

Water-Based Fire Suppression System Permit Application

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: | | |
|--|---|---|
| Total Square Footage of Proposed Struc | cture: | |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# | Applicant Name: Address City, State & Zip | Telephone: Email: |
| Lessee/Owner Name: (if different than applicant) Address: City, State & Zip: Telephone & E-mail: | Contractor Name: (if different from Applicant) Address: City, State & Zip: Telephone & E-mail: | Cost Of Work: \$ Fees: first \$1000 = \$25 fee + \$11 for every other \$1000 of Cost of work Total Fees : \$ |
| If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? If y Project description: Who should we contact when the permit is: Address: | es, please name | |
| City State & Zin: | | |
| E-mail Address: | | |
| Telephone: Please submit all of the information causes | n outlined on the applicable cha an automatic permit denial. | ecklist. Failure to do so |
| In order to be sure the City fully under Department may request additional inform download copies of this form and www.portlandmaine.gov, or stop by the Inspector of the proposed work and that I have been author agree to conform to all applicable laws of application is issued, I certify that the Codareas covered by this permit at any reasonable | nation prior to the issuance of a pother applications visit the pections Division office, room 315 Cord of the named property, or the fixed by the owner to make this application. In addition, if the Official's authorized representation | permit. For further information or to Inspections Division on-line at lity Hall or call 874-8703. That the owner of record authorizes the lication as his/her authorized agent. It is permit for work described in this live shall have the authority to enter all |
| Signature: | Date: | |