

PERMIT ISSUED

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

Permit No: 01-1326 Issue Date: OCT 31 2001 CBL: 144 A002001

Location of Construction: 96 Falmouth St	Owner Name: University of Maine	Owner Address: 96 Falmouth Street	Phone:
Business Name: n/a	Contractor Name: Leach Electric Inc.	Contractor Address: P.O. Box 907 Gray	Phone: 2076575556
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Building Miscellaneous	Zone:

CITY OF PORTLAND

Past Use: University Gymnasium	Proposed Use: University Gymnasium	Permit Fee:	Cost of Work: \$16,000.00	CEO District: 3
Proposed Project Description: Installation of Strobe/Speaker Fire Alarm System throughout building		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A-3 Type: BOCA 1989	
		Signature: <i>MM</i>	Signature: <i>T. Munson</i>	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 10/23/2001	Zoning Approval	
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<ol style="list-style-type: none"> 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

011326

All Purpose 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.

U.S.M

Location/Address of Construction: Sullivan Gym 96 Falmouth ST

Total Square Footage of Proposed Structure	Square Footage of Lot
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Tax Assessor's Chart, Block & Lot Chart# <u>144</u> Block# <u>A002</u> Lot# <u>AA001</u>	Owner: <u>University of Maine</u>	Telephone:
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Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: <u>\$16,000</u> Fee: <u>\$100.00</u>
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Current use: GYM

If the location is currently vacant, what was prior use: _____

Approximately how long has it been vacant: _____

Proposed use: Gym for the University

Project description: Adding Strobel speaker thought out the gym building
add pull stations at each outside door

Contractor's name, address & telephone: Leach Electric Inc P.O. Box 907 Gray Me 657-5556

Who should we contact when the permit is ready: Marc Carbonneau

Mailing address: Leach Electric Inc P.O. Box 907 Gray, Maine 04039 mail Phone: 657-5556

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

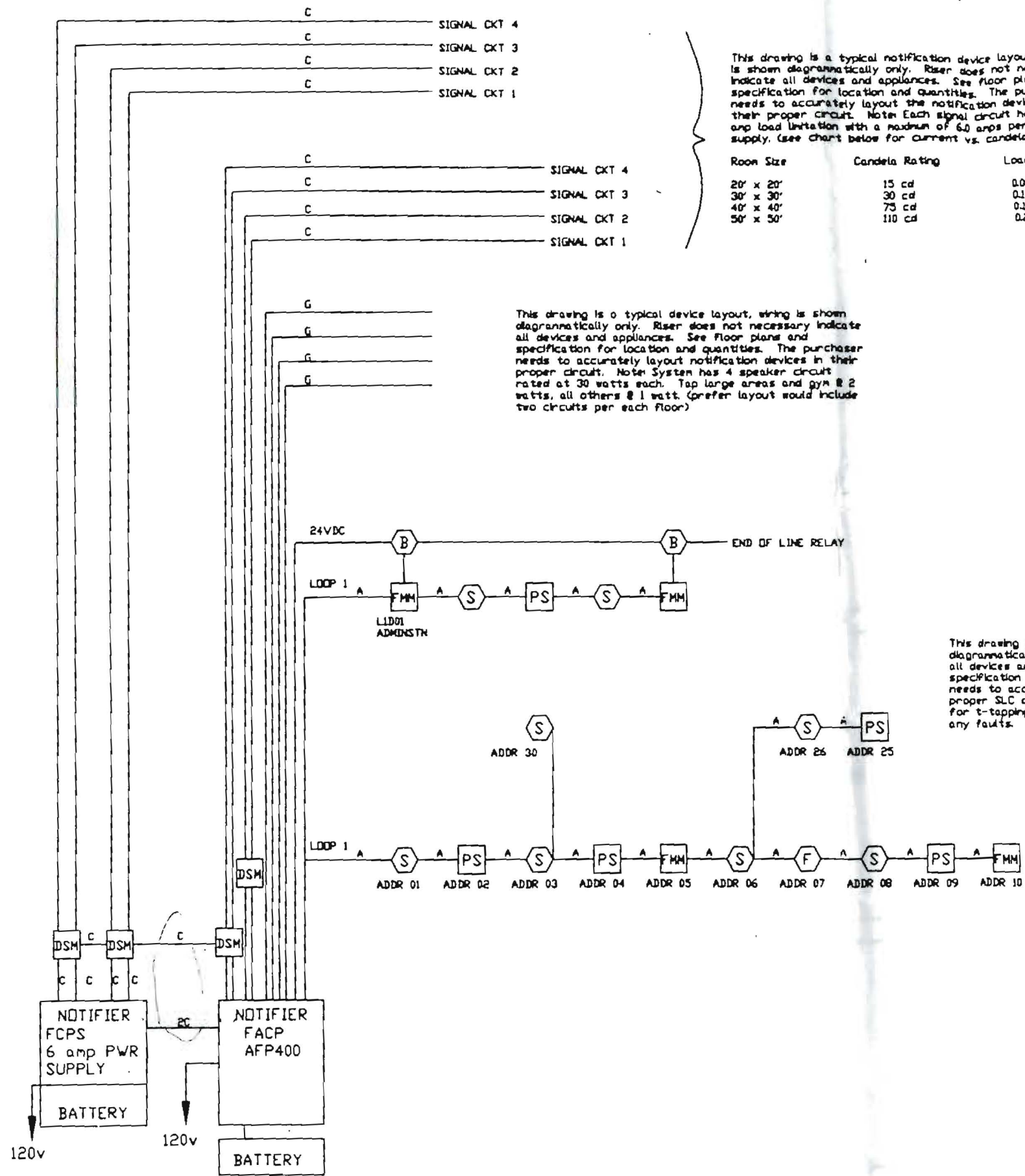
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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 of applicant: <u>Marc Carbonneau</u>	Date: <u>10/23/01</u>
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This is not a permit, you may not commence ANY work until the permit is issued

OCT 23 2001

10/23/01
Gulf



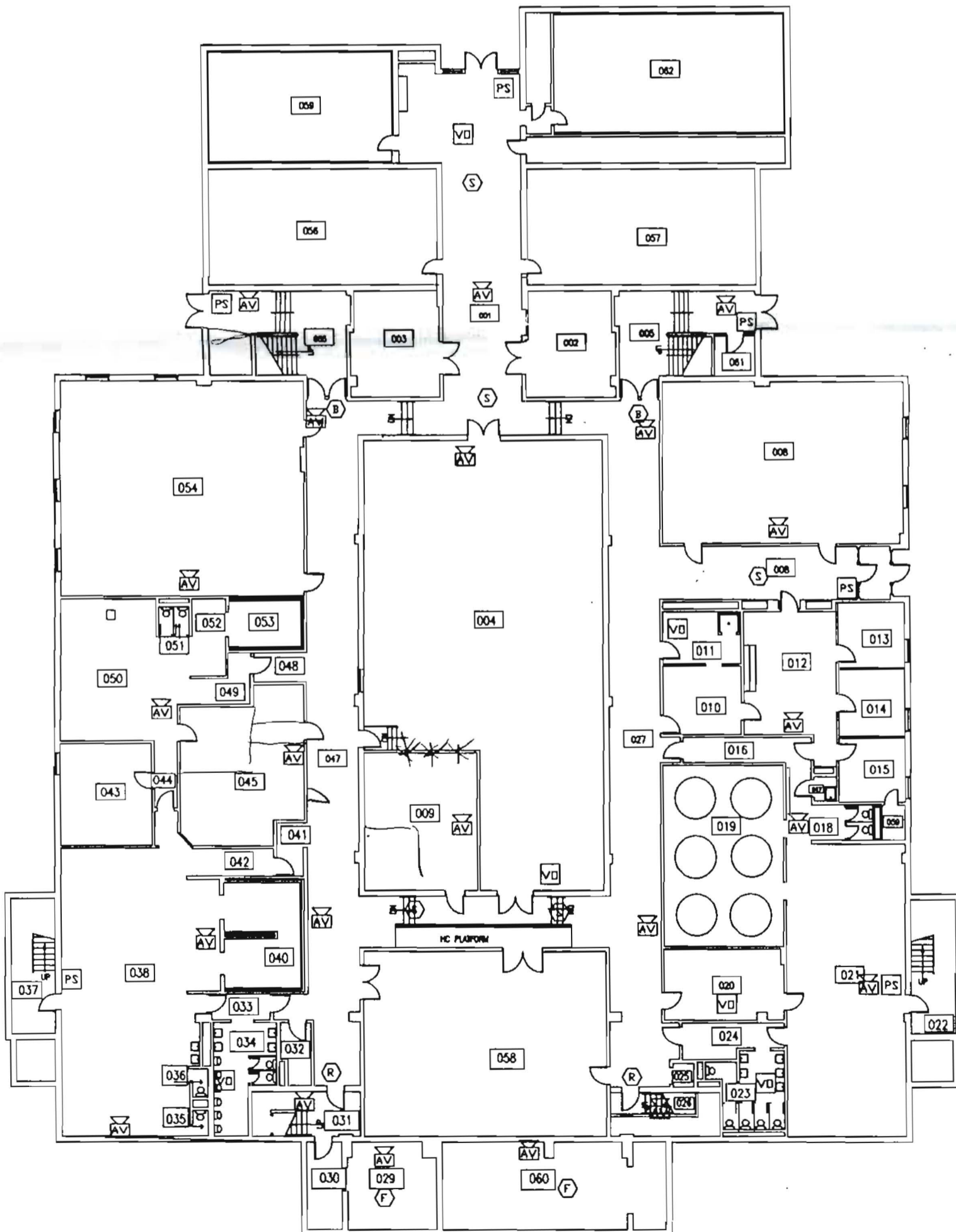
Rule of Thumb:
 15 UNITS / CIRCUIT AND
 A 110 VISUAL COUNTS
 AS 2 UNITS.

LEGEND

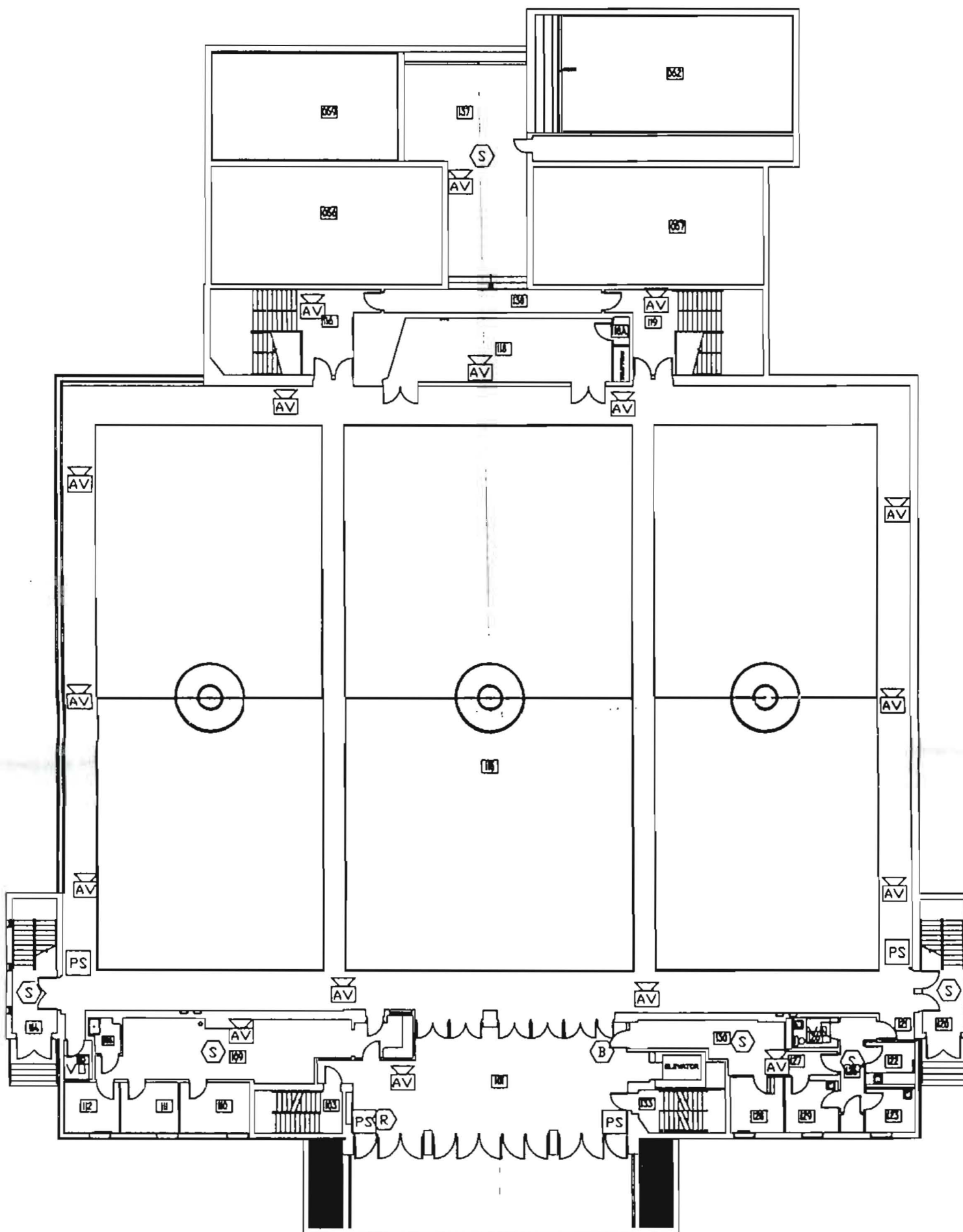
- MOUNTING HEIGHT
- 48 INCHES PS PULL STATION
 - S SMOKE DETECTOR
 - B BEAM SMOKE DET
 - F HEAT DETECTOR
FIXED TEMP
 - 120v RT REMOTE TEST/INDICATOR
 - DS DUCT SMOKE DETECTOR
 - 80 INCHES VO VISUAL ONLY
 - 80 INCHES AV SPEAKER / VISUAL
 - DSM DUAL SYNC MODULE
 - DH DOOR HOLDER
120V AC
 - FMM MONITOR MODULE
 - FRM RELAY MODULE
 - STS SPRINKLER TAMPER
 - SFS SPRINKLER FLOW

- 4.7k END OF LINE RESISTOR (Panel Circuits)
- 2.2k END OF LINE RESISTOR (FCPS Circuits)
- A 1 PR #18 TWISTED PAIR
- B 1 PR #12 AVG FPL CABLE
- C 1 PR #14 AVG FPL CABLE
- D 1 PR #16 AVG FPL CABLE
- E 1 PR #18 AVG FPL CABLE
- F 2c #12 AVG CABLE
- G 2c #14 AVG SHIELDED
- H 2c #16 AVG CABLE
- I 2c #18 AVG CABLE
- S 3c #18 AVG CABLE

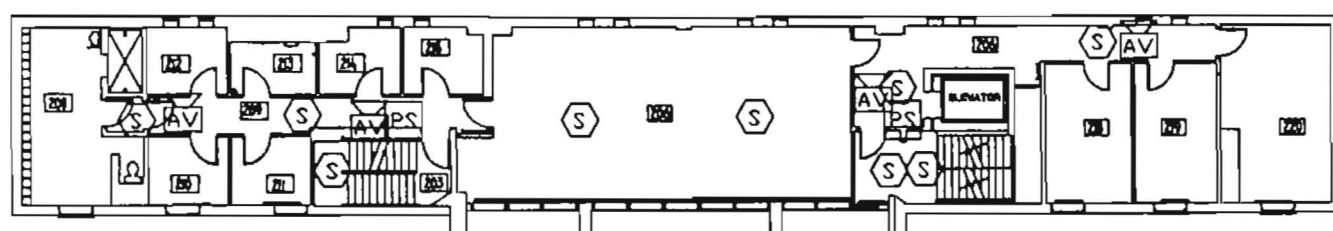
REVISION 2	DATE:
REVISION 1	DATE:
REVISION 0 SUBMITTAL	DATE: 10-12-01
SYSTEM WIRING RISER	
PROJECT NAME USM Addressable typical PORTLAND, MAINE	SCALE NTS BY: KNOWLTON CK BY:
NORRIS INC.	
P.O. BOX 2551, SOUTH PORTLAND, MAINE 04116 2257 BROADWAY, So PORTLAND, MAINE	
SAVED AS:	USMGYM



- PS FULL STATION
- S SMOKE DETECTOR
- B BEAM SMOKE DET W/
PWR MODULE
- R BEAM SMOKE
RECEIVER
- F HEAT DETECTOR
FIXED TEMP
- RT SMOKE
TEST/INDICATOR
- DS DUCT SMOKE
DETECTOR
- VD VERBAL ONLY
- AV AUDIO / VERBAL
- MHD MONITOR HEAD
- RHD RELAY HEAD



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DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT

DATE

RECEIVED FROM

ADDRESS

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	Free Drain system		120.00
	Check # 842		
	CB 1 114A 2001		

CASH CHECK OTHER

TOTAL

120.00

RECEIVED BY

Hay