

**PERMIT**

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

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

Permit No: 03-0358	Issue Date: <b>APR 24 2003</b>	CBL: 012 B009001
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Location of Construction: 25 Cove St. / Anderson <sup>137</sup>	Owner Name: Portland Housing Development	Owner Address: 14 Baxter Blvd CITY OF PORTLAND	Phone: 207-874-1140
Business Name: n/a	Contractor Name: PROP	Contractor Address: 510 Cumberland Ave. Portland	Phone: 2078741140
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Multi Family	Zone: <del>1B-5</del>

Past Use: Parking	Proposed Use: Multi Unit / 3 family housing; Replacing permit # 021027. Redesigning 3 dwelling unit.	Permit Fee:	Cost of Work:	CEO District: 1B-5
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>3</b> Type: <b>5B</b> <b>4/24/03</b>	

Proposed Project Description:  
Replacing permit # 021027 / Redesigning 3 dwelling unit.

Signature: \_\_\_\_\_ Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: gg	Date Applied For: 04/18/2003	<b>Zoning Approval</b>	
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Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>Panel 13 Zone C</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i>2002-0140</i> Maj <input checked="" type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>4/22/03</i>	<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: _____	<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>9</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



CITY OF PORTLAND, MAINE

Department of Building Inspection

# Certificate of Occupancy

LOCATION 25 Cove St. / Anderson

CBL 012 B009001

Issued to Portland Housing Development/PROP

Date of Issue 08/29/2003

**This is to certify** that the building, premises, or part thereof, at the above location, built ~~— altered~~ ~~— changed as to use~~ under Building Permit No. 03-0358, **has had final inspection, has been found to conform** substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or **otherwise**, as indicated below.

PORTION OF BUILDING OR PREMISES

Entire

APPROVED OCCUPANCY

Multi-Family Modular Home  
Use Group R-3  
Type 5B

**Limiting Conditions:**

This approval is based on the certification of the design professional and master tradesmen as all structural components were closed in, in factory

**This certificate supersedes certificate issued**

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

CITY OF PORTLAND, MAINE

Department of Building Inspection



# Certificate of Occupancy

LOCATION 25 Cove St. / Anderson

CBL 012 B009001

Issued to Portland Housing Development/PROP

Date of Issue 09/17/2003

**This is to certify** that the building, premises, or part thereof, **at** the above location, built ~~— altered~~ ~~— changed as to use~~ under Building Permit No. 03-0358, **has had final inspection, has been found to conform** substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or **otherwise**, as indicated below.

PORTION OF BUILDING OR PREMISES

Entire: 3 units

APPROVED OCCUPANCY

Multi-Family Modular Home  
Use Group R-3  
Type 5B

**Limiting Conditions:**

This approval is based on the certification of the design professional and master tradesmen as all structural components were closed in, in factory

**This certificate supersedes certificate issued** August 29, 2003

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

# PLUMBING APPLICATION

2003 - 8240

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation: PORTLAND

Street Subdivision Lot #: 113 ANDERSON ST.

## PROPERTY OWNERS NAME

Last: PROP First: \_\_\_\_\_

Applicant Name: PINE STATE P&H

Mailing Address of Owner/Applicant (If Different): PO BOX 6905  
PORTLAND ME 04107

PORTLAND Date Permit Issued: 7/14/03 8536 TOWN COPY

Jeanie Bouke Local Plumbing Inspector Signature \$ 1102010  If Double Fee Charged

L.P.I. # 0732

012 B009  
000 1 0 24

## 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.

Jeanie Bouke Signature of Owner/Applicant 7/14/03 Date

## Caution: Inspection Required

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

Jeanie Bouke Local Plumbing Inspector Signature 8/29/03 Date Approved

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input checked="" type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____	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>16111</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb/ Sillcock	<u>2</u>	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>1</u>	Sink
		Drinking Fountain	<u>1</u>	Wash Basin
		Indirect Waste	<u>3</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	<u>1</u>	Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Fixtures (Subtotal) Column 2	<u>14</u>	Fixtures (Subtotal) Column 1
			<u>11</u>	Fixtures (Subtotal) Column 2
			<u>15</u>	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

**OR**  
TRANSFER FEE  
[\$6.00]

300 2400 = 2400  
100 600 = 7200  
900 100 = 1000

TOWN COPY

~~4/15/03 Checked Footings~~

~~4/15/03 Checked Footings~~

~~JB~~

- 5/19/03 checked Footings in place - ok to pour - JB
- 6/2/03 checked Foundation walls for placement JB
- 6/4/03 Backfill Insp - Tile, stone, fabric, Asphalt JB
- 8/28/03 Final inspection for C.O. w/<sup>4</sup>MAC  
& M. Collins - ok for C.O. JB