

## Water-Based Fire Suppression System **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.

| Address/Location of Construction: 22   | BEAMHALL ST                                    |   |  |  |  |
|--|--|---|--|--|--|
| Total Square Footage of Proposed Struct  |  |   |  |  |  |
| 7500 SQ FT   |  |   |  |  |  |
| Tax Assessor's Chart, Block & Lot  | Applicant Name: DEAN! ALLYN IN                 | Telephone:  |  |  |  |
| Chart# Block# Lot# 05.3 Doo 7 00   | Address<br>116 Lowston ROAD                    | 207-657-5646<br>Email: , , ,  |  |  |  |
|  | City, State & Zip                              | Email:<br>Scote@denandalth.com  |  |  |  |
|  | GRAY, ME 04039                                 |   |  |  |  |
| Lessee/Owner Name : MMC (if different than applicant)                            | Contractor Name: (if different from Applicant) | Cost Of Work:   |  |  |  |
| Address:   | Address:                                       | \$52,000  |  |  |  |
| 22 Bramphall ST<br>City, State & Zip:<br>Porland ME 04102<br>Telephone & E-mail: | City, State & Zip: Telephone & E-mail:         | Fees: first \$1000 = \$25 fee + \$11 for every other \$1000 of Cost of work  Total Fees: \$536,00 |  |  |  |
| Current use (i.e. single family) MECHAN  | ECAL ROOM                                      |   |  |  |  |
| If vacant, what was the previous use?  |  | <u> </u>  |  |  |  |
| Proposed Specific use: MECHANICAL A  | 2 <sub>cern</sub>                              |   |  |  |  |
| Is property part of a subdivision? If ye   | s, please name                                 | <del></del>   |  |  |  |
| Project description:   |  |   |  |  |  |
| Ecrano Protection To THE Who should we contact when the permit is re             | ASTH LEVELS OF MAINE MET                       | Corrose PAWWW ARM   |  |  |  |
| Address: 116 Lewisten ROAD   |  |   |  |  |  |
| City, State & Zip: GRAI, ME 04039  |  |   |  |  |  |
| E-mail Address: 500 te @ degn and ally   | a Con  |   |  |  |  |
| Telephone: 207-65-7-5-646  |  |   |  |  |  |
| Please submit all of the information   | outlined on the applicable checklist.          | Failure to do so  |  |  |  |
|  |  |   |  |  |  |

causes an automatic permit denial.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit ar any reasonable hour to enforce the provisions of the codes applicable to this permit.

| Signature: |   | Date: ///2 | 25/15 |  |
|------------|---|------------|-------|--|
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