

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0138	Issue Date:	CBL: 045_E005001
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Location of Construction: 110 WINTER ST	Owner Name: KEEFE JILL	Owner Address: 15 BLYTH CT	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use / Conditional Conversion	Zone: R6

Past Use: 4 Unit Residential	Proposed Use: 4 Condominiums/ Change of use to four (4) Condominiums	Permit Fee: \$900.00	Cost of Work: \$900.00	CEO District: 2
<p><i>Legal use: four (4) dwelling units</i></p>		<p>FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied</p> <p><i>TO NFPA 101 Chapter 31</i></p> <p>Signature: <i>Gregory Cross</i></p>		<p>INSPECTION: Use Group: <i>22</i> Type: <i>5</i></p> <p><i>IBC 2003</i></p> <p>Signature: <i>[Signature]</i></p>

Proposed Project Description: Change of use to four (4) Condominiums	<p>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</p> <p>Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied</p> <p>Signature: _____ Date: _____</p>
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Permit Taken By: Idobson	Date Applied For: 01/27/2006	Zoning Approval		
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>OK w/ conditions</i></p> <p>Date: <i>2/7/06 ABU</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><i>YES</i></p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied <i>Any exterior work requires a separate review!</i></p> <p>Date: <i>approved thru Historic Preservation</i></p>
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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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED
Permit Number: 060138
FEB 24 2006
CITY OF PORTLAND

This is to certify that KEEFE JILL
has permission to Change of use to four (4) Condominium
AT 110 WINTER ST 045 E005001

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 when permission is procured before this building or part thereof is leased 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. Greg Cross 2-21-06
Health Dept.
Appeal Board
Other Department Name

Handwritten signature and date 2/24/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 110 WINTER ST

CBL 045 E005001

Issued to **KEEFE JILL**

Date of Issue 05/04/2006

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 06-0138, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Unit # 2, 1st floor

APPROVED OCCUPANCY

Residential Condominium
Use Group R2
Type 5B

Limiting Conditions:

This permit does not certify building code compliance, simply a change in the form of ownership. This is temporary until June 19, 2006 for completion of the steps as approved on permit # 05-1285

This certificate supersedes certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.



CITY OF PORTLAND, MAINE
Department of Building Inspection

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PORTION OF BUILDING OR PREMISES

Unit # 1, 1st floor

APPROVED OCCUPANCY

Residential Condominium
Use Group R2
Type 5B

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Department of Building Inspection

Certificate of Occupancy

LOCATION 110 WINTER ST CBL 045 E005001

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Date of Issue 01/18/2007

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PORTION OF BUILDING OR PREMISES
Unit # 4, 2nd floor front and 3rd floor

APPROVED OCCUPANCY
Residential Condominium Unit
Use Group R2
Type 5B

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PORTION OF BUILDING OR PREMISES
Unit # 3, 2nd floor

APPROVED OCCUPANCY
Residential Condominium
Use Group R2
Type 5B

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PORTION OF BUILDING OR PREMISES

Unit # 3, 2nd floor rear

APPROVED OCCUPANCY

Residential Condominium Unit
Use Group R2
Type 5B

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Approved:

(Date)

Inspector

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PORTION OF BUILDING OR PREMISES

Unit # 2, 1st floor - rear

APPROVED OCCUPANCY

Residential Condominium Unit
Use Group R2
Type 5B

Limiting Conditions:

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Approved:

(Date)

Inspector

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PORTION OF BUILDING OR PREMISES

Unit # 1, 1st floor - front

APPROVED OCCUPANCY

Residential Condominium Unit
Use Group R2
Type 5B

Limiting Conditions:

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This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

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PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

PROPERTY OWNERS NAME

Last: Leone First: John

Applicant Name: John S. Leone

Mailing Address of Owner/Applicant (If Different): PO Box 215 Yorkville

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

Date Permit Issued	<u>2/17/06</u>	FEE	<u>124.00</u>	<input type="checkbox"/> Double Fee Charged
Local Plumbing Inspector Signature	<u>John M. Malby</u>		L.P.I. #	<u>0744</u>

045 E 003

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

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>M5547A</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
OR HOOK-UP: to an existing subsurface wastewater disposal system. OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		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

ELECTRICAL PERMIT

City of Portland, Me.



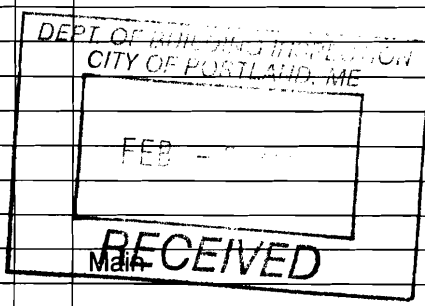
To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 2/2/06
 Permit # 064091
 CBL# 45E005

LOCATION: 110 Winter St. Unit # 4 METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Jill Keefe
 TENANT _____ PHONE # _____

TOTAL EACH FEE

OUTLETS	<u>10</u>	Receptacles	<u>5</u>	Switches	<u>3</u>	Smoke Detector	.20	<u>3.60</u>
FIXTURES	<u>4</u>	Incandescent		Fluorescent		Strips	.20	<u>.80</u>
SERVICES		Overhead		Underground		TTL AMPS <800	15.00	
		Overhead		Underground		TTL AMPS >800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS	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	<u>1</u>	Ranges		Cook Tops		Wall Ovens	2.00	<u>2.00</u>
		Insta-Hot		Water heaters		Fans	2.00	<u>2.00</u>
		Dryers		Disposals	<u>1</u>	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	
PANELS		Service		Remote			4.00	
TRANSFORMER		0-25 Kva					5.00	
		25-200 Kva					8.00	
		Over 200 Kva					10.00	
		MINIMUM FEE/COMMERCIAL 45.00		MINIMUM FEE		35.00		<u>45.-</u>



CONTRACTORS NAME MJR Electric MASTER LIC. # MS60015748
 ADDRESS PO Box 7312 Portland 04112 LIMITED LIC. # _____
 TELEPHONE 831-9387

SIGNATURE OF CONTRACTOR [Signature] ✓ # 1221