

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE

CITY OF PORTLAND

DEPARTMENT OF BUILDING INSPECTION

PERMIT

PERMIT ISSUED
DEC 23 2002
 Permit Number: 021344
CITY OF PORTLAND

Please Read
 Application And
 Notes, If Any,
 Attached

This is to certify that Taylor F William /Atlantic Kitchen Center
 has permission to Enlarging two door openings
 AT 180 High St 046 B014044

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 work on permit must be completed before this building or part thereof is closed or closed-in. **48 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. [Signature]
 Health Dept. _____
 Appeal Board _____
 Other _____
 Department Name _____

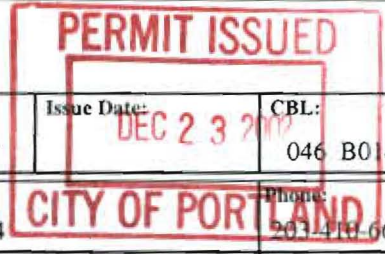
[Signature] 12/23/02
 Director - Building & Inspection Services

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: 02-1344	Issue Date: DEC 23 2002	CBL: 046 B014044
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Location of Construction: 180 High St	Owner Name: Taylor F William	Owner Address: 180 High St #44	Phone: 207-419-6647
Business Name: n/a	Contractor Name: Atlantic Kitchen Center	Contractor Address: 351 Marginal Way Portland	Phone: 2077751227
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Alterations - Multi Family	Zone: B-3

Past Use: Condominium Unit <i>Marlborough APTS</i> <i>LOCAL 36 D.U.</i>	Proposed Use: Condominium / Enlarging 2 door openings in non-load bearing wall from 36" to 57" using 4' x 8' headers. <i>NO change in number of units permitted</i>	Permit Fee: \$184.00	Cost of Work: \$22,500.00	CEO District: 2
Proposed Project Description: Enlarging two door openings.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R2</i> Type: <i>5B</i> <i>BOCA 1999</i>	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i> 12/23/02	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 12/05/2002	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 type="checkbox"/> MM <input type="checkbox"/> Date: <i>12/13/02</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 <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 Date: <i>Requires A Separate Review</i>
	<i>with conditions</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

1/2/03 - Close In on Framing & Plumb only -
headers ok - Non-beams walls -
Rough plumb ok (D)

1/3/02 - I checked the new armored cable installation
for proper Code compliance - Grounding at all boxes ok -
all spacing ok, Ropes placed properly, no crowded
boxes - In Collins out sect - Contractor has been
trying to get Close in since 12/31 - Informed MSN
of my findings - MSN advised Contractor ok to shut -
lock (D)

1/27/03 Call from Scott Blum of Owens Corning
Requests copy of Snap Rept. Advised him
of Permit & CBL # - He will come in E.P./4 (D)

All Purpose 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.

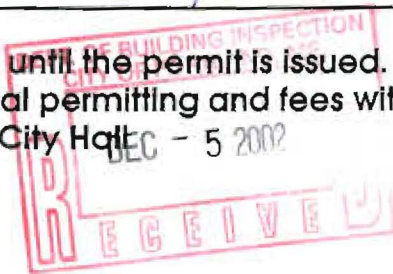
Location/Address of Construction: <u>180 High St. #44</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>046</u> Block# <u>B 014044</u> Lot#	Owner: <u>Bill + Leslie Taylor</u>	Telephone: <u>203-410-6647</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Warren S. Finnegan</u> ^{Project Manager} <u>351 Marginal Way</u> ^{Atlantic} <u>Portland, Me 04101</u> ^{Kitchen Ctr}	Cost Of Work: \$ <u>22,500</u> Fee: \$ <u>184.00</u>
Current use: <u>Residence</u>	<u>775-1227</u>	
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: <u>Remodel kitchen and Bath Enlarging two door openings in non-load bearing walls from 36" to 57" using 4x8 headers</u>		
Contractor's name, address & telephone: <u>Atlantic Kitchen Ctr. 351 Marginal Way 775-1227</u> XX		
Who should we contact when the permit is ready: <u>Warren S. Finnegan or Matt Conception</u>		
Mailing address: <u>351 Marginal Way Portland, Me 04101</u> <u>call</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>775-1227</u> XX <u>or 650-4111 cell</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant: <u>Warren S. Finnegan</u>	Date: <u>Dec. 5, 2002</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall.



Application ID Number: 2-1344

Delete Review

Save

Close

Department: Zoning

Status: Approved with Conditions

Reviewer: Marge Schmuckal

Comments: 180 High St

Approval Date: 12/13/2002

Given On Date: 12/06/2002

OK to Issue Permit

Name: Marge Schmuckal

Date: 12/13/2002

Date 2:

Conditions Section:

Add New Condition From Default List

Add New Condition

Delete Condition

This property shall remain a thirty six (36) family dwelling. Any change of use shall require a separate permit application for review and approval.

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.

ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within a designated Historic District.

Create Date: 12/06/2002

By: gg

Update Date: 12/13/2002

By: mes

Application ID Number: 2-1344

Print Permit

Delete

Save

Close

Department: Building

Status: Open

Reviewer: Jeanine Bourke

Comments:

Approval Date: 12/23/2002

Given On Date: 12/17/2002

OK to Issue Permit Name: Jeanine Bourke Date: 12/23/2002 Date 2:

Conditions Section:

Add New Condition Fram Add New Condition Delete Condition

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

Separate permits are required for any electrical or plumbing work.

If the opening does span a load bearing wall, the work cannot continue until information is submitted to this office for a load bearing situation.

Create Date: 12/06/2002 By: jgg Update Date: 12/23/2002 By: jimb

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or ~~874-8693~~ 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.

JB **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

NA **Footing/Building Location Inspection:** Prior to pouring concrete

NA **Re-Bar Schedule Inspection:** Prior to pouring concrete

NA **Foundation Inspection:** Prior to placing ANY backfill

Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling

Final/~~Certificate of Occupancy~~: Prior to any occupancy of the structure or 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.

NA **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

Janice Bonte
Signature of applicant/designee
Janice Bonte
Signature of Inspections Official

Date
12/23/02
Date

CBL: 46-B-14 Building Permit #: 02-1344

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 12-4-02
 Permit # 2002-5006
 CBL# 046 B 014044

LOCATION: 180 HIGHST #44 METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Bill Taylor
 TENANT _____ PHONE # _____

							TOTAL EACH FEE		
OUTLETS	10	Receptacles	5	Switches	Smoke Detector		.20	3.00	
FIXTURES	10	Incandescent		Fluorescent	Strips		.20	2.00	
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			
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 Richard Lothman MASTER LIC. # 3245
 ADDRESS 61 Russell Ave Auburn LIMITED LIC. # _____
 TELEPHONE 207 7771344

SIGNATURE OF CONTRACTOR [Signature]



CITY OF PORTLAND, MAINE

Department of Building Inspections

Dec. 5 2008

Received from Walter Funnegan

Location of Work 180 High #44

Cost of Construction \$ _____

Permit Fee \$ 184.00

Building (I1) Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 046 B 014 044

Check #: 2694

Total Collected \$ 184.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy

YELLOW - Office Copy

PINK - Permit Copy

May 6