

Fire Alarm Permit Application

2014-01683 1001004-020

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.

Address/Location of Construction: (0)	3 Commercial Street	`
Total Square Footage of Proposed Struct		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant Name: (unningham Seaurity Address 10 Pinces Point	Telephone: 840-3350 Email:
Lessee/Owner Name: (if different than applicant) Maine Wharf UC Address:	City, State & Zip UCTWOWN, ME. C4096 Contractor Name: (if different from Applicant) Address:	MPerkinsOcuminghamsec
P.O. Box 535 City, State & Zip: Buxton, M.E. 04093 Telephone & E-mail:	City, State & Zip: Telephone & E-mail:	Fees: first \$1000 = \$25 fee + , \$11 for every other \$1,000 of Cost of work
	,	Total Fees: \$ 103.00
If vacant, what was the previous use? Proposed Specific use: SOML OF Comparison of a subdivision?	iboul	
Project description: Installation of an add	restable fire alarm &	-Ustem.
Who should we contact when the permit is r		
Address: 10 Princes Foint		_
City, State & Zip: Uarmouth, ME		0.
E-mail Address: MPCKINSOU	uningnam security. Co	m
Please or hard left had information	outlined on the applicable sheeklist	Failure to do so
Please submit all of the information	outined on the applicable checking	a randic to do so

causes an automatic permitdenial.

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: Michellote	illins	Date: 7/23/14	