

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

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

Permit No: 04-1598	Issue Date:	CBL: 013 M020001
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Location of Construction: 197 Congress St	Owner Name: Tooley Shawn M	Owner Address: 197 Congress St	Phone: 150-2554
Business Name:	Contractor Name: Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:		Zone: B-1

Past Use: residential 2 unit	Proposed Use: residential 2 unit add 3rd unit	Permit Fee:	Cost of Work: \$0.00	CEO District: 1
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Proposed Project Description: add a 3rd unit	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-2</i> Type: <i>5B</i> <i>2/6/04</i>
	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

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

Permit Taken By: dmmtin	Date Applied For: 10/22/2004	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input checked="" type="checkbox"/> Site Plan <i>required</i></p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>OK with conditions</i></p> <p>Date: <i>9/15/04</i></p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p><b>Historic Preservation</b></p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>
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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



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 197 Congress St

CBL 013 M020001

Issued to Tooley Shawn M /Owner

Date of Issue 08/19/2005

**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. 04-1598, 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  
UNIT #3

APPROVED OCCUPANCY  
Residential 3 Unit  
Use Group R2  
Type 5B  
IBC 2003

Limiting Conditions:  
none

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.

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	197 Congress St
<b>PROPERTY OWNERS NAME</b>	
Last: Toolson	First: [unclear]
Applicant Name	[unclear]
Mailing Address of Owner/Applicant (if Different)	[unclear]

*Ken W. Gooch 80020603*

PORTLAND Date: 1/17/05 PERMIT # 9223 TOWN COPY  
 Permit Issued: \$ 1142.00 FEE Charged  Double Fee  
*Ken W. Gooch* L.P.I. # 0603  
 Local Plumbing Inspector Signature

*13 M 20*

**Caution: Inspection Required**

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

Local Plumbing Inspector Signature

Date Approved

## PERMIT INFORMATION

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 type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" 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

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.		Hosebibb/ Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	2	Sink
<input type="checkbox"/> HOOK-UP: to an existing subsurface		Drinking Fountain		Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/ Oil Separator		Dish Washer
		Bidet		Laundry Tub
<b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>

# ELECTRICAL PERMIT City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:  
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance,

Date 1/27/05  
Permit # 50054089  
CBL# 013 MO2C

National Electrical Code and the following specifications:

LOCATION: 197 Congress ST METER MAKE & # \_\_\_\_\_  
CMP ACCOUNT # \_\_\_\_\_ OWNER \_\_\_\_\_  
TENANT \_\_\_\_\_ PHONE # \_\_\_\_\_

						TOTAL	EACH	FEE	
OUTLETS	<del>15</del> 35	Receptacles	<del>12</del> 12	Switches	4	Smoke Detector		.20	
FIXTURES	6	Incandescent		Fluorescent		Strips		.20	
SERVICES		Overhead		Underground		TTL AMPS <800		15.00	
		Overhead		Underground		>800		25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS		(number of)						1.00	
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES	1	Ranges	<del>1</del>	Cook Tops		Wall Ovens		2.00	
		Insta-Hot		Water heaters		Fans		2.00	
		Dryers		Disposals		Dishwasher		2.00	
		Compactors		Spa		Washing Machine		2.00	
		Others (denote)						2.00	
		MISC. (number of)		Air Cond/win					3.00
				Air Cond/cent				Pools	10.00
		HVAC		EMS		Thermostat	5.00		
		Signs							
		Alarms/res						5.00	
		Alarms/com						15.00	
		Heavy Duty(CRKT)						2.00	
		Circus/Carnv						25.00	
		Alterations						5.00	
		Fire Repairs						15.00	
		E Lights						1.00	
		E Generators						20.00	
PANELS		Service		Remote	/	Main		4.00	
TRANSFORMER		0-25 Kva						5.00	
		25-200 Kva						8.00	
		Over 200 Kva						10.00	
						TOTAL AMOUNT DUE			
						MINIMUM FEE/COMMERCIAL	45.00		
						MINIMUM FEE	35.00	45.00	

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME  
JAN 27 2005  
RECEIVED

CONTRACTORS NAME MATT HODGINS MASTER LIC. # MS 40088 763  
ADDRESS 197 SHERWOOD ST. LIMITED LIC. # \_\_\_\_\_  
TELEPHONE 773-9975

SIGNATURE OF CONTRACTOR Matthew S Hodgins  
White Copy - Office • Yellow Copy - Applicant



## APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

SHAWN M. TOOLEY  
Applicant

Nov 16, 2004  
Application Date

197 Congress St. #2  
Applicant's Mailing Address P.O. Box 21101

Building a 3rd unit in an existing duplex  
Project Name/Description Basement  
sub-division

\_\_\_\_\_  
Consultant/Agent/Phone Number

197 Congress St.  
Address of Proposed Site # 041598

CBL: 013 M 020 Permit

Description of Proposed Development:  
To build a 3rd unit in an existing duplex sub-division (basement)

Please Attach Sketch/Plan of Proposal/Development	Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
Criteria for Exemptions: <b>See Section 14-523 (4) on back side of form</b>	Yes	✓
a) Within Existing Structures; No New Buildings, Demolitions or Additions	No Increase	✓
b) Footprint Increase Less Than 500 Sq. Ft.	No Increase	✓
c) No New Curb Cuts, Driveways, Parking Areas	No Increase	✓