

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that PETER » MITSCHELE

Located At 67 DOUGLASS

Job ID: 2011-07-1684-SF

CBL: 078 - - B - 002 - 001 - - - -

has permission to Amend original to include finishing basement and egress window provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues 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

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**

[Handwritten signature and date 8/29/11]

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: 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.**
1. Close-in inspection required prior to insulating or drywalling.
 2. Final inspection required upon completion of work.

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

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-07-1684-SF

Located At: 67 DOUGLASS

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Conditions of Approval:

Zoning

1. This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
2. This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. without special approvals.
3. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Building

1. 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.
2. Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-07-1684-SF 2011-6090 - Amend	Date Applied: 8/23/2011	CBL: 078 - - B - 002 - 001 - - - - -	
Location of Construction: 67 DOUGLASS ST	Owner Name: MAJCO Property Services, LLC	Owner Address: 240 WOODVILLE RD FALMOUTH, ME 04105	Phone: 207-329-1051
Business Name:	Contractor Name: Owner	Contractor Address:	Phone:
Lessee/Buyer's Name:	Phone:	Permit Type: BLDG - Building - Amend	Zone: R-5
Past Use: Single Family (#2011-07-1684)	Proposed Use: Same - Single Family - finish basement & add egress windows	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A	Inspection: Use Group: P.3 Type: SB
		Signature:	Signature:
Proposed Project Description: finish basement w/egress windows		Pedestrian Activities District (P.A.D.)	
Permit Taken By:	Zoning Approval		

	Special Zone or Reviews	Zoning Appeal	Historic Preservation
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.	<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	<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	<input checked="" 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
	Date: 8/29/11 ABM	Date:	Date: ABM

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

Single Family - lot 10-112
R-5

(2011-07-1684) 2011-6090



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: <u>107 Douglass St</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories <u>1</u>
Tax Assessor's Chart, Block & Lot Chart# <u>078</u> Block# <u>2002001</u> Lot#	Applicant *must be owner, Lessee or Buyer* Name <u>MASCO Prop. SIC</u> Address <u>240 Woodville Rd</u> City, State & Zip <u>Falmouth ME</u>	Telephone: <u>329-1051</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ C of O Fee: \$ Total Fee: \$ <u>30</u>
Current legal use (i.e. single family) <u>SFR</u> Number of Residential Units <u>1</u> If vacant, what was the previous use? <u>2 Fam.</u> Proposed Specific use: <u>Residence</u> Is property part of a subdivision? <u>no</u> If yes, please name Project description: <u>Finished Basement change - re egress windows</u>		
Contractor's name: <u>MASCO</u> Address: <u>240 Woodville Rd</u> City, State & Zip <u>Falmouth ME 04105</u> Telephone: Who should we contact when the permit is ready: <u>Peter Mischele</u> Telephone: <u>329-1051</u> Mailing address: <u>same</u>		

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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, 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.

Signature: _____ Date: 8/22/11

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



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

023 20 11

Received from _____

Location of Work _____

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 30

Building (I1) _____ Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

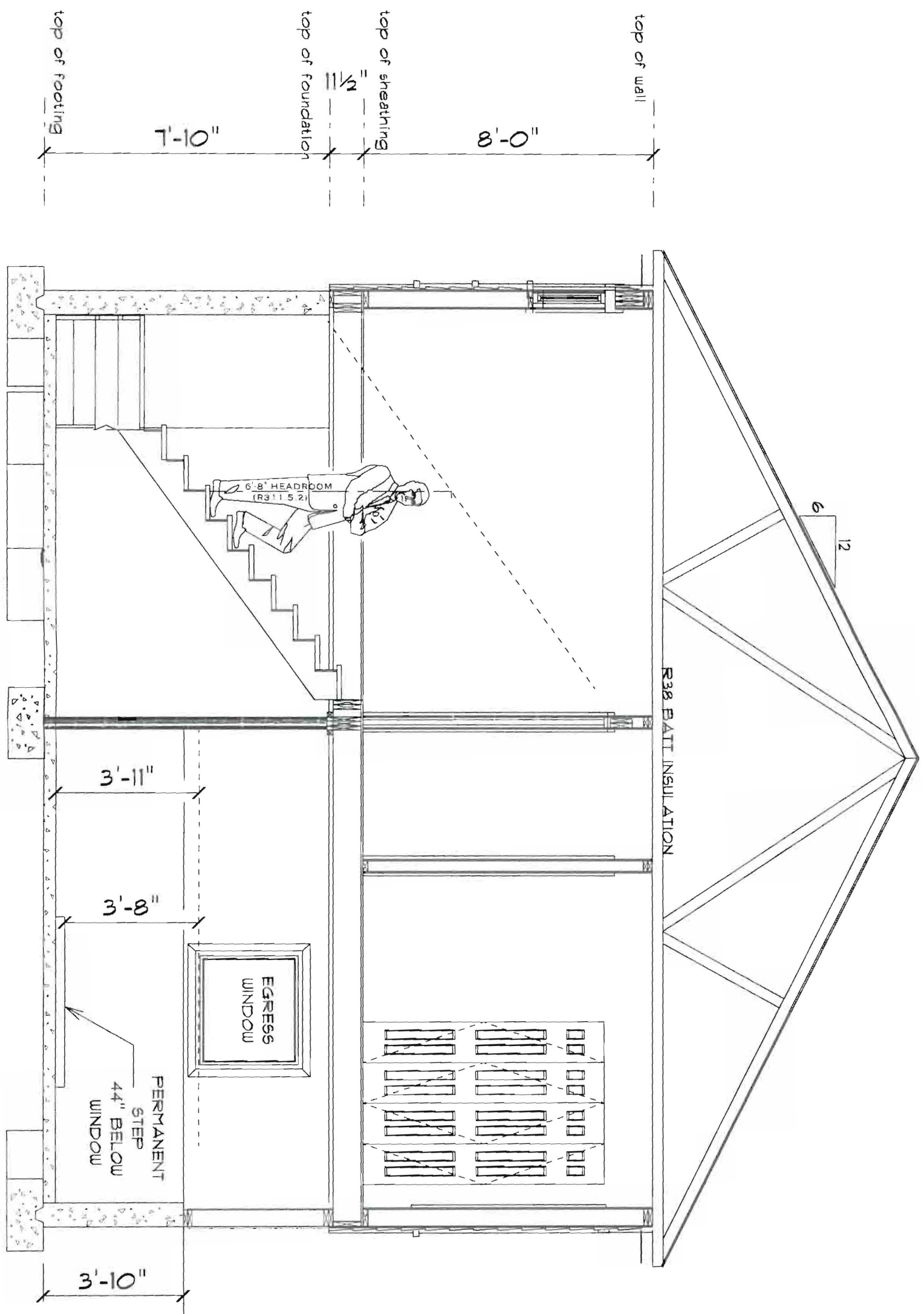
CBL: 78-8-2

Check #: 7029 Total Collected \$ 30

**No work is to be started until permit issued.
Please keep original receipt for your records.**

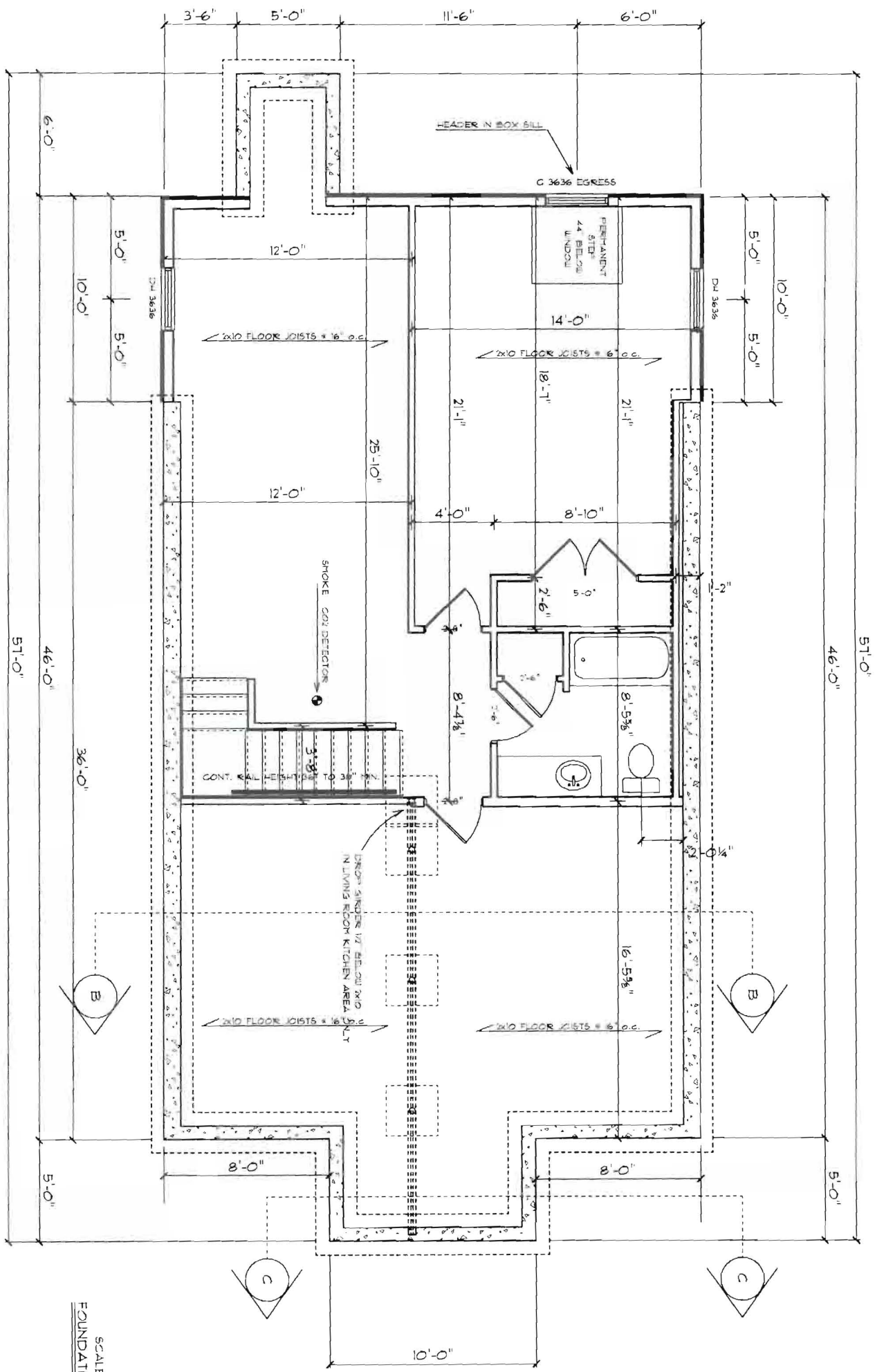
Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy



CROSS SECTION A-A

SCALE: 1/4" = 1'-0"



SCALE 1/4" = 1'-0"
 FOUNDATION PLAN