Form # P 04

Fire Dept. ______
Health Dept. _____
Appeal Board _____
Other _____

Department Name

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And Notes, If Any, Attached	Y OF PORTLA PECTIO PERMIT	N	Number: 061698
This is to certify that O BACHELDER PROPER			PERMIT ISSUED
has permission to Rebuild egress in same foo AT _779 CONGRESS ST	otp t	. 047_A01500	JAN - 4 2007
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	fuline and of the first land	ces of the City	mit shall comply with all y of Portland regulating the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	fication of inspersion must be not and with an entire permit on proceeding or an entire permit of the permit of th	procure	ficate of occupancy must be ed by owner before this build-part thereof is occupied.
OTHER REQUIRED APPROVALS			1 1/2

PENALTY FOR REMOVING THIS CARD

City of Portland, M	aine - Buil	ding or Use	Permi	t Application	n Per	rmit No:	Issue Date	:	CBL:	
389 Congress Street, (•				06-1698			047 A0	15001
Location of Construction:	tion of Construction: Owner Name:							Phone:		
779 CONGRESS ST	GRESS ST O BACHELDER PROPERTIES I			OPERTIES LL	PO BOX 6636					
		Contractor Name	Contractor Name:		Contractor Address:			Phone		
		Bill Simpson			P.O.	Box 641 Fre	eeport		20786566	2078656678
		Phone:			Permit Type:				Zone:	
					Alte	erations - Dw	ellings			File
Past Use:		Proposed Use:	_	<u> </u>	Perm	nit Fee:	Cost of Wor	k:	CEO District:	
		Residential 10 unit rebuild egress in			\$30.00	\$30.00 \$700.00 2		2		
		same footpriint		FIRE DEPT: Approved IN			INSPEC	NSPECTION:		
						L		Use Gre	oup: 12-2	Type: 5
						L	_ Denied			ma 3
					See Conditions Signature Great Cars s			-	IBC 2003	
Proposed Project Descriptio	n:					C C/VG		(1
Rebuild egress in same	footprint				Signa	ture Grea	CAZS	Signatu	re:	./
Connected to	pornit 06	-0470 - lega	alizal	han of		ESTRIAN ACT		FRICT (F	P.A.D.)	$\overline{}$
Connected to Snonconforming	units 6	rab hof	10 U	iti	Actio	on: Appro	ved An	nroved w/	Conditions	Denied
,				0.				F		
	_				Signa	ature:			Date:	
Permit Taken By:		oplied For:				Zoning	g Approva	al		
dmartin		7/2006								
1. This permit applica		•	_	cial Zone or Revi			ng Appeal		Historic Pres	
Applicant(s) from r	neeting applic	cable State and	Sł	noreland	IV.	☐ Variano	ce		Not in District or Landma	
Federal Rules.				MASK BY	√ √∩					
2. Building permits do		olumbing,	🗌 w	etland place 2	Miscellaneous			Does Not Require Review		
septic or electrical	work.		Shoreland Wetland place within Flood Zone Shoreland		1,7/L	X				
3. Building permits ar			Flood Zone		, v	Conditional Use			Requires Review	
within six (6) months of the date of issuance. False information may invalidate a building										
permit and stop all	-	a building	[_] St	ıbdivision		Interpre	etation	- 1	Approved	
p				A Disa					Approved w/	(Canditions
			_ 51	te Plan		Approv	ed		Approved w/	Conditions
	a coppe a complete e transfer		Mai [Minor MM		Denied			Denied	
	1 8161Y	ISSUED	Maj	- ,		Beined			Arm	
i	,			ulconditions		Data				
		. 559	Date:	ISTATOR MAN	·	Date:			ate:	
	-	1.337	ľ							
	۲.	TAMD								
	L :	·								
			(CERTIFICATI	ON					
I hereby certify that I am	the owner of	record of the na	med pro	operty, or that t	ne pro	posed work i	s authorized	l by the	owner of recor	rd and that
I have been authorized b	y the owner to	make this appl	ication	as his authorize	d agen	rt and I agree	to conform	to all ap	oplicable laws	of this
jurisdiction. In addition.										
shall have the authority t	o enter all are	as covered by si	ich peri	nit at any reaso	nable	hour to enfor	ce the prov	ision of	the code(s) ap	plicable to
such permit.										
SIGNATURE OF APPLICAN	T			ADDRES	s		DATE		PHO)NE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK TITLE					DATE	 -	PHO)NE
THUOM IN	CILL MODE OF 1	· ~ ,					PATE		1110	

City of Portland, N	Iaine - Bui	lding or Use Permit		Permit No:	Date Applied For:	CBL:
•		(207) 874-8703, Fax: (6 06-1698	11/27/2006	047 A015001
Location of Construction:		Owner Name:		Owner Address:		Phone:
779 CONGRESS ST		O BACHELDER PRO	PERTIES LL	PO BOX 6636		
Business Name:		Contractor Name:		Contractor Address:	Phone	
		Bill Simpson		P.O. Box 641 Free	(207) 865-6678	
Lessee/Buyer's Name		Phone:		Permit Type:		
				Alterations - Dwe	ellings	
Proposed Use:			'	ed Project Description		
Residential 10 unit rebu	ild egress in	same footpriint	Rebu	ild egress in same fo	ootprint	
Dept: Zoning		Approved with Condition		: Ann Machado	Approval I	
	onnected to p	Approved with Condition permit 06-0470 to legalize				
Note: This permit is confidence of the fire department.	connected to proment.	• •	e 5 illegal units	for a total of 10 un	its. It is a condition	
Note: This permit is confidence of the fire depa 1) This permit is being	connected to proment.	permit 06-0470 to legalize	e 5 illegal units work is taking	for a total of 10 uniplace within the ex	its. It is a condition isting footprint.	Ok to Issue: 🗹
Note: This permit is confidence of the fire depart 1) This permit is being 2) This permit is being	connected to priment. It issued with the approved on	he understanding that the	e 5 illegal units work is taking	for a total of 10 uniplace within the ex	its. It is a condition isting footprint. a separate approval	Ok to Issue:
Note: This permit is confidence of the fire depa 1) This permit is being work.	connected to priment. It issued with the approved on	he understanding that the the basis of plans submit	e 5 illegal units work is taking	for a total of 10 unplace within the exactions shall require a	its. It is a condition isting footprint. a separate approval	Ok to Issue:
Note: This permit is confidence of the fire depa 1) This permit is being work. Dept: Building Note:	connected to priment. It issued with the proved on Status: A	he understanding that the the basis of plans submit	e 5 illegal units work is taking	for a total of 10 unplace within the exactions shall require a	its. It is a condition isting footprint. a separate approval	Ok to Issue: before starting that Date: 01/03/2007
Note: This permit is confidence of the fire depa 1) This permit is being work. Dept: Building Note: 1) The sauna tube mus 2) Guards must be 42 in	connected to priment. It issued with the sapproved on the sapproved of the sapproved to the	he understanding that the the basis of plans submit	e 5 illegal units work is taking ted. Any devia Reviewer a 4 inches. Gra	for a total of 10 unit place within the exactions shall require at Tammy Munson	its. It is a condition isting footprint. a separate approval Approval I	Ok to Issue: before starting that Date: 01/03/2007 Ok to Issue:
Note: This permit is confidence of the fire depa 1) This permit is being work. Dept: Building Note: 1) The sauna tube mus 2) Guards must be 42 in	connected to priment. It is sued with the sapproved on the same status: It be 48" below inches in height shall not be learned.	he understanding that the the basis of plans submit Approved with Condition w grade.	work is taking ted. Any deviated. Reviewer at 4 inches. Grashall not be mo	for a total of 10 unit place within the exactions shall require at Tammy Munson	its. It is a condition isting footprint. a separate approval Approval I	Ok to Issue: before starting that Date: 01/03/2007 Ok to Issue: des of the stair
Note: This permit is confithe fire depa 1) This permit is being 2) This permit is being work. Dept: Building Note: 1) The sauna tube mus 2) Guards must be 42 in guard. Stair treads	connected to priment. It is sued with the sapproved on the same status: It be 48" below inches in height shall not be learned.	he understanding that the the basis of plans submit Approved with Condition w grade. the with openings less that sess than 11". Stair risers	work is taking ted. Any deviated. Reviewer at 4 inches. Grashall not be mo	for a total of 10 unplace within the exations shall require at Tammy Munson spable rails must be re than 7".	its. It is a condition isting footprint. a separate approval Approval I	Ok to Issue: before starting that Date: 01/03/2007 Ok to Issue: des of the stair
Note: This permit is confit the fire depa 1) This permit is being work. Dept: Building Note: 1) The sauna tube mus 2) Guards must be 42 in guard. Stair treads Dept: Fire	sonnected to priment. It issued with the sapproved on Status: And the same shall not be less than the same shall not be less	he understanding that the the basis of plans submit Approved with Condition w grade. the with openings less that sess than 11". Stair risers approved with Condition	work is taking ted. Any deviated. Reviewer at 4 inches. Grashall not be mo	for a total of 10 unplace within the exations shall require at Tammy Munson spable rails must be re than 7".	its. It is a condition isting footprint. a separate approval Approval I	Ok to Issue: before starting that Date: 01/03/2007 Ok to Issue: des of the stair Date: 12/05/2006

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.

	9-781 Conbress St.					
Total Square Footage of Proposed Structure EXTENIOR STAIRS FOR 200	Square Footage of Lot /	/				
EXIGURX STRIPS POR 2-	EGRECES 5760 # +	_				
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:				
Chart# Block# Lot#	William Simpon	874-0700				
47 A 15	WIMAM SIMPSH 8 14-3 788					
Lessee/Buyer's Name (If Applicable)	TI , _ I I	Cost Of Work: \$ 760.				
`.	Bill Simpon P.O. Bix 641	work: \$				
	PO. 34x 641	Fee: \$ 30				
	Freeports ME04032	C of O Fee: \$				
Current Specific use: 2 PD EGIZES						
If vacant, what was the previous use?						
Proposed Specific use:	.0					
Project description: Requested 2"	_	b				
PORTLAND FIRE DÉPAREMENT. SAME LOOKSLIKE						
	DEPT	OF BUILDING INSPECTION				
Contractor's name, address & telephone:		OTY OF PORTLAND, ME				
Who should we contact when the permit is read	y: Kill Jimpin	NOV 4 7 2000				
Mailing address: Phone: 874-6700 NOV 2000						
P.6 BX 641						
Freeport, ME 04032 RECEIVED						
Please submit all of the information outlined in the Commercial Application 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 visit us on-line at						
www.portlandmaine.gov, stop by the Building Inspec	ctions office, room 315 City Hall or call 874-8703.					
		i e				
I hereby certify that I am the Owner of record of the name	d property, or that the owner of record authorizes the p	proposed work and that I have				

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.

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.

This is not a permit; you may not commence ANY work until the permit is issued.

MORE STAR DETAIL BILL SIMPSON 779-781 GHERESS FRAMINE - 6" LAG BORTS INTO ANASOWARY WALL @ 16" of 1 W.DT# LANDING ZX8" FRAMING 5'X4' LANDING -COVERED /
WITH 5/1" X6"
PT. DECKING (3) 2"K12" STRINGERS ie E

KIAND RKIL AND RETURNS

.TS 22543NOD

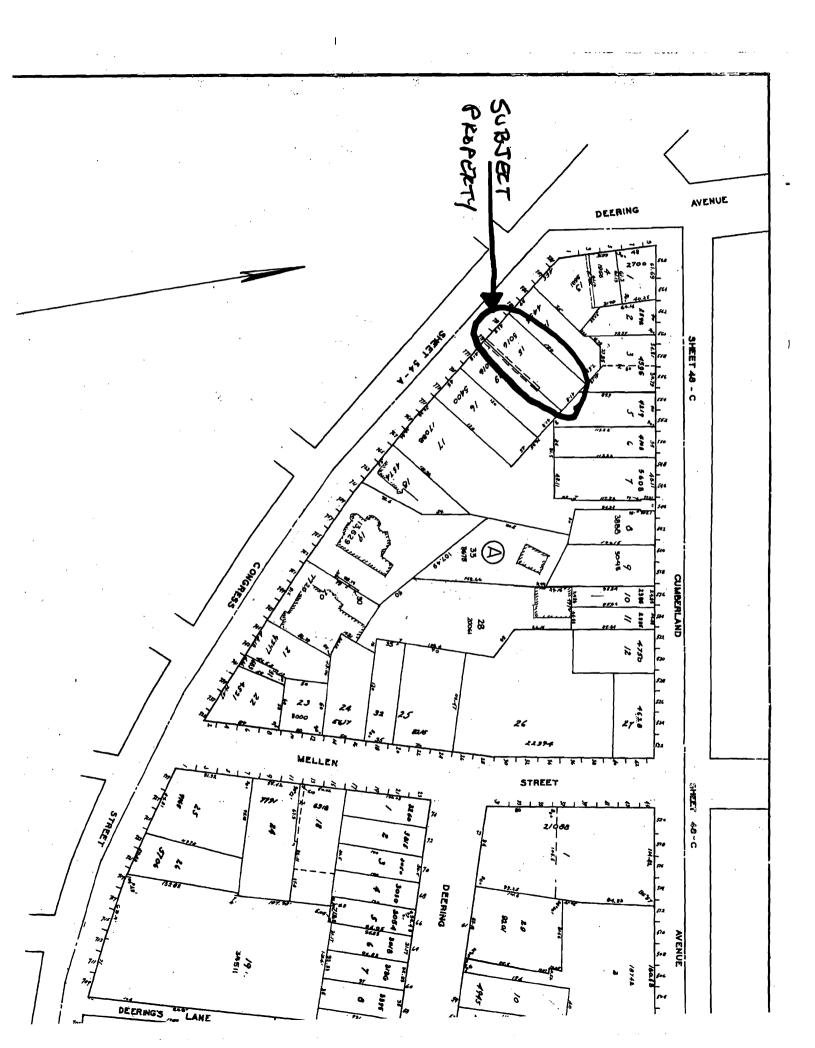
186#

BLL#

CURB

15 (2372)NO)

558719HOD



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.

A Pre-construction Meeting will take place	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electri	ical: 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 you if your project requires a Certificate of inspection If any of the inspections do not ocphase, REGARDLESS OF THE NOTICE	Occupancy. All projects DO require a final cur, the project cannot go on to the next
CERIFICATE OF OCCUPANIC BEFORE THE SPACE MAY BE OCCUPANIC Signature of Applicant/Designee	ES MUST BE ISSUED AND PAID FOR, PIED Date
Signature of Inspections Official	Date Date
CBL: 64 A 015 Building Permit	