

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

Location of Construction: 24 St. Lawrence Street		Owner: Ronald E. Goodwin		Phone: 761-1604	Permit No. 960901
Owner Address:		Leasee/Buyer's Name:		Phone:	BusinessName:
Contractor Name:		Address:		Phone:	
Past Use: 2- fam		Proposed Use: Same w/ext reno		COST OF WORK: \$1,000.00	PERMIT FEE: \$25.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:
Proposed Project Description: Exterior reno as per plans				Signature:	Signature:
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
Permit Taken By: Vicki Dover		Date Applied For: 9/6/96		Signature:	Date:

PERMIT ISSUED
SEP 12 1996
CITY OF PORTLAND

Zone: *R-2* CBL: 16-J-6
 Zoning Approval: *OK w/ 9/11/96*
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: 9/9/96

D. Andrews
CEO DISTRICT

1. This permit application doesn't 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..

PERMIT ISSUED WITH REQUIREMENTS

Call 761-5911 for P/U

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 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 provisions of the code(s) applicable to such permit

Ronald E. Goodwin
 SIGNATURE OF APPLICANT Ronald E. Goodwin ADDRESS: 24 St. Lawrence St., Portland, 04101 DATE: 9/6/96 PHONE: 761-1604

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

COMMENTS

5-99 Not get started *dryj*

9-22-00 work appears to be completed *JR*

CBL: 16-J-6

permit: 960901

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

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,
 National Electrical Code and the following specifications:

Date 7/26/99
 Permit # _____
 CBL# 016-G-148

SITE LOCATION: #138 Congress St Portland Observatory
 OWNER City of Portland TENANT #138 Congress St

						TOTAL		EACH FEE		
OUTLETS	Receptacles	5	Switches	7	Smoke Detectors	12	.20	2.40		
FIXTURES	incandescent	40	fluorescent		Strips	40	.20	8.00		
SERVICES	Overhead		Underground	1	TTL AMPS	<800	1	15.00	15.00	
	Overhead		Underground	1		>800	1	25.00		
Temporary Service	Overhead		Underground	1	TTL AMPS			25.00		
METERS	(number of)	1				1	1.00	1.00	1.00	
MOTORS	(number of)						2.00			
RESID/COM	Electric units						1.00			
HEATING	oil/gas units		Interior		Exterior		5.00			
APPLIANCES	Ranges		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						10.00			
	Alarms/res						5.00			
	Alarms/com	1 (Fire)				1	15.00	15.00	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	1	1	4.00	4.00	
	TRANSFORMER	0-25 Kva						5.00		
		25-200 Kva						8.00		
	Over 200 Kva						10.00			
						TOTAL AMOUNT DUE		45.40		
						MINIMUM FEE/COMMERCIAL 35.00		MINIMUM FEE 25.00		

INSPECTION: Will be ready _____ or will call

CONTRACTORS NAME Palmouth Elec. Inc. MASTER LIC. # 03122
 ADDRESS 442 Riverside Blvd Hwy LIMITED LIC. # _____
 TELEPHONE 797-6174

SIGNATURE OF CONTRACTOR Wayne A. [Signature]

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering

010-6-013

PROPERTY ADDRESS

Town Or Plantation	
Street Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (if Different)	

PORTLAND Date Permit Issued: 4.21.98 6466 TOWN COPY \$ 112 If Double Fee Charged

L.P.I. # 0124

Local Plumbing Inspector Signature: Samuel Hayes

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 Inspector to deny a Permit.

Signature of Owner/Applicant _____ Date _____

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: D. Caddell (JB)

Date Approved: 9-19-00

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input 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 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>14010</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 existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		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
OR TRANSFER FEE [\$6.00]	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 2	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Total Fixtures		
		Fixture Fee		
		Transfer Fee		
		Hook-Up & Relocation Fee		
		Permit Fee (Total)		

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering

PROPERTY ADDRESS

Town Or Plantation	Portland
Street Subdivision Lot #	61 Monument St

PROPERTY OWNERS NAME

Last: [Signature]	First: [Signature]
Applicant Name:	[Signature]
Mailing Address of Owner/Applicant (If Different)	[Signature]

PORTLAND 6718 TOWN COPY

Date Permit Issued: 12/29/98 \$ [Signature] FEE Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 0124

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 Inspector to deny a Permit.

Signature of Owner/Applicant

Date

Caution: Inspection Required

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

D. Caddell (NW) 10/1/99
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

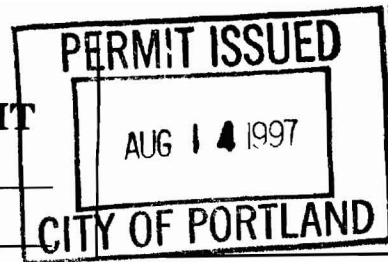
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		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 2	
	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Total Fixtures	
			Fixture Fee	
			Transfer Fee	
		Hook-Up & Relocation Fee		
		Permit Fee (Total)		



APPLICATION FOR AMENDMENT TO PERMIT

970874



Amendment No. _____

Portland, Maine, _____

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

12 August 1997

The undersigned hereby applies for amendment to Permit No. 960901 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location 24 St Lawrence St Within Fire Limits? _____ Dist. No. _____

Owner's name and address Ronald Goodwin SAA Ptld, ME 04101 Telephone 761-1604

Lessee's name and address _____ Telephone _____

Contractor's name and address _____ Telephone _____

Architect _____ Plans filed _____ No. of sheets _____

Proposed use of building 2-fam w/additonal windows No. families _____

Last use 2-fam No. families _____

Increased cost of work 2,000.00 Additional fee 35.00

Description of Proposed Work

Add additional windows
relocate bathroom

*OK HP
Kandi Talbot 8/12/97*

Ronald Goodwin
Ronald Goodwin

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____

Framing lumber — Kind _____ Dressed or full size? _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O.C. Bridging in every floor and flat roof span over 8 feet.

Joints and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

Approved: *LS 8/12/97*

Signature of Owner _____

Approved: *[Signature]*

INSPECTION COPY — WHITE
APPLICANT'S COPY — YELLOW

FILE COPY — PINK
ASSESSOR'S COPY — GOLDEN

Inspector of Buildings

016-7-ccc