Form # P 04	DISPLAY '	THIS C	ARD	ON	PRIN	CIPAL	FRONT	AGE	OF	WORK	
Please Read Application Ar		С		O			LAN ION	D			
Notes, If Any Attached	<i>y.</i>			Р	ERI			Pern	nit Number PERMI	TISSUED	
This is to certi	fy that <u>KURAN</u>	BARBARA	LYNN	ue Nort		tems					┦
has permissio	n toInstall a tr	ue north bas	ement i	hing sy	4 h.		_		JAN	7 2008	
AT -11-BOYN	TON ST						<u>. 053 </u>	102000	1		
provided	that the perso	n or pers	sons,	m or	-	ation	epting t	this p	erminsl	Pan comp	with all
•	visions of the				nd of th		ances of	the (City of F	ortland r	egulating
the const this depa	ruction, maint rtment.	enance a	and u	of bi	uildings	and st	tures,	and	of the a	oplication	on file in
	Public Works for sta if nature of work mation.		N gi bi la H	ication and w e this d or R NO	/i n pern t dina o	nis on pro t the alosed-	in.	proc	cured by o	of occupanc wner before reof is occup	this build-
ОТН		OVALS							$\overline{1}$		1
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								11			1
••								TT	V	\sim	
<u> </u>	Department Name							Vire	ctor - Fuilding &	nspection Services	
		F	PENALT	Y FO	R REMC	VING T	HIS CARE	> ^			

City of Portland, Maine	- Building or Use	Permit Applicatio	n Permit No:	Issue Date:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703	8, Fax: (207) 874-87	6 08-0014		053 A020001
Location of Construction:	Owner Name:		Owner Address:		Phone:
11 BOYNTON ST	KURAN BAR	BARA LYNN	11 BOYNTON ST		985-2300 128
Business Name:	Contractor Name	2:	Contractor Address:		Phone
	True North Ho	ome Systems	71 Portland Road K	ennebunk	2079852300
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:
			Alterations - Dwelli	ngs	
Past Use:	Proposed Use:		Permit Fee: C	ost of Work: C	CEO District:
Single Family Home	Single Family	Home with finished	\$90.00	\$7,000.00	2
	basement		FIRE DEPT:	pproved INSPEC	TION:
				Use Grou	пр. 2.3 туре. 2.6 - 2. С. 2. С.С. 3
			1/7		-00 2003
				T Z	KC COUL
Proposed Project Description:			$1 / \vee / /$		esd
Install a true north basement fi	inishing system.		Signature:	Signature	
			PEDESTRIAN ACTIVI	LIES DISTRICT (P.	A.Ū.)
			Action: Approved	Approved w/C	onditions Denie d
			Signature:	I	Date:
Permit Taken By:	Date Applied For:	<u></u>	Zoning A	pproval	
lmd	01/03/2008			F F	
1. This permit application do	bes not preclude the	Special Zone or Revi	ews Zoning A	Appeal	Historic Preservation
Applicant(s) from meeting Federal Rules.		🗌 Shoreland			Not in District or Landmar
		Wetland	Miscellane		Does Not Require Review
2. Building permits do not in septic or electrical work.	iciude plumoing,	Wettand	Wilscenand		
3. Building permits are void	if work is not started	🗌 Flood Zone	- Conditional	use [Requires Review
within six (6) months of the	ne date of issuance.		\sim		
False information may inv	alidate a building	🔲 Subdivision	Interpretatio	on E	Approved
permit and stop all work		/ N			
		Site Plan	Approved \		Approved w/Conditions
TRAL TRAD	ED I	, , , , , , , , , , , , , , , , , , ,			1
PERMIT ISSU	-11	Maj 🗌 Minor 🏳 MM	Denied		Denied
					11/10
INN 7 20	68	Date: 1 1 00	Date:	Date	e: 1 1 1 00
	1 1				
JAN					
CITY OF POP	TAND				1 /

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, Main	e - Building or Use Permi	t	Permit No:	Date Applied For:	CBL:
•	1 Tel: (207) 874-8703, Fax: (08-0014	01/03/2008	053 A020001
Location of Construction:	Owner Name:		Owner Address:		Phone:
11 BOYNTON ST	KURAN BARBARA	LYNN	11 BOYNTON ST	Γ	985-2300 128
Business Name:	Contractor Name:		Contractor Address:		Phone
	True North Home Sys	stems	71 Portland Road	Kennebunk	(207) 985-2300
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Dwe	ellings	
Proposed Use:		Propose	ed Project Description:		
Single Family Home with fir	nished basement	Instal	a true north basem	ent finishing system	n.
Note:	tatus: Approved with Condition		: Tammy Munson		Ok to Issue: 🗸
approval.		C			
2) Separate permits shall be	required for future decks, sheds	s, pools, and/or g	garages.		
Dept: Building S Note:	tatus: Approved with Condition	ns Reviewer	: Tammy Munson	Approval I	Date: 01/07/2008 Ok to Issue: ♥
1) As discussed, the hallway	y with the 3' x 4' door must rema	ain open to the fi	nished space.		
 There must be a 2" cleara level 	ance maintained between the chi	imney and any co	ombustible material	l, with draft stoppin	g per code at each
	uired for any electrical, plumbing to be submitted for approval as				

Comments:

1/7/2008-tmm: need to know height above floor of 3' x 4' egress door in hallway. Left message.

1/7/2008-tmm: door is approx. 24" of floor and goes directly outside - told builder hallway has to stay open and be part of the room.

Delete	Schedule Insp	ection Ac	d Eind	Print Permit	Print C of O	Print Insp	Invoicing	Taxes
	Prmt	Text93	804	2	Const	r Type New	Num1	8
Permit Nbr	08-0014	Location of	Constructio	n 11 E	OYNTON ST	_ '=	Appl.	Date
Statu	s Hold	-	Permit Ty	pe Alterations	- Dwellings		Issue	Date
CBL	053 A020001		District Nb	r 2 Est	imated Cost	\$7,000.00	Date C	osed

Comment need to know height above floor of 3' x 4' egress door in hallway.		
Follow Up Date	Completed	

CreatedBy Imd	CreateDate	01/03/2008	ModBy tmm	ModDate	01/07
	Time	3:22 PM		Time	9:(



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: // 2	SOUNTON ST.	
Total Square Footage of Proposed Structure/A		
Tax Assessor's Chart, Block & Lot	Applicant * must be owner, Lessee or Buye	
Chart# Block# Lot#	Name TRUE NORTH HOME SYS	1845 785-2300
53 A Z	Address 71 PORTCAN RD.	Ext. 128
	City, State & Zip Kerterson, ME. O40,	/3
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$ 7,000,00
	Name BARBARA SUDJAEN	Work: \$ <u>/ 00</u> .00
	Address // Bywow ST.	C of O Fee: \$
	City, State & Zip portAN, ME	Total Fee: \$
•	04102	
	NGLE FAM.	
If vacant, what was the previous use?		
Is property part of a subdivision?	If yes, please name	
Project description: FWISH 150#	IF PASCARGATT AJTTH OH	KUS CORNZIK
BASEMENT FINISHING SYSTE.	M	
	·.	
Contractor's name: TRUC LINER	Unans SUSTRANC	
		}
Address: // Avenaus RS		
City, State & Zip HENNBOWK, MC	04045	Felephone: <u>955-2300 647</u>
Who should we contact when the permit is read	•	Celephone: <u>54ME 1</u>
Mailing address: 71 PORTCAND RO	KUNKBINK ME OYOY3	

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 underfunds 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 application visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Ifall 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.

wee *

BZU EUZS		
Signature:	Date: 1/3/08	

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

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.

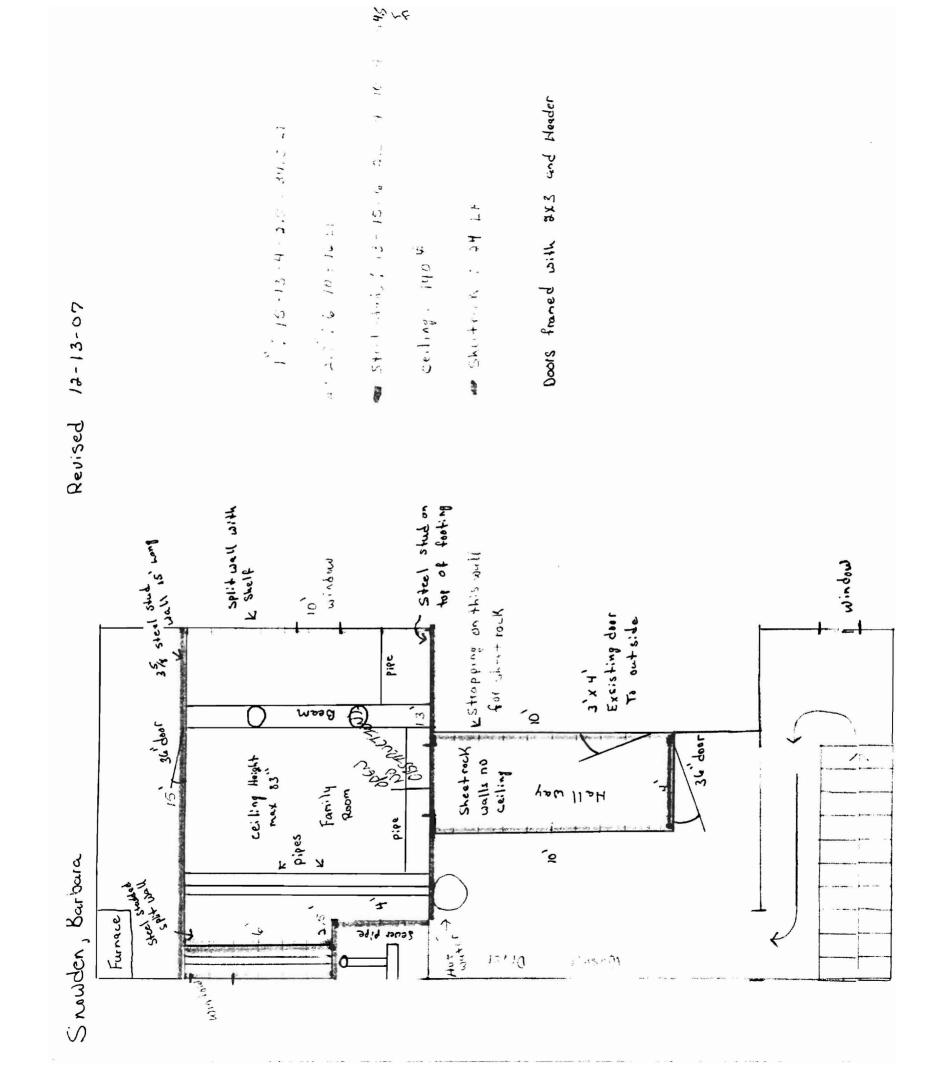
Footing/Building Location Inspec	etion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	ical: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

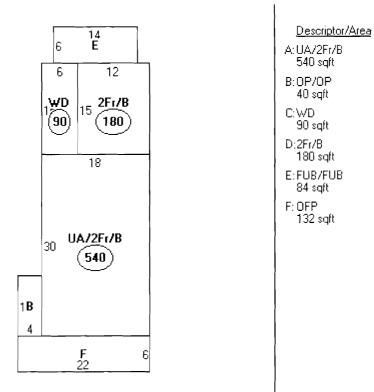
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects **DO** require a final inspection

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

<u>CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR,</u> BEFORE THE SPACE MAY BE OCCUPIED

<u>1- 7-08</u> Date Date Applicant/Designee Signature of Inspections Official CBL: S Building Permit #:





	TRUENOR HOME SYSTEM Established 1989	\$
DATE: _	9-24-07	
Bay	ME & ADDRESS: baca Snowda Boynton St. F ME 04102	
TrueNo	<u>arbaca</u> Snowder, h rth TM Home Systems to act as g permit for my home improve	my agent to acquire a
Hon	Heowner Signature	



This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information

Curre	ent Owner Info	ormation			
	Card Number		1 of 1		
	Parcel II)	053 A020001		
	Location	1	11 BOYNTON ST		
	Land Use	e	SINGLE FAMILY		
	Owner Address	3	KURAN BARBARA LYNN 11 BOYNTON ST		
			PORTLAND ME 04102		
	Book/Page	9	17477/348		
	Legal	L	53-A-20 BOYNTON ST 11		
			3443 SF		
	Current Ass	sessed Valuatior	1		
	Land \$64,100	Building \$106,400	Total \$170,500		
Property Info	rmation				
Year Built 1874	Style Old Style	Story Height 2	Sq. Ft. 1440	Total Acres 0.079	
Bedrooms 4	Full Baths 2	Half Baths 1	Total Rooms 8	Attic Unfin	Basement Full
Outbuildings					
Type GARAGE-WD/CB	Quantity 1	Year Built 1900	Size 27X18	Grade D	Condition P
Sales In	formation				
Date		Туре	Price	Book/Page	8
03/01/200 06/01/199	2 LAND	+ BLDING + BLDING	\$133,000 \$74,500	17477-348 13163-139	3
		Picture and S	Sketch		
	Pic	ture Sketch	Tax Map		
Any information		k here to view Tax l ayments should be c mailed	lirected to the Treas	sury office at 87	4-8490 or <u>e-</u>

New Search!

