

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

Location of Construction: 116 1/2 ST		Owner: Diane		Phone: Mike Morino 772-7647	Permit No: 901379
Owner Address:		Lessee/Buyer's Name:		Business Name:	
Contractor Name:		Address:		Phone:	Permit Issued: DEC 15
Past Use: rudi The Plumber D&L Electric 873-3435 Dave Leach		Proposed Use:		COST OF WORK: \$ PERMIT FEE: \$ FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: B Type 3B Signature: [Signature]	
Proposed Project Description:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zone: _____ CBL: _____ Zoning Approval: _____ Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input 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"/>	
Permit Taken By:		Date Applied For:		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 Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____	

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..

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT

ADDRESS:

DATE:

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED
WITH REQUIREMENTS
CEO DISTRICT



COMMENTS

2/14/00 Ramp & Stair entrance almost complete. Ramp will need blacktop work in Spring to continue the 1st 12" slope. Right now there is a 3" rise at bottom of ramp. Rise = 6 1/2" on stairs Run 11", Graspable hand/guard incorporated. Just starting interior partition renovation JB

3-02-00 left message w/contractor about Elec. & Plumbing permits JB

Mike C called Electrician, I called Plumber left messages JB

3-2-00 Rolf from Rudi called - only re-routed one baseboard heater JB

~~10-2-00~~ Ramp completed but there is a 6" rise at the bottom that is supposed to be leveled when driveway is re-paved.

10-4-00 left message for Marino Inc (owners) to inquire about paving JB

10-10-00 Diane from Marino's called to say she is making in to the house JB

11-2-00 spoke w/ Diane - They will have ramp fixed by 11-12-00 JB

11-11-00 spoke w/ Diane 11-2-04 - Ramp will now be changed to the Right side of building for easier access. She will submit elevation plan to indicate change JB

3/7/05 closer JB

Inspection Record

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

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

PROPERTY OWNERS NAME

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

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 Inspectors to deny a Permit.

Signature of Owner/Applicant

Date

PORTLAND

Date Permit Issued:

3 14/00

7196

TOWN COPY

\$

24

☐ Double Fee Charged

L.P.I. # 011214

Local Plumbing Inspector Signature

Caution: Inspection Required

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

Jeannie Bourke

Local Plumbing Inspector Signature

3-2-00

Date Approved

PERMIT INFORMATION

This Application is for

1. ☐ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

Type of Structure To Be Served:

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. ☐ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D. HOUSING DEALER/MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up		Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.			Hosebibb / Sillcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
OR HOOK-UP: to an existing subsurface wastewater disposal system.			Urinal		Sink
			Drinking Fountain		Wash Basin
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.			Indirect Waste		Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
OR TRANSFER FEE [\$6.00]			Grease / Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
OR TRANSFER FEE [\$6.00]			Bidet		Laundry Tub
			Other: _____		Water Heater
			Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
					Fixtures (Subtotal) Column 2
					Total Fixtures
					Fixture Fee
					Transfer Fee
					Hook-Up & Relocation Fee
					Permit Fee (Total)

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE

ELECTRICAL PERMIT *Commercial*

City of Portland, Me. *019 A 008*

*W3*

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 *3/2/00*
 Permit # *179*
 CBL# *019-A-008*

SITE LOCATION: *144 Fore Street*OWNER *Jackrabbit Limited Liability* TENANT *X Press Copy*

								TOTAL	EACH FEE
OUTLETS	Receptacles	<i>10</i>	Switches	<i>5</i>	Smoke Detectors		<i>15</i>	.20	<i>3.00</i>
FIXTURES	incandescent		fluorescent	<i>10</i>	Strips		<i>10</i>	.20	<i>2.00</i>
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	Ranges	<i>1</i>	Cook Tops		Wall Ovens		<i>1</i>	2.00	<i>2.00</i>
	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							15.00	
	Heavy Duty(CRKT)							2.00	
	Circus/Carnv							25.00	
	Alterations							5.00	
	Fire Repairs							15.00	
	E Lights	<i>1</i>					<i>1</i>	1.00	<i>1.00</i>
	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 35.00								25.00	<i>35.00</i>

INSPECTION: Will be ready *MARCH 3 2000* or will call *✓*CONTRACTORS NAME *D L Electric Inc*MASTER LIC. # *13811*ADDRESS *128 SILVER STREET*

LIMITED LIC. #

TELEPHONE *WATERVILLE, ME 04901**(207) 873-3435*SIGNATURE OF CONTRACTOR *Dean y hank*