

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

# BUILDING PERMIT

This is to certify that  
**FIRESAFE EQUIPMENT**  
**P.O. Box 1355**  
**AUBURN, ME 04211**

For installation at  
**22 MONUMENT SQ**  
**DAVID'S RESTAURANT**

Job ID: **2012-09-5057-FAFS**

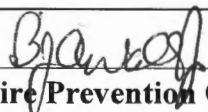
CBL: **027- F-003-001**

has permission to **install hood suppression system**

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

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

  
Fire Prevention Officer

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Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY  
PENALTY FOR REMOVING THIS CARD

## BUILDING PERMIT INSPECTION PROCEDURES

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

or email: [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov)

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

### **Final Fire**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



# PORTLAND MAINE

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Director of Planning and Urban Development  
Jeff Levine

**Job ID: 2012-09-5057-FAFS**  
**install hood suppression system**

**For installation at:**  
**22 MONUMENT SQ**  
**DAVID'S RESTAURANT**

**CBL: 027- F-003-001**

## **Conditions of Approval:**

### **Fire**

Connected to permit 2012-09-4894-ALTCOMM.

Hood suppression system shall comply with NFPA 17A, 96, and UL 300. Activation of the suppression system shall activate the fire alarm system. A letter of compliance will be required at the time of final inspection stating: the date the system was tested for operation, fuel gas shut off, and fire alarm connection if applicable. The Class K fire extinguisher and proper signage should be located at the suppression system pull station.

A separate permit is required for the type I hood and exhaust system.

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

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

Job No: 2012-09-5057-FAFS	Date Applied: 9/27/2012	CBL: 027- F-003-001	
Location of Construction: 22 MONUMENT SQ	Owner Name: 22 MONUMENT SQUARE LLC	Owner Address: 22 MONUMENT SQ STE 600 PORTLAND, ME 04101	Phone:
Business Name:	Contractor Name: FIRESAFE EQUIPMENT	Contractor Address: P.O. BOX 1355 AUBURN MAINE 04211	Phone: 784-7525
Lessee/Buyer's Name:	Phone:	Permit Type: FIRE SUPPRESSION	Zone: B-3
Past Use: 1 <sup>st</sup> Floor Restaurant	Proposed Use: Same: 1 <sup>st</sup> floor Restaurant – to install fire suppression system	Cost of Work: \$2,000.00	CEO District:
		Fire Dept: 10/3/12 <input checked="" type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type:
		Signature: <i>[Signature]</i> <b>(SB)</b>	Signature:
Proposed Project Description: NWB Fire Suppression		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Brad		<b>Zoning Approval</b>	

- 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**

- Shoreland
- Wetlands
- Flood Zone
- Subdivision
- Site Plan

\_\_\_ Maj \_\_\_ Min \_\_\_ MM  
Date: *ck* **9/27/12**

**CERTIFICATION**

**Zoning Appeal**

- Variance
- Miscellaneous
- Conditional Use
- Interpretation
- Approved
- Denied

Date:

**Historic Preservation**

- within
- Not in Dist or Landmark
- Does not Require Review
- Requires Review
- Approved
- Approved w/Conditions
- Denied

*Any exterior work requires A Separate Review & Approval*

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



Entered 9/27/12

(B)

# Non-Water-Based Fire Suppression System Permit

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

# 2012-09-5057 FAFS

Installation address: 22 Monument Sq. CBL: 027 F003

Exact location: (within structure) \_\_\_\_\_

Type of occupancy(s) (NFPA & ICC): Restaurant

Building owner: David Restaurant 22 Monument Sq Portland ME

Managing Supervisor: David License No: 0419

Supervisor phone: 207-650-1933 E-mail: \_\_\_\_\_

Installing contractor: Fire Safe Equipment License No: \_\_\_\_\_

Contractor phone: 207-784-7588 E-mail: dchapman@fire-safe.com

The suppression work to be done will be: New:  Renovation:  Addition to existing system:

This is an amendment to an existing permit: Yes:  NO:  Permit no: \_\_\_\_\_

System Type: Wet Chemical

NFPA Standard: \_\_\_\_\_ Edition: \_\_\_\_\_

\*Non-NFPA systems are not approved for use within the City of Portland.

Download a new copy of this document from [www.portlandmaine.gov/fire](http://www.portlandmaine.gov/fire) for every submittal. Attach all working documents as required on electronic PDF's in addition to full sized plans.

COST OF WORK: \$2,000.00

PERMIT FEE: \$40.00  
 (\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000)

**RECEIVED**  
**SEP 27 2012**  
 Dept. of Building Ins.  
 City of Portland

Submit all information to the Building Inspections Department, 389 Congress Street, Room 315, Portland, Maine 04101.

Prior to acceptance of any fire protection system, a complete commissioning and acceptance test must be coordinated with all fire system contractors and the Fire Department, and proper documentation of such test(s) provided.

All installation(s) must comply with NFPA and the Fire Department Technical Standard(s).

Applicant signature: [Signature] Date: Sept 27, 12



# PORTLAND MAINE

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Receipts Details:

**Tender Information:** Check , Check Number: 11680

**Tender Amount:** 40.00

Receipt Header:

**Cashier Id:** bsaucier

**Receipt Date:** 9/27/2012

**Receipt Number:** 48709

Receipt Details:

Referance ID:	8165	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	40.00	Charge Amount:	40.00
Job ID: Job ID: 2012-09-5057-FAFS - NWB Fire Supression			
Additional Comments: 22 Monument			

Thank You for your Payment!

PROJECT:

PREPARED BY:

DATE / TIME:

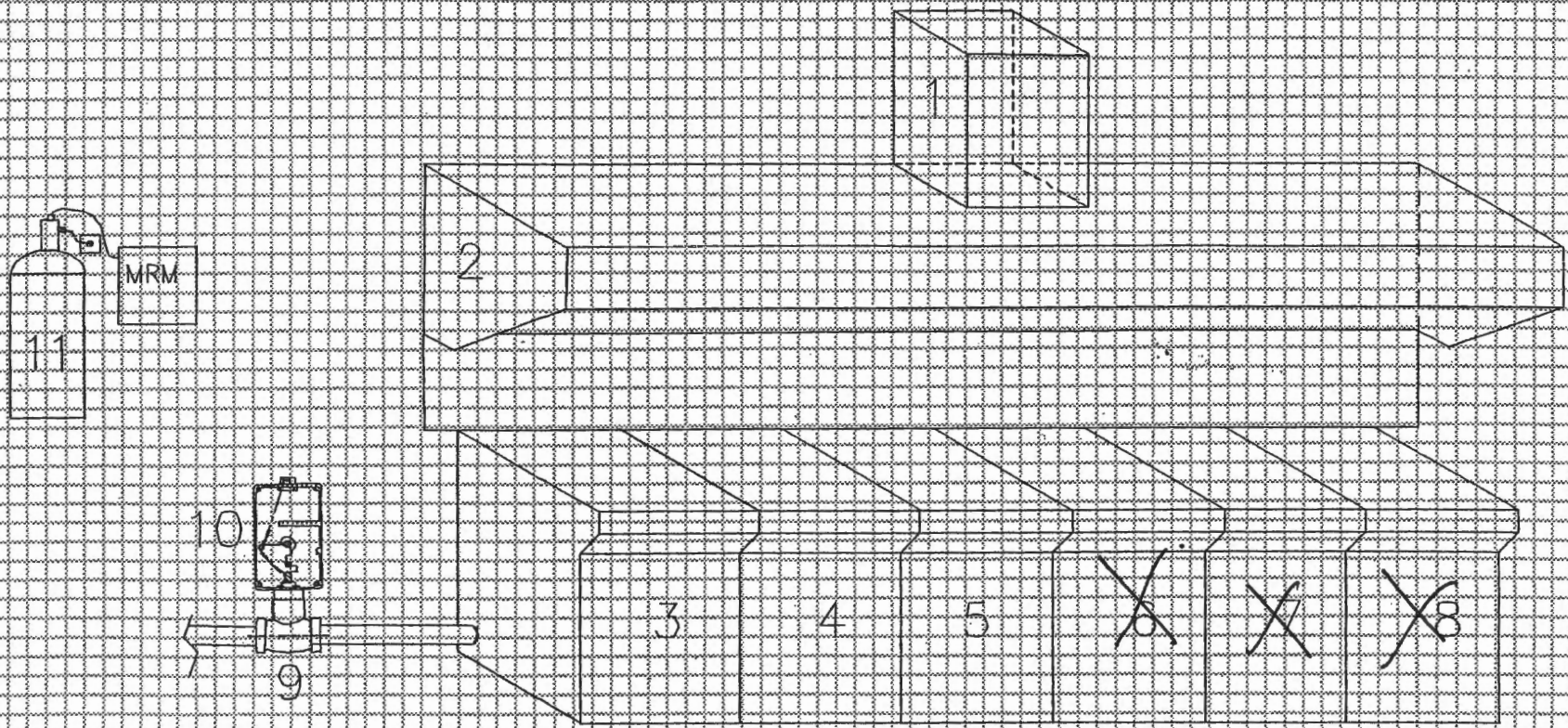
David's Rest. 22 Monument Sq.  
FireSafe Equipment Inc.

QUOTE NO.:

JOB NO.:

Comments:

Jobs will meet NFPA along  
with UL300 standards.  
1-800-538-3473



System Description "as appropriate"

	qty.	size	x	size	qty.	size	x	size
1. Duct:	1	2		48"				
2. Plenum:	5'							
3. Appliance:		6/8		Seave				
4. Appliance:		1 1/2		18"				
5. Appliance:		Char		12"				
6. Appliance:		N/A						
7. Appliance:		N/A						
8. Appliance:								
9. Gas Valve:	1							
10. Retrofit Kit:								
11. Agent Cyl.:		2.5		gallon				
12. Misc.:								