

**City of Portland, Maine - Building or Use Permit Application**

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

<b>Permit No:</b> 10-0101	<b>Issue Date:</b>	<b>CBL:</b> 316 B002001
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<b>Location of Construction:</b> 238 RIVERSIDE ST	<b>Owner Name:</b> DAVISON/BISSON LLC	<b>Owner Address:</b> 1111 LISBON ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Sprinkler System, Inc	<b>Contractor Address:</b> P.O. Box 1285 Lewiston	<b>Phone</b> 2077820104
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Suppression System	<b>Zone:</b>

<b>Past Use:</b> Commercial -PPG Paint & Lockards- connected w/ permit# 091054 & 090399	<b>Proposed Use:</b> Commercial -PPG Paint & Lockards- connected w/ permit# 091054 & 090399 - Install Fire Suppression System Permit	<b>Permit Fee:</b> \$50.00	<b>Cost of Work:</b> \$3,000.00	<b>CEO District:</b> 5
<b>Proposed Project Description:</b> Install Fire Suppression System Permit		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type:	
		Signature:	Signature:	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: Date:				

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 02/04/2010	<b>Zoning Approval</b>		
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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:	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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

<b>Location of Construction:</b> 238 RIVERSIDE ST	<b>Owner Name:</b> DAVISON/BISSON LLC	<b>Owner Address:</b> 1111 LISBON ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Sprinkler System, Inc	<b>Contractor Address:</b> P.O. Box 1285 Lewiston	<b>Phone</b> 2077820104
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Fire Suppression System	<b>Zone:</b>

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Ann Machado      **Approval Date:** 02/04/2010  
**Note:** **Ok to Issue:**

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 02/22/2010  
**Note:** **Ok to Issue:**

1) Sprinkler systems to be designed and installed per IBC 2003 standards Sec. 903.3.1

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Capt Keith Gautreau      **Approval Date:** 02/12/2010  
**Note:** **Ok to Issue:**

- 1) The Fire alarm and Sprinkler systems shall be reviewed by a licensed contractor[s] for code compliance. Compliance letters are required.
- 2) The sprinkler system shall be installed in accordance with NFPA 13.
- 3) Application requires State Fire Marshal approval.
- 4) Fire department connection type and location shall be approved in writing by fire prevention bureau.
- 5) System acceptance and commissioning must be co-ordinated with alarm and suppression system contractors and the Fire Department. Call 874-8703 to schedule.

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SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE