



BARRIER-FREE PERMIT APPLICATION

Department of Public Safety
Office of State Fire Marshal
45 Commerce Dr., Suite 1
Augusta, Maine 04333-0052

Project Information

Project Name: _____

Street Location: _____ Town: _____

County: _____ Zip Code: _____

Project Type:

New Building/Addition ☐

Renovation ☐

Occupancy Change ☐

Building Occupancy Use Layout:

Single use ☐

Separated Use ☐

Mixed Use ☐

Sprinkler System:

No ☐ Yes ☐ Supervised ☐

Fire Alarm:

No ☐ Yes ☐ Monitored ☐

Project Information:

Projected Start Date: _____

Projected End Date: _____

Total Project Cost: _____

Number of Stories:

Original # of Stories: _____

Affected # of Stories: _____

Total # of Stories: _____


Square Footage:

Renovated s.f. _____

New Construction s.f.: _____

Total s.f.: _____

Barrier-Free Permit Fee:

 *see attached fee schedule for more information

Occupancy Classification:

☐ Apartments

☐ Ambulatory Health Care

☐ Business

☐ Detention/Correctional

☐ Educational

☐ Health Care

☐ Hotel/Dormitory

☐ Industrial

☐ Other

☐ Rooming & Lodging

☐ Storage

☐ Assembly ____ <300 ____ >300 <1000 ____ >1000

☐ Daycare ____ >12 ____ <12

☐ Residential Board & Care ____ Large ____ Small

☐ Mercantile ____ Class A ____ Class B ____ Class C

Construction Type

Fire Resistive: Type I (443) ☐ (332) ☐

Protected Non-Combustible: Type II (222) ☐ (111) ☐

Unprotected Non-Combustible: Type II (000) ☐

Protected Ordinary: Type III (211) ☐

Unprotected Ordinary: Type III (200) ☐

Heavy Timber: Type IV (2HH) ☐

Protected Wood Frame: Type V (111) ☐

Unprotected Wood Frame: Type V (000) ☐

Brief description of work to be performed: _____

Contact Information

Owner's Name: _____ Phone: _____ Fax: _____

Mailing Address: _____

Town: _____ State: _____ Zip Code: _____ E-mail: _____

Design Professional: _____ Phone: _____ Fax: _____

Mailing Address: _____

Town: _____ State: _____ Zip Code: _____

Maine Registration #: _____ E-mail: _____

Signature of Applicant: _____

↓ DEPARTMENT OF PUBLIC SAFETY USE ONLY ↓

☐ Permit ☐

Approved By: _____

Check #	Plan Reviewer	Date Permit Issued	Permit #

Department of Public Safety

Office of State Fire Marshal
45 Commerce Dr, Suite 1, Augusta, Maine 04333-0052
207-626-3880 ph 207-287-6251 fax 207-287-3659 (TTY)