

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

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

<b>PERMIT ISSUED</b>	
Permit No: 0-1471	Issue Date: DEC 18 2001
CBL: 064 E019001	

<b>Location of Construction:</b> 16 Gilman St	<b>Owner Name:</b> Sea Otter 16g Limited Liability	<b>Owner Address:</b> 39 Covese	<b>Phone:</b> 207-8461401
<b>Business Name:</b> n/a	<b>Contractor Name:</b> Scar, Jack	<b>Contractor Address:</b> 53 Sheridan Portland	<b>Phone:</b> 2077757036
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> Alterations - Multi Family	<b>Zone:</b> R-6

<b>Past Use:</b> Multi / 3 Unit <i>6 legal units (owner confirming)</i>	<b>Proposed Use:</b> Multi / 3 unit fire rehab. Interior non load bearing seperation wall. <i>6 b.u. total</i>	<b>Permit Fee:</b>	<b>Cost of Work:</b> \$1,200.00	<b>CEO District:</b> 3
		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: RZ Type: 5B <i>SOCA 99</i>	

<b>Proposed Project Description:</b> Fire Rehab	<b>Signature:</b> <i>[Signature]</i>	<b>Signature:</b> <i>[Signature]</i>
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

<b>Permit Taken By:</b> gg	<b>Date Applied For:</b> 11/29/2001	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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 checked="" type="checkbox"/> Date: <i>12/3/01</i>	<b>Zoning Appeal</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>[Signature]</i>	<b>Historic Preservation</b> <input checked="" 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 Date: <i>[Signature]</i>
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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

# 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.

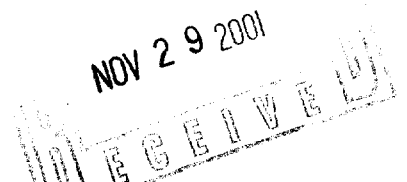
Location/Address of Construction: <u>16 GILMAN 2ND FLOOR LEFT UNIT</u>		
Total Square Footage of Proposed Structure <u>INTERIOR SQUARE FOOTAGE OF UNIT - 1430</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>014</u> Block# <u>E-</u> Lot# <u>019</u>	Owner: <u>SEA OTTEK LLC</u> <u>LOUISE MURPHY</u>	Telephone: <u>846-1401</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>JACK SCAR</u> <u>53 SHERIDAN</u> <u>PORTLAND ME 04101</u>	Cost Of Work: \$ <u>1200</u> Fee: \$ <u>36-</u>
Current use: <u>APARTMENTS - 3 UNIT</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>SAME</u> <u>FIRE RENOV</u>		
Project description: <u>INTERIOR NON LOAD BEARING SEPERATION WALL</u>		
Contractor's name, address & telephone: <u>JACK SCAR - 53 SHERIDAN</u> <u>PORTLAND ME 04101</u>		
Who should we contact when the permit is ready: <u>(SAME)</u> <u>PAUL - 818-3726</u>		
Mailing address: <u>PO BOX 703</u> <u>PORTLAND ME 04106</u> <u>HOME - 775-7036</u>		
<u>CALL when ready (pager)</u>		Phone: <u>775-7036</u>

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: <u>JACK SCAR</u>	Date: <u>11/29/01</u>
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This is not a permit, you may not commence ANY work until the permit is issued



Application ID Number: 1-1471

Department: Zoning

Status: Not Applicable

Reviewer: Marge Schmuckal

Comments: 16 Gilman St

Approval Date: 12/03/2001

Given On Date: 11/30/2001

DK to Issue Permit Name: Marge Schmuckal Date: 12/03/2001 Date 2:

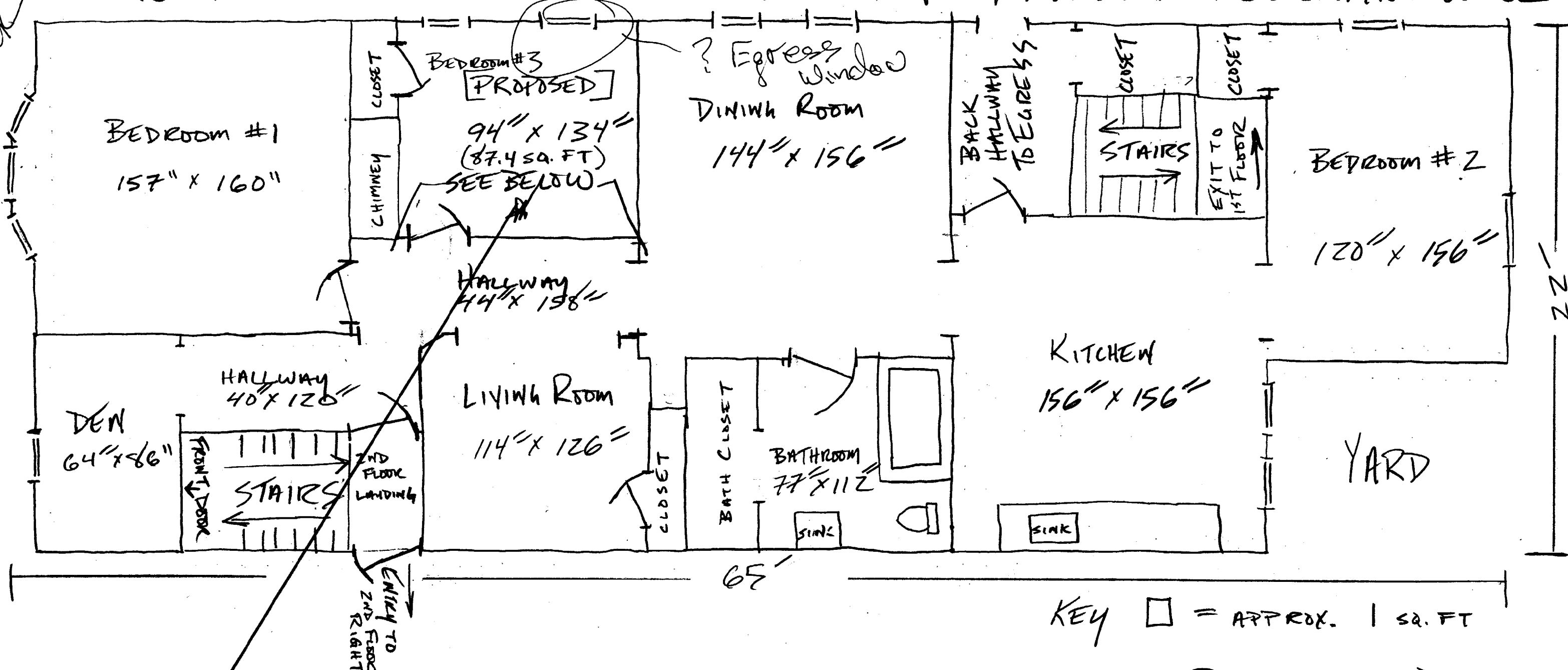
Conditions Section:

It is recognized by both the City and conversations with the owner, that the legal number of units (and the number currently present within the entire building) is six (6) dwelling units. This shall remain until separate approvals are given for any increases within the number of units.

Create Date: 11/29/2001 By: gg Update Date: 12/03/2001 By: mes



# 16 GILMAN - 2ND FLOOR LEFT UNIT - PERMIT FOR NON-LOAD BEARING SEPERATION WALL



KEY  $\square$  = APPROX. 1 SQ. FT

PLAN FOR PERMIT DONE BY: JACK STAR  
 PAGER/PHONE: 207-816-3726  
 NAME OF COMPANY: A WALKING STAIR WOODWORKS  
 OWNER/CONTRACTOR: JACK STAR  
 P.O. BOX 7903  
 FORTLAND ME 04106

OWNER: LOUISE MURPHY  
 39 COVESIDE LAKE  
 COUSINS ISLAND, 04096  
 PHONE - 207-846-1401

- PLAN - (ASSEMBLE WALL USING):
- ① - 2x4 TOP + BOTTOM PLATE
  - ② - 2x4 STUDS 16" o.c.
  - ③ - CREATE 2x4 BRACED HEADER FOR 32x80 BEDROOM DOOR
  - ④ - DRYWALL, TAPE MUD - FINISH TRIM TO MATCH & PAINT

