

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

**BUILDING INSPECTION**  
**PERMIT**

Please Read Application And Notes, If Any, Attached

**PERMIT ISSUED**  
Permit Number: 060831  
AUG - 7 2006  
**CITY OF PORTLAND**

This is to certify that SISTERS OF OUR LADY OF THE HOLY ROSARY/M R be  
has permission to Institutional - religious residence/ Replacement of columns, decking, misc. Trim  
AT 18 THOMAS ST L 062 E013001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this 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.

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 altered or enclosed-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 \_\_\_\_\_  
Department Name

*[Signature]* 7/28/06  
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: 06-0831	Issue Date: <b>PERMIT ISSUED</b> AUG - 7 2006	CBL: 062 B013001
Owner Address: 20 THOMAS ST	Phone:	
Contractor Address: P.O. Box 467 Biddford	Phone: 2072297086	
Permit Type: Alterations - Commercial		Zone: R4

Location of Construction: 18 THOMAS ST	Owner Name: SISTERS OF OUR LADY OF THE
Business Name:	Contractor Name: M R Labbe Builder/ Woodworker, I
Tenant/Buyer's Name:	Phone:

Current Use: Sisters of Our Lady of the Holy Rosary Religious/ <i>Commercial/ Irish Monastery</i>	Proposed Use: Sisters of Our Lady of the Holy Rosary Religious/ <i>Commercial/ Irish Monastery</i> Replace rotted columns, decking, misc. Trim <i>replace - re - stairs, residence</i>
---	--

Permit Fee: \$111.00	Cost of Work: \$10,000.00	CEO District: 2
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>	
Signature:	Signature:	

Proposed Project Description:  
*Commercial/ Irish Monastery*  
Replace rotted columns, decking, misc. Trim

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  
Action:  Approved  Approved w/Conditions  Denied  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: *Idobson* Date Applied For: *06/06/2006*

Zoning Approval		
<p><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>all work w/ existing</i> <input type="checkbox"/> Flood Zone <i>backpack</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/ conditions</i> Date: <i>6/12/06</i> <i>ASB</i>	<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 Date: _____	<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 type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>6/8/06</i> <i>Johanna Anderson</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



# 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>20 THOMAS ST PORTLAND</u>		
Total Square Footage of Proposed Structure <u>Porcn approx 320<sup>sq</sup></u>		Square Footage of Lot <u>NOT APPLICABLE</u>
Tax Assessor's Chart, Block & Lot Chart# <u>62</u> Block# <u>2</u> Lot# <u>13</u>	Owner: <u>SISTERS of Holy ROSARY</u>	Telephone: <u>774 3758</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: \$ <u>10,000 EST</u> Fee: \$ _____ C of O Fee: \$ <u>111<sup>00</sup></u>
Current Specific use: <u>RESIDENTIAL</u> If vacant, what was the previous use? _____ Proposed Specific use: _____		
Project description: <u>REPLACE ROTTED COLUMNS, DECKINGS AND MIS-TRIM. REPAINT within existing footprint</u>		
Contractor's name, address & telephone: <u>M. R. LAISBE BUILDER/WOODWORKER, INC</u> Who should we contact when the permit is ready: <u>MIKE</u> Mailing address: <u>PO BOX 467</u> Phone: <u>229 7086 cell</u> <u>BIDDEFORD MAINE 04005</u> <u>282 3420 SHOP</u>		

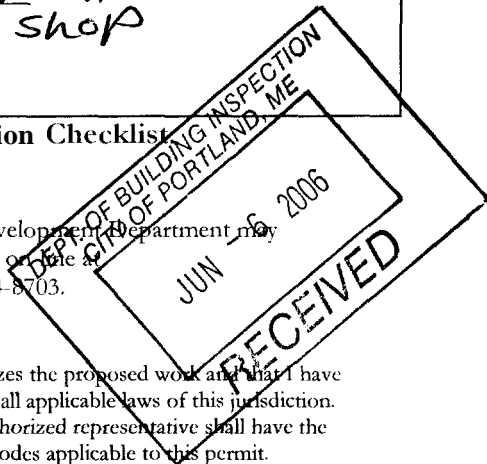
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

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 online 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:	Date:
-------------------------	-------

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



**M. R. Labbe Builder/Woodworker, Inc**  
Carpentry Repairs & Restorations Since 1978

Monday, June 05, 2006

20 Thomas St Sisters of the Holy Rosary

Replace 3 rotted columns. 9'3" height; approx. 9" diameter with bases and capitals.

Replace rotted 5/4X6 pressure treated decking as needed up to 50 sqft.

Reuse railing ballusters, duplicate existing railing profile, 1 1/2" thick X 5 1/2" width including scotia profile.

Replace rotted skirting trim, 1X8 pine, 1X4 pine as needed.

Prime and paint as needed.

Temporary bracing to be 2X6 strongback at each column location.

Temporary railings to be 2X4 at existing railing locations.

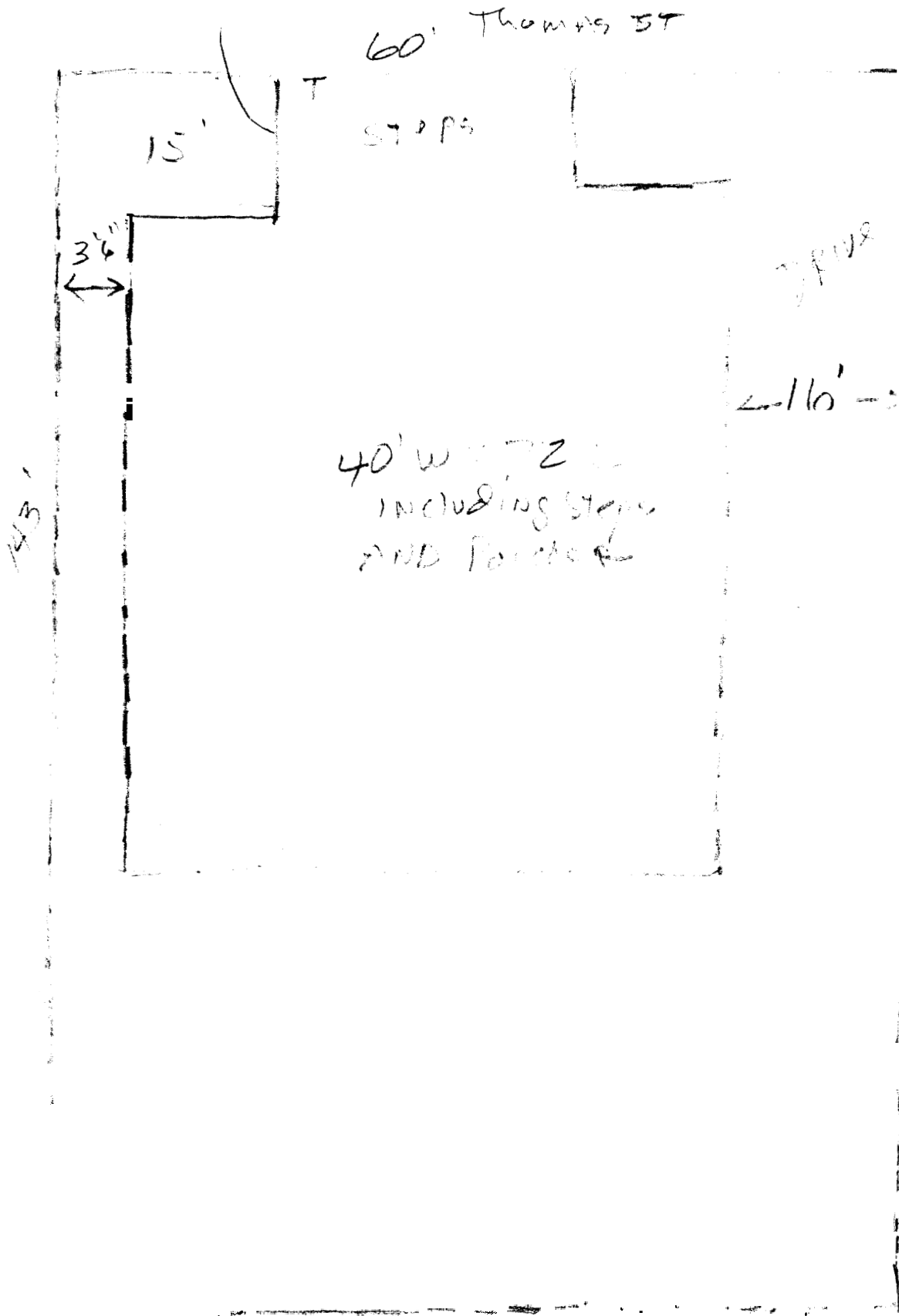
Question whether a new railing height is needed. Estimate is based on reusing old ballusters.

↓ Replacing w/ 3 structural columns

↓ Replacing rotted top + bottom rail of guard-railing - re-using ballusters.

**M. R. Labbe Builder/Woodworker, Inc**  
Carpentry Repairs & Restorations Since 1978

0111143



**From:** "Mike" <mike@mrlabbe.com>  
**To:** "Tammy Munson" <TMM@portlandmaine.gov>  
**Date:** Thu, Jul 27, 2006 2:43 PM  
**Subject:** Re: building permit & phone message

hi Tammy,

the columns will be like the existing ones, structural, glued up stock. see pictures I left with you.  
railings and ballausters are the same

----- Original Message -----

From: Tammy Munson  
To: mike@mrlabbe.com  
Sent: Thursday, July 27, 2006 2:01 PM  
Subject: Re: building permit & phone message

Can you give me a detail on the new columns? I'm assuming they are structural. Will 4 x 4 's be going inside of them? Also, can you give me a detail of the guard? Our fax number is 874-8716 if that helps.

>>> "Mike" <mike@mrlabbe.com> 07/27 12:06 PM >>>

Hi Tammy,

I'll be removing the existing columns and getting new ones made to match as close as possible.  
The tolerance on the replacement columns is +/- 1/4", so the railings will also have to be changed. I will reuse the ballausters.

Thanks,  
Mike

----- Original Message -----

From: Tammy Munson  
To: mike@mrlabbe.com  
Sent: Thursday, July 27, 2006 10:52 AM  
Subject: Re: building permit & phone message

Hi Mike, What are the columns being replaced with? Is that the only structural work being done? Are you replacing the guardrails?

>>> "Mike" <mike@mrlabbe.com> 07/27 10:42 AM >>>

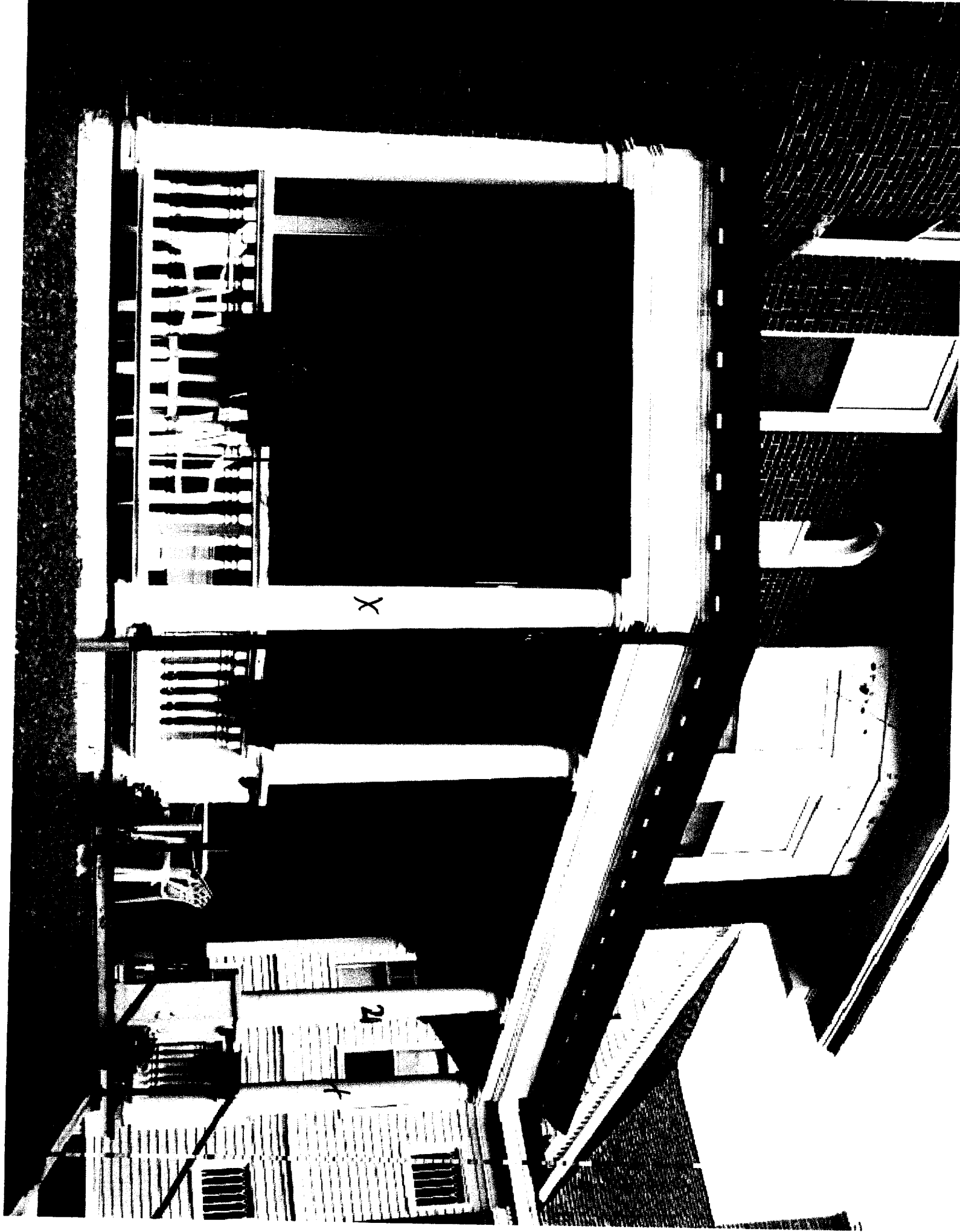
Hi Tammy,

Tried to return your call from yesterday.....talked with Donna and she said you guys are right out straight!

So, this e-mail method might be best for both of us.

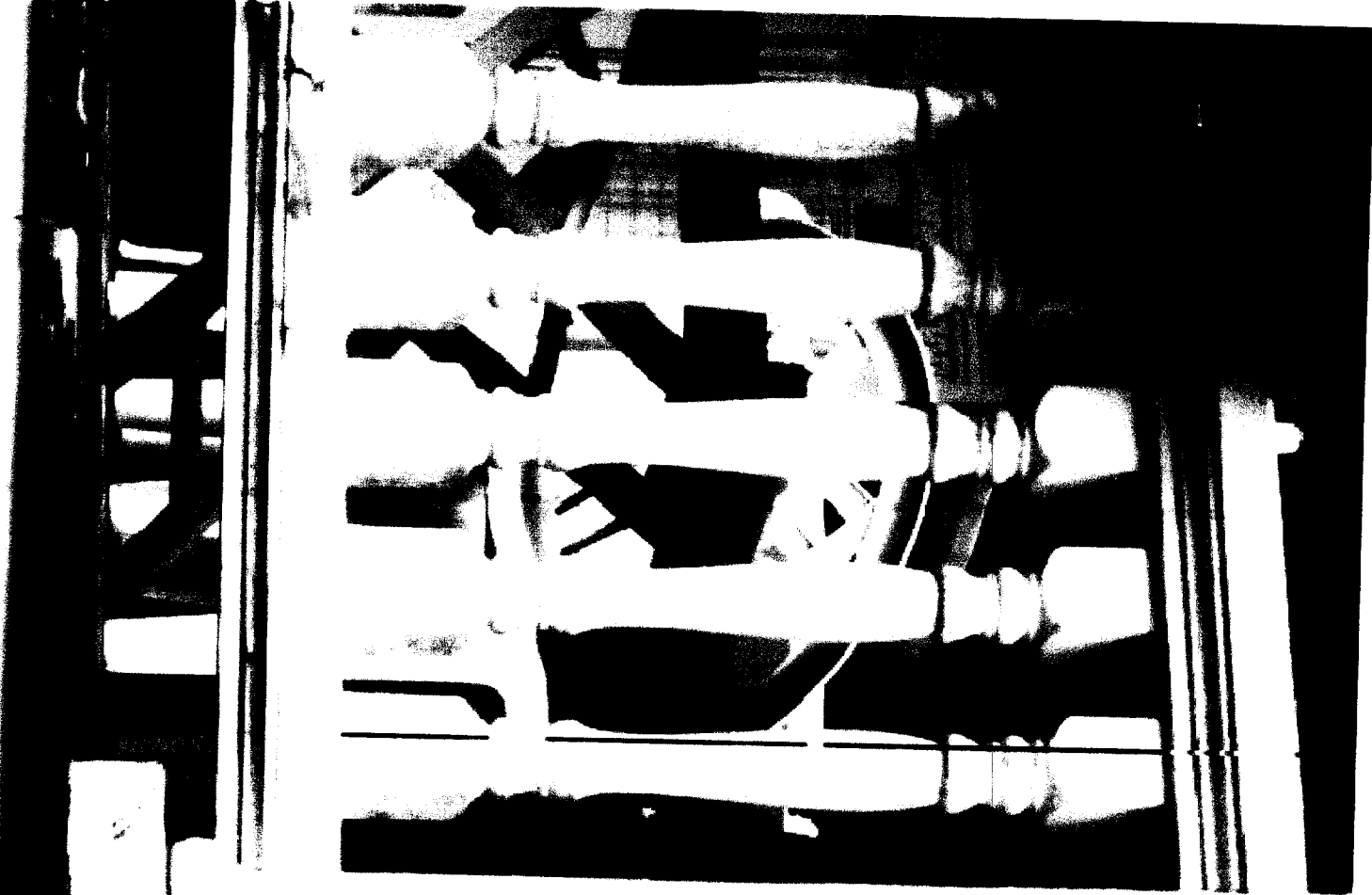
What were the questions you had regarding 20 Thomas St Job?

Thanks,  
Mike

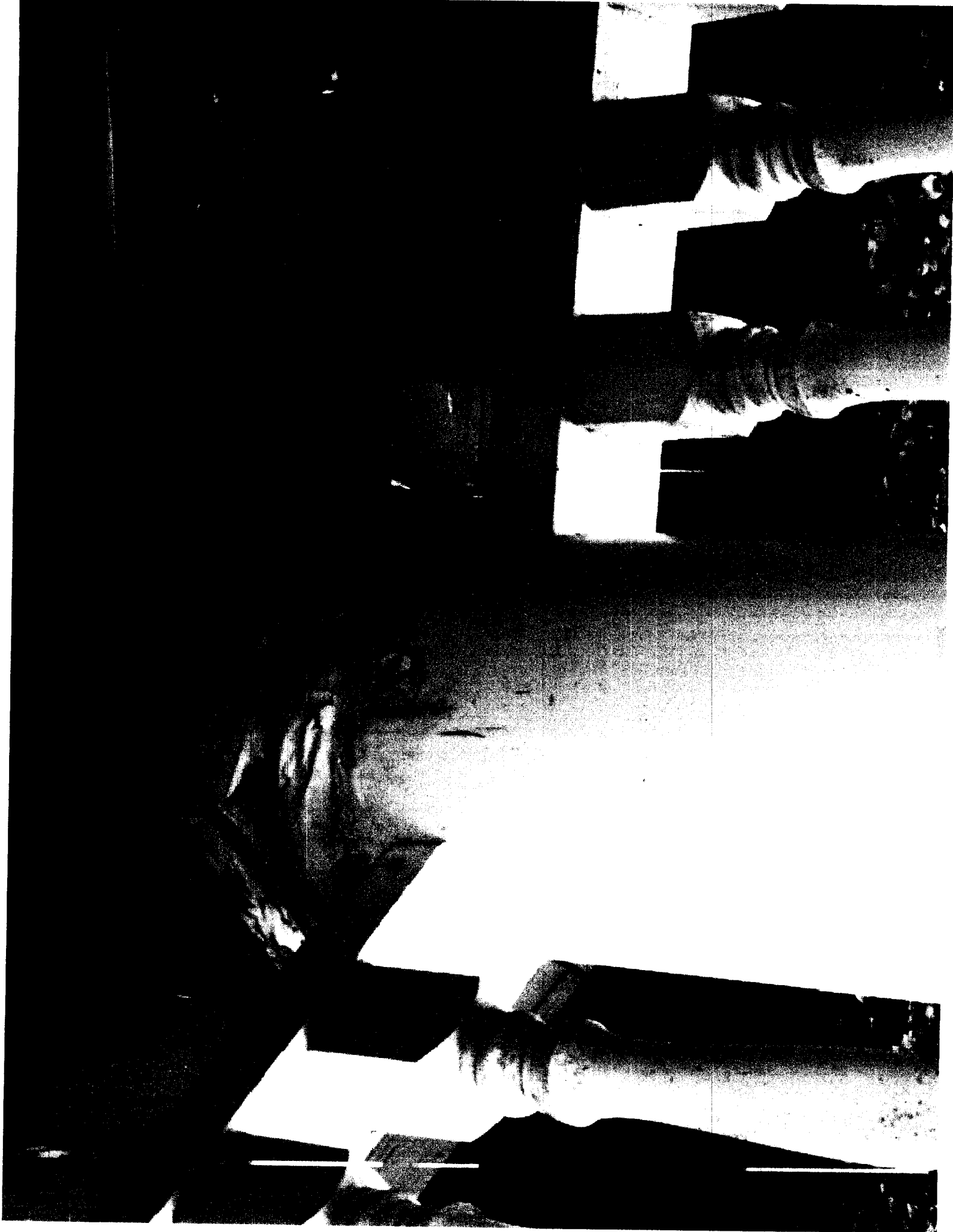




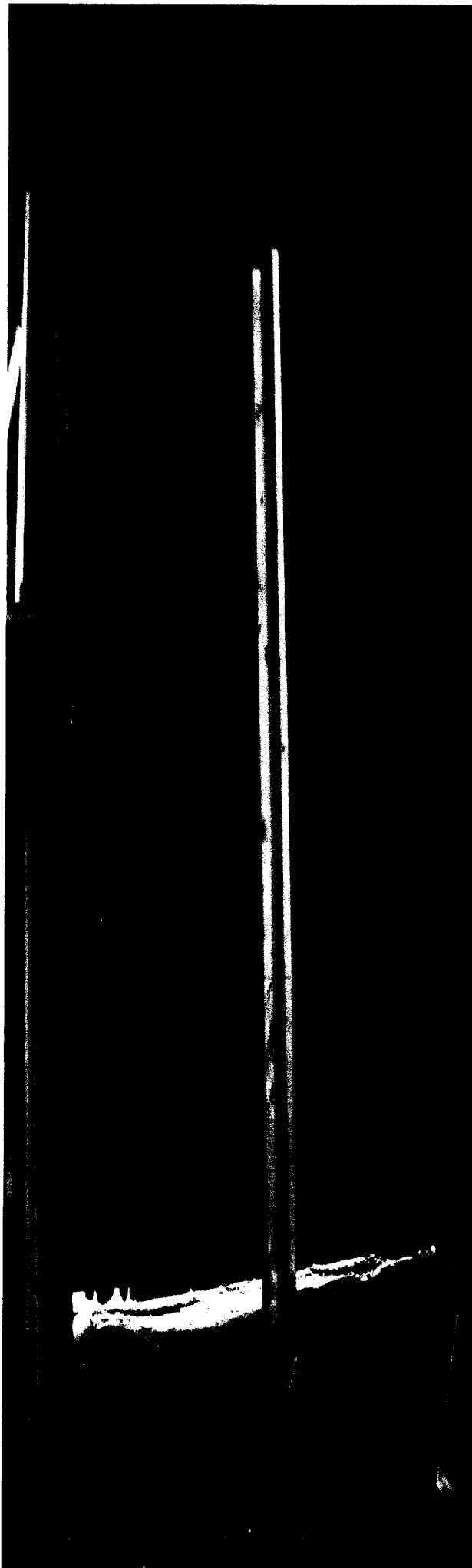












**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 06-0831	<b>Date Applied For:</b> 06/06/2006	<b>CBL:</b> 062 E013001
------------------------------	--	----------------------------

<b>Location of Construction:</b> 18 THOMAS ST	<b>Owner Name:</b> SISTERS OF OUR LADY OF THE	<b>Owner Address:</b> 20 THOMAS ST	<b>Phone:</b>
--	--	---------------------------------------	---------------

<b>Business Name:</b>	<b>Contractor Name:</b> M R Labbe Builder/ Woodworker, I	<b>Contractor Address:</b> P.O. Box 467 Biddeford	<b>Phone:</b> (207) 229-7086
-----------------------	---	--	---------------------------------

<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Commercial
----------------------------	---------------	---

<b>Proposed Use:</b> Sisters of Our Lady of the Holy Rosary Religious/ Institutional - religious residence/ Replace rotted columns, decking, misc. Trim	<b>Proposed Project Description:</b> Institutional - religious residence/ Replace rotted columns, decking, misc. Trim
--	--