

**City of Portland, Maine - Building or Use Permit Application**

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

<b>Permit No:</b> 10-0274	<b>Issue Date:</b>	<b>CBL:</b> 046 B023001
------------------------------	--------------------	----------------------------

<b>Location of Construction:</b> 9 DEERING ST	<b>Owner Name:</b> GODUTI ELEANOR J & JOHN H	<b>Owner Address:</b> PO BOX 31	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Cunningham Security Systems	<b>Contractor Address:</b> 10 Prince Point Road Yarmouth	<b>Phone:</b> 2078463350
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Alarm System	<b>Zone:</b>

<b>Past Use:</b> Commercial Office connected w/ permit# 090205	<b>Proposed Use:</b> Commercial Office - install Fire Alarm	<b>Permit Fee:</b> \$110.00	<b>Cost of Work:</b> \$8,800.00	<b>CEO District:</b> 2
<b>Proposed Project Description:</b> Install Fire Alarm		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type:	
		Signature:	Signature:	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
		Signature:	Date:	

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 03/22/2010	<b>Zoning Approval</b>		
------------------------------------	--	------------------------	--	--

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.  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..	<b>Special Zone or Reviews</b> <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:	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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:

**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

<b>Location of Construction:</b> 9 DEERING ST	<b>Owner Name:</b> GODUTI ELEANOR J & JOHN H	<b>Owner Address:</b> PO BOX 31	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Cunningham Security Systems	<b>Contractor Address:</b> 10 Prince Point Road Yarmouth	<b>Phone</b> 2078463350
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Alarm System	<b>Zone:</b>

**Dept:** Historic      **Status:** Approved with Conditions      **Reviewer:** Deborah Andrews      **Approval Date:** 03/23/2010

**Note:** **Ok to Issue:**

- 1) \* Position of Knox box on building exterior to be determined by Keith Gautreau, in consultation with HP staff. Box to be located such that it has limited visual impact on historic building.

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 03/22/2010

**Note:** **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 3) This property shall remain 4 professional offices on the 1st floor and 4 residential dwelling units on the 2nd & 3rd floors. Any change of use shall require a separate permit application for review and approval.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 04/07/2010

**Note:** **Ok to Issue:**

- 1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
- 2) Fire Alarm systems shall be installed per Sec. 907 of the IBC 2003

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Ben Wallace Jr.      **Approval Date:** 04/07/2010

**Note:** **Ok to Issue:**

- 1) Installation of a Fire Alarm system requires a Knox Box to be installed per city ordinance
- 2) As-built documents shall be submitted in pdf to the Building Inspections Office upon completion of job.
- 3) Central Station monitoring for addressable fire alarm systems shall be by point.
- 4) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.
- 5) All fire alarm records required by NFPA 72 should be stored in an approved cabinet located at the FACP labeled "FIRE ALARM RECORDS". Records cabinet, FACP, annunciator(s), and pull stations shall be keyed alike.
- 6) The fire alarm system shall comply with the City of Portland Standard for Signaling Systems for the Protection of Life and Property. All fire alarm installation and servicing companies shall have a Certificate of Fitness from the Fire Department.
- 7) Detectors in the office spaces and basement, with the exception of the panel smoke, shall be ROR heat detectors.

**Comments:**

**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

<b>Location of Construction:</b> 9 DEERING ST	<b>Owner Name:</b> GODUTI ELEANOR J & JOHN H	<b>Owner Address:</b> PO BOX 31	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Cunningham Security Systems	<b>Contractor Address:</b> 10 Prince Point Road Yarmouth	<b>Phone</b> 2078463350
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Alarm System	<b>Zone:</b>

3/24/2010-gg: received from historic as of 03/23/10. Gg

### 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