structure constructed in accordance with 5.1.3.3.2 and ventilated in accordance with 9.3.6.
[c]Indoor structure constructed in accordance with 5.1.3.3.2, ventilated in accordance with 9.3.6, and provided with an approved, automatic sprinkler system in accordance with NFPA 13.
[d]Sum of all oxidizing gases within a room.

Gas	H-Cylinder (Cubic Feet)	Small LP Liquid (Cubic Feet)
Oxygen (O2)	244	4,577
Nitrogen (N2)	226	3,685
Carbon Dioxide (CO2)	434	N/A
Nitrous Oxide (N2O)	558	N/A
Medical Air (MA)	230	N/A

LINE PRESSURE ALARM PIPING

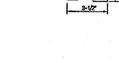


LINE PRESSURE ALARM PANEL



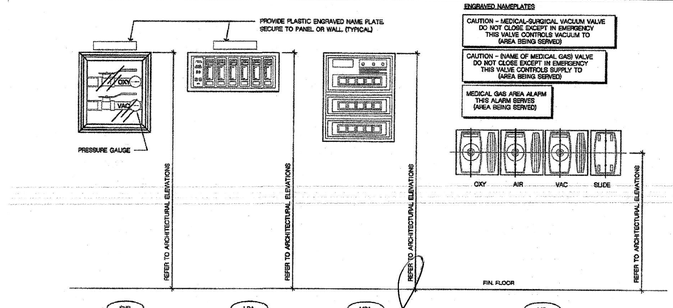
NUMBER OF DISPLAY MODULES	A	B
FROM 1 TO 3 MODULES	14"	10"
FROM 4 TO 6 MODULES	24"	20"

REMOTE SENSOR



NOTE:
DISS DEMAND CHECK VALVES BY 1/4" NPT, SUPPLIED WITH EACH REMOTE SENSOR

TYPICAL ELEVATIONS



8
7
6

PEDRO PABLO COTO LICENSE NO. 85311 STATE OF FLORIDA PROFESSIONAL ENGINEER 03/26/2026

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1 PLUMBING. NOTES & DETAILS
SCALE: NTS

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7 B.D.C 02.23.2026
8 B.D.C 03.18.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: MEDICAL GAS DETAILS

SHEET NUMBER: MG-0.00

SHEET: 1 OF: 5

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SEQUENCE OF OPERATION: MEDICAL GAS DETECTION & VENTILATION SYSTEM

Location: Medical Gas Room (Vacuum Pump & Gas Manifolds) Equipment
Controller: Macurco DVP-120 (The Brain)
Sensors: Macurco OX-6 (O2) and Macurco N2O (Nitrous Oxide)
Exhaust: Ventilation Fan (High-CFM)
Cooling: Dedicated AC Unit

NORMAL OPERATING CONDITION THE DVP-120 CONTROLLER (LOCATED OUTSIDE THE ROOM) CONTINUOUSLY MONITORS THE ATMOSPHERE INSIDE THE ROOM VIA THE REMOTE SENSORS.

Oxygen (O2) Levels: Should remain between 19.5% and 23.0%.

Nitrous Oxide (N2O) Levels: Should remain at 0 ppm (parts per million).
The Exhaust Fan remains in Standby Mode (Off) to conserve energy and maintain room temperature, unless a manual override is engaged.

ALARM LEVEL 1: WARNING (LOW-LEVEL LEAK)

Trigger: Oxygen level > 23.5% OR Nitrous Oxide level > 25 ppm.

Action: 1. The DVP-120 activates the Relay 1. 2. The Exhaust Fan is energized and starts extracting air to the exterior. 3. A visual warning (Amber/Yellow light) on the DVP-120 display begins to flash.

Purpose: To clear the room of minor leaks before they become hazardous to staff or a fire risk.

ALARM LEVEL 2: CRITICAL (HIGH-LEVEL LEAK)
Trigger: Oxygen level > 24% OR Nitrous Oxide level > 50 ppm (or TWA limits).

Action:
The Exhaust Fan continues to run at maximum capacity.
The DVP-120 activates its internal Audible Alarm (Buzzer).
The External Alarm Strobe/Horn (located above the door) is energized.
(Optional) If connected, the Medical Gas Master Alarm panel is notified.
Purpose: To prevent entry into the room and alert the facility manager of a major gas system failure.

SYSTEM RESET (CLEARING THE ROOM)
The Exhaust Fan will continue to run for a programmed Delay-Off period (e.g., 5-10 minutes) after the gas levels have returned to the Normal range.

Once levels are safe, the DVP-120 will de-energize the fan relay and return to Normal Operating Condition.

COMPLETE TECHNICAL SPECIFICATIONS: MEDICAL GAS SYSTEM1.

MEDICAL GAS CYLINDERS (TYPE H)General Specification: All medical gas cylinders shall be Type 'H' high-pressure steel cylinders with a nominal diameter of 10 inches.Oxygen (O_2): Cylinders shall be Meret Products (or equivalent) with a capacity of 7,079 Liters (250 cu. ft.) and utilize CGA-540 valve connections.Medical Air (MA): Cylinders shall have a capacity of 250 cu. ft. and utilize CGA-346 valve connections.Nitrous Oxide (N_20): Cylinders shall have a capacity of 560 cu. ft. and utilize CGA-326 valve connections.Storage Limits: Per project notes, the combined connected and stored volume per gas shall not exceed 3,000 cu. ft. within the storage room.Restraints: All cylinders must be secured to the wall structure using double non-combustible restraints (chains) at all times.2.

PIPING MATERIAL AND INSTALLATIONTubing:

All medical gas piping shall be seamless copper tube, Type 'L'or Type 'K', conforming to ASTM B819 (cleaned for medical gas service).Fittings: Fittings shall be wrought copper per ASME B16.22, cleaned and capped for oxygen service.Joints: All joints shall be made using BCuP series brazing filler metal without flux, while purging the interior with oil-free dry nitrogen.Identification: Piping shall be labeled with the gas name and direction of flow at intervals not exceeding 20 feet (6 m) and in every room traversed.3.

CONTROL, MONITORING AND SAFETYAutomatic Changeover: The installer shall demonstrate the operation of the automatic change-over from primary to secondary supply during the final survey.Alarms: All gas systems shall be integrated into the facility's master alarm system (Macurco DVP-120 or equivalent) to monitor pressure and detect leaks.Warning Signs: Provide "NO SMOKING" and "AUTHORIZED PERSONNEL ONLY" signs on the door of the oxygen storage room per NFPA 99 requirements.4.

TESTING AND COMPLIANCEStandards: The system shall be installed and tested in strict accordance with NFPA 55 and 99.Pressure Test: Prior to connection of terminal units, the system shall undergo a 24-hour standing pressure test using oil-free dry nitrogen.

CODE CRITERIA & STANDARDS (2026)

1. PRIMARY LIFE SAFETY & MEDICAL GAS CODES

(NFPA)NFPA 99 (2024 Edition)
NFPA 55 (2023 Edition)
NFPA 70 (2023 Edition): National Electrical Code (NEC).
NFPA 101 (2024 Edition):

2. FLORIDA BUILDING CODES (FBC 8TH EDITION – 2023)
Florida Building Code-Mechanical (2023).
Florida Building Code -Plumbing (2023).
Florida Building Code -Fuel Gas (2023).
Florida Fire Prevention Code (8th Edition).

3. PIPING & MATERIAL STANDARDSASTM B819: Standard specification for seamless copper tube, Type 'L'or Type 'K', specifically cleaned for medical gas service.CGA STANDARDS: All cylinder valve connections must comply with the Compressed Gas Association (CGA-540 for O2, CGA-326 for N2O, and CGA-346 for Medical Air).

1 MEDICAL GAS NOTES
SCALE: NTS

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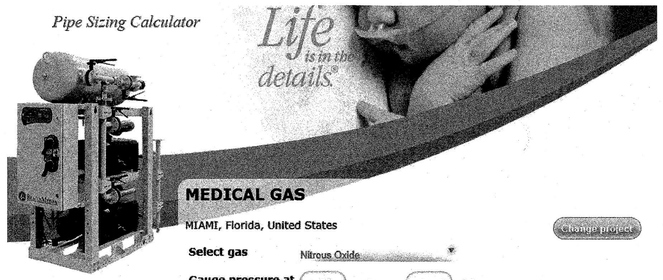
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: MEDICAL GAS DETAILS

SHEET NUMBER: MG-0.01
SHEET:2 OF:5

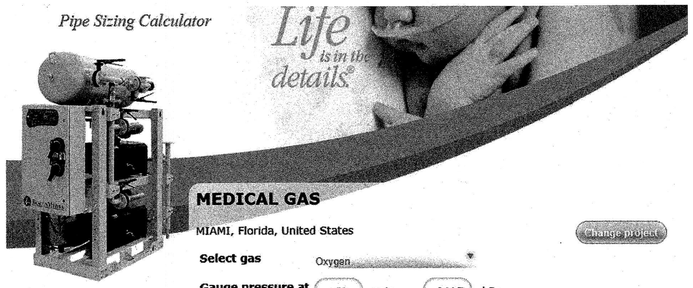
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Examiner Date Time Stamp Trade Stamp Name
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NITROUS OXIDE



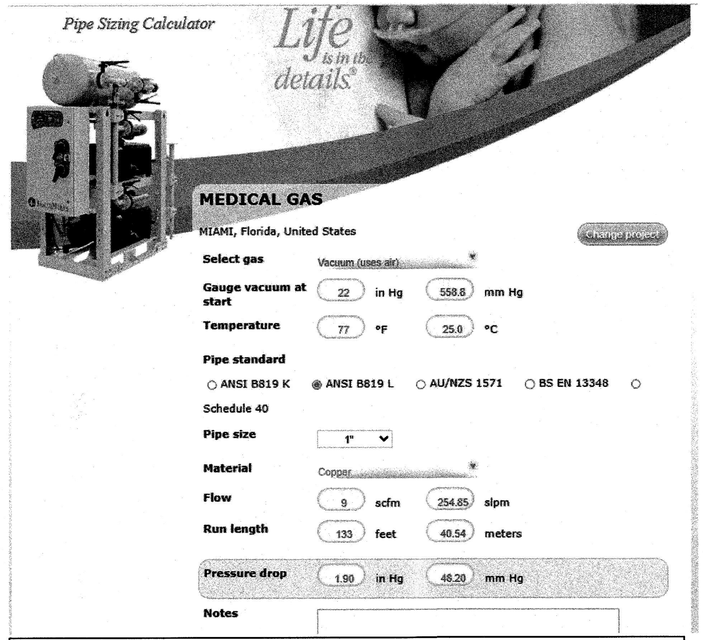
NOMINAL OUTLET PRESSURE: 50 PSIG
ACCEPTABLE STATIC OUTLET PRESSURE: 50-55 PSIG
MAXIMUM ALLOWABLE PRESSURE DROP: 5 PSI

OXYGEN



NOMINAL OUTLET PRESSURE: 50 PSIG
ACCEPTABLE STATIC OUTLET PRESSURE: 50-55 PSIG
MAXIMUM ALLOWABLE PRESSURE DROP: 5 PSI

VACUUM



NOMINAL OUTLET PRESSURE: 50 PSIG
ACCEPTABLE STATIC OUTLET PRESSURE: 20 IN HG
MAXIMUM ALLOWABLE PRESSURE DROP: 2 IN HG

MEDICAL GAS TABLE

Gas	No. of Outlets	Flow per Outlet (SCFM)	Total Demand (SCFM)	Diversity Factor	Design Demand (SCFM)	Pipe Size	Developed Length (ft)	Pressure Drop (psi)	Required Pressure
Oxygen (O2)	7	10	70	100%	63	3/4"	80	4.8	50 psi
Nitrous Oxide (N2O)	3	10	30	100%	30	3/4"	71	1.19	50 psi
Vacuum (VAC)	3	3	9	100%	9	1"	133	1.90 (in Hg)	22 (in Hg)

Notes:
Medical gas calculations provided per NFPA 99 Section 5.1.3.6.
Flow rates shown are design basis values.
Diversity factor used: 100%.
Pipe sizing based on developed length including fittings.
Maximum allowable pressure drop: 5 psi.
System designed for 50 psi nominal outlet pressure (O2 and N2O).
Pressure drop calculated to most remote outlet.

1 PLUMBING. NOTES & DETAILS
SCALE: NTS

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PROJECT HISTORY:
8 B.D.C 03.18.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: MEDICAL GAS DETAILS

SHEET NUMBER: MG-0.02
SHEET:4 OF:5

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016-MG-0-02.pdf

PLUMBING KEY

1 ELECTRIC TANKLESS WATER HEATERS BY RHEEM MODEL: RTEX-06, 5.5 KW, 240V, 1ø. FIELD COORDINATE EXACT LOCATION.

2 VACUUM MODEL : CVTD0504B, SCFM: 38 (SCFM LISTED WITH ONE PUMP IN RESERVE PER NFPA 99) , HP 5(2), TANK (GAL) 120, 208/3/60

3 MACURCO N2O-SERIE: NITROUS OXIDE (N2O) SENSOR INSTALLATION HEIGHT: 12 TO 18 INCHES (30 TO 45 CM) FROM THE FLOOR.

PLACEMENT LOGIC: NITROUS OXIDE IS HEAVIER THAN AIR. IN THE EVENT OF A LEAK, THE GAS WILL "SINK" AND POOL ON THE FLOOR FIRST.

PURPOSE: TO DETECT ANESTHETIC GAS LEAKS THAT COULD CAUSE SEDATION OR TOXICITY TO STAFF.

4 MACURCO OX-6: OXIGEN (02) SENSOR

INSTALLATION HEIGHT: 5 FEET (1.5 METERS) FROM THE FLOOR.

PLACEMENT LOGIC: INSTALL AT BREATHING ZONE LEVEL. OXYGEN MIXES EVENLY WITH AIR, SO IT MUST BE MONITORED WHERE THE STAFF BREATHES.

PURPOSE: TO DETECT OXYGEN ENRICHMENT (FIRE RISK) OR DEPLETION (ASPHYXIATION RISK).

5 MACURCO DVP-120 DETECTION AND VENTILATION CONTROL PANEL

6 DIGITAL DUAL LINE REGULATOR AND MAIN NITROUS AND OXYGEN MANIFOLDS. REFER TO SPECIFICATIONS AND DETAIL. CONNECTED VOLUME OXYGEN WITH STORED VOLUME NOT TO EXCEED 3,000 CUBIC FEET. CONNECTED VOLUME NITROUS WITH STORED VOLUME NOT TO EXCEED 3,000 CUBIC FEET."

7 ALL MEDICAL GAS CYLINDERS SHALL BE TYPE 'H' HIGH-PRESSURE STEEL CYLINDERS WITH A NOMINAL DIAMETER OF 10 INCHES. OXYGEN (02) CYLINDERS SHALL HAVE A CAPACITY OF 7,079 LITERS (250 CU. FT.) AND UTILIZE CGA-540 VALVE CONNECTIONS. . NITROUS OXIDE (N20) CYLINDERS SHALL HAVE A CAPACITY OF 560 CU. FT. AND UTILIZE CGA-326 VALVE CONNECTIONS. PER NFPA 99 AND PROJECT SPECIFICATIONS, THE COMBINED CONNECTED AND STORED VOLUME PER GAS SHALL NOT EXCEED 3,000 CU. FT. WITHIN THE STORAGE ROOM. ALL CYLINDERS MUST BE SECURED TO THE WALL WITH DOUBLE RESTRAINTS."

8 1-1/2 TYPE L OR TYPE K VACUUM EXHAUST SHALL BE ROUTED UP THROUGH THE THE WALL PER NFPA 99 AND PROJECT DETAILS. THE CONTRACTOR SHALL FIELD VERIFY EXACT ROUTING AND COORDINATE PIPE SIZE WITH THE EQUIPMENT MANUFACTURER. THE EXHAUST DISCHARGE POINT ON THE WALL MUST BE LOCATED A MINIMUM OF 25 FEET FROM ALL OUTSIDE AIR INTAKES, AC FRESH AIR INTAKE , DOORS, WINDOWS, OR ANY OTHER BUILDING OPENINGS TO PREVENT CONTAMINATION."

9 SERVICE VALVES MUST BE PROVIDED WITH LOCKING HANDLES AND LABELS TO INDICATE THE SPECIFIC AREA SERVED. THE OWNER IS RESPONSIBLE FOR PROVIDING THE LOCKS.

10 ALL MEDICAL GAS AND VACUUM OUTLETS, INCLUDING THE EVC680 EVACUATION OUTLET, SHALL BE INSTALLED AT 60" (5'-0") ABOVE FINISHED FLOOR (A.F.F.) UNLESS OTHERWISE NOTED. ZONE VALVE BOXES AND ALARM PANELS SHALL ALSO BE CENTERED AT 60" A.F.F. TO ENSURE ACCESSIBILITY AND VISIBILITY PER NFPA 99." FIELD COORDINATE FINAL LOCATION

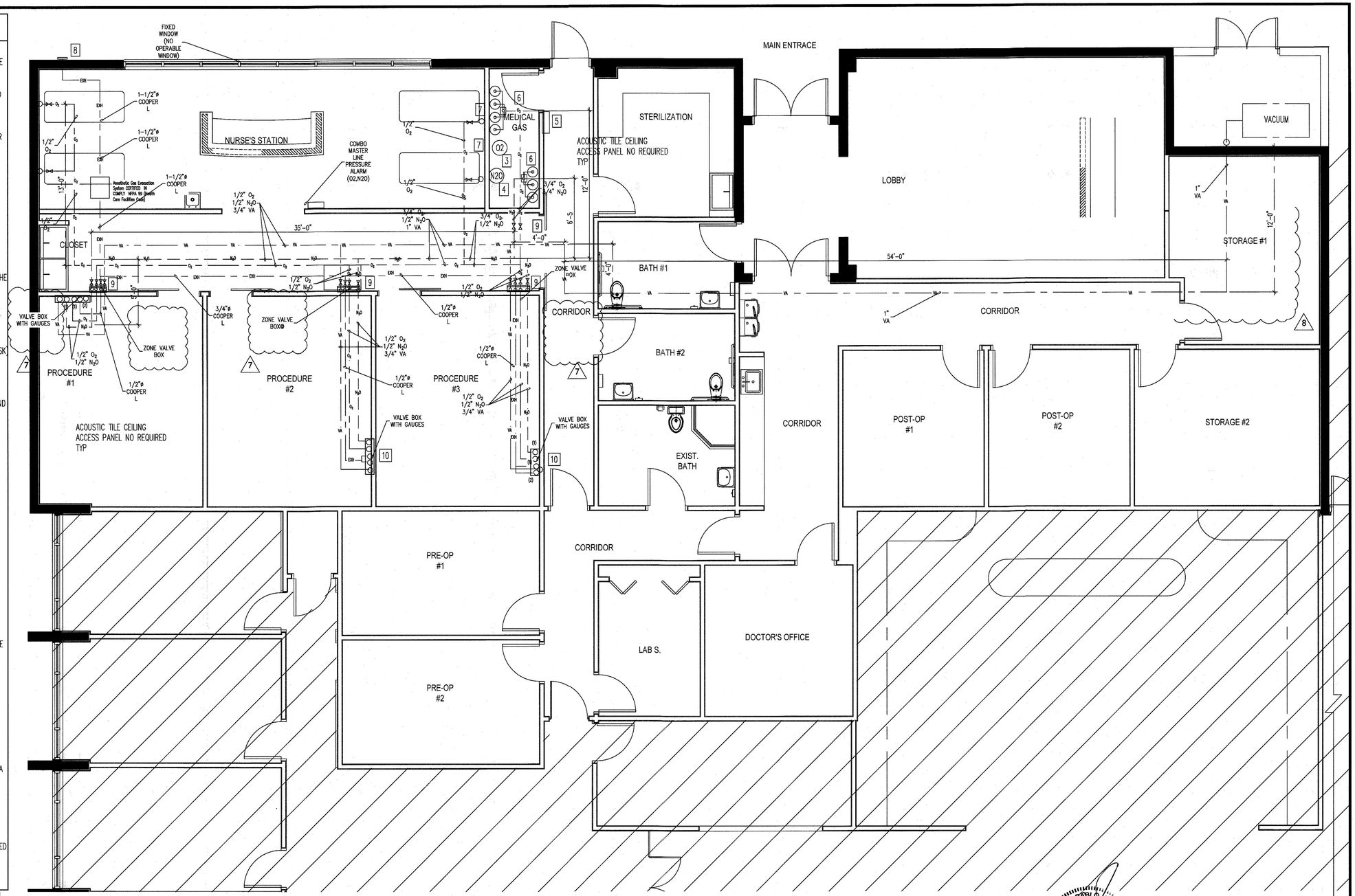
LEGEND

O_2 : OXYGEN — O_2 — O_2 —

N_2O: NITROUS OXIDE — N_2O — N_2O —

EXH : NITROUS OXIDE EXHAUST — EXH — EXH —

VA VACUUM — VA — VA —



1 GROUND FLOOR PLAN. MEDICAL GAS

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

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OWNERS INFORMATION:

PROJECT HISTORY:
6 B.D.C 02.12.2026
7 B.D.C 02.23.2026

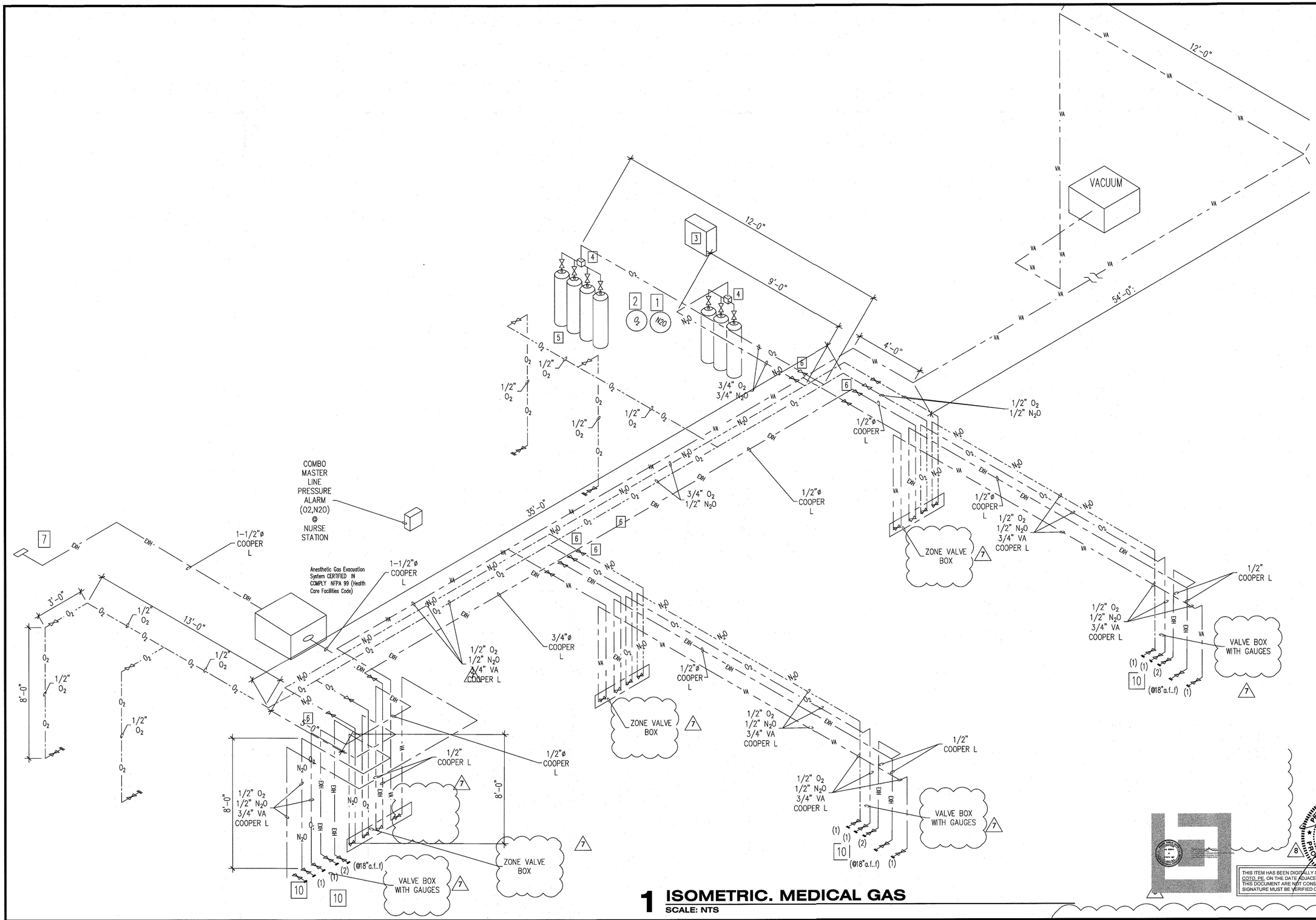
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: GROUND FLOOR PLAN MEDICAL GAS

SHEET NUMBER: MG-1.01

SHEET: 4 OF: 5

Miami Dade County Department of Regulatory and Economic Resources - Job Copy
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PLUMBING KEY

1 MACURCO N20-SERIE: NITROUS OXIDE (N20) SENSOR INSTALLATION HEIGHT: 12 TO 18 INCHES (30 TO 45 CM) FROM THE FLOOR.

PLACEMENT LOGIC: NITROUS OXIDE IS HEAVIER THAN AIR. IN THE EVENT OF A LEAK, THE GAS WILL "SINK" AND POOL ON THE FLOOR FIRST.

PURPOSE: TO DETECT ANESTHETIC GAS LEAKS THAT COULD CAUSE SEDATION OR TOXICITY TO STAFF.

2 MACURCO OX-6: OXIGEN (02) SENSOR

INSTALLATION HEIGHT: 5 FEET (1.5 METERS) FROM THE FLOOR.

PLACEMENT LOGIC: INSTALL AT BREATHING ZONE LEVEL. OXYGEN MIXES EVENLY WITH AIR, SO IT MUST BE MONITORED WHERE THE STAFF BREATHES.

PURPOSE: TO DETECT OXYGEN ENRICHMENT (FIRE RISK) OR DEPLETION (ASPHYXIATION RISK).

3 MACURCO DVP-120 DETECTION AND VENTILATION CONTROL PANEL

4 DIGITAL DUAL LINE REGULATOR AND MAIN NITROUS AND OXYGEN MANIFOLDS. REFER TO SPECIFICATIONS AND DETAIL. CONNECTED VOLUME OXYGEN WITH STORED VOLUME NOT TO EXCEED 3,000 CUBIC FEET. CONNECTED VOLUME NITROUS WITH STORED VOLUME NOT TO EXCEED 3,000 CUBIC FEET."

5 ALL MEDICAL GAS CYLINDERS SHALL BE TYPE 'H' HIGH-PRESSURE STEEL CYLINDERS WITH A NOMINAL DIAMETER OF 10 INCHES. OXYGEN (02) CYLINDERS SHALL HAVE A CAPACITY OF 7,079 LITERS (250 CU. FT.) AND UTILIZE CGA-540 VALVE CONNECTIONS. . NITROUS OXIDE (N20) CYLINDERS SHALL HAVE A CAPACITY OF 560 CU. FT. AND UTILIZE CGA-326 VALVE CONNECTIONS. PER NFPA 99 AND PROJECT SPECIFICATIONS, THE COMBINED CONNECTED AND STORED VOLUME PER GAS SHALL NOT EXCEED 3,000 CU. FT. WITHIN THE STORAGE ROOM. ALL CYLINDERS MUST BE SECURED TO THE WALL WITH DOUBLE RESTRAINTS."

6 SERVICE VALVES MUST BE PROVIDED WITH LOCKING HANDLES AND LABELS TO INDICATE THE SPECIFIC AREA SERVED. THE OWNER IS RESPONSIBLE FOR PROVIDING THE LOCKS.

7 1-1/2 TYPE L OR TYPE K VACUUM EXHAUST SHALL BE ROUTED UP THROUGH THE THE WALL PER NFPA 99 AND PROJECT DETAILS. THE CONTRACTOR SHALL FIELD VERIFY EXACT ROUTING AND COORDINATE PIPE SIZE WITH THE EQUIPMENT MANUFACTURER. THE EXHAUST DISCHARGE POINT ON THE ROOF MUST BE LOCATED A MINIMUM OF 25 FEET FROM ALL OUTSIDE AIR INTAKES, AC FRESH AIR INTAKE , DOORS, WINDOWS, OR ANY OTHER BUILDING OPENINGS TO PREVENT CONTAMINATION."

LEGEND

O_2 : OXYGEN — O_2 —
N_2O: NITROUS OXIDE — N_2O — N_2O —
EXH : NITROUS OXIDE EXHAUST — EXH — EXH —
VA VACUUM — VA — VA —

1 ISOMETRIC. MEDICAL GAS

SCALE: NTS

PABLO COTO LICENSE No. 85311 STATE OF FLORIDA PROFESSIONAL ENGINEER

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DRAWN BY: RHR

REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd AVE AMBULATORY SURGICAL CENTER
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
6 B.D.C 02.12.2026
7 B.D.C 02.23.2026
8 B.D.C 03.18.2026

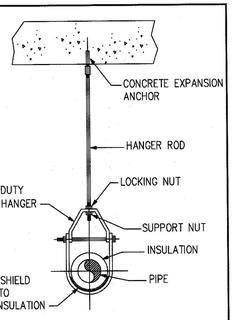
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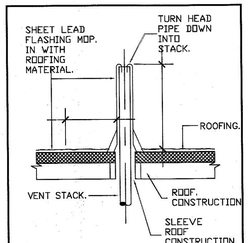
SHEET NUMBER: MG-2.0

SHEET: 5 OF: 5

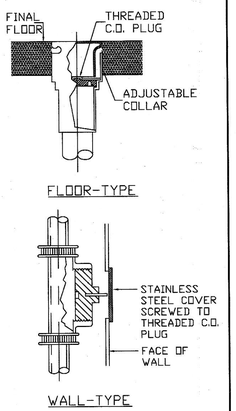
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PIPE HANGER
N.T.S.



VENT THRU ROOF DETAIL
NOT TO SCALE



TYPICAL CLEANOUT DETAILS
NOT TO SCALE

PLUMBING FIXTURE CONNECTION SCHEDULE

FIXTURE TYPE	TRAP SIZE	C.W.	H.W.	* FLOW RATE (gpm)	DESCRIPTION
WATER CLOSET	3"	½"	–	–	1.28 GALLONS PER FLUSHING CYCLE
LAVATORY	1-1/2"	½"	½"	1.5	w/ ANTI-SCALD VALVES
BATH TUB	2"	½"	½"	4	w/ ANTI-SCALD VALVES
SHOWER	2"	¾"	¾"	1.5	w/ ANTI-SCALD VALVES
BIDET	2"	½"	½"	2	w/ ANTI-SCALD VALVES
KITCHEN SINK	2"	½"	½"	1.5	w/ GARBAGE DISPOSAL UNIT
DISHWASHER	2"	–	½"	–	5.8 GALLONS PER LOAD (4GALLONS PER CYCLE) (ENERGY STAR/WATER SENSE CERTIFIED) DISCHARGE INTO GARBAGE DISPOSAL UNIT THROUGH AIR BREAK OR AIR GAP BRANCH WYE FITTING ACCORDING FBC PL 802.2.
SINK	1-1/2"	½"	½"	1.5	
WASHING MACHINE	2"	½"	½"	–	24 GALLONS PER LOAD (6 GALLONS PER CYCLE) (ENERGY STAR/WATER SENSE CERTIFIED)
REFRIGERATOR	–	½"	–	–	PROVIDE S.O.V., IN-LINE FILTER & BACKFLOW DEVICE.

NOTE: ALL DRAIN PIPING UNDER SLAB SHALL BE 2" MIN, 2" & LESS @ DRAIN @ 1/4" DROP, 3" & 4" AND UP @ DRAIN @ 1/8" DROP

* ALL FLOW RATE SHALL BE PER F.B.C. TABLE 604.4 & AMENDMENTS BY MIAMI-DADE ORD. ON CHAPTER 8-31.

PIPING MATERIALS SCHEDULE

SERVICE	SIZE	MATERIAL	SCHEDULE/TYPE	INSULATION TYPE	INSULATION THICKNESS	REMARKS
COLD WATER	ALL	CPVC	ASTM D 2846; ASTM F 441; ASTM F 442; CSA B137.6	FG	1"	SEE NOTE 2
HOT WATER	ALL	CPVC	ASTM D 2846; ASTM F 441; ASTM F 442; CSA B137.6	FG	1"	SEE NOTE 2
SANITARY	ALL	C.I. OR P.V.C.	SERVICE WEIGHT	NONE	–	NO HUB
VENT	ALL	C.I. OR P.V.C.	SCH. 40	NONE	–	SEE NOTE 1
ST BELOW GRADE	ALL	C.I. OR P.V.C.	SERVICE WEIGHT	NONE	–	NO HUB
ST ABOVE GRADE	ALL	C.I. OR P.V.C.	SERVICE WEIGHT	FG	1"	NO HUB
CONDENSATE	ALL	P.V.C.	SCH. 40	FG	1"	SEE NOTE 3

NOTES:
1. WASTES AND VENT PIPING IN PLENUM SPACE SHALL BE SERVICE WEIGHT CAST IRON, NO HUB.
2. FIBERGLASS PIPE INSULATION: MINERAL OR GLASS FIBERS BONDED WITH A THERMOSETTING RESIN. SEMIRIGID BOARD MATERIAL WITH FACTORY-APPLIED ASJ COMPLYING WITH ASTM C 1393, OR WITH PROPERTIES SIMILAR TO ASTM C 612, NOMINAL DENSITY IS 2.5 LB/CU. FT. OR MORE. THERMAL CONDUCTIVITY (K VALUE) AT 100°F (55°C) IS 0.29 BTU X IN./H.X SQ.FT. LOSS. F (0.042 W/M X K) OR LESS. ALL SERVICE JACKET (ASJ): WHITE, KRAFT-PAPER, FIBERGLASS-REINFORCED SCRIM WITH ALUMINUM-FOIL BACKING; COMPLYING WITH ASTM C 1136, TYPE MANUFACTURERS; A. CERTAINEED CORP., B. JOHNS MANVILLE, C. KNAUF INSULATION, D. OMENS CORNING.
3. HEAT TRACE FREEZE LINE. COORDINATE WITH KITCHEN EQUIPMENT PROVIDER AND FREEZER REQUIREMENTS.

WATER HAMMER ARRESTOR SCHEDULE.

= INSTALLED ARRESTORS SHALL BE APPROVED DEVICE BY FLORIDA PLUMBING CODE. ALL SUPPLY PIPING SHALL HAVE ARRESTOR THE SAME SIZE AS CONNECTION SIZE UP TO 1" I.E. PROVIDE P.D.I. SIZE "C" FOR 1" OR LARGER WATER SUPPLY TO FIXTURES, P.D.I. SIZE "B" FOR 3/4" SUPPLY AND P.D.I. SIZE "A" FOR 1/2" SUPPLY.

* P.D.I. SIZE	CONNECTION SIZE
A (1-11 F.U.)	1/2"
B (12-32 F.U.)	3/4"
C (33-60 F.U.)	1"

* P.D.I.= PLUMBING AND DRAINAGE INSTITUTE STANDARD WH-201

PLUMBING GENERAL NOTES

1. CONTRACTOR SHALL COMPLY WITH ALL APPLICABLE CODES AND GOVERNING AUTHORITIES. I.E.: FLORIDA BUILDING CODE 2023 8TH EDITION PLUMBING, AND ORDINANCES.
2. ALL SANITARY PIPING 2-1/2" OR LESS SHALL HAVE A 1/4" PER FOOT SLOPE. ALL SANITARY PIPING 3" OR LONGER SHALL HAVE A 1/8" PER FOOT SLOPE UNLESS OTHERWISE NOTED. ALL STORM WATER PIPING 2-1/2" SHALL HAVE 1/4" PER FOOT MINIMUM HORIZONTAL SLOPE. ALL STORM WATER PIPING 3" OR LARGER SHALL HAVE 1/8" PER FOOT MINIMUM SLOPE UNLESS OTHERWISE INDICATED.
3. VALVES AND FITTINGS SHALL BE OF SAME SIZE OF LINE ON WHICH THEY ARE LOCATED, UNLESS OTHERWISE INDICATED ON DRAWINGS.
4. INSTALL WATER HAMMER SHOCK ARRESTERS AT EACH FIXTURE OR BATTERY OF FIXTURES WHERE REQUIRED. ARRESTORS SHALL BE FACTORY FABRICATED. INSTALL ARRESTORS AND SIZE PER PLUMBING AND DRAINAGE INSTITUTE STANDARD P.D.I. WH-201. ACCEPTABLE MANUFACTURERS: JOSAM, WATTS AND SIOUX CHIEF. AIR CHAMBERS SHALL NOT BE CONSIDERED AN EQUAL TO WATER ARRESTORS AS SPECIFIED.
5. CONTRACTOR IS RESPONSIBLE FOR MAINTAINING FIRE RATING AND WEATHERPROOFING INTEGRITY OF ALL PIPING AND PENETRATIONS.
6. ALL WATER SUPPLY AND SANITARY LINES SHALL RUN AS CLOSE TO PLANS AS POSSIBLE WITH NO CHANGES SIZING.
7. CONTRACTOR SHALL BE RESPONSIBLE FOR PROVIDING ALL NECESSARY SUPPORTING DEVICES FOR FIXTURES.
8. CHANGES IN THE DIRECTION OF SANITARY AND STORM DRAINAGE PIPING SHALL NOT BE MADE WITH FITTINGS WHICH WILL CAUSE EXCESSIVE REDUCTION IN THE VELOCITY OF FLOW OR CREATE ANY OTHER ADVERSE EFFECT, I.E.: USE SANITARY TEE IN HORIZONTAL CONNECTION. USE OF DOUBLE SANITARY TEE IN A VERTICAL STACK, USE OF SHORT RADIUS FITTINGS FOR BRANCH TO HOUSE DRAIN OR STACK CONNECTION.
9. CONTRACTOR SHALL GIVE 24 HOURS NOTICE TO APPLICABLE UTILITY COMPANY PRIOR TO PERFORMING WORK INVOLVING UTILITIES.
10. ALL DRAINAGE PIPING SHALL BE MARKED WITH THE SEAL OF APPROVAL OF NATIONAL SANITATION FOUNDATION.
11. WHERE SANITARY SEWER LINES CROSS UNDERGROUND WATER SUPPLY LINES INSTALLATION SHALL COMPLY WITH THE 8TH EDITION 2023 OF FLORIDA PLUMBING CODE, ARTICLE 603.2 CONSTRUCTED OF DUCTILE IRON PIPE (10' EACH SIDE OF WATER MAIN) OR THE WATER LINES SHOULD BE MODIFIED TO PROVIDE 8" MINIMUM CLEARANCE.
12. ALL FLOOR DRAINS SHALL BE PROVIDED WITH A TRAP PRIMER VALVE AND FITTINGS UNLESS NOTED OTHERWISE.
13. THE PLUMBING CONTRACTOR MAY BE REQUIRED TO DROP PIPE OUTSIDE OF THE BUILDING TO REQUIRED DEPTH TO PROVIDE CONNECTION TO AREA DEVELOPMENT UTILITY STUB. ALL DROPS IN DEPTH SHALL BE MADE WITH USE OF 45° FITTINGS.
14. ROUTE ALL PIPING CONCEALED ABOVE CEILINGS, WITHIN WALLS, OR IN CHASES. EXPOSED PIPING SHALL BE SLOPED AND PAINTED TO MATCH ARCHITECTURAL FINISHES. PIPING IN MECHANICAL ROOMS MAY BE EXPOSED.
15. SLEEVE AND FIRE STOP ALL PENETRATIONS (IF ANY) OF RATED WALLS, FLOORS, CEILINGS, ETC., IN ACCORDANCE WITH APPLICABLE U.L. STANDARDS AND LOCAL CODES TO MAINTAIN RATINGS. REFER TO SPECIFICATIONS AND ARCHITECTURAL DRAWINGS FOR RATED WALLS, CEILINGS AND FLOOR INFORMATION.
16. ALL WATER PIPING INSTALLED IN EXTERIOR WALLS BE PLACED ON THE INTERIOR SIDE WALL. THE WALL INSULATION SHALL BE PLACED ON THE EXTERIOR SIDE OF THE PIPE.
17. SEE RISER DIAGRAMS FOR BRANCH PIPING DETAILS AND SIZES NOT SHOWN ON PLANS.
18. COLD AND HOT WATER PIPING SHALL BE COPPER WATER TUBE (ASTM B88) TYPE "L" WITH WROUGHT-COPPER (ANSI 16.22), OR CAST BRASS (ANSI B16.18). PRESSURE FITTINGS AND ALLOY GRADE (ANSI-ASTM B32) 95TA LEAD-FREE SOLDER JOINTS. DISINFECT WATER PIPING AFTER PRESSURE TEST (WITH CHLORINE SOLUTION 50 MG-L) FOR 24 HOURS. FLUSH LINES CLEAN AFTER COMPLETION.
19. SOIL, WASTE AND VENT PIPING SHALL BE P.V.C.: ASTM D2665 SCHEDULE 40. FITTINGS: P.V.C. DWV, JOINTS: ASTM WELD. PROVIDE CAST IRON PIPE AND FITTINGS FOR SOIL, WASTE AND VENT PIPING LOCATED IN CEILING PLENUMS.
20. PROVIDE CLEANOUTS AT BASE OF EACH VERTICAL STACK, AT EACH CHANGE OF DIRECTION OF HORIZONTAL RUNS AND AT 100 FOOT INTERVALS OF HORIZONTAL RUNS FOR SANITARY AND STORM PIPING.
21. PROVIDE ACCESS PANELS TO ALL VALVES WITHIN CHASSES OR ABOVE NON-ACCESSIBLE CEILINGS. REFER TO ARCHITECTURAL DRAWINGS FOR CEILINGS TYPES.
22. METERING AND SITE UTILITY CONNECTIONS SHALL BE PROVIDED ON SITE UTILITY DRAWINGS. ALL SERVICES SHOWN ON THIS SET OF PLANS TERMINATE 5'-0" FROM BUILDING, UNLESS SHOWN OTHERWISE ON DRAWINGS. PLUMBING CONTRACTOR SHALL MAKE FINAL CONNECTIONS TO SITE UTILITIES.
23. FURNISH AND INSTALL HOSE BIBBS AND/OR WALL HYDRANTS 24" ABOVE FINISH GRADE/FLOOR AND PROVIDE VACUUM BREAKERS.
24. SEE ARCHITECTURAL DRAWINGS FOR EXACT LOCATIONS OF ROOF DRAINS, PLUMBING FIXTURE MOUNTING HEIGHTS AND DIMENSIONS.
25. CONTRACTOR SHALL VERIFY INVERT ELEVATIONS OF EXISTING SEWERS IN WHICH NEW SEWER LINES ARE TO BE CONNECTED PRIOR TO INSTALLATION.
26. CONTRACTOR SHALL INSTALL DIELECTRIC UNIONS AT CONNECTIONS OF DISSIMILAR METALS.
27. CONTRACTOR SHALL ROUGH-IN ALL WASTE AND SUPPLIES TO SPECIAL EQUIPMENT ACCORDING TO MANUFACTURERS SHOP DRAWINGS AND MAKE FINAL CONNECTIONS. ALL SUPPLIES SHALL BE VALVED. INSTALL VACUUM BREAKERS WHERE REQUIRED BY CODE.
28. PROVIDE REDUCED PRESSURE BACKFLOW PREVENTERS FOR DOMESTIC WATER SUPPLY CONNECTIONS AS REQUIRED BY CODE.
29. ALL BELOW GRADE/SLAB COPPER PIPE SHALL BE PLACED WITHIN COPPER SLEEVE (10 MIL) POLYETHYLENE PLASTIC SLEEVING. EXTEND SLEEVING ABOVE GRADE/SLAB.
30. CONTRACTOR SHALL REFER TO ARCHITECTURAL DRAWINGS FOR EXACT LOCATION OF FLOOR DRAINS (IF ANY) LOCATED WITHIN TOILET ROOMS.
31. PRESSURE REDUCING VALVES SHALL BE INSTALLED ON BRANCH LINES SERVING FIXTURES AND/OR EQUIPMENT WHEN THE PRESSURE IN THE LINE DISCHARGE INTO SANITARY SYSTEM.
32. COORDINATE EXACT LOCATION OF FLOOR DRAINS FOR HVAC EQUIPMENT WITH MECHANICAL CONTRACTOR. CONDENSATE PIPING SHALL NOT DISCHARGE INTO SANITARY SYSTEM.
33. ROUTE WATER LINES TIGHT TO STRUCTURE. COORDINATE ROUTING TO AVOID CONFLICTS WITH OTHERS DISCIPLINES.
34. IF THE INTENT OF THE DRAWINGS AND/OR SPECIFICATIONS IS UNCLEAR OR HAS MORE THAN ONE INTERPRETATION, IT SHALL BE BROUGHT TO THE ATTENTION OF THE ARCHITECT/ENGINEER IN WRITING BEFORE THE SUBMISSION OF BIDS. THE ARCHITEC/ENGINEER SHALL MAKE CORRECTIONS AND/OR PROVIDE EXPLANATION IN WRITING.
35. PLANS AND SPECIFICATIONS ARE INTENDED AS A GENERAL DESCRIPTION OF THE WORK TO BE PERFORMED. ALL ITEMS NOT SPECIFICALLY MENTIONED OR SHOWN, BUT NO NECESSARY FOR THE COMPLETION OF THE INSTALLATION, SHALL BE FURNISHED AND INSTALLED BY THIS CONTRACTOR. THE CONTRACTOR SHALL ACQUAINT HIMSELF WITH THE MECHANICAL, ARCHITECTURAL, STRUCTURAL AND ELECTRICAL PLANS PRIOR TO SUBMITTING HIS FINAL BID. NO ADDITIONAL COMPENSATION WILL BE ALLOWED DUE TO CONTRACTORS FAILURE TO FAMILARIZE HIMSELF WITH THE PLANS.
36. THE CONTRACTOR SHALL BASE HIS PROPOSAL UPON THE EQUIPMENT AS SCHEDULED OR SPECIFIED, USING THE MANUFACTURERS AND EQUIPMENT SPECIFIED ON THE DRAWINGS. IF MORE THAN ONE MANUFACTURER IS SPECIFIED FOR ONE ITEM, ANY ONE OF THE MANUFACTURERS LISTED MAY BY USED IN THIS CONTRACTOR'S PROPOSAL. IF THIS CONTRACTOR WISHES TO USE EQUIPMENT NOT SPECIFIED, HE MUST AT THE TIME OF BIDING SUBMIT SEPARATELY ON LETTERHEAD STATIONARY OF THE BIDDER, THE EQUIPMENT HE WOULD SUBSTITUTE AND THE COST TO BE ADDED OR TO BE DEDUCTED FROM HIS PROPOSAL.
37. THE CONTRACTOR IS EXPECTED TO ORDER ALL MATERIALS IN SUFFICIENT TIME TO AVOID DELAYING THE COMPLETION OF THE PROJECT. DELAY IN DELIVERY WILL NOT BE CONSIDERED A JUSTIFIABLE REASON FOR SUBMISSION OF SUBSTITUTE MATERIALS
38. DO NOT PENETRATE WALL FOOTINGS WITH PIPING. COORDINATE WITH GENERAL CONTRACTOR TO DROP FOOTINGS AS REQUIRED TO CLEAR PLUMBING SERVICES WHERE ABSOLUTELY NECESSARY. ALL PIPING PENETRATING A BEARING WALL OR FOOTING MUST BE SLEEVED AND LOCATION APPROVED BY STRUCTURAL ENGINEER.
39. REFER TO PLANS FOR VENT THRU ROOF (V.T.R.) PIPES SIZES AND LOCATIONS. LOCATE V.T.R. A MIN. 10' HORIZONTAL FROM ANY BUILDING OPENING OR FRESH AIR INTAKE. EXTEND V.T.R. 12" ABOVE ROOF SURFACE. IF 10' DISTANCE CANNOT BE ACHIEVED LOCATE V.T.R. 2' ABOVE ADJACENT TOP OF FRESH AIR INTAKE OR BUILDING OPENINGS. PROVIDE 1" FIBERGLASS INSULATION WITH ALL-SERVICE JACKET ON VENT PIPE INSIDE BUILDING WITHIN 6' OF V.T.R. LOCATION. VERIFY FLASHING AND COUNTERFLASHING AND COORDINATE INSTALLATION WITH ROOFING CONTRACTOR.

PLUMBING SYMBOL LEGEND

A	- MEDICAL AIR	A	- MEDICAL AIR
AP	- ALARM PANEL	AV	- ACID VENT
APF	- ABOVE FINISH FLOOR	AW	- ACID WASTE
AW	- ACID WASTE	CD	- CONDENSATE DRAIN
AV	- ACID VENT	CDU	- CONDENSATE DRAIN UNDERGROUND
BV	- BALANCING VALVE	CA	- COMPRESSED AIR
CA	- COMPRESSED AIR	DI	- DEIONIZED WATER
CB	- CATCH BASIN		- DOMESTIC COLD WATER
CD	- CONDENSATE DRAIN		- DOMESTIC HOT WATER
CDU	- CONDENSATE DRAIN UNDERGROUND		- DOMESTIC HOT WATER RECIRCULATING
CFH	- CUBIC FEET PER HOUR	FOR	- FUEL OIL RETURN
CO	- CLEANOUT	FOS	- FUEL OIL SUPPLY
CONT	- CONTINUATION	FOV	- FUEL OIL VENT
CW	- DOMESTIC COLD WATER	G	- GAS
DI	- DEIONIZED WATER	GL	- KITCHEN WASTE (GREASE LINE)
DN	- DOWN	LG	- LAB GAS LINE
DS	- DOWNSPOUT	N	- NITROGEN
DWBP	- DOMESTIC WATER BOOSTER PUMP	N2O	- NITROUS OXIDE
DWG	- DRAWING	NP	- NON-POTABLE WATER
EEW	- EMERGENCY EYE WASH	O	- OXYGEN
ESH	- EMERGENCY SHOWER	RWL	- RAIN WATER LEADER
EXIST	- EXISTING	RWLO	- RAIN WATER LEADER OVERFLOW
°F	- DEGREE FAHRENHEIT		- SANITARY
FD	- FLOOR DRAIN		- SANITARY VENT
FCU	- FAN COIL UNIT	ST	- STORM DRAIN
FOR	- FUEL OIL RETURN	STO	- STORM DRAIN OVERFLOW
FOS	- FUEL OIL SUPPLY	SW	- SOFT COLD WATER
FOV	- FUEL OIL VENT	VAC	- VACUUM(AIR)
FRP	- FIBERGLASS REINFORCED PIPING	V	- MEDICAL VACUUM
FS	- FLOOR SINK	WO	- WASTE OIL
G	- GAS	WOV	- WASTE OIL VENT
GPH	- GALLONS PER HOUR		- WATER METER
GPM	- GALLONS PER MINUTE		- HOSE BIBB
GR	- KITCHEN WASTE(GREASE)		- CLEAN OUT PLUG
HDO	- HEMODIALYSIS OUTLET		- WALL CLEANOUT
HB	- HOSE BIBB		- FLOOR CLEAN OUT
HW	- DOMESTIC HOT WATER		- FLOOR DRAIN
HWBP	- DOMESTIC HOT WATER BOOSTER PUMP		- ROOF DRAIN OR OVERFLOW DRAIN
HWR	- DOMESTIC HOT WATER RECIRCULATING		- CATCH BASIN
IE	- INVERT ELEVATION		- CONNECT TO EXISTING
IW	- INDIRECT WASTE		- FLOOR SINK
KW	- KILOWATT		- VALVE IN VALVE BOX
LBS	- POUNDS		- BUTTERFLY VALVE
LG	- LAB GAS LINE		- GATE VALVE
MG	- MEDICAL GAS LINE		- GATE VALVE(ANGLE)
MGO	- MEDICAL GAS OUTLET		- GLOBE VALVE
MGV	- MEDICAL GAS VALVE BOX	CR	- BALANCING VALVE
MH	- MANHOLE		- CHECK VALVE(SWING)
N	- NITROGEN		- PRESSURE REDUCING VALVE
N2O	- NITROUS OXIDE		- SOLENOID OPERATED VALVE
NC	- NORMALLY CLOSED		- RELIEF OR SAFETY VALVE
NIC	- NOT IN CONTRACT		- VALVE ON RISER
NCP	- NITROGEN CONTROL PANEL		- GAS COCK ON RISER
NHC	- NO-HUB COUPLING		- GAS COCK
NO	- NORMALLY OPEN		- BALANCING COCK
NP	- NON-POTABLE WATER		- GAS PRESSURE REGULATOR
NTS	- NOT TO SCALE		- BUSHING
O	- OXYGEN		- CAP
OD	- OUTSIDE DIAMETER OR OVERFLOW DRAIN		- CONNECTION, TOP
PRV	- PRESSURE REDUCING VALVE		- CONNECTION, BOTTOM
PSI	- POUNDS PER SQUARE INCH		- CROSS
PVC	- POLYVINYL CHLORIDE PIPE		- DIRECTION OF FLOW
RO	- REVERSE OSMOSIS		- ELBOW, 90 °
RD	- ROOF DRAIN		- ELBOW, 45 °
RP	- RECIRCULATING PUMP		- ELBOW, TURNED UP
RPBP	- REDUCED PRESSURE BACKFLOW PREVENTER		- ELBOW, TURNED DOWN
RWL	- RAIN WATER LEADER		- LATERAL
RWLO	- RAIN WATER LEADER OVERFLOW		- REDUCER, CONCENTRIC
SAN	- SANITARY		- REDUCER, ECCENTRIC STRAIGHT INVERT
SF	- SQUARE FEET		- REDUCER, ECCENTRIC STRAIGHT CROWN
SH	- SHEET		- TEE
ST	- STORM DRAIN		- TEE, TURNED UP
STO	- STORM DRAIN OVERFLOW		- TEE, TURNED DOWN
SW	- SOFT COLD WATER	RPBP	- REDUCED PRESSURE BACKFLOW PREVENTER WITH STRAINER
V	- VENT OR MEDICAL VACUUM		
VC	- VACUUM CLEANING		
VEL	- VELOCITY		
VTR	- VENT THRU ROOF		
WTR	- WATER		
WHA	- WATER HAMMER ARRESTER		

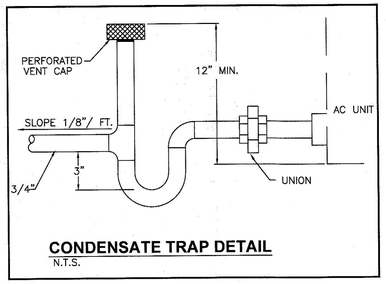
AP-24 — NUMBER DESIGNATION; FLOOR PANEL IS LOCATED; ALARM PANEL

TYPE OF RISER EXAMPLE: SANITARY; SAN 3"S 12 4"V — RISER PIPING SIZE(S); RISER NUMBER DESIGNATION

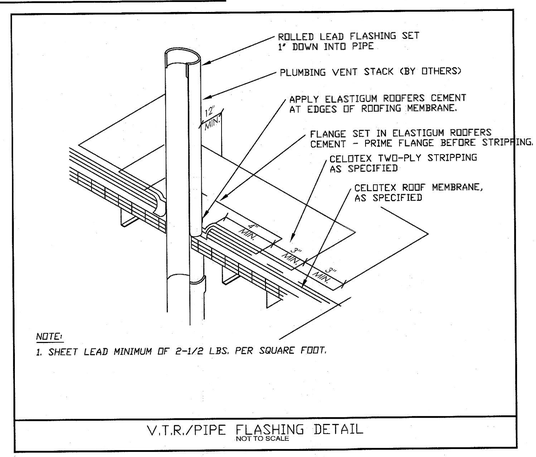
SERVICE PIPING — MGO-1 = MEDICAL GAS VALVE BOX, SEE PLANS FOR QUANTITY OF VALVES REQUIRED.

SERVICE PIPING — MGO = MEDICAL GAS OUTLET SEE NOTES ON EACH SHEET FOR QUANTITY OF OUTLETS AND VACUUM SLIDES REQUIRED.

NOTE: SOME SYMBOLS SHOWN ON THIS LEGEND MAY NOT PERTAIN TO THIS PROJECT.

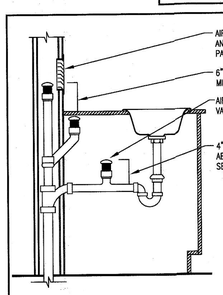


CONDENSATE TRAP DETAIL
N.T.S.



NOTE:
1. SHEET LEAD MINIMUM OF 2-1/2 LBS. PER SQUARE FOOT.

V.T.R./PIPE FLASHING DETAIL
NOT TO SCALE



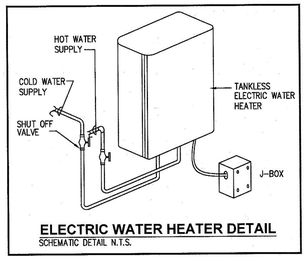
OPTION #1: WHEN THE VALVE IS LOCATED IN A WALL RECESS BOX A REMOVABLE LOUVER SHALL BE INSTALLED FOR VENTILATION, ACCESS NO INSPECTION.

OPTION #2: THE VALVE MAY BE LOCATED ON A DOUBLE SHORT VERTICAL OFFSET BELOW THE FLOOD LEVEL RIM OF THE FIXTURE BEING SERVED.

OPTION #3: THE VALVE MAY BE LOCATED ON THE HORIZONTAL FIXTURE DRAIN ARM A MINIMUM OF FOUR INCHES ABOVE THE FIXTURE TRAP.

NOTES:
1. FIXTURE AND BRANCH TERMINALS ONLY ON SAME FLOOR LEVEL.
2. DO NOT REMOVE VALVE FROM PIPEWORK, SEWER GASSES CAN ENTER. 3. USE P.T.F.E. (TEFLON) TAPE OR SEALANT ON THE THREADS TO ENSURE AIRTIGHT SEAL.
4. SCREW VALVE INTO 2 INCH FEMALE ADAPTER TO CONNECT BY SOLVENT WELD TO PIPEWORK.
5. DFU (DRAIN FIXTURE UNIT) 2 INCH = 3 DFU'S.
6. MAXIMUM BRANCH FIXTURE LOAD 2 INCHES = 6 DFU'S.
7. ALL DWV SYSTEMS MUST HAVE A MAIN VENT EXTENDED TO THE OPEN AIR.
8. DO NOT INSTALL ON STACK VENTS/VENT STACKS, OR RELIEF VENTS.

AIR ADMITTANCE VALVE MOUNTING DETAIL
NOT TO SCALE



ELECTRIC WATER HEATER DETAIL
SCHEMATIC DETAIL N.T.S.

PLUMBING LEGEND

	SANITARY SEWER LINE
	VENT LINE
CD	CONDENSATE DRAINAGE LINE
CTG	CLEANOUT TO GRADE
WCO	WALL CLEANOUT
FD	FLOOR DRAIN
	COLD WATER (C.W.) LINE
	HOT WATER (H.W.) LINE
PT	PRESS. & TEMP. RELIEF LINE
	GATE VALVE
	CHECK VALVE
	PRESS. & TEMP. RELIEF VALVE
	UNION
	HOSE BIBB
VB	VACUUM BREAKER
VIV	VALVE IN VERTICAL
VTR	VENT THRU ROOF
AFF	ABOVE FINISHED FLOOR LEVEL
FE	FIRE EXTINGUISHER ON WALL BRACKET (2A-10BC)
FEC	FIRE EXTINGUISHER IN CABINET (2A-10BC)
FCO	FLOOR CLEAN OUT

NOTE: SOME SYMBOLS SHOWN ON THIS LEGEND MAY NOT PERTAIN TO THIS PROJECT.

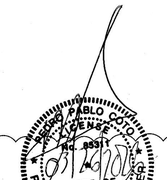
VALVE TAG & SCHEDULE NOTES:

1. VALVE TAGS: STAMPED OR ENGRAVED BRASS TAG WITH 1/4 INCH LETTERS FOR PIPING SYSTEM ABBREVIATION AND 1/2 INCH NUMBERS, WITH NUMBERING SCHEME.
2. VALVE SCHEDULES: FOR EACH PIPING SYSTEM ON STANDARD SIZE BOND PAPER, TABULATE VALVE NUMBER, PIPING SYSTEM, SYSTEM ABBREVIATION (AS SHOWN ON VALVE TAG), LOCATION OF VALVE (ROOM OR SPACE), NORMAL-OPERATING POSITION (OPEN, CLOSED, MODULATING), AND VARIATIONS FOR IDENTIFICATION. MARK VALVES FOR EMERGENCY SHUTOFF AND SIMILAR SPECIAL ISSUES.
   A. VALVE SCHEDULE FRAMES: GLASS DISPLAY FRAME FOR REMOVABLE MOUNTING ON WALLS FOR EACH PAGE OF VALVES SCHEDULE. INCLUDE MOUNTING SCREWS.
   B. FRAME: EXTRUDED ALUMINUM.

NOTES

1. ALL WASTE PIPING JOINTS SHALL BE SOLDERED), OR SOLVENT CEMENTED SO AS TO FORM A SOLID CONNECTION PER F.B.C. 2023 8TH EDITION 405.8 CRITERIA, IF NO ACCESS IS PROVIDED FOR SUCH PIPE CONNECTIONS.
2. A WATER-HAMMER ARRESTORS SHALL BE INSTALLED WHERE QUICK-CLOSING VALVES ARE UTILIZED, UNLESS OTHERWISE APPROVED. WATER-HAMMER ARRESTORS SHALL CONFORM TO ASSE 1010. ACCESS SHALL BE PROVIDED TO WATER-HAMMER ARRESTORS.
3. ALL STORM DRAINAGE RUN OFF FROM ROOF AND TERRACES SHALL TERMINATE AT GRASSY AREA, AND SHALL BE RETAINED WITHIN THE PROPERTY. SEE ARCHITECTURE PLAN.
4. AL AIR ADMITTANCE VALVES LOCATION SHALL BE PER F.B.C. 2023 8TH EDITION 917.3.1.
5. SEE ARCHITECTURAL PLANS FOR ALL OCCUPANCY LOADS OF COMMON AREAS.
6. ALL PLUMBING WATER DEMOE PROVIDE SHUTT-OFF VALVE.
7. PLUMBING FIXTURES SHALL COMPLY WITH REFERENCED STANDARDS AS PER F.B.C. 8TH EDITION 2023 PLUMBING CHAPTER:4.
8. ALL THE CIRCULATING PIPING INSULATION SHALL COMPLY BY F.B.C. 8TH EDITION 2023 SECTION 607.





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1 PLUMBING. NOTES & DETAILS
SCALE: NTS

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DRAWN BY: RHR

REVISED BY: JAHL

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PROJECT NAME:
15255 NW 82nd AVE AMBULATORY SURGICAL CENTER
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
8 B.D.C 03.18.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: PLUMBING NOTES & DETAILS

SHEET NUMBER: P-0.00
SHEET: 1 OF: 5

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1 SITE PLAN
SCALE: 1/16" = 1'-0"

N

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OWNERS INFORMATION:

PROJECT HISTORY:

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: PLUMBING SITE PLAN

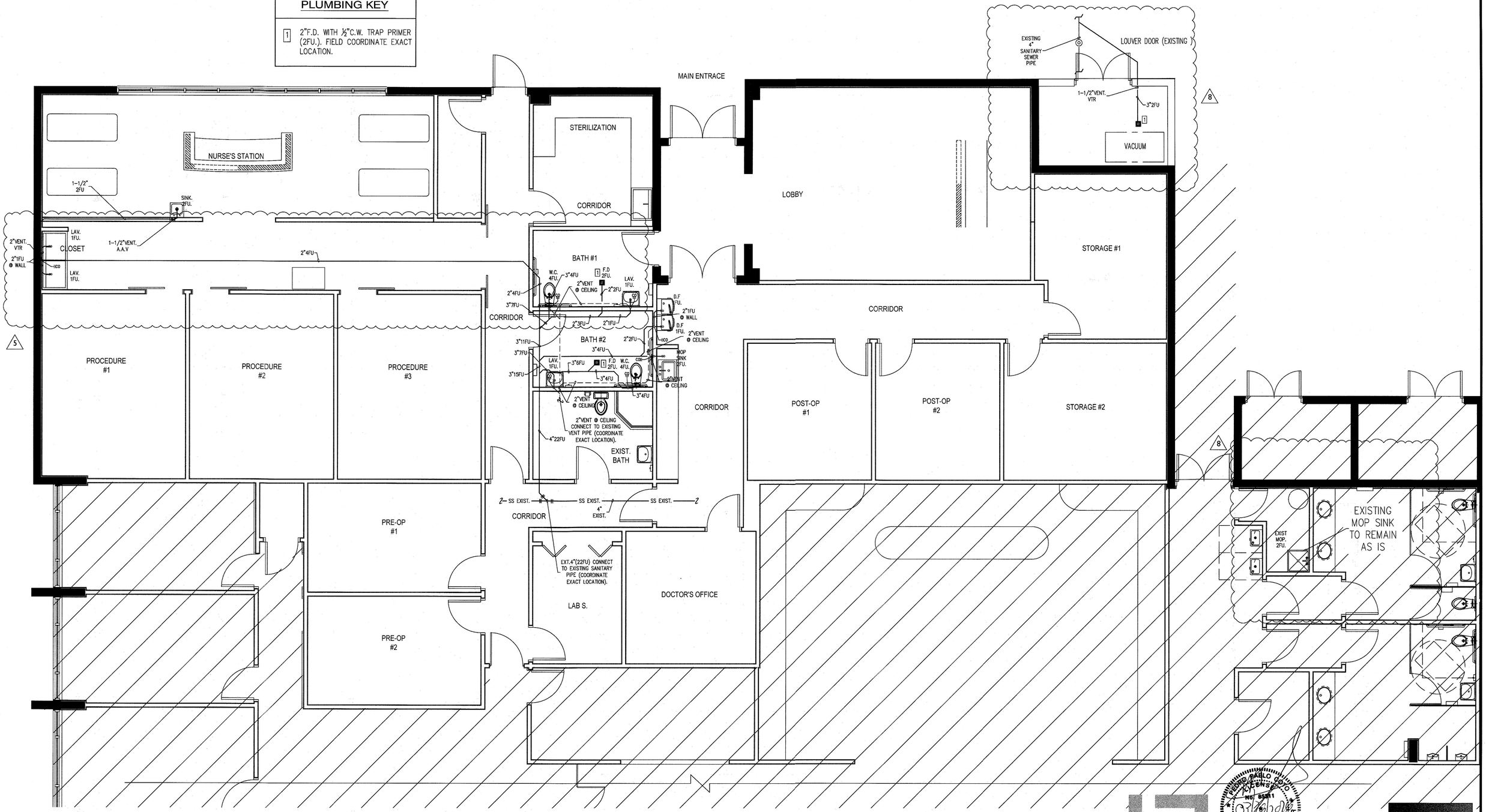
SHEET NUMBER: P-1.00

SHEET: 2 OF: 5

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020-P-1-00.pdf

PLUMBING KEY

[1] 2"F.D. WITH ½"C.W. TRAP PRIMER (2FU.). FIELD COORDINATE EXACT LOCATION.



1 GROUND FLOOR PLAN. PLUMBING (SEWER)

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

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SHEET TITLE: GROUND FLOOR PLAN PLUMBING (SEWER)

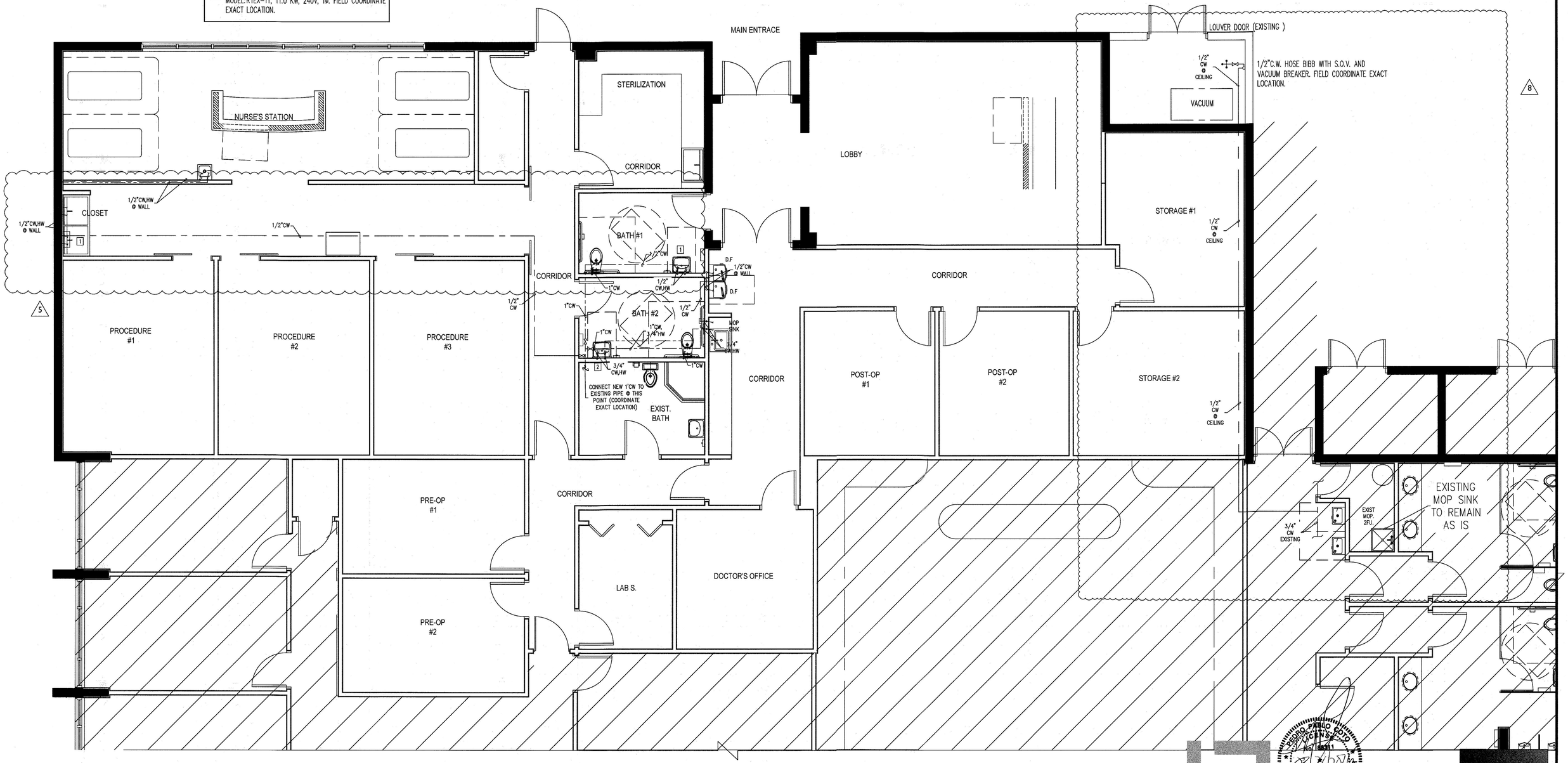
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SHEET: 3 OF: 5

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021-P-1-01.pdf

PLUMBING KEY

1. ELECTRIC TANKLESS WATER HEATERS BY RHEEM MODEL:RTEX-06, 5.5 KW, 240V, 1ø. FIELD COORDINATE EXACT LOCATION.
2. ELECTRIC TANKLESS WATER HEATERS BY RHEEM MODEL:RTEX-11, 11.0 KW, 240V, 1ø. FIELD COORDINATE EXACT LOCATION.



1 GROUND FLOOR PLAN. PLUMBING (WATER)

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

N

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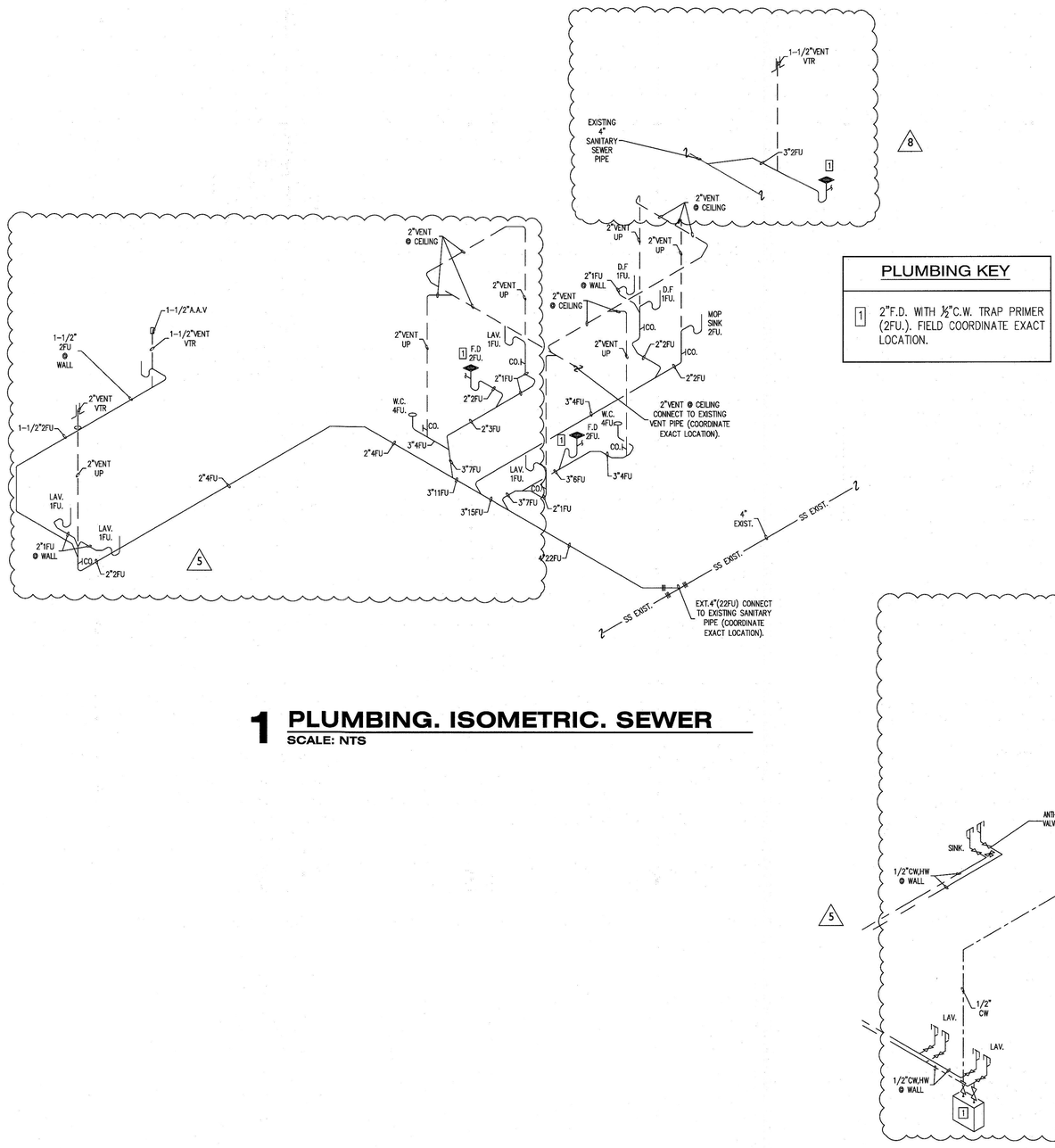
PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-000

SHEET TITLE: GROUND FLOOR PLAN PLUMBING (WATER)

SHEET NUMBER: P-1.02

SHEET: 4 OF: 5

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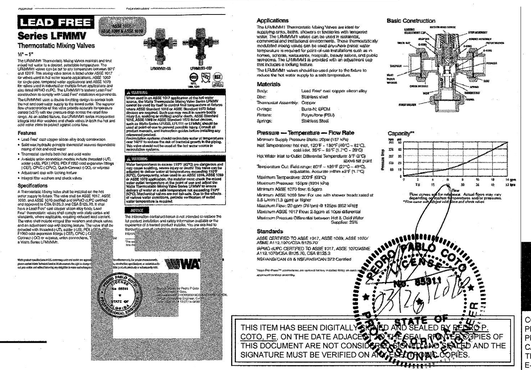
1	2"F.D. WITH ½"C.W. TRAP PRIMER (2FU.). FIELD COORDINATE EXACT LOCATION.

1 PLUMBING. ISOMETRIC. SEWER
SCALE: NTS

PLUMBING KEY

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2	ELECTRIC TANKLESS WATER HEATERS BY RHEEM MODEL: RTEX-11, 11.0 KW, 240V, 1ø. FIELD COORDINATE EXACT LOCATION.

ANTI-SCALD VALVE



2 PLUMBING. ISOMETRIC. WATER
SCALE: NTS

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PROJECT INFORMATION:
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PROJECT NUMBER 25-000

SHEET TITLE: PLUMBING ISOMETRIC (SEWER & WATER)

SHEET NUMBER: P-2.00

SHEET:5 OF: 5

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MIAMI-DADE COUNTY

DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES

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Contact Name:	Francisco Cartaya
Contact Email:	FC@DIAMONDCONTRACTORSFL.COM
Tracking Number:	3226012243
Reviews to rework:	FIRE
Comments:	

MIAMI-DADE COUNTY

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Tracking #	Process #	Permit #
3226012243	M2026012243	2026007446

THIS COPY OF PLANS MUST BE AVAILABLE ON BUILDING SITE OR AN INSPECTION WILL NOT BE MADE.

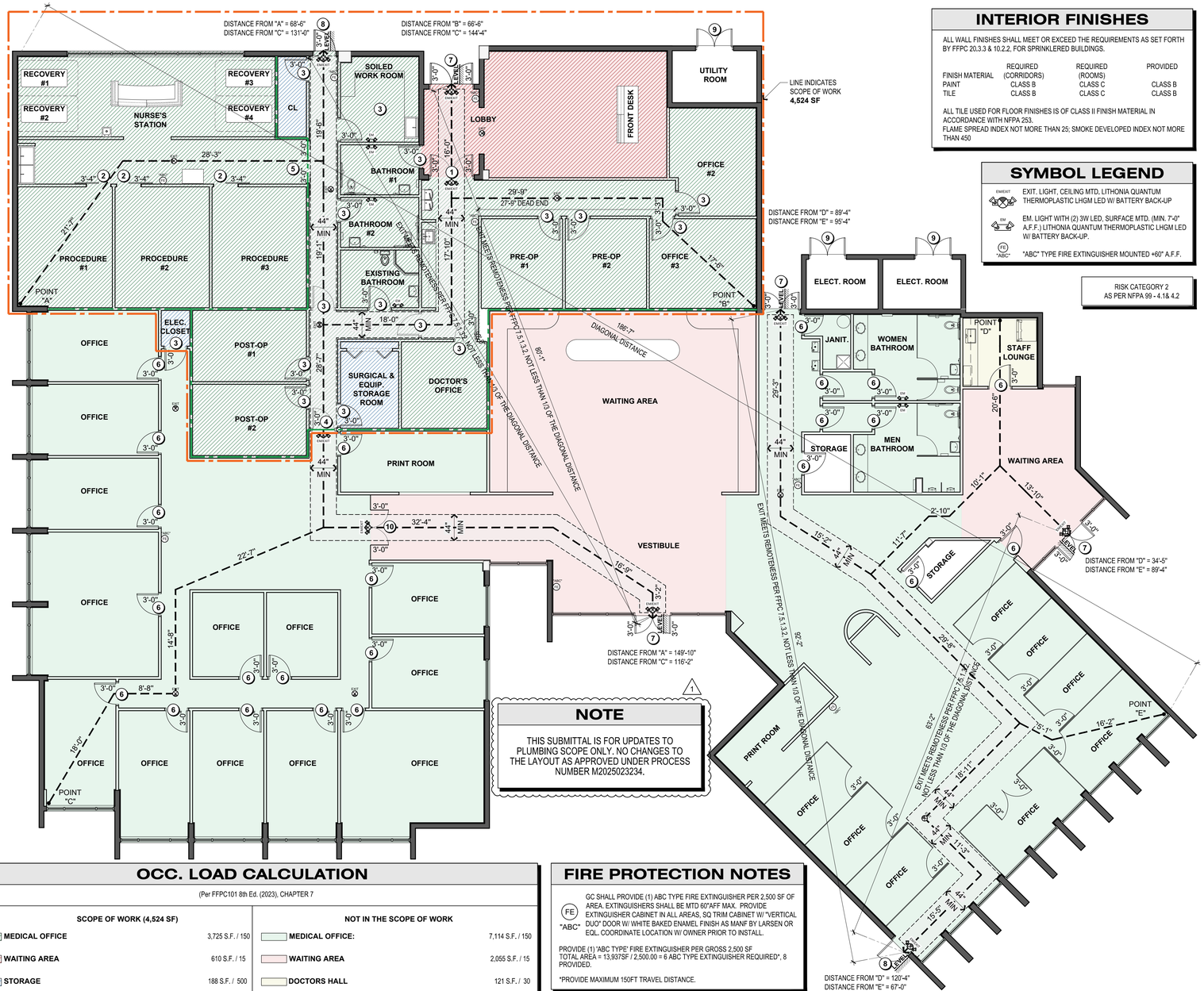
Process #	Review	Disposition	Reviewer	Date
M2026012243	ASBESTOS	A	CANO SALOM, CARLOS	4/17/2026
M2026012243	FIRE	A	DIAZ, ODON	5/14/2026
M2026012243	IMPACT FEES	N	GONZALEZ, MARIELENA	4/15/2026
M2026012243	RER ENVIRONMENTAL CORE	A	MOYA, GRACE	4/20/2026
M2026012243	UPFRONT FEES	A	WEB APPLICATION ID	4/15/2026
M2026012243	WASA	N	NUNEZ, DAISY	4/17/2026

Disclaimer.

Subject to compliance with all Federal, State, and County Laws, rules and regulations. Miami-Dade County assumes no responsibility for accuracy of or results of these plans.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to the property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.

Stamp Name	Trade	Disposition	Stamp Description
Approved	DASB	A	Approved
Approved	DERM	A	Approved
APPROVED REVISION	FIRE	A	Approved Revision
Approved	FIRE	A	Approved
Reference Only.	FIRE	R	Reference only.



NOTE

THIS SUBMITTAL IS FOR UPDATES TO PLUMBING SCOPE ONLY. NO CHANGES TO THE LAYOUT AS APPROVED UNDER PROCESS NUMBER M2025023234.

INTERIOR FINISHES

ALL WALL FINISHES SHALL MEET OR EXCEED THE REQUIREMENTS AS SET FORTH BY FFPC 20.3.3 & 10.2.2, FOR SPRINKLERED BUILDINGS.

	REQUIRED (CORRIDORS)	REQUIRED (ROOMS)	PROVIDED
FINISH MATERIAL	CLASS B	CLASS C	CLASS B
PAINT	CLASS B	CLASS C	CLASS B
TILE	CLASS B	CLASS C	CLASS B

ALL TILE USED FOR FLOOR FINISHES IS OF CLASS II FINISH MATERIAL IN ACCORDANCE WITH NFPA 253.
FLAME SPREAD INDEX NOT MORE THAN 25; SMOKE DEVELOPED INDEX NOT MORE THAN 450

SYMBOL LEGEND

EMEXIT — EXIT. LIGHT, CEILING MTD, LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP

EM — EM. LIGHT WITH (2) 3W LED, SURFACE MTD. (MIN. 7'-0" A.F.F.) LITHONIA QUANTUM THERMOPLASTIC LHGM LED W/ BATTERY BACK-UP.

FE "ABC" — "ABC" TYPE FIRE EXTINGUISHER MOUNTED +60" A.F.F.

RISK CATEGORY 2
AS PER NFPA 99 - 4.1& 4.2

LIFE SAFETY NOTES

TYPE II-B SPRINKLERED
BUSINESS - GROUP B

EGRESS WIDTH PER FBC 1005.3.2:
253 OCCUPANTS x 0.2" = 51"

OTHER EGRESS COMPONENTS PROVIDED:
CAPACITY OF MEANS OF EGRESS AS PER FFPC 7.3.3.1
THE REQUIRED MEANS OF EGRESS MUST ACCOMMODATE 0.2 OF THE OCCUPANT LOAD:
253 x 0.2 = 51" REQUIRED; 2 EXITS PROVIDED OF 72".
SEE PLAN THIS SHEET EXIT DOOR - SMALLEST WIDTH 36".

FIRE ALARM SYSTEM: AUTOMATIC, SPEAKERS - STROBE

NUMBER OF MEANS OF EGRESS & TRAVEL DISTANCE:
AS PER FFPC 20.2.5.2.1, NEW AMBULATORY HEALTH CARE OCCUPANCIES THAT ARE SPRINKLERED, SHALL BE ALLOWED COMMON PATH OF TRAVEL DISTANCE NOT TO EXCEED 100'-0" MAX.

AS PER PER FFPC 20.2.6.2.1, NEW AMBULATORY HEALTH CARE OCCUPANCIES OF ORDINARY HAZARD THAT ARE SPRINKLERED, SHALL HAVE A TRAVEL DISTANCE NOT TO EXCEED 200'-0"

DOOR HARDWARE: ALL DOORS IN THE MEANS OF EGRESS SHALL BE SINGLE ACTION RELEASE, NOT REQUIRE THE USE OF A KEY, TOOL OF SPECIAL KNOWLEDGE TO OPEN FROM THE EGRESS SIDE. REFER TO 'BOXED' NOTES BELOW.

ELECTRICAL: EMERGENCY/EXIT LIGHT LOCATIONS AS SHOWN ON THIS SHEET REFER TO ELECTRICAL DWGS FOR MORE INFO.

FIRE EXTINGUISHERS: CONTRACTOR SHALL PROVIDE ONE ABC TYPE FIRE EXTINGUISHER FOR EVERY 2,500 S.F. OF BUILDING AREA & NO MORE THAN 250FT TRAVEL DISTANCE. REFER TO FIRE PROTECTION & ACCESSIBILITY NOTES.

PHOTOMETRICS: INSTALL NEW EXIT WALL-MOUNTED ILLUMINATION AS REQUIRED 1FC IN THE PATH OF EGRESS LEADING TO THE PUBLIC WAY PER FBC 1006.1.1 (10FC REQUIRED AT THE INT PATH OF EGRESS).

INTERIOR WALL & CLG FINISH REQUIREMENTS: SECTION 8, TABLE 803.11
USE GROUP B & FFPC 20.3.3.2.1 & 10.2.2, SPRINKLERED BUILDING:
EXIT ENCLOSURES & OTHER EXIT WAYS - CLASS B
CORRIDORS - CLASS B
ROOMS & ENCLOSED SPACES - CLASS C
INT FLOOR FINISH SECTION 804 - CLASS II

TRAVEL DISTANCES ALLOWED & PROVIDED PER TABLE 1016.1 & FFPC 16.2.5
OCCUPANCY GROUP: GROUP B, SPRINKLERED AS PER FBC SEC 304 & FFPC 20.2.5, 20.2.6

	PROVIDED	MAX ALLOWED
OVERALL TRAVEL DISTANCE	149.83 LF (AS PER PLAN)	200 LF
COMMON PATH OF TRAVEL	63.83 LF (AS PER PLAN)	100 LF
DEAD END TRAVEL	20 LF	50 LF

GENERAL NOTES

EGRESS PATH SHALL BE CLEAR & CONTINUOUS (NO STORAGE OR DISPLAY ALLOWED IN EGRESS PATH) & SHALL COMPLY WITH FBC 1014.4 & 1014.4.2.

MAXIMUM OF ½" DIFFERENCE IN LEVEL BETWEEN OPPOSITE SIDES OF ALL EXIT DOORS IN ACCORDANCE WITH NFPA 101 7.1.6.2. DIFFERENCE IN LEVEL SHALL BE BEVELED WITH A SLOPE NO GREATER THAN 1:2

PRIMER SPECS (NON-DAMAGED SURFACES):
SHERWIN WILLIAMS, PREP RITE, HIGH BUILD, INTERIOR LATEX PRIMER/SURFACER FOR SURFACES, WHITE #6401-22685 (B28 W 601)

PRE-PRIMER SPECS (FOR DAMAGED WALL SURFACES):
KILZ 2, LATEX, INTERIOR/ EXTERIOR WATER-BASED, SEAL-PRIMER & STAINBLOCKER, MULTI-PURPOSE STAIN BLOCKING FORMULA, QUICK-DRY, RE=COAT IN 1HR, WHITE PIGMENTED.

EGRESS DOORS MUST BE READILY OPENABLE FROM EGRESS SIDE W/O USE OF KEY OR SPECIAL KNOWLEDGE OR EFFORT AS PER FBC 1008.1.8.

DOORS MUST BE OPENABLE W/ NOT MORE THAN ONE RELEASING OPERATION, FBC 1008.1.9.

THE DOOR RELEASING MECHANISM FOR ANY LATCH SHALL BE LOCATED AT LEAST 34" & NOT MORE THAN 48"AFF FAC 404.2.7.

FIRE AND/OR SMOKE SEPARATION WALLS AND PARTITIONS MUST BE IDENTIFIED WITH STENCILED SIGN "FIRE AND SMOKE BARRIER-PROTECT ALL OPENINGS" AS PER FBC 713.6

ALL FLOOR SURFACES SHALL BE MAINTAINED FOR AT LEAST THE WIDTH OF EACH DOOR PER NFPA101-7.2.1.3.2

ALL INTERIOR FINISHES SHALL HAVE A MINIMUM FLAME SPREAD CLASSIFICATION OF CLASS C PER FFPC/NFPA TABLE ANNEX A.12.5.3. INTERIOR FLOOR FINISH SHALL BE CLASS II

ALL GLASS DOORS AND GLASS PANELS/SECTIONS AT DOORS, ADJACENT TO DOORS,ABOVE DOORS & WITHIN 48" OF DOORS SHALL BE OF CATEGORY II SAFETY GLAZING AS PER FBC 2411.6.4.

ANY/ALL PENETRATIONS AT FIRE RATED DEMISING WALLS SHALL REQUIRE FIRE STOP SYSTEMS/SEALANTS AS PER THE FIRE PENTRATIONS INDICATED ON THIS SHEET.

IN ACCORDANCE WITH FFPC 101:16.4.5 AND 16.6.4 ALCOHOL-BASED HAND-RUB DISPENSERS SHALL COMPLY WITH SECTION FFPC 8.7.3.1.

MEDICAL GASSES SHALL COMPLY WITH NFPA 99.

INTERIOR FINISH MATERIAL CLASS SHALL COMPLY WITH SECTION 10.2.IN ACCORDANCE WITH FFPC 101:20.3.3

DOOR SCHEDULE

MARK	DESCRIPTION	NOMINAL OPENING SIZE WIDTH	NOMINAL OPENING SIZE HEIGHT	COUNT	TYPE	FRAME MATERIAL	COLOR	REMARKS
01	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	1	A	ALUMINUM/GLASS	BY OWNER	CATEGORY 2 SAFETY GLAZING.
02	BARN DOOR	3'-4"	8'-0"	3	B	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
03	SWING DOOR	3'-0"	8'-0"	15	C	SOLID CORE WOOD	BY OWNER	LEVER TYPE HARDWARE, PRIVACY LOCK BATHROOM ONLY
04	SWING DOOR	3'-0"	8'-0"	1	D	GLASS	BY OWNER	½" SOLID-BONDED WD CORE, W/ + LATCHES. SHALL BE SELF-CLOSING & KEPT CLOSED EXCEPT WHEN IN USE.
05	DOUBLE BARN DOOR	(2)3'-0"	8'-0"	1	E	SOLID CORE WOOD	BY OWNER	AUTOMATIC DOOR
06	SWING DOOR	3'-0"	8'-0"	23	-	SOLID CORE WOOD	BY OWNER	EXISTING
07	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	4	-	ALUMINUM/GLASS	BY OWNER	EXISTING. EQUIP. WITH PANIC HARDWARE.
08	SWING DOOR	3'-0"	8'-0"	2	-	METAL	BY OWNER	EXISTING. EQUIP. WITH PANIC HARDWARE.
09	DOUBLE SWING DOOR	(2)2'-5"	8'-0"	3	-	METAL	BY OWNER	EXISTING
10	DOUBLE SWING DOOR	(2)3'-0"	8'-0"	1	-	ALUMINUM/GLASS	BY OWNER	EXISTING

HARDWARE NOTES:
1. EGRESS DOORS SHALL NOT REQUIRE ANY USE OF KEY OR SPECIAL KNOWLEDGE IN ORDER TO OPERATE DOOR FROM EGRESS SIDE (FFPC SECTION 7.2.1.5.3).
2. ALL EGRESS DOOR TO BE SINGLE ACTION IN ORDER TO EGRESS.

NOTES:
1) ALL CLOSET & STORAGE ROOM DOORS TO BE OPERABLE FROM INSIDE.
2) ALL WOOD DOORS SHALL BE SOLID CORE WOOD DOORS.
3) SEE FLOOR PLAN FOR LOCATION OF DOORS AND QUANTITY.
4) ALL WOOD DOORS SHALL BE STAINED.
5) HARDWARE SHALL BE LEVER TYPE & COMPLY WITH ADA STANDARD

OCC. LOAD CALCULATION

(Per FFPC101 8th Ed. (2023), CHAPTER 7

SCOPE OF WORK (4,524 SF)		NOT IN THE SCOPE OF WORK	
MEDICAL OFFICE	3,725 S.F. / 150	MEDICAL OFFICE:	7,114 S.F. / 150
WAITING AREA	610 S.F. / 15	WAITING AREA	2,055 S.F. / 15
STORAGE	188 S.F. / 500	DOCTORS HALL	121 S.F. / 30
		STORAGE	118 S.F. / 500
TOTAL:	24.83 + 40.67 + 0.37 = **66 OCCUPANTS**	TOTAL:	47.43 + 137 + 4 + 0.24 = **189 OCCUPANTS**

TOTAL OCC. LOAD CALCULATION : 64+189 = **253 OCCUPANTS**

FIRE PROTECTION NOTES

FE "ABC" — GC SHALL PROVIDE (1) ABC TYPE FIRE EXTINGUISHER PER 2,500 SF OF AREA. EXTINGUISHERS SHALL BE MTD 60"AFF MAX. PROVIDE EXTINGUISHER CABINET IN ALL AREAS, SQ TRIM CABINET W/ "VERTICAL DUO" DOOR W/ WHITE BAKED ENAMEL FINISH AS MANF BY LARSEN OR EQL. COORDINATE LOCATION W/ OWNER PRIOR TO INSTALL.

PROVIDE (1) "ABC TYPE' FIRE EXTINGUISHER PER GROSS 2,500 SF
TOTAL AREA = 13,937SF / 2,500.00 = 6 ABC TYPE EXTINGUISHER REQUIRED*, 8 PROVIDED.

*PROVIDE MAXIMUM 150FT TRAVEL DISTANCE.

LEGEND

NEW 1-HR FIRE RATED PARTITION AS PER DETAIL 4/A400

1 LIFE SAFETY PLAN

SCALE: 1/8" = 1'-0"

JAHERNANDEZ DESIGN STUDIO
15378 Emerald Crossing Blvd Ln
Miami Lakes, Florida 33165
t: 786.290.9387
e: jahernandez.architect@gmail.com

ARCHITECT OF RECORD:
Juan Hernandez
License Number AR101654
STATE OF FLORIDA — JUAN HERNANDEZ LICENSE NO. AR101654 — REGISTERED ARCHITECT

SEAL: Juan A Hernandez
Digitally signed by Juan A Hernandez
DN: C=US, O=Florida, dnQualifier=A01410C0000018D62F073870005DC9A, CN=Juan A Hernandez
Reason: I am the author of this document
Location:
Date: 2026.05.05 19:02:51-04'00'
Foxit PDF Editor Version: 2024.4.1

DRAWN BY: RHR
REVISED BY: JAHL

Ownership and use of these drawings and specifications as instruments of professional service are and shall remain the property of the Architect and cannot be used, altered or reproduced as a whole or in part, unless authorization is so granted in writing by the Architect.

PROJECT NAME:
15255 NW 82nd Ave - MEDICAL OFFICE
15255 NW 82nd Ave, Miami Lakes, FL 33014

OWNERS INFORMATION:

PROJECT HISTORY:
1 5.4.2026

PROJECT INFORMATION:
DATE 06/26/2025
PROJECT NUMBER 25-048

SHEET TITLE: LIFE SAFETY PLAN

SHEET NUMBER: LS100
SHEET: 1 OF: 1

Miami Dade County Department of Regulatory and Economic Resources Job Copy
3226012243 - 5/14/2026 9:17:54 AM
LS100_RV1.pdf
Examiner Date Time Stamp Trade Stamp Name
DIAZ, ODON 5/14/2026 7:45:16 AM FIRE APPROVED REVISION

E-MAIL ADDRESS: fc@diamondcontractorsFL.com

NOTE: ALL SHEETS MUST BE REVIEWED

MIAMI-DADE COUNTY DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
Herbert S. Saffir Permitting and Inspection Center
11805 SW 26th Street (Coral Way) • Miami, Florida 33175-2474 • (786) 315-2000

APPLICATION FOR MUNICIPAL PERMIT APPLICANTS THAT REQUIRE PLAN REVIEW FROM MIAMI-DADE FIRE RESCUE AND/OR ENVIRONMENTAL SERVICES

PROVIDE MUNICIPAL PROCESS NUMBER HERE

LOCATION OF IMPROVEMENTS **

Job Address 15255 NW 82nd ave
Folio 32-2022-009-0050
Lot _____ Block _____
Subdivision _____ PBpg _____
Metes and bounds _____

CONTRACTOR INFORMATION **

Contractor No. CGC1532895
Last four (4) digits of Qualifier No. 2895
Contractor Name Diamond Contractors Group
Qualifier Name _____
Address 7951 W 26th ave
City Hialeah State FL Zip 33016

TYPE OF IMPROVEMENTS **

- [ ] New Construction on Vacant Land
- [x] Alteration Interior
- [ ] Alteration Exterior
- [ ] Relocation of Structure
- [ ] Enclosure
- [ ] Repair
- [ ] Repair Due to Fire
- [ ] Demolish
- [ ] Shell Only
- [ ] Addition Attached
- [ ] Addition Detached
- [ ] Re-Roof
- [ ] Foundation Only
- [ ] Tent

Current use of property Commercial.
Description of Work _____
Sq. Ft. _____ Units _____ Floors _____
Value of Work _____

PERMIT TYPE **

- [x] MBLD* Category 01
- [ ] MELE
- [ ] MPLU
- [ ] MLPG
- [ ] MMEC
- [ ] FIRE

REVIEW STATUS

- [ ] Chg. Contractor
- [ ] Re-Issue
- [ ] Re-Stamp
- [x] Revision
- [ ] Not Applicable for Fire

OWNER'S NAME **

Owner TGC PCSC SW LLC % The Graham company
Address 6843 main ST
City Miami Lakes State FL Zip 33014
Phone _____
Last four (4) digits of Owner's Social Security No. _____

PERSON TO PICK UP PLANS **

Name Mario Pina
Address 390 W 50 ST
City Hialeah State FL Zip 33012
Phone 786-473-3228

ARCHITECT / ENGINEER

Owner _____
Address _____
City _____ State ____ Zip _____
Phone _____

FIRE SPECIAL REQUEST PLAN REVIEW (SRI)

I am requesting a Special Request Plan Review (SRI) to be scheduled as soon as possible. There is a minimum charge of one-hour. Please contact the Fire Department for current rate.

1st Request: _____ Date: _____
2nd Request: _____ Date: _____
3rd Request: _____ Date: _____

If the applicant is a known named violator with: unpaid civil penalties; unpaid administrative costs of hearing; unpaid County investigative, enforcement, testing, or monitoring costs; or unpaid liens, any or all of which are owed to Miami-Dade County pursuant to the provisions of the Code of Miami-Dade County, Florida, a hold on the review may be placed on this application.

123_01-192 1/22

** REQUIRED FIELDS

*** TYPE OF IMPROVEMENT, PERMIT TYPE, CATEGORY, & DESCRIPTION OF WORK MUST BE CLEARLY FILED OUT BY APPLICANT.

Miami Dade County Department of Regulatory and Economic Resources - Job Copy
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MDC PERMIT APP.pdf

Examiner	Date Time Stamp	Trade Stamp	Name
CANO SALOM, CARLOS	4/17/2026 12:21:19 PM	DASB	Approved
DIAZ, ODON	4/24/2026 8:30:40 AM	FIRE	Reference Only.

MIAMI LAKES
Growing Beautifully

6601 Main St • Miami Lakes, Florida, 33014
Office: (305) 827-4015 • Fax: (305) 558-9884
Website: www.miamilakes-fl.gov

BUILDING PERMIT APPLICATION

Job Address: 15255 NW 82nd Ave, Miami Lakes, FL 33016

Unit #:

Folio #: 32- 2022-009-0050 Owner-Builder: ☐

Master Permit #: BLC2025-2308 Sub Permit #: _____ Revision #: R6V 2026-0243

OWNER INFORMATION

NAME : TGC PCSC SW LLC C/O THE GRAH,

Address: 6843 MAIN ST

City, State, Zip MIAMI LAKES, FL 33014

Phone #: Cell #:

Email Address:

LEGAL USE/ WORK

Current Use of Property: COMMERCIAL

Job Description OFFICE BASED SURGICAL FACILITY.

JOB COST $ 30.000 AREA/LENGTH: 4,500 SF/LF

Residential ☐ Multi-Family ☑ Commercial ☐ Industrial ☐

Code in Effect:

Occupancy: Business "B"

Construction Type: IIB

Flood Zone/B.F.E.: _____ F.F.E.: _____

CONTRACTOR INFORMATION

Company Name: Diamond Contractors Group

Qualifier Name:

License # CGC1532895

Address 7951 W 26th Ave

City, State, Zip Hialeah, FL 33016

Phone #: 786-209-6294 Cell #:

Email Address: fc@diamondcontractorsfl.com

ARCHITECT/ ENGINEER

Firm Name: JAH Design Studio

A/E of record: Juan A. Hernandez

License # AR101854

Address 2500 SW 107th Ave - Suite 26

City, State, Zip Miami, FL 33165 USA

Phone #: (786)308-0697 Cell #: (786)308-0697

Email Address: juan@jahds.com

FEB 25 2026 TOML

Permit Type -- Check only One

☑ Building ☐ Electrical ☐ Mechanical ☐ Plumbing/Gas
☐ Paving/Drainage ☐ Sign ☐ Roofing ☐ P/W

Change to Permit -- Check only One

☐ Extension ☐ Renewal ☑ Revision
☐ Change Contractor ☐ Shop Drawing ☐ Cancellation

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards, of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, RE-ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I Certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

X _____ Date 2/25/26
Signature of Owner or Owner's Agent

LESTER Debs
Print Name of Owner or Owner's Agent

STATE OF Florida COUNTY OF Miami-Dade

Sworn to and subscribed before me this February 25 20 26

by LESTER Debs (SEAL)

Personally known ☑ or I.D.

Notary Public State of Florida
Henry Garcia
My Commission HH 714609
Expires 9/21/2029

X _____ Date 2/25/26
Signature of Qualifier

Jorge Olivera
Print Name of Qualifier

STATE OF Florida COUNTY OF Miami-Dade

Sworn to and subscribed before me this February 25 20 26

by Jorge Olivera (SEAL)

Personally known ☑

Notary Public State of Florida
Henry Garcia
My Commission HH 714609
Expires 9/21/2029

NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions enforced by the homeowner's associations that may be applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

NOTE: This application will be void if there are no reviews after six(6) months.

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