

913030

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee _____ Zone _____ Map # _____ Lot # _____

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

Owner: Ford River Group Phone # 772-8109
Address: Five Hill St; Ptd, 4C 04101

LOCATION OF CONSTRUCTION 48 Free St. (second floor)
Contractor: Orbit-Ryan Inc Sub: 773-1625 Call for bid
Address: 10 Danforth St; Ptd, 4E Phone # 04101

Est. Construction Cost: 3000. Proposed Use: retail bldg
Past Use: retail bldg

of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion: interior renovations - second floor

CALL FOR P/U 772-6404

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

Floor: Sills must be anchored.
1. Sills Size: _____
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 _____

White - Tax Assessor

For Official Use Only

PERMIT ISSUED

Date: 9/16/91

Inside Fire Lines _____

Blgd Code _____

Time Limit _____

Estimated Cost: 3,000.

Ownership: _____

CITY OF PORTLAND

Zoning: _____

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____

Special Exception _____

Other: (explain) 9-16-91

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

Roof:
1. Truss or Rafter Size _____ Span _____ Action: Approved
2. Sheathing Type _____ Size _____ Action: Approved with Conditions
3. Roof Covering Type _____ Action: Denied

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

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.

Permit Received By: Louise E. Chavo

Signature of Applicant _____ Date: 9/16

CEO's District: _____

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

PERMIT ISSUED WITH LETTER

MA. IRVING