

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <u>52 Bowdoin St.</u>		Owner: <u>Richard &amp; Alice Spencer</u>		Phone: <u>773-5274</u>		Permit No: <b>000668</b>
Owner Address:		Lessee/Buyer's Name:		Business Name:		
Contractor Name: <u>SAA</u> <b>****The Gillian Group Inc.</b>		Address: <u>28 College Ave, Gorham, ME 04038</u>		Phone: <u>839-8239</u>		<b>PERMIT ISSUED</b> Permit Issued: <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>JUN 23 2000</b> </div> <b>CITY OF PORTLAND</b> Zone: <u>2-4</u> CBL: <u>070-D-005</u>
Past Use: <u>Single family</u>		Proposed Use: <u>same</u>		COST OF WORK: \$ <u>50,000</u> FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Proposed Project Description: <u>Kitchen renovations and deck repair</u>		PERMIT FEE: \$ <u>324.00</u> INSPECTION: Use Group: <u>R3</u> Type: <u>50</u> Signature: _____		Zoning Approval: <input checked="" type="checkbox"/> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input checked="" 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"/> Norm		
Permit Taken By: <u>Kathy</u>		Date Applied For: <u>6/12/00</u>				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

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 information may invalidate a building permit and stop all work..

Please mail to  
**The Gillian Group**  
 28 College Ave  
 Gorham, ME 04038

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE: <u>6/13/00</u>	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**PERMIT ISSUED WITH REQUIREMENTS**

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

**PERMIT ISSUED WITH REQUIREMENTS**  
**CEO DISTRICT**  
3

COMMENTS

07/03/00 pre-construction - talked about deck rail kit and g-u-nos + hangers and requirements - setback not needed - same footprint - no egress windows in kitchen - told contractor about needed inspections including permits needed for electrical & plumbing, Historical District - OK by them, TM

8/9/00 Met w/ Link Gilman on site. Checked framing, plumbing and electrical. OK. to close in JK

10-3-00 Did final insps. on pitches & decks everything completed & OK Close out permit

John Miller  
+ John Beck

70-D-5  
C-B-L

000 668

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

# PLUMBING APPLICATION

#3  
070-D-005

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation: Portland  
Street Subdivision Lot #: 2 Boudoin St 04102

## PROPERTY OWNER

Last: Spencer First: Richard  
Applicant Name: Michael Capron  
Mailing Address of Owner/Applicant (If Different): P.O. Box 673 Pine Hill 04107

PORTLAND Date Permit Issued: 7/5/2000 7356 TOWN COPY \$ 310.00  # Double Fee Charged FEE

Local Plumbing Inspector Signature: [Signature] L.P.I. # 01124

### Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: Michael Capron Date: 7/5/2000

### Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: [Signature] Date Approved: 10-3-00

## PROPERTY INFORMATION

<p><b>This Application is for</b></p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p><b>Plumbing To Be Installed By:</b></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>18751</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b>		Urinal	0, 1	Sink
		Drinking Fountain		Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste		Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.	0, 1	Clothes Washer
		Grease / Oil Separator	0, 1	Dish Washer
		Dental Cuspidor		Garbage Disposal
<b>OR</b>		Bidet		Laundry Tub
		Other: <u>Lead Ball Replacement</u>	0, 1	Water Heater
TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	4	
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				
			1	
			3	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			30	<b>Permit Fee (Total)</b>

Plumbing 30.00  
Surcharges 10.00