040168

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee 35.00 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Tim Flannery Phone # 871-5000

Address: P.O. Box 6 Westbrook Me. 04098

LOCATION OF CONSTRUCTION 766 Congress St

Contractor: self Sub:

Address: Phone #

Est. Construction Cost: 3,000.00 Proposed Use: multi family

Past Use: same

# of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion interior renovations Apt. 5 as per plans change of use 4 apartments to 11 apartments with office use in one apt.

For Official Use Only

Date March 11, 1994

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 3,000.00

Subdivision _____

Name _____

Lot _____

Ownership _____

PERMIT ISSUED MAR 17 1994 CITY OF PORTLAND

Zoning:

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ___ No ___ Date: _____

Planning Board Approval: Yes ___ No ___ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ___ No ___ Floodplain Yes ___ No ___

Special Exception _____

Other: (Explain) 3-16-94

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

HISTORIC PRESERVATION

Not in District nor Landmark.

Does not require review.

Requires Review

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Action: Approved / Approved with Conditions

Date: 3/17/94

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes ___ No ___

Plumbing:

1. Approval of soil test if required _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Mix use

Swimming Pools:

1. Type: _____ B-R-3
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

PERMIT ISSUED WITH REQUIREMENTS

Permit Received By Latini

Signature of Applicant Timothy A. Flannery Timothy Flannery Date 3/11/94

CEO's District 2

PERMIT ISSUED WITH REQUIREMENTS

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO 2 Ms Manson

White - Tax Assessor