Form # P 04

Fire Dept. Orea

Department Name

Health Dept. Appeal Board Other __

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

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Ci'	TY OF PORT	LAND	
Please Read Application And		LION	
Notes, If Any, Attached	PERMIT	Permit Nur	mber: 080022
This is to contifue their			PERMIT ISSUED
This is to certify thatPLYMALE BRETT /Pc	ortlan enovati		
has permission toInterior Renovations to	the the		JAN 1 7 2008
AT 165 BRACKETT ST		L 045 E033001	
provided that the person or perso	The state of the s	epting this permi	t shall comply with
of the provisions of the Statutes the construction, maintenance ar			e application on file
this department.	id de Or buildings and st	tures, and or the	e application on the
Apply to Public Works for street line		ust A certifica	ato of accumous and b
and grade if nature of work requires	gill and writin permis in problems be this to ding or the the		ate of occupancy must be by owner before this build
such information.	land or of the closed- H R NOTICE IS REQUIRED	in. ing or part	t thereof is occupied.
OTHER RECHIRED ARREDOVALS			7

PENALTY FOR REMOVING THIS CARD

rector - guilding & Inspection Services

CBL: Permit No: Date Applied For: City of Portland, Maine - Building or Use Permit 08-0022 01/07/2008 045 E033001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Phone: Owner Address: 165 BRACKETT ST PLYMALE BRETT 274 CONCORD ST W () 776-8962 **Business Name:** Contractor Name: Contractor Address: Phone Portland Renovations 107 Anderson Street Portland (207) 712-3590 Lessee/Buver's Name Phone: Permit Type: Alterations - Multi Family Proposed Use: **Proposed Project Description:** Three family -Third Floor - Interior Renovations Interior Renovations to the third floor **Dept:** Zoning Reviewer: Marge Schmuckal **Approval Date:** 01/08/2008 **Status:** Approved with Conditions Ok to Issue: Note: 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that 2) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District. 3) Separate permits shall be required for future decks, sheds, pools, and/or garages. 4) This property shall remain a three (3) family dwelling. Any change of use shall require a separate permit application for review and approval. 5) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals. Dept: Building **Status:** Approved with Conditions Reviewer: Tammy Munson **Approval Date:** 01/14/2008 Ok to Issue: Note: 1) Separate permits are required for any electrical, plumbing, or HVAC systems.

2) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials,

Reviewer: Capt Greg Cass

Approval Date:

01/09/2008

Ok to Issue:

Separate plans may need to be submitted for approval as a part of this process.

Status: Approved with Conditions

and recessed lighting/vent fixtures shall not reduce the required rating.

1) All construction shall comply with NFPA 101

Dept: Fire

Note:

389 Congress Street, 041		7, 1 421. (207) 67 1 6				Phone:		
Location of Construction:	Owner Name:				Owner Address:			
165 BRACKETT ST	PLYMALE B			CONCORD S	T W	776-8962		
Business Name:	Contractor Name:		Conti	ractor Address:	Phone			
	Portland Renovations		107	Anderson Stre	et Portland	2077123590		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:		
			Alt	erations - Mult	i Family	B-		
Past Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work: CEO District: (A				
· · · · · · · · · · · · · · · · · · ·		-Third Floor - Interio	r	\$270.00	$00 \mid 2 \mid R$			
				E DEPT:	SPECTION:			
				. ;	Denied Us	se Group: \mathcal{L} - \mathcal{Z} . Type: \leq		
4 . 0 -	$\alpha \uparrow \alpha$				20.20	see Group: R-Z. Type: S		
legAl use - Three family			1	5 NH	101	TBC 2005		
Proposed Project Description:			TO NEPA 101			11		
Interior Renovations to the third floor			Signature: Signature: Signature:					
		PEDI	ESTRIAN ACTIV	CT (P.A.D.)				
			Actio	on: Approve	ed Approve	ed w/Conditions Denied		
			Signature:			20110		
						Date:		
Permit Taken By:	Date Applied For:		Zoning Approval					
lmd	01/07/2008							
 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 		Special Zone or Re	views	Variance Miscellaneous Conditional Use		Historic Preservation		
		Shoreland				Not in District or Landr		
		Wetland				Does Not Require Revie		
		Flood Zone						
within six (6) months of								
False information may invalidate a building permit and stop all work		Subdivision		Interpretation		Approved		
		j						
		Site Plan		Approved	1	Approved w/Conditions		
Programme Commission (Commission Commission	7 p. 1 , 1 1 1 2 2 2			,		•		
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have been authorized by thurisdiction. In addition, if								
shall have the authority to e								
such permit.	an arous severed by si	porint at any rea	JAMOIO I	to official	. ene provision	and dode(o) applicable		
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SIGNATURE OF APPLICANT	ADDRES				DATE	PHONE		

DATE

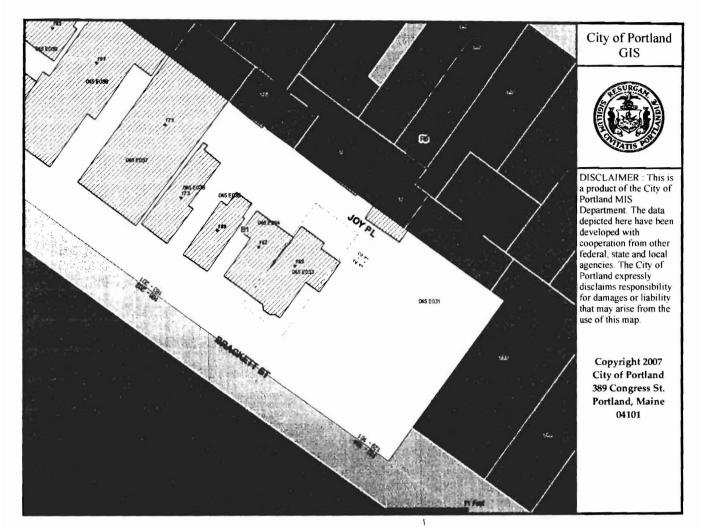
PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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: 165	BRACKETT ST. #3, POPTLAN	0
Total Square Footage of Proposed Structure/A	Area Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant *must be owner, Lessee or Buyer Name BRET PYMLE Address 274 CONGRD 87. WEST City, State & Zip POPTAND 04103	207.776.8962
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ 25,000.00 C of O Fee: \$ Total Fee: \$
If vacant, what was the previous use? Proposed Specific use: Z JFDPDDW Is property part of a subdivision? Project description: PEMOVE + CONSTRUCT NON NEW DUMB Contractor's name: POPTLAND REM City, State & Zip DOPTLAND, ME Who should we contact when the permit is rea Mailing address: SAME	If yes, please name WHO BEMPING PARTITION ING, INSULATION, BRYWMU + WATTONS, INC. DET 04101 T	
Please submit all of the information	outlined on the applicable Checkli e automatic denial of your permit.	st. Failure to
order to be sure the City fully understands the sy request additional information prior to the is soften and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703. Creby certify that I am the Owner of record of the ret I have been authorized by the owner to make this sof this jurisdiction. In addition, if a permit for wo horized representative shall have the authority to en	isuance of a permit. For further information of ons Division on-line at www.portlandmaine.gov , where a mamed property, or that the owner of record author application as his/her authorized agent. I agree to tak described in this application is issued, I certify the service of the control of the certify the control of the certify the certification is a certification.	or to download copies of or stop by the Inspections orizes the proposed work and o conform to all applicable that the Code Official's
	permit at any reasona	
prisions of the codes applicable to this permit.	Date: 1.0708	



B-17 men, Historie Tore

389 Congress Street,	<u> </u>		, ı ax.		_=		100		M 5-350	
Location of Construction:	Paint	Owner Name:	20	YDI L		r Address:	-		Phone:	
WWiness Name:	Dirucel	Rawstron Mar		T Plymate		actor Address		TAND	Phone	
n/a		n/a	•		ı	ortland			Fuone	
Lessee/Buyer's Name		Phone:		·		t Type:			ــــــــــــــــــــــــــــــــــــــ	Zone:
n/a		n/a			Alterations - Multi Family					
				<u> </u>	Permit Fee: Cost of Work:			·k· CI	CEO District:	
		/ build decks in foot		\$4,500.0						
		prints of pre existing decks.								
						ſ	Denied	Use Group	: R-2	Type: 5/3
		7	3 legen mits purssion		Denieu				LICONED TO	
		3 legal	tuni.	3 pm 1955 Dir	ł			BOC	A FRANCISCO	mer g
Proposed Project Description	on:		_						MATHREUDIN	
Build Decks					Signat			distraction	1111	
					PEDE	STRIAN ACT	IVITIES DIS	TRICT (P.A	Diff.	
					Action	n: Appro	oved Ap	proved w/Co	nditions	Denied
					Signa	ture:		D	ate:	
Permit Taken By:	Date A	Applied For:				Zoning	g Approva	 al		
gg	09/2:	5/2001				Zomi	5 rpprovi	10 v 41		
1. This permit application	ation does not	preclude the	Spe	cial Zone or Revi	ews Zoning Appeal				Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work.		☐ Shoreland ☐ Variance ☐ Wetland ☐ Miscelland			ce	☐ Not in District or Landman				
					Miscellaneous			Does Not Require Review		
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		☐ Flood Zone			Conditional Use			Requires Rev	view	
		☐ Su	bdivision	Interpretation				Approved		
			☐ Si	e Plan		Approv	ved .	×	Approved w/	Conditions
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			C	ERTIFICATI	ON					
I hereby certify that I and I have been authorized burisdiction. In addition shall have the authority such permit.	by the owner to	o make this appli or work described	cation a	as his authorize application is is	d agen	t and I agree I certify that	to conform the code of	to all app ficial's aut	licable laws horized repi	of this esentative
SIGNATURE OF APPLICA	NT			ADDRES	SS DATE			<u> </u>	PHONE	
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE PHONE					

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY)

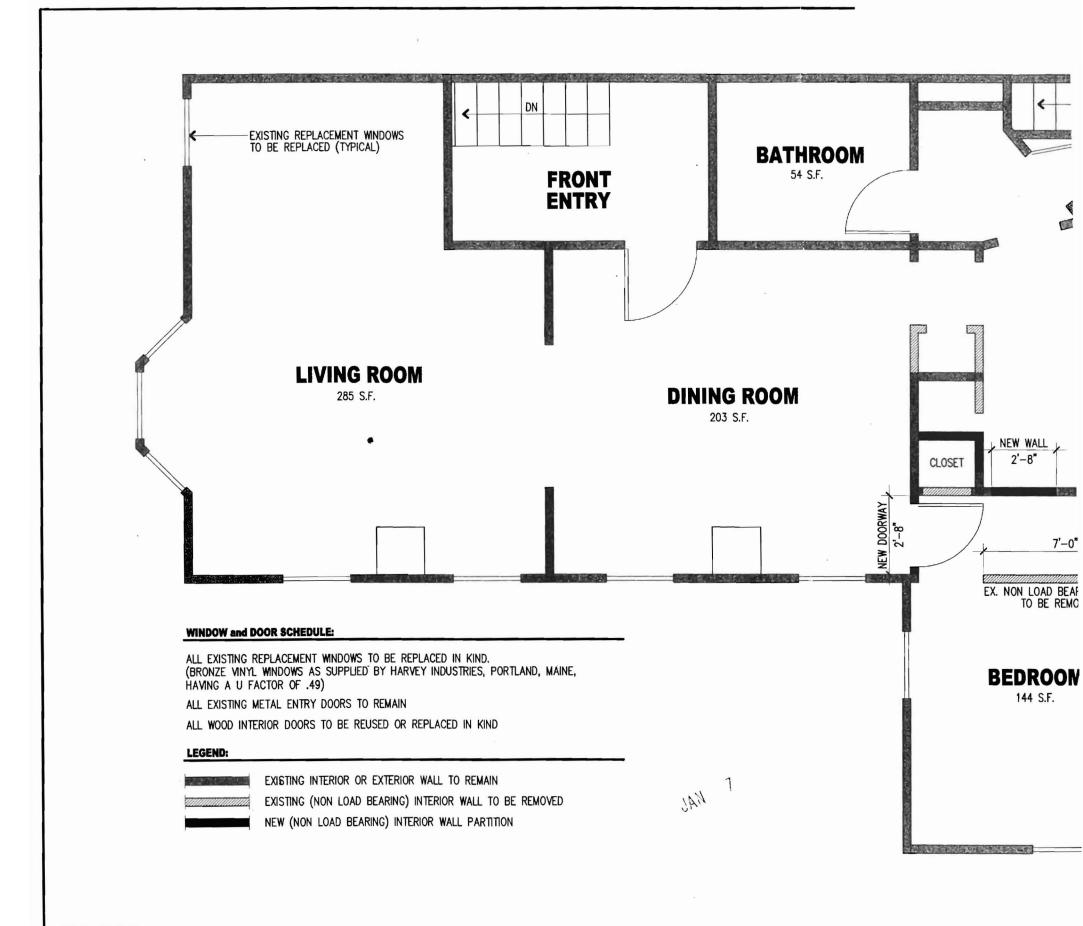
to schedule your inspections as agreed upon

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.						
MA Footing/Building Location Inspec	tion: Prior to pouring concrete					
Re-Bar Schedule Inspection:	Prior to pouring concrete					
Manual Inspection:	Prior to placing ANY backfill					
Framing/Rough Plumbing/Electri	cal: Prior to any insulating or drywalling					
Prior to any occupancy of the structure 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 any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.						
CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED						
Signature of Applicant/Designee Signature of Inspections Official						



PLAN

SCALE: 1/4" = 1'-0"

