Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

# PERIM

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Ρď	rmit l	umber: 06	0601		' 
		APR	2 7	2006	

CITY OF PORT

epting this permit shall comply with all

Exctures, and of the application on file in

nances of the City of Portland regulating

This is to certify that SARGENT COLIN W & N. CY D SARGENT/Tony Fusc

has permission to \_\_\_\_\_ replace footings & supports \_\_\_\_\_ ear pord

062 B016001

AT 58 THOMAS ST

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

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

ification of inspection must be on and vision permitted on proceeding of the control of the cont

tine and or the

e of buildings and

Rion 4

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

#### OTHER REQUIRED APPROVALS

Director - Building & Inspection Sprvices

City of Portland, M	Iaine - Buildi	ng or Use l	Permi	t Application	Реп	mit No	LEVIN	1 199	ULUBL:	
389 Congress Street, 0	04101 Tel: (20	7) 874-8703	, Fax:	(207) 874-871 <i>6</i>	s 🗀	06-0601			062 B	16001
Location of Construction:	0	wner Name:			Owner	Addres:	APR	2 7 2	006 Phene:	
58 THOMAS ST	s	ARGENT CO	DLIN W	/ & NANCY	58 TI	HOMAS ST				
Business Name:	C	ontractor Name	:		Contra	ctor A dress	OTTY OF	DAD	Phone	
	Τ	ony Fusco	_				UKH aUF	PUK	<b>LAND</b> 8312	910
Lessee/Buyer's Name	Pi	one:			Permit	• -			<del>_</del>	Zone:
	Ĺ			] [	Alte	rations - Dv	vellings			Rb
Past Use:	Pı	oposed Use:			Permi	Fee:	Cost of Wor		CEO District:	
Single Family Home		-	Home/ replace			\$75.00	\$5,5	00.00	2	
	Į te	ootings & sup	ports to	rear porch	FIRE	DEPT:	Approved		CTION:	+
						[	Denied		roup: ドク	Type: daty Foundaty
									o. – o	2 LOWE
Proposed Project Description			<del></del> ,					JI 1	RC-200	<i>,</i>
replace footings & supp		h			Cianat			Signat	MAK	4/21/2
replace roomings or supp	orts to rear pore				Signatu PEDES		TVITIES DIS		/ /	1101100
									\ /	
						Action: Approved Approved			i w/Conditions Denied	
					Signati	ure:			Date:	
Permit Taken By:	Date Appli	ed For:				Zonin	g Approv	al		_
ldobson	04/27/2	006								
1. This permit applica	ation does not pre	clude the	Spe	cial Zone or Review	WS	Zon	ing Appeal		Historic Pro	eservation
Applicant(s) from	meeting applicab	le State and	☐ St	oreland	ĺ	☐ Varian	ce	}	Not in Dist	ict or Landmar
Federal Rules.										
2. Building permits d		mbing,	□ w	etland		☐ Miscel	laneous		Does Not R	equire Review
septic or electrical			Í		ŀ	_			_	
3. Building permits a			l 🗌 FI	ood Zone	Conditional Use			Requires Review		
within six (6) month False information in				4V_						
permit and stop all	-	ounding	]	ibdivision ()	.	Interpr	etation		Approved	
F			l ┌┐ 。;	te Plan	8-1	Appro	uad.		Approved v	v/Conditions
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			Date	MB 4/21	106	Date:		I	Date: XIMB	per
			7	1	-	<del>-</del>			Denied Date: Do.A	·4/27/
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			(	CERTIFICATIO	ON					
I becaby cartify that I an	s the owner of ro	aged of the ma	mad pr	oparty or that th		and wate	ia authoriaa	1 6 46.0	OUTDOE OF FAC	sed and that

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.

such permit.				
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE	
RESPONSIBLE PERSON IN CHARGE OF WORK TITLE		DATE	PHONE	

# BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 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.

A Pre-construction Meeting will take place	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electri	cal: 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 you if your project requires a Certificate of inspection  If any of the inspections do not ocphase, REGARDLESS OF THE NOTICE	Occupancy. All projects DO require a final cur, the project cannot go on to the next
—— CERIFICATE OF OCCUPANICE BEFORE THE SPACE MAY BE OCCU	ES MUST BE ISSUED AND PAID FOR,
Tony Fusion	5-1-06
Signature of Applicant/Designee	Date
Signature of Inspections Official	Date
CBL: 62 16 Building Permit	#: <u>000601</u>

•	<b>1aine - Building or Use P</b> 04101 Tel: (207) 874-8703,		Permit No: 06-0601	Date Applied For: 04/27/2006	CBL: 062 B016001
Location of Construction:	Owner Name:		Owner Address:		Phone:
58 THOMAS ST	SARGENT CO	LIN W & NANCY	58 THOMAS ST		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Tony Fusco		15 Eleanor Street	Portland	(207) 831-2910
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Dwe	llings	
			_		
Dept: Zoning Note:	Status: Approved with Con	nditions Reviewe	r: Jeanine Bourke	Approval I	Oate: 04/27/2006 Ok to Issue: ☑
1) The exact footprint	must be maintained				
Dept: Building	Status: Approved with Co.	nditions Reviewe	r: Jeanine Bourke	Approval I	Date: 04/27/2006
Note:					Ok to Issue: 🔽
1) This permit approve	es the new foundation only for	the existing porch stru	icture		

## 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: 58	Thomas ST	PORT ME
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:
Chart# Block# Lot#	COLLEN + NANCY	329-6541
62 B 16	SArgen	
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: \$ 5500.
	TONY, FUSCO CT	Work: \$ 3300.
	15 ELEANOR -	Fee: \$ 75/w
	TONY FUSCOST 15 ELEANOR ST PORT ME 04103	C COE A
Current Specific use:	1000	C of O Fee: \$
If vacant, what was the previous use?		<del></del>
Proposed Specific use:		<del></del> _
	- 1 11' - 1	
Project description: To PUT I	IN A A Frost W	JALIEN INEN
From The GROUND U	IP To Porch 8'	" Block
TRUM THE UTILES	) · · · · · · · · · · · · · · · · · · ·	
		1384-17
Contractor's name, address & telephone:		
Who should we contact when the permit is rea	dy: TONY 1-USCO	
Mailing address:	Phone: 031-2910	
Diagon and misself of the information and	dia al in the Commercial Application C	Lilian
Please submit all of the information our Failure to do so will result in the autom		neekust.
a mare to to so was result in the autom	ane demai or your permit	~
In order to be sure the City fully understands the fu	ll scope of the project, the Planning and Developn	nent Department may

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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, 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:	Tony From	Date: 4 - 27-06

HOUSE PorcH

THE PORCH IS HEIDED UP By 1/2 Pipes 3 HCROSS The FRONT. They Are RUSTED Through. THE Porch is Sagging. I WANT TO DIG A 4' FROST WALC POUR CONCRETE TO GrouND LEUEL Then Block up to DECK. 3FT HIGH DECK. 3FT NOT AT THIS TIME BUT DOWN THE ROAD THEY WANT TO PUT HEAT IN IT AN MAKE A OFFICE Them SE/VES.

# **ELECTRICAL PERMIT City of Portland, Me.**

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance,

Date 4 12 -06

Permit # 2006 - 43/5

004TON: 58	ind the following specifical	-		CBL# <u>62</u>	<u> </u>
·	700043 3	MEIEK N	IAKE	Dancy + Color	50,000
		OWNER_	<i>,</i>	Makey 1 Oliv	<u> </u>
ENANT		PHONE #	· —		
	·	<del></del>			TAL EACH FEE
OUTLETS	Receptacles 5	0 Switches	30	Smoke Detector	.20
		<u> </u>			
FIXTURES	Incandescent 2	Fluorescent		Strips	.20
0577/1050				T-1 11 100	45.00
SERVICES	Overhead	Underground		TTL AMPS <800	15.00
	Overhead	Underground		>800	25.00
	O contract	1100-0-0-0	<u> </u>	TTI AMERIC	05.00
Temporary Service	Overhead	Underground	<del> </del>	TTL AMPS	25.00
- HETERA			<b></b>		25.00
METERS	(number of)				1.00
MOTORS	(number of)				2.00
RESID/COM	Electric units				1.00
HEATING	oil/gas units	Interior	ļ	Exterior	5.00
APPLIANCES	Ranges	Cook Tops		Wall Ovens	2.00
· _	Insta-Hot	Water heater	\$	Fans	2.00
	Dryers	Disposals		Dishwasher	2.00
	Compactors	Spa		Washing Machine	2.00
	Others (denote)			TION	2.00
MISC. (number of)	Air Cond/win			Pools DING INSPECTION  Pools DING INSPECTION  TO OFFICE OF THE POOL OF THE POO	3.00
	Air Cond/cent			Pools DING AND	10.00
	HVAC	EMS		Enguriostat \	5.00
	Signs		DEPT	0000	10.00
	Alarms/res		Ľ_	Works 15 Mile	5.00
	Alarms/com			APR	15.00
	Heavy Duty(CRKT)			APRICENTO	2.00
	Circus/Carnv			CECE	25.00
	Alterations		,	K	5.00
	Fire Repairs				15.00
<del></del>	E Lights				1.00
	E Generators				20.00
PANELS	Service	Remote		Main	4.00
TRANSFORMER	0-25 Kva				5.00
	25-200 Kva				8.00
	Over 200 Kva				10.00
				TOTAL AMOUNT DUE	
	MINIMUM FEE/COM	IMERCIAL 45.00		MINIMUM FEE 35	5.00
	-11 (1	/ /			
CONTRACTORS NAME	-folsom Ele	edri c		_ MASTER LIC. #/S	-110
ADDRESS 94	Asuswams	RU		LIMITED LIC. #	162
ELEPHONE S83					1 1
Coll 67	71-2484	111		_	(A)

White Copy - Office

SIGNATURE OF CONTRACTOR

**Yellow Copy - Applicant**