

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0186	Issue Date: FEB 17 2006	CEL: 062 C011001
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Location of Construction: 67 THOMAS ST	Owner Name: Mark & Deborah Fuller	Owner Address: 25 Adelbert Street	Phone: 207-767-0629
Business Name:	Contractor Name: Mark Fuller	Contractor Address: 29 Adelbert Street South Portland	Phone: 2077670629
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	Zone: R-6

Past Use: 2 Unit Residential	Proposed Use: 2 Unit Residential/ Remodel 2 bedrooms, Kitchen, Bath & Deck	Permit Fee: \$471.00	Cost of Work: \$50,000.00	CEO District: 2
<p align="center"><i>legal use - 2 dwelling units</i></p>		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i>	

Proposed Project Description: Remodel 2 bedrooms, Kitchen, Bath & Deck	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Idobson	Date Applied For: 02/06/2006	Zoning Approval	
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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 align="center">Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>2/17/06</i>	<p align="center">Zoning Appeal</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 Date:	<p align="center">Historic Preservation</p> <input 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 Date: <i>2/17/06</i>
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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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	

Proposed Use: 2 Unit Residential/ Remodel 2 bedrooms, Kitchen, Bath & Deck	Proposed Project Description: Remodel 2 bedrooms, Kitchen, Bath & Deck
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 02/17/2006

Note: **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 02/17/2006

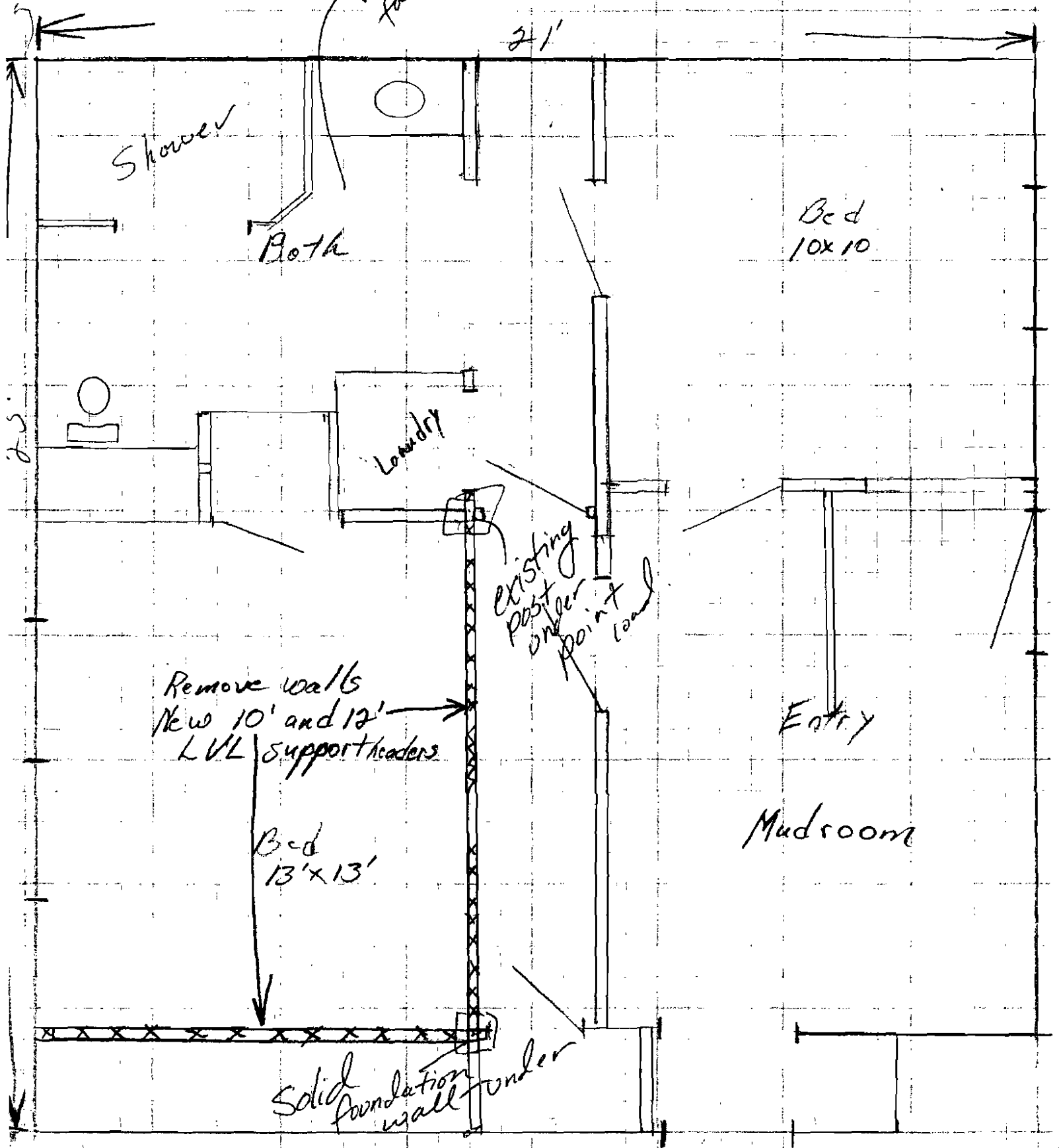
Note: **Ok to Issue:**

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, or heating.
- 3) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating.
- 4) This permit DOES NOT certify the use of the property or building. It only authorizes the construction activities.

1st floor -

No windows
Ventilation scale: $\frac{3}{8}$ " per 1"
fan

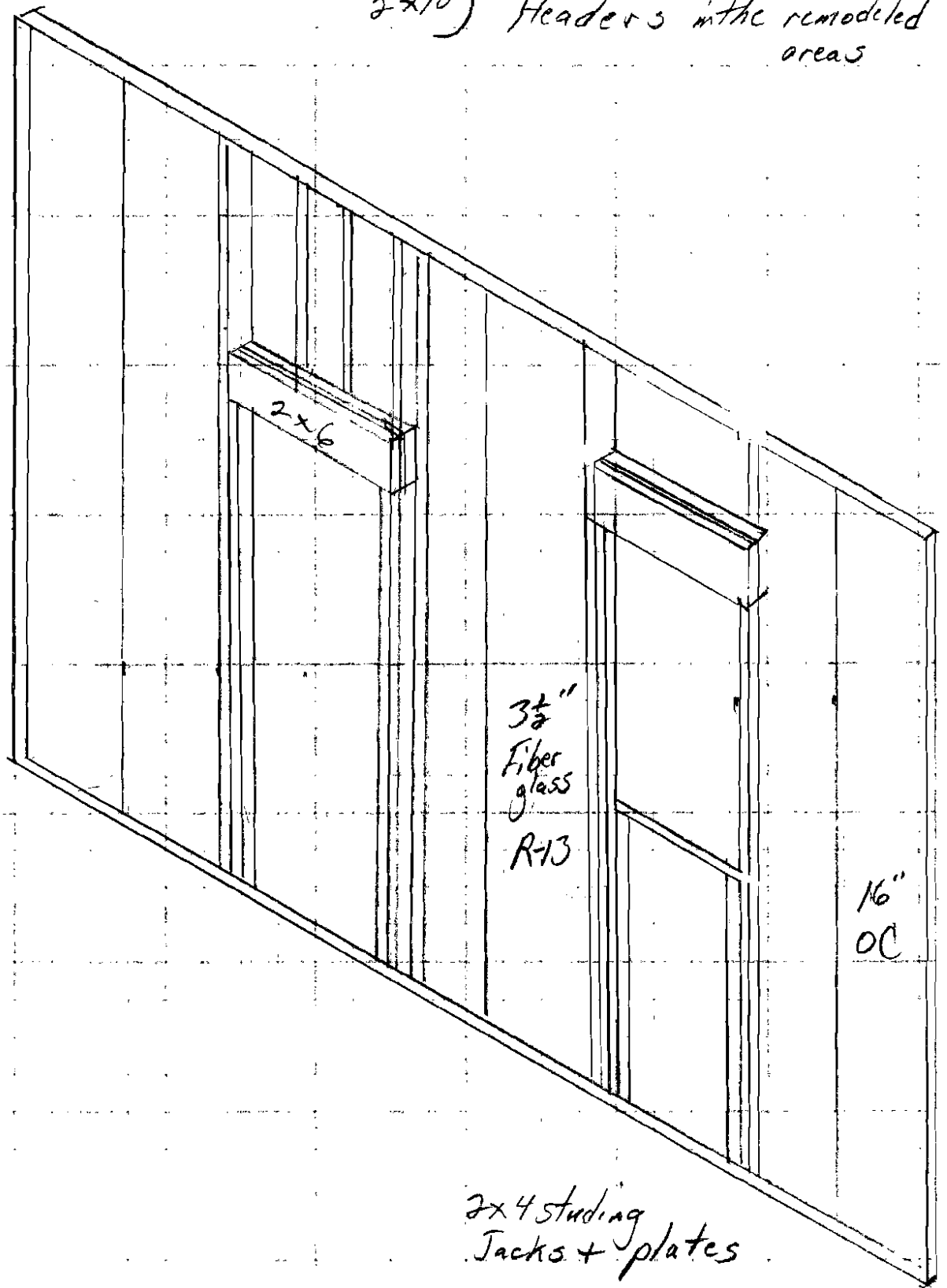
Proposed



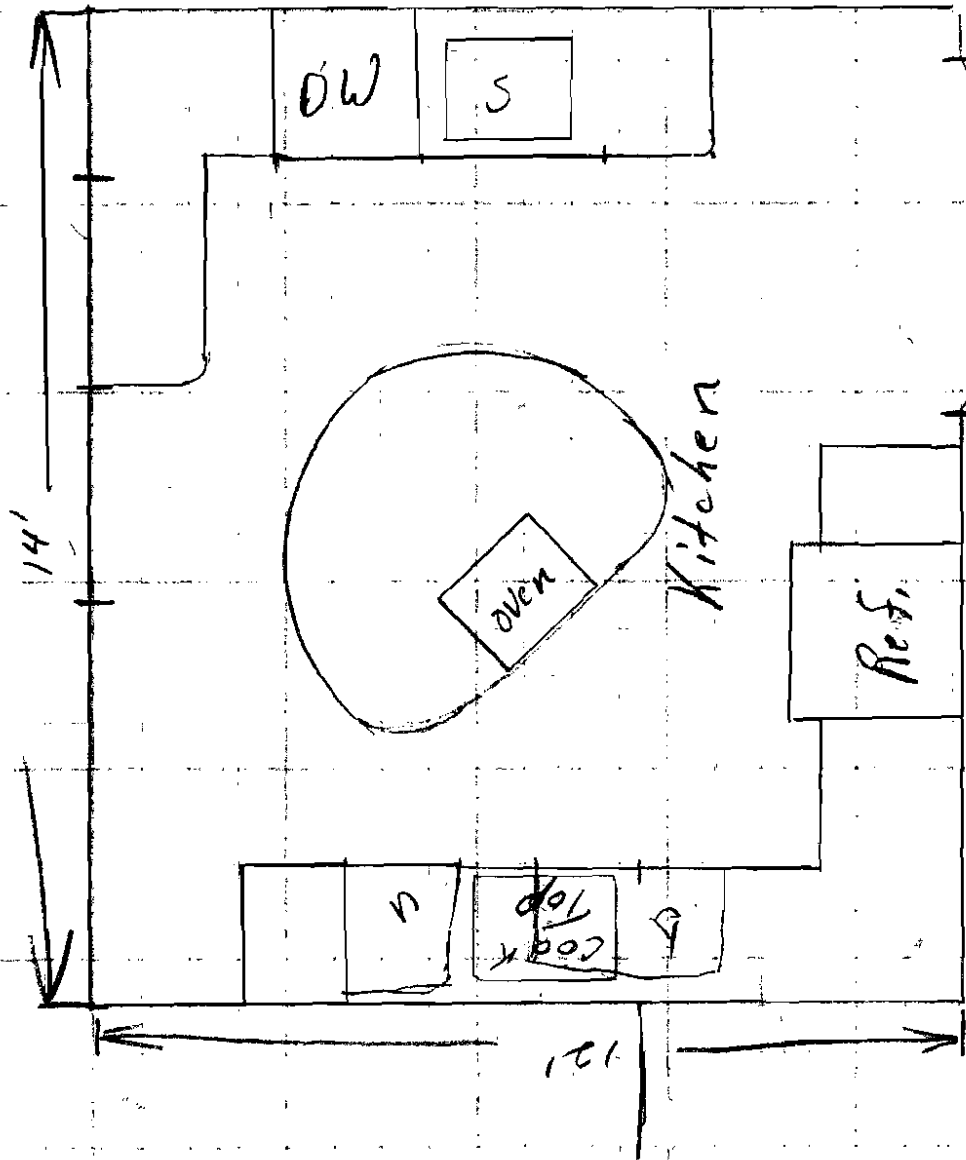
Install

Double

2×6 " } with $\frac{1}{8}$ " Plywood sandwiched
 2×8 " } for Window + Door
 2×10 " } Headers in the remodeled
areas

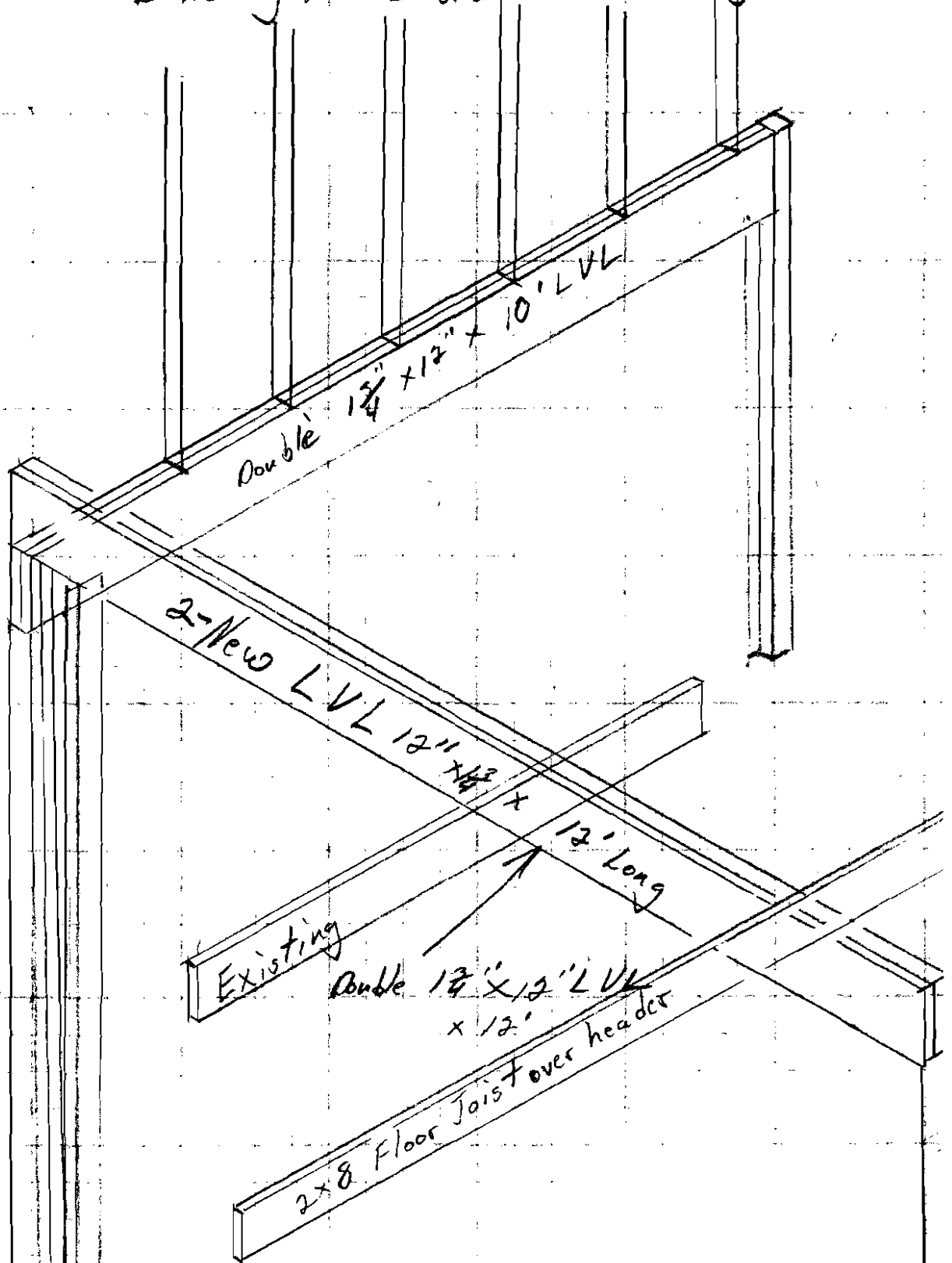


2×4 Studing
Jacks + plates



New
Kitchen
layout

Existing 2x4 Gable end studding



lands on
foundation
wall

Triple 2"x4
Jack studs

First Floor Bedroom
support Headers

Window schedule

- | | W | H |
|-----|-----|-----|
| 4- | 33" | 76" |
| 11- | 30 | 56" |
| 9- | 33 | 62" |
| 1- | 25" | 68" |
| 1- | 30" | 76" |

check w/ Deb
for historic
approval

Door Schedule

- 3 - 2'-6" x 6'-6" interior
- 1 - 2'-8" x 6'-6" interior
- 1 - 2'-10" x 6'-6" interior
- 1 - 3'-0" x 6'-8" exterior
- 1 - 4'-0" x 7'-0" interior double door

Insulation

R-13

Walls & Ceiling

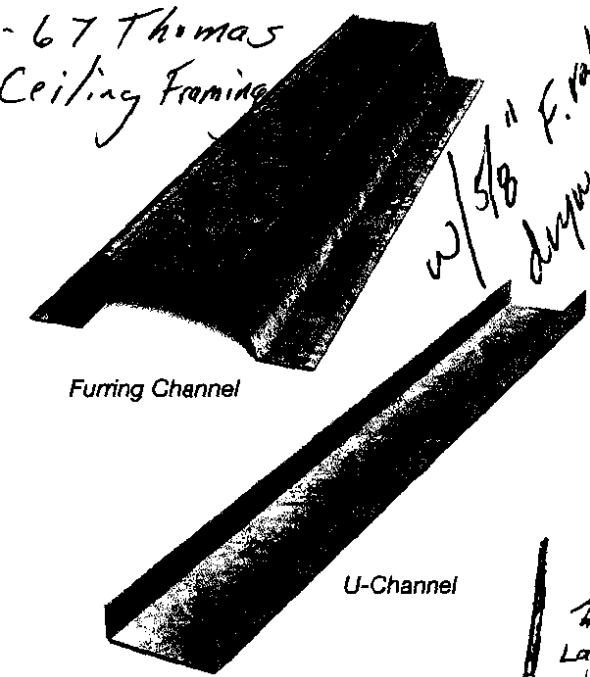
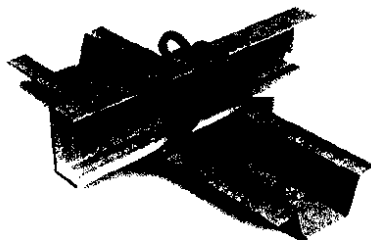
Rigid structural support for gypsum wallboard, veneer plaster or drop ceiling assemblies.

*Mark Fuller
65-67 Thomas
Ceiling Framing*

- Commonly used non-combustible ceiling assembly.
- Rigid framework for high-quality finish.
- Furring clips easily snap into place for fast assembly.

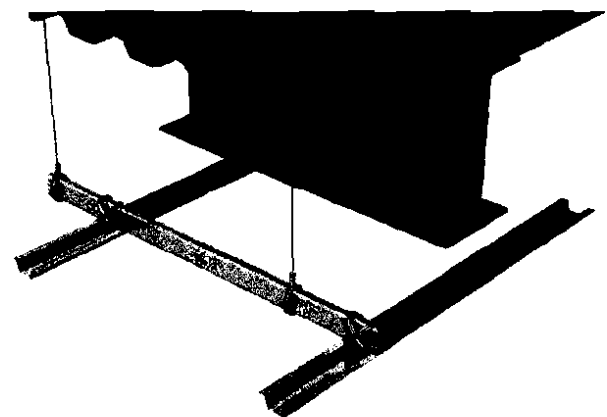
In a ceiling assembly 1-1/2" or larger, U-Channel is suspended from the overhead structure using hanger wire. Drywall furring channel is commonly clipped or wire-tied perpendicular to the underside of the U-Channel at appropriate intervals for screw-attaching drywall. Assemblies are installed per the project specification or ASTM C754 requirements.

Furring channel can also be attached directly to the underside of bar joists. The furring is installed perpendicular to the joists and wire-tied at appropriate intervals. Wire ties are required for fire-rated and multilayer assemblies.



w/ 5/8" F. rated drywall.

1/4" x 1/2" Lag bolts in Joists



Furring Channel (FC-Series™)

DMF Product Code	SSMA Reference	Thickness				Size		Weight/ft.		Packaging	
		Gauge	Mils	Design Thickness Inches	Design Thickness (mm)	Inches	(mm)	lbs.	(kg)	Pcs./Bundle	Pcs./Skid
FCN	087F125-18	25	18	0.0188	0.48	7/8	22.2	0.237	0.107	10	560
FCM	087F125-43	18	43	0.0451	1.15			0.555	0.251	NA	250
FCND	150F125-18	25	18	0.0188	0.48	1-1/2	38.1	0.312	0.141	NA	500
FCMD	150F125-43	18	43	0.0451	1.15			0.733	0.332	NA	250

U-Channel (CHN-Series™)

DMF Product Code	SSMA Reference	Thickness				Size		Weight/ft.		Packaging	
		Gauge	Mils	Design Thickness Inches	Design Thickness (mm)	Inches	(mm)	lbs.	(kg)	Pcs./Bundle	Pcs./Skid
CHN1	075U50-54	16	54	0.0566	1.44	3/4	19.1	0.285	0.129	10	360

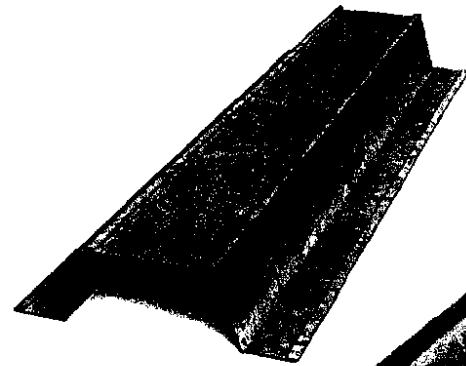
*Available in 10', 16' and 20' lengths.

Rigid structural support for gypsum wallboard, veneer plaster or drop ceiling assemblies.

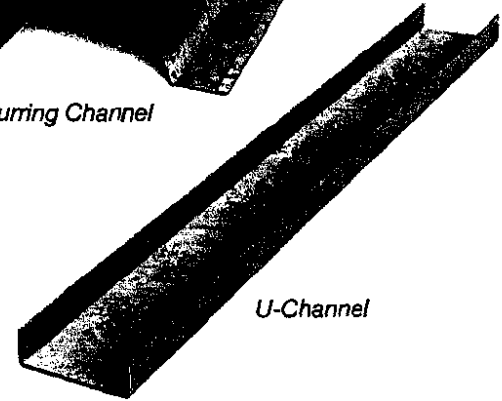
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- Rigid framework for high-quality finish.
- Furring clips easily snap into place for fast assembly.

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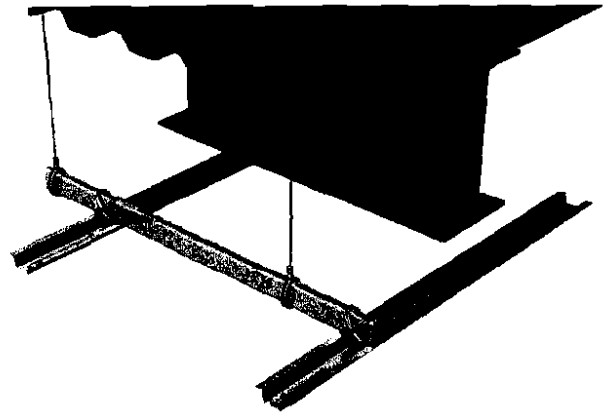
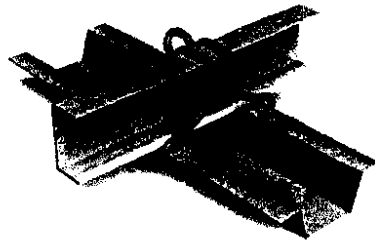
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Furring Channel



U-Channel



Furring Channel (FC-Series™)

DMF Product Code	SSMA Reference	Thickness				Size		Weight/ft.		Packaging	
		Gauge	Mils	Design Thickness		Inches	(mm)	lbs	(kg)	Pcs./Bundle	Pcs./Skid
				Inches	(mm)						
FCN	087F125-18	25	18	0.0188	0.48	7/8	22.2	0.237	0.107	10	560
FCM	087F125-43	18	43	0.0451	1.15			0.555	0.251	NA	250
FCV	087F125-64	16	54	0.0566	1.44			0.692	0.313	NA	250
FCND	150F125-18	25	18	0.0188	0.48	1-1/2	38.1	0.312	0.141	NA	500
FCMD	150F125-43	18	43	0.0451	1.15			0.733	0.332	NA	250
FCMD	150F125-54	16	54	0.0566	1.44			0.920	0.420	NA	250

U-Channel (CHN-Series™)

DMF Product Code	SSMA Reference	Thickness				Size		Weight/ft.		Packaging	
		Gauge	Mils	Design Thickness		Inches	(mm)	lbs	(kg)	Pcs./Bundle	Pcs./Skid
				Inches	(mm)						
CHN1	075U50-54	16	54	0.0566	1.44	3/4	19.1	0.285	0.129	10	360
CHN2	150U50-54	16	54	0.0566	1.44	1-1/2	38.1	0.420	0.190	10	330

*Available in 10', 16' and 20' lengths.

Furring Channel (FC-Series™) U-Channel (CHN-Series™) Hanger Wire/Tie Wire and Wire Ties



CITY OF PORTLAND, MAINE
Department of Building Inspections

_____ 6: 20 10

Received from Mark Fuller

Location of Work 62 Thomas

Cost of Construction \$ _____

Permit Fee \$ 471.00

Building (U1) _____ Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 62011

Check #: 111

Total Collected \$ 471.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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

Town or Plantation: Portland Me.
Street / Subdivision Lot #: 65 Thomas St

PORTLAND PERMIT # 9742 TOWN COPY
Date Permit Issued: 2/17/06 \$ 48 Double Fee Charged
L.P.I. # 3,60
Local Plumbing Inspector Signature: [Signature]

Last: Fuller First: Mark
Applicant Name: Mark Fuller
Mailing Address of Owner/Applicant (if Different): 50 Portland Me, 79 Adelbert St.

Owner/Applicant Statement
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.
[Signature]
Signature of Owner/Applicant Date

Caution: Inspection Required
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.
Local Plumbing Inspector Signature Date Approved

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>02227</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
OR		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease / Oil Separator	1	Dish Washer
		Roof Drain	1	Garbage Disposal
OR		Bidet		Laundry Tub
		Other: _____		Water Heater
TRANSFER FEE (\$8.00)		Fixtures (Subtotal) Column 2	7	

ck# 602
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE
48
10
58