City of Portland, Maine - Building or Use Permit Applicat				Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8				2014-02145			201 A005001	
Location of Construction:	` ′		r Address:		Phone:			
1 THOMPSONS POINT THOMPSON'		S POINT INC		THOMPSON'S POINT PORTLAND ME 04102				
Business Name: Contractor Nam Residential F		:	Contractor Address:			Phone:		
		re Protection	64 Daggett Hill Road Greene ME 04236)4236	(207) 946-3473	
Lessee/Buyer's Name	Phone:		Permit Type:				Zone:	
				Fire Suppression Water Based			B5	
Past Use: Proposed Use:		P		it Fee:	Cost of Work:	CEO District:		
Storage Brick North B		0: west wing of		\$476.00			6	
		Gymnasium. Rest	INSPECTION:					
Proposed Project Description:	1		1					
Install a Fire Suppression System Bri								
		PEDE	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
		Action: Approved Approved w/Con				_		
			Signature:			Date:		
Permit Taken By: Date Ay ldobson 09/12		Zoning Approval						
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
		Shoreland		☐ Varianc	ee	Not in District or Landma		
2. Building permits do not include septic or electrical work.	☐ Wetland		Miscella	aneous	Does Not Require Review			
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		Flood Zone		Condition Condition	Conditional Use		Requires Review	
		Subdivision		Interpre	_ Interpretation		Approved	
	Site Plan		Approv	Approved		Approved w/Conditions		
	Maj		Denied	Denied		Denied		
	Date:		Date:	Date:		Date:		
I hereby certify that I am the owner of I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	to make this appl or work describe	ication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	e to conform to a	all appli al's auth	icable laws of this norized representative	
SIGNATURE OF APPLICANT		ADDRESS			DATE		PHONE	