



# Fire Alarm 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.

<b>Address/Location of Construction:</b> 335 Brighton Ave		
<b>Total Square Footage of Proposed Structure:</b>		4,764 (tenant space only)
<b>Tax Assessor's Chart, Block &amp; Lot</b> Chart#      Block#      Lot#	<b>Applicant Name:</b> Norris Inc. Address      2257 West Broadway City, State & Zip      South Portland, ME. 04106	Telephone: 207-883-347 3 Email: melissap@n norrisinc.com
<b>Lessee/Owner Name :</b> Maine Medical (if different than applicant) Center Address: 335 Brighton Ave. City, State & Zip: Portland, ME 04101 Telephone & E-mail: 207-662-8006	<b>Contractor Name:</b> Favreau (if different from Applicant) Electric Address: 37 Jordan Ave Brunswick, City, State & Zip: ME. 04011 207-725-2005 Telephone & E-mail: tobiek@favrea u-electric.com	Cost Of Work: \$ 15,000 Fees: first \$1000 = \$30 fee + \$10 for every other \$1000 of Cost of work Total Fees : \$ 170.00
<b>Current use</b> (i.e. single family) <u>Healthcare</u>		
<b>If vacant, what was the previous use?</b> _____		
<b>Proposed Specific use:</b> <u>Wound Care</u>		
Is property part of a subdivision? <u>NO</u> If yes, please name _____		
<b>Project description:</b> Install new fire alarm devices for wound care fit up. New devices will be added to the existing <u>Not for addressable fire alarm (voice evac).</u>		
<b>Who should we contact when the permit is ready:</b> Melissa Peters-- Norris Inc.		
<b>Address:</b> same as above		
<b>City, State &amp; Zip:</b> same as above		
<b>E-mail Address:</b> melissap@norrisinc.com		
<b>Telephone:</b> 207-883-3473 x1104		

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](http://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:** Melissa Peters      **Date:** 5/5/15

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