

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

SECTION

PERMIT

PERMIT ISSUED
Permit Number: 041711
APR 11 2005
CITY OF PORTLAND

This is to certify that York - Cumberland Housing Barbara B Section

has permission to Repair/ Replace existing ADA Ramp

AT 67 Elm St

033 N001001

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 work on permit must be completed before this building or part thereof is occupied or closed-in. **48 HOURS NOTICE IS REQUIRED.**

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

OTHER REQUIRED APPROVALS

Fire Dept. [Signature]

Health Dept. _____

Appeal Board _____

Other _____

Department Name

[Signature]
Director - Building & Inspection Services 4/8/05

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: 04-1711 Issue Date: APR 17 2004 CBL: 033 N001001			
Location of Construction: 67 Elm St	Owner Name: York - Cumberland Housing	Owner Address: 99 School St	Phone: 207 883 5528
Business Name:	Contractor Name: Risbara Bros Construction	Contractor Address: 197 US Route 1 Scarborough	Phone: 207 883 5528
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: S-3
Past Use: Adolescent Center/shelter	Proposed Use: Adolescent Center/shelter/ Repaid Replace existing ADA Ramp	Permit Fee: \$75.00	Cost of Work: \$6,000.00
		CEO District: 1	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		INSPECTION: Use Group: D Type: SB	Signature: <i>[Signature]</i>
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
		Signature: _____ Date: _____	

Permit Taken By: Idobson	Date Applied For: 11/17/2004	Zoning Approval		
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..	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"/>	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 checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Date: <i>[Signature]</i> 11/23/04
	Date: _____	Date: _____	Date: _____	Date: _____

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

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Permit No: 04-1711	Date Applied For: 11/17/2004	CBL: 033 N001001
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Business Name:	Contractor Name: Risbara Bros Construction	Contractor Address: 197 US Route 1 Scarborough	Phone (207) 883-5528
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Adolescent Center/shelter/ Repair/ Replace existing ADA Ramp	Proposed Project Description: Repaired Replace existing ADA Ramp
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Dept: Building **Status:** Pending **Reviewer:** **Approval Date:**

Note: **Ok to Issue:**

PERMIT # 000806 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Tom Cardente, Arrow Realty
 Address: 198 Lancaster Rd., Portland
 LOCATION OF CONSTRUCTION 65 Elm St., Portland
 CONTRACTOR: Tom Cardente SUBCONTRACTORS: 772-6032
 ADDRESS: 198 Lancaster Rd., Portland

Est. Construction Cost: _____ Type of Use: Change of Use

Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____

Proposed Use: _____ Changing Use from 3 family dwelling to (16 units)
 Conversion: Explain an addition to existing building. (See PER Arthur Rowe)

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Existing Building: _____
 # of Existing Units: _____ # of New Dwelling Units: _____

1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other: _____

1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

- Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____ Span(s) _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulation Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

- Interior Walls:
 1. Studding Size _____ Spacing _____
 2. Header Sizes _____ Span(s) _____
 3. Wall Covering Type: _____
 4. Fire Wall if required _____
 5. Other Materials _____

For Official Use Only

Date: June 20, 1988 Subdivision: Yes / No _____
 Inside Fire Limits: _____ Name: _____
 Bldg Code: _____ Lot: _____
 Time Limit: _____ Block: _____
 Estimated Cost: _____ Permit Expiration: _____
 Value/Structure: _____ Ownership: _____ Public _____ Private _____
 Fee: \$22.00

- Callings:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

1. Truss or Rafter Size _____ Span _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 4. Other: _____

Chimneys: _____
 Type: _____ Number of Fire Places: _____

Heating: _____
 Type of Heat: _____

Electrical: _____
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

- Plumbing:
 1. Approval of soil test if required Yes No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____

- Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Zoning: _____
 District: _____ Street Frontage Req: _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt _____ Special Exception _____
 Other (Explain) _____
 Date Approved _____

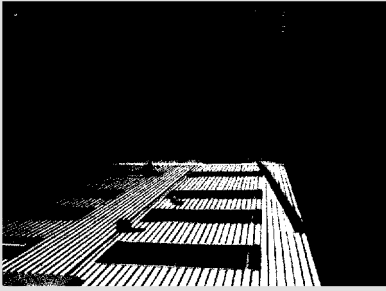
Permit Received By: MANC. J. F. COLLINS
 Signature of Applicant: J. F. Collins, Pres Date: 7-5-88
 Signature of CEO: _____ Date: _____
 Inspection Dates: _____

**PERMIT ISSUED
 WITH LETTER**

1107 M. Rowe



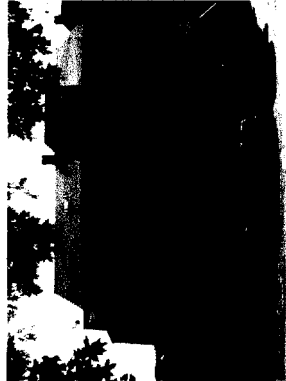
EAST ELEVATION



EAST ELEVATION



SOUTH ELEVATION



NORTH ELEVATION



WEST ELEVATION

Peble Street Lighthouse Center
 Portland, Maine
 James Sterling AIA
 Architect
 142 High Street
 Portland, Maine
 elevations

scale: 1/4" = 1'
 date: 04 October 2004

NOV 17 2004

33001



Department of Building

Statement of Occupancy

Section 17-107 (a) - Chicago Building Code

DATE: May 7, 1988

That the building located at the above location, built—altered
has been found to conform
with the requirements of the Chicago Building Code and is hereby approved for
occupancy for the limited use and purposes stated below.

Use of Building is for:

APPROVED OCCUPANCY

City Center

Special Approval:

That the building is approved

for the use of

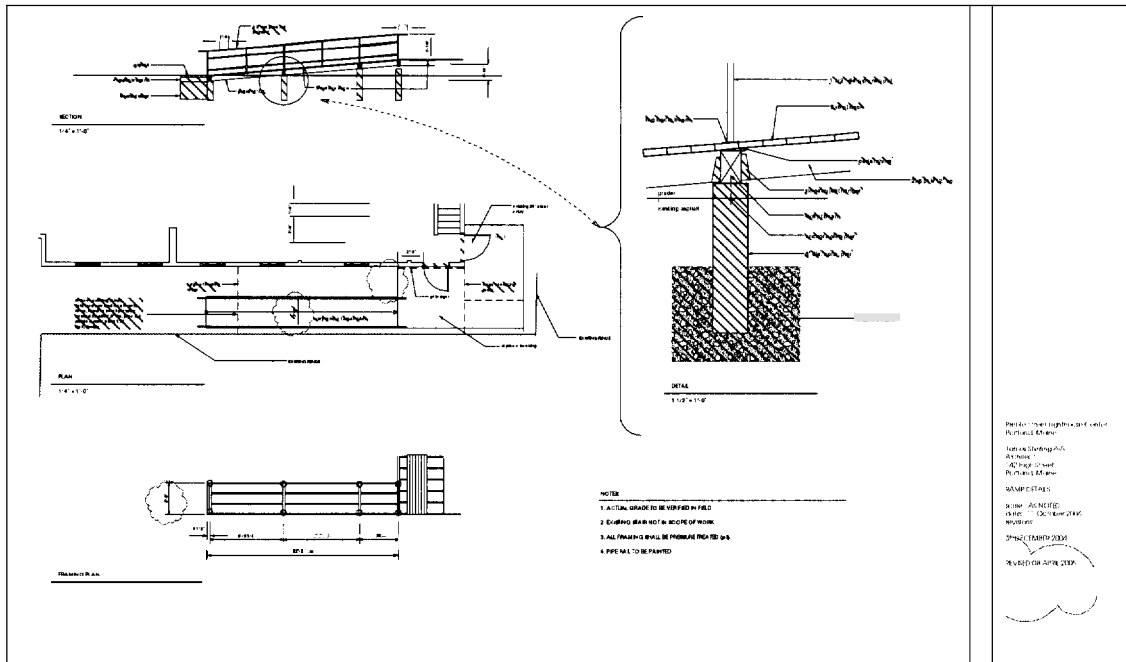
as follows:

(City)

(County)

Inspector of Buildings

When the building is approved for use, the building owner must be transferred from
the building code to the building code of the City of Chicago for use of less than one dollar.



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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 11/23/2004

Note: **Ok to Issue:**

- 1) The B-3 zone allows construction up to property lines. It will be the responsibility of the owner to show the code enforcement officer where the property lines are located so that the ramp is not placed over the property line(s).

Dept: Building **Status:** Pending **Reviewer:** Mike Nugent **Approval Date:**

Note: **Ok to Issue:**

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Lt. MacDougal **Approval Date:**

Note: **Ok to Issue:**

- 1) new ramps shall be a minimum of 44" in width

Comments:

11/30/2004-mjn: need structurals and height above grade etc....jim sterling notified