

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that HIGH TECH FIRE PROTECTION
of PO Box 156, Minot, Maine 04258

For installation at 1250 FOREST AVE, FLR 3, STE 15
Maine Prosthodontics

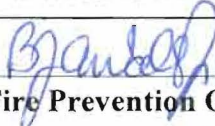
Job ID: 2011-08-1931-FAFS

CBL: 292 - - E - 001 - 015 - - - -

has permission to renovate a supervised, automatic sprinkler system
provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of
the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of
the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured
before this building or part thereof is lathed or otherwise
closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner
before this building or part thereof is occupied. If a
certificate of occupancy is required, it must be


Fire Prevention Officer

(58)

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-08-1931-FAFS
Renovation of a supervised,
automatic sprinkler system

For installation at:
1250 FOREST AVE, FLR 3, STE 15
Maine Prosthodontics

CBL: 292 - - E - 001 - 015 - - - -

Conditions of Approval:

Fire

The sprinkler system shall be installed in accordance with NFPA 13.

Sprinkler protection shall be maintained. Where the system is to be shut down for maintenance or repair, the system shall be checked at the end of each day to insure the system has been placed back in service.

The Fire Department will require Knox locking caps on all Fire Department Connections on the exterior of the building.

System acceptance and commissioning must be coordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

Installation of a sprinkler or fire alarm system requires a Knox Box to be installed per city ordinance.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Job No: 2011-08-1931-FAFS	Date Applied: 8/10/2011 A	CBL: 292 - E - 001 - 015 - - - -	
Location of Construction: 1250 FOREST SUITE 15 - 3 RD FLR	Owner Name: INTERNAL FOREST AVENUE	Owner Address: 1250 FOREST AVE APT 15 PORTLAND, ME - MAINE 04103	Phone:
Business Name: DENTIST OFFICE	Contractor Name: High Tech Fire Protection	Contractor Address: PO Box 156, Minot, ME 04258	Phone: 998-2551
Lessee/Buyer's Name:	Phone:	Permit Type: FAFS	Zone: B-4 for building & B-2 on land
Past Use: Professional Offices	Proposed Use: Same: professional offices = to install fire suppression system in Suite 15- 3 rd floor	Cost of Work: \$4000.00	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type:
		Signature: <i>[Signature]</i> (58)	Signature:
Proposed Project Description: fire suppression system		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Gayle		Zoning Approval	

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Date: <i>ok</i> 8/10/11	<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:	<input checked="" type="checkbox"/> Not in Dist 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: <i>[Signature]</i>

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	PHON

2011 08 19 31



Fire Suppression System Permit

RECEIVED

If you or the property owner owes real estate or property taxes or user charges on any property within the city, payment arrangements must be made before permits of any kind are accepted.

898 E 001 015 AUG - 4 2011

Installation address: 1250 suite 15 Forest Ave. CBL: 992-001015 Dept. of Building Inspections City of Portland Maine

Exact location: (within structure) Suite 15 3rd floor

Type of occupancy(s) (NFPA & ICC): Light hazard "Dentist Office"

where FD is local

Building owner: _____

Managing Supervisor: Ed Paulin License No: #515 B2

Supervisor phone: 207-998-2551 E-mail: epaulin@fairpoint.net

Installing contractor: High Tech Fire Protection License No: #102

Contractor phone: 207-998-2551 E-mail: htfp@fairpoint.net

The suppression work to be done will be: New: Renovation: Addition to existing system:

This is an amendment to an existing permit: Yes: NO Permit no: 9569

NFPA Standard will this system is designed to: 13 Edition: 2007

*Non-NFPA systems are not approved for use within the City of Portland.

Download a new copy of this document from Inspection Division on-line at www.portlandmaine.gov for every submittal. Attach all design information and complete approved submittals as may be required by the State Fire Marshal's Office on 11X17 copies or electronic PDF's in addition to full sized plans.

Contractor shall verify location and type of all FDCs shall be approved in writing by the Fire Prevention Bureau.

Submit all information to the Building Inspections Department, 389 Congress Street, Room 315, Portland, Maine 04101.

Prior to acceptance of any fire protection system, a complete commissioning and acceptance test must be coordinated with all fire system contractors and the Fire Department, and proper documentation of such test(s) provided.

All installation(s) must comply with NFPA and the Fire Department Technical Standard(s).

COST OF WORK: \$4000
PERMIT FEE: \$60
(\$10 PER \$1,000 + \$30 FOR THE FIRST \$1,000)

Applicant signature: Ed Paulin Date: 7-25-11

JERRIC CORP.
D/B/A HIGH TECH FIRE PROTECTION
207-998-2551 P.O. BOX 156
MINOT, ME 04258

Mechanics
SAVINGS BANK
Just like family!
Auburn, Lewiston, Windham Maine
52-7276-2112

17715

8/2/2011

PAY
TO THE
ORDER OF

City of Portland

\$ **60.00

Sixty and 00/100***** DOLLARS

City of Portland, ME
P.O. Box 544
Portland, ME 04112-0544

Richard B Smith
AUTHORIZED SIGNATURE

MEMO

Permit Fee for 1250 Forest Ave, Suite 15

⑈017715⑈ ⑆211272766⑆60000238455⑈

Security features. Details on back.

17715

City of Portland
5190 - Permits - Contract Jobs

Permit Fee for 1250 Forest Ave, Suite 15
8/2/2011

60.00

Jerric Checking

Permit Fee for 1250 Forest Ave, Suite 1

60.00



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

Aug 9 2011

Received from Fire Protection Company

Location of Work 115 Franklin St

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: _____

Building (IL) Plumbing (IS) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 012 E 001015

Check #: 1715 **Total Collected \$** 10.00

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

High Tech Fire Protection

Po Box 156 Minot, Maine 04258
Tel: 207-998-2551
Fax: 207-998-4187

Letter of Transmittal

To: Building Inspection Department
389 Congress Street Room 315
Portland, ME
04101

Date: 7- 5 11	Job No.
Attention: Building Inspection Department	
Re: 1250 Forest Ave. 3 rd floor Tenant rework	

We are sending you

- Owners Manuals Preliminary Plans Asbuilt Plans Hydraulic Calculations
 Product Data Permit Check _____

Copies	Date	No.	Description
1	7- 5 11		Permit Application
1	7- 5 11		Permit Check \$60 -

These are transmitted as checked below:

- For Approval For your use Return _____ corrected copy
 As requested For review and comment _____

Comments: We are reworking 41 sprinkler pendants to accommodate a new suspended ceiling layout.

Thank you.

Signed: Ed Poulin *Ed Poulin*