

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 050275

This is to certify that Eagle Point Properties Llc / applicant/ owner
has permission to Reframe closets, enlarge kitchen and bathroom and install a fire rated ceiling.
AT 176 Grant St City of Portland 053 C007001

PERMIT ISSUED
MAR 29 2005
CITY OF PORTLAND

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. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

Jamie Boule 3/28/05
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: 05-0275	Issue Date: PERMIT ISSUED MAR 29 2005	CBL: 053 C007001
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Location of Construction: 176 Grant St	Owner Name: Eagle Point Properties Llc	Owner Address: 878 North Rd	Phone:
Business Name:	Contractor Name: applicant/ owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial <i>Multi-Family</i>	Zone: R-6

Past Use: Residential 3 unit	Proposed Use: Residential 3 unit reframe closets, enlarge kitchen and baths and install a fire rated ceiling	Permit Fee: \$291.00	Cost of Work: \$30,000.00	CEO District: 2	Zone: R-6
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Proposed Project Description: Reframe closets, enlarge kitchen and baths and install a fire rated ceiling	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2 Type: SB IBC-2003
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Legal use: Three (3) residential dwelling units

Signature: *[Signature]* Date: *3/28/05*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: dmartin	Date Applied For: 03/17/2005	Zoning Approval	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>3. 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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>ok with conditions</i></p> <p>Date: <i>3/21/05</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>9</i></p>
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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

4-5-05

w/ Mike Collins



Electrical Bay door

OK by Mancinni

Plumbing is OK on test +

interior Plaster Removed - Need
to do another strip before close in.

MCT + MUR

6-17-05 Need Sprinkler over
boiler + step out 3rd floor
see epit new
STY Kelly + M Collins

City of Portland, Maine - Building or Use Permit

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

Permit No: 05-0275	Date Applied For: 03/17/2005	CBL: 053 C007001
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Location of Construction: 176 Grant St	Owner Name: Eagle Point Properties Llc	Owner Address: 878 North Rd	Phone:
Business Name:	Contractor Name: applicant/ owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	

Proposed Use: Residential 3 unit reframe closets, enlarge kitchen and baths and install a fire rated ceiling	Proposed Project Description: Reframe closets, enlarge kitchen and baths and install a fire rated ceiling.
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Dept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 03/21/2005

Note: Ok to Issue:

- 1) Separate permits shall be required for future decks, sheds, pools, and/or garages.
- 2) 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.
- 3) This property shall remain a three (3) family dwelling. Any change of use shall require a separate permit application for review and approval.
- 4) 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: 03/28/2005

Note: 3/28 spoke w/ Stephen S. About 50 stc rating and collars for penetrations 2-1/2" or larger. Ok to Issue:

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, or heating.

Dept: Fire Status: Approved Reviewer: Lt. MacDougal Approval Date: 03/21/2005

Note: Ok to Issue:



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.

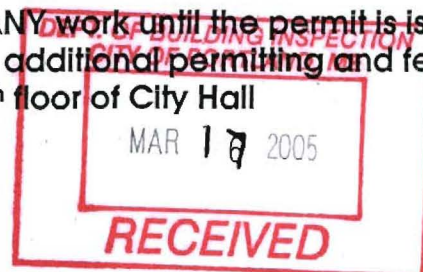
Location/Address of Construction: <u>176 Grant Street</u>		
Total Square Footage of Proposed Structure <u>3056 existing</u>	Square Footage of Lot <u>3235</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>53</u> Block# <u>6</u> Lot# <u>7</u>	Owner: <u>Eagle Point Properties, LLC</u> <u>Stephen Sanderson</u>	Telephone: <u>207-749-3998</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Stephen Sanderson</u> <u>878 North Road</u> <u>North Yarmouth, ME 04096</u>	Cost Of Work: \$ <u>30,000</u> Fee: \$ <u>291.00</u>
Current use: <u>3-Unit existing</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>New driveway, Reframe Closets and Bathrooms, Remodel Bulkheads</u> Project description: <u>and Kitchens. Put in Fire Rated Ceilings</u> <u>Enlarging</u>		
Contractor's name, address & telephone: <u>Stephen Sanderson 749-3998</u>		
Who should we contact when the permit is ready: <u>Stephen Sanderson</u>		
Mailing address: <u>878 North Rd</u> <u>North Yarmouth ME 04096</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>Steve Sanderson</u> <u>749-3998</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>[Signature]</u>	Date: <u>3/17/05</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



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 upon receipt of your building permit.

- 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.

 CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

[Signature] _____ Date 3/29/05
Signature of Applicant/Designee
Signature of Inspections Official _____ Date

CBL: 053-C-7 Building Permit #: 05-0275

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1188	Issue Date:	CBL: 053 C007001
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Location of Construction: 176 Grant St	Owner Name: Ung Bun Kheang & Son Neang Jts	Owner Address: 176 Grant St	Phone: 207-828-5292
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Business Name: n/a	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
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Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Additions - Dwellings	Zone:
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Past Use: Res. Single Fam	Proposed Use: Same: Build an 11' X 23' Porch	Permit Fee:	Cost of Work: \$1,000.00	CEO District: 2
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Never Issued?

FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group Type:
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Proposed Project Description: Build an 11' X 23' Porch

Signature:	Signature:
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied

Signature:	Date:
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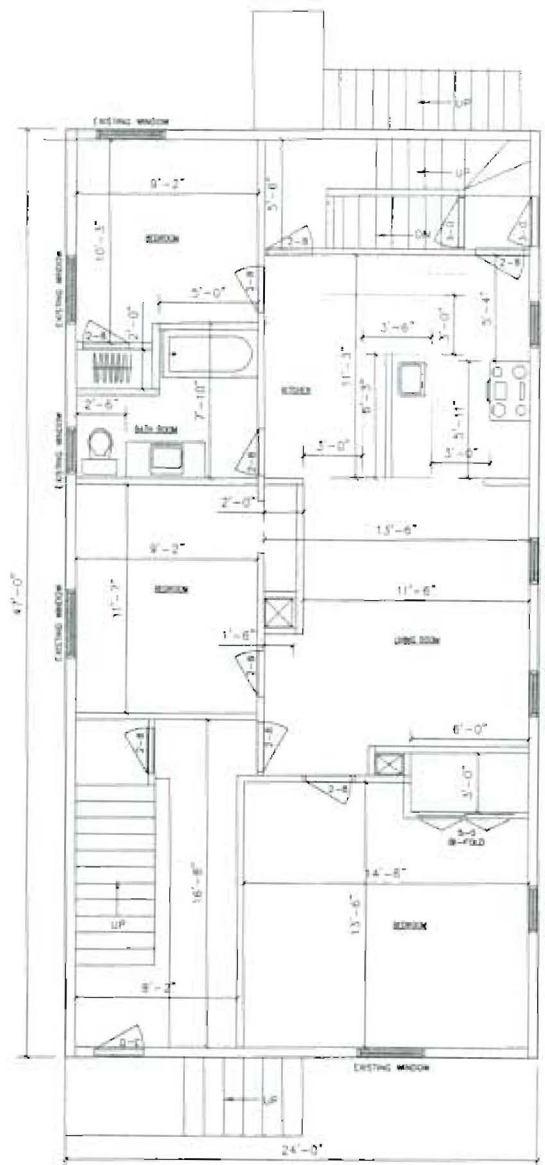
Permit Taken By: cjh	Date Applied For: 09/20/2001	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, 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:	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:
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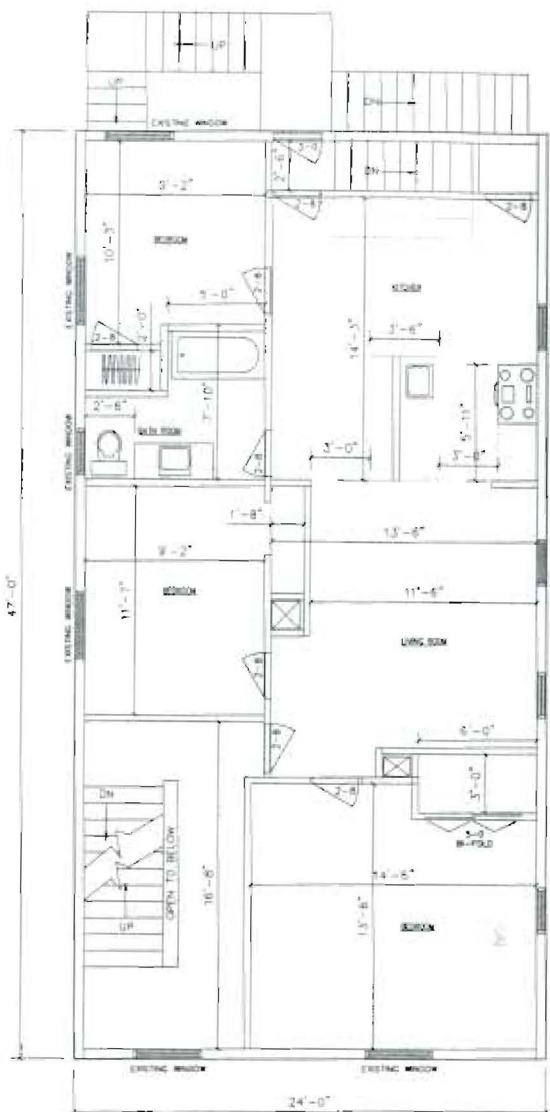
CERTIFICATION

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



FIRST FLOOR PLAN
SCALE: 1/4"=1'-0"



SECOND FLOOR PLAN
SCALE: 1/4"=1'-0"

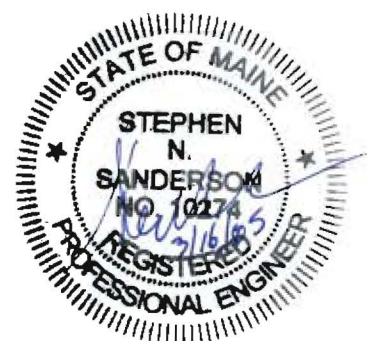


THIRD FLOOR PLAN
SCALE: 1/4"=1'-0"

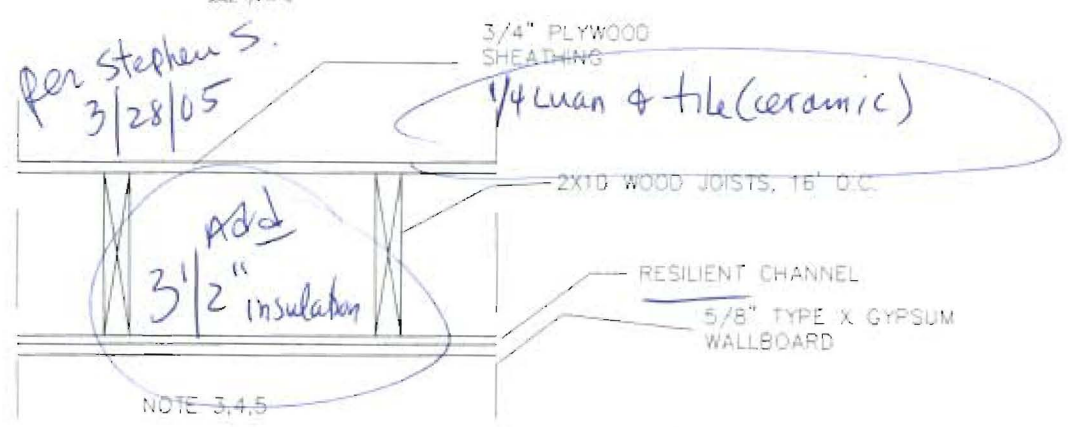
- GENERAL NOTES:
1. SUBSTITUTE MATERIALS AND/OR SIZES AND GRADES PER CONTRACTOR'S SPECIFICATIONS.
 2. CONT. TO VERIFY ALL MATERIALS/SPANS PER MANUFACTURER'S SPECIFICATIONS PRIOR TO CONSTRUCTION.

WORK NOTES

1. REPLACE THE BATHROOM FLOOR WITH CERAMIC TILE. REPLACE VANITY AND SINK.
2. REPLACE DRYWALL ON THE CEILING.
3. REPLACE KITCHEN CABINETS AND INSTALL NEW COUNTERTOPS. INSTALL NEW CERAMIC FLOOR TILE.
5. PAINT ALL INTERIOR WALLS, CEILINGS AND TRIM. REPLACE LIGHTING FIXTURES, UPDATE THE RECEPTALS. MINOR PLUMBING RELOCATION IN EACH BATHROOM AND KITCHEN.

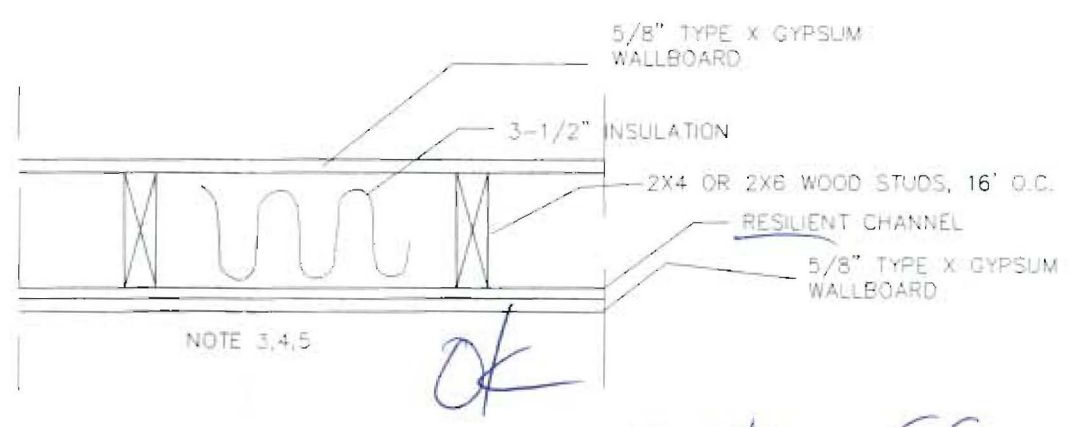


- GENERAL NOTES:
1. SUBSTITUTE MATERIALS AND/OR SIZES AND GRADES PER CONTRACTOR'S SPECIFICATIONS.
 2. CONT. TO VERIFY ALL MATERIALS/SPANS PER MANUFACTURER'S SPECIFICATIONS PRIOR TO CONSTRUCTION.
 3. ONE LAYER 5/8" TYPE X GYPSUM WALLBOARD APPLIED AT RIGHT ANGLES TO RESILIENT FURRING CHANNELS 24" O.C. WITH 1" TYPE S DRYWALL SCREWS 12" O.C.
 4. RESILIENT FURRING CHANNELS APPLIED AT RIGHT ANGLES TO 2X10 WOOD JOISTS 16" O.C. WITH 6D COATED NAILS, 2" LONG, 0.113" SHANK, 17/64" HEAD.
 5. CALC OPENINGS AROUND PIPES, FIXTURES, AND OTHER ITEMS PROJECTING THROUGH FIRE RATED GYPSUM ASSEMBLY FIRE TYPE F FIRE RATED CALK, UL 1479 LISTED.



DETAIL 1
SCALE: NTS
A-5

TYPICAL FLOOR-CEILING SYSTEM
1 HOUR FIRE AND STC 45 SOUND RATING
UL 1040 RATING
SD Required



DETAIL 2
SCALE: NTS
A-1

TYPICAL FIREWALL SYSTEM
1 HOUR FIRE AND STC 45 SOUND RATING
UL 1040 RATING

SD str S.S. 3/28/05 - Collars 2 1/2" or greater

REV	DATE	DESCRIPTION
A	2/30/05	FOR APPROVAL

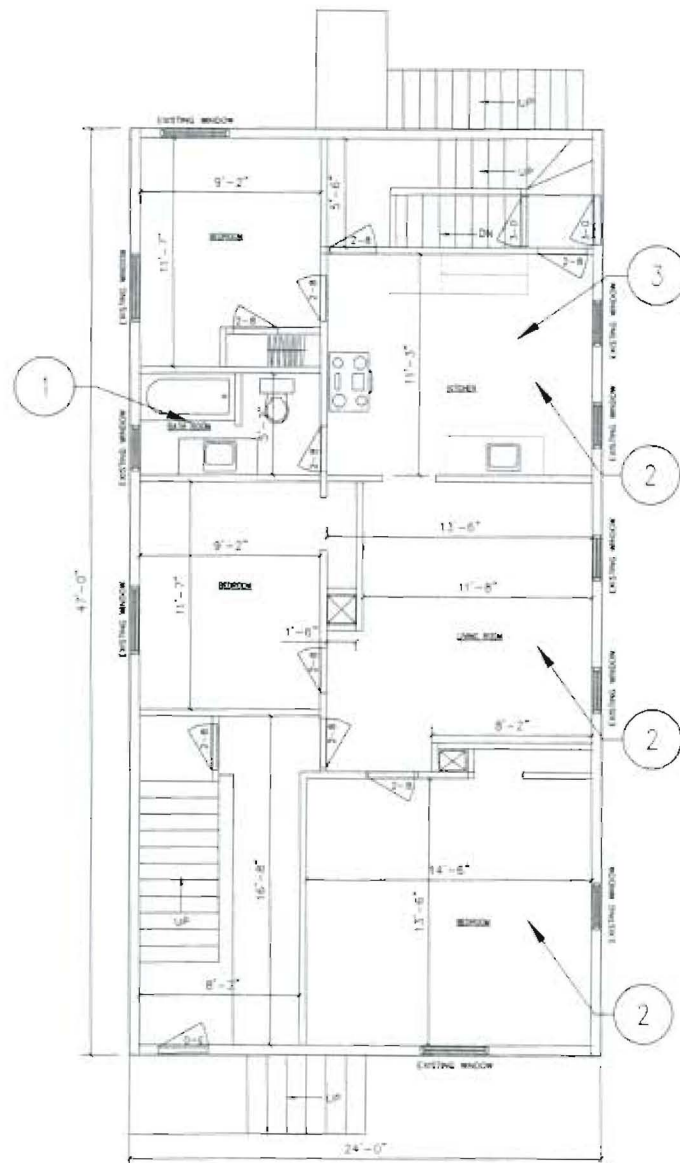
CLIENT	176 GRANT STREET PORTLAND, MAINE		
RECONFIGURED FLOOR PLAN 3 UNIT			
DRAWN BY:	DWG	SCALE:	AS NOTED
DRAWING NUMBER		A-1	DATE: 12-30-04

GENERAL NOTES

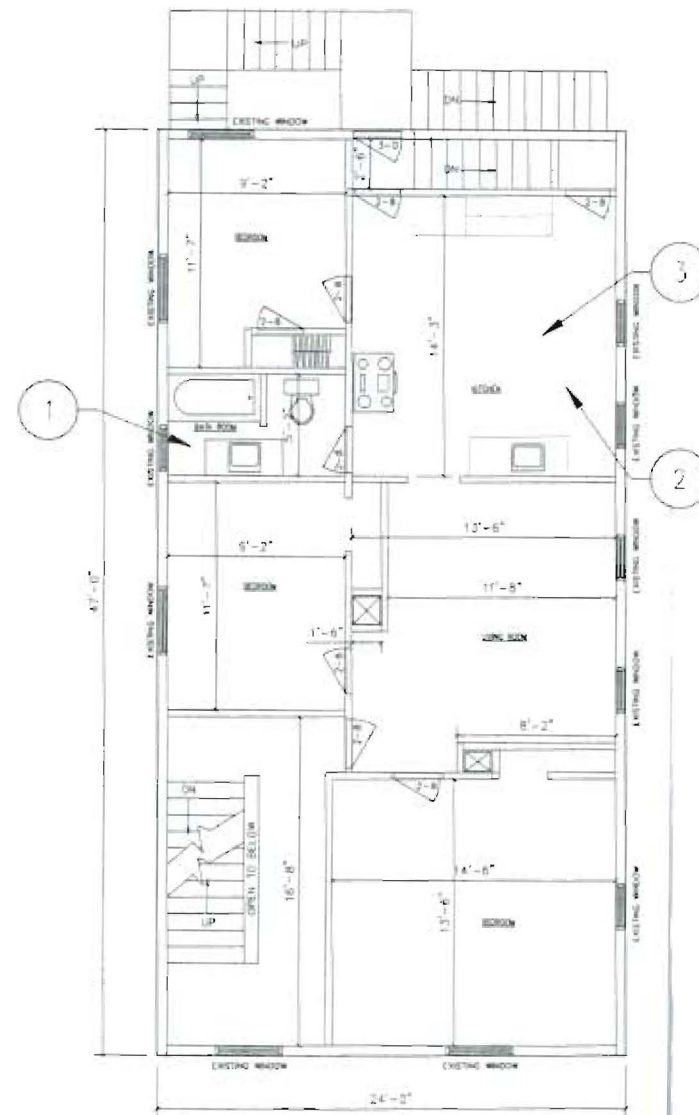
1. SUBSTITUTE MATERIALS AND/OR SIZES AND GRADES PER CONTRACTOR'S SPECIFICATIONS.
2. CONT. TO VERIFY ALL MATERIALS/SPANS PER MANUFACTURER'S SPECIFICATIONS PRIOR TO CONSTRUCTION.

WORK NOTES

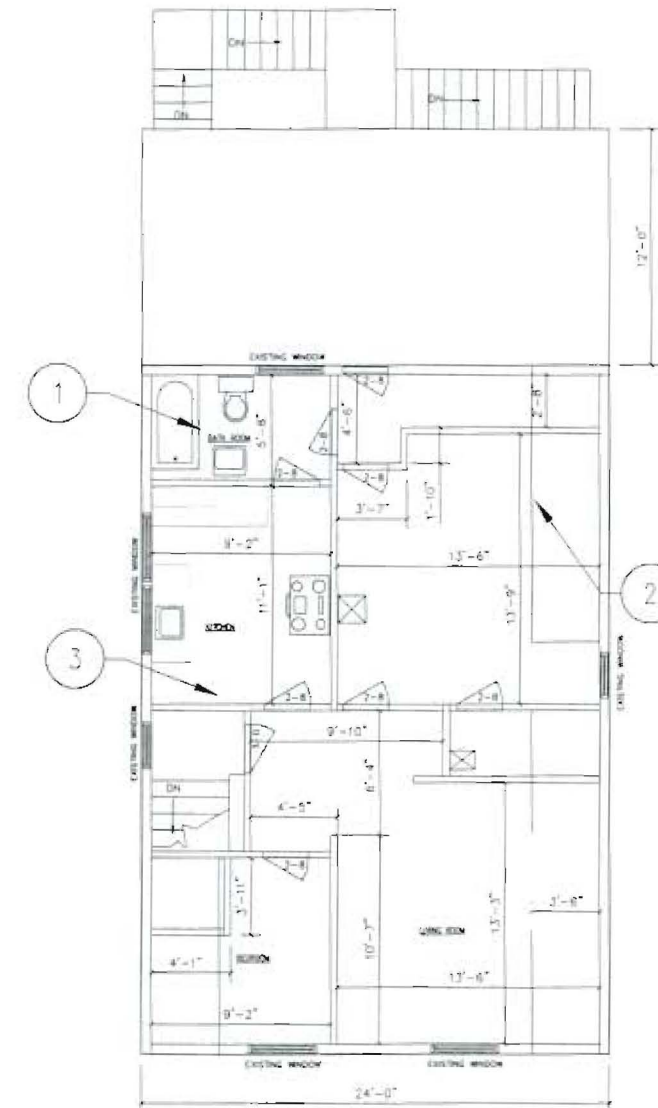
- ① REPLACE THE BATHROOM FLOOR WITH CERAMIC TILE. REPLACE VANTY AND SINK.
- ② REPLACE DRYWALL ON THE CEILING.
- ③ REPLACE KITCHEN CABINETS AND INSTALL NEW COUNTERTOPS. INSTALL NEW CERAMIC FLOOR TILE.
- ④ PAINT ALL INTERIOR WALLS, CEILINGS AND TRIM. REPLACE LIGHTING FIXTURES, UPDATE THE RECEPTALS. MINOR PLUMBING RELOCATION IN EACH BATHROOM AND KITCHEN.



FIRST FLOOR PLAN
SCALE: 1/4"=1'-0"



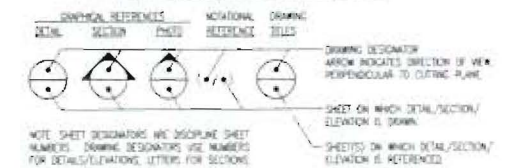
SECOND FLOOR PLAN
SCALE: 1/4"=1'-0"



THIRD FLOOR PLAN
SCALE: 1/4"=1'-0"



DRAWING REFERENCE SYSTEM



CLIENT	176 GRANT STREET PORTLAND, MAINE		
	EXISTING FLOOR PLAN 3 UNIT		
DRAWN BY	SKS	SCALE	AS NOTED
		DATE	12-30-04
DRAWING NUMBER	A-1		

REV	DATE	DESCRIPTION
1	2/13/05	FOR APPROVAL

ELECTRICAL PERMIT

City of Portland, Me.

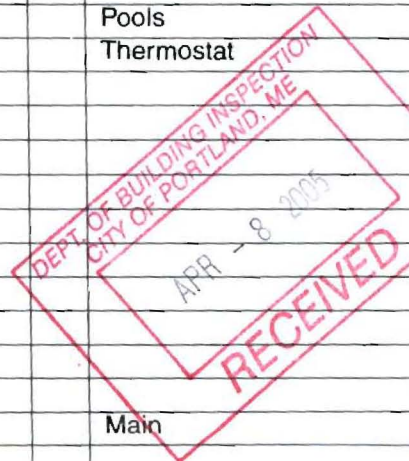


To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 4/6/05
 Permit # 2005-4303
 CBL# 53 C 7

LOCATION: 176 Grant Street METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Steve Sannerson
 TENANT _____ PHONE # 749-3998

							TOTAL EACH FEE	
OUTLETS	90	Receptacles	36	Switches	12	Smoke Detector	.20	27 ⁶⁰
FIXTURES	20	Incandescent		Fluorescent		Strips	.20	4.00
SERVICES	1	Overhead		Underground		TTL AMPS <800	15.00	15 ⁰⁰
		Overhead		Underground		>800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS	25.00	
							25.00	
METERS	3	(number of)					1.00	3 ⁰⁰
MOTORS		(number of)					2.00	
RESID/COM		Electric units					1.00	
HEATING	2	oil/gas units		Interior		Exterior	5.00	10 ⁰⁰
APPLIANCES	3	Ranges		Cook Tops		Wall Ovens	2.00	
		Insta-Hot		Water heaters	3	Fans	2.00	10 ⁰⁰
	2	Dryers	3	Disposals		Dishwasher	2.00	
		Compactors		Spa	2	Washing Machine	2.00	8 ⁰⁰
		Others (denote)					2.00	4 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	3	Remote		Main	4.00	12 ⁰⁰
TRANSFORMER		0-25 Kva					5.00	
		25-200 Kva					8.00	
		Over 200 Kva					10.00	
							TOTAL AMOUNT DUE	97 ⁶⁰
							MINIMUM FEE/COMMERCIAL	45.00
							MINIMUM FEE	35.00



CONTRACTORS NAME Anthony Mancini Inc MASTER LIC. # MC 6000 3358
 ADDRESS 179 Shepard Street Portland, Me 04101 LIMITED LIC. # _____
 TELEPHONE 774-5829

SIGNATURE OF CONTRACTOR Giino Mancini

4842

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: PORTLAND
Street Subdivision Lot #: 176 GRAND STREET

PROPERTY OWNERS NAME

Last: BRICK First: BEN
Applicant Name: ROBERT W. WILKES JR
Mailing Address of Owner/Applicant (If Different): 184 LOUIS RO YORKMEAD ME 04096

2005 EICC
PORTLAND PERMIT # 9325 TOWN COPY
Date Permit Issued: 3/29/05 \$ 178.00 If Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 360
53 C 007

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 Inspectors to deny a Permit.

[Signature] 3/22/05
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.

[Signature]
Local Plumbing Inspector Signature

[Date]
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 type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" 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>D7665</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	3	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	3	Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
			-	Fixtures (Subtotal) Column 2
			12	Total Fixtures
			72-	Fixture Fee
			-	Transfer Fee
		-	Hook-Up & Relocation Fee	
		72-	Permit Fee (Total)	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



CITY OF PORTLAND, MAINE
Department of Building Inspections

March 17 20 05

Received from Stephen Sanderson

Location of Work 176 Grant St.

Cost of Construction \$ 30,000

Permit Fee \$ 291.00

Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other _____

CBL: 53 C 007

Check #: 566

Total Collected \$ _____

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

Donna