DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And Notes, If Any. Attached

Form # P 04

Permit Number: 101039

This is to certify that	HORR MARIANNA VALLS /Reagan & Company /Earl	PERMIT
1.0000 K		
has permission to	amend permit#100866 to remove shower and change floor plan	

AT _25 THOMAS ST

CEL 062 F002001 SEP - 1 2010

provided that the person or persons, film or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the Citring of Potten d regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

PI	NALTY FOR REMOVING THIS CARD
Other Department Name	Director - Building & Inspection Services
Appeal Board	
Health Dept.	
Fire Dept.	
OTHER REQUIRED APPROVALS	
such information.	Iathen or otherwise closed-in. 24 ing or part thereof is occupied. HOUR NOTICE IS REQUIRED. 1
and grade if nature of work requires	before this building or part thereof is procured by owner before this build-
Apply to Public Works for street line	Not lication of inspection must be given and written permission procured A certificate of occupancy must be

City of Portland, M	aine - Building or Use Per	mit	Permit No:	Date Applied For:	CBL:
389 Congress Street, 0	4101 Tel: (207) 874-8703, Fa	x: (207) 874-8716	10-1039	08/25/2010	062 F002001
Location of Construction:	Owner Name:	•	Owner Address:		Phone:
25 THOMAS ST	HORR MARIANN	A VALLS	25 THOMAS ST		
Business Name:	Contractor Name:		ontractor Address:		Phone
	Reagan & Compar	ny /Earl	106 Merrill Rd G	гау	(207) 653-6353
Lessee/Buyer's Name	Phone:		ermit Type:		
			Amendment to Si	ngle Family	
Proposed Use:		Proposed	Project Description:		
change floor plan Dept: Zoning Note:	Status: Approved	Reviewer:	Tammy Munson	Approval [Date: 08/27/2010 Ok to Issue: ✓
Dept: Building Note: 1) Separate permits are	Status: Approved with Condi		Tammy Munson Ilarm HVAC syste		Ok to Issue: 🗸
	commercial hood exhaust systems				
 Application approva and approval prior 	I based upon information provide to work.	d by applicant. Any	deviation from ap	proved plans require	es separate review

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY) or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling
- X Final inspection required at completion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



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: 25 Thomas Street					
Total Square Footage of Proposed Structure/A		Square Footage of Lot	Number of Stories		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 62 F 2	Name Address 2 City', State &	nust be owner, Lessee or Buye Stewort & McVey STHOMAS SJ. Zip Portland, MK,	r*	Telephone:	
Lessee/DBA (If Applicable)	Name St Address 2	ifferent from Applicant) wast Mc Vey 5 Thomas St 2 Zip Portlun & MR	W C	ost Of ork: \$ of O Fee: \$ otal Fee: \$	
Current legal use (i.e. single family) <u>Home</u> Number of Residential Units / If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? If yes, please name Project description: Remove Shower and Move Sinke & Toilet Check Best Num door Remove (Non bouring wall to inlarge Hall					
Contractor's name: <u>Faile</u> C <u>Reugan</u> <u>Reagan</u> <u>Compuny</u> Address: <u>106 Marrill</u> <u>Rd</u> <u>Cell</u> City, State & Zip <u>Gray</u> <u>MR</u> <u>04039</u> <u>Telephone: 329-3441</u> Who should we contact when the permit is ready: <u>Mc Faile</u> <u>Telephone:</u>					
Who should we contact when the permit is read Mailing address: 106 MAMIL	Rd Rd	Gray MR OF	elept COZ	none:	

Please submit all of the information outlined on the applicable 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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division 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 appleation is issued, I certify that the Gode 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.

	\bigcirc		of portia
Signature and	Degion	Date:	8/25/1 Depcity or

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

Form # P 04	DISPLAY	THIS CARD	ON PRINC	IPAL FRONT	TAGE OF	WORK
Please Read		CITY	OF PO	RTLAN	D	
Application And		BL	JILDING INS	SPECTION		
Notes, If Any, Attached			PERM	TIN	Permit Numt	ISSUED
This is to certify	that HORR	MARIANNA VALLS	Regan & Company			
has permission t	o Change	second floor bathroor	n, add second bathro	om & Laundry room	AUG -	2 2010
AT 25 THOM	AS ST			CBL 062	F002001	-

provided that the person or persons, firm or corporation accepting this pecmitsflattleofnply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.	
OTHER REQUIRED APPROVALS		
Health Dept		
Appeal Board		
Other Department Name	Director - Building & Inspection Services	
PI	NALTY FOR REMOVING THIS CARD	



Original Receipt

	8.25 20 10
P	
Received from	
Location of Work 25TH	ones
Cost of Construction \$	Building Fee:
Permit Fee \$	_ Site Fee:
Certificate of O	ccupancy Fee:
	Total:
Building (IL) Plumbing (I5) Electric	cal (I2) Site Plan (U2)
Other	
CBL: 62-F2	
Check #: (237 Tota	I Collected s_ 30

No work is to be started until permit issued. Please keep original receipt for your records.

Taken by:

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

City of Portland, I	Maine - Build	ling or Use	Permit Applic	ation P	ermit No:	Issue Date:		CBL;	
389 Congress Street,		0	• •		10-0866			062 F00	2001
Location of Construction:		Owner Name:		Owne	er Address:			Phone:	
25 THOMAS ST		HORR MARIA	ANNA VALLS	25	THOMAS ST				
Business Name: Contractor Name				Cont	ractor Address:			Phone	
		Regan & Com	pany	106	Merrill Road	Gray		20732934	41
Lessec/Buyer's Name		Phone:			iit Type: erations - Dwe	ellings		I	R-L
Past Use:		Proposed Use:		Pern	nit Fee:	Cost of Worl	k: CEO	O District:	
Single Family Home		Single Family	Home - Change		\$290.00	\$26,50	0.00	2	
Proposed Project Description:			aundry room dwelly	onli	E DEPT:	Approved Depute	INSPECTIC Use Group.	DN: P.3 Inc	Type: 52
Change second floor b	athroom, add see	cond bathroom	& Laundry room	0		'	Signature:	A	
				PEDI	ESTRIAN ACTI	VITIES DIST	RICT (P.A.I	DO	
				Actio	on: Approv	ed 🗌 App	roved w/Con	ditions	Denied
						ed 🗌 App			Denied
Descrit Tales Des	Data Asso	Bad Reas			ature:		Dat		Denied
	Date App 07/21/				ature:	ed App	Dat		Denied
Idobson	07/21/	2010	Special Zone of	Sign	ature: Zoning	Approva	Dat	te.	
	07/21/ cation does not p	2010 reclude the	Special Zone or	Sign	ature: Zoning	Approva			ervation
Idobson 1. This permit applic Applicant(s) from	07/21/ cation does not p meeting applica do not include pl	2010 reclude the ble State and		Sign	ature: Zoning	Approva		le. Historic Prese ωι	ervation t or Landman
 Idobson This permit applic Applicant(s) from Federal Rules. Building permits a septic or electrica Building permits a 	07/21/ cation does not p meeting applica do not include pl l work. are void if work	2010 reclude the ble State and umbing, is not started	Shoreland	Sign	ature: Zoning Zonii Variance	Approva Ig Appeal Incous		Historic Prese w c Not in Distric	t or Landmau uire Review
 Idobson This permit applic Applicant(s) from Federal Rules. Building permits a septic or electrical 	07/21/ cation does not p meeting applica do not include pl l work. are void if work ths of the date o may invalidate a	2010 reclude the ble State and umbing, is not started f issuance.	Shoreland Wetland	Sign	ature: Zoning Zonin Variance Miscella	Approva Ig Appeal Incous Innal Use		Historic Prese W L Not in Distric Does Not Rec	t or Landmau uire Review
 This permit applic Applicant(s) from Federal Rules. Building permits a septic or electrica Building permits a within six (6) mor False information permit and stop al 	07/21/ cation does not p meeting applica do not include pl l work. are void if work ths of the date o may invalidate a	2010 reclude the ble State and umbing, is not started of issuance. a building	Shorcland Wetland Flood 7 one	Sign	ature: Zoning Zonin Variance Miscella	Approva Ig Appeal neous inal Use ation		Historic Prese With Prese Not in Distric Does Not Rec Requires Rev	t or Landmar uire Review
 Idobson This permit applic Applicant(s) from Federal Rules. Building permits a septic or electrica Building permits a within six (6) mor False information permit and stop al 	07/21/ cation does not p meeting applica do not include pl l work. are void if work h ths of the date o may invalidate a l work	2010 reclude the ble State and umbing, is not started of issuance. a building	Shorcland Wetland Flood Zone Subdivision	Sign:	ature: Zoning Zonin Variance Miscella Conditue	Approva Ig Appeal neous inal Use ation		Historic Prese Does Not Reco Requires Rev Approved	t or Landmar uire Review

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

						T
City of Portland, Maine - Buil		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (2	207) 874-8703, Fax: (207) 874	4-8716	10-0866	07/21/2010	062 F002001
Location of Construction:	Owner Name:		0)wner Address:		Phone:
25 THOMAS ST	HORR MARIANNA VALLS 2			25 THOMAS ST		
Business Name:	Contractor Name:	Contractor Name: C				Phone
	Regan & Company		1	06 Merrill Road C	Эгау	(207) 329-3441
Lessee/Buyer's Name	Phone:		P	ermit Type:		
				Alterations - Dwel	llings	
Proposed Use:			Proposed	Project Description:		
Single Family Home - Change second	I floor bathroom, add se	cond	Change	second floor bath	room, add second ba	throom & Laundry
bathroom & Laundry room			room			
Dept: Zoning Status: A	pproved with Condition	ns Rev	viewer:	Marge Sebmucka	d Approval Da	nte: 07/22/2010
Note:						Ok to Issue: 🗸
1) Separate permits shall be required	for future decks, sheds	, pools, a	ind/or ga	rages.		
2) This is NOT an approval for an ac			÷	-	nal bitchon aguinnai	st isoludina, but
not limited to items such as stoves	-					n menualing, but
 This property shall remain a singl approval 	e family dwelling Any	change o	f use sha	ill require a separa	te permit application	for review and
 This permit is being approved on work. 	the basis of plans subm	itted. An	iy deviat	ions shall require a	a separate approval b	efore starting that
Dept: Building Status: A	pproved with Condition	ns Rev	viewer:	Tammy Munson	Approval Da	ite: 07/29/2010
Note:						Ok to Issue: 🗸
 Separate permits are required for pellet/wood stoves, commercial h part of this process. 						
2) Application approval based upon and approrval prior to work.	information provided b	y applica	nt. Any e	leviation from app	proved plans requires	separate review

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With the issuance of this permit, the owner, builder or their designce is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

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THE REAL PROPERTY OF THE REAL

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: 25	Thomas Street Po	it lon +			
Total Square Footage of Proposed Structure/A	rea Square Footage of Lot	Number of Stories			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# $G\mathcal{F}$ \mathcal{Q}	Applicant * must be owner, Lessee or Buyer Name Mainnne Stewary Address 25 Thurnas Street	* Telephone:			
	City, State & Zip Portland, MR.				
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name	Cost Of Work: \$ 26, 500, 10			
	Address	C of O Fee: \$			
	City, State & Z1p	Total Fee: \$ 290			
Current legal use (i.e. single family) <u>Foundy Mome</u> Number of Residential Units KlegAl South If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? <u>NO</u> If yes, please name Project description: Chouge Sec Flow bathroom and add a sec bathroom And Loundary room					
Contractor's name: Reason & Compine 1/ Address: 106 MEVIII Ra					
City, State & Zip_ Gray, ME	UYU39 Te	elephone: 329-3441			
Who should we contact when the permit is read	y: Earle Plagyn C Te	lephone: 1379-3441			
Mailing address: 106 Moverell					

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

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Signature:	Carlic	10	Mr Date	e: 7/	21/	10	2 1 0010	
	This is not	a per	mit; you may not commenc	e ANY w	ork un	til the permit is	s issued	

City of Portland



CITY OF PORTLAND, MAINE Department of Building Inspections

Original Receipt

		20
Received from	End	Recar
Location of Work	25	Thomas St.
Cost of Construction	\$	Building Fee:
Permit Fee	\$	Site Fee:
Certificate of Occupancy Fee:		
		Total:90
Building (IL) Plum	nbing (I5)	Electrical (I2) Site Plan (U2)
Other		
CBL: 62 F	2	
Check #:8	7	Total Collected s
No work is	to be sta	arted until permit issued.

Please keep original receipt for your records.

Taken by:

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

