City of Portland, Maine -	<b>Building or Use</b>	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703	Fax: (207) 874-8	3716	2013-02573		032 N009001
Location of Construction:	Owner Ado		r Address:	<del>-</del>	Phone:	
414 FORE ST	GOULD COM	MPANY LLC 257 S 0410		STATE ST # 3 01	PORTLAND,	ME
Business Name:	Contractor Name	Contractor Name:		actor Address:	Phone	
		Eastern Fire Protection Co., Inc. burpeemj@efp-efs.com		Kittyhawk Ave. urn ME 04211-	(207) 784-1507	
Lessee/Buyer's Name	Phone:	Phone:		it Type:	Zone:	
				e Suppression W	В3	
Past Use:	Proposed Use:			Permit Fee: Cost of Work:		CEO District:
Restaurant on 2 floors (Wharf S Fore St)		Same: Restaurant on two floors (Wharf St & Fore Street)		\$160.00 \ \$14,000.00		00.00 2
Proposed Project Description:						
Install Fire Suppression System		PEDESTRIAN ACTIVITIES DISTRICT  Action: Approved Approved Approved				
				TIES DISTRICT	Γ ( <b>P.A.D.</b> )	
				ved Approv	ed w/Conditions Denied	
			Si	ignature:		Date:
Permit Taken By: bjs	Zoning 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		☐ Varianc	ee	Not in District or Landmar
2. Building permits do not inc septic or electrical work.	☐ Wetland		Miscella	aneous	Does Not Require Review	
3. Building permits are void i within six (6) months of the	Flood Zone		Condition	onal Use	Requires Review	
False information may inva- permit and stop all work	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 ow	mer of record of the n	CERTIFICA			is authorized by	y the owner of record and the
I hereby certify that I aim the ow I have been authorized by the ov jurisdiction. In addition, if a per shall have the authority to enter such permit.	wner to make this appl rmit for work describe	lication as his authord in the application	rized a is issu	gent and I agree ned, I certify that	e to conform to t the code offici	all applicable laws of this ial's authorized representative
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN CHARG				DATE	PHONE	