

City of Portland, Maine - Building or Use Permit Application

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

PERMIT ISSUED		Permit No: 02-0570	Issue Date: JUN 20 2002	CBL: 010 H005001
----------------------	--	------------------------------	-----------------------------------	----------------------------

Location of Construction: 110 Anderson St	Owner Name: Keeley, Michael	Owner Address: 71 Brook Road	Phone: 797-8851
Business Name:	Contractor Name: Keelev Electric	Contractor Address: 71 Brook Road Falmouth	Phone: 12077973772
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: ILb
Past Use: Warehouse/Vacant	Proposed Use: Office Space/Wharehouse	Permit Fee: \$128.00	Cost of Work: \$15,000.00
Proposed Project Description: Install 5 New Windows and 1 New 12'x 12' Overhead Door/Block Existing Windows. <i>02-079-1 8/1/02</i>		CEO District: 1	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		INSPECTION: Use Group: <i>1</i> Type: <i>3</i> <i>BCIA 1999</i>	Signature: <i>[Signature]</i>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
		Signature: _____ Date: _____	

Permit Taken By: gad	Date Applied For: 05/28/2002	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	Special Zone or Reviews <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: <i>6/7/02</i>	Zoning Appeal <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	Historic Preservation <input checked="" 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: <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	PHONE

8/12/02 - Window Installation per plan. ok
also See permit # 02-0797
ok to Close

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland
Street	11th Avenue
Subdivision or Lot #	

Catherine Row 0641

PORTLAND 0178 TOWN COPY

Date Permit Issued: 8/8/02 \$ 400.00 FEE If Double Fee Charged

Catherine Row L.P.I. # 0641

Local Plumbing Inspector Signature

PROPERTY OWNERS NAME

Last: Rowley First: Michelle

Applicant Name: Rowley

010 H 005

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner/Applicant: _____ Date: _____

Signature of Local Plumbing Inspector: *Sam McNeill* Date Approved: 9/23/02

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE DWEL 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPL FAM DWEL 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Remodel</u>	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>8397</u>
---	--	---

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existin subsurface		Hosebibb/ Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>2</u>	Sink
		Drinking Fountain		Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	<u>2</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/ Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>5</u>	Fixtures (Subtotal) Column 1
			<u>1</u>	Fixtures (Subtotal) Column 2
			<u>6</u>	Total Fixtures
			<u>42</u>	Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			<u>52</u>	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

+10