

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

## BUILDING INSPECTION

# PERMIT

Permit Number: 100264

Please Read Application And Notes, If Any, Attached

This is to certify that HAMILL SHERWOOD N / Stone Ledge Carpentry LLC

has permission to Living room/ Bathroom remodel (1st) floor

AT 2 ATLANTIC ST 1st floor CBL 016 F011001

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 written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.

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

**PERMIT ISSUED**

OTHER REQUIRED APPROVALS

Fire Dept. CAPT. R. [Signature]

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name CITY OF PORTLAND

APR 12 2010

[Signature] 4/7/10

Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

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

|                       |             |                     |
|-----------------------|-------------|---------------------|
| Permit No:<br>10-0264 | Issue Date: | CBL:<br>016 F011001 |
|-----------------------|-------------|---------------------|

|  |   |   |  |
|--|---|---|--|
| <b>Location of Construction:</b><br>2 ATLANTIC ST 1st floor  | <b>Owner Name:</b><br>HAMILL SHERWOOD N   | <b>Owner Address:</b><br>2 ATLANTIC ST  | <b>Phone:</b>  |
| <b>Business Name:</b>  | <b>Contractor Name:</b><br>Stone Ledge Carpentry LLC                                      | <b>Contractor Address:</b><br>12 Rackleff Street Portland   | <b>Phone:</b><br>2073181802  |
| <b>Lessee/Buyer's Name</b>   | <b>Phone:</b>   | <b>Permit Type:</b><br>Alterations - Multi Family   | <b>Zone:</b><br>R-6  |
| <b>Past Use:</b><br>Residential 3 unit   | <b>Proposed Use:</b><br>Residential 3 unit - Living room/<br>Bathroom remodel (1st floor) | <b>Permit Fee:</b><br>\$100.00  | <b>Cost of Work:</b><br>\$7,500.00   |
|  |   | <b>CEO District:</b><br>1   |  |
|  | <i>legal use - 3 d.u.</i>   | <b>FIRE DEPT:</b><br><input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br><i>* See Conditions</i> | <b>INSPECTION:</b><br>Use Group: <i>R2</i> Type: <i>3B</i><br><i>IBL-2003</i><br><i>AMB 4/7/10</i> |
| <b>Proposed Project Description:</b><br>Living room/ Bathroom remodel (1st floor)  |   | <b>Signature:</b> <i>(KG)</i>   | <b>Signature:</b> <i>AMB 4/7/10</i>  |
| <b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>   |   |   |  |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied |   |   |  |
| <b>Signature:</b>  |   | <b>Date:</b>  |  |

|                                    |  |                        |  |
|------------------------------------|--|------------------------|--|
| <b>Permit Taken By:</b><br>Idobson | <b>Date Applied For:</b><br>03/18/2010 | <b>Zoning Approval</b> |  |
|------------------------------------|--|------------------------|--|

|   |   |   |   |
|---|---|---|---|
| <ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol> | <b>Special Zone or Reviews</b><br><input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/><br><i>Ok w/ condition</i><br>Date: <i>3/18/10</i> <i>JBN</i> | <b>Zoning Appeal</b><br><input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>Date: | <b>Historic Preservation</b><br><input checked="" type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input type="checkbox"/> Requires Review<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Conditions<br><input type="checkbox"/> Denied<br>Date: <i>JBN</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 - Building or Use Permit**

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

|                              |  |                            |
|------------------------------|--|----------------------------|
| <b>Permit No:</b><br>10-0264 | <b>Date Applied For:</b><br>03/18/2010 | <b>CBL:</b><br>016 F011001 |
|------------------------------|--|----------------------------|

|   |  |   |                                |
|---|--|---|--------------------------------|
| <b>Location of Construction:</b><br>2 ATLANTIC ST 1st floor | <b>Owner Name:</b><br>HAMILL SHERWOOD N              | <b>Owner Address:</b><br>2 ATLANTIC ST                    | <b>Phone:</b>                  |
| <b>Business Name:</b>                                       | <b>Contractor Name:</b><br>Stone Ledge Carpentry LLC | <b>Contractor Address:</b><br>12 Rackleff Street Portland | <b>Phone</b><br>(207) 318-1802 |
| <b>Lessee/Buyer's Name</b>                                  | <b>Phone:</b>  | <b>Permit Type:</b><br>Alterations - Multi Family         |                                |

|  |   |
|--|---|
| <b>Proposed Use:</b><br>Residential 3 unit - Living room/ Bathroom remodel (1st) floor | <b>Proposed Project Description:</b><br>Living room/ Bathroom remodel (1st) floor |
|--|---|

|   |   |                              |   |
|---|---|------------------------------|---|
| <b>Dept:</b> Zoning   | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Ann Machado | <b>Approval Date:</b> 03/18/2010                        |
| <b>Note:</b>  |   |                              | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) This property shall remain a three family dwelling. Any change of use shall require a separate permit application for review and approval. |   |                              |   |
| 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. |   |                              |   |

|   |   |                                 |   |
|---|---|---------------------------------|---|
| <b>Dept:</b> Building   | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Jeanine Bourke | <b>Approval Date:</b> 04/07/2010                        |
| <b>Note:</b>  |   |                                 | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating per Sec. 712 of IBC and R317.3.1.2 of the IRC |   |                                 |   |
| 2) All penetrations through rated assemblies must be protected by an approved firestop system installed in accordance with ASTM 814 or UL 1479, per IBC 2003 Section 712.   |   |                                 |   |
| 3) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.              |   |                                 |   |
| 4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.  |   |                                 |   |

|  |   |                                      |   |
|--|---|--------------------------------------|---|
| <b>Dept:</b> Fire  | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Capt Keith Gautreau | <b>Approval Date:</b> 03/25/2010                        |
| <b>Note:</b>   |   |                                      | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) The entire structure shall comply with NFPA 101 "Existing Apartments"<br>Compliance shall be insured prior to the issuance of a Certificate of Occupancy. |   |                                      |   |
| 2) All construction shall comply with NFPA 1 and 101.  |   |                                      |   |

|  |
|--|
| <b>Comments:</b><br>4/7/2010-jmb: Spoke with Stoneledge contractor about fire penetrations and sealing, also rated fixtures if used. |
|--|

## **BUILDING PERMIT INSPECTION PROCEDURES**

**Please call 874-8703 or 874-8693 (ONLY )  
or email: [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov)**

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months, if the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.**

  X   **Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling**

  X   **Final inspection required at completion of work.**

**The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.**





# General 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>2 Atlantic Street. Portland</u>  |   |  |
| Total Square Footage of Proposed Structure/Area<br><u>427 sq. FT.</u>   | Square Footage of Lot<br><u>3000' (+-)</u>  | Number of Stories<br><u>2</u>  |
| Tax Assessor's Chart, Block & Lot<br>Chart# <u>16</u> Block# <u>F</u> Lot# <u>11</u>  | Applicant * <b>must</b> be owner, Lessee or Buyer*<br>Name <u>SHERWOOD HAMILL</u><br>Address <u>2 ATLANTIC ST.</u><br>City, State & Zip <u>PORTLAND 04101</u> | Telephone:<br><u>318-4789</u>  |
| Lessee/DBA (If Applicable)  | Owner (if different from Applicant)<br>Name <u>SAME</u><br>Address<br>City, State & Zip   | Cost Of Work: \$ <u>7,500<sup>00</sup>-</u><br>C of O Fee: \$ _____<br>Total Fee: \$ _____ |
| Current legal use (i.e. single family) <u>APARTMENT</u> Number of Residential Units <u>3</u><br>If vacant, what was the previous use? _____<br>Proposed Specific use: _____<br>Is property part of a subdivision? <u>NO</u> If yes, please name _____<br>Project description: <u>LIVING ROOM / BATHROOM REMODEL (1st Floor)</u>             |   |  |
| Contractor's name: <u>Stone Ledge Carpentry, LLC</u><br>Address: <u>12 Rackleff St.</u><br>City, State & Zip <u>Portland, Me 04103</u> Telephone: <u>318-1802</u><br>Who should we contact when the permit is ready: <u>Stone Ledge Carpentry, LLC</u> Telephone: <u>SAME</u><br>Mailing address: <u>12 Rackleff St. Portland, Me 04103</u> |   |  |

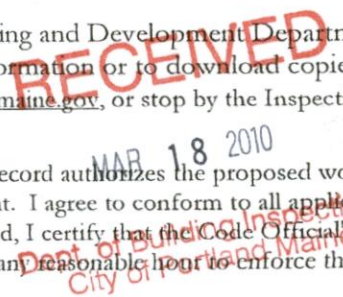
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: S Hamill Date: 3-16-10

This is not a permit; you may not commence ANY work until the permit is issue



## Living Room

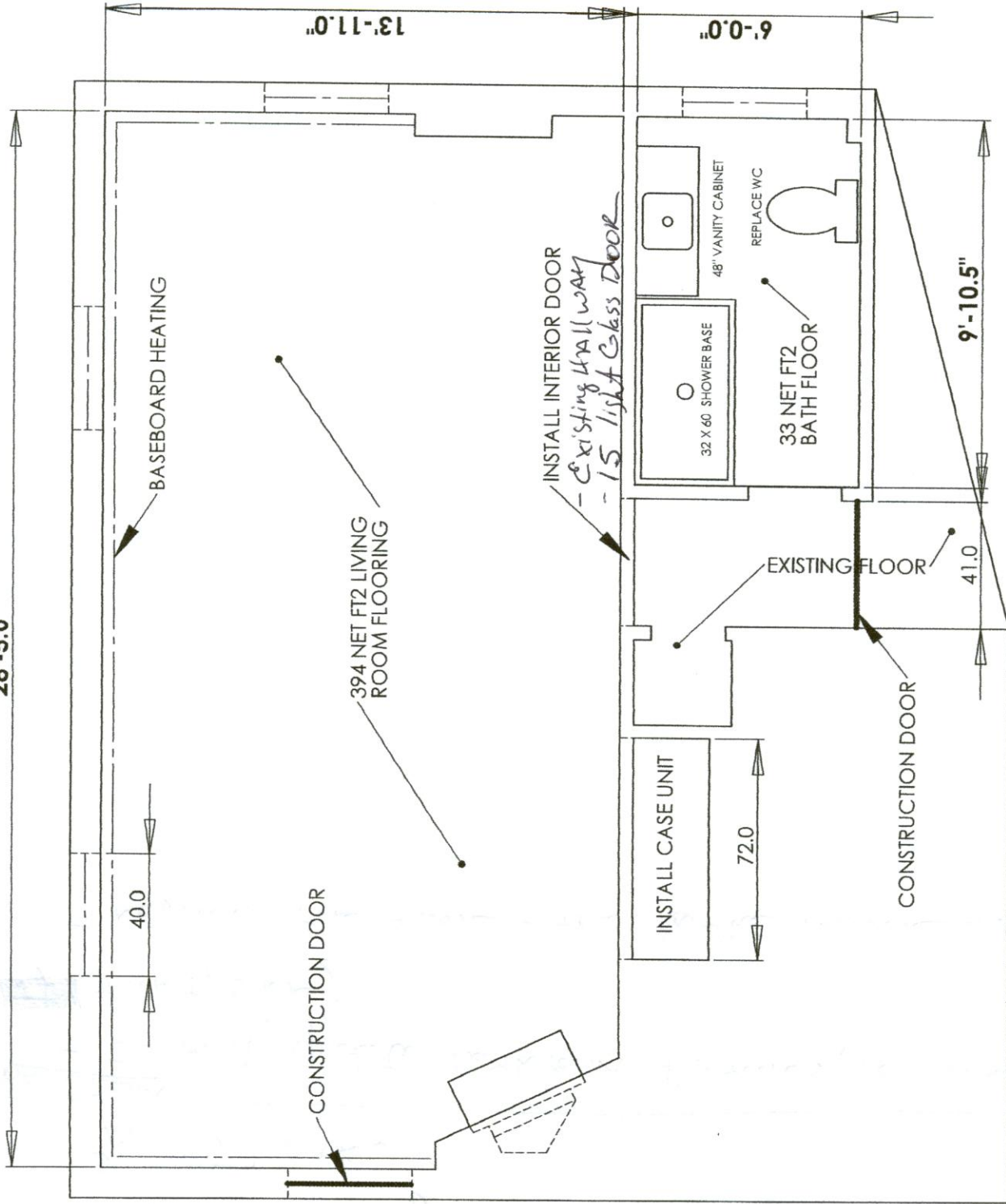
- Replace existing  $3/4$ " x 2" Flooring with  $3/4$ " x 5" OAK.

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## Bath Room

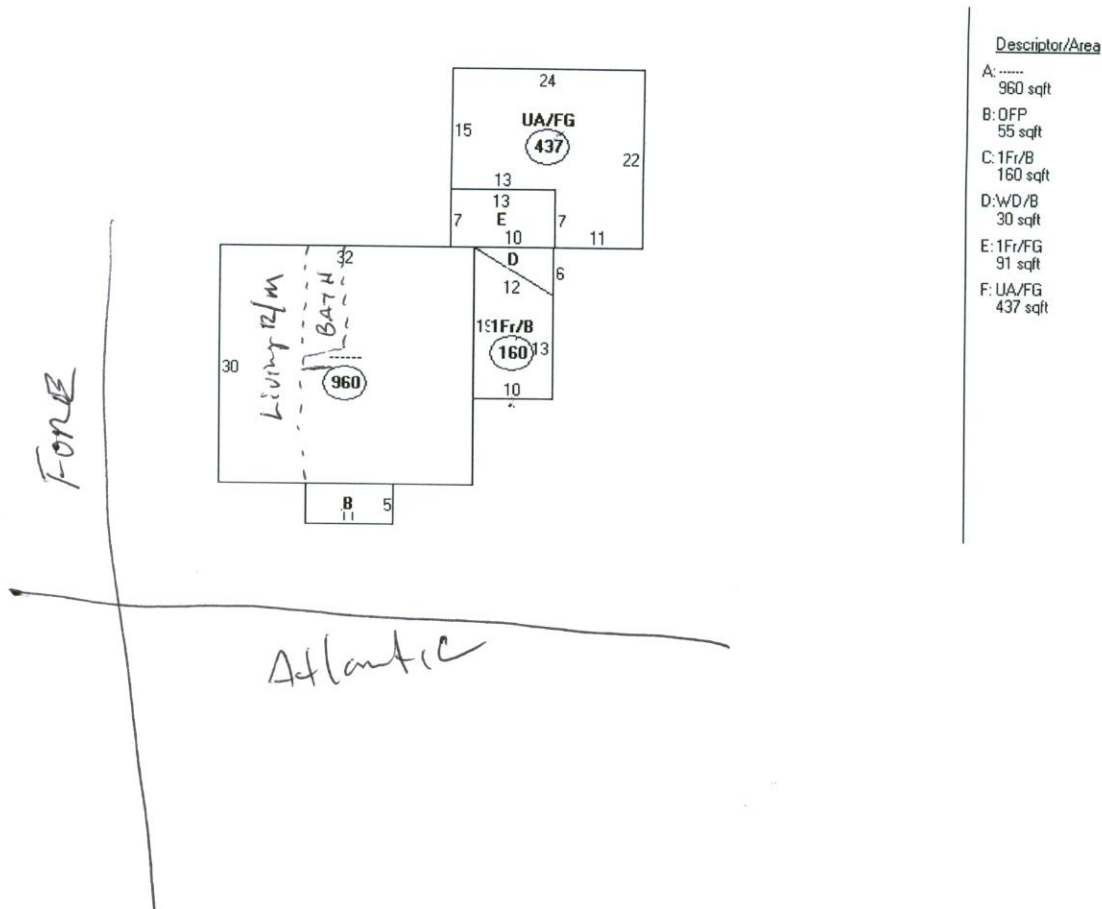
- Install/update bathroom fixtures (i.e. shower, toilet, sink).
- Replace tile floor + tile in the shower area.

28'-5.0"



LIVING BATH PROJECT  
 2 ATLANTIC ST  
 SCALE: 1/4" = 1' - 0"  
 DATE: 2-20-10

\* Specs. of work on Reverse side



| Descriptor/Area | Area     |
|-----------------|----------|
| A: .....        | 960 sqft |
| B: OFF          | 55 sqft  |
| C: 1Fr/B        | 160 sqft |
| D: WD/B         | 30 sqft  |
| E: 1Fr/FG       | 91 sqft  |
| F: UA/FG        | 437 sqft |

Scope of work

Living RM

- Replace existing 3/4" x 2" flooring with 3/4" x 5" OAK.

Bathroom

- Install/update bathroom fixtures (i.e. shower, toilet, sink).
- Replace tile floor + tile in the shower area.



