Form	ρ	ŧ

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

### CITY OF PORTLAND

Application And Notes, If Any, Attached

Please Read

This is to certify that

this department.

# BU

SOMERO SCOTT J /Design C epts

Permit Number: 100944

,					- · · · · ·		
has permission to	Remodel bathroom remove sho	& tub 3	floor				
AT 92 CLARK ST	3rd floor			CF	057_C035001		
provided that	the person or persons, fil	or co	ان	n aca	ting this permit	shall comp	v with all
•	ons of the Statutes of Ma				es of the City o	•	-
the constructi	on, maintenance and use	build	linas and	stru	res, and of the	application	on file in

Apply to Public Works for street line and grade if nature of work requires such information.

Noti tion of spectio nust be nd writte aive ermissio rocured his bui g or pa hereof is befo ed-in, 24 lathi or oth HOU 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. CAPI. K. STaul Health Oept. \_\_\_\_\_ Appeal Board \_\_\_\_\_

Other Department Name

Director - Building & Inspection

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Bu	_			Issue Date:	CBL:		
389 Congress Street, 04101 Tel	(207) 874-8703	5, Fax: (207) 874-871	610-0944		057_C03	35001	
Location of Construction:	Owner Name:	· · · —	Owner Address:	Owner Address:			
92 CLARK ST 3rd floor	<del></del>	SOMERO SCOTT J		T			
Business Name:	Contractor Name		Contractor Address:		Phone		
	Design Conce	pts	11 Lake Side Dri	ve Windham	20745094	<del></del>	
Lessee/Buyer's Name	Phone:		Permit Type:	•••		Zooe:	
<del></del>	<u> </u>		Alterations - Dw		¥7		
Past Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:		
4 Unit Residential - 3rd floor		ntial - Remodel	\$50.00 \$2,500.00				
	floor	ove shower & tub 3rd	FIRE DEPT:		SPECTION: se Group: R-2	~ <b>1</b>	
				Denied O	se Group: /C	Type: ——	
Legaluse 4 Fes.	Juellin in		# See Conditions		TBCA	ORS	
Proposed Project Description:	THE COLOR	<u> </u>	// xx w		<b>*</b>	(/	
Remodel bathroom remove shower	& tub 3rd floor		Signature: Signature:			<u> </u>	
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
			Action: Approx			Denied	
			Action Appro-	ecc	ed wiconditions	Denieu	
			Signature:		Date:		
Permit Taken By: Date Applied For:			Zoning Approval				
ldobson 08/	03/2010		<del></del>	<del></del>	T 177	<del></del>	
1. This permit application does no		Special Zone or Revie	ews Zoni	ng Appeal	Historic Pres	ervation ——	
Applicant(s) from meeting app Federal Rules.	licable State and	Shoreland	Varianc	e	☐ Not in Distric	t or Landma	
Building permits do not include plumbing, septic or electrical work.		☐ Wetland ☐ Miscell		aneous	Does Not Require Rev		
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		☐ Flood Zone ☐ C		onal Use	Requires Rev	iew	
		Subdivision	[ Interpre	Interpretation		Approved	
		Site Plan	Approve	ed	Approved w/6	Conditions	
-10011	FD	Maj Minor MM	Denied		☐ Denied	•	
PERMIT ISSU	<b>L</b>	Date: Date	Date:		Day et la	ころして	
	-	- 30 Oli	<del>410</del>		(29)	£ 200	
AUG 19 2010					(Show	174	
					•		
City of Portland	נ						
Ony -			<b></b>				
		CERTIFICATI					
hereby certify that I am the owner have been authorized by the owner	to make this appl	ication as his authorize	d agent and I agree	to conform to a	all applicable laws	of this	
urisdiction. In addition, if a permit shall have the authority to enter all a such permit.							
SIGNATURE OF APPLICANT		ADDRES		DATE	PHO		
THE PARTY OF THE PROPERTY.		, in Digital	~	DAIL	1110	. 16	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



# CITY OF PORTLAND, MAINE Department of Building Inspections

# Original Receipt

	,	$\underline{}$ 8.3. $20/0$
<b>scalved from</b>	الأ	Care oute
cation of Work		SOCKUL SE
ost of Construction	\$	Building Fee:
smit Fee	\$	Site Fee:
	(	Certificate of Occupancy Pee:
<i>3</i>		Total: 50
uilding (IL) Pi	umbina (I:	5) Electrical (12) Site Plan (L12)
	•	
. 57- (	- 3	35
*** C-		Total Collected . SQ
		8 · · ·
' &	•	pe started until permit issued. Iginal receipt for your records.
Taken by:	. 17	

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

92 CLARK ST 3rd floor	SOMERO SCOTT J		13 ATLANTIC ST		
Business Name:	Contractor Name:		Contractor Address:		Phone
	i i	Design Concepts		Į.	(207) 450-9462
essee/Buyer's Name	Phone:	<del></del>			(407) 100 3 102
roposed Use:		Propos	ed Project Description:		<del></del>
4 Unit Residential - Remodel t floor	athroom remove shower & tul	b 3rd Remo	del bathroom remove sho	ower & tub 3rd f	loor
Dept: Zoning Sta	tus: Approved with Condition	ns Reviewer	: Marge Schmuckal	Approval Da	te: 08/12/2010
Note:					Ok to Issue:
ANY exterior work require     District.	es a separate review and appro	val thru Historic	Preservation. This prope	erty is located wi	ithin an Historic
2) Separate permits shall be re	equired for future decks, sheds	s, pools, and/or g	garages.		
<ol> <li>This is NOT an approval for not limited to items such as</li> </ol>	or an additional dwelling unit. s stoves, microwaves, refrigera				t including, but
<ol> <li>This property shall remain approval.</li> </ol>	a four family dwelling. Any cl	hange of use sha	ill require a separate perm	nit application fo	or review and
<ol> <li>This permit is being approved work.</li> </ol>	ved on the basis of plans subm	nitted. Any devi	ations shall require a sepa	arate approval be	efore starting that
Dept: Building Sta	tus: Approved with Condition	ns <b>Reviewe</b> r	: Tammy Munson	Approval Da	te: 08/19/2010
Note:	Tr.		,		Ok to Issue:
All penetrations between d     and recessed lighting/vent	welling units and dwelling unifixtures shall not reduce the (1			with approved fir	restop materials,
<ol> <li>Separate permits are requir pellet/wood stoves, comme part of this process.</li> </ol>	ed for any electrical, plumbing reial hood exhaust systems an	•	•	•	•
<ol> <li>Application approval based and approrval prior to work</li> </ol>	-	y applicant. An	deviation from approve	d plans requires	separate review
Dept: Fire Sta	tus: Approved with Condition	ns <b>Reviewer</b>	: Capt Keith Gautreau	Approval Da	te: 08/13/2010
Note:	11	+·			Ok to Issue:
) No means of egress shall b	e affected by this renovation				
2) The entire structure shall co	•		грапсу.		
<ol> <li>This permit is being approval.</li> </ol>	-		• •	would require am	nmendments and

#### **BUILDING PERMIT INSPECTION PROCEDURES**

#### Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

  X Final inspection required at completion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

CBL: 057 C035001 Building Permit #: 10-0944

### General Building Permit Application

property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 92 Clark St Portland						
Total Square Footage of Proposed Structure/As	rea Square Footage of Lot	Number of Stories				
	60sf	3rd FL				
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer*	Telephone:				
Chart# Block# Lot#	Name JD Litchman	203-640-				
5/ 6 3	Address 92 Clay K 5+	2445				
	City, State & Zip BrHand me 04102	• }				
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of				
	Name Savue as	Work: \$ <b>3,500</b>				
	Address abore	C of O Fee: \$				
	City, State & Zip					
	Sity, state & Zap	Total Fee: \$ _SO				
Current legal use (i.e. single family)	Number of Residential	Units 4				
If vacant, what was the previous use?						
Proposed Specific use: <u>Bunuts</u> unit						
Is property part of a subdivision? If yes, please name						
Project description: remodel Bathroom mover shower and this						
0.0010						
Contractor's name: Design Concepts AUG - 3 AUG						
Address: Makesicu Dr Dept. of Building Inspections						
City, State & Zip Windham ME 04062 City of Portland Mag 0-9462						
Who should we contact when the permit is ready: Carry Golfz Telephone: 460-9467						
Mailing address: 11 Lakesich Dr Windham ME 04062						
IVIALITY address: IT CALLS CO. IVI COMMAND IVIC CHOCK						
Please submit all of the information outlined on the applicable Checklist. Failure to						
do so will result in the	e automatic denial of your permit.	)				

In order to be sure the City fully understands 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 applications visit the Inspections Division on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, or stop by the Inspections Division office, room 315 City Hall 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.

provisions of the codes	applicable to thi	is permit.		~/	
Signature:	8 A	AA	Date:	12/	10
Ti	ls is not a pern	nit; you may n	ot commence AN	work	until the permit is issue

Revised 05-05-10

