City of Portland, Maine - Bu	O			2014 00177	Issue Date:	O32 I042001
389 Congress Street, 04101 Tel:	· ,	, Fax: (207) 874-8	ا	2014-00177		
Location of Construction: 433 FORE ST Owner Name: COW PLAZA		HOTEL LLC	100	Owner Address: 100 COMMERCIAL ST PORTLAND, ME 04101		ND ,
Business Name:	Cintas Fire Pro	Contractor Name: Cintas Fire Protection quinnj@cintas.com		actor Address: llwood Drive B	Phone (603) 717-7300	
Lessee/Buyer's Name	Phone:		Permit Type: Fire Suppression Water Based			Zone:
Past Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:
130 room Hotel with retail and restaurant 130 room Horestaurant		I with retail and \$50.00 \$2		\$2,24	40.00 2	
Proposed Project Description:			$\frac{1}{1}$			
Installation of Ansul Fire Suppression protect appliances.	hen Hood to	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Cor			(D.A.D.)	
protect appliances.					ed w/Conditions Denied	
Permit Taken By: Date A	Applied For:	1	51	ignature:		Date:
bjs 01/2			Zoning	g Approval		
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
		Shoreland		☐ Variance	re	Not in District or Landmar
 Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work 		☐ Wetland		Miscell	aneous	Does Not Require Review
		Flood Zone		Conditi	onal Use	Requires Review
		Subdivision		Interpre	etation	Approved
	Site Plan		Approv	ed	Approved w/Conditions	
	Maj Minor MM		Denied		☐ Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit shall have the authority to enter all a such permit.	to make this appl for work describe	lication as his authord in the application	nat the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offici	all applicable laws of this al's authorized representative
SIGNATURE OF APPLICANT		ADDI	RESS		DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE