

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

## BUILDING INSPECTION

# PERMIT

Permit Number: 060495

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED

APR 10 2006

This is to certify that SARGENT COLIN W & NAOMY D SARGENT  
has permission to re-configure existing closet to create a lavatory existing bathroom  
AT 58 THOMAS ST 062 B016001

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.

CITY OF PORTLAND

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 procured before this building or part thereof is lashed 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 \_\_\_\_\_  
DepartmentName

*[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: 06-0495	Issue Date: <b>PERMIT ISSUED</b>	CBL: 002-8016001
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Location of Construction: 58 THOMAS ST	Owner Name: SARGENT COLIN W & NANCY	Owner Address: 58 THOMAS ST	Phone: <b>APR 10 2006</b>
Business Name:	Contractor Name:	Contractor Address:	Zone: <b>CITY OF PORTLAND</b>
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Past Use: Single Family Home	Proposed Use: Single Family Home/ re-configure existing closet to create a larger existing bathroom	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 2
Proposed Project Description: re-configure existing closet to create a larger existing bathroom		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group <i>12-3</i> Type <i>513</i> <i>JRC 2003</i>	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 04/11/2006	<b>Zoning Approval</b>	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input 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>4/12/06</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 checked="" type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <i>Interior only</i> <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <p>Date: <i>4/12/06</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.

Location/Address of Construction: <u>58 Thomas St.</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>D</u> Block# <u>B</u> Lot# <u>11"</u>	Owner: <u>Colin + Nancy Sargent</u>	Telephone: <u>207 329 6541</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work \$ <u>1,000</u> Fee: \$ <u>30</u> - C of O Fee: \$ _____
Current Specific use: _____	<u>Single Family Home</u>	
Proposed Specific use: _____	<u>Single family home</u>	
Project description:	<u>existing</u> <u>Reconfigure closet wall to accommodate plumbing for a bath.</u> <u>No additional walls added</u>	
Contractor's name, address & telephone: <u>Colin Sargent</u>		
Who should we contact when the permit is ready: <u>Colin Sargent</u>		
Mailing address: <u>165 State Street</u> <u>Portland, ME 04101</u>		Phone: <u>207 329 6541</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 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 of applicant: <u>Colin Sargent</u>	Date: <u>12 April 06</u>
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This **is not** a permit; you may not commence **ANY** work until the permit **is** issued.

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

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

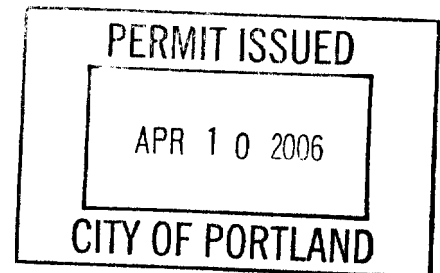
Permit No: 06-0495	Date Applied For: 0411 112006	CBL: 062 B016001
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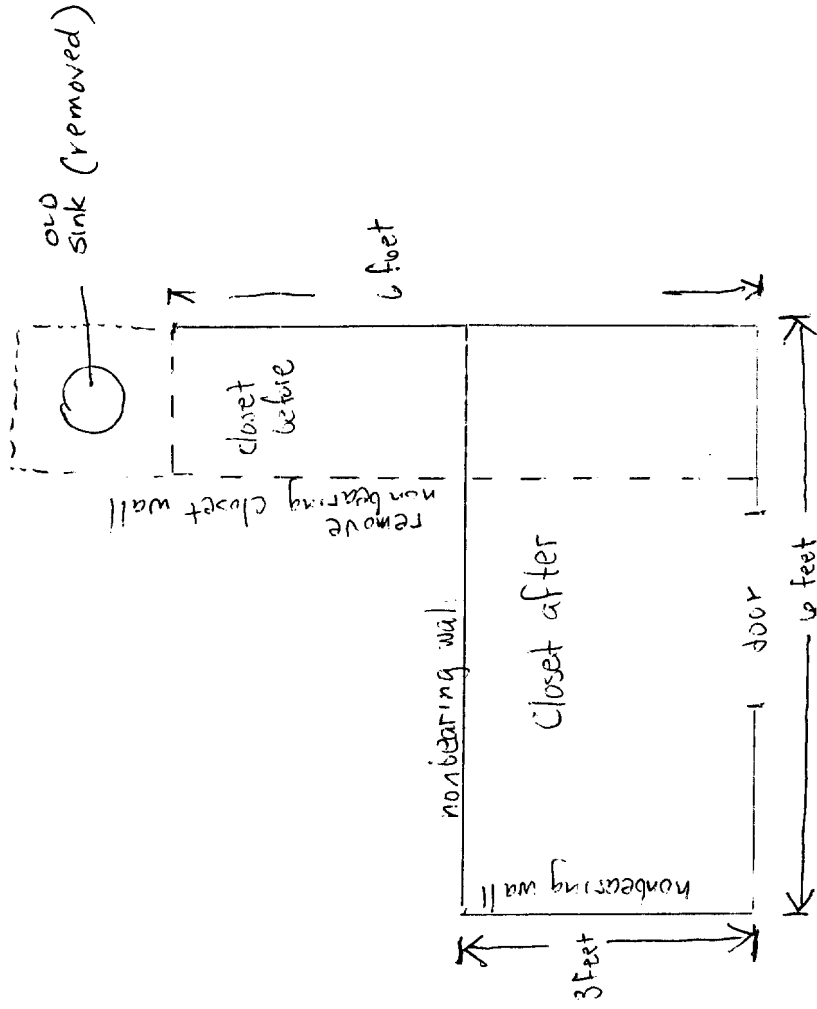
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Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home/ re-configure existing closet to create a larger existing bathroom	Proposed Project Description: re-configure existing closet to create a larger existing bathroom
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Dept: Zoning Note:	Status: Approved	Reviewer: Tammy Munson	Approval Date: 0411212006 Ok to Issue: <input type="checkbox"/>
Dept: Building Note:	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 0411212006 Ok to Issue: <input type="checkbox"/>

1) Separate permits are required for any electrical, plumbing, or heating.





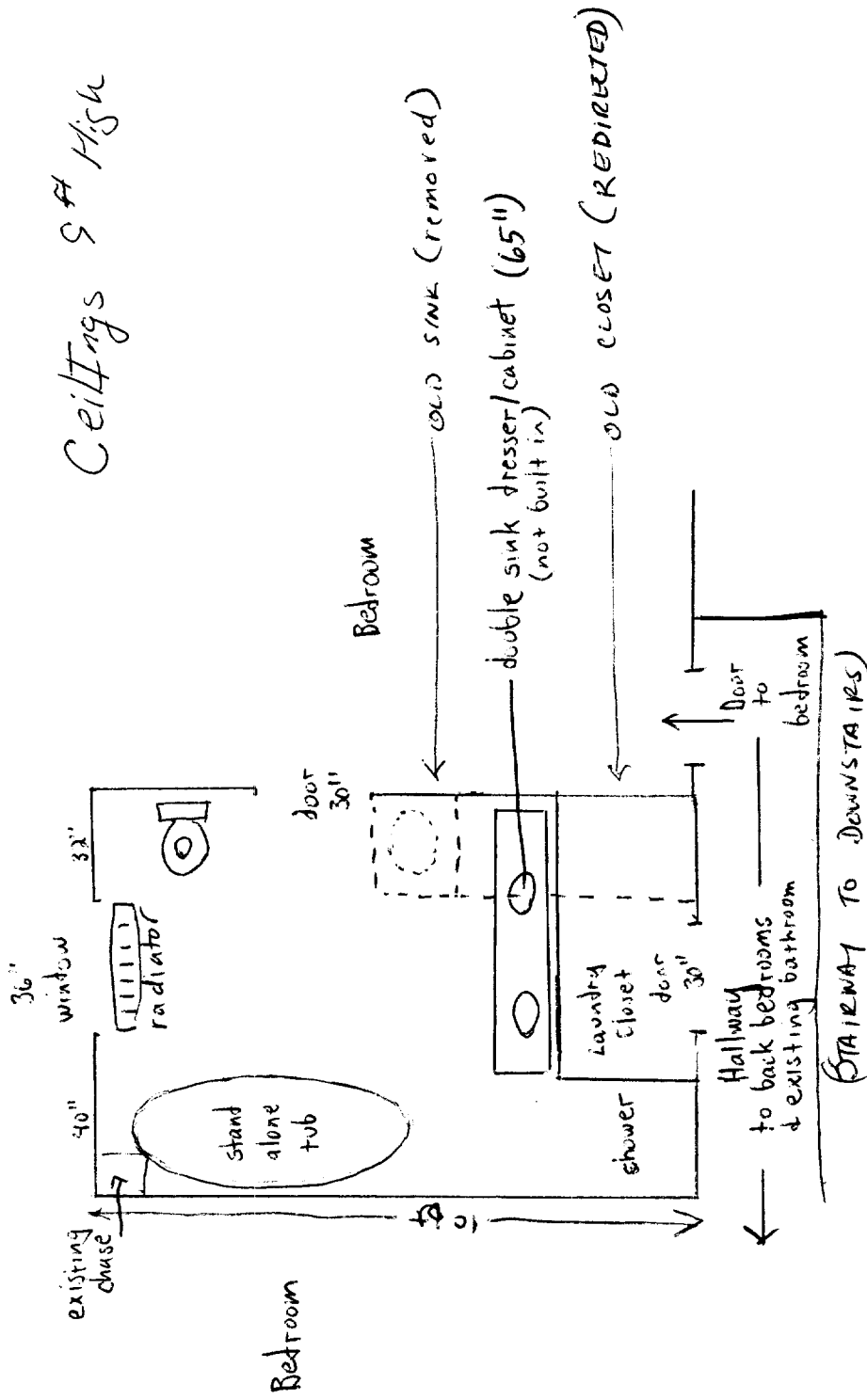
2x4 + drywall construction

Swing position of closet

58 Thomas St.

2nd Floor existing  
 Reposition closet wal to accommodate plumbing for bath

Ceilings 9' High



Detail of Work

2nd Floor

58 Thomas Street