

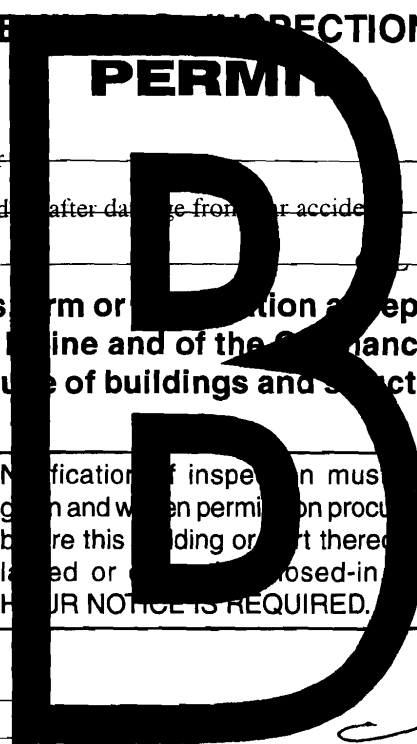
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 070449

Please Read
Application And
Notes, If Any,
Attached



This is to certify that MILCO LLC / Home Owner

has permission to Repair and replace bay window after damage from fire accident

AT 210 HIGH ST 036 F013001

provided that the person or persons who apply for or obtain a permit accepting this permit shall comply with all of the provisions of the Statutes of this State 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 when permission procured before this building or part thereof is altered or closed-in. 24 HOUR 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. _____

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature] 5/1/07
Director - Building & Inspection Services

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: 07-0449	Issue Date:	CBL: 036 F013001
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Location of Construction: 210 HIGH ST	Owner Name: MILCO LLC	Owner Address: 46 FINN PARKER RD	Phone:
Business Name:	Contractor Name: Home Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone: R6

Past Use: Multi-Family Home	Proposed Use: Multi-Family Home - Repair and replace bay window after damage from Car accident	Permit Fee: \$90.00	Cost of Work: \$6,500.00	CEO District: 2
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Proposed Project Description: Repair and replace bay window after damage from Car accident <i>legal use - 6 dw. (#98-070)</i>	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-2</i> Type: <i>SB</i> <i>IBC 2003</i>
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Signature: <i>Greg Cross</i>	Signature: <i>[Handwritten 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: 04/27/2007	Zoning Approval
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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"/> <i>all work w/in existing footprint</i> Date: <i>4/27/07 [Signature]</i>	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 Date:	Historic Preservation 7/5 <input 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:
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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

Please call 874-8703 or 874-8693 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 Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- | | | |
|-------------------------------------|---------------------------------------|--|
| <input checked="" type="checkbox"/> | Footing/Building Location Inspection: | Prior to pouring concrete |
| <input checked="" type="checkbox"/> | Re-Bar Schedule Inspection: | Prior to pouring concrete |
| <input checked="" type="checkbox"/> | Foundation Inspection: | Prior to placing ANY backfill |
| <input checked="" type="checkbox"/> | Framing/Rough Plumbing/Electrical: | Prior to any insulating or drywalling |
| <input checked="" type="checkbox"/> | Final/Certificate of Occupancy: | Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point. |

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

~~If~~ If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

~~W/A~~ **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

Phillip Miller

Signature of Applicant/Designee

Date

Donna Martin Admix

05-7-07

Signature of Inspections Official

Date

CBL: 036 F 013 Building Permit #: 07-0449



City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0449	Date Applied For: 04/27/2007	CBL: 036 F013001
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Location of Construction: 210 HIGH ST	Owner Name: MILCO LLC	Owner Address: 46 FINN PARKER RD	Phone:
Business Name:	Contractor Name: Home Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	

Proposed Use: Multi-Family Home - Repair and replace bay window after damage from Car accident	Proposed Project Description: Repair and replace bay window after damage from Car accident
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 04/27/2007

Note: Van ran into building and damaged the bay window. Permit is to repair the damage.

Ok to Issue:

- 1) This property shall remain a six family dwelling. Any change of use shall require a separate permit application for review and approval.
- 2) This permit is being issued with the understanding that all work will take place within the existing footprint.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 05/01/2007

Note:

Ok to Issue:

- 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.

Dept: Fire **Status:** Approved **Reviewer:** Capt Greg Cass **Approval Date:** 05/01/2007

Note:

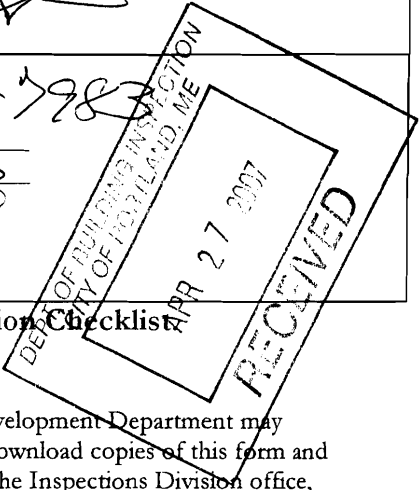
Ok to Issue:



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.

Location/Address of Construction: <u>308 High St -</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>30</u> <u>F</u> <u>13</u>	Owner: <u>Milco, LLC</u>	Telephone: <u>650-0033</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Gael C Miller</u> <u>46 Finn Parker Rd</u> <u>Gorham, ME 04038</u>	Cost of Work: \$ <u>6,500</u> Fee: \$ <u>90.00</u> C of O Fee: \$ _____
Current legal use (i.e. single family) <u>Multi Unit - 6</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Replace + Repair Bay & window</u> <u>Damaged in car accident</u>	Contractor's name, address & telephone: <u>Bill Miller 432-7987</u> Who should we contact when the permit is ready: <u>Gael Miller</u> Mailing address: _____ Phone: <u>650 0033</u>	



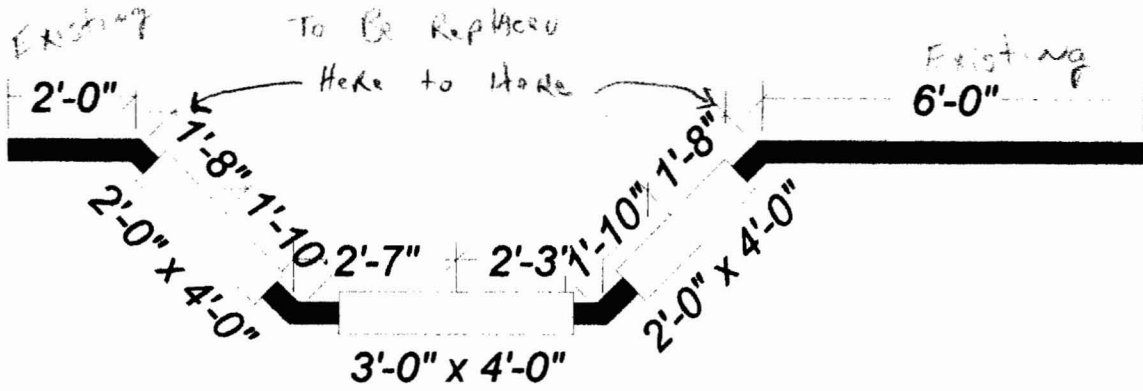
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department 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 www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable 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 provisions of the codes applicable to this permit.

Signature of applicant: Gael C Miller Date: 4/27/07

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



Brick Foundation

2x6 FRAMING 16 on center

TRIPLE 2x6 HEADERS ABOVE WINDOWS

JACKS on each side

2- 24 x 48 windows

1 36 x 48 window

36 F 13

