Form # P 04

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

# **CITY OF PORTLAND**

Please Read Application And

BU

| Notes, If Any, Attached  | PERMIT  | Permit Number: 100689   |
|--|---|---|
| This is to certify that <u>Eleven Exchange Llc</u>   | /Bay State te Prote   |   |
| has permission toInstall non-water-base  | ed fire sure ssion symm   |   |
| AT 9 Exchange St   | CB  | 032 F010001   |
| provided that the person or pers   | ons, figure or common accepti   | ng this permit shall comply with all  |
| of the provisions of the Statutes  |   | s of the City of Portland regulating  |
| the construction, maintenance a  | and use buildings and structure   | res, 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. | Notication of spectio must be give and writte ermissid rocured before his built g or partiereof is lather or other than a definition of the HOL NOTICE IS REQUIRED. | A certificate of occupancy must be procured by owner before this building expart thereof is occupied. |
| Fire Dept. CAPT. L. Juliania.  |   | JUN 2 8 2010  |
| Appeal Board   |   |   |
| OtherDepartment Name   |   | City of Rortland  Director - Building & Inspection Services   |
| P  | ENALTY FOR REMOVING THIS CA   | ART )   |

| 389 Congress Street, 04101 Tel: ( Location of Construction:  | ( <b>20</b> 7) <mark>874-8</mark> 703 | Fax:                | (207) 874-8716                       | . 1         | 10-0689                               | 1                         |                         | . 073 PA                         |                          |
|--|---------------------------------------|---------------------|--------------------------------------|-------------|---------------------------------------|---------------------------|-------------------------|----------------------------------|--------------------------|
| Location of Construction:  |                                       |                     | (_0,,0,,0,,0,,0,                     | <u> </u>    |                                       | <u></u>                   |                         | 032 F0                           | 10001                    |
|  | Owner Name:                           |                     |                                      |             | er Address:                           |                           |                         | Phone:                           |                          |
| 9 Exchange St  | Eleven Exchar                         |                     |                                      |             | Box 4894                              |                           |                         | Phone                            |                          |
| Business Name:<br>G'Vannis Restaurant  | Contractor Name Bay State Fire        |                     |                                      |             | ractor Address:<br>Box 294 Wob        |                           |                         | 78193559                         | 126                      |
| Lessee/Buyer's Name  | Phone:                                | FIDICCI             | ,                                    |             | it Type:                              | um                        |                         | 1/0193333                        | Zoge: ~                  |
| Ecoto Dayer France   | 1 Hone.                               |                     |                                      |             | e Suppression !                       | System                    |                         |                                  | B-2                      |
| Past Use:  | Proposed Use:                         |                     | J [                                  | _           |                                       | Cost of Worl              | e le                    | EO District:                     | <del>''' /</del>         |
| Commecial / Restaurant (G'Vannis)  | Restaurant / In                       | stall no            | n-water-based                        | _ 1         | \$50.00                               | \$3,00                    |                         | 1                                |                          |
|  | fire suppression                      | n syste             | m.                                   | FIRE        | E DEPT:                               | Approved                  | INSPEC                  | TION:                            | •                        |
|  |                                       |                     |                                      |             |                                       | 5                         | Use Gro                 |                                  | Type:                    |
|  |                                       |                     |                                      | _           | ο Λ                                   |                           | 110                     | :00/II                           | uc 03                    |
|  |                                       | _                   |                                      | *           | See Con                               | sitions                   | P                       |                                  |                          |
| Proposed Project Description:  | -•                                    |                     |                                      |             | /s                                    | $\mathcal{I}$             | (                       |                                  | ,                        |
| Install non-water-based fire suppress  | sion system.                          |                     |                                      |             | eture: ( K-6                          | TITIES DIST               | Signatur                |                                  |                          |
|  |                                       |                     |                                      |             |                                       |                           | `                       | /\                               |                          |
|  |                                       |                     |                                      | Actio       | on: Approve                           | ed [ App                  | roved w/C               | Conditions                       | Denied                   |
|  |                                       |                     |                                      | Signa       | ature:                                |                           |                         | Date:                            |                          |
| Permit Taken By: Date A  | pplied For:                           |                     | •                                    |             | Zoning                                | Approva                   | .1                      |                                  |                          |
| gg 06/1  | 5/2010                                | _                   |                                      |             |                                       |                           |                         |                                  |                          |
| 1. This permit application does not  |                                       | Spe                 | cial Zone or Review                  | /3          | Zoning                                | g Appeal                  |                         | Historic Pres                    | ervation                 |
| Applicant(s) from meeting appli<br>Federal Rules.  | cable State and                       | ☐ Si                | noreland                             |             | ☐ Variance                            |                           | (                       | Not in Distri                    | ct or Landmar            |
| 2. Building permits do not include septic or electrical work.  | plumbing,                             | □w                  | etland                               |             | ☐ Miscellar                           | neous                     |                         | Does Not Re                      | quire Review             |
| 3. Building permits are void if wor  |                                       | ☐ FI                | ood Zone                             |             | Condition                             | nal Use                   | (                       | Requires Rev                     | /iew                     |
| within six (6) months of the date<br>False information may invalidate<br>permit and stop all work  |                                       | ☐ Sı                | ıbdivision                           |             | ☐ Interpreta                          | ition                     | (                       | Approved                         |                          |
| F  |                                       | ☐ Si                | te Plan                              |             | Approved                              | i                         |                         | Approved w/                      | Conditions               |
|  | <u> </u>                              | <br>  Maj           | Minor [ MM [                         | ٦,          | Denied                                |                           |                         | Denied .                         |                          |
| PERMIT ISSUE   | U                                     | الم                 |                                      | J &         | ~~                                    |                           | A                       | hu arta                          | LOTWOI                   |
| ,  |                                       | Date                | -wyn con                             | .m          | Daie.                                 |                           | Đá<br>Đá                | (e.) OVE                         | A2.                      |
| JUN 2 8 2010   | ı                                     |                     | 7 4 15                               | 1           | 0                                     |                           |                         | Tegun                            | LEVEL                    |
| City of Portland   |                                       |                     |                                      | r           |                                       |                           | 5                       | PAPP                             | ~6V2                     |
|  |                                       | (                   | CERTIFICATIO                         | N           |                                       |                           |                         |                                  |                          |
| I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit. | to make this appl<br>or work describe | ication<br>d in the | as his authorized application is is: | age<br>sued | nt and I agree to I, I certify that t | to conform<br>the code of | to all ap<br>ficial's a | oplicable laws<br>outhorized rep | s of this<br>resentative |
|  |                                       |                     |                                      |             |                                       |                           |                         |                                  |                          |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



## CITY OF PORTLAND, MAINE

Department of Building Inspections

## **Original Receipt**

|                      |                |                       | -                |
|----------------------|----------------|-----------------------|------------------|
|                      | X              | un0 15                | 20 10            |
| Received from        | ilu,           | hita                  |                  |
| Location of Work     | <u>15\ E</u> , | 10haya                |                  |
| Cost of Construction |                | Building Fee          | e ne ex          |
| Permit Fee           | \$             | Site Fee:             |                  |
|                      | Certifica      | ate of Occupancy Fee: |                  |
|                      |                | Total:                | <u>70.00</u>     |
| Building (IL) Plu    | mbing (15)     | Electrical (12) Sit   | le Plan (U2)     |
| Other                | <del></del>    | <del>-</del>          | 10°00            |
| CBL: (3)             | For            |                       | Come,            |
| Check #: 12          | <u>.53</u>     | Total Collecte        | d s <u>60.00</u> |
| <b>N</b> 1           |                |                       | ta t             |

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

Taken by:

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

| City of Portland, Mair   | ne - Building or Use Permi  | t   | Permit No:             | Date Applied For:               | CBL:  |                        |
|--|---|---|------------------------|---------------------------------|---|------------------------|
| -  | 01 Tel: (207) 874-8703, Fax: (                                    |   | 10-0689                | 06/15/2010                      | 032 F01   | 0001                   |
| Location of Construction:  | Owner Name:   |   | Owner Address:         |                                 | Phone:  |                        |
| 9 Exchange St  | Eleven Exchange Llc   |   | Po Box 4894            |                                 |   |                        |
| Business Name:   | Contractor Name:  |   | Contractor Address:    |                                 | Phone   |                        |
| G'Vannis Restaurant  | Bay State Fire Protect  | ion   | P O Box 294 Wobu       | ım                              | (781) 935-  | 5936                   |
| Lessee/Buyer's Name  | Phone:  |   | Permit Type:           |                                 |   |                        |
|  |   |   | Fire Suppression S     | System                          |   |                        |
| Proposed Use:  |   | Propose   | d Project Description: |                                 | _   |                        |
| Restaurant / Install non-wa  | ter-based fire suppression system.                                | Insta   | I non-water-based fi   | ire suppression sys             | stem.   |                        |
|  |   |   |                        |                                 |   |                        |
| Dept: Zoning   | Status: Approved with Condition                                   | ns <b>Reviewer</b>                              | : Marge Schmucka       | l Approval l                    | <b>Date:</b> 06/1                                     | 5/2010                 |
| Dept: Zoning Solution  | Status: Approved with Condition                                   | ns <b>Reviewer</b>                              | : Marge Schmucka       | 1 Approval                      | Date: 06/1<br>Ok to Issue                             |                        |
| Note:  | Status: Approved with Condition uires a separate review and appro |   | v                      | ••                              | Ok to Issue   | . 🗸                    |
| Note:  1) ANY exterior work req District.  |   | val thru Historic                               | v                      | ••                              | Ok to Issue<br>I within an His                        |                        |
| Note:  1) ANY exterior work req District.  Dept: Building  | uires a separate review and appro                                 | val thru Historic                               | Preservation. This p   | property is located             | Ok to Issue I within an His Date: 06/2                | : 🗸<br>toric<br>8/201  |
| Note:  1) ANY exterior work req District.  Dept: Building  Note:                                       | uires a separate review and appro                                 | val thru Historic                               | Preservation. This p   | property is located             | Ok to Issue<br>I within an His                        | : 🗸<br>toric<br>8/2010 |
| Note:  1) ANY exterior work req District.  Dept: Building  Note:  1) A separate permit is recommended. | uires a separate review and appro                                 | val thru Historic<br>ns <b>Reviewer</b><br>ood. | Preservation. This p   | property is located  Approval l | Ok to Issue  I within an His  Date: 06/2  Ok to Issue | : 🗸<br>toric<br>8/2010 |

2) 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 puff test is required. The Class K fire extinguisher and proper signage should be located at the

#### Comments:

suppression system pull station.

6/15/2010-gg: received permit by mail, also overpaid by \$10.00. /gg

PERMIT ISSUED

JUN 28 2010

#### **BUILDING PERMIT INSPECTION PROCEDURES**

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

or email: 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 Inspection 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 with construction.

X Final inspection required at completion of work.

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

PERMIT ISSUED

JUN 2 8 2010

City of Portland

**CBL**: 032 F010001 **Building Permit #**: 10-0689



### Non-Water-Based Fire Suppression System Permit

ay property saccepted. 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. 032 FOID Installation address: 15 Exchange Street \_ CBL: First Floor Exact location: (within structure) Kitchen Exhaust Hood Type of occupancy(s) (NFPA & ICC): Restaurant Building owner: Jeff Karll 617-869-3348 License No: MA Lic 1091 Managing Supervisor: John McGrath \_E-mail: john@baystatefire.com Supervisor phone: 781-935-5536 Installing contractor: Bay State Fire Protection Corp. License No: MA Lic 102 Contractor phone: <u>781-935-5536</u> Addition to existing system: Renovation: The suppression work to be done will be: This is an amendment to an existing permit: Yes: NO Permit no: System Type: Buckeye Fire Systems BFR-20 COST OF WORK: \$ 3,000.00 NFPA Standard: 17A Edition: \_\_ PERMIT FEE: \$ 60.00 (\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000) \*Non-NFPA systems are not approved for use within the City of Portland. =CEIVEI Download a new copy of this document from www.portlandmaine.gov/fire for every submittal. Attach all working documents as required on electronic PDF's in addition to JUN 1 5 2010 full sized plans. 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). Date: 05/27/10 Applicant signature: 1

GVannis RESTAURANT 15 EXCHANGE STREET PORTLAND, MA

BUCKEYE
PRE-ENGINEERED U.L.-300
AUTOMATIC FIRE SUPPRESSION
SYSTEM

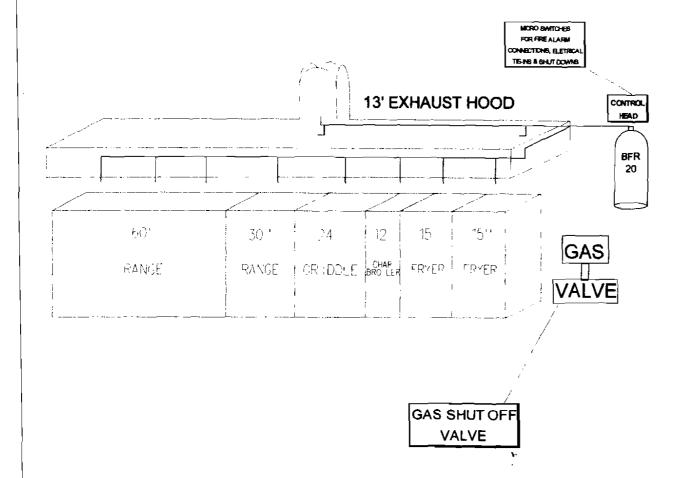
SYSTEM INFO:
BFR-20 = 13 FLOWS
APPLIANCES = 9 FLOWS
PLENUM = 2 FLOWS
DUCT = 2 FLOWS

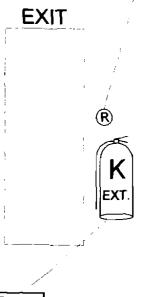


BAY STATE FIRE PROTECTION CORP. 161 R MERRIMAC STREET WOBURN, MA 800-640-5536

50.304 20 DI

REMOTE MANUAL PULL STATION





K RATED FIRE EXTINGUISHER