Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BERMITION

Permit Number: 081201

This is to certify thatCOLEMAN BARBARA W /D Duryea	PERMIT ISSU
has permission to Remove wall in Kitchen to crest popen specifically	
AT _18 PONCE ST CI O17 G03P0	$01 \int \frac{SEP}{SEP} = 2.4 2008$
provided that the person or persons fill or containing this p	ermit shall comply

of the provisions of the Statutes of Ma e and of the Company 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.

Not ation o nust b spectio nd writte give permissi brocured this bui befd nereof is lath or oth sed-in. 2 NOTICE IS REQUIRED. HOL

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

OTHER REQUIRED APPROVALS

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Buil	ding or Use	Permi	t Application	n Permit No:	Issue Date	j	CBL:		
389 Congress Street, 04101	Tel: (2	207) 874-8703	B, Fax:	(207) 874-871	6 08-1201 9/24/08			017 G039001		
Location of Construction:		Owner Name:			Owner Address:			Phone:		
18 PONCE ST		COLEMAN E	BARBA	RA W	18 PONCE ST			1		
Business Name: Contractor Name:			Contractor Address:			Phone	Phone			
Dean Duryea			51 Walton St Por	tland		20783899	44			
Lessee/Buyer's Name Phone:			<u> </u>	Permit Type:				Zone:		
1					Alterations - Dw	ellings			•	
Past Use:		Proposed Use:			Permit Fee:	Cost of Wor	CEO District:	<u>'</u>		
Single Family Home		Single Family Home - Remove wall			\$30.00 \$1,000.00			1		
and a mining reside		in Kitchen to			FIRE DEPT:	Approved	DICDE	CTION:		
				•			Use Gr	oup: 💫 🔿	Туре	
1					<u> </u>	Denied		201	2003	
					1]	JKL.	-000 J	
Proposed Project Description:		L			i			oup: R3 TRC	1 /	
Remove wall in Kitchen to cre	eate oop	en space			Signature:		Signatu	ire: CL	9/20/00	
					PEDESTRIAN ACT	IVITIES DIST			421130	
					A ation.	and 🗀 Ama		Conditions -	Danied	
					Action: Appro	veu [] App	oroveu w	Conditions	Denied	
					Signature:			Date:		
Permit Taken By:	Date Ap	plied For:			Zoning	Approva				
ldobson	09/24	/2008				, PP · ·				
This permit application do	nes not r	reclude the	Spe	cial Zone or Revie	ws Zoning Appeal			Historic Preservation		
Applicant(s) from meeting			☐ Sh	oreland				Not in District or Landmark		
Federal Rules.										
2. Building permits do not include plumbing,			☐ Wetland		Miscell	Miscellaneous		Does Not Require Review		
septic or electrical work.	:c	:	Flood Zone Conditional Use		onal Use		Requires Review			
3. Building permits are void within six (6) months of the			Subdivision		Interpretation			Approved		
False information may inv										
permit and stop all work		_								
			│	e Plan	Approv	ed		Approved w/G	Conditions	
DEDENIT	OOLUE									
PERMIT I	220F	U	│ Maj		Denied			Denied		
SEP 2 4	2000		Date: Date:			D	Date:			
	2000		<u> </u>							
CITY OF PO	THE	4D								
		-								
			C	ERTIFICATION	ON					
I hereby certify that I am the ov	wner of i	record of the na	med pro	perty, or that th	ne proposed work i	s authorized	by the	owner of recor	d and that	
I have been authorized by the o	wner to	make this appl	ication a	s his authorized	d agent and I agree	to conform	to all ap	oplicable laws of	of this	
jurisdiction. In addition, if a pe										
shall have the authority to enter	r all area	is covered by su	ich pern	nit at any reasor	nable hour to enfor	ce the provi	sion of	the code(s) app	olicable to	
such permit.										
SIGNATURE OF APPLICANT				ADDRESS	<u></u> -	DATE		PHO	NE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



Same-Day Permitting

As part of Portland's city-wide effort to improve customer service and help streamline doing business within the City, the Inspections Division has developed a new permitting system for qualified properties and for specific construction projects.

> This permitting program applies only to existing single family homes not located within a historic district or shoreland zone.

Eligible Projects

Please submit a complete application with the required pl	ease submit a	oplication with the required plans
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Plea	se submit a complete application with the required plans
o.	Interior non structural projects (i.e. Adding closets, bathrooms, changing floor plans, kitchen remodels)
	Repairs to existing decks, porches and stairs that meet current zoning setbacks
0	Adding or replacing windows and doors (not to include bay windows)
•	Sheds less than 100 sq. ft.
	One story open entry/porch, 50 sq. ft. or less with maximum 6 ft. projection from the principal structure
	Chimney installation (NFPA 211 disclosure statement required)
0	Propane tanks
o	Heating Appliances (i.e. HVAC systems, gas inserts/monitors, wood/pellet stoves)
	Bulkheads 50 sq. ft. or less with maximum of 2 ft. in height (low profile)
In orde	er to be sure the City fully understands the full scope of the project, the Planning and Development Department may request nal information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov , stop by the
Buildin	g Inspections office, room 315 City Hall or call 874-8703.
I hereby	r certify that this project meets the above criteria and that the work performed will not go beyond these parameters.
Sign	nature of applicant: Date: 9-24.08
	This is not a permit; you may not commence ANY work until the permit is issued.

General Building Permit Application

property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 18	POHCIE ST	DART AUD		
Location/Address of Construction: je 7	e/Area	Square Footage of L	ot	Number of Stories
Tax Assessor's Chart, Block & Lot	Applicant *m	ust be owner, Lessee	or Buyer*	Telephone:
Chart# Block# Lot#	Name BAR	BARA COLEN	S	838-6817 (
	Address 18	PORCE ST		
	City, State & 2	Zip Pote Land M	= and 1017	
Lessee/DBA (If Applicable)	Owner (if diff	ferent from Applican	t) Co	ost Of
	Name		W	ork: \$ <u>\000.00</u>
	Address		С	of O Fee: \$
	City, State & 2	City, State & Zip		otal Fee: \$
Current legal use (i.e. single family) f vacant, what was the previous use? Proposed Specific use: s property part of a subdivision? Project description:	If y	res, please name		
Proposed Specific use:s property part of a subdivision?	If y	res, please name		
Proposed Specific use:	If y	res, please name	2017Z O	Ofas SPACIE
Proposed Specific use: s property part of a subdivision? Project description: REMOVIE WALL Contractor's name:	If y	res, please name	2017€ 0 1 —— —— —— Telepl	0141 SPACK none: 838-4244
Proposed Specific use: s property part of a subdivision? Project description: REMOVE WALL Contractor's name: DEDU DO Address: Subdivision? City, State & Zip Panalowy	If y 11 /4 70 12 /4 70 12 /4 70 20 /4 70	res, please name	2017€ 0 1 —— —— —— Telepl	0141 SPACK none: 838-4244
Proposed Specific use: s property part of a subdivision? Project description: REMOVIE WALL Contractor's name: DIEDN DO Address: Substant ST City, State & Zip Vho should we contact when the permit is re-	If y 11 /4 70. 12 /4 70. 12 /4 70. 22 /4 70. 24 /4 70. 25 /4 70.	res, please name	EPTC Of ————————————————————————————————————	0141 SPACIE none: <u>838-9944</u>
Proposed Specific use: s property part of a subdivision? Project description: REMOVIE WALL Contractor's name: DIEDN DO Address: City, State & Zip Vho should we contact when the permit is remaining address:	If y	res, please name	ZONZ OA Telepl Telepl tecklist.	0141 SPACIE none: <u>838-9944</u>

Signature: Date: 9-24-cj

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

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

provisions of the codes applicable to this permit.

Job Name:

City, State, Zip: .

Address:

Double 1-3/4" x 11-7/8" VERSA-L/ M® 2.0 3100 SP 1 span | No cantilevers | 0/12 s ope

Floor Beam\FB03 Wednesday, September 24, 2008 11:07

BC CALC® 2.0 Design Report - US

Build 276

18 Parce St.

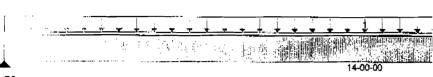
File Name BC CALC Project

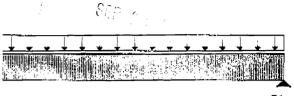
8007 g 7 c/33

Description: FB03

Specifier:

Customer: Code reports: ESR-1040 Designer: Company Misc:





LL 2,800 lbs DL 782 lbs

B0 LL 2,800 lbs DL 782 lbs

Total of Horizontal Design Spans = 14: 00-00

Load Summary				I·	Live	Dead	Snow	Wind	Roof Liv	/B
Tag Description	Load Type	Ref.	Start	End	100%	90%	115%	133%_	125%	Trib.
1 Standard Load	Unf. Area (psf)	Left	00-00-00	14-00-0	40	10			1	0-00-00

Controls Summary	Value	% Allowable	Duration	Case	Span
Pos. Moment	12,537 ft-lbs	58.9%	100%	1	1 - Internal
End Shear	3,038 lbs	38.5%	100%	1	1 - Left
Total Load Defl.	L/371 (0.453")	64.7%		1	1
Live Load Defl.	L/475 (0.354")	75.8%		1	1
Max Defl.	0.453"	45.3%		1	1
Span / Depth	14.1	n/a			1

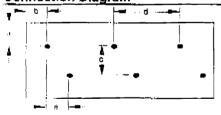
Design meets Code minimum (L/240) Total load deflection criteria. Design meets Code minimum (L/360) Live load deflection criteria. Design meets arbitrary (1") Maximum load deflection criteria.

Minimum bearing length for B0 is 1-1/2".

Minimum bearing length for B1 is 1-1/2".

Entered/Displayed Horizontal Span Length(s) = Clear Span + 1/2 min. end bearing 1/2 intermediate bearing

Connection Diagram



a minimum = 2" b minimum = 4"

c = 7-7/8" d = 24"

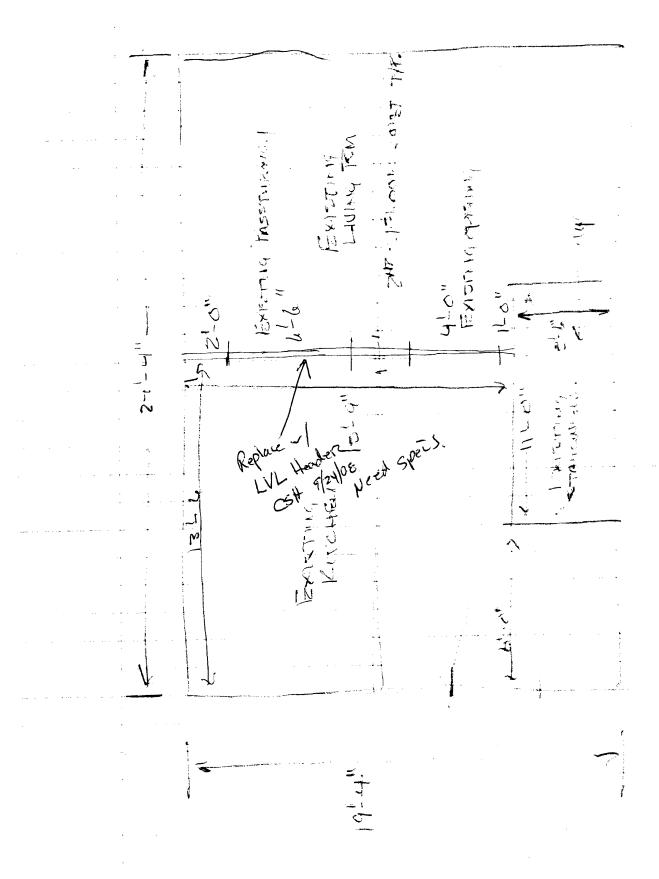
e minimum = 1"

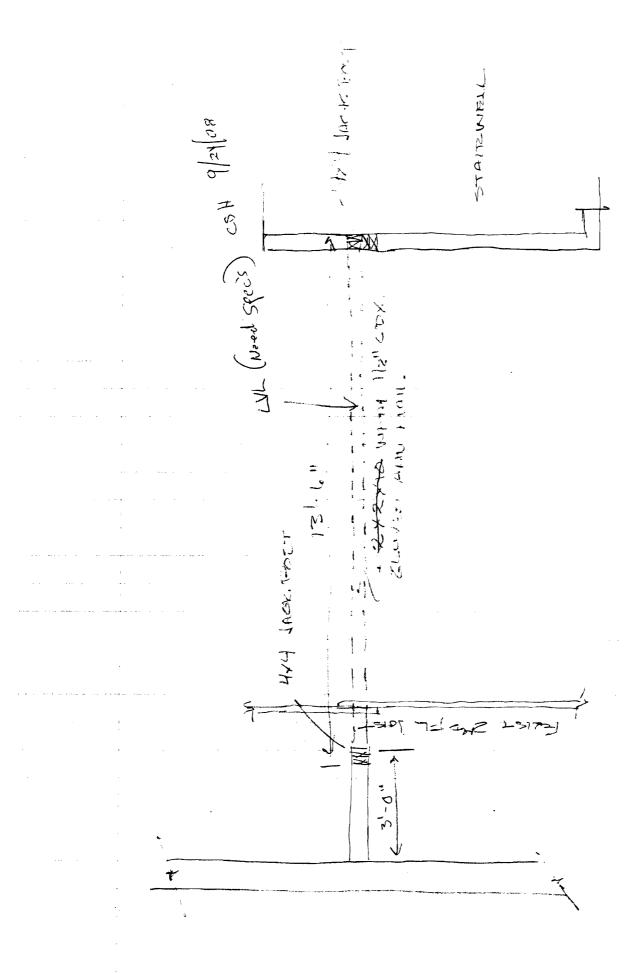
Member has no side loads. Connectors are: FMT\$L338

Disclosure

Completeness and accuracy of input must be verified by anyone who would rely on output as evidence of suitability for particular application. Output here based on building code-accepted design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with current Installation Guide and applicable building codes. To obtain installation Guide or ask questions, please call (800)232-0788 before installation.

BC CALCOD, BC FRAMEROD, AJS™ ALLJOISTO, BC RIM BOARDTM, BCIO BOISE GLULAMTM, SIMPLE FRAMING SYSTEM®, VERSA-LAM®, VERSA-RIM PLUS®, VERSA-RIM®, VERSA-STRAND®, VERSA-STUD® are trademarks of Bolse Wood Products,





City of Portland, Maine - Bui	lding or Use Permit	t	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: ((207) 874-8703, Fax: ((207) 874-8716	08-1201	09/24/2008	017 (G03900	01
Location of Construction:	Owner Address:	Phone:					
18 PONCE ST	COLEMAN BARBAR	RA W	18 PONCE ST				
Business Name:	Contractor Name:	- (Contractor Address:	<u> </u>	Phone		
	Dean Duryea		51 Walton St Portla	and	(207) 8	38-994	44
Lessee/Buyer's Name	Phone:	F	Permit Type:				
		L	Alterations - Dwel	lings			
Proposed Use:		Proposed	l Project Description:				
Single Family Home - Remove wall i	n Kitchen to create oope	n space Remov	e wall in Kitchen to	create oopen space			
Dept: Zoning Status: A	Approved	Reviewer:	Chris Hanson	Approval Da	te: 0	9/24/20	008
Note:				•	Ok to Is	sue:	✓
Dept: Building Status: A	Approved with Condition	s Reviewer:	Chris Hanson	Approval Da	te: 0	9/24/20	008
Note:		•			Ok to Is	sue:	✓
1) The design load spec sheets for a	ny engineered beam(s) /	Trusses must be	submitted to this of	fice.			
Permit approved based on the pla noted on plans.					reed on a	and as	
Separate permits are required for Separate plans may need to be sul		•					

BUILDING PERMIT-INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY)

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 I	Release" will be incurred if the procedure	is not followed as stated below.
A Pre-c	construction Meeting will take place upon	receipt of your building permit.
X	_ Framing/Rough Plumbing/Electrical: P	rior to Any Insulating or drywalling
<u>X</u>	Final inspection required at completion	of work.
	ate of Occupancy is not required for certain poject requires a Certificate of Occupancy. All	•
•	of the inspections do not occur, the project RDLESS OF THE NOTICE OR CIRCUM	_
	ICATE OF OCCUPANICES MUST BE IS PACE MAY BE OÇCUPIED.	SSUED AND PAID FOR, BEFORE
χ	L'Une Duyen	9.24.08
Signatur	re of Applicant/Designee	Date
Le	Sh	<u>99.24.08</u>
Signatur	re of Inspections Official	Date

CBL: 017 G039001 **Building Permit #: 08-1201**