

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:		Owner: <i>8711-1901</i>	Phone: _____	Permit No: 991091
Owner Address:		Lessee/Buyer's Name:	Business Name:	
Contractor Name:		Address: <i>178 Roosevelt Trail, Portland, ME 04101</i>		Permit Issued: OCT 1 1999 CITY OF PORTLAND
Past Use:		Proposed Use: <i>Residential</i>	Phone: <i>207-891-9411</i>	
Proposed Project Description: <i>Convert 1 1/2 floors. Convert 1/2 from commercial to single family.</i>		COST OF WORK: \$ <i>40,000</i>	PERMIT FEE: \$ <i>612.00</i>	Zone: <i>CBL</i> CBL: <i>47-0-017</i>
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-3</i> Type: <i>5B</i> <i>1300945 Halper</i>	
Signature: _____		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: 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"/>
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	Signature: _____ Date: _____	
Permit Taken By: _____		Date Applied For: <i>9-17-99</i>		

- 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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: *Approved*

Approved
 Approved with Conditions
 Denied

Date: _____

CEO DISTRICT

6/1/00 - For Permit -

All Cosmetic work / no change in Stairs, handrails, windows etc. F

Problem: 2nd floor is 2nd apt w/ Ki & Bathroom -

Owner disagrees - referred owner to zoning Admin (M.S.)

6/16/00 - Note from zoning (M.S.) attached stating that Ki sink ok'd as a "Plant Potting" sink by Mark A. - Stone & Refrig. will be removed D M.N. Requires a formal report from I.I.S. or M.A. - M.S. deleted. M.A. - spoke w/MA - he will EMAIL M.N.

6/22/00 - Report from Mark A. D

OK to remove City E. zoning requirement for stone & refrig. F

12/1/00 Rejected - application for permit (to) F
Issued by D

Inspection Record

Type	Date
Foundation:	
Framing:	
Plumbing:	
Final:	
Other:	



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 38 DEERING ST 047-C-017

Issued to KERRY COURTICE

Date of Issue DECEMBER 4, 2000

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. 990191, 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

APPROVED OCCUPANCY

ENTIRE

SINGLE FAMILY

Limiting Conditions: NO COOKING, FOOD PREP, KITCHEN APPLIANCE ALLOWED OTHER THEN IN MAIN KITCHEN ON 1ST FLOOR. ONE ADDITIONAL KITCHEN "TYPE" SINK ON 3RD FLOOR TO BE USED AS A "PATTING" SINK. THIS STRUCTURE MUST REMAIN A SINGLE FAMILY IN USE AS WELL AS FACILITY.

This certificate supersedes
certificate issued

Approved:

12/4/00 *Kerry Courtice*

(Date) Inspector

[Signature]

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.

MP
12/5/00

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 38 Deering Street

PROPERTY OWNERS NAME

Last: Kerri First: Courtise

Applicant Name: Ronald M. Brown

Mailing Address of Owner/Applicant (If Different): P.O. Box 376
Cumberland, Maine 04021

PORTLAND
Date Permit Issued: 11/2/99 7064 \$ 96 TOWN COPY # Double Fee Charged FEE

Local Plumbing Inspector Signature: [Signature] L.P.I. # 01124

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 Inspector to deny a Permit.

Ronald M. Brown
Signature of Owner/Applicant

Date

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	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER — SPECIFY _____	1. <input 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>1892</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	4	Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	1	Water Heater
	Fixtures (Subtotal) Column 2		16	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			16	Total Fixtures
			\$ 6	Fixture Fee
			\$ 20.00	Transfer Fee
			\$.	Hook-Up & Relocation Fee
			\$ 116.00	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

116.00