

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 071189

PERMIT ISSUED

OCT 25 2007

This is to certify that MARQUIS LEE P & JAMES BILOD.../STBD has permission to Change of Use from Carriage house to Single Family Home - 1 bay garage AT 99 STATE ST

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.

CITY OF PORTLAND

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is occupied or enclosed-in. HEAVY 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

James M. Marilly 10/24/07 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 07-1189	Issue Date:	CBL: 045 B026004
-----------------------	-------------	---------------------

Location of Construction: 99 STATE ST	Owner Name: MARQUIS LEE P & JAMES R BIL	Owner Address: 99 STATE ST # 4	Phone:
Business Name:	Contractor Name: TBD	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	Zone: R-7

Past Use: Carriage House/ Part of Multi Condominium	Proposed Use: Single Family Home - Change of Use from Carriage House to Single Family Home - w/ 1 bay garage	Permit Fee: \$2,845.00	Cost of Work: \$275,000.00	CEO District: 2
		FIRE DEPT: N/A Single Family	INSPECTION: Use Group: E3 Type: SB IRC 2003	

Proposed Project Description:
Change of Use from Carriage House to Single Family Home - w/ 1 bay garage

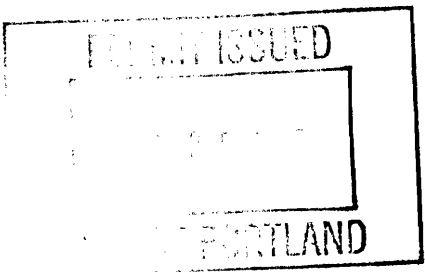
Signature:	Signature: <i>Jm</i> 10/24/07
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
Signature:	Date:

Permit Taken By: Idobson	Date Applied For: 09/25/2007
-----------------------------	---------------------------------

Zoning Approval

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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"/> Date: 10/18/07 <i>ABN</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation YES <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 10/19/07 <i>D. Anderson</i>
---	--	---



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

9/09/08 Footings for garden apron okay
to pour → ~~ATK~~
set area not required, base is
on property shown → ~~ATK~~

10/23/08 Final Insp. OK, concrete Finis/Gate not complete JLR
& Induct HVAC Condenser

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 9/23/03
 Permit # 2003-4887
 CBL# 045 8 026 001

LOCATION: 99 STATE ST ^{1ST FLOOR} **METER MAKE & #**
 CMP ACCOUNT # _____ **OWNER** Lili Richmond
 TENANT _____ **PHONE #** _____

TOTAL EACH FEE

OUTLETS	Receptacles	Switches	Smoke Detector	TOTAL EACH FEE	
	<u>2</u>			.20	
FIXTURES	Incandescent	Fluorescent	Strips	.20	
SERVICES	Overhead	Underground	TTL AMPS <800	15.00	
	Overhead	Underground	>800	25.00	
Temporary Service	Overhead	Underground	TTL AMPS	25.00	
				25.00	
METERS	(number of)			1.00	
MOTORS	(number of)			2.00	
RESID/COM	Electric units			1.00	
HEATING	oil/gas units	Interior	Exterior	5.00	
	APPLIANCES	Ranges	Cook Tops	Wall Ovens	2.00
Insta-Hot		Water heaters	Fans	2.00	
Dryers		Disposals	Dishwasher	2.00	
Compactors		Spa	Washing Machine	2.00	
Others (denote)				2.00	
MISC. (number of)		Air Cond/win			3.00
		Air Cond/cent		Pools	10.00
	HVAC	EMS	Thermostat	5.00	
	Signs			10.00	
	Alarms/res			5.00	
	Alarms/com			15.00	
	Heavy Duty(CRKT)			2.00	
	Circus/Carnv			25.00	
	Alterations			5.00	
	Fire Repairs			15.00	
E Lights			1.00		
E Generators			20.00		
<u>WATER DISTANCE</u>	<u>REPAIRS</u>				
PANELS	Service	Remote	Main	4.00	
TRANSFORMER	0-25 Kva			5.00	
	25-200 Kva			8.00	
	Over 200 Kva			10.00	
			TOTAL AMOUNT DUE		
MINIMUM FEE/COMMERCIAL 45.00			MINIMUM FEE	35.00	
				35.00	

CONTRACTORS NAME GERALD CICCARDO
 ADDRESS 40-A # SACO AVE OOB
 TELEPHONE 838 7417

MASTER LIC. # 03580
 LIMITED LIC. # _____
 DEPT. OF BUILDING INSPECTION
 CITY OF PORTLAND, ME.

SIGNATURE OF CONTRACTOR [Signature]
 caon

SEP 23 2003

White Copy - Office • Yellow Copy - Applicant

075-B-026

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation: Portland

Street Subdivision Lot #: 99 State St

PROPERTY OWNERS NAME

Last: Toothaker First: Crandall

Applicant Name: Fournier Bros.

Mailing Address of Owner/Applicant (if Different): 102 Forest Ave, Ptd

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant _____ Date _____

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature _____ Date Approved _____

DATE: 10/15/98
Date Permit issued: 10/15/98
6632 TOWN COPY
\$ 410 FEE
L.P.I. # 0124
Local Plumbing Inspector Signature

PERMIT INFORMATION

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER/MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>OR</p> <p>TRANSFER FEE [\$6.00]</p>		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
		Urinal		Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	2	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	10	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

40