

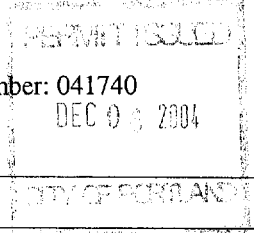
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 041740

DEC 03 2004



Please Read Application And Notes, If Any, Attached

This is to certify that West End Living Llc /Burrell Construction
has permission to Install 3 microlam beams and make half in kitchen of condominium unit
AT 197 Pine St 063 E006006

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 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.
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 leased or otherwise closed-in.
HEAR 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]
12/03/04
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

Permit No: 04-1740	Issue Date:	CBL: 063 E006006
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Location of Construction: 197 Pine St	Owner Name: West End Living Llc	Owner Address: Po Box 220	Phone: 232-7151
Business Name:	Contractor Name: Burrell Construction	Contractor Address: 7 Wally Lane Berwick	Phone: 2076981736
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone: R-4

Past Use: condominium unit	Proposed Use: condominium unit w/half wall in kitchen	Permit Fee: \$30.00	Cost of Work: \$650.00	CEO District: 2
<p><i>total property dwelling units (condos): 31 D.U.</i></p> <p>Proposed Project Description: Install 3 microlam beams and make half wall in kitchen of condominium unit</p>		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R</i> Type: <i>SB</i> <i>IBC 2003</i>	
		Signature:	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: iharris	Date Applied For: 11/23/2004	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. Building permits <i>are</i> 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.. 	Special Zone or Reviews <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"/> <i>ok</i> date: <i>11/24/04</i>	Zoning Appeal <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: _____	Historic Preservation <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 type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>Any exterior work</i> date: _____
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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
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

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

Permit No: 04-1740	Date Applied For: 11/23/2004	CBL: 063 E006006
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Location of Construction: 197 Pine St	Owner Name: West End Living Llc	Owner Address: Po Box 220	Phone: () 232-7151
Business Name:	Contractor Name: Burrell Construction	Contractor Address: 7 Wally Lane Berwick	Phone: (207) 698-1736
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	

Proposed Use: condominium unit w/half wall in kitchen	Proposed Project Description: Install 3 microlam beams and make half wall in kitchen of condominium unit
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Dept: Gilding**Status:** Approved**Reviewer:** Tammy Munson**Approval Date:** 12/03/2004**Note:****Ok to Issue:**

unit 43

All Purpose 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>97 Pine St</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot		Owner: <u>West End Living</u>
Chart# <u>23</u>	Block# <u>2</u>	Lot <u>1A</u>
Telephone: <u>232-7151</u>		
Lessee/Buyer's Name (If Applicable) <u>West End Living</u>	Applicant name, address & telephone: <u>Mark Burrell</u> <u>7 Wally Lane 207 698-1736</u>	Cost Of Work: \$ <u>650.00</u> Fee: \$ <u>30.00</u>
Current use: <u>Condominium Dwelling</u>		
If the location is currently vacant, what was prior use: <u>Apartment Dwelling</u>		
Approximately how long has it been vacant: _____ <u>NOV 2 2004</u>		
Proposed use: <u>Make Half wall in kitchen</u>		
Project description: <u>Install 3 1 3/4 micro Lam beams to carry load</u>		
Contractor's name, address & telephone: <u>Burrell Construction 7 Wally Lane</u> <u>Berwick Me</u>		
Who should we contact when the permit is ready: _____ <u>207 698-1736</u>		
Mailing address: <u>Mark Burrell 603-767-2069</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE:		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

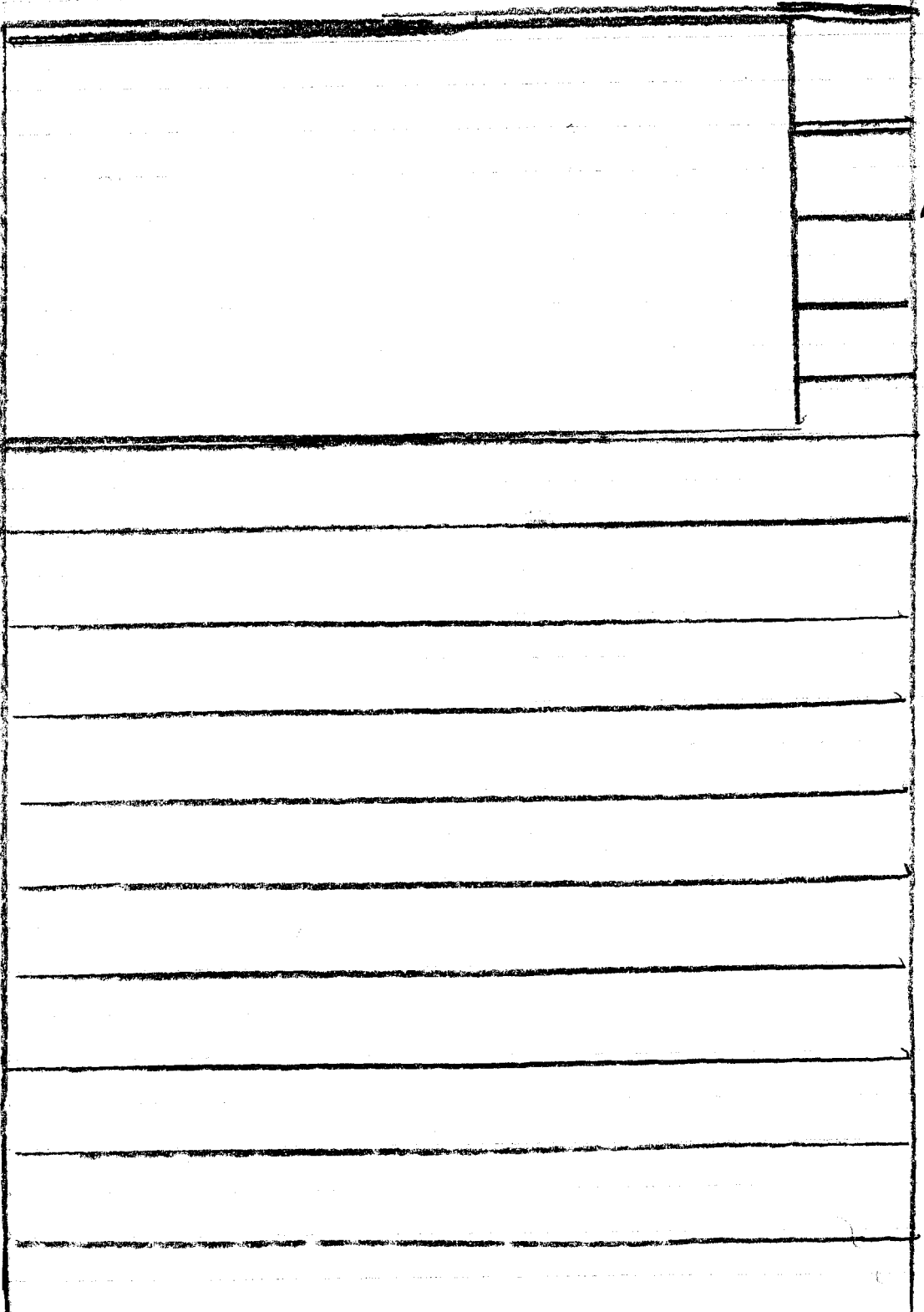
Signature of applicant: Mark Burrell Date: 11/22/04

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

Existing wall

2x4 16 oc

Ceilings 2x10 Floor Joist



10 ft Long

Engineered
for 2 micro lens

Used
3 for
Extra
Support

Wall After Renovation

10 FT

3 1 3/4 Micro Lens 117/8 x 10'

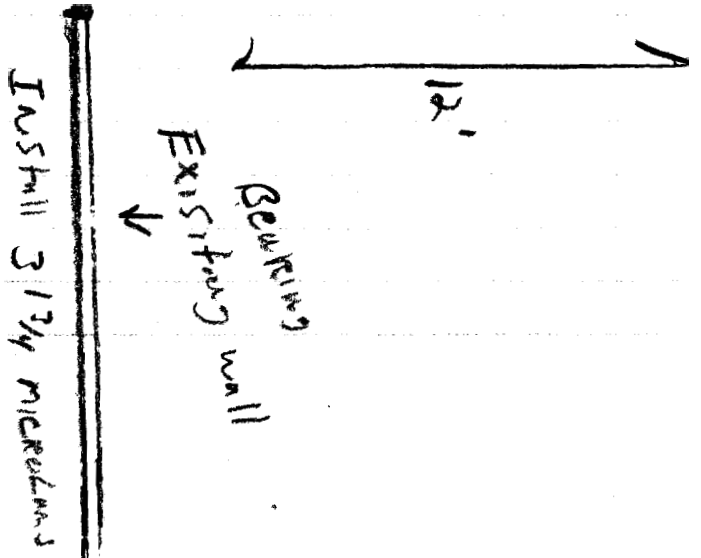
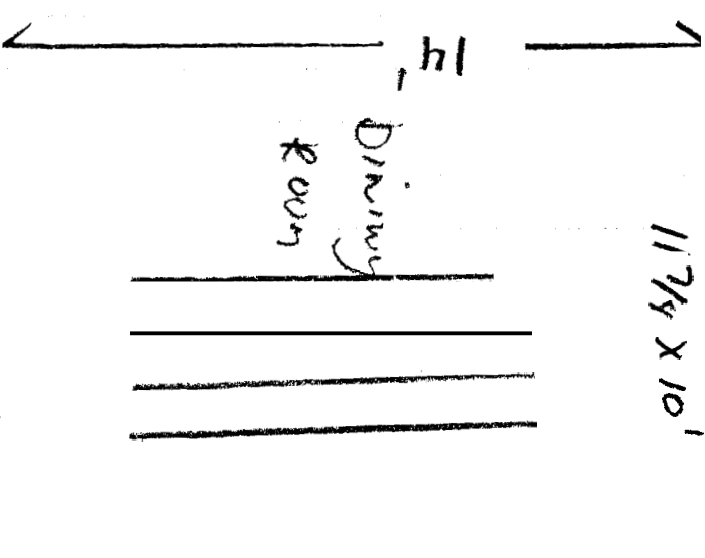
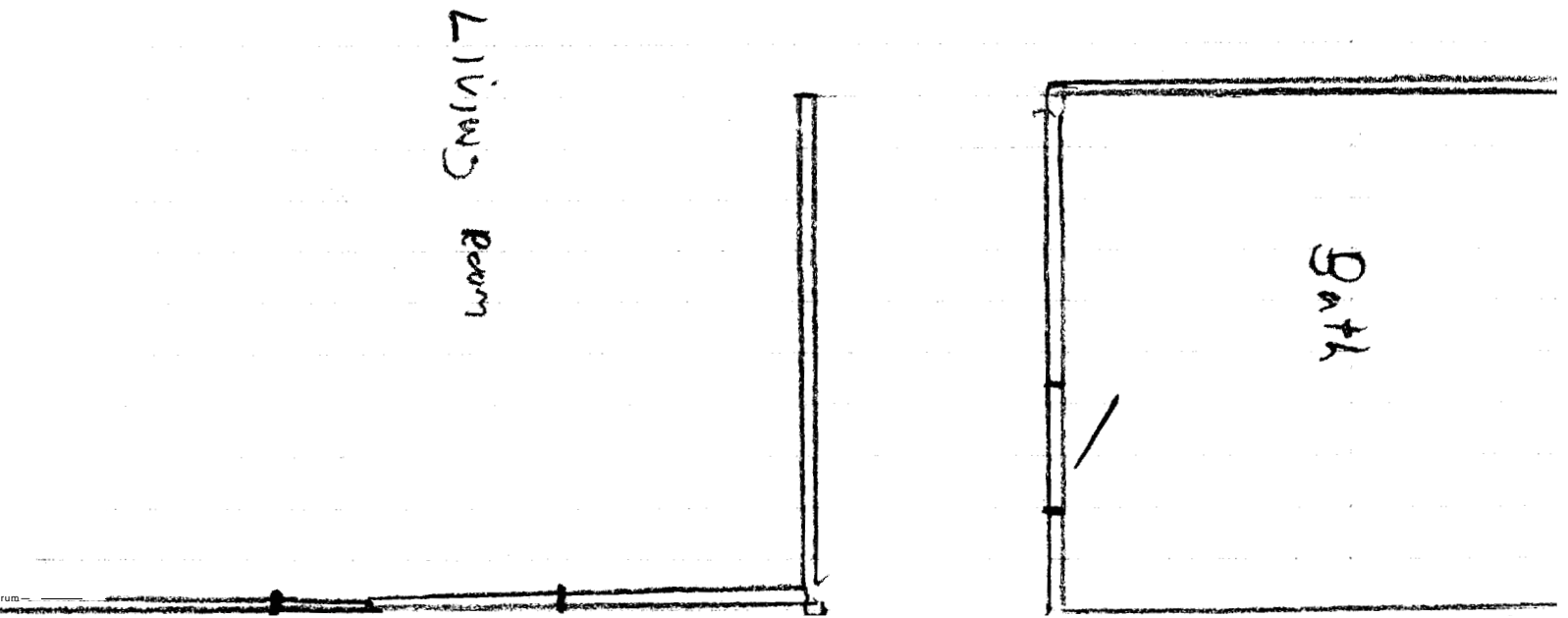
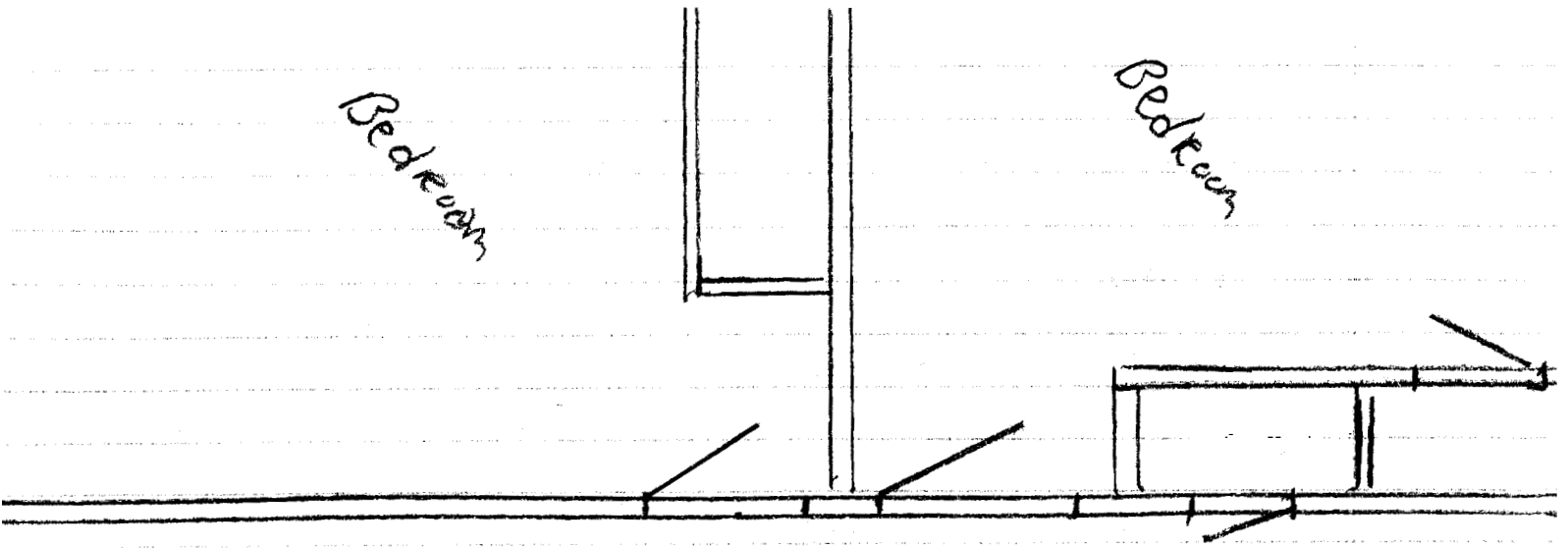
2x10 Ceiling Joist

Becking

← 2 2x4 Jacks

2x4 16 OC →

2 2x4
Jacks →



W. J. R. N.