

CITY OF PORTLAND  
 FIRE PREVENTION BUREAU  
 380 Congress Street, Portland, Maine 04101  
 fireprevention@portlandmaine.gov  
 (207) 874-8400

**NOTICE OF VIOLATION AND ORDER TO CORRECT**

November 2, 2017

<b>Responsible Party 1:</b> DeRice Robert 9 SANBORN ST PORTLAND, ME 04103		
<b>Location: North Dental</b> 9 SANBORN ST	<b>CBL</b> 375 B008001	<b>Inspection Date</b> 8/23/2017
<b>Inspector</b> Edward Doughty	<b>Inspection Type</b> FP Routine Inspection	<b>Status</b> Failed

The City of Portland Fire Department inspected this property, and found the fire and life safety code violations listed below, which you are hereby ordered to correct. You must propose a date of completion to remedy each violation, a final date of completion, and a date of re-inspection.

**You must send this form to the Fire Prevention Bureau no later than 11/30/2017.**

Your failure to submit a plan of action by the date provided, or to correct any violation within the applicable time frame, may result in legal action against you, the imposition of civil penalties, and the pursuit of other legal remedies.

Violation	Proposed Date of Completion
<b>NFPA 101- 10.2.4.1 CEILING TILES MISSING;</b> The use of textile materials on walls or ceilings shall comply with one of the following conditions: (See NFPA 101-10.2.4.1 for conditions) One Ceiling Tile near the "breakroom" needs to be put back in place.	
<b>NFPA 72- 10.2.1.2.2 SMOKE DETECTOR NEEDS REPAIR;</b> System defects and malfunctions shall be corrected. Smoke Detectors need to be in working order	
<b>NFPA 101- 7.10.1.2.1 EXIT SIGNS REQUIRED;</b> Exits, other than main exterior exit doors that obviously and clearly are identifiable as exits, shall be marked by an approved sign that is readily visible from any direction of exit access. Exit Sign required for the Patient Care Treatment Area Please, consider an Exit Sign with 1 Emergency Light connected to it.	
<b>FINAL DATE OF COMPLETED VIOLATION(S)</b>	___/___/___
<b>FIRE PREVENTION BUREAU RE-INSPECTION OF COMPLETED VIOLATION(S)</b>	___/___/___

The Bureau reserves the right to reject or modify any proposed plan of action, and may require evidence of sufficient financial and technical capacity to complete the proposed plan. Please contact the Bureau with any questions.

**VIOLATOR CERTIFICATION**

*I agree to remedy the violations listed within the timeframes provided. If I require additional time to comply, I understand that I must contact the Fire Prevention Bureau prior to the deadline to request an extension, which is entirely within the Bureau's discretion to grant or deny.*

*I further understand that it is my responsibility to schedule a reinspection of my property once the violations have been remedied to do so. My failure to schedule a reinspection shall be deemed an admission that the violations have not been remedied.*

*If I fail to comply with this agreement, I understand that I am liable for penalties pursuant to the City of Portland Code of Ordinances §§ 1-15 and 10-25, and 30-A M.R.S. § 4452 and may be subject to further legal action.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Responsible Party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Responsible Party

**SEEN AND AGREED**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fire Prevention Bureau