City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No:	Issue Date:	CBL:
2014-00045		063 E005001

Location of Construction:	Owner Name:	Owner Address:	Phone:
223 WESTERN PROMENADE	223 WESTERN PROM LLC	100 MIDDLE RD CUMBERLAND CENTER, ME 04021	

Business Name:	Contractor Name:	Contractor Address:	Phone
	Advanced Fire Protection Services ~~dcampbell1469@gmail.com~~	PO Box 81 Minot ME 04258	(207) 783-3650

Lessee/Buyer's Name	Phone:	Permit Type:	Zone:
		Fire Suppression Water Based	R4

Past Use:	Proposed Use:	Permit Fee:	Cost of Work:	CEO District:
3 Residential Condominiums	Same: 3 Residential Condominiums	$340.00	$32,000.00	3

INSPECTION:

Proposed Project Description:

installation of a 13R sprinkler system

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: ☐ Approved ☐ Approved w/Conditions ☐ Denied

Signature: Date:

Permit Taken By:	Date Applied For:
bjs	01/09/2014

Zoning Approval

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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
☐ Shoreland	☐ Variance	☐ Not in District or Landmark
☐ Wetland	☐ Miscellaneous	☐ Does Not Require Review
☐ Flood Zone	☐ Conditional Use	☐ Requires Review
☐ Subdivision	☐ Interpretation	☐ Approved
☐ Site Plan	☐ Approved	☐ Approved w/Conditions
Maj ☐ Minor ☐ MM ☐	☐ Denied	☐ Denied
Date:	Date:	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