

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND BUILDING PERMIT

This is to certify that TRAVIS BARTLETT

Located At 209 VAUGHAN ST

Job ID: 2012-09-4973-ALTCOMM

CBL: 063- C-009-007

has permission to Closets and walls

provided that the person or persons, firm or corporation accepting this permit shall comply 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 the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

A handwritten signature in black ink, appearing to be "A. Bartlett", written over the text in the right-hand box.

**Fire Prevention Officer**

**Code Enforcement Officer / Plan Reviewer**

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY  
PENALTY FOR REMOVING THIS CARD**

*closed*

SCANNED

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

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

Job No: 2012-09-4973-ALTCOMM	Date Applied: 9/17/2012	CBL: 063- C-009-007	
Location of Construction: 209 VAUGHAN ST -#7	Owner Name: ROBERT ROTHBART	Owner Address: PO BOX 8768 PORTLAND, ME 04104	Phone: 653-3285
Business Name:	Contractor Name: Owner	Contractor Address:	Phone: (207) 653-3285
Lessee/Buyer's Name:	Phone:	Permit Type: BLDG ALT	Zone: R-6
Past Use:  Twelve (12) Residential Condos	Proposed Use:  Same: 12 Residential Condos - In condo #7 to relocated bath door to create walk-in closet in bedroom & open up two non- load bearing walls	Cost of Work: \$2,000.00	CEO District:
		Fire Dept:  <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A  Signature: <i>Capt. Parson</i>	Inspection: Use Group: <i>R.2</i> Type: <i>SB</i> <i>IBC 09</i> Signature: <i>[Signature]</i>
Proposed Project Description: Closets and walls		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Gayle		<b>Zoning Approval</b>	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building Permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan  <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: <i>9/17/12</i> <b>CERTIFICATION</b>	<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:	<i>- within -</i> <input type="checkbox"/> Not in Dist or Landmark <input type="checkbox"/> Does not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>Any exterior wall Needs A Separate review &amp; Approval</i>

SCANNED

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 appication 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

10-26-12 DWM Dennis 590-9436

4-23-13 DWM/BKL Final OK

## BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: [buildinginspections@portlandmaine.gov](mailto: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 Inspections 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.**

Footings/Setbacks prior to pouring concrete

Close In Elec/Plmb/Frame prior to insulate or gyp

Final Inspection

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



# PORTLAND MAINE

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Director of Planning and Urban Development  
Jeff Levine

Job ID: 2012-09-4973-ALTCOMM

Located At: 209 VAUGHAN ST

CBL: 063- C-009-007

## **Conditions of Approval:**

### **Building**

Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.

### **Fire**

Installation shall comply with City Code Chapter 10.  
All construction shall comply with City Code Chapter 10.  
<http://www.portlandmaine.gov/citycode/chapter010.pdf>

2012 09 4973 66



# General Building Permit Application

R-6 & Historic

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>209 Vaughan St. #7</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# <u>63</u> Block# <u>C</u> Lot# <u>9007</u>	Applicant: (must be owner, lessee or buyer) Name <u>Robert Rothbart</u> Address <u>P.O. Box 8768</u> City, State & Zip <u>Portland ME 04104</u>	Telephone: <u>207-653-3285</u> (cell) <u>515-3285</u>
Lessee/DBA <b>RECEIVED</b> <b>SEP 17 2012</b> Dept. of Building Inspections City of Portland Maine	Owner: (if different from applicant) Name _____ Address _____ City, State & Zip _____	Cost of Work: \$ <u>2000</u> C of O Fee: \$ _____ Historic Review: \$ _____ Planning Amin.: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>Condo</u> Number of Residential Units <u>12 legal res. condos</u>		
If vacant, what was the previous use? _____		
Proposed Specific use: _____		
Is property part of a subdivision? _____ If yes, please name _____		
Project description: <u>Relocate bath door to create walk in closet in bedroom. Open up two non-load bearing walls. Update electric (separate electrical permit)</u>		
Contractor's name: <u>SELF (ROBERT ROTHBART)</u>		Email: _____
Address: _____		
City, State & Zip _____		Telephone: _____
Who should we contact when the permit is ready: <u>Robert Rothbart</u>		Telephone: <u>207-653-3285</u>
Mailing address: _____		

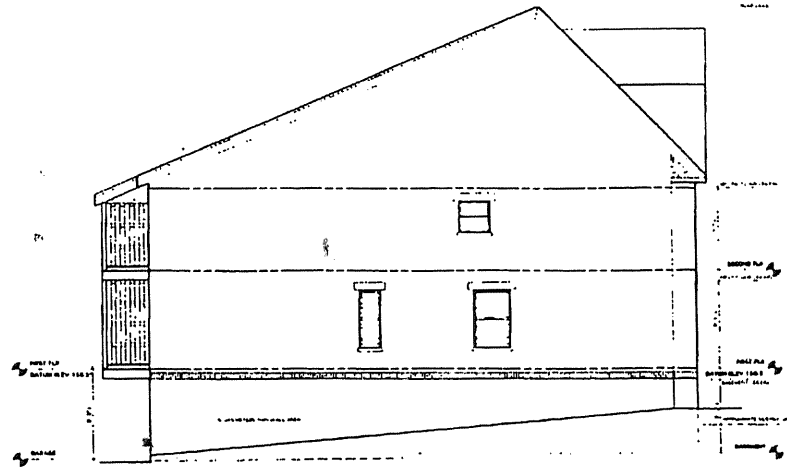
Please submit all of the information outlined on the applicable checklist. Failure to do so will result in the automatic denial of your permit.

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](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

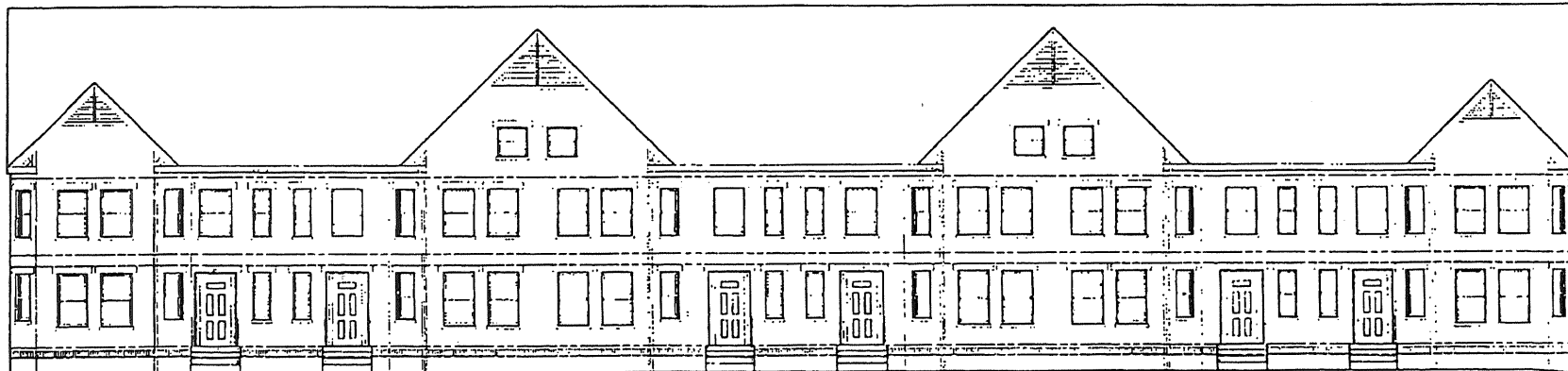
and I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: Robert Rothbart Date: 9/17/12

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



2 NORTH ELEVATION  
Scale: 3/16"=1'-0"



1 WEST ELEVATION  
Scale: 3/16"=1'-0"

Elevations

↑  
Unit 7 (2nd floor)  
209 Vaughan St.

HRTA / ARCHITECTS  
1000 ...  
Portland, ME 04101  
Tel: 603.751.1111  
Fax: 603.751.1112

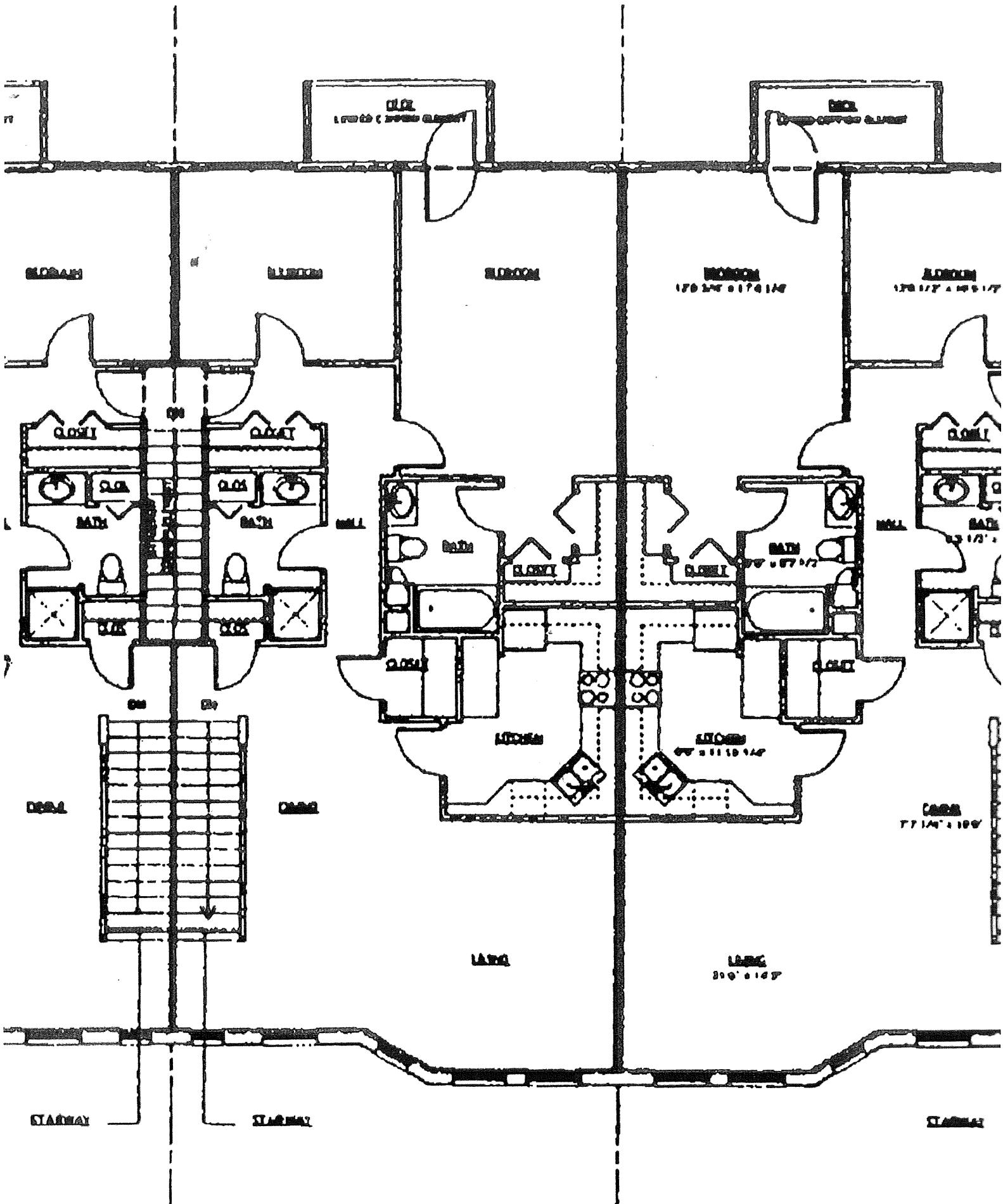


205-215 VAUGHAN STREET  
SECOND VAUGHAN CONDOMINIUM  
PORTLAND, MAINE

Project ID: 200808  
CAD File Name: 205-215.dwg  
Drawn By: JLB  
Checked By: JLB  
Issue Date: 1/20/09  
Plot Date: 1/20/09  
Designed By: JLB  
Reviewed By: JLB  
Drawing Date: 1/20/09

Elevations 1  
Building Elevations

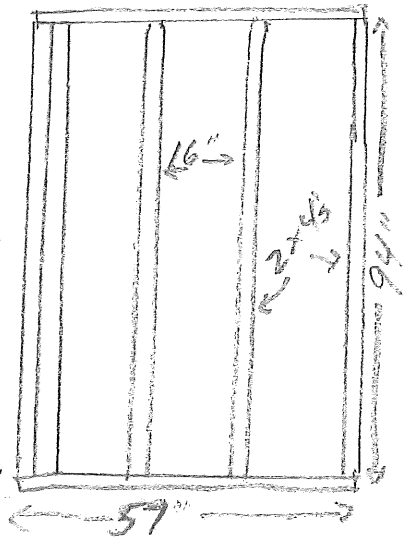
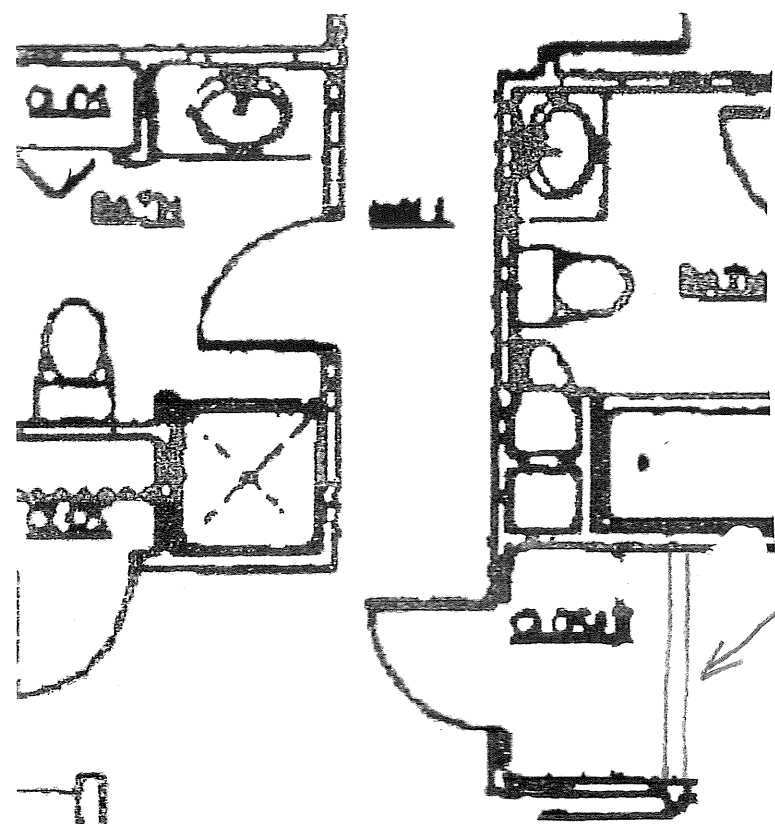
A-201



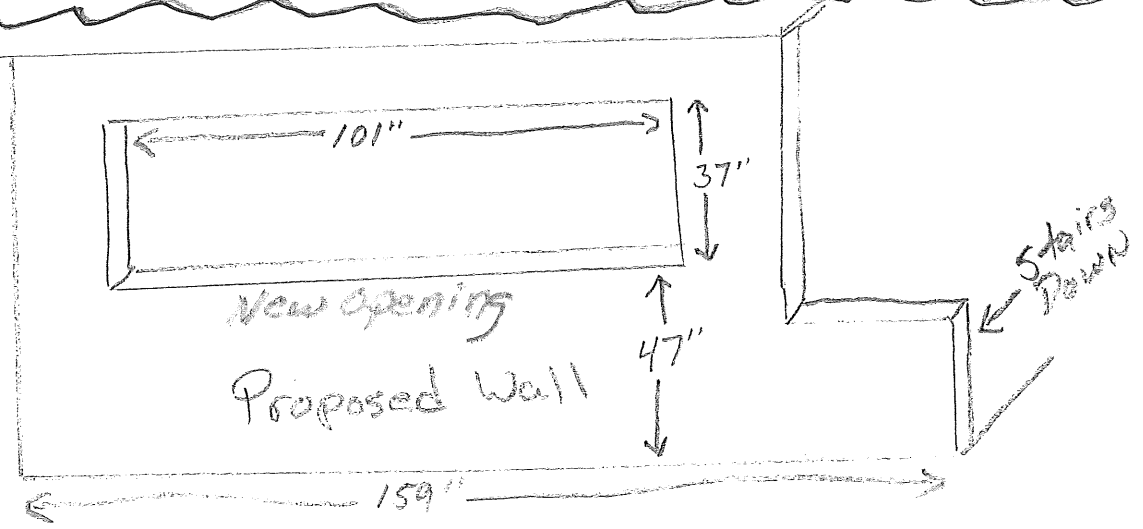
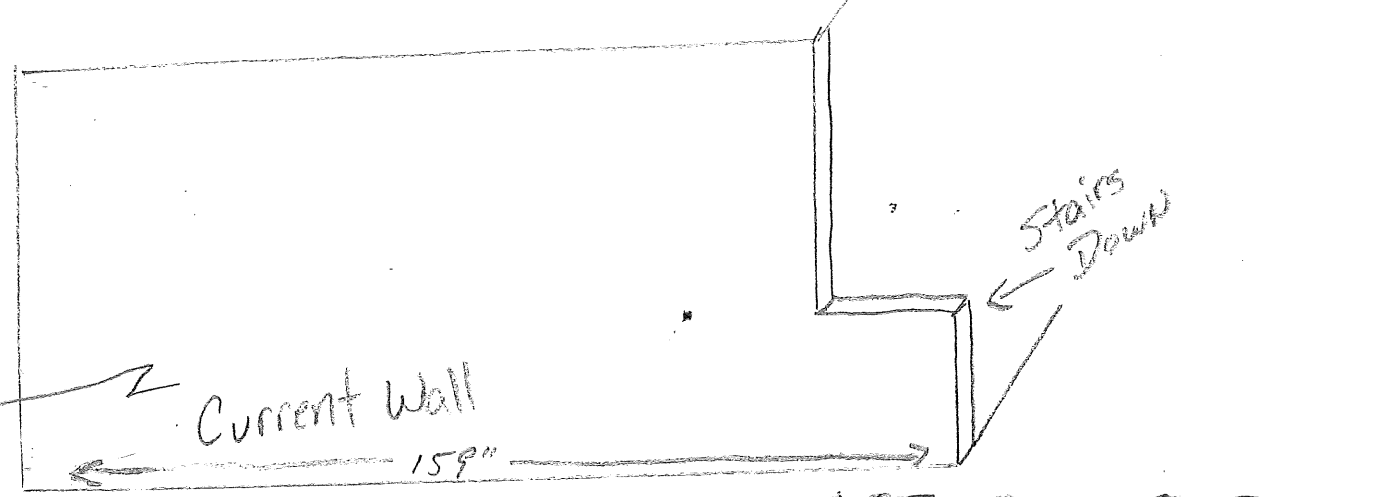
UNIT 7  
 FLOOR PLAN  
 Existing

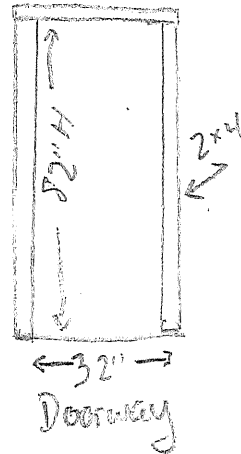
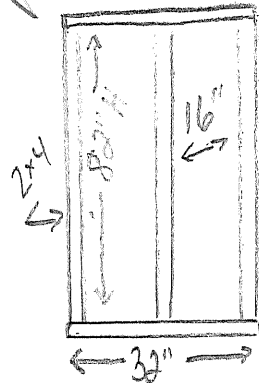
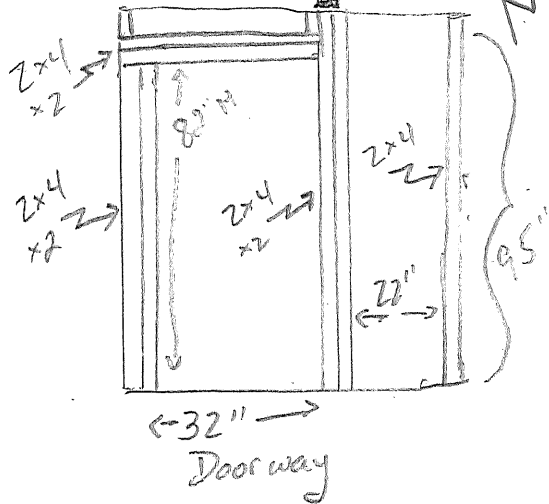
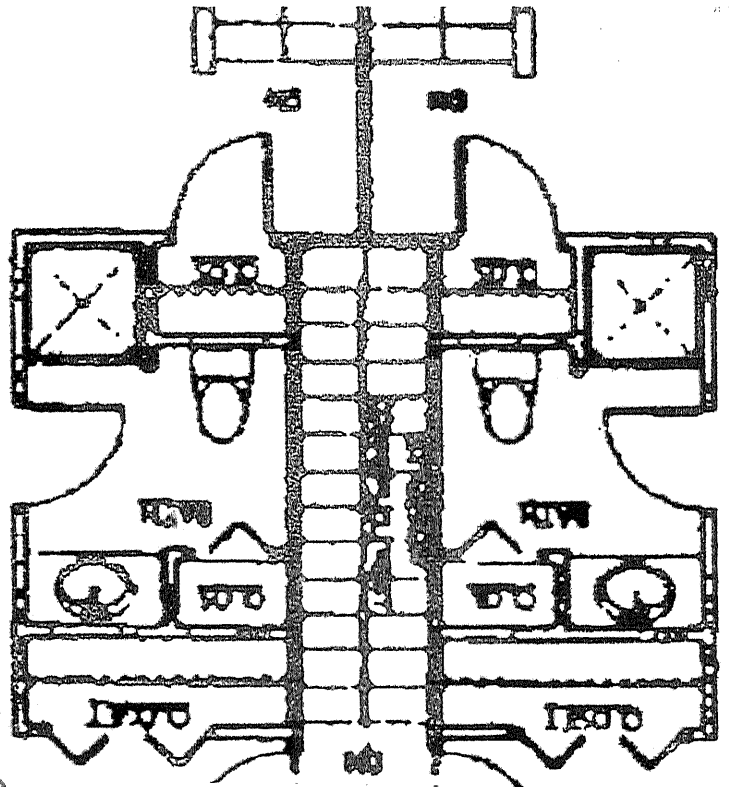
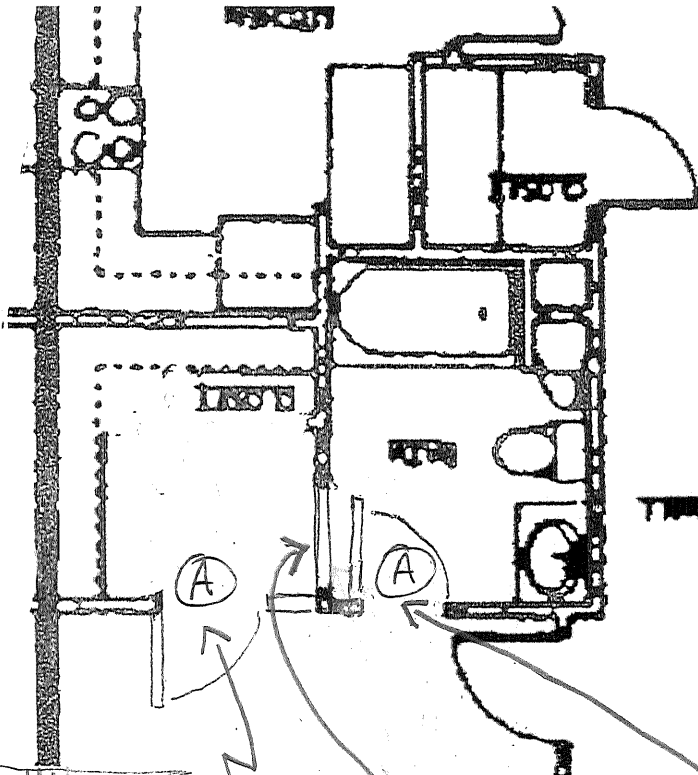
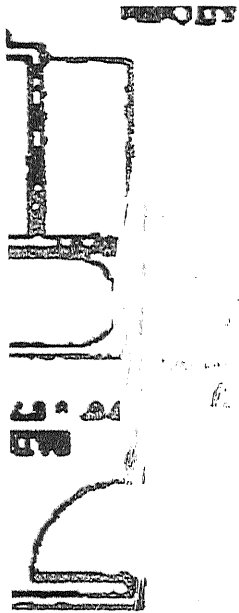
UNIT 9





Wall moved 10' into closet.





New Framing

DOOR SCHEDULE

TYP	STYLE	QTY
A	6 PNL 3' x 6'	2



# PORTLAND MAINE

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## Receipts Details:

**Tender Information:** Check , BusinessName: Robert Rothbart, Check Number: 1201

**Tender Amount:** 40.00

## Receipt Header:

**Cashier Id:** gguertin

**Receipt Date:** 9/17/2012

**Receipt Number:** 48296

## Receipt Details:

Referance ID:	8038	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	40.00	Charge Amount:	40.00
Job ID: Job ID: 2012-09-4973-ALTCOMM - Closets and walls			
Additional Comments: 209 Vaughan St. #7			

Thank You for your Payment!