City of Portland, M	aine - Bu	ilding or Use	Permit Applicat	ion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 0	, Fax: (207) 874-8	716	2013-01581			029 E016001			
Location of Construction:	Owner Name:	wner Name:		er Address:			Phone:		
31 PEARL ST (4th floor)		130 LIMITED LIABILITY COMPAMY		42 MARKET ST PORTLAND, ME 04102			I E		
Business Name:		Contractor Name:		Contractor Address:				Phone	
			Cunningham Security Systems mperkins@cunninghamsecurity.c		10 Prince Point Road Yarmouth ME 04096			(207) 846-3350	
Lessee/Buyer's Name		Phone:	Phone:		it Type:	Zone:			
				Fire Alarm System				В3	
Past Use:		Proposed Use:		Perm	it Fee:	Cost of Work:		CEO District:	
Offices	Same: Offices	Same: Offices		\$70.00 ECTION:	· · · · · · · · · · · · · · · · · · ·		2		
Proposed Project Description	:								
Additional fire device in	4th floor								
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
				ved w/Con					
Permit Taken By:	1	Signature:			Da	te:			
bjs	it Taken By: Date Applied For: Zoning Approva								
1. This permit application does not preclude the			Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
Applicant(s) from r Federal Rules.			Shoreland		☐ Variano	☐ Variance		Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscell	Miscellaneous		Does Not Require Review	
3. Building permits are void if work is not s within six (6) months of the date of issua			d Flood Zone		Conditi	Conditional Use		Requires Review	
False information n permit and stop all	te a building	Subdivision		Interpre	☐ Interpretation ☐		Approved		
			Site Plan Maj Minor MM		Approv	Approved		Approved w/Conditions	
	Denied	☐ Denied			Denied				
			Date:		Date:		Date:		
I hereby certify that I am I have been authorized b jurisdiction. In addition, shall have the authority t such permit.	y the owner if a permit	to make this appl for work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	all appl cial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICAN	T		ADDF	RESS		DATE		PHONE	