Form # P 04

Other _

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU

Attached		PERMIT	Permit Number: 090345
This is to certify that	ECO MAINE /Eastern Fire Pro	tion Co	
nas permission to	1 Zone - front conveyor only 6	ads for c veyor - nually o	nted sprinkler system
AT 0 BLUEBERRY I	RD	C	238-A008001

provided that the person or persons, first or compared on accepting this permit shall comply with all of the provisions of the Statutes of Marie and of the Colombices of the City of Portland regulating the construction, maintenance and use if buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Not ation of ispection must be give and written permission procured before this but sing or part hereof is lather or otherwise a sed-in. 24 HOL INOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. CKPT. W. Justinian

Health Dept.

Appeal Board

Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Build	ling or Use	Permi	t Applicatio	n Pei	rmit No:	Issue Date		CBL:		
389 Congress Street, 04101 Tel: (2	_				09-0345	4/27/	09	238 A0	08001	
Location of Construction:	Owner Name:	<u> </u>	<u>`</u>	Owne	r Address:	-11		Phone:		
0 BLUEBERRY RD	ECO MAINE			64 B	LUEBERRY	Z RD				
Business Name:	Contractor Name	e:		Contr	actor Address:			Phone		
	Eastern Fire P	rotectio	n Co., Inc.	170	Kittyhawk A	ve., PO Box	Aubur	n 2077841 <i>5</i>	507	
Lessee/Buyer's Name	Phone:		T .	Permi	t Type:				Zone:	
]	Spri	inkler Systen	ns				
Past Use:	Proposed Use:		<u> </u>	ا	it Fee:	Cost of Wor	k.	CEO District:	┪	
Commercial / Incinerator - waste	-	mercial / Incinerator - waste		" " "	\$160.00	\$14,00	ł	3		
I I	management - 1 Zone - front			FIDE	DEPT:	-/	INSPEC		Ь	
	conveyor only			FIRE	DEFT:	Approved			Type: L.VII.	
	conveyor - ma			ļ		Denied	Ose Giv	ee Group: F-/ Type: U/		
	sprinkler system		4 See Conditions				TBC-2007			
				'	Jee CON		-			
Proposed Project Description:			_					c0		
1 Zone - front conveyor only 6 heads for	or conveyor - r	manually	y operated	\'				ignature:		
sprinkler system				PEDESTRIAN ACTIVITIES DISTRIC			TRICT (F	CT (P.A.D.)		
				Actio	n: Appro	ved App	proved w/	Conditions	Denied	
		-		Signa	ture:			Date:		
Permit Taken By: Date App Ldobson 04/22/					Zoning	Approva	ıl			
		Spe	cial Zone or Revie	ews	Zoni	ng Appeal	т	Historic Pres	ervation	
 This permit application does not p Applicant(s) from meeting applica Federal Rules. 		☐ Shoreland		2	☐ Variance			☐ Not in District or Landma		
2. Building permits do not include pl septic or electrical work.	umbing,	Wetland			Miscellaneous			Does Not Require Review		
3. Building permits are void if work		☐ Flood Zone ☐ Subdivision			Conditional Use		Ì	Requires Review		
within six (6) months of the date o				☐ Interpretation			Approved			
False information may invalidate a	building					[
permit and stop all work		l	,							
TO THE WORLD		Sit	te Plan O		Approve	ed		Approved w/	Conditions	
TERMIT TOOLLY	7	Maj Minor MM			Denied			☐ Denied		
ATR 2 9 2009		Date:	4/27/09	U	Date:		Da	ate: 4/2/09	d	
	\ \		1		<u> </u>			11 1		
CITY OF PORTLA	110							,		
		C	ERTIFICATI	ON						
I hereby certify that I am the owner of real I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all areas such permit.	make this appl work describe	ication a	as his authorize application is i	d agen ssued,	t and I agree I certify that	to conform the code off	to all ap icial's a	pplicable laws authorized repr	of this esentative	
SIGNATURE OF APPLICANT			ADDRES	S		DATE	_	РНО	NE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, N	Iaine - Buil	ding or Use Permit	t		Permit No:	Date Applied For:	CBL:		
389 Congress Street, (04101 Tel: (207) 874-8703, Fax: ((207) 874-87	16	09-0345	04/22/2009	238	A0080	01
Location of Construction:	ation of Construction: Owner Name: Ov			Owner Address:		Phone:			
0 BLUEBERRY RD	RD ECO MAINE		6	4 BLUEBERRY I	RD				
Business Name:		Contractor Name: Con		Contractor Address:		Phone			
		Eastern Fire Protection	n Co., Inc.	1	70 Kittyhawk Ave	., PO Box Auburn	(207)	784-15	07
Lessee/Buyer's Name		Phone:		Pe	ermit Type:				
				Ŀ	Sprinkler Systems				
Proposed Use:			Propo	sed	Project Description:				
		agement - 1 Zone - fron manually operated sprir			- front conveyor or I sprinkler system	nly 6 heads for conve	yor - r	nanually	7
Dept: Zoning Note:	Status: A	pproved	Reviewe	r:	Chris Hanson	Approval Da		04/27/2 Issue:	
Dept: Building Note:		pproved with Condition			Chris Hanson		Ok to	100 400	\checkmark
1) All penetratios through or UL 1479, per IB		mblies must be protected n 712.	d by an approv	ed :	firestop system ins	talled in accordance	with A	STM 81	14
		any electrical, plumbing as a part of this process		e ala	arm or HVAC or e	xhaust systems. Sepa	ırate pl	lans may	7
3) Application approva and approrval prior	•	information provided by	/ applicant. An	y d	eviation from appr	oved plans requires	separat	te review	V
Dept: Fire	Status: A	pproved with Condition	s Reviewe	r:	Capt Keith Gautre	au Approval Da	ıte:	04/23/2	2009
Note:							Ok to	Issue:	✓
1) The Fire alarm and Compliance letters a		ems shall be reviewed by	y a licensed co	ntra	actor[s] for code co	ompliance.			
 Sprinkler protection Where the system is system has been pla 	to be shut do	wn for maintenance or re	epair, the syste	m s	hall be checked at	the end of each day	to insu	re the	
3) The sprinkler system	n shall be insta	alled in accordance with	NFPA 13.						

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

Order Release" will be incurred if the procedure is not followed as stated below.						
A Pre-construction Meeting will take place up	on receipt of your building perm	ıit.				
X Final inspection required at comple	tion of work.					
Certificate of Occupancy is not required for certa your project requires a Certificate of Occupancy.	1 0	•				
If any of the inspections do not occur, the prog REGARDLESS OF THE NOTICE OR CIRC	•	se,				
CERIFICATE OF OCCUPANICES MUST B THE SPACE MAY BE OCCUPIED.	E ISSUED AND PAID FOR, BE	FORE				
Signature of Applicant/Designee	Date					
Signature of Inspections Official	Date					
-\D						
Mark						

CBL: 238 A008001 **Building Permit #:** 09-0345



PORTLAND FIRE DEPARTMENT Sprinkler Plan Review Request Form

CBL#: Date: 3/31/09
Fire Marshal's Permit No: NO PERMIT REQUIRED FOR
6 HEADS OR LESS
Address of Property where
Alarm System will be Installed: <u>G4 BLUEBERLY ROAD</u> Property Owner: <u>ECO MAINE</u> Phone No: 307-689-5452
Owner's Address: 64 BLUEPERRY ROAD Fax No: 307-878-4736
PORTLAND, ME Email: MOTINGECOMAINE.ORG
Contractor Name: FASTERN FIRE PROTECTION Phone: 784-1507
Address: 170 KITTY HAWK AVE. Fax No: 782-0566
AUBURN, MAINE 04210 Email: beauchic @ teamcastern.
Type of System: 13 13D 13R Life Safety
System Design: Wet Dry Pre-Action Deluge
Number and Location of Zones: 1 20NE - FRUNT CONVEYOR ONLY GHEADS FOR CONVEY - MANUALLY OFERATED
System Monitoring: Water Flow Tamper Low Air
All sprinkler plans must be reviewed and approved by the State Fire Marshal prior to submission to the
Portland Fire Department.
All sprinkler systems must meet or exceed the requirements of NFPA and the Portland Fire Department Sprinkler Ordinance, Chapter 305.
Sprinkler plans, including all applicable hydraulic culculations, must be submitted 10 days prior to scheduled meeting.
Fire Department Use Only
Applicant: Date:
Fire Chief: Date:
FD HTE #:

EASTERN FIRE PROTECTION

P.O. Box 1390 Kittyhawk Ave. Auburn, ME 04210

PH # (207) 784-1507 FAX # (207) 782-0566

TO PORTLAND FIRE DEPARTMENT

		OFT	JOB NO.	15MII	IAL
3	311	29	JOB NO.		
ATTENTION	Fire	BCHIE	F FF	RED LA	Montac
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Pos	rTL	AND			
e cover v	⁄ia		_ the	following	items:
calculation	ne				

	Copy of letter		Literature	
UANTITY	DRAWING NO.	DATE	DESCRIPTION	STATUS
l		_	CHECK FOR PERMIT	
			916000 (14,000)	
			- Robert Rocalina -	
10. 51				
	Status code		A. Approved	
			B. Approved as noted C. Submitted for approval	
	DI	-		
	Please return	1	copies each indicating you	
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Shop drawings

DRAWING NO.

Status code

Please return

REMARKS

COPY TO

☐ Copy of letter

QUANTITY

EASTERN FIRE PROTECTION

P.O. Box 1390 Kittyhawk Ave. Auburn, ME 04210

PH # (207) 784-1507 FAX # (207) 782-0566

Descriptive data

☐ Literature

TO DUSPECTIONS DIVISION 389 CONGRESS ST RM

WE ARE SENDING YOU Attached

DATE 215/09

LETTER OF TRANSMITTAL

. Box 1390 yhawk Ave. rn, ME 04210 207) 784-1507 207) 782-0566 DIVISION ST RM 315 ME. 04 101 Attached □ Under sepa		JOB NO. 4364 Y A ME SYSTEM the following items:
	aulic calculations	
DES	SCRIPTION	STATUS
SPANKLER DI	NAW INC	5
A. Approved B. Approved as noted C. Submitted for approval PERM copies each indicating your	D. Corrected & r E. For your files F. Refer to rema approval and/or comments.	
SI	GNED Wen 3	ranchere

If enclosures are not as noted, kindly notify us at once