Cit	ty of Portland, Maine	e - Building or Use 1	Permit Applicat	ion	Permit No:	Issue Date:		CBL:	
389	Congress Street, 04101	1 Tel: (207) 874-8703	Fax: (207) 874-8	716	2014-01350			055 B033001	
Loca	ation of Construction:	Owner Name:		Owne	r Address:	-		Phone:	
14	BLYTHE CT	BAKER JEFF	BAKER JEFFREY B		14 BLYTHE CT PORTLAND, ME 04102			(207) 331-6123	
Busi	iness Name:	Contractor Name	ntractor Name:		Contractor Address:			Phone:	
		Fire Protection	Fire Protection Sprinkler Services		14 BLYTHE CT PORTLAND ME 04102			(207) 393-7422	
Less	see/Buyer's Name	Phone:			Permit Type: Fire Sprinkler Systems One & Two Fam			Zone:	
Past	Use:	Proposed Use:			Permit Fee: Cost of Work:			CEO District:	
	ngle-Family Home	-	Single-Family Home				,000.00 3		
				INSP	ECTION:				
	posed Project Description:	_							
Ins	stallation of a Fire Sprinkle								
			PEDES		CDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
				Action: Approved Approved w/Co			ed w/Cor Da		
Perr	mit Taken By:	Date Applied For:		Zoning Approval					
dn		06/19/2014	Zoning Approvai						
1.	This permit application of	does not preclude the	Special Zone or Re	views	Zonii	Zoning Appeal		Historic Preservation	
1.	Applicant(s) from meeting Federal Rules.		Shoreland		☐ Variance	☐ Variance ☐		Not in District or Landmar	
2.	Building permits do not septic or electrical work.	☐ Wetland ☐ Flood Zone		Miscella	neous		Does Not Require Review		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.			Condition	onal Use		Requires Review		
	False information may in permit and stop all work		☐ Subdivision		☐ Interpre	tation		Approved	
			Site Plan		Approve	Approved		Approved w/Conditions	
			Maj Minor MM		_ Denied	☐ Denied		Denied	
			Date:		Date:	Date:		Date:	
I ha juri shal	ereby certify that I am the over been authorized by the sdiction. In addition, if a played the authority to enth permit.	owner to make this appl permit for work describe	ication as his author d in the application	at the ized a is issu	proposed work in agent and I agreed and I certify that	to conform to the code offic	all app	licable laws of this horized representative	
SIGNATURE OF APPLICANT			ADDR	ESS		DATE	PHONE		