

Fire Alarm Permit Application

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

Address/Location of	of Construction: 4	3 North	oort Dr.		
Total Square Footag					
Tax Assessor's Chart Chart# Block#	t, Block & Lot Lot#	Applicant Address City, State	Name: Norris Inc. 2257 West Broadway South Portland, ME. 04106	Telephor	ne: 207-883-347 3 x1104 melissap@n orrisinc.com
Lessee/Owner Name: LL Bean (if different than applicant) Address: 15 Casco St. Freeport, ME. 04033 City, State & Zip: 5526138 Telephone & E-mail:		Contractor Name: Norris Inc. (if different from Applicant) Address: City, State & Zip:		Cost Of Work: \$20,000 Fees: first \$1000 = \$25 fee + \$11 for every other \$1,000 of Cost of work Total Fees: \$ 234.00	
Project description:	he previous use? but the previous use? but t	es, please nam	e		
Who should we contact	when the permit is	ready: Meliss	a Peters Norris Inc.		
Address: same as ab	ove				
City, State & Zip:					
E-mail Address: meliss		m			
Telephone: 207-883-3	3473 x1104				

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permitdenial.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: Melekar	Etur Date: 8	8/4/15
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