Form # P 04 DISPLAY THIS CAI	RD ON PRINCIPAL FRONTAGE OF WORK
Please Read Application And Notes, If Any,	
Attached	PERIVIT PERMIT ISSUED
This is to certify thatSAPP JOHN D KW VET	& DITH JTS/North Shore Constition
has permission to Remodel bathroom	24.000
AT _111 WEST ST	063_A012001
provided that the person or person of the provisions of the Statutes o the construction, maintenance and this department.	of mine and of the Originances of the City of Portland regulating
Apply to Public Works for street line and grade if nature of work requires such information.	A certificate of occupancy must be provided or permit opport of this light or permit opport of the produced by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS	
Health Dept	
Appeal Board	
	- hour hMr. like 7/24/03
Other Department Name	Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

,

City of Portland, Main	-			Issue Date:	CBL:	
389 Congress Street, 0410	01 Tel: (207) 874-8703	, Fax: (207) 874-871	6 08-0895		063 A012001	
Location of Construction:	Owner Name:		Owner Address:		Phone:	
111 WEST ST	1 WEST ST SAPP JOHN D KW VET & JUDIT		111 WEST ST			
Business Name:	Contractor Name		Contractor Address:		Phone	
	North Shore C	onstruction	P.O. Box 2564 South Portland		2077742800	
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Dw	ellings	Zone: R-4 Pri	
Past Use:	Proposed Use:		Permit Fee: Cost of Work: CEO District: 063 - A			
Single Family Home	Single Family	Home - Remodel	\$470.00	\$45,000.00	2 72-6	
	bathroom		FIRE DEPT:	Approved INSPI	ECTION: Group: R3 Type:SB IRC 2003 ture: Jm 7/24/08	
Proposed Project Description:			1			
Remodel bathroom			Signature:	Signa	ture: Jm 7/24/08	
			PEDESTRIAN ACT	VITIES DISTRICT	(P.A.D.)	
			Action: Approv	ved Approved v	w/Conditions Denied	
			Signature:		Date:	
Permit Taken By:	Date Applied For:		Zoning	Approval		
ldobson	07/22/2008					
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 		Special Zone or Revie	ws Zoning Appeal		Historic Preservation	
		Shoreland			Not in District or Landmark	
 Building permits do not include plumbing, septic or electrical work. 		Uetland	Miscellaneous		Does Not Require Review	
 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 		Flood Zone	Conditio	onal Use	Requires Review	
		Subdivision Interpretation		tation	Approved	
		Site Plan		ed	Approved w/Conditions	
Γ	i.	Maj Dipor MM	$\frac{1}{2}$ Date:		Denied Any exterior work Date: Reguires A epsister Terrew S Approva (Errew S	
		CERTIFICATI	UN			

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	<u> </u>	DATE	PHONE

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY) 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 upon receipt of your building permit.

Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling X

Final inspection required at completion of work. X

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee Signature of Inspections Official

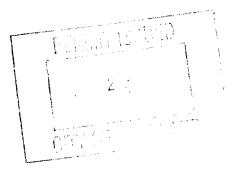
<u>7/30/08</u> Date <u>7/24/n8</u>



City of Portland, Maine - 1	Building or Use Permi	t	Permit No:	Date Applied For:	CBL:
89 Congress Street, 04101 T	Cel: (207) 874-8703, Fax:	(207) 874-871	608-0895	07/22/2008	063 A012001
Location of Construction:	Owner Name:		Owner Address:		Phone:
111 WEST ST	SAPP JOHN D KW V	/ET & JUDIT	111 WEST ST		
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:	
	North Shore Construc	North Shore Construction		P.O. Box 2564 South Portland	
.essee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Dwe	llings	
Proposed Use:		Propos	ed Project Description:		
Single Family Home - Remodel	bathroom	Rem	odel bathroom		
Note:	5	You SHALL N	•	nal kitchen equipme	Ok to Issue:
Note: 1) This is NOT an approval for not limited to items such as s	an additional dwelling unit. stoves, microwaves, refrigera	You SHALL N tors, or kitchen	OT add any addition sinks, etc. Without s	nal kitchen equipme special approvals.	Ok to Issue:
 Note: 1) This is NOT an approval for not limited to items such as s 2) This property shall remain a 	an additional dwelling unit. stoves, microwaves, refrigera single family dwelling. Any ed on the basis of plans subm	You SHALL N tors, or kitchen change of use s itted. Any devi	OT add any addition sinks, etc. Without s nall require a separa ations shall require a	nal kitchen equipme special approvals. te permit applicatio	Ok to Issue:
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 Note: 1) This is NOT an approval for not limited to items such as s 2) This property shall remain a approval. 3) This permit is being approve work. It is understood that al Dept: Building Statu Note: 1) Permit approved based on th 	an additional dwelling unit. stoves, microwaves, refrigera single family dwelling. Any ed on the basis of plans subm ll work is within the shell of t is: Approved with Condition e plans submitted and review d for any electrical, plumbing	You SHALL N tors, or kitchen change of use si itted. Any devi the existing buil ns Reviewen wed w/owner/con g, or HVAC sys	OT add any addition sinks, etc. Without s nall require a separa ations shall require a ding. Tom Markley ntractor, with addition tems.	nal kitchen equipme special approvals. te permit applicatio a separate approval Approval I	Ok to Issue: ent including, but n for review and before starting that Date: 07/24/2008 Ok to Issue:

Comments:

7/24/2008-tm: called contractor Herb Robinson to verify that no new walls being added for bathroom renovation. Left a message on his voicemail.





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.

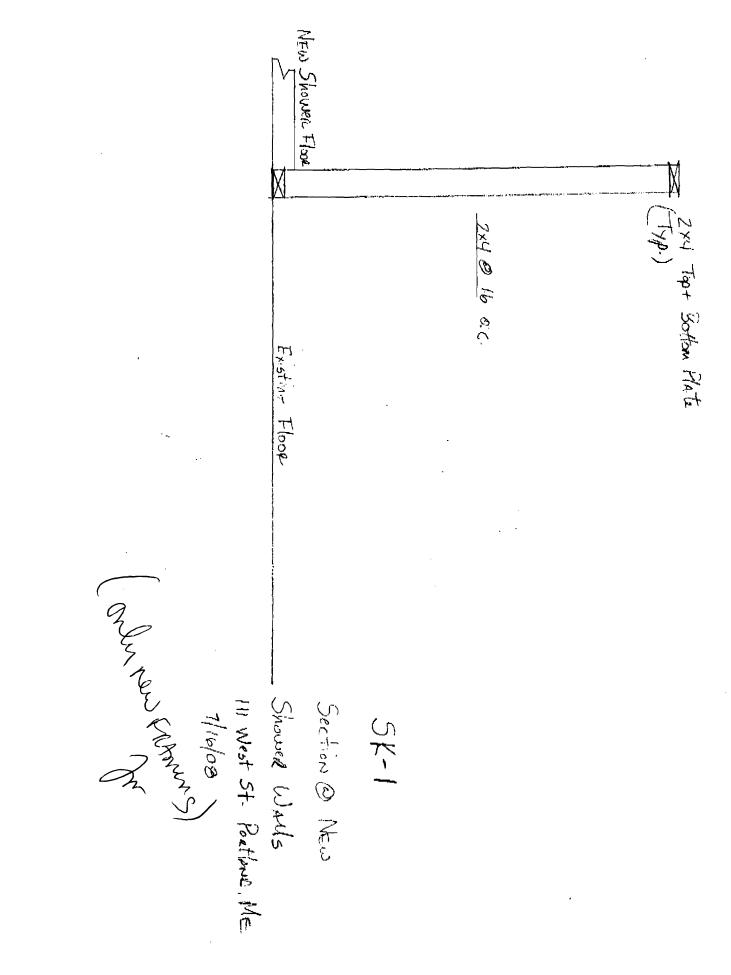
Location/Address of Construction: 111 West Street						
Total Square Footage of Proposed Structure/A		Square Footage of Lot 13090		Number of Stories		
Tax Assessor's Chart, Block & Lot		ist be owner, Lessee or Buyer	r*	Telephone:		
Chart# Block# Lot#	Name Juch	207. 77.				
63 A 12	Address III West St. 650.					
	City, State & Z	zip Portland ME 040	2			
Lessee/DBA (If Applicable)	Owner (if diffe	erent from Applicant)	Cos	t Of rk: \$ 45000.00		
		Woi	ork: \$000.00			
	Address			f O Fee: \$		
	City, State & Zip		Tat	al Fee: \$		
		-		al ree: \$		
Current legal use (i.e. single family) SFR Number of Residential Units If vacant, what was the previous use?						
Contractor's name: North Shore Construction						
Address: 150 DAWSON St. So. Austland, ME 04106						
City, State & Zip	·	Τε	elepho	one: <u>774. 2800</u>		
Who should we contact when the permit is ready			lepho	one: <u>650. 2547</u>		
Mailing address: P.O. Box 2564 So. Bat And 04116						

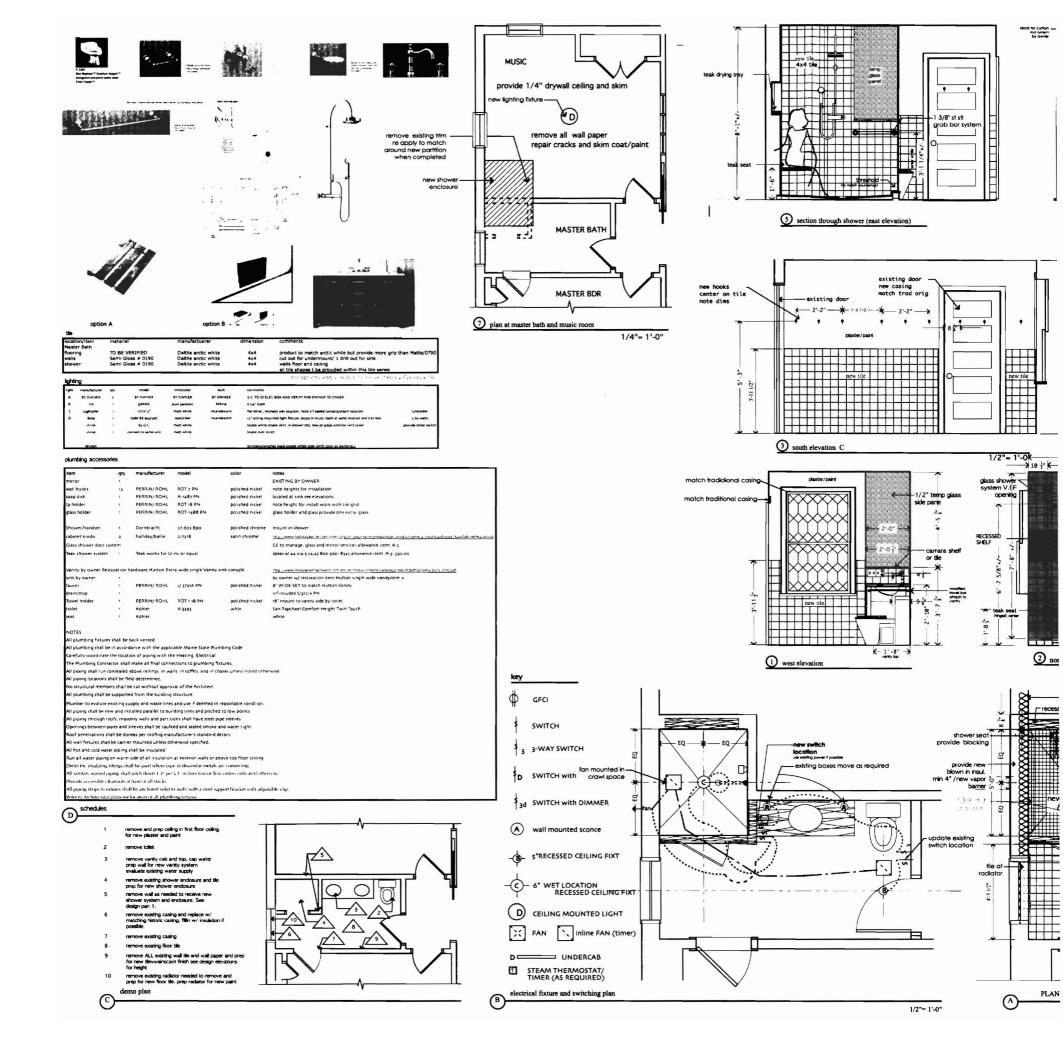
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

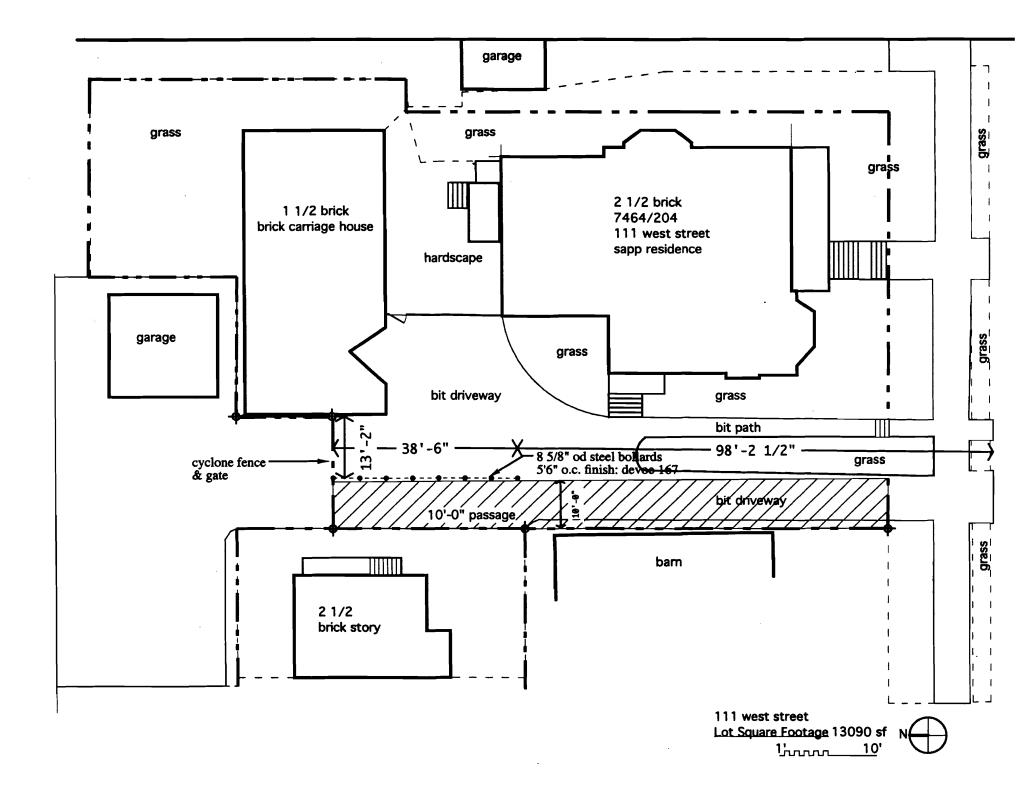
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

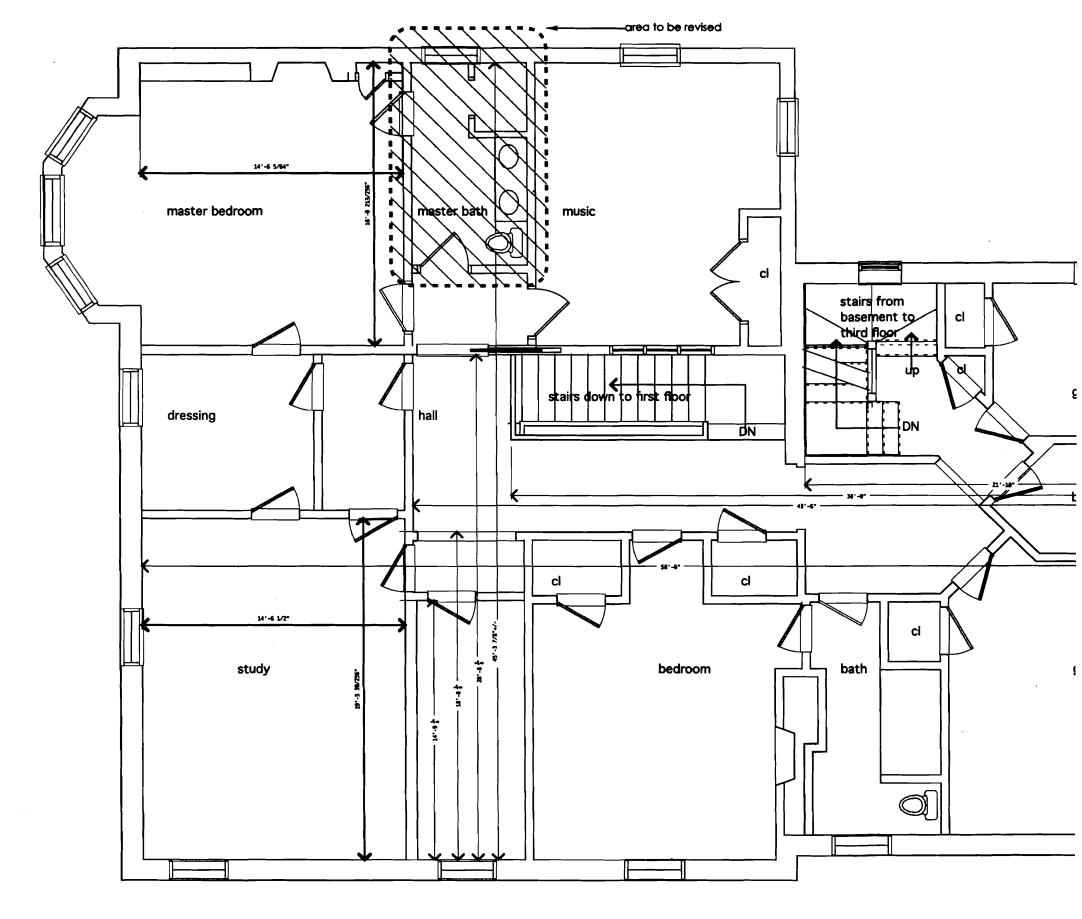
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this 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.











Sapp Residence 111 West Street Plan floor footp