

Water-Based Fire Suppression System Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/Location of Construction:	SO EASTERN PROMONANE	:		
Total Square Footage of Proposed Struc	ture:			
Tax Assessor's Chart, Block & Lot	Applicant Name: Dean & ALLYN INC	Telephone:		
Chart# Block# Lot#	Address	207-657-5646		
003 6001 001	116 LEWDSTON 20AD	Email:		
	City, State & Zip	Liman.		
	GEAY ME 04039	Scate@ DEMAND Allyn Com		
Lessee/Owner Name:	Contractor Name:	Cost Of Work:		
(if different than applicant)	(if different from Applicant)			
Address:	Address:	\$29,195.00		
	SAME			
City, State & Zip:	City, State & Zip:	Fees: first \$1000 = \$30 fee +		
		\$10 for every other \$1000 of Cost of work		
Telephone & E-mail:	Telephone & E-mail:			
	·	Total Fees : \$ 311, 95		
Current use (i.e. single family)				
If vacant, what was the previous use?	and the control of			
Proposed Specific use: LIPSCALE APARTMENTS				
Is property part of a subdivision? NO If yes, please name				
Project description:	, pacase manie			
, ,				
Install new fire Soninkler Syste Who should we contact when the permit is re	em as per NPPA 13e! AHS	ROTLAND FIRE		
Who should we contact when the permit is re	eady: Scall Cote @ Dean !	Allerante		
Address: 116 Lowisten Pool		The state of the s		
City, State & Zip: Gray MF 04039				
E-mail Address: Scate @ Jesagadall	ys. Can			
Telephone: 207-657-5646	•			
Places submit all of the information		37 11		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permitdenial.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:	6	Date: 3/4/15-	
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