

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

 Permit Number: 071177
 OCT - 5 2007

CITY OF PORTLAND

This is to certify that PECK CLIFFORD ROBERT Robert B

has permission to Adding 2nd means of egress

AT 27 DEERING ST

046 A013004

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 written permission procured before this building or part thereof is entered or closed-in. HOURS 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. *M. Smith 10/2/07*

Health Dept.

Appeal Board

Other

Department Name

James Bonke 10/5/07
 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

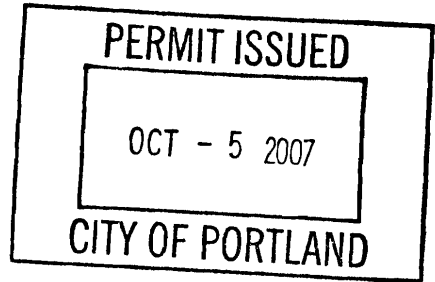
Permit No: 07-1177	Issue Date:	CBL: 046 A013004
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Location of Construction: 27 DEERING ST	Owner Name: PECK CLIFFORD ROBERT	Owner Address: 27 DEERING ST # 4	Phone:
Business Name:	Contractor Name: Robert Burkhardt	Contractor Address: 20 Haskell Street Portland	Phone 2077738736
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Single Family	Zone: R6

Past Use: Single Family - residential condo legal use: 4 residential condominiums	Proposed Use: Single Family Adding 2nd means of egress residential condo (connected to permit 06-1343)	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 2
Proposed Project Description: Adding 2nd means of egress - instead of installing sprinkler system.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See conditions</i>	INSPECTION: Use Group: R2 Type: SB IBC/IRC 2003	
		Signature: <i>M. Martin 10/2/07</i>	Signature: <i>JMB 10/5/07</i>	
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: dmartin	Date Applied For: 09/21/2007	Zoning Approval		
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<ol style="list-style-type: none"> 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 checked="" type="checkbox"/> MM <input type="checkbox"/> Date: 10/1/07 <i>BM</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input 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 type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Any exterior work requires a separate review approval thru Historic Preservation
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 07-1177	Date Applied For: 09/21/2007	CBL: 046 A013004
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Location of Construction: 27 DEERING ST	Owner Name: PECK CLIFFORD ROBERT	Owner Address: 27 DEERING ST # 4	Phone:
Business Name:	Contractor Name: Robert Burkhardt	Contractor Address: 20 Haskell Street Portland	Phone: (207) 773-8736
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Multifamily	

Proposed Use: Four residential Condos - unit 4 - Adding 2nd means of egress instead of installing sprinkler system (amendment to permit 06-1343)	Proposed Project Description: Adding 2nd means of egress instead of installing sprinkler system
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 10/01/2007

Note:**Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) This property shall remain as four residential condominiums. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 10/04/2007

Note:**Ok to Issue:**

- 1) All conditions of previous permit shall be met. The spiral staircase will act as the 2nd means of egress from the 4th floor in lieu of the sprinkler system, with a door separating the 2 stairwells. *Spiral must meet IRC 2003*

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Deputy Chief Shutts **Approval Date:** 10/02/2007

Note:**Ok to Issue:**

- 1) All construction shall comply with NFPA 101



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: <u>27 Deering St. #4 Portland, ME 04101</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot <u>X</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>046 A013004</u>	Applicant * must be owner, Lessee or Buyer* Name <u>Clifford R. Peck</u> Address <u>27 Deering St, #4</u> City, State & Zip <u>Portland, ME 04101</u>	Telephone: <u>(419) 619-8935</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>0</u> C of O Fee: \$ <u>N/A</u> Total Fee: \$ <u>30</u>
Current legal use (i.e. single family) <u>Single family - 4th unit in 4 residential condos</u> If vacant, what was the previous use? <u>N/A</u> Proposed Specific use: <u>residential</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>AMEND PERMIT # 06-1343</u> <u>Adding 2nd mode of egress from floor 4 (Attic) to floor 3 (Main floor) via spiral staircase. Am no longer considering sprinkler system</u>		
Contractor's name: <u>Robert Burkhardt</u> Address: <u>20 Haskell St</u> City, State & Zip <u>Portland, ME 04103</u> Telephone: <u>(207) 773-8736</u> Who should we contact when the permit is ready: <u>Clifford R. Peck, MD</u> Telephone: <u>(419) 619-8935</u> Mailing address: <u>27 Deering St #4 Portland, ME 04101</u>		

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.

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.

Signature: <u>[Signature]</u>	DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME	Date: <u>9/21/07</u>
This is not a permit; you may not commence ANY work until the permit is issue		
SEP 1 2007 RECEIVED		
<u>CC</u>		

Accidental Anomalies, Inc.
LETTER OF TRANSMITTAL

14 Strawberry Ave.
Turner, Me. 04282
PH: (207) 966-2107
Fax: (207) 966-1252

To: Chip Peck

Date: 7/17/2007

Company:

27 Deering St
Portland, ME 04101

RE: Preliminary Install Drawings - Spiral

From: Mike Brown

E-mail: mike@accidentalanomalies.com

We are sending you herewith the following:

<input checked="" type="checkbox"/>	Shop Drawings	<input type="checkbox"/>	Contract
<input type="checkbox"/>	Samples	<input type="checkbox"/>	Application For Payment
<input type="checkbox"/>	Documents	<input type="checkbox"/>	Other

These are:

<input type="checkbox"/>	For Your Records	<input type="checkbox"/>	Approved As Noted
<input checked="" type="checkbox"/>	For Your Approval	<input type="checkbox"/>	Returned For Corrections
<input type="checkbox"/>	For Your Use	<input type="checkbox"/>	Disapproved

Please return 1 copy to us as soon as possible for:

<input checked="" type="checkbox"/>	Final Approval	<input type="checkbox"/>	Our Files and Distribution
<input type="checkbox"/>	Return to Contractor	<input type="checkbox"/>	Other

COPIES	DESCRIPTION	TITLE
1 each	E1 & E2 - Spiral & Straight Stair Combo	Install Drawings

Message:

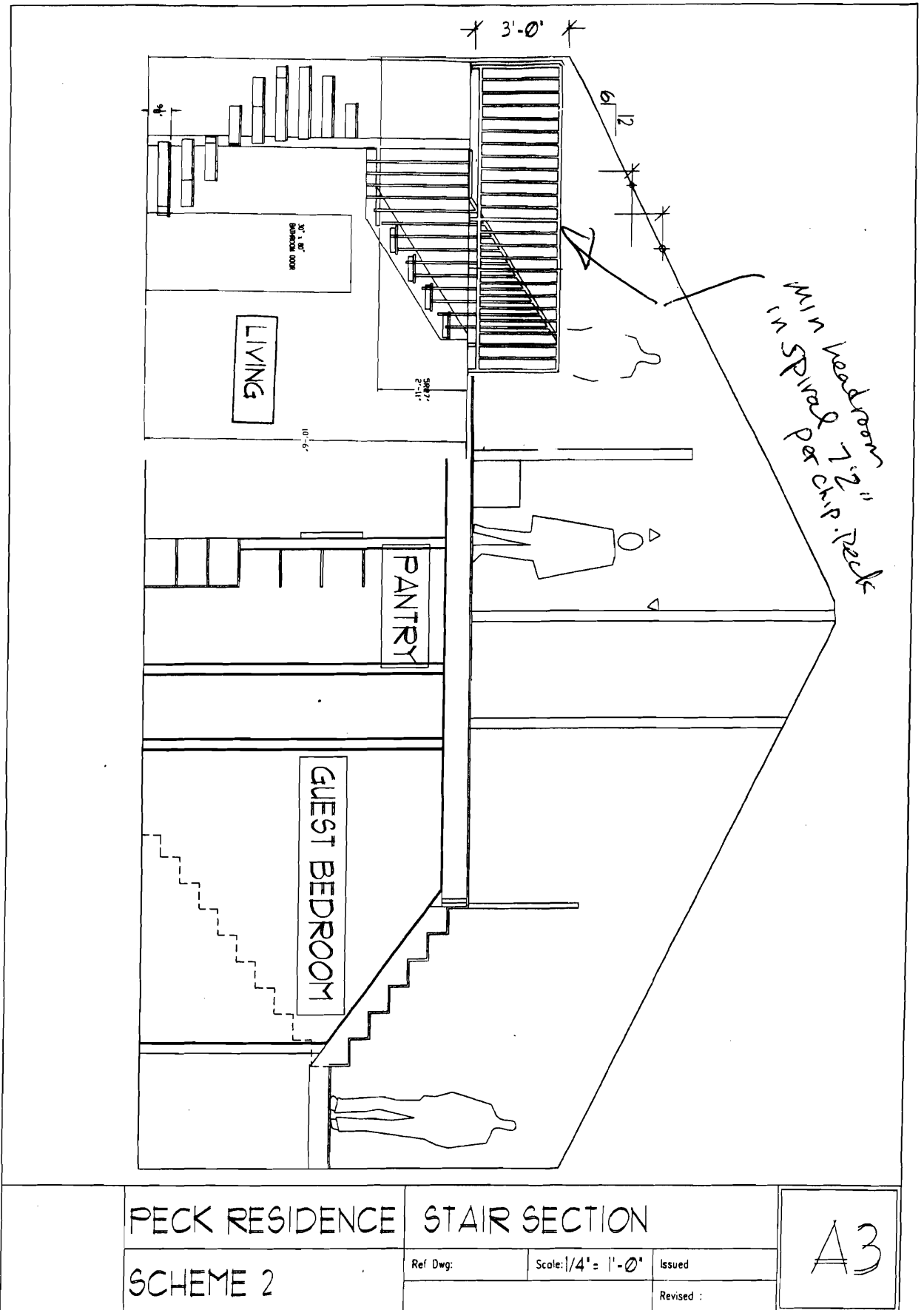
Chip,

Please review these drawings and call with any questions
Electronic copy available if you desire.

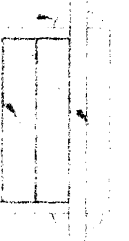
Mike Brown

Accidental Anomalies, Inc.

Quality not Quantity



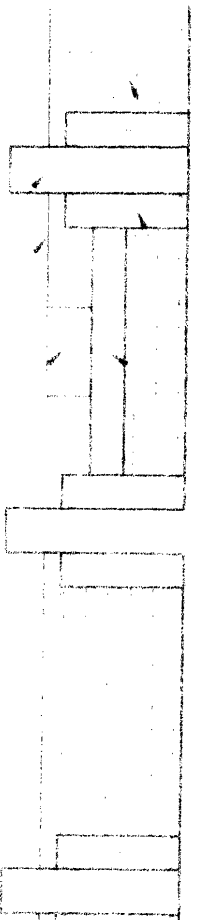
WOOD TRIM
1/2 READING



3 4

1-6-74

4 RIGID INSULATION
B. LOCKING AS REQ'D



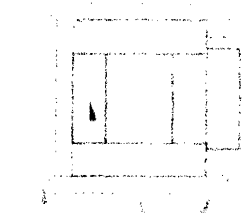
ELECTRICAL JUNCTION BOX
ELECTRICAL WIRE
WOOD CEILING
BRACING WOOD STUDS

CEILING/LIGHTING DETAIL



SCALE 1/4" = 1'-0"

12 RIGID INSULATION
12 RECESSED
TO CONTAIN
ELECTRICAL WIRE



WOOD STUDS
WOOD TRIM
1/2 READING
WOOD TRIM

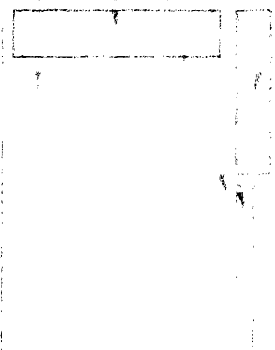
4 1/2" WALL DETAIL

12

SCALE 1/4" = 1'-0"

BRG PLASTER CEILING

WOOD STUDS
WOOD TRIM
1/2 READING
WOOD TRIM



SOFFIT DETAIL



SCALE 1/4" = 1'-0"

13 RIGID INSULATION
13 RECESSED
TO CONTAIN
ELECTRICAL WIRE

FOR CONSTRUCTION

7-11-06

House

(7x12)

SEE 3141.8.1

4x8x8 1/2x12
EPOXY ANCHORS
SET PER 11010
SEE 11001.06
COL. 3

EXEMPT FROM RETAIN

11010.1.1000.01 301.06
EXEMPT FROM RETAINING
AND RETAINING CONTRACTOR
NOT RETAINING



STRUCTURAL DETAIL

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

HEADER

4x8x8 1/2x12
EPOXY ANCHORS
SET PER 11010
SEE 11001.06

HEADER DETAIL

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

HEADER

ANCHOR

HEADER DETAIL

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

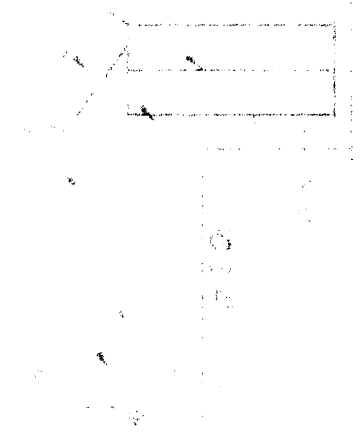
WEEK RESISTANCE STRUCTURAL DETAILS

REVISED 7-11-06

FOR CONSTRUCTION 10/15/06

15

STAIR DETAIL
ELEVATION
SEE PLAN FOR LOCATION
OF STAIRS
SEE PLAN FOR LOCATION
OF STAIRS
SEE PLAN FOR LOCATION
OF STAIRS



STAIR DETAIL

SCALE 1/8" = 1'-0"

PECK REFERENCE STAIR DETAIL

FOR CONSTRUCTION
Issued 7-1-06
Drawing

Handwritten initials or signature.

1/2" THICK
 REINFORCED
 CONCRETE
 WALK-OUT
 JACK STUDS
 1/2" THICK
 REINFORCED
 CONCRETE
 WALK-OUT
 JACK STUDS
 1/2" THICK
 REINFORCED
 CONCRETE
 WALK-OUT
 JACK STUDS

STAIR LANDING DETAIL

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

HECK RESIDENCE STAIR DETAIL

FOR CONSTRUCTION
 ISSUED: 11-11-08

EXISTING WINDOW
TO BE
REMOVED
FROM WALLING
ON
WALL
TO BE
REMOVED
FROM WALLING
ON



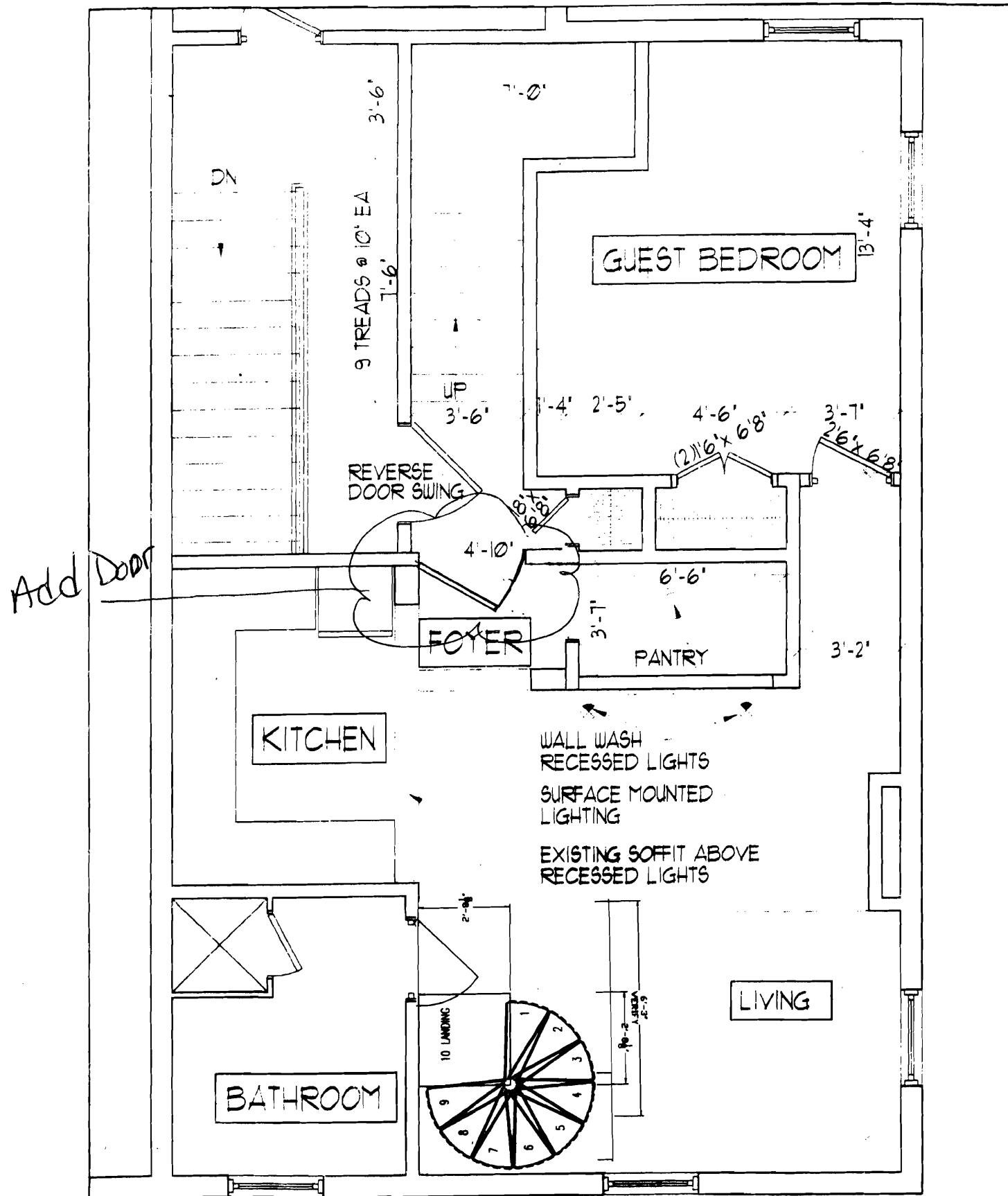
WALL TO MASONRY DETAIL

SCALE 1/4" = 1'-0"

FOR CONSTRUCTION

FOR CONSTRUCTION





PECK RESIDENCE

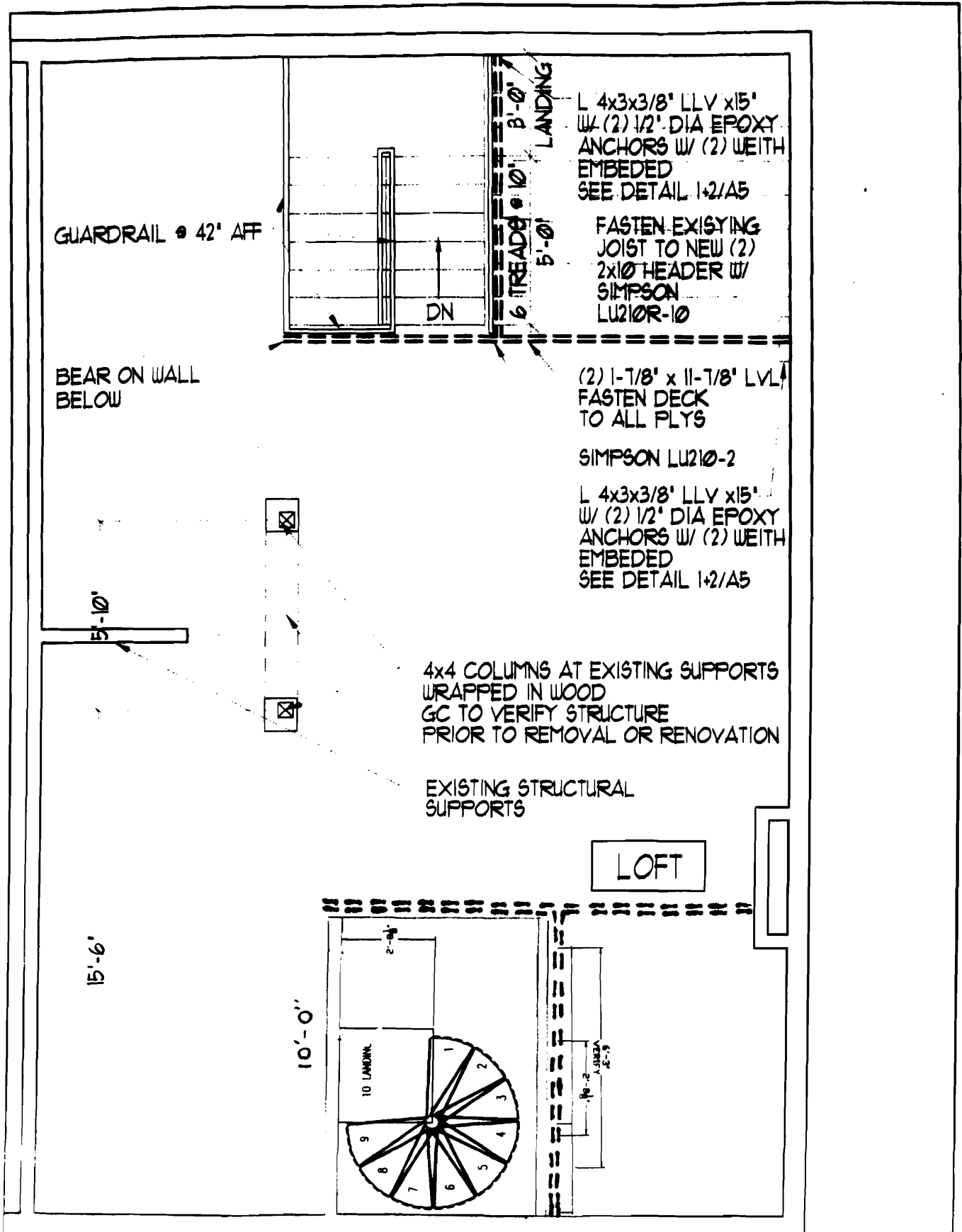
FIRST FLOOR PLAN

Ref Dwg:

Scale: 1/4" = 1'-0" Issued

Revised :

A1



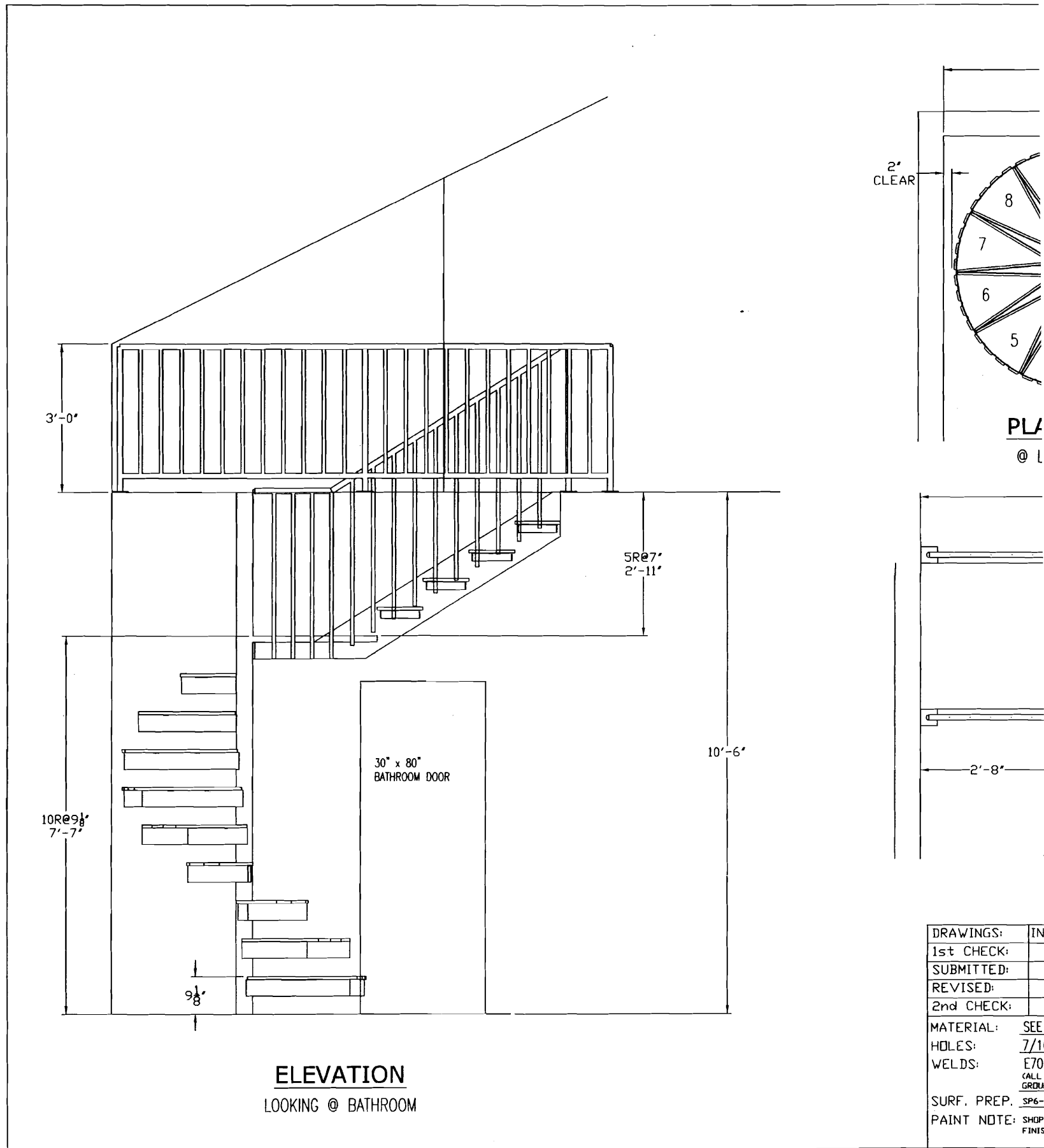
PECK RESIDENCE SECOND FLOOR PLAN

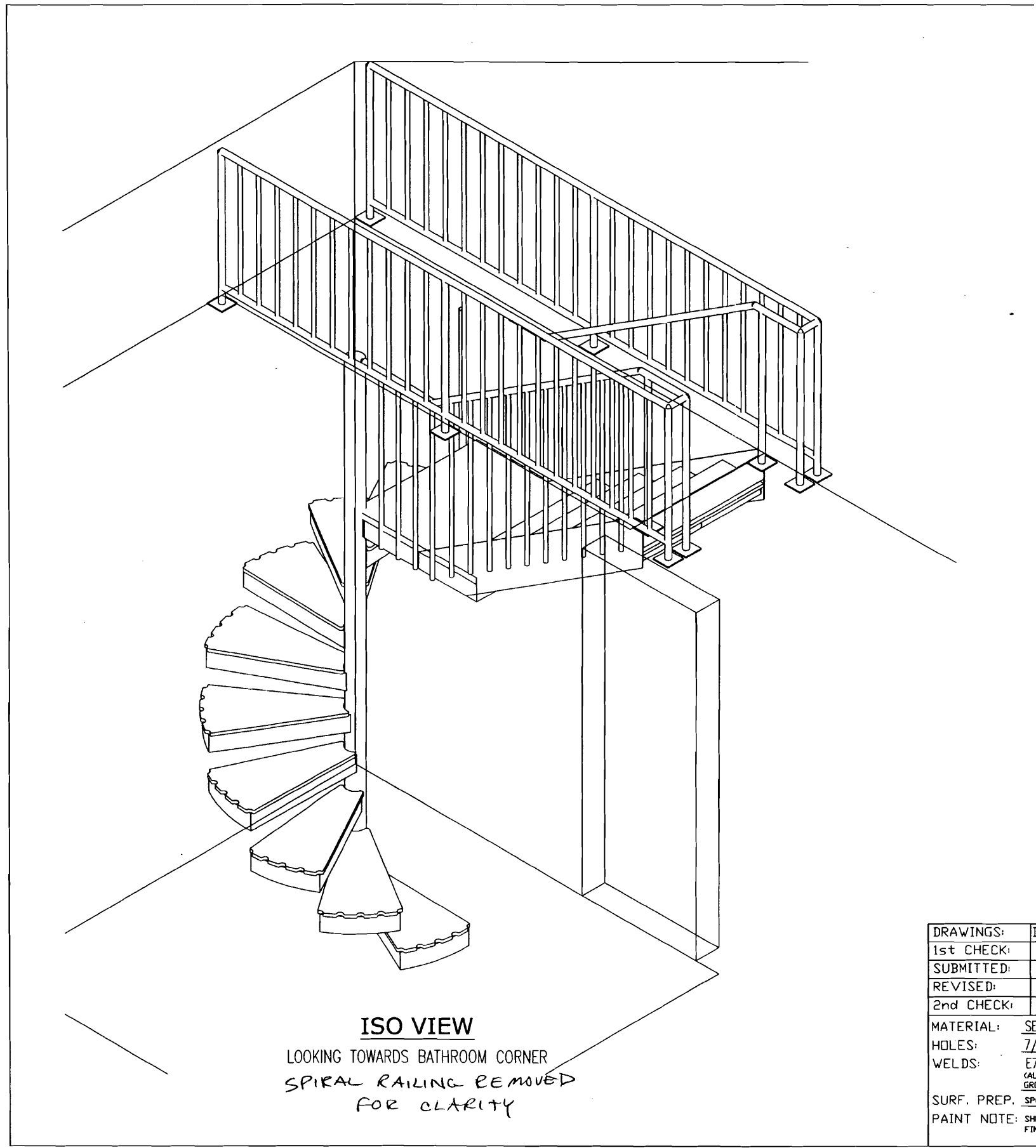
Ref. Dwg:

Scale: 1/4" = 1'-0" ISSUED

Revised

A2





ISO VIEW
LOOKING TOWARDS BATHROOM CORNER
SPIRAL RAILING REMOVED
FOR CLARITY

DRAWINGS:	II
1st CHECK:	
SUBMITTED:	
REVISED:	
2nd CHECK:	
MATERIAL:	SE
HOLES:	7/
WELDS:	E7/ CALL GRID
SURF. PREP:	SP6
PAINT NOTE:	SHD FINI