

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0712	Issue Date: JUN 19 2003	CBL: 012 G019001
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Location of Construction: 87 Walnut St	Owner Name: Mcadam Thomas J	Owner Address: 92 Exchange St CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: Seavey, John	Contractor Address: 87 Walnut Street Portland	Phone: 2078318620
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone:

Past Use: single family	Proposed Use: single family - repair fire damage	Permit Fee: \$79.00	Cost of Work: \$8,000.00	CEO District: 1
Proposed Project Description: repair fire damage		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>		INSPECTION: Use Group: R-3 Type: SB BOCA 99 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: _____	
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Permit Taken By: gg	Date Applied For: 06/19/2003	Zoning Approval
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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 checked="" 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: 6/19/03	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 Date: _____	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: 6/19/03
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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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

_____ **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

_____ **Footing/Building Location Inspection:** Prior to pouring concrete

_____ **Re-Bar Schedule Inspection:** Prior to pouring concrete

_____ **Foundation Inspection:** Prior to placing ANY backfill

✓ _____ **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

✓ _____ **Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

_____ **If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

_____ **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

[Signature]
Signature of applicant/designee

6/19/03
Date

[Signature]
Signature of Inspections Official

6/19/03
Date

CBL: 012-G-19 Building Permit #: 03-0712

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT PERMIT

Permit Number: 030712

This is to certify that Mcadam Thomas J/Seavey, J
has permission to repair fire damage
AT 87 Walnut St 012 G019001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

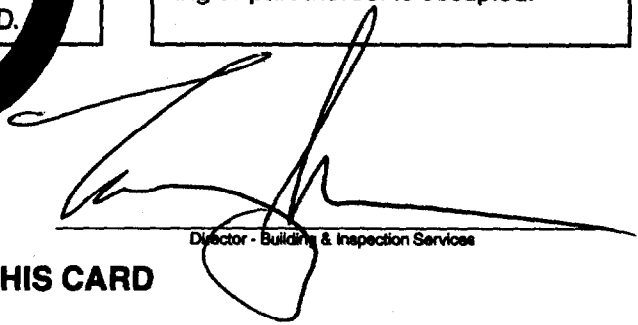
Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and work on permit must be completed before this building or part thereof is occupied or closed-in. **48 HOUR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. **PERMIT ISSUED**
Health Dept. _____
Appeal Board **JUN 19 2003**
Other _____
Department Name



Director - Building & Inspection Services

CITY OF PORTLAND

PENALTY FOR REMOVING THIS CARD

All Purpose Building 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.

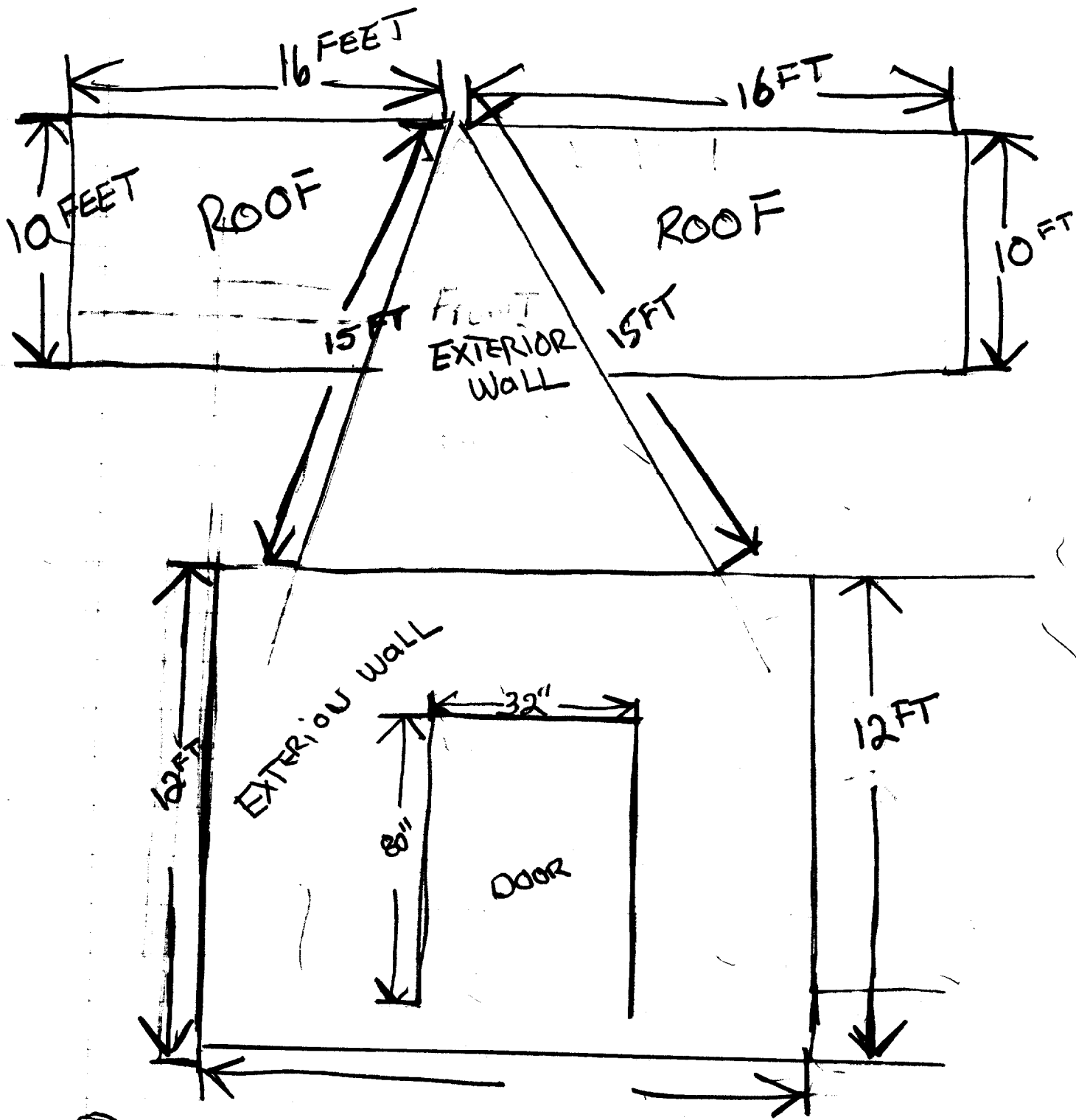
Location/Address of Construction: <u>87 Walnut St</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart# <u>012</u>	Block# <u>G</u>	Lot# <u>19</u>
Owner: <u>Tom McAdam</u>		Telephone: <u>Cell 8318620</u>
Lessee/Buyer's Name (if Applicable) <u>TOM McADAM</u>	Applicant name, address & telephone: <u>Dorothy Seavey</u>	Cost Of Work: \$ <u>8,000</u> Fee: \$ <u>79.00</u>
Current use: <u>Single Family</u>		
If the location is currently vacant, what was prior use: <u>Single Family Home</u>		
Approximately how long has it been vacant: <u>6 Days</u>		
Proposed use: _____		
Project description: <u>Repair after fire - Roof/walls.</u>		
Contractor's name, address & telephone: _____		
Who should we contact when the permit is ready: _____		
Mailing address: _____		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: _____		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

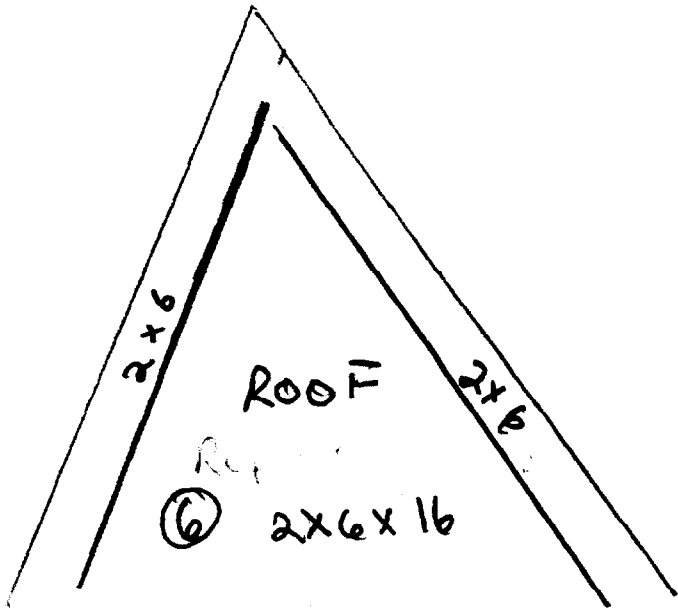
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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 of applicant: <u>Dorothy Seavey</u>	Date: <u>6/19/03</u>
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**This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall**



- ① REPLACE DOOR 32x80
- ② REPLACE EXTERIOR BOARDS ON BACK WALL 3/4"
- ③ REPLACE EXTERIOR ROOF BOARDS
- ④ REPLACE ROOF SHINGLES AREA 3 SQUARE
- ⑤ REPLACE EXTERIOR CLAPBOARDS ON BACK WALL 1/2x8
- ⑥ INTERIOR BACK ROOM WALL RIGHT BED ROOM
- ⑦ INTERIOR CEILING REPAIR RIGHT BED ROOM
- ⑧ INTERIOR CEILING LEFT BED ROOM



~~Sister~~ Bad 2x6 ON ROOF
There is 4 Bad ones

All ~~R~~ damaged Rafters
must be run The full
length with ~~a~~ new 2x6's

