	et, 04101 Tel: (207) 874-870		1604-0034	JAN 1 3 2004	062 B001001		
Location of Construct 144 Pine St	on: Owner Name: Barr Peter L	8-	144 Pine St				
Business Name:	Contractor Nat		Contractor Address:	TTY OF PORTLA	Phone		
Dusintas I (MIR.)	no contracto		Portland				
Lessee/Buyer's Name	Phone:			Permit Type:			
·			Alterations - Dwe	llings	R-6		
Past Use:	Proposed Use:		Permit Fee:	Cost of Work: C	EO District:		
single family	-	- interior renovations	\$201.00	\$20,000.00	2		
Proposed Project Desc	riptioa:			Denicd Use Grou	ир: R-З туре: 5В 30СА 1999		
interior renovation	S		Signature:	Signature	hal		
Permit Taken Bu	Date Applied For		Action: Approv		onditions Denied		
Permit Taken By: Date Applied For: tmm 01/13/2004			Loning	Approval			
1. This permit an	plication does not preclude the	Special Zone or Revi	ews Zonin	g Appeal	Historic Preservation		
Applicant(s) f	Applicant(s) from meeting applicable State and Federal Rules.		Variance] Not in District or Landmark		
2. Building perm septic or elect	its do not include plumbing, rical work.	U Wetland	Miscellar		Does Not Require Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zong	Conditional Use		🔲 Requires Review		
False informat permit and sto	ion may invalidate a building p all work	Subdivision	Interpretation		Approved		
		Site Plan		d ([] Approved w/Conditions		
		Maj 🔲 Minor 🗍 MM	C Denied	1 [Denied		
				ļ	lal I		

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

City of Portland, N 389 Congress Street, (•	Permit No: 04-0034	Date Applied For: 01/13/2004	CBL: 062 B001001				
Location of Construction:		Owner Name:	Owner Address: Phone:						
144 Pine St		Barr Peter L &	;	144 Pine St					
Business Name: Contractor Name:			:	Contractor Address: Phone					
no contractor / self			self	Portland					
Lessee/Buyer's Name		Phone:		Permit Type: Alterations - Dwellings					
Proposed Use: single family - interior	renovations		-	d Project Description: or renovations					
Dept: Zoning Note:	Status:	Approved	Reviewer	Tammy Munson	Approval D	ate: 01/13/2004 Ok to Issue: ☑			
Dept: Building Note:	Status:	Approved	Reviewer	Tammy Munson	Approval D	ate: 01/13/2004 Ok to Issue: ☑			

BUILDING PERMIT INSPECTION PROCEDURES Please call <u>874-8703</u> or <u>874-8693</u> to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

_____ Pre-construction Meeting: Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

Footing/Building Location Inspec	ction: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	ical: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per- inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

_____ If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, **BEFORE THE SPACE MAY BE OCCUPIED**

ignature of applicant/designee

Signature of Inspections Official

Date Date

Building Permit #: _______

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:	144	fini	Ati	id	
Total Square Footage of Proposed Struc	sture	Square Foo	tage of Lot	_	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 62 B	Owner:	Pity/	Constant		bhone: 17-772-0276
Lessee/Buyer's Name (If Applicable)	Applicani telephone ی	t name, addre e: AMMC	ss &	Cost Of Work: \$	20,000,00
Current use:		k			
Approximately how long has it been vac	cant:				
Proposed use: Ruidun Project description:	u	tand	tual	Comp	ments
Contractor's name, address & telephone		ame o	is abo	ne	
Who should we contact when the permi Mailing address:	lt is ready: <u></u>	sam	al a	love	
We will contact you by phone when the review the requirements before starting and a \$100.00 fee if any work starts befo	iny work, wit	n a Plan Revie			
F THE REQUIRED INFORMATION IS NOT INC DENIED AT THE DISCRETION OF THE BUILDIN NFORMATION IN ORDER TO APROVE THIS P	G/PLANNING		MARE BAAM DE	ALLINE ADDIS	A 141
hereby certify that I am the Owner of record of the ave been authorized by the owner to make this apj insoliction. In addition, if a permit for work described hall have the authority to enter all areas covered by this permit.	plication as his/h In this application	er authorized age en is issued, i certify	nt. I agree to a I that the Code	conform to all ap Official's autho	oplicable laws of this Inted representative
signature of applicant:	tam by	Buy	Date: 0	11/13	102
This is NOT a permit, you may r	nof comme	nce ANY wa			/ 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

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	RTLAND, MAINE
Department of	Building inspections
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Plumbing (15)	Electrical (I2) Site Plan (U2)
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	DT A PERMIT
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	Intil PERMIT CARD is actually posted
	of fee is no guarantee that permit will
PRESERVE THIS	RECEIPT. In case permit cannot be
criminal amount of the fee	will be refunded upon return of the
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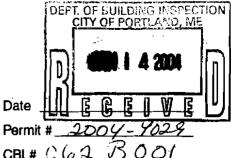
Form # P 04 DISPLAY THIS CARE		_
Please Read Application And Notes, If Any, Attached	PERMIT	Permit Number: 040034
This is to certify thatBarr Peter L & /no contractor		
has permission to interior renovations		
AT 144 Pine St	(<u>062</u> B(001001
provided that the person or persons, of the provisions of the Statutes of I the construction, maintenance and u this department.	ine and of the mances of the of buildings and substures, a lication inspection must	his permit shall comply with all the City of Portland regulating and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	n and we in permission procu re this and ding or the thereon ad or generation of social in the social IR NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
Fire Dept		
Appeal Board		
Other Department Nerrie		Director Billiging & Inspection Services
PENA	LTY FOR REMOVING THIS CARD	(
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and a second second Second second		
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Form # P 01 To the Chief Electrical Inspector, Portland Maine:

ELECTRICAL PERMIT City of Portland, Me.





The undersigned here						s Date	E C E I	<u>ע</u> 8 ח
in accordance with the		•			rdina	ince, Permit #2	204-96	24
National Electrical Coo				ns:		СВL# <u>С</u>	·	
LOCATION: 144	Pri	e St. 3Flr	S	METER M	AKE	& #		<u> </u>
CMP ACCOUNT # _				OWNER	Pr	ter Rave		
TENANT				PHONE #	_	· · · · ·		- (a Pac
	. <u> </u>		· .			W/Schwith System	TAL EACH	FEE
OUTLETS	Val	Receptacles	30	Switches		Smoke Detector	.20	18 100
								(1) -
FIXTURES	22	Incandescent		Fluorescent		Strips	.20	4.700
SERVICES		Overhead		Underground		TTL AMPS <800	15.00	
	-	Overhead		Underground		>800	25.00	
	-			Ghacigioana				
Temporary Service		Overhead		Underground			25.00	
	•					· · · · ·	25.00	¢
METERS	+	(number of)					1.00	
MOTORS		(number of)				{	2.00	
RESID/COM		Electric units		· · ·	. –		1.00	
HEATING	_	oil/gas units		Interior		Exterior	5.00	·
APPLIANCES	2	Ranges	1	Cook Tops	1	Wall Ovens	2.00	497
· · ·	-4	Insta-Hot		Water heaters	-4-	Fans	2.00	
		Dryers		Disposals	1	Dishwasher	2.00	4 %50
		Compactors	-	Spa	.	Washing Machine	2.00	7,750
		Others (denote)		<u> </u>			2.00	
MISC. (number of))	Air Cond/win					3.00	·
		Air Cond/cent				Pools	10.00	
		HVAC		EMS		Thermostat	5.00	
-	1	Signs	1				10.00	
·	-	Alarms/res					5.00	
		Alarms/com					15.00	
		Heavy Duty(CRKT)					2.00	
		Circus/Carnv	-		ŀ		25.00	· ·
		Alterations					5.00	
	_	Fire Repairs					15.00	
		E Lights	·	-		,	1.00	·
		E Generators					20.00	
PANELS		Service		Remote			4.00	ļ
TRANSFORMER	_	0-25 Kva	{				5.00	
	_	25-200 Kva	<u> </u>	<u> </u>			8.00	·
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	_			+		TOTAL AMOUNT DUE		20/00
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CONTRACTORS NA	ME /		Ē	fectric I				7
TELEPHONE Z	07	799-5829	<u> </u>			/ 		
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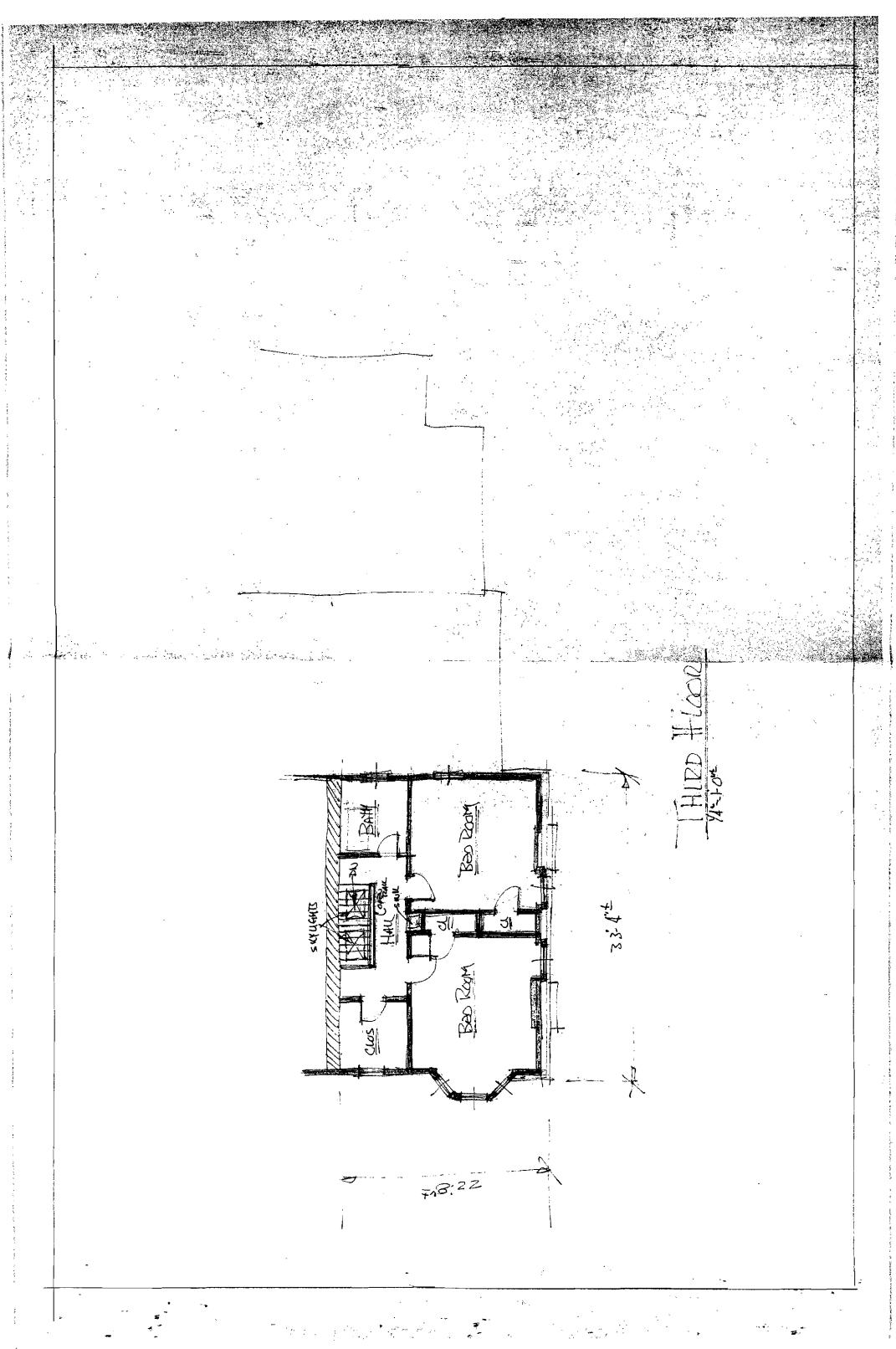
White Copy - Office ٠

VIA

SIGNATURE OF CONTRACTOR

Yellow Copy - Applicant

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