

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

Permit No. 02-0470	Issue Date MAY 5 2002	CBL: 055 C003001
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Location of Construction: 77 Carleton St	Owner Name: Dunn Ian C &	Owner Address: 204 Deering Ave Portland	Phone: 828-0727
Business Name:	Contractor Name: A-Top Chimney	Contractor Address: Portland	Phone: 2077742404
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	Zone:

Past Use: Duplex	Proposed Use: Duplex	Permit Fee: \$37.00	Cost of Work: \$1,495.00	CEO District: 3
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FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied N/A	INSPECTION: Use Group: R3 Type: BOCA 1999 Signature: [Signature]
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**Proposed Project Description:**  
 Demo Chimney & Replace and Cap with Slate

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**  
 Action:  Approved  Approved w/Conditions  Denied  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Permit Taken By:** gg  
**Date Applied For:** 05/07/2002

**Zoning Approval**

- 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**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan

Maj  Minor  MM

Date: 5/21/02

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

Date: \_\_\_\_\_

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review  
 Approved  
 Approved w/Conditions  
 Denied

Date: MA 7/30/02

**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

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

SECTION

## PERMIT

Permit Number: 020470

Please Read  
Application And  
Notes, if Any,  
Attached

This is to certify that Dunn Ian C & /A-Top Chimney  
has permission to Demo Chimney & Replace with Cap with  
AT 77 Carleton St 055 C003001

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 when permission is procured before this building or part thereof is altered or closed-in.  
**24 HOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name



Director of Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**



82

02-0470

# All Purpose Building Permit Application for Demolition

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: 77 Carleton St. 04102

Total Square Footage of Proposed Structure \_\_\_\_\_ Square Footage of Lot 2996

Tax Assessor's Chart, Block & Lot  
Chart# 55 Block# C Lot# 3  
Owner: Ian Dunn  
Telephone: 822-9874 x209  
828-0727 (H)

Lessee/Buyer's Name (If Applicable) \_\_\_\_\_ Applicant name, address & telephone: same  
Cost Of Work: \$ 1495.00  
Fee: \$ 37-

Current use: Duplex \* Will apply for power vent  
If the location is currently vacant, what was prior use: \_\_\_\_\_  
Approximately how long has it been vacant: \_\_\_\_\_  
Project description: Take down chimney on front left 4 to 6 feet above roof and cap with slate  
**DEMOLITION CALL LIST MUST BE SUBMITTED WITH THIS APPLICATION**

Contractor's name, address & telephone: Bill Soule - A-Top Chimney  
Who should we contact when the permit is ready: Ian Dunn 774-2404  
Mailing address: C 822-9874 x 209  
see above  
Call Ian when ready Phone: \_\_\_\_\_

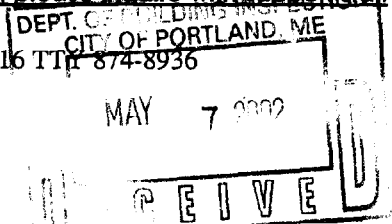
**IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.**

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: [Signature] Date: 5-6-02

**This is not a permit, you may not commence ANY work until the permit is issued. This is for residential demolition. Commercial demolition will require other types of permitting along with this permit, please inquire with support staff**

389 Congress St Portland, Maine 04101 (207) 874-8700 FAX 874-8716 TDD 874-8936



Must go to Bill in Historic



**CITY OF PORTLAND**

**The Demolition Call List must be submitted with a Building Permit Application**

**Property location:** 77 Carleton St.      **Chart/Block/Lot** \_\_\_\_\_

The call list below must be submitted with the building permit application. Please note any "commercial use" demolition will need additional approvals.

When making the submission please include a plot plan showing the location of the structure that is being removed along with a photograph. You may not remove or disconnect any type of lines (private or public) until you have received an *approved building permit*. If the building does not have one of the below utilities please put "does not apply". All Departments in bold must be notified under all circumstances.

**City Approvals**

<u>Department</u>	<u>Number</u>	<u>Contact</u>	<u>Date/Who you spoke with</u>
Public Works Sewer	874-8833	Todd Merkel	_____
Public Works Traffic	874-8437	Gary Dobson	_____
(if structure is being moved to another location)			
Public Works Sealed Drain Permit	874-8822	Carol Merritt	_____
<b>Historical Preservation</b>	874-8726	Deb Andrews	<u>Bill Needleman 5-6-02 1:10</u>
<b>Fire Dispatch</b>	874-8576	Dispatcher on Duty	_____

**Utility Approvals**

<b>Dig Safe</b>	<b>1-888-344-7233</b>	<b>Customer Service</b>	_____
(must receive 72 hours notice before digging can begin)			
Asbestos	1-207-287-2651	Ed Antz	_____

I have contacted all the necessary companies and departments as indicated above

Signature *[Handwritten Signature]*      Date: 5-6-02

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

## PERMIT

Permit Number: 020484

This is to certify that Dunn Ian C & /Ross, Ted  
has permission to Installation of Venting System  
AT 77 Carleton St 055 C003001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or closed-in.  
24 HOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

  
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: 02-0484	Issue Date:	CBL: 055 C003001
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Location of Construction: 77 Carleton St	Owner Name: Dunn Ian C &	Owner Address: 204 Deering Ave	Phone: 828-0727
Business Name:	Contractor Name: Ross, Ted	Contractor Address: P.O. Box 6843 Portland	Phone: 2076537376
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Duplex	Proposed Use: Duplex	Permit Fee: \$30.00	Cost of Work: \$950.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>Heating</i> Type:	

Proposed Project Description:  
Installation of Venting System

Signature: *[Signature]* Signature: *[Signature]*

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: jodinea	Date Applied For: 05/06/2002	<b>Zoning Approval</b>	
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- 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	Zoning Appeal	Historic Preservation
<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"/>	<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	<input type="checkbox"/> Not in District or Landmark <input checked="" 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: _____	Date: _____	Date: _____

**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

Specs on vent

copy of plot plan

Demolition permit

02-0484

# 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>77 Carleton St.</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot <u>2996</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>055</u> Block# <u>C</u> Lot# <u>003</u>	Owner: <u>Ian Dunn</u>	Telephone: <u>828-0727 (H)</u> <u>822-9874x209 (W)</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Jim Ross M/H</u> <u>829-4248</u>	Cost Of Work: \$ <u>950-</u> Fee: \$ <u>30.00</u>
Current use: <u>Duplex</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>N/A</u>		
Project description: <u>Power unit installation</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>Yed Ross + +</u>		
Mailing address: <u>P.O. Box 6843</u> <u>Pont. Ne 04107</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>657-7376</u> <u>Call</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>5-6-02</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



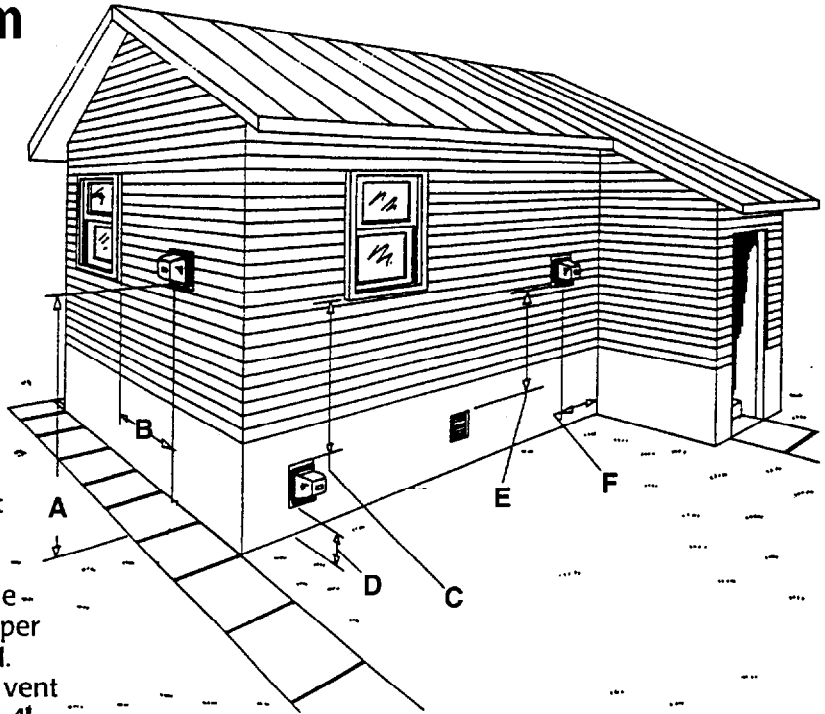
# Appendix

## Planning A Venting System

After determining the type(s) and size(s) of heating equipment, the vent termination location must be selected.

Location of the termination of the venting system should comply with the National Fuel Gas Code, A.N.S.I. Z223.1, manufacturer's recommendations and/or applicable local codes. Shown are some typical terminal locations.

- A. The exit termination of a mechanical draft system must not be less than 7' above grade when located adjacent to a public walkway.
- B. The vent termination of a direct vent or sealed combustion appliance with an input of 50,000 BTU's per hour or less must be located at least 9" from any opening through which vented gases could enter the building. With an input over 50,000 BTU's per hour, a 1' termination clearance is required.
- C. The venting systems of other than a direct vent appliance must terminate at least 4' below, 4' horizontally from or 1' above any door, window or gravity air inlet into the building.
- D. The bottom of the vent terminal must be located at least 1' above finished grade.
- E. A venting system must terminate at least 3' above any forced air inlet located within 10'.
- F. The vent termination point must not be installed closer than 3' from an inside corner of an L-shaped structure.
- G. The vent termination should not be mounted directly above or within 3' horizontally from an oil tank vent or gas meter.



## Calculating Equivalent Feet Of A Vent System

Vent Pipe Fittings	Vent Pipe Diameter							
	3"	4"	5"	6"	7"	8"	9"	10"
Tee	19	25	31	38	44	50	56	63
90° Elbow	5	7	9	11	12	14	16	18
45° Elbow	3	4	4	5	6	7	8	9
Reducer Or Increaser	(d/D)	8	11	14	17	19	22	28
	1/4	5	7	8	10	12	13	15
	1/2	2	3	3	4	4	5	6

The equivalent feet for the venting system can be calculated once the estimated minimum vent pipe diameter is determined. To calculate the footage, add the lengths of all the straight lengths of vent pipe to the equivalent feet for all the vent pipe fittings (such as tees, elbow and reducers) needed to complete the venting system.

### Procedure

1. Calculate the total equivalent feet for each type of fitting used in the venting system from the chart.
2. Calculate the total amount of feet for the straight lengths of vent pipe.
3. Add the equivalent feet for the fittings with the total amount of feet of straight lengths. This will approximate the total equivalent feet of the vent system.

### Example:

- System Pipe Sized = 4"
- Step 1 2-90° elbows (4") = 14 Ft.
- Step 2 10-2 Ft Lengths of 4" Pipe = 20 Ft.
- Step 3 Total equivalent Feet + 14 Ft. + 20 Ft. = 34 Ft.

Reducer or increaser ratio (d/D) small diameter divided by the larger diameter. Example 8" to 4" reducer, the reducer ratio is  $d/D = 4/8 = 1/2$ . To estimate the equivalent foot length for the fitting, use the smaller pipe diameter for the equivalent length figure. Example 8" to 4" reducer; the reducer ration is 1/2 and the smaller pipe diameter is 4". So, from the chart, the equivalent feet would be 7 feet.

4585

Mike Nagat

**MORTGAGE LOAN INSPECTION**

Cumberland Title Company

P.O. Box 4843

Portland, ME 04112

1-207-774-1773

1-207-774-2278 (fax)

CL No.: 1376

Job No.: M09-77.

Date: 9/11/2001

County: Cumberland

Plan Bk. Pg.

.lot(S):

Scale: 1" = 20'

Borrower(s): Ian C. Dunn and Michelle L. Stone

St. No.: 7

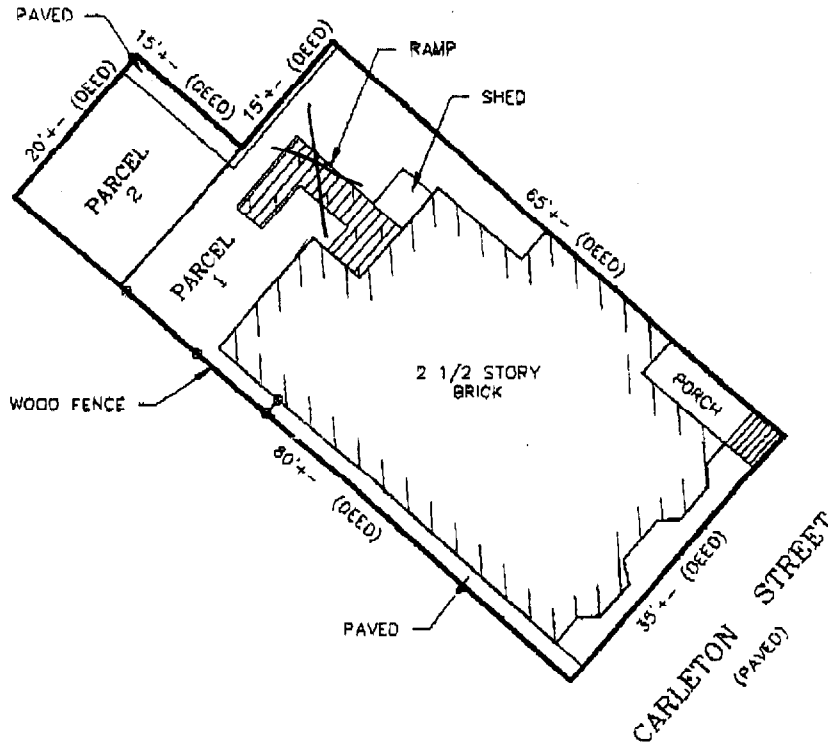
Street: Carleton St.

Town: Portland, ME

Source Deed Bk. 3270 Pg. 308

Post-It® Fax Note	7671	Date	9/17/01	# of pages	1
To	Jerry Galbraith	From	Lerie		
Co./Dept.		Co.			
Phone #		Phone #			
Fax #		Fax #			

NOTE: A FULL BOUNDARY SURVEY IS RECOMMENDED TO VERIFY BOUNDARY AS SHOWN.



**NOTE: THIS IS NOT A BOUNDARY SURVEY.** This plan is made for the purposes of determining that the improvements are within the apparent boundary lines. **THE PREPARER IS NOT LIABLE FOR ANY OTHER USE BY ANY OTHER PERSON OR ENTITY.**

**CERTIFICATION:** I hereby certify to *Wells Fargo Home Mortgage, Inc.*, and their mortgage title insurer that based upon inspection made with reasonable certainty, that:

- a) this plan was made from an inspection of the site.
- b) there **ARE NO** apparent violations of municipal ordinances regarding building setbacks in effect at time of construction.
- c) the principal structure(s) located on the premises **ARE NOT** in a flood hazard zone as delineated on the flood maps used by the Federal Emergency Management Agency.

*Brian W. Galbraith*  
 (Signature and circular stamp)

**CITY OF PORTLAND, MAINE  
DEVELOPMENT REVIEW APPLICATION  
PLANNING DEPARTMENT PROCESSING FORM  
Building Copy**

**2001-0291**  
Application I. D. Number  
**10/22/2001**  
Application Date  
**2 Unit Conversion**  
Project Name/Description

**Ian Dunn**  
Applicant  
**204 Deering Ave. Apt. #1, Portland, ME 04102**  
Applicant's Mailing Address

Consultant/Agent  
**Applicant Ph: (000) 822-9874 Agent Fax:**  
Applicant or Agent Daytime Telephone, Fax

**77 - 77 Carleton St, Portland, Maine**  
Address of Proposed Site  
**055 C003001**  
Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply):  New Building  Building Addition  Change Of Use  Residential  Office  Retail  
 Manufacturing  Warehouse/Distribution  Parking Lot  Other (specify) **2 units**

**3700 sq. ft.** **2996 sq. ft.** **R-6**  
Proposed Building square Feet or # of Units Acreage of Site Zoning

**Check Review Required:**

- |  |   |  |  |
|--|---|--|--|
| <input checked="" type="checkbox"/> Site Plan<br>(major/minor) | <input type="checkbox"/> Subdivision<br># of lots _____ | <input type="checkbox"/> PAD Review            | <input type="checkbox"/> 14-403 Streets Review   |
| <input type="checkbox"/> Flood Hazard                          | <input type="checkbox"/> Shoreland                      | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> DEP Local Certification |
| <input type="checkbox"/> Zoning Conditional<br>Use (ZBA/PB)    | <input type="checkbox"/> Zoning Variance                |  | <input type="checkbox"/> Other _____             |

Fees Paid: Site Plan **\$400.00** Subdivision \_\_\_\_\_ Engineer Review \_\_\_\_\_ Date **10/22/2001**

**Building Approval Status:**

Reviewer \_\_\_\_\_

- Approved  Approved w/Conditions  
See Attached  Denied

Approval Date \_\_\_\_\_ Approval Expiration \_\_\_\_\_ Extension to \_\_\_\_\_  Additional Sheets  
Attached  
 Condition Compliance \_\_\_\_\_  
signature date

**Performance Guarantee**  Required\*  Not Required

\* No building permit may be issued until a performance guarantee has been submitted as indicated below

- |   |                |  |                 |
|---|----------------|--|-----------------|
| <input type="checkbox"/> Performance Guarantee Accepted     | _____          | _____  | _____           |
|   | date           | amount   | expiration date |
| <input type="checkbox"/> Inspection Fee Paid                | _____          | _____  |                 |
|   | date           | amount   |                 |
| <input type="checkbox"/> Building Permit Issue              | _____          |  |                 |
|   | date           |  |                 |
| <input type="checkbox"/> Performance Guarantee Reduced      | _____          | _____  | _____           |
|   | date           | remaining balance                                  | signature       |
| <input type="checkbox"/> Temporary Certificate of Occupancy | _____          | <input type="checkbox"/> Conditions (See Attached) | _____           |
|   | date           |  | expiration date |
| <input type="checkbox"/> Final Inspection                   | _____          | _____  |                 |
|   | date           | signature  |                 |
| <input type="checkbox"/> Certificate Of Occupancy           | _____          |  |                 |
|   | date           |  |                 |
| <input type="checkbox"/> Performance Guarantee Released     | _____          | _____  |                 |
|   | date           | signature  |                 |
| <input type="checkbox"/> Defect Guarantee Submitted         | _____          | _____  | _____           |
|   | submitted date | amount   | expiration date |
| <input type="checkbox"/> Defect Guarantee Released          | _____          | _____  |                 |
|   | date           | signature  |                 |