Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

BU

Attached	PERMIT	Permit Number: 081451
This is to certify thatSTONE COAST PROP	ERTIE LC /Per	
has permission toComplete fire alarm sys	stem	
AT _603 CONGRESS ST		046 D031001
•	of Mage and of the Commerces	ng this permit shall comply with all sof the City of Portland regulating res, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Not ation of ispectic must be give and writte permission brocured before this building or produce hereof is lather or other many sed-in. 26 HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS  Fire Dept.  Health Dept.  Appeal Board  Other  Department Name	NALTY FOR REMOVING THIS CA	Pirector - Building & Inspection Services

City of Portland, Ma	aine - Buil	lding or Use	Permi	t Applicatio	n Per	rmit No:	Issue Date:	,	CBL:	
389 Congress Street, 04						08-1451	11/24	08	046 I	0031001
Location of Construction:	<del>.</del>	Owner Name:	_		Owner	r Address:	1		Phone:	
603 CONGRESS ST		STONE COA	ST PRO	PERTIES LL	142	HIGH ST ST	ΓE 320			
Business Name:		Contractor Name	:	<u>-</u>	Contra	actor Address:			Phone	
		Perry Glidden			142	High Street s	uite#320 Po	rtland	207632	5244
Lessee/Buyer's Name		Phone:				t Type:				Zone: 2
					Fire	Alarm Syste	em			18/
Past Use:		Proposed Use:		<u> </u>	Permi	it Fee:	Cost of Wor	k:	CEO District	<del></del>
Commercial - Dance Hal	1 / Theatre	Commercial -	Dance l	Hall /		\$370.00	\$35,00		2	
Commercial Bullet Hall	i / i iicati c	Theatre - Com			FIRE	DEPT:	<del></del>		CTION: /	
		system	•				Approved	1	oup:A-1/A	7 Type: 2 B
							Denied		too	0103
					50	e Con	Citions		1150	,- 200
Proposed Project Description	:	<u> </u>			┪	ture: Grea				<i>i 1</i>
Complete fire alarm syste					Signat	ture: ( a ~2c	Ches	   Signatu	ıre: ( ) X	11/24/0
						STRIAN ACT				<del>-11-11-</del>
•		•		*					·	-/ □ -D. : 1
					Action	n: Appro	ved App	roved w	/Conditions	Denied
					Signa	ture:			Date:	
Permit Taken By:	Date A	pplied For:					Approva	1		
ldobson		4/2008				Zomne	Approva	11		
1. This permit applicat	ion does not	nreclude the	Spe	cial Zone or Revi	ews	Zoni	ng Appeal	T	Historic P	reservation
Applicant(s) from m				oreland		☐ Variano			Not in Dia	trict or Landma
Federal Rules.	comig appire	ouble State and	_ 31	ioreiand		variand	æ		Not III DIS	trict of Landina
	: 1 1	.11	w	etland		Miscell	onaous		Dogs Not	Require Review
2. Building permits do septic or electrical w		plumbing,	'' "	Chand		IVIISCEII	ancous		Dues Not	xequite Keview
•		r is not stantad		ood Zone		Conditi	onal Use		Requires F	2 eview
3. Building permits are within six (6) month			'' ''	ood Zone		Conditi	onur Osc		requires i	terion
False information materials			$  _{\square_{S_1}}$	ıbdivision		Interpre	tation		Approved	
permit and stop all v	•	C		iour ision		l merpre	tation		прриотеа	
			$  _{\square_{Si}}$	te Plan		Approv	ed		Annroved	w/Conditions
				to I had			ou .		Пітрріотов	Wednations
grander and the construction of the constructi			   Maj∫	☐ Minor ☐ (MM		Denied			Denied	
PERMI	ISSUED		1/4		<b>'</b> '			- 1		$\mathcal{L}$
1000	angenin art is green beauty in 1994 and reserve	7	DOK.	- Just	5 <b>Q</b> \	Date:			unto:	
		l l	Date:	11/10/19	<i>U</i>	Date.			ate:	
01				· ·						
CITY OF I	AN ITEMS	in								
0111011	1./1 a 1 k,/1 + s	*:2								
			(	ERTIFICATI	ON					
I hereby certify that I am	the owner of	record of the na				nosed work is	s authorized	hy the	owner of rec	ord and that
I have been authorized by										
jurisdiction. In addition,										
shall have the authority to	enter all are	as covered by su	ich perr	nit at any reaso	nable h	our to enforce	ce the provi	sion of	the code(s)	applicable to
such permit.										
SIGNATURE OF APPLICANT				ADDRES	<u> </u>		DATE		DI	HONE
SISTEMENT OF ALL DICANT				TUDICES	J		DATE		rı	LOILE
RESPONSIBLE PERSON IN C	CHARGE OF W	ORK, TITLE					DATE		PI	HONE

City of Portland, Maine - Build	ling or Usa Parmit			Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (2	· ·		-8716	08-1451	11/14/2008	046 D031001
Location of Construction:	Owner Name:		0	wner Address:		Phone:
603 CONGRESS ST	STONE COAST PRO	PERTIES	LL 1	42 HIGH ST STE	E 320	
Business Name:	Contractor Name:		C	ontractor Address:		Phone
·	Perry Glidden		1	42 High Street sui	ite#320 Portland	(207) 632-5244
Lessee/Buyer's Name	Phone:	-	Pe	ermit Type:		
				Fire Alarm Systen	1 .	
Proposed Use:		Į	Proposed	Project Description:	<del>-</del>	<u>—</u> ———
Commercial - Dance Hall / Theatre - C	Complete fire alarm syst	tem	Comple	te fire alarm syste	m	
	-		-	·		
					·	
Dept: Zoning Status: A	proved	Rev	iewer:	Marge Schmucka	l Approval Da	ate: 11/14/2008
Note:						Ok to Issue:
Dept: Building Status: Ap	proved with Condition	s Rev	iewer:	Chris Hanson	Approval Da	ate: 11/24/2008
Note:						Ok to Issue:
1) Fire Alarm systems shall be install	ed per Sec. 907 of the I	BC 2003				
<ol> <li>Separate permits are required for a approval as a part of this process.</li> </ol>	ny electrical, plumbing	, HVAC c	or exhau	st systems. Separa	te plans may need to	be submitted for
3) Application approval based upon it	nformation provided by	, annliaan	+ Anu d	aviation from ann	marrad mlana magnimas	aamamata marijarri
and approrval prior to work.	mormation provided by	аррпсап	ı. Any u	еманон пош арр	roved plans requires	separate review
Dept: Fire Status: Ap	proved with Condition	s <b>Rev</b>	iewer:	Capt Greg Cass	Approval Da	ite: 11/18/2008
Note:				_		Ok to Issue:
The Fire alarm and Sprinkler syste     Compliance letters are required.	ms shall be reviewed by	y a license	ed contra	actor[s] for code co		
2) Installation of a Fire Alarm system	requires a Knox Box to	o be instal	lled per	city crdinance		

## General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction:	3 Congress S	1.
Total Square Footage of Proposed Structure	Square Footage of I	Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  Yhrange D 3/	Owner: Stone Coast Prop	7. Telephone: 632-5744
Lessee/Buyer's Name (If Applicable)	Applicant name, address & teleph	Cost Of Work: \$ 35,000 Fee: \$ C of O Fee: \$ 370
Current legal use (i.e. single family)		
If vacant, what was the previous use?  Proposed Specific use:  Is property part of a subdivision?  Project description:	Then If yes, please name	
Complete Fine Di	larm System	KW 17
Contractor's name, address & telephone:	_	,
Who should we contact when the permit is read Mailing address:  142 Hightst. Svita Ta Parktand Main O 4	hy: Helly blidde Phone: 632-5 40	len 5244
Please submit all of the information outle Failure to do so will result in the automa	ined in the Commercial Applie	cation Checklist.
In order to be sure the City fully understands the full request additional information prior to the issuance of other applications visit the Inspections Division on-litroom 315 City Hall or call 874-8703.	scope of the project, the Planning and of a permit. For further information or t	o download copies of this form and
I hereby certify that I am the Owner of record of the named been authorized by the owner to make this application as hi in addition, if a permit for work described in this applicatio authority to enter all areas covered by this permit at any reas	is/her authorized agent. I agree to conform on is issued, I certify that the Code Official's	to all applicable laws of this jurisdiction. authorized representative shall have the
Signature of applicant:	Date	ululu l

## **ELECTRICAL PERMIT** City of Portland, Me.

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance,

National Electrical Code and the following specifications:

LOCATION: 100 METER MAKE & # OWNER C CMP ACCOUNT # PHONE #

		-	TOTAL EACH FEE		
OUTLETS	Receptacles	Switches	Smoke Detector	.20	
FIXTURES	Incandescent	Fluorescent	Strips	.20	
SERVICES	Overhead	Underground	TTL AMPS <800	15.00	
	Overhead	Underground	>800	25.00	
Temporary Service	Overhead	Underground	TTL AMPS	25.00	
				25.00	
METERS	(number of)			1.00	
MOTORS	(number of)			2.00	
RESID/COM	Electric units			1.00	
HEATING	oil/gas units	Interior	Exterior	5.00	
APPLIANCES	Ranges	Cook Tops	Wall Ovens	2.00	
	Insta-Hot	Water heaters	Fans	2.00	
	Dryers	Disposals	Dishwasher	2.00	
	Compactors	Spa	Washing Machine	2.00	
	Others (denote)			2.00	
MISC. (number of)	Air Cond/win			3.00	
	Air Cond/cent		Pools	10.00	
	HVAC	EMS	Thermostat	5.00	
	Signs			10.00	
	Alarms/res			5.00	
Fire Placms	Alarms/com			15.00	
	Heavy Duty(CRKT)			2.00	
	Circus/Carnv	_		25.00	
	Alterations			5.00	
	Fire Repairs			15.00	
	E Lights			1.00	
	E Generators			20.00	
			lon		
PANELS	Service	Remote	Main	4.00	
TRANSFORMER	0-25 Kva			5.00	
	25-200 Kva			8.00	
	Over 200 Kva			10.00	
			TOTAL AMOUNT DUE		
	MINIMUM FEE/COM	MERCIAL 55.00	MINIMUM FEE 45.00		

MASTER LIC. # MS600/66/3 **CONTRACTORS NAME** ADDRESS /42 / LIMITED LIC. # **TELEPHONE** 

White Copy - Office

SIGNATURE OF CONTRACTOR

**Yellow Copy - Applicant**