

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Permit Number: 080372

Please Read Application And Notes, If Any, Attached

This is to certify that BAYSIDE EAST LP / Leach Electric Inc  
has permission to Install fire alarm system  
AT 55 SMITH ST 022 L001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission procured before this building or part thereof is altered or closed-in. 24 HOUR 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. Class 2 (See Conditions)

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

*[Signature]* 5/6/18  
Director- Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0372	Issue Date:	CBL: 022 L001001
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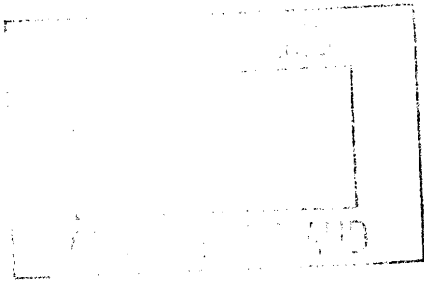
Location of Construction: 55 SMITH ST	Owner Name: BAYSIDE EAST LP	Owner Address: 510 CUMBERLAND AVE	Phone:
Business Name:	Contractor Name: Leach Electric Inc.	Contractor Address: P.O. Box 907 Gray	Phone: 2076575556
Lessee/Buyer's Name	Phone:	Permit Type: Fire Alarm System	Zone: <i>R-6</i>

Past Use: Bayside East Multi Unit	Proposed Use: Bayside East Multi Unit - Install fire alarm system	Permit Fee: \$270.00	Cost of Work: \$25,000.00	CEO District: 1
Proposed Project Description: Install fire alarm system  <i>Legal use 20 residential ALD.U.</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Alarm</i> <i>NFPA</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 04/16/2008	<b>Zoning Approval</b>		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> Denied <i>ok with conditions</i> Date: <i>4/23/08</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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**CERTIFICATION**

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

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



# 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: <u>47 Smith Street</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>22      L      001</u>	Applicant * <u>must be owner, Lessee or Buyer</u> * Name <u>Bay Side East LP</u> Address <u>510 Cumberland Ave</u> City, State & Zip <u>Portland Me 04101</u>	Telephone:  <u>553-5803</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>25,000.00</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) _____ If vacant, what was the previous use? <u>APARTMENTS</u> Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Bayside East 20 unit</u> <u>INSTALL Fire alarm system</u>		
Contractor's name: <u>Leach Elec. Inc</u> } mail Permit Address: <u>P.O. Box 907</u> } City, State & Zip <u>Gray, Me 04039</u> } Telephone: <u>657 5556</u> Who should we contact when the permit is ready: <u>Marc Carbonneau</u> Telephone: <u>240 3719</u> Mailing address: <u>P.O. Box 907 Gray, Me 04039</u>		

**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](http://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: Marc Carbonneau Date: 4/17/00

**This is not a permit; you may not commence ANY work until the permit is issue**

# 3735

**City of Portland, Maine - Building or Use Permit**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 08-0372	<b>Date Applied For:</b> 04/16/2008	<b>CBL:</b> 022 L001001
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<b>Location of Construction:</b> 55 SMITH ST	<b>Owner Name:</b> BAYSIDE EAST LP	<b>Owner Address:</b> 510 CUMBERLAND AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Leach Electric Inc.	<b>Contractor Address:</b> P.O. Box 907 Gray	<b>Phone:</b> (207) 657-5556
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Alarm System	

<b>Proposed Use:</b> Bayside East Multi Unit - Install fire alarm system	<b>Proposed Project Description:</b> Install fire alarm system
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 04/23/2008

**Note:** **Ok to Issue:**

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This property shall remain a twenty (20) family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved      **Reviewer:**      **Approval Date:**

**Note:** **Ok to Issue:**

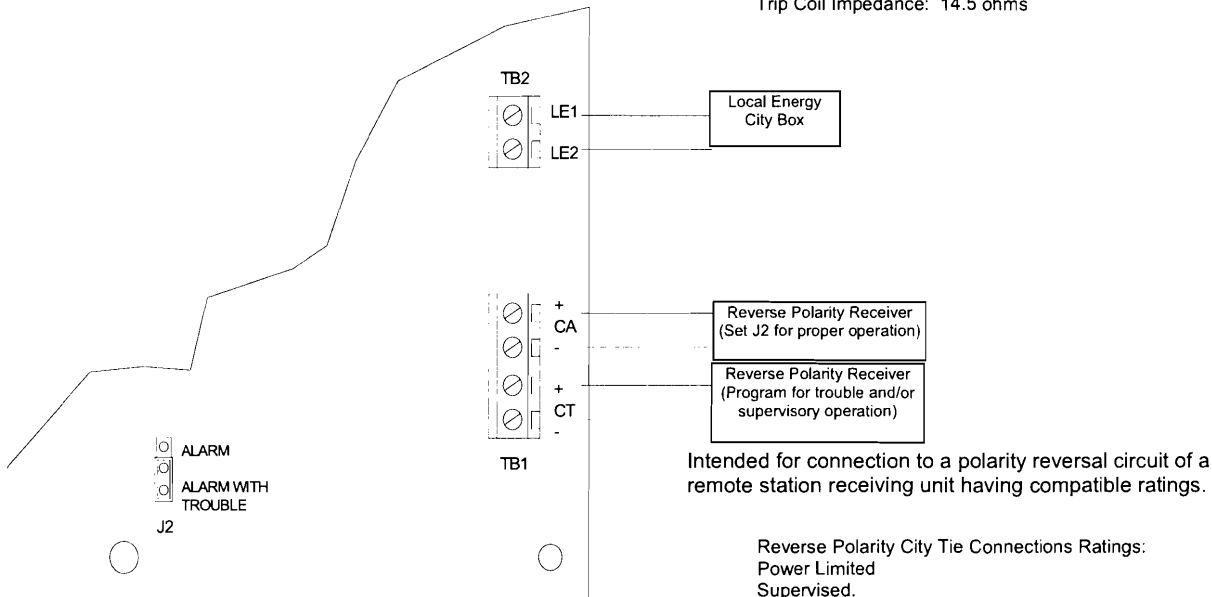
**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Capt Greg Cass      **Approval Date:** 04/25/2008

**Note:** **Ok to Issue:**

- 1) Fire alarm system requires a Masterbox connection per city ordinance.
- 2) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 3) A single source supplier should be used for all through penetrations.
- 4) The fire alarm system shall comply with NFPA 72
- 5) Installation of a Fire Alarm system requires a Knox Box to be installed per city ordinance

# CT-1K WIRING

Local Energy City Tie Connection Ratings:  
 Non-Power Limited  
 Supervised.  
 Voltage: 24VDC nominal  
 Standby Current: 0.007A maximum  
 Alarm Current: 0.400A maximum (Momentary pulse)  
 Ripple: 1.5VAC maximum  
 Maximum Wire Loop Resistance: 30 ohms  
 Trip Coil Impedance: 14.5 ohms



Reverse Polarity City Tie Connections Ratings:  
 Power Limited  
 Supervised.  
 Supervised for open or shorted circuit by receiver.  
 Voltage: 24VDC nominal  
 Current: 0.020A maximum (normal or alarm)  
 Current: 0.025A maximum (shorted)  
 Ripple: 1.5VAC maximum