Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CI	TY OF F	PORTLAN	ID
Please Read Application And Notes, If Any, Attached	BU	RMIT	PERMIT ISSUED Permit Number: 100561
This is to certify thatRED HOUSE RENTA	LS LLC antic H	vements	JUN 1 2010
has permission toadd hathroom in existing	ng 8' x 8' space o	ont rol on secon oor	CITY OF DODT! AND
AT _198 OXFORD ST unit 2		CP 026	CONTROL PORTLAND
provided that the person or person of the provisions of the Statutes the construction, maintenance a this department.	of Mage and o	the conces of	
Apply to Public Works for street line and grade if nature of work requires such information.		spectio must be permissic procured in a per or increased in a sed-in. 2 S REQUIRED.	A certificate of occupancy must b procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.			A 1
Health Dept.			~[
Appeal Board		(	/TH
Other		+	Director - Building & Inspection Services
-			

City of Portland, Maine -	Building or Use	Permit Ap	plication	Permit No:	lasue Date:	CBL:		
389 Congress Street, 04101 T	el: (207 <u>)</u> 874-8703	, Fax: (207)	874-8716	10-0561	<u> </u>	026 C0	03001	
Location of Construction:	ation of Construction: Owner Name:		1	)wner Address:		Phone:		
198 OXFORD ST unit 2	RED HOUSE	RED HOUSE RENTALS LLC		600 WEST 218TH	<u> 1 ST</u> # 1D			
Business Name: Contractor Name: Atlantic Home				Contractor Address:	·	Phone		
		Imporvemen		P.O. Box 673 Sac	o	20722984	2072298475	
Lessee/Buyer's Name	Phone:	P		ermit Type:			Zone:	
			L	Alterations - Dup		R-1		
Past Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:	CEO District:	
2 Unit Residential 2 Unit Residen				\$40.00 \$1,200.0  FIRE DEPT: Approved INC.    Descripted   Decripted   Decripte			<u> </u>	
	room on secon	- ,				NSPECTION: Use Group: R · S Type: 52:		
	100m on secon							
120.15	sa- 2 du							
Proposed Project Description:	***************************************			Signature: Signature Signature PEDESTRIAN ACTIVITIES DISTRICT (P				
add bathroom in existing 8' x 8'	'8' enace off front ro	om on second	floor					
and cannoon in existing a X a	to space off front for	Jili Oli SCCOllu	1					
			- 1			Ţ	7	
			ļ,	Action: Approv	ed Approve	d w/Conditions		
			}:	Signature:		Date:		
Permit Taken By: Date Applied For:				Zoning Approval				
ldobson	05/24/2010							
1. This permit application does	not preclude the	Special Zone or Reviews		Zoning Appeal		Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		☐ Shoreland		☐ Variance		Not in District or Landmark		
Building permits do not include plumbing, septic or electrical work.		☐ Wetland	] Wetland		Miscellaneous		Does Not Require Review	
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		☐ Flood Zone ☐ Subdivision		Conditional Use		Requires Rev	view	
				☐ Interpretation		Approved		
		Site Plan		☐ Approve	d	☐ Approved w/	Conditions	
PERMIT ISSU	ED (	   Maj □ Min	nor MM	Denied		Denied		
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1 2020		Drul condutions  Date: 5125110 Arm		Date:		Date:		
JUN - 1 2010	'	<u> 3</u> 01	116. 401887					
<u> </u>								
CITY OF PORTL	AND (							
OH CHI								
		CERT	IFICATIO	N				
I hereby certify that I am the own I have been authorized by the ow jurisdiction. In addition, if a pen shall have the authority to enter a such permit.	ner to make this appl nit for work describe	ication as his d in the appli	authorized a cation is issu	agent and I agree tued, I certify that t	to conform to al the code officia	ll applicable laws I's authorized rep	of this resentative	
SIGNATURE OF APPLICANT			ADDRESS		DATE	PHO	DNE	

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			Permit No: 10-0561	Date Applied For: 05/24/2010	CBL: 026 C003001
Location of Construction: 198 OXFORD ST unit 2	Owner Name:	Owner Name:		Owner Address: 600 WEST 218TH ST # 1D	
Business Name:	Contractor Name: Atlantic Home Im	Contractor Name: Atlantic Home Imporvements		Contractor Address: P.O. Box 673 Saco	
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Duplex		
Proposed Use:  2 Unit Residential - add bathrofront room on second floor	oom in existing 8' x 8' x8' s	pace off ad	posed Project Description ld bathroom in existing por		f front room on second
Dept: Zoning Sta Note:  1) This is NOT an approval for not limited to items such a	_	ınit. You SHAL	•		Ok to Issue:

- 2) This property shall remain a two family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 05/28/2010

Note: Ok to Issue: ✓

- 1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 2) 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.

#### **BUILDING PERMIT INSPECTION PROCEDURES**

### Please call 874-8703 or 874-8693 (ONLY)

or email: 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.

CBL: 026 C003001 Building Permit #: 10-0561



PINK - Permit Copy

# CITY OF PORTLAND, MAINE Department of Building Inspections

## **Original Receipt**

	*·	5.24	20/0
	Kunt SQ 1	ic Truy	ment 5
Location of Work	<u>, 00</u>	X AUROL	
Cost of Construction \$	<u> </u>	<b>-</b>	
Permit Fee \$	· · · · · · · · · · · · · · · · · · ·	Site Fee: _	<del></del>
Certific	cate of Occi	upancy Fee: _	······································
- 1473		Total:	40
(Building (IS) Plumbing (IS)	Electrical		<del>-</del>
Other	· 		
ca: 26-C-3	*		
Check #: 1407	Total	Collected	• 40
No work is to be st Please keep original Taken by:	i receip	•	
WHITE - Applicant's Copy YELLOW - Office Copy			

## 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.

		_ <del></del>				
Location/Address of Construction: 198	Oxfor	d ST				
Total Square Footage of Proposed Structure/A	rea	Square Footage	e of Lot	Number of Stories		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#		House Ren	-	Telephone: 917 364-5694		
026 003			Talsmorth,	9		
	<del></del>	Zip NYNY		<u> </u>		
Lessee/DBA (If Applicable)	Owner (if di Name	fferent from Ap		ost Of /ork: \$		
	Add <del>re</del> ss		c	of O Fee: \$		
,	City, State &	: Zip	T	otal Fee: \$ 40:00		
(a	B	un5.	CD 11 1117			
Current legal use (i.e. single family)  If vacant, what was the previous use?	177	Numbe	r of Residential U	nits		
Proposed Specific use:	#1	Quent	<u> </u>	<del></del> _		
Is property part of a subdivision?	I	yes, please nam				
Project description: Acta barhroom	in ext	ting 8x6x	8' Space off	front Rom on		
Second Floor. UniTE	* ン	Manage of the second				
Contractor's name: Atlantic Home	Improve	mato	· · · · · · · · · · · · · · · · · · ·			
Address: P.O. Box 673	<u> </u>		·			
City State & Zip SACO, ME 01	4072		Telep	phone: 207 -224-8475		
Who should we contact when the permit is ready: Danield Coiquere Telephone: 207-229-84						
Mailing address: P.O. Box 673, SACO, ME 04072						
Please submit all of the information	outlined o	n the applica	ble Checklist.	Failure to		
do so will result in the						
		_	_			
n order to be sure the City fully understands the						
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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a> , or stop by the Inspections						
Division office, room 315 City Hall or call 874-8703.						
hereby certify that I am the Owner of record of the o						
hat I have been authorized by the owner to make this aws of this jurisdiction. In addition, if a permit for wor	مة المماضة ما الم	this application is:	inama in a sana	the alle Officialle		
authorized representative shall have the authority to en	ter all areas cov	ered by this permi	it it any reasonable	Nour to enforce the		
Signature:			MAY	Inspace		
			1211	illowing Mo		
signature: Danueld J. Jayn	Dat رعب	e: 5/	124/100	Poli		
This is not a permit; you may not commence ANY work until the permit is issued						

Bathroom Addow; on Second Floor 198 Oxford St, Portland, ME Kitch-Ioselate wall, for loois e Install Shower \* myself to build Pertition walls Bild wall for Between, toler, and shower using 2'44's 16" oc 34" x 8", Justiell Shoerrack Finsulation. Install Tile Plan. Install Vanid Sheet rock walls Twosde All walls \*Plumber to install all NEW BATH Room. ) All walls existing! bern form fixtures and flumb, # Elect to install all circles
for GFI's, Exten whight. vaninty light, G' Elect Base board.