Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 090105

This is to certify that ____CHANEY LAUREN E /Cunning m Secur

has permission to ______lnstall a fire alarm system-

AT 22 CUMBERLAND AVE

or component on according this permit shall comply with all eand of the Organices of the City of Portland regulating buildings and structures, and of the application on file in

014 B004001

CB

provided that the person or persons, fit of the provisions of the Statutes of Ma the construction, maintenance and use this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Noti ition of nust be spectio give nd writte ermissic rocured befo his bui g or <u>pa</u> hereof is lath or oth ed-in. 24 HOU NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. CAPT. X. Sautier

Health Dept. _____

Appeal Board _

Other _____ Department Name

2/17/09 Chustal January Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

389 Congress Street, 04101 Tel: Location of Construction:	Owner Name:	```		r Address:		Phone:		
22 CUMBERLAND AVE	CHANEY LA	LIREN E	1	UMBERLAN	/ D AVF # 1	T none.		
Business Name:	Contractor Name			actor Address:	Phone			
	Cunningham S		l.	Read Rd. Port	land		2078785858	
Lessee/Buyer's Name	Phone:			Permit Type:			Zone:	
·			í	e Alarm Syster		R-6		
Past Use:	Proposed Use:				CEO District:			
3 Unit Condo Building	1 -	Building - Install a		\$130.00	Cost of Work: \$10,475.0			
	fire alarm syst		FIRE	FIRE DEPT: Approved INSPECTION:				
					Denied Us	e Group: \mathcal{O}_{-}	D-2 Type 58	
1. 1.	2 midato	al condominat	1,,	• •		TRC-	2003	
egat vs	3/63/2007/	tral condominiums (601-014)		See Condit	100	ALEPA 72		
Proposed Project Description:			7	6	f	7017	17/	
Install a fire alarm system			Signa			gnature:	1 2/1/19	
			PEDE	ESTRIAN ACTIV	VITIES DISTRIC	CT (P.A.D.)	//:	
			Actio	n: Approve	ed Approve	ed w/Conditions	//Conditions Denied	
			Signa	nture:		Date:		
Permit Taken By: Date A								
<u>-</u>	0/2009	Zoning Approval						
This permit application does not	nreclude the	Special Zone or Revi	ews	Zoning Appeal		Historic Pr	eservation	
Applicant(s) from meeting appli Federal Rules.	-	Shoreland		☐ Variance		Not in Dist	rict or Landmark	
2. Building permits do not include septic or electrical work.	plumbing,	☐ Wetland		Miscellar	neous	☐ Does Not R	tequire Review	
3. Building permits are void if wor within six (6) months of the date		Flood Zone		Condition	nal Use	Requires R	eview	
False information may invalidat permit and stop all work	e a building	Subdivision		Interpreta	ition	Approved		
		Site Plan		Approved	1	Approved v	w/Conditions	
production of approximate and approximate and approximate the second of	ing the contract of the contra	Maj ☐ Minor ☐ MM	1 🗍	Denied		Denied		
	7	Dr. Mr adiba				ton		
		Ok w Cadha, Date: 2/10/09	3 1	Date:		Date:		
CITY								
		CERTIFICATI	ION					

ADDRESS

DATE

DATE

PHONE

PHONE

such permit.

SIGNATURE OF APPLICANT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

General Building 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.

Location/Address of Construction:	LUMBER	CLAND AVE			
Total Square Footage of Proposed Structure/A	rea	Square Footage of Lot		Number of Stories	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# / 4	Name L & Address (0)	TUST be OWNER, Lessee OF BUYE B, LLC WEST WOOD ROPPO Zip GRAY ME CYU3	Telephone: 207-650 ~ 8654		
Lessee/DBA (If Applicable)		ferent from Applicant)	Co	st Of	
	Name	•	Wo	ork: \$ 10, 475	
	Address		Co	C of O Fee: \$	
	City, State &	Zip	Tot	tal Fee: \$ <u>130</u>	
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? Project description:	If y	ves, please name			
Contractor's name: CUNINOVIHAN	YPRILLE			(J)())	
Address: 10 PRINCE'S PT RUM				_	
City, State & Zip YAKING TH ME	04096	Те	lepho	one: 846-3350	
Who should we contact when the permit is ready	: Por Suz	W Zr Te	lepho	one: 846 -3350	
Mailing address:					
Please submit all of the information o	utlined on t	the applicable Checklis	t. Fa	ailure to	

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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	1/M		120	Z		X	M		I	Date:	2	$\langle n $	15	7				
	Th	is is	not	ар	erm	it; yo	ou no/	ay not	comn	nence	ANY	wor	k u	ntil the	oermit	is issu	ıe	

City of Portland, Ma	ine - Building or Use Permit		Permit No:	Date Applied For:	CBL:
•	101 Tel: (207) 874-8703, Fax: (2	09-0105	02/10/2009	014 B004001	
Location of Construction:	Owner Name:	Owner Address:		Phone:	
22 CUMBERLAND AVE	CHANEY LAUREN E	3	22 CUMBERLANI	O AVE # 1	
Business Name:	Contractor Name:		Contractor Address:		Phone
	Cunningham Security		313 Read Rd. Portla	and	(207) 878-5858
Lessee/Buyer's Name	Phone:				
			Fire Alarm System	ı	
Proposed Use:		Propose	d Project Description:		
3 Unit Condo Building - I	nstall a fire alarm system	Install	a fire alarm system		
D					00/10/000
Dept: Zoning	Status: Approved with Conditions	s Reviewer:	Ann Machado	Approval I	
Note:					Ok to Issue:
1) This property shall represent review and approval.	main as threee residential condomini	mus. Any chang	e of use shall requir	e a separate permit	application for
2) This permit is being a work.	pproved on the basis of plans submit	tted. Any devia	tions shall require a	separate approval l	before starting that
Dept: Building	Status: Approved with Conditions	s Reviewer:	Chris Hanson	Approval I	Date: 02/17/2009
Note:					Ok to Issue:
1) Fire Alarm systems sh	all be installed per Sec. 907 of the II	BC 2003			
Dept: Fire	Status: Approved with Conditions	s Reviewer :	Capt Keith Gautre	au Approval I	Date: 02/13/2009
Note:					Ok to Issue:
	Alarm system requires a Knox Box to	be installed be	r city crdinance		
•	shall comply with NFPA 72	pv			

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X	Final	inspection	required	at completion	ı of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

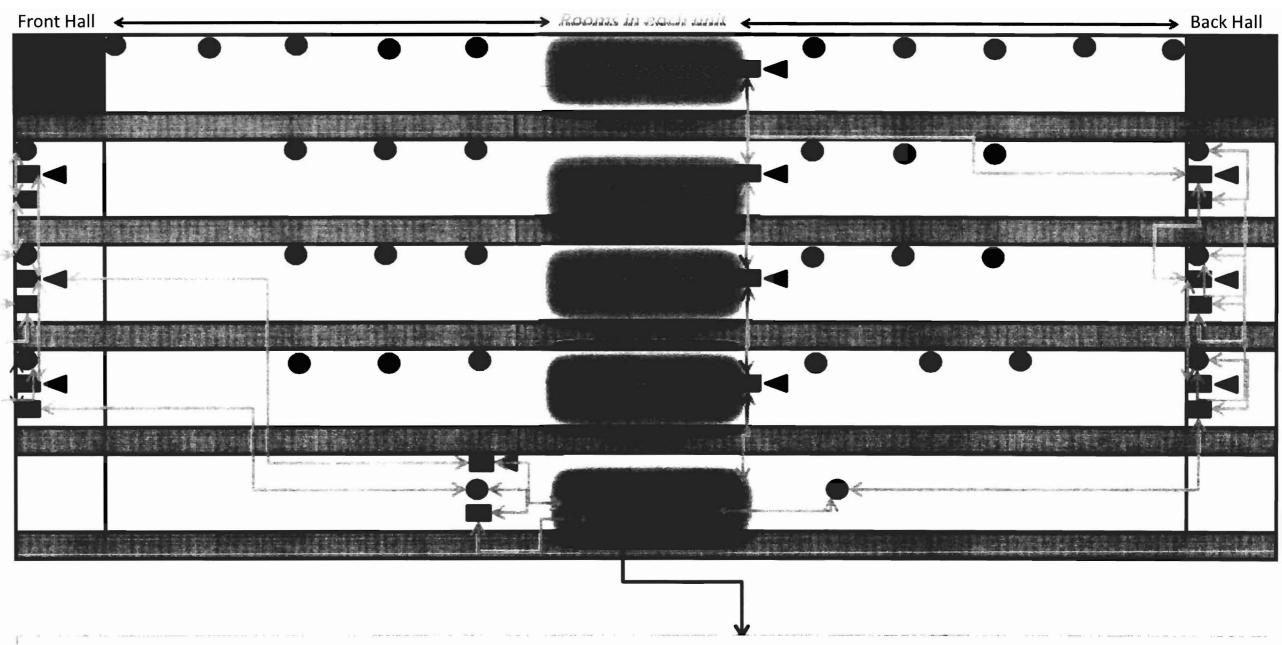
Signature of Applicant/Designee	Date
Signature of Inspections Official	 Date

Mailed

Smoke Or Heat

Horn/Strobe

Pull Station



Job location: 22 Cumberland Ave Portland Maine

Owner: L&B LLC

Contractor: Cunningham Security Systems

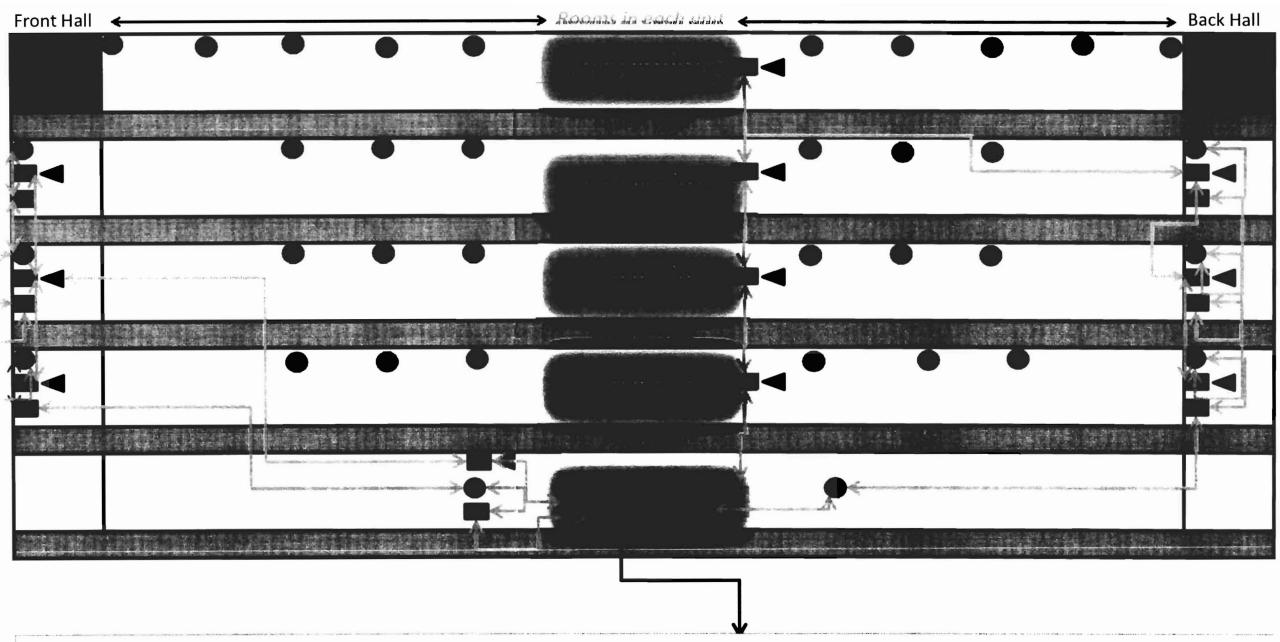
Scope: Install a monitored fire alarm system to include pull stations at all exits and on each landing in the common stairways, install smoke detectors and

horn/strobes in the common areas and install heat detectors in each room of each unit per attached memo from Fire Department.

Smoke Or Heat

✓ Horn/Strobe

Pull Station



Job location: 22 Cumberland Ave Portland Maine

Owner: L&B LLC

Contractor: Cunningham Security Systems

Scope: Install a monitored fire alarm system to include pull stations at all exits and on each landing in the common stairways, install smoke detectors and horn/strobes in the common areas and install heat detectors in each room of each unit per attached memo from Fire Department.