

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

# BUILDING PERMIT

This is to certify that Firesafe Equipment  
of 159 First Flight Dr, Auburn, ME 04210

For installation at 1 MONUMENT WAY  
Foley's Bakery

Job ID: 2011-06-1258-FAFS

CBL: 027 - - F - 011 - 001 - - - -

has permission to install a 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

*Bjarnell*  
\_\_\_\_\_  
Fire Prevention Officer

(50)

\_\_\_\_\_  
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.**

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

*Strengthening a Remarkable City, Building a Community for Life* • [www.portlandmaine.gov](http://www.portlandmaine.gov)

Director of Planning and Urban Development  
Penny St. Louis

Job ID: 2011-06-1258-FAFS  
Installation of a hood suppression system

For installation at:  
1 MONUMENT WAY  
Foley's Bakery

CBL: 027 - - F - 011 - 001 - - - - -

## Conditions of Approval:

### **Fire**

Hood suppression system shall comply with NFPA 17A, 96, and UL 300. Activation of the suppression system shall activate the fire alarm system if available. 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.

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

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

Job No: 2011-06-1258-FAFS	Date Applied: 5/27/2011	CBL: 027 - - F - 011 - 001 - - - - -	
Location of Construction: 1 MONUMENT WAY	Owner Name: ONE MONUMENT WAY LLC	Owner Address: ONE MONUMENT WAY PORTLAND, ME - MAINE 04101	Phone:
Business Name: Foley's Bakery & Coffee Shop	Contractor Name: Firesafe Equipment	Contractor Address:	Phone: 784-7525
Lessee/Buyer's Name:	Phone:	Permit Type: FAFS	Zone: B-3
Past Use: Retail Bakery	Proposed Use: Same: Retail Bakery - to install wet chemical fire suppression system	Cost of Work: \$2000.00	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved w/conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type:
		Signature: <i>Bjorn Walp</i> (Signature)	Signature:
Proposed Project Description: fire suppression system		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Gayle		<b>Zoning Approval</b>	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building Permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan ___ Maj ___ Min ___ MM Date: <i>5/27/11</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <i>within</i> <input type="checkbox"/> Not in Dist 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: <i>any exterior work requires a separate review and approval</i>
	<b>CERTIFICATION</b>		

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	PHON

New # 2011-06-1258  
1 Monument Subj  
097 F011  
6/6/11

5/31/11  
60

Wrong Address & CBL

This is 866 Monument St  
Religious



### 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.

Per City Clerk  
1. in monument way  
Suite #

Installation address: ~~431 Congress Street~~ CBL: ~~097 B 005~~  
425 (423-433) 097 F011

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

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

Building owner: Foley's Bakery & Coffee Shop

Managing Supervisor: Daves License No: N/A

Supervisor phone: 651-2146 E-mail: \_\_\_\_\_

Installing contractor: Fire-Safe Equipment License No: N/A

Contractor phone: 207-784-7525 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: 1700<sup>00</sup>  
 PERMIT FEE: \$40<sup>00</sup>  
 (\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000)

**RECEIVED**

MAY 27 2011

Dept. of Building Inspections  
City of Portland Maine

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: May 24, 11



# CITY OF PORTLAND, MAINE

Department of Building Inspections

## Original Receipt

May 27 2011

Received from File Safe Equipment

Location of Work 431 Congress

Cost of Construction \$ \_\_\_\_\_ Building Fee: \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Site Fee: \_\_\_\_\_

Certificate of Occupancy Fee: \_\_\_\_\_

**Total:** \_\_\_\_\_

Building (IL) \_\_\_\_\_ Plumbing (IS) \_\_\_\_\_ Electrical (I2) \_\_\_\_\_ Site Plan (U2) \_\_\_\_\_

Other Fire Suppression

CBL: 000 2005

Check #: 1167 **Total Collected \$** 40.00

**No work is to be started until permit issued.  
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy