

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

Location of Construction: 34 Sheffield St		Owner: Lerman, Gary & Dot		Phone:		Permit No: 961236 PERMIT ISSUED Permit Issued: DEC 20 1996 CITY OF PORTLAND Zone: CBL: 080-G-014		
Owner Address:		Leasee/Buyer's Name:		Phone:			BusinessName:	
Contractor Name: Redskin Builders		Address: RR 1, Box 541 Naples, ME 04055		Phone: 787-3280				
Past Use: 1-fam		Proposed Use: Same		COST OF WORK: \$ 11,500.00			PERMIT FEE: \$ 80.00	
Proposed Project Description: Make Interior Renovations				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group A3 Type: 5B BOCA-95		
				Signature:		Signature:		
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval:		
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		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"/>		
Permit Taken By: Mary Greshk		Date Applied For: 17 December 1996				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 doesn't 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..

mail to owner

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 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 <i>Larry Sacord</i> Larry Sacord		ADDRESS:		DATE: 17 December 1996		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						PHONE:	

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

5

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Proposed Project Description: Make <u>Interior</u> Renovations		Signature:		Signature:	
Permit Taken By: Mary Gresik		Date Applied For: 17 December 1996		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
				Signature: _____ Date: _____	

Permit No: **961236**

PERMIT ISSUED

DEC 20 1996

CITY OF PORTLAND

Zone: R-3 CBL: 080-G-014

Zoning Approval: to remain 1-family
NO new additions without
Special Zone or Reviews:

Shoreland separate permit
 Wetland
 Flood Zone 12/19/96
 Subdivision
 Site Plan maj minor mm

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: 12/19/96

D. Anderson

CEO DISTRICT 5

D. Jordan

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SIGNATURE OF APPLICANT <u>Larry Secord</u> <u>Redskin Builders</u>		ADDRESS:	DATE: 17 December 1996	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		PHONE:		

COMMENTS

3-30-98 work complete

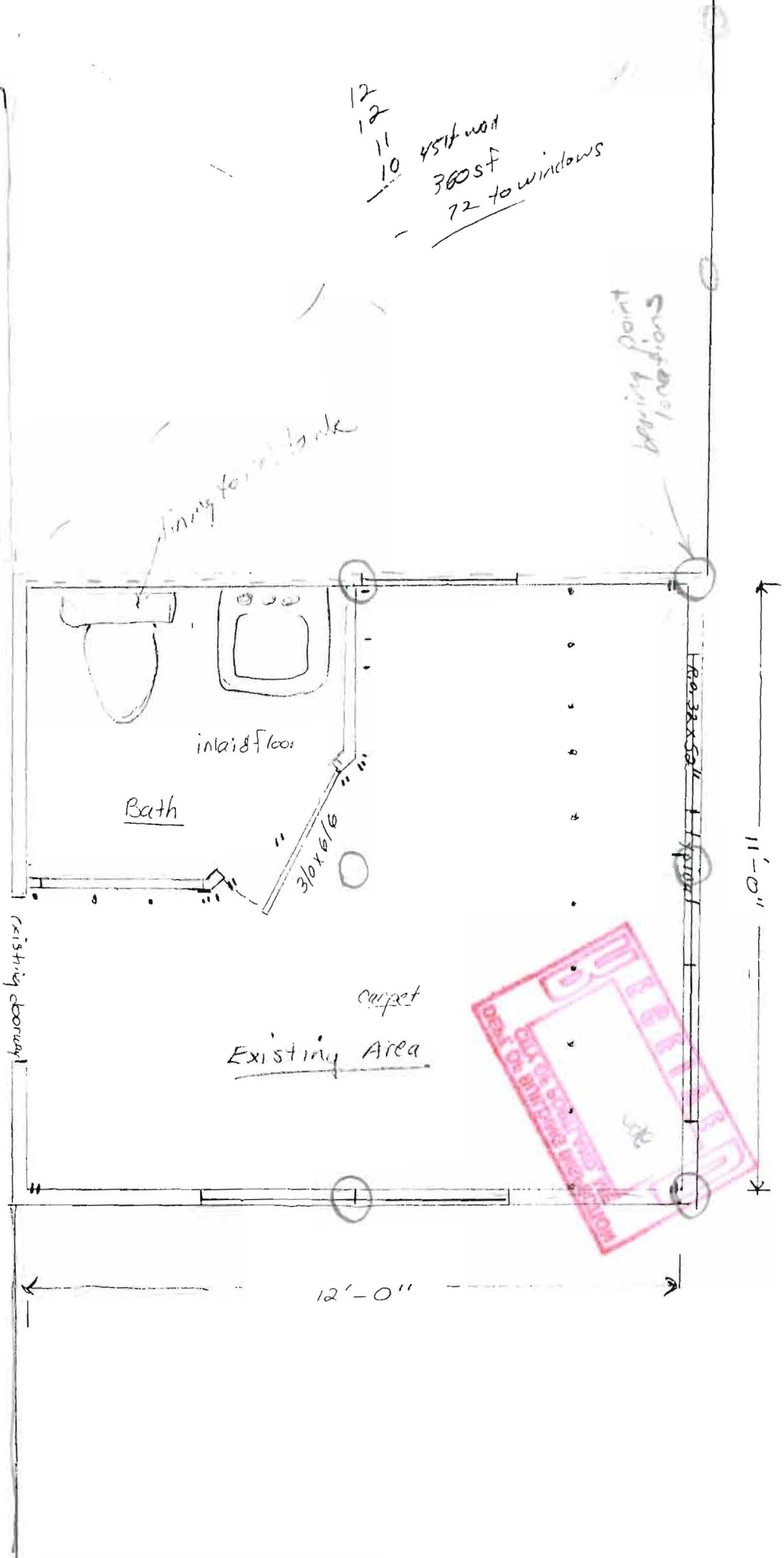
Inspection Record

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

Dot + Harry Lerman
34 Sheffield St
Portland, Maine

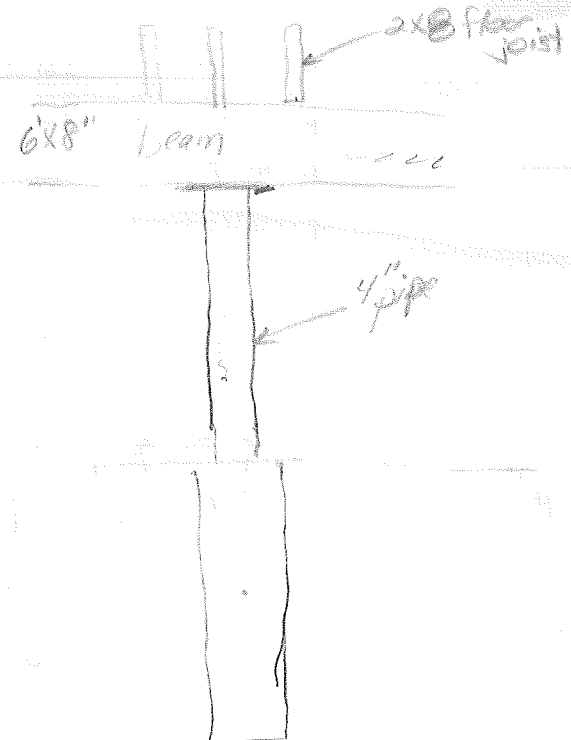
12
12
11
10
45 ft wall
380 sf
72 to windows

Existing House

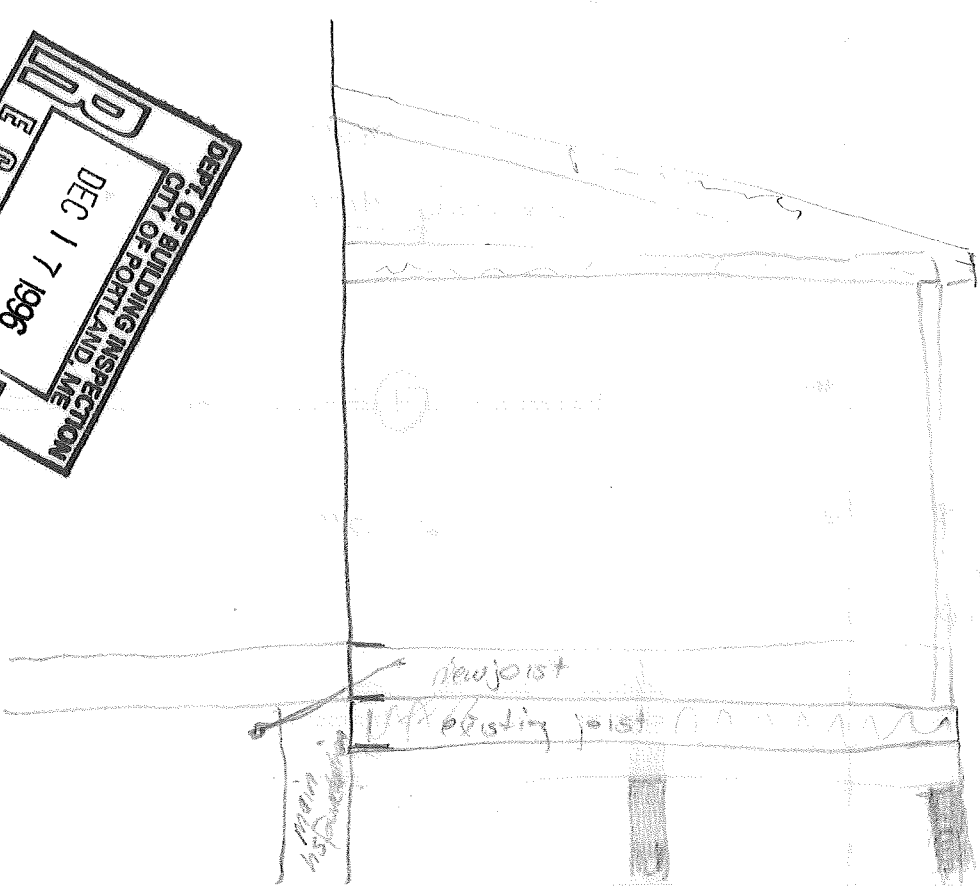


Larry Seard
Redskin Builders
RR1 Box 541
Naples, Maine
04055

11/17/96
11/17/96
11/17/96



DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
RECEIVED
DEC 17 1996



11/17/96
11/17/96
11/17/96

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering

PROPERTY ADDRESS

Town Or Plantation: Portland
Street Subdivision Lot #: 39 Sheffield St

PROPERTY OWNERS NAME

Last: Lerman First: _____

Applicant Name: Rick's Plumbing Serv.
Mailing Address of Owner/Applicant (if Different): 346 New Portland Rd, Gorham Me. 04038

PORTLAND PERMIT # 5955 STATE COPY
Date Permit Issued: 12.23.96 \$ 1.25 If Double Fee Charged
L.P.I. # 01241
55 _____
Local Plumbing Inspector Signature

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 Inspector to deny a Permit.

Caution: Inspection Required

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

Signature of Owner/Applicant: Richard Lerman Date: 12/23/96

Local Plumbing Inspector Signature: _____ Date Approved: _____

PERMIT INFORMATION

This Application Is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER — SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>5556</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	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)
OR		Urinal		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.		Clothes Washer
		Grease / Oil Separator		Dish Washer
OR		Dental Cuspidor		Garbage Disposal
		Blidet		Laundry Tub
TRANSFER FEE [\$6.00]		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>2</u>	Fixtures (Subtotal) Column 1
			<u>2</u>	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$ 12.