

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

Please Read Application And Notes, If Any, Attached

## INSPECTION PERMIT

Permit Number: 061012

This is to certify that WATSON JOHN C & NAN R BRYAN YES/John Folsom

has permission to Replace rotted sill

AT 32 ORCHARD ST

061 E002001

PERMIT ISSUED  
JUL 11 2006  
CITY OF PORTLAND

provided that the person or persons term or expiration 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 proceeds before this building or part thereof is started or closed-in. 4 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

*[Handwritten Signature]*  
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: 06-1012	Issue Date: <b>PERMIT ISSUED</b>	CBL: E002001
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Location of Construction: 32 ORCHARD ST	Owner Name: WATSON JOHN C & NANCY R B	Owner Address: 32 ORCHARD ST	Phone: [Blank]
Business Name:	Contractor Name: John Folsom	Contractor Address: 23 Middle Jam Rd Gorham	Phone: [Blank]
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: <b>CITY OF PORTLAND</b>

Past Use: Single Family	Proposed Use: Single Family replace rotted sill	Permit Fee: \$30.00	Cost of Work: \$800.00	CEO District: 2
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Proposed Project Description: Replace rotted sill	FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>T.O.C. 2003</i>
	Signature: [Signature]	Signature: [Signature]

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action:  Approved  Approved w/Conditions  Denied

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

Permit Taken By: dmartin	Date Applied For: 07/11/2006	<b>Zoning Approval</b>	
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<p>1. This permit shall not preclude the Applicant(s) meeting State and Federal requirements.</p> <p>2. All permits do include, if work started within (6) months of date of issuance. False information may invalidate permit work.</p>	<p><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>7/11/06</i></p>	<p><b>Zoning Appeal</b></p> <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 <p>Date: _____</p>	<p><b>Historic Preservation</b></p> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <p><i>Per D.A. replaced in kit</i></p> <p>Date: <i>7/11/06</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	



# General 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.

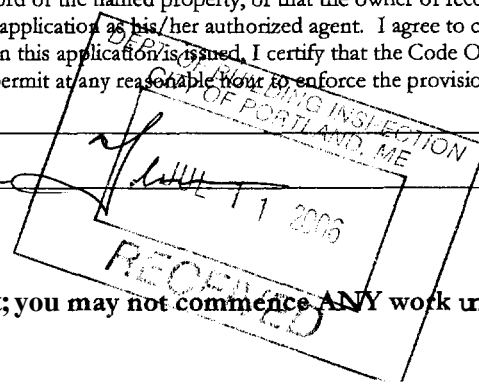
Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# C01      E      002		Owner: BRIAN WATSON	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: X JOHN TOLSON 23 Middle Tam Rd. Gorham Me. 04038		Cost Of Work \$ Fee: \$ C of O Fee: \$
Current Specific use: <u>Single Family</u> If vacant, what was the previous use? Proposed Specific use:			
Project description: <u>Y Replace Rotted Sill And 2x4 Wall studs As Needed on existing Bulkhead 2x6 ft. 2x4 ft (Note: Pictures Att)</u>			
Contractor's name, address & telephone: X <u>John Tolson Const.</u> Who should we contact when the permit is ready: <u>23 Middle Tam Rd. Gorham Me. 04038</u> Mailing address:      Phone: <u>892 4216</u>			

**Please submit all of the information outlined in the Commercial Application 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 visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections office, room 315 City Hall or call 8748703.

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: 7/11/06



**This is not a permit; you may not commence ANY work until the permit is issued.**



Replace sill with 2x6 p.f.  
2x4 wall studs As Needed.  
Also white cedar shingles and wall sheathing  
to Access sill.

sills rotted +  
possibly wall rot

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 06-1012	<b>Date Applied For:</b> 07/11/2006	<b>CBL:</b> 061 E002001
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<b>Location of Construction:</b> 32 ORCHARD ST	<b>Owner Name:</b> WATSON JOHN C & NANCY R B	<b>Owner Address:</b> 32 ORCHARD ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> John Folsom	<b>Contractor Address:</b> 23 Middle Jam Rd Gorham	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> Single Family replace rotted sill	<b>Proposed Project Description:</b> Replace rotted sill
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Dept: Zoning      Status: Approved      Reviewer: Tammy Munson      Approval Date: 0711 112006  
 Note:      Ok to Issue:

Dept: Building      Status: Approved with Conditions      Reviewer: Tammy Munson      Approval Date: 0711 112006  
 Note:      Ok to Issue:

1) Per Deb Andrews, Historic Preservation, the exterior of the area must be replaced in kind.

