DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that **ERIK EDWARDS**

Job ID: 2012-11-5328-ALTR

Located At 133 YORK ST

CBL: 044- A-029-001

has permission to Remodel Bathroom

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department:

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD

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 Inspections 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.

Footings/Setbacks prior to pouring concrete

Close In Elec/Plmb/Frame prior to insulate or gyp

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF 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.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Director of Planning and Urban Development Jeff Levine

Job ID: 2012-11-5328-ALTR

Located At: 133 YORK ST

CBL: 044- A-029-001

Conditions of Approval:

Zoning

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

Building

 bSeparate 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. Application approval based upon information provided by the applicant or design professional. Any deviation from approved plans requires separate review and approval prior to work.

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Job No: 2012-11-5328-ALTR	Date Applied: 11/2/2012		CBL: 044- A-029-001			
Location of Construction: 133 YORK ST	Owner Name: ERIK EWARDS		Owner Address: 20 ROUNDABOUT SCARBOROUGH,			Phone: 415-9397
Business Name:	Contractor Name: Hoyt Hel		Contractor Address 15 Cumberland	ess: Ave., Portland, ME	E 04101	Phone: 240-9479
Lessee/Buyer's Name:	Phone:		Permit Type: BLDG ALT			Zone: R-6
Past Use: Two Family Dwelling	Proposed Use: Same: Two Family I remodel the bathroo second floor – replace window	m on the	Cost of Work: \$2,000.00 Fire Dept:	Approved Denied		CEO District: Inspection: Use Group: / Signature / Si
Proposed Project Description: Remodel bathroom Permit Taken By: Gayle	:		Pedestrian Activ	ities District (P.A.D.) Zoning Approve		
1. This permit application de Applicant(s) from meeting Federal Rules. 2. Building Permits do not it septic or electrial work. 3. Building permits are void within six (6) months of the False informatin may investigate informatin may investigate and stop all work. The entry certify that I am the owner of recovered to make this application as his application is issued, I certify that the enforce the provision of the code(s) against the second of the code of the code(s) against the second of the code(s) against the second of the code(s) against the code of the code(s) against the code of the code(s) against the code of the code o	g applicable State and nelude plumbing, lif work is not started the date of issuance. alidate a building scord of the named property, of authorized agent and I agree	Shoreland Wetland: Flood Zo Subdivis Site Pland Maj Date: CERTIF or that the prope to conform to	Min MM WM Cor ICATION JOSEPH WITH COR JUNE 11 2/12 JUNE 12 11 2/12 J	nis jurisdiction. In addition	Does not I Requires I Approved Approved Denied Date: and that I have been a n, if a permit for wor	at or Landmark Require Review Review w/Conditions uthorized by
GNATURE OF APPLICANT				DATE		

DATE

PHONE

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any croperty within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction:	133 York St
Total Square Footage of Proposed Structure/A Bathroom Remodel 70 5 guile	
Tax Assessor's Chart, Block & Lot	Applicant: (must be owner, lessee or buyer) Telephone:
Chart# Block# Lot#	Note Fisk Eduard 207-415-9397
100960A PHO	Address 20 Round about DR
	City, State & Zip Scur dorogh, ME 04074
Lessee/DBA	Owner: (if different from applicant) Cost of Work: \$ 2000.
Nowe RECEIVED	Name
	Address Historic Review: \$
NOV 0 2 2012	7
Dept. of Building Inspe	City, State & Zip Total Fee: \$ 40.0
City of Portland Ma	
	Funity (a) Number of Residential Units
Is property part of a subdivision?	If yes, please name
Project description: Remodel Bothroz	om (and Floor), one window Replaced
LA COUNTY	om (and Floor) , one window Replaced bing Dowble vanity and Shower/Buth combo, No Structure Email:
Contractor's name: Hoyt Hel	Email:
Address: 15 Cumbella.	ad Ade postlund, ME 04101
City, State & Zip Portland ME	Telephone: 207 - 240 - 9479
Who should we contact when the permit is read	dy: Ent Edural Telephone: 267 × 15-9397
Mailing address: 30 Kandal t	De sourborogh, ME 04074
Please submit all of the information	outlined on the applicable checklist. Failure to

Please submit all of the information outlined on the applicable 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.

and 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.

THE OTOVISIONS OF	THE COURS ADMICANCE TO THIS OCCUR.			
Signature:	Ex Sh S	Date:	11/2/12	

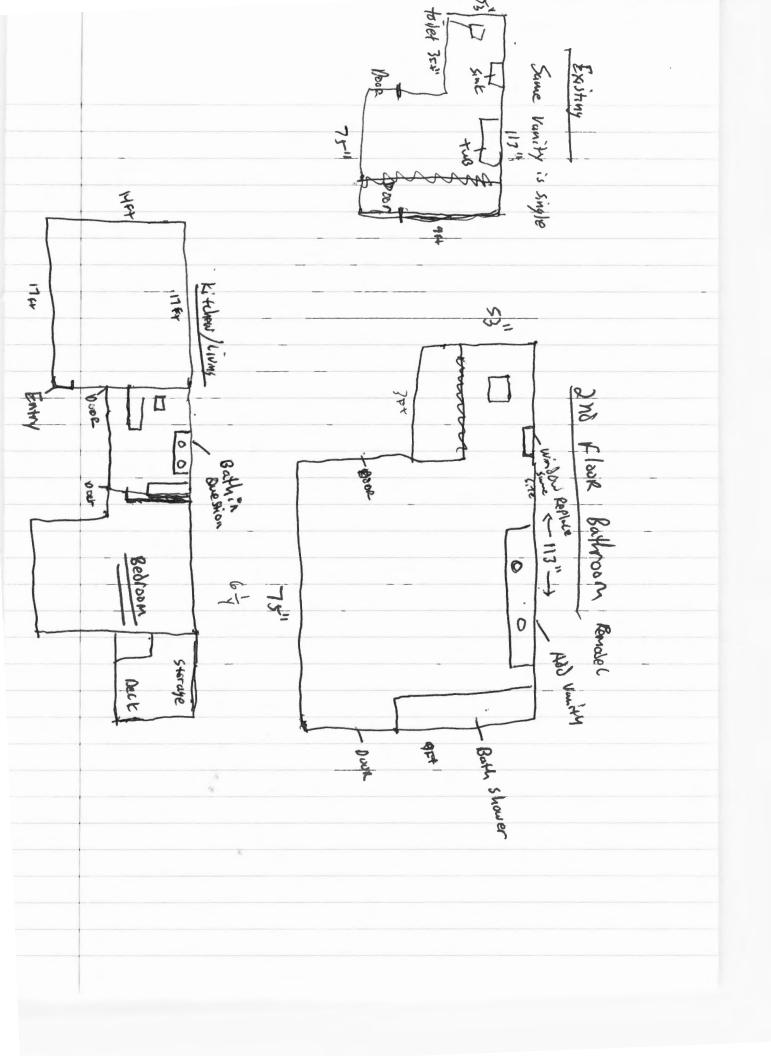
Lot

No Change in Lot 0:121 acres
5270 FL

45 45 90

48

30.35



Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Receipts Details:

Tender Information: Check, BusinessName: Visa, Check Number: 443

Tender Amount: 40.00

Receipt Header:

Cashier Id: gguertin Receipt Date: 11/2/2012 Receipt Number: 49902

Receipt Details:

Referance ID:	8634	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	40.00	Charge Amount:	40.00

Job ID: Job ID: 2012-11-5328-ALTR - Remodel bathroom

Additional Comments: Erik Edwards, 133 York St.

Thank You for your Payment!