

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 100169

Please Read Application And Notes, If Any, Attached

This is to certify that BROWN J B & SONS/Sprinkler System, Inc

has permission to Changes to existing fire system

AT 50 DANFORTH ST CBL 040 C009001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, 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.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

PERMIT ISSUED

MAR 29 2010

Department Name

CITY OF PORTLAND

Fire Dept. CHR. R. Sauter

Health Dept. _____

Appeal Board _____

Other _____

James Burke 3/15/10

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

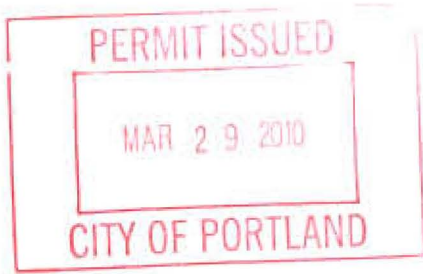
Permit No: 10-0169	Issue Date:	CBL: 040 C009001
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Location of Construction: 50 DANFORTH ST	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Phone:
Business Name:	Contractor Name: Sprinkler System, Inc	Contractor Address: P.O. Box 1285 Lewiston	Phone: 2077820104
Lessee/Buyer's Name	Phone:	Permit Type: Fire Suppression System	Zone: B-3

Past Use: Commercial / Physical Therapy Practice - "Livevital Physical Therapy & Performance" Connected w/ permit# 100021	Proposed Use: Commercial / Physical Therapy Practice - "Livevital Physical Therapy & Performance" - changes to existing fire system	Permit Fee: \$40.00	Cost of Work: \$2,000.00	CEO District: 1
Proposed Project Description: Changes to existing fire system		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied * See Conditions	INSPECTION: Use Group: B Type: Sprinkler DBX 2003 Signature: JMB 3/15/10	
		Signature: <i>(Signature)</i>	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 02/24/2010	Zoning Approval		
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>2/24/10</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>Requires A</i> <i>Separate Review Approval</i>
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CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 10-0169	Date Applied For: 02/24/2010	CBL: 040 C009001
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Location of Construction: 50 DANFORTH ST	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Phone:
Business Name:	Contractor Name: Sprinkler System, Inc	Contractor Address: P.O. Box 1285 Lewiston	Phone (207) 782-0104
Lessee/Buyer's Name	Phone:	Permit Type: Fire Suppression System	

Proposed Use: Commercial / Physical Therapy Practice - "Livevital Physical Therapy & Performance" - changes to existing fire system	Proposed Project Description: Changes to existing fire system
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 02/24/2010	Note:	Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 03/15/2010	Note:	Ok to Issue: <input checked="" type="checkbox"/>
1) Sprinkler systems to be designed and installed per IBC 2003 standards Sec. 903.3.1					
Dept: Fire	Status: Approved with Conditions	Reviewer: Capt Keith Gautreau	Approval Date: 03/02/2010	Note:	Ok to Issue: <input checked="" type="checkbox"/>
1) Sprinkler protection shall be maintained. Where the system is to be shut down for maintenance or repair, the system shall be checked at the end of each day to insure the system has been placed back in service.					
2) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.					
3) The sprinkler system shall be installed in accordance with NFPA 13.					
4) Application requires State Fire Marshal approval.					
5) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.					



Fire Suppression System Permit

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.

Installation address: 54 Danforth St. CBL: _____

Exact location: (within structure) Side facing Maple St.

Type of occupancy(s) (NFPA & ICC): Light Hazard

Building owner: J.B. Brown & Sons

Managing Supervisor: Scott E. Garland License No: 278

Supervisor phone: 775-1521 E-mail: scottssi@maine.cc.com

Installing contractor: Sprinkler Systems, Inc. License No: 093

Contractor phone: 775-1521 E-mail: Krissi@maine.cc.com

The suppression work to be done will be: New: Renovation: Addition to existing system:

This is an amendment to an existing permit: Yes: NO Permit no: _____

NFPA Standard will this system is designed to: NFPA #13 Edition: 2007

*Non-NFPA systems are not approved for use within the City of Portland

Attach all design information and complete approved submittals as may be required by the State Fire Marshal's Office.

Contractor shall verify location and type of all FDCs shall be approved in writing by the Fire Prevention Bureau.

<p>COST OF WORK: <u>\$2,000</u></p> <p>PERMIT FEE: <u>\$40</u> (\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000)</p>
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Download a new copy of this document from www.portlandmaine.gov for every submittal. 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).

Applicant signature: [Signature] Date: 2-4-10

RECEIVED
FEB 24 2010
Dept. of Building Inspections
City of Portland Maine



State of Maine
Department of Public Safety
Fire Sprinkler System Permit



8954

Livevital

Located at: 54 Danforth St
 In the Town of: Portland
 Occupancy/Use: Medical
 Type of System: NFPA 13

RECEIVED

FEB 24 2010

Permission is hereby given to:

Sprinkler Systems, Inc.
 PO Box 1285
 Lewiston, ME 042431285
 Contractor License # 93

Dept. of Building Inspections
 City of Portland Maine

according to plans submittal filed with the Licensing and Inspections Unit and are now approved.
 This application form/plans are filed under log # 2101043, and no departure from application form/plans shall be made without prior approval in writing. This permit is issued under the provisions of Title 32, Chapter 20, Section 12004-I. Nothing herein shall excuse the holder of this permit for failure to comply with local ordinances, zoning laws, or other pertinent legal restrictions. Each permit issued shall be displayed/available at the site of construction.

This permit was issued on **2/10/2010** for a fee paid of **\$100.00**
 This permit will expire at midnight on *Monday, August 09, 2010*



Anne H. Jordan
 Commissioner

Fire Department Connection Location/Type per Local Fire Department

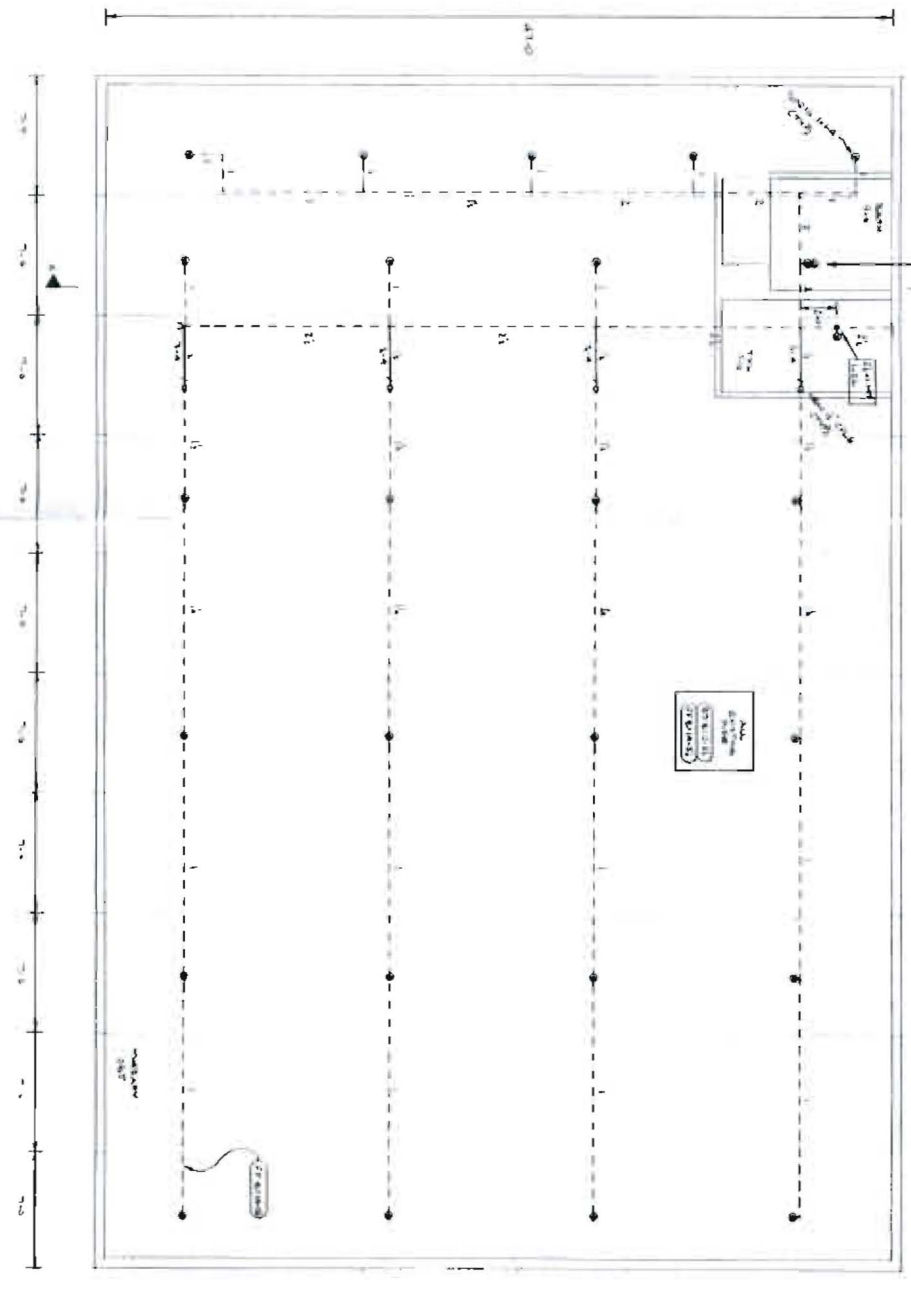
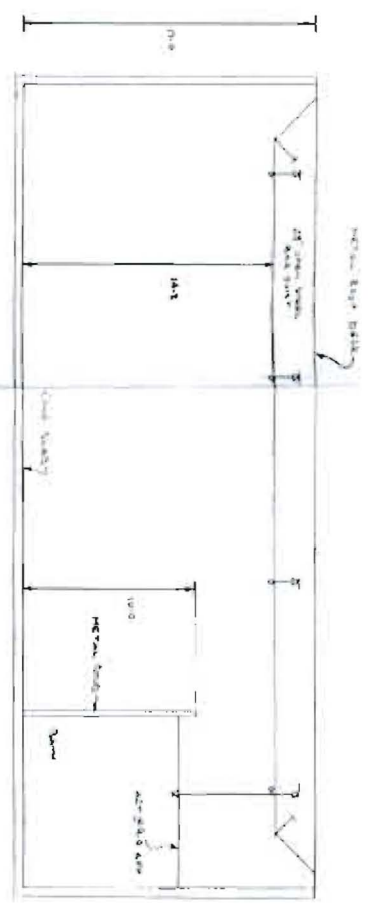
Within 30 days of the completion of a new fire sprinkler system or an addition to an existing fire sprinkler system, a fire sprinkler system contractor shall provide to the Licensing and Inspections Unit a copy of this permit signed and dated by the certified responsible managing supervisor representing that the fire sprinkler system has been installed according to specifications of the approved plan to the best of the supervisor's knowledge, information, and belief. This requirement is part of the sprinkler law, and neglect of this duty is grounds to not renew the contractor's license to do work in the State of Maine. All sprinkler licenses expire June 30th every year.

Job completed, tested and verified on date of _____

RMS for this job: Garland Scott F.

RMS Signature: 

- GENERAL NOTES:**
1. All work shall be done in accordance with the applicable codes and standards.
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RECEIVED

FEB 24 2010

Dept. of Building Inspections
City of Portland, Maine

PROJECT INFORMATION

1. Name of Project: _____

2. Name of Client: _____

3. Name of Designer: _____

4. Name of Contractor: _____

5. Name of Inspector: _____

6. Date of Inspection: _____

7. Name of Building: _____

8. Address: _____

9. City: _____

10. State: _____

11. Zip: _____

12. Project No.: _____

13. Drawing No.: _____

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