•	Portland, Maine -	O			Permit No:	Issue Date:	CBL:
	ngress Street, 04101 T	Tel: (207) 874-8703	, Fax: (207) 874-8	716	2013-02599		032 N009001
Location of Construction: 414 FORE ST  Business Name:  Lessee/Buyer's Name		Owner Name: GOULD COM	GOULD COMPANY LLC		er Address: STATE ST # 3	ME Phone:	
			Cunningham Security Systems mperkins@cunninghamsecurity.c		ractor Address: Prince Point Road 96	Phone (207) 846-3350	
		Phone:	Phone:		it Type:	Zone:	
Past Use:		Duonogad Ugas	Proposed Use:		e Alarm System	B3 CEO District:	
	ant use on two floors (W	_	Same: Restaurant use on two		Fee: Cost of Work: \$6,00		
ST & F	,		floors (Wharf & Fore)		ECTION:	40,0	2
-	Project Description:	m System					
instail C	of Addressable Fire Aları		PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Approved		· A D )		
						ed w/Conditions Denied	
				S	ignature:	_	Date:
Permit Taken By: Date Applied For: 11/21/2013				Zoning Approval			
	<b>I</b>		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State a Federal Rules.</li> </ol>			Shoreland		☐ Variance	e	Not in District or Landman
	ilding permits do not incitic or electrical work.	☐ Wetland		☐ Miscella	aneous	Does Not Require Review	
3. 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			☐ Flood Zone		Condition	onal Use	Requires Review
			Subdivision		Interpre	tation	Approved
			☐ Site Plan		Approve	ed	Approved w/Conditions
			Maj Minor MM		☐ Denied		Denied
			Date:		Date:		Date:
			CERTIFICA	TIOI	N		
I have be jurisdict	een authorized by the ow ion. In addition, if a per- re the authority to enter a	ner to make this appl mit for work describe	ication as his authored in the application	ized a is issu	agent and I agree ned, I certify that	to conform to the code offic	y the owner of record and that all applicable laws of this ial's authorized representative on of the code(s) applicable to
SIGNATI	URE OF APPLICANT		ADDRESS			DATE	PHONE
RESPON	SIBLE PERSON IN CHARGE	E OF WORK, TITLE				DATE	PHONE