Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 081500

has permission to Remove AT 7 SALEM ST provided that the perso	•	057 C 057	port opening. Install LVL to 2nd floor syst 7 K018001 1 this permit shall comply with all of the City of Portland regulating
Apply to Public Works for str and grade if nature of work r such information.	reet line give nd writt requires before this but lath or oth HO! NOTICE	ings and structures in spectic must be permissi procured in sed-in. 2 EIS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
Fire Dept. Health Dept. Appeal Board Other Department Name	1 8-255	A EMOVING THIS CAR	mah Mally 2/16/08 Director - Building & Inspection Services

City of Portland, Maine - Bui	n Pe	rmit No:	Issue Date:		CBL:						
389 Congress Street, 04101 Tel: ((207) 874-870 3	3, Fax: (2	207) 874-871	6	08-1500			057 K0	18001		
Location of Construction:	Owner Name:			Owner Address:				Phone:			
7 SALEM ST	MARPLE KEITH B & YIN T TU			7 SA	LEM ST						
Business Name:	Contractor Name:			Contr	actor Address:			Phone			
	Mc Constructi	ion		386	Fore St. Suite	304 Portlan	d	2077742330			
Lessee/Buyer's Name	Phone:			Permi	t Type:			Zone:			
	\			Alterations - Multi Family				RY			
Past Use:	Proposed Use:			Perm	it Fee:	Cost of Work	: CE	CEO District:			
3 unit residential	1	ial - Rem				\$8,193	I				
	between kitche	en and liv	ving room	FIRE	DEPT:		INSPECTION:				
	install steel be			Ì	_	Approved	Use Group	IBC 2003 gnature: 2 12/16/08			
	opening. Insta			•	ا	Denied	_				
	system. Conne			<		,	IR	C 200	2		
Proposed Project Description:	1 100 110111111111111111111111111111111	<u> </u>		7	ee inditu	ons 1		~			
Remove wall between kitchen and liv	ring room install	steel bea	um to support	Signa	ture: (e~a	Cesses	Signature:	du 12	116/02		
opening. Install LVL to 2nd floor sys	tem. Connect flo	or joist t	o LVL w/	PEDE	STRIAN ACTA		RICT (P.A.	CICT (P.A.D.)			
hangers tacked on LVL points		•		Actio	n:	d □ Anne	nved w/Cor	ditions (Denied		
				Acito	п жрргоче	ա [] ռաթթ	Oved W/Col	ved w/Conditions Denied			
				Signa			D _B	te: 			
	pplied For: 1/2008				Zoning.	Approval	Į				
\		Special Zone or Reviews			Zoning Appeal			Historie Preservation			
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 		☐ Sho	Shoreland		☐ Variance			Not in District or Landmar			
Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			Does Not Require Review			
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone			Conditional Use			iew		
False information may invalidate permit and stop all work		Subdivision Interp		Interpreta	pretation		Approved				
		Site Plan Approved			ſ	Approved w/Conditions					
		Maj Minor MM Denied				☐ Denied					
DEDMIT ICCI	ICD.	Date	a com	COUL	Date:		Date	ر)		
PERMIT ISSU	14/68										
DEC 1 8 20 CITY OF PORT			<i>,</i> '					•			
			ERTIFICATION								
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit to shall have the authority to enter all are such permit.	o make this applior work describe	ication as d in the a	s his authorized upplication is is	l agen sued,	t and I agree to I certify that the	o conform to ne code offi	o all appli cial's auth	cable laws of the contract of	of this esentative		
SIGNATURE OF APPLICANT	ADDRESS	3		DATE		PHO	NE				

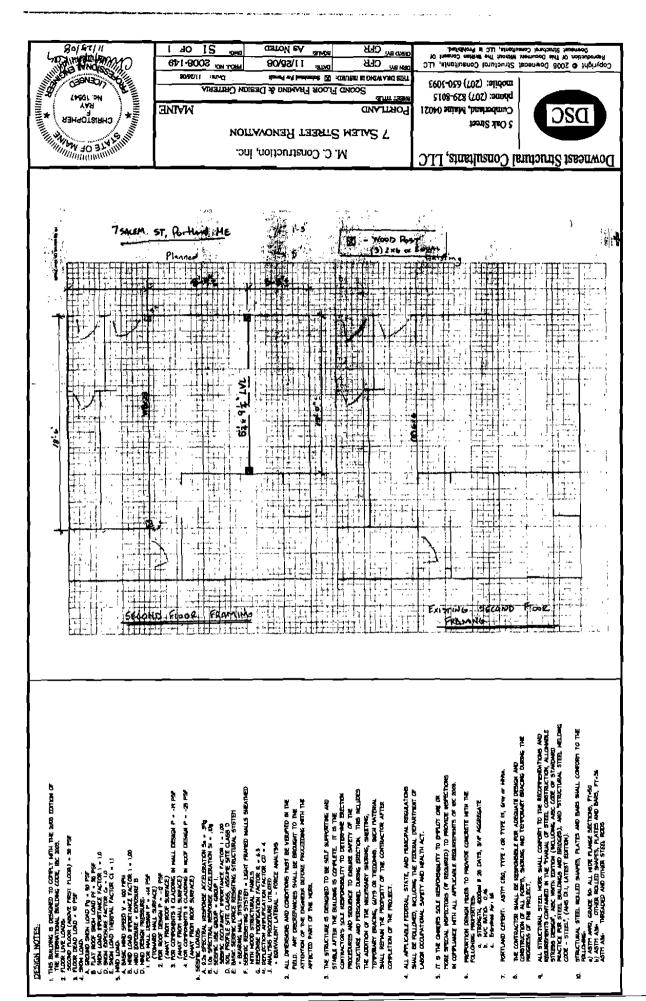
DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

•	ne - Building or Use Permi 01 Tel: (207) 874-8703, Fax:		Permit No: 08-1500	Date Applied For: 12/01/2008	CBL: 057 K018001	
Location of Construction:	Owner Name:	(Owner Address:		Phone:	
7 SALEM ST	MARPLE KEITH B	& YIN T TUN	7 SALEM ST			
Basiness Name;	Contractor Name:		Contractor Address:	Phone		
	Mc Construction		386 Fore St. Suite	304 Portland	(207) 774-2330	
Lessec/Buyer's Name	Phone:		Permit Type: Alterations - Mul	ti Family	_ 	
Proposed Use:		Propos	ed Project Description	===		
install steel beam to support	wall between kitchen and living a t opening. Install LVL to 2nd floo to LVL w/ hangers tacked on LV	or supp	ort opening. Install I	tchen and living room LVL to 2nd floor sys acked on LVL point		
Note: 1) Separate permits shall be 2) This is NOT an approve	Status: Approved with Condition of required for future decks, sheds all for an additional dwelling unit. It is stoves, microwaves, refrigers	s, pools, and/or q You SHALL N	OT add any additio	nal kitchen equipme	Ok to Issue:	
	ain a three (3) family dwelling. A	•	•		ion for review and	
 This permit is being app work. 	proved on the basis of plans subm	nitted. Any devi	ations shall require	a separate approval t	pefore starting that	
Dept: Building	Status: Approved with Conditio	ns Reviewei	: Tom Markley	Approval D	Pate: 12/16/2008	
Note:	••		•	**	Ok to Issue: 🗹	
	quired for any electrical, plumbing s process.	g, HVAC or exh	aust systems. Separ	ate plans may need to		
-	Status: Approved with Condition	ns Reviewe	: Capt Greg Cass	Approval D	_	
Note:					Ok to Issue:	
!	e required from every story. "Stat					

2) All means of egress to remain accessible at all times



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any roperty within the City, payment arrangements must be made before permits of any kind are accepted.

							
Location/Address of Construction: 7 Sale	m St, Front Apartment, 1	st floor					
Total Square Footage of Proposed Structure/A	rea Square Footage of Lot						
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buye	r* Telephone:					
Chart# Block# Lot#	Name Keith Maryle	772-3784					
58-A K 18	Address 7 Salem St.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
TSTON		_					
	City, State & Zip Portland ME 0410	<u>-</u>					
Lassge/DHA (If Applicable)	Owner (if different from Applicant)	Cost Of					
2000	Name	Work: \$ 8195.00					
DEC - 1 2008	Address	C of O Fee: \$ 100.03					
, 1	City, State & Zip	1					
		Total Fee: \$ 8295. Ou					
Current legal use (i.e. single family) Multi-	family asidence 30NAT	L					
If vacant, what was the previous use?							
Proposed Specific use: Multi-fanily							
Proposed Specific use: Multi-family Is property part of a subdivision? No	If yes, please name						
Project description: Roman and Labour	Icitation and living coops. Tasto	il sted beam to					
support opening. Install LIVE to	2rd floor floor system. Connect	floor joint to be					
Whanger. Tick on LVL Points.							
Contractor's name: MC Construction							
Address: 386 Fore St., Suite 304							
City, State & Zip Por Hand, ME 04101	T	elephone: 774 - 2336					
Who should we contact when the permit is read	Who should we contact when the permit is ready: Koth Mayle Telephone: 772-7734						
Mailing address: 7 Salem St. Partl.		Work 662-4639					
Managardania alla Cala information		ing Walland on					

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 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 www.portlandmaine.gov, 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.

Signature:	Date: 11/26/08
, , , , , , , , , , , , , , , , , , , ,	

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

CBL: 057-K-018

Downeast Structural Consultants

Final Report of Special Inspections

Project:

Marple Building Home Renovation

Location:

7 Salem Street, Portland, Maine

Owner:

Keith Marple (Owner). M C Construction, Inc. (General Contractor)

Owner's Address: 7 Salem Street

Portland, ME 04102

Architect of Record:

Structural Engineer of Record:

Christopher F. Ray, P.E.

Cumberland, Maine 04021

To the best of my information, knowledge and better, the Special Inspections required for this project, and itemized in the Statement of Special Inspections submitted for permit, have been performed and all discovered discrepancies have been reported and resolved. See below for additional information;

Comments: Our review (2/26/09) of the installation of a steel beam supporting a portion of the second floor framing as illustrated on sketches SKI-SKS and provided by Downeast Structural Consultants dated 12/4/2008 is installed according to contract documents.

We reviewed the steel beam splice for structural adequacy and strength and no corrective action is required.

(Attach continuation sheets if required to complete the description of corrections.)

Interim reports submitted prior to this final report form a basis for and are to be considered an integral part of this final report.

Respectfully submitted, Special Inspector

Christopher F. Ray, P.E.

02/26/09

(Type or print name)

Christophikay

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1:00 PM				Prefers F	.M. 772-3784	Keith		and the second					
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08/25/95		7 Sak	em St	05	7 K018001	0	Hous	Housi	ng Inspecti	on		147.	



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

CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

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ecetion of Work 7 Sale	m Street
DOUBLE / STATES	THE STATE OF THE S
Cost of Construction \$	Bulkding Fee:
_	
equit Fee \$	Site Fee:
Cel	rtificate of Occupancy Fee:
	Yotal:
hilletina (TT) Dhiimbina (TS)	Electrical (12) \(\) Site Plan (U2)
uilding (IL) Plumbing (IS) _	Electrical (12)
Other	
651 -K-018	
J. VISA	Total Collected s
No work is to be	started until permit issued.
	nied, amount of the Refund is based
0.00 or 20% of the fee, (v	
porder to receive a refund,	you MUST present the Original Pieces
Taken by: Acades	~
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