

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 071264

This is to certify that CASCIO STEPHEN & CHRISTINE F. CASCIANO/TS/Freedom are

has permission to Add Sprinkler System to building

AT 23 ELLSWORTH ST

053 H003001

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 altered or enclosed-in. **HEAVY 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. 10/11/07

Health Dept. _____

Appeal Board _____

Other _____

Department Name

10/17/07 Cheryl
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: 07-1264	Issue Date: 10/17/07	CBL: 053 H003001
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Location of Construction: 23 ELLSWORTH ST	Owner Name: CASCIO STEPHEN & CHRISTIN	Owner Address: 23 ELLSWORTH ST	Phone:
Business Name:	Contractor Name: Freedom Fire Protection, Inc	Contractor Address: 209 Quaker Ridge Road Casco	Phone 2076274109
Lessee/Buyer's Name	Phone:	Permit Type: Sprinkler Systems	Zone:

Past Use: 4 Unit Residential	Proposed Use: 4 Unit Residential - Add Sprinkler System to building	Permit Fee: \$150.00	Cost of Work: \$12,500.00	CEO District: 2
Proposed Project Description: Add Sprinkler System to building		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>see conditions</i>	INSPECTION: Use Group: R-2 Type: SB <i>IB-2003</i>	
		Signature: <i>M. Huels 10/17/07</i> Signature: <i>C. M. 10/17/07</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: 10/10/2007	Zoning Approval		
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input checked="" type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision <i>OK</i>	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>10/17/07 CM</i>	Date: _____	Date: <i>10/17/07 CM</i>

OCT 17 2007

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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

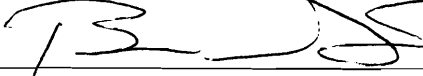
A Pre-construction Meeting will take place upon receipt of your building permit.

- _____ **Footing/Building Location Inspection:** Prior to pouring concrete
- _____ **Re-Bar Schedule Inspection:** Prior to pouring concrete
- _____ **Foundation Inspection:** Prior to placing ANY backfill
- _____ **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling
- _____ **Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

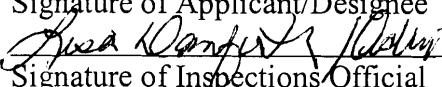
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects **DO** require a final inspection

_____ **If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

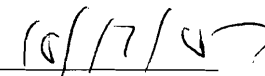
_____ **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPAGE MAY BE OCCUPIED**



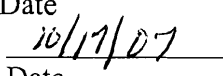
Signature of Applicant/Designee



Signature of Inspections Official



Date



Date

CBL: _____ Building Permit #: 07-1264

City of Portland, Maine - Building or Use Permit

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

Permit No: 07-1264	Date Applied For: 10/10/2007	CBL: 053 H003001
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Location of Construction: 23 ELLSWORTH ST	Owner Name: CASIO STEPHEN & CHRISTINE	Owner Address: 23 ELLSWORTH ST	Phone:
Business Name:	Contractor Name: Freedom Fire Protection, Inc	Contractor Address: 209 Quaker Ridge Road Casco	Phone: (207) 627-4109
Lessee/Buyer's Name	Phone:	Permit Type: Sprinkler Systems	

Proposed Use: 4 Unit Residential - Add Sprinkler System to building	Proposed Project Description: Add Sprinkler System to building
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Dept: Zoning	Status: Approved	Reviewer: Chris Hanson	Approval Date: 10/17/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 10/17/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work. 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process. 3) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Deputy Chief Shutts	Approval Date: 10/11/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) The sprinkler system shall be installed in accordance with NFPA 13.			

City of Portland, Maine - Building or Use Permit

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

Permit No: 07-1264	Date Applied For: 10/10/2007	CBL: 053 H003001
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Dept: Zoning **Status:** Approved **Reviewer:** Chris Hanson **Approval Date:** 10/17/2007
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 10/17/2007
Note: **Ok to Issue:**

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- 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 3) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Deputy Chief Shutts **Approval Date:** 10/11/2007
Note: **Ok to Issue:**

- 1) The sprinkler system shall be installed in accordance with NFPA 13.



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: <u>23 ELLSWORTH ST.</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>S3</u> <u>H</u> <u>3</u>	Applicant * <u>must</u> be owner, Lessee or Buyer* Name <u>BRAIN STONE (GC)</u> Address <u>20 BRAMHALL ST</u> City, State & Zip <u>PORTLAND, ME</u>	Telephone: <u>207/807-6178</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>12,500</u> C of O Fee: \$ Total Fee: \$ <u>150⁰⁰/100</u>
Current legal use (i.e. single family) _____ If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Sprinkler System</u>		
Contractor's name: <u>FREEDOM FIRE PROTECTION</u> <u>QUAKER</u> Address: <u>209 QUAKER RIDGE RD</u> City, State & Zip <u>CASCO ME 04015</u>		DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME <u>OCT 10 2007</u> RECEIVED Telephone: <u>207/627-4109</u>
Who should we contact when the permit is ready: <u>BRAIN STONE</u>		Telephone: <u>807-6178</u>
Mailing address: <u>20 BRAMHALL ST</u>		

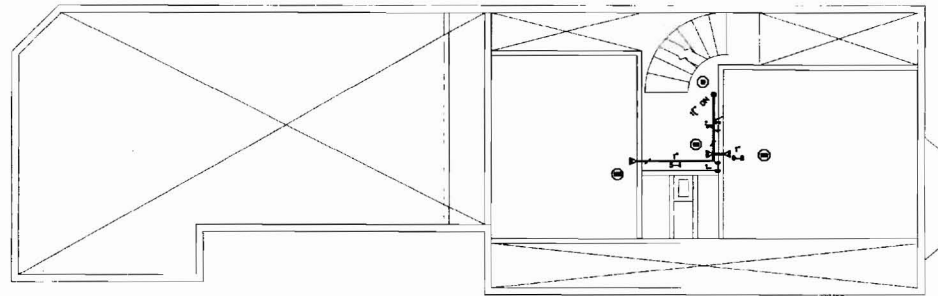
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 at any reasonable hour to enforce the provisions of the codes applicable to this permit.

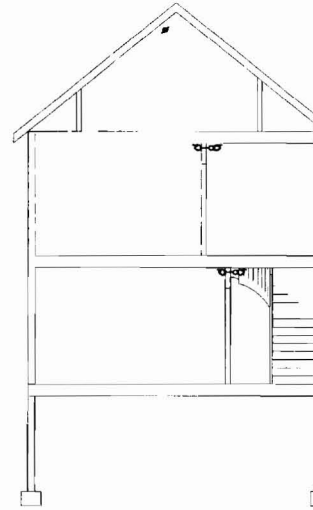
Signature: William C. Wales Date: 10/10/07

This is not a permit; you may not commence ANY work until the permit is issue

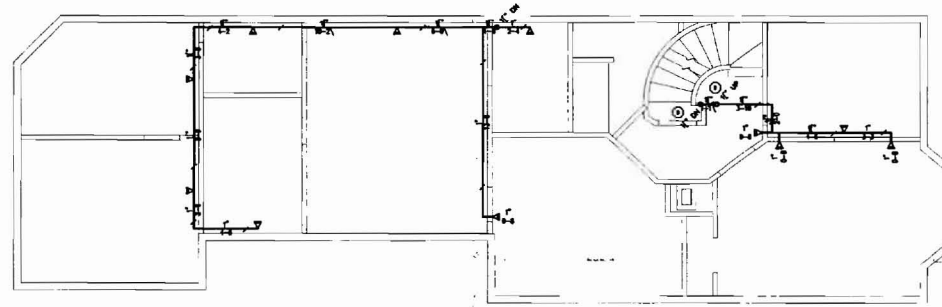


ATTIC FLOOR PLAN
1/4" = 1'-0"

HYDRAULIC DESIGN	
TYPE	WET
SPRINKLER	3 SPRINKLERS
WATER SUPPLY	30 GPM
WATER PRESSURE	3.000 PSI
WATER ALARM	N/A
WATER MOTOR	100 GPM
WATER MOTOR	20 PSI
WATER MOTOR	7.000 PSI

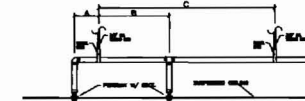


SECTION VIEW
1/4" = 1'-0"



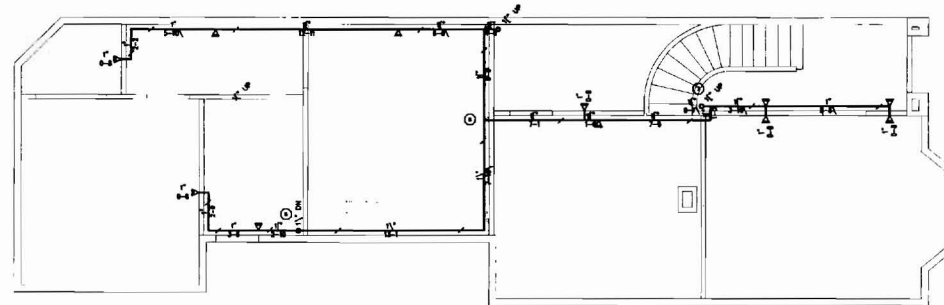
SECOND FLOOR PLAN
1/4" = 1'-0"

MAXIMUM HANGER SPACING			
PIPE DIA.	SPACING	PIPE DIA.	SPACING
1/2"	4'	3/4"	4'
1"	6'	1 1/4"	6'
1 1/2"	8'	1 3/4"	8'
2"	10'	2"	10'

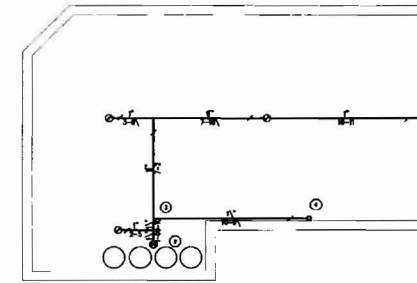


CPVC PIPE HANGING SPECIFICATIONS

FIGURE 25 S
FOR STEEL OF



FIRST FLOOR PLAN
1/4" = 1'-0"



BASE PLAN
1/4" = 1'-0"

REVISIONS	NOTES	HEAD COUNT								STANDARD SYMBOLS				STANDARD SYMBOLS					
NO.		SPRINKLER TYPE	MFG.	ESC.	MODEL	FINISH	ORIFICE	TEMP.	SYMBOL	QUANT.	SYMBOL	SYMBOL	SYMBOL	SYMBOL	SYMBOL	SYMBOL	SYMBOL		
REVISION 02/21/97		PLANTER	S-63	TRD	N/A	1/2"	1/2"	157	⊙	1	⊙	⊙	⊙	⊙	⊙	⊙	⊙		
		WELL	S-63	TRD	RECORD	1/2"	1/2"	157	⊙	2	⊙	⊙	⊙	⊙	⊙	⊙	⊙		
		TOTAL SPRINKLERS THIS DRAWING									3								