

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

Location of Construction: 60 Seal Cove Rd. Diamond Cove, G.D.I		Owner: *** Jonathon Bonnie Diets	Phone: *** 799-9895	Permit No: 000929
Owner Address: 23 Cole Field Rd. Cape Elizabeth, ME		Lessee/Buyer's Name:	Business Name:	<div style="border: 2px solid black; padding: 5px;"> <p>PERMIT ISSUED</p> <p>AUG 25 2000</p> </div>
Contractor Name: Kevin Tracy Goduti Bld		Address: Park Circle Cape Elizabeth	Phone: 799-3105	
Past Use: Single Family	Proposed Use: Same	COST OF WORK: \$ 2,000.00 PERMIT FEE: \$ 26.00		Zoning Approval: IRI 083E-A020 Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan major minor <input type="checkbox"/>
Proposed Project Description: Amend original permit # 990948, to include dormer in garage roof as shown in plans for future bathroom		FIRE DEPT.: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type:		
Permit Taken By: Gayle		Date Applied For: August 21, 2000 GG		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..

PERMIT ISSUED WITH REQUIREMENTS

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

August 21, 2000

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT



COMMENTS

12/28/99 Site visit w owners & contractors Population Impact meets set back requirements survey pins found TR

2/1/00 OK to Backfill TR

7/25/01 - Final inspection for Cops

1. Handrail to basement no return - Return put on while I was present. There was no record of a framing inspection done - I was there during framing while on another inspection with Sealast Electric - I saw wiring and framing at that time and was satisfied it was to code (actually over-built.) I see no problem in issuing the Certificate of Occupancy at this time. Temu

Close permit

CBC# ~~000929~~ 083EA020

permit # 000929

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

ELECTRICAL PERMIT

City of Portland, Me.



SIF=JR

Ⓚ

To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 11/29/00

Permit # 1041

LOCATION: Diamond Cove Lot 29

GDT Pleasant Cove Lane 083E-14-029

CMP ACCOUNT # 441-166-5021-001

METER MAKE & # _____
 OWNER Matt Hoffner

TENANT _____

PHONE # _____

							TOTAL EACH FEE			
OUTLETS	65	Receptacles	25	Switches	8	Smoke Detector		.20	19.60	
FIXTURES	20	Incandescent		Fluorescent		Strips		.20	4.00	
SERVICES		Overhead	1	Underground		TTL AMPS	<800	15.00	15.00	
		Overhead		Underground			>800	25.00		
Temporary Service		Overhead		Underground		TTL AMPS		25.00		
								25.00		
METERS	1	(number of)						1.00	1.00	
MOTORS		(number of)						2.00		
RESID/COM		Electric units						1.00		
HEATING		oil/gas units		Interior		Exterior		5.00		
APPLIANCES	1	Ranges	1	Cook Tops		Wall Ovens		2.00	4.00	
		Insta-Hot		Water heaters	1	Fans		2.00	2.00	
	1	Dryers		Disposals	1	Dishwasher		2.00	4.00	
		Compactors		Spa	1	Washing Machine		2.00	2.00	
		Others (denote)						2.00		
MISC. (number of)		Air Cond/win						3.00		
		Air Cond/cent				Pools		10.00		
		HVAC		EMS		Thermostat		5.00		
		Signs						10.00		
		Alarms/res						5.00		
		Alarms/com						15.00		
		Heavy Duty(CRKT)						2.00		
		Circus/Carnv						25.00		
		Alterations						5.00		
		Fire Repairs						15.00		
		E Lights						1.00		
		E Generators						20.00		
	PANELS	1	Service		Remote		Main	1	4.00	4.00
	TRANSFORMER		0-25 Kva						5.00	
			25-200 Kva						8.00	
		Over 200 Kva						10.00		
							TOTAL AMOUNT DUE			
							MINIMUM FEE/COMMERCIAL 45.00	MINIMUM FEE 35.00	55.60	

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME Tim Taplin
 ADDRESS 153 Dutton Hill Gray
 TELEPHONE 657-5245

MASTER LIC. # MS60013654
 LIMITED LIC. # _____

SIGNATURE OF CONTRACTOR Tim Taplin

821-9733

ELECTRICAL PERMIT

City of Portland, Me.



S/F # SW

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 11-30-00

Permit # _____
CBL# 083 E A 20

LOCATION: Great Diamond Island 20 Lot 60 Seal Cove Lane METER MAKE & # _____
CMP ACCOUNT # _____ OWNER John Dietz
TENANT _____ PHONE # _____

							TOTAL EACH FEE		
OUTLETS	100	Receptacles	75	Switches	7	Smoke Detector		.20	36.40
FIXTURES	30	Incandescent		Fluorescent	8	Strips		.20	7.80
SERVICES		Overhead		Underground		TTL AMPS	<800	15.00	
		Overhead		Underground			>800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS		(number of)						1.00	
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES	1	Ranges		Cook Tops		Wall Ovens		2.00	8.00
		Insta-Hot		Water heaters	4	Fans		2.00	8.00
	1	Dryers		Disposals	1	Dishwasher		2.00	4.00
		Compactors		Spa	1	Washing Machine		2.00	
		Others (denote)						2.00	
MISC. (number of)		Air Cond/win						3.00	
		Air Cond/cent				Pools		10.00	
		HVAC		EMS		Thermostat		5.00	
		Signs						10.00	
		Alarms/res						5.00	
		Alarms/com						15.00	
		Heavy Duty(CRKT)						2.00	
		Circus/Carnv						25.00	
		Alterations						5.00	
		Fire Repairs						15.00	
		E Lights						1.00	
		E Generators						20.00	
	PANELS		Service		Remote		Main		4.00
TRANSFORMER		0-25 Kva						5.00	
		25-200 Kva						8.00	
		Over 200 Kva						10.00	
							TOTAL AMOUNT DUE		
							MINIMUM FEE/COMMERCIAL	45.00	
							MINIMUM FEE	35.00	58.20

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME P & D Electric
ADDRESS 205 Rockport St. Westbrook
TELEPHONE 854-5543

MASTER LIC. # MS-600-13850
LIMITED LIC. # _____
252-0441

SIGNATURE OF CONTRACTOR [Signature]

ELECTRICAL PERMIT

City of Portland, Me.

S/F #1



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 7/12/00
 Permit # 101
 CBL# 083E-A-000

SITE LOCATION: 60 Seal Cove Rd

OWNER John & Bonnie Dietz TENANT _____

							TOTAL EACH FEE		
OUTLETS	Receptacles	<u>10</u>	Switches	<u>35</u>	Smoke Detectors	<u>9</u>	.20	<u>20.80</u>	
FIXTURES	incandescent	<u>30</u>	fluorescent		Strips	<u>6</u>	.20	<u>7.20</u>	
SERVICES	Overhead		Underground	<u>1</u>	TTL AMPS	<800	15.00	<u>15.00</u>	
	Overhead		Underground			>800	25.00		
Temporary Service	Overhead		Underground		TTL AMPS		25.00		
							25.00		
METERS	(number of)	<u>1</u>					1.00	<u>1.00</u>	
MOTORS	(number of)						2.00		
RESID/COM	Electric units						1.00		
HEATING	oil/gas units		Interior		Exterior		5.00		
APPLIANCES	Ranges	<u>1</u>	Cook Tops		Wall Ovens		2.00	<u>2.00</u>	
	Insta-Hot		Water heaters		Fans	<u>3</u>	2.00	<u>6.00</u>	
	Dryers	<u>1</u>	Disposals		Dishwasher	<u>1</u>	2.00	<u>4.00</u>	
	Compactors		Spa		Washing Machine	<u>1</u>	2.00	<u>2.00</u>	
	Others (denote)						2.00		
MISC. (number of)	Air Cond/win						3.00		
	Air Cond/cent				Pools		10.00		
	HVAC		EMS		Thermostat		5.00		
	Signs						10.00		
	Alarms/res						5.00		
	Alarms/com						15.00		
	Heavy Duty(CRKT)						2.00		
	Circus/Carnv						25.00		
	Alterations						5.00		
	Fire Repairs						15.00		
E Lights						1.00			
E Generators						20.00			
PANELS	Service		Remote	<u>1</u>	Main		4.00	<u>4.00</u>	
TRANSFORMER	0-25 Kva						5.00		
	25-200 Kva						8.00		
	Over 200 Kva						10.00		
TOTAL AMOUNT DUE									
MINIMUM FEE/COMMERCIAL 35.00							MINIMUM FEE	25.00	<u>6200</u>

INSPECTION: Will be ready _____ or will call

CONTRACTORS NAME Scott Arnold Electric
 ADDRESS 263 Town Farm Rd. New Charlestown, ME
 TELEPHONE 926-5200

MASTER LIC. # 13676
 LIMITED LIC. # _____

SIGNATURE OF CONTRACTOR Scott Arnold

PLUMBING APPLICATION

510
083E-A-020

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Diamond Cove GDF
Street Subdivision Lot #: Seaf Cove Ln Ldr 20

PROPERTY OWNERS NAME

Last: John First: Deitz
Applicant Name: Morrison Plumbing
Mailing Address of Owner/Applicant (If Different): 9 Fern Ave 008

PORTLAND
Date Permit Issued: 11/12/00 PERMIT # 7549 STATE COPY
Local Plumbing Inspector Signature: 219 L.P.I. # 0624
\$ 1114 Double Fee Charged

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.

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

Date 12/10/00

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

Type of Structure To Be Served:

Plumbing To Be Installed By:

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER - SPECIFY _____

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER/MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER Darin Hallett
LICENSE # M670026806

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>OR</p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>OR</p> <p>TRANSFER FEE [\$6.00]</p>	3	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	7	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	Fixtures (Subtotal) Column 2		3	Fixtures (Subtotal) Column 1
<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p>			16	Fixtures (Subtotal) Column 2
			19	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

083E-A-020

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health Services
Division of Health Engineering
(207) 287-5000 FAX (207) 287-5110

PROPERTY LOCATION

Town or Plantation: **PORTLAND**

Street Subdivision Lot: **GREAT DIAMOND, DIAMOND COVE**

Lot: **LOT #20, SEAL COVE**
PROPERTY OWNER'S NAME

First Name: **DIETZ** Last Name: **BONNIE**

Address of Owner: **23 COLE FIELD**
CAPE ELIZABETH, ME

Capitals: Lot #

PORTLAND
Date Permit Issued: **12/28/97**

6967 TOWN COPY

\$ **111010** FEE Double Fee Charged

L.P.I. # **0124**

Local Plumbing Inspector Signature: *[Signature]*

Municipal Tax Map # Lot #

Owner Statement

I declare that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.

Signature of Owner/Applicant: _____ Date: _____

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules application.

Local Plumbing Inspector Signature: _____ Date Approved: _____

PERMIT INFORMATION

TYPE OF APPLICATION:

- First Time System
- Replacement System
Type Replaced: _____
Year Installed: _____
- Expanded System
 a. one time accepted
 b. non-accepted
- Experimental System
- Seasonal Conversion

THIS APPLICATION REQUIRES:

- No Rule Variance
- New System Variance (Municipal soil condition)
- First Time System Variance (State)
- Replacement System Variance
 a. Local Plumbing Inspector approval
 b. State & Local Plumbing Inspector approval
- Minimum Lot Size Variance
- Seasonal Conversion Approval

DISPOSAL SYSTEM COMPONENT(S)

- Non-Engineered System
- Primitive System (gray water & soil filter)
- Alternative Toilet
- Non-Engineered Treatment Unit
- Holding Tank _____ Gallons
- Non-Engineered Disposal Area Tank
- Separated Laundry System
- Engineered System (2000+ GPD)
- Engineered Treatment Tank (only)
- Engineered Disposal Area (only)
- Pretreatment

SIZE OF PROPERTY

49,683 SF.

SHORELAND ZONING

rec H5

DISPOSAL SYSTEM TO SERVE:

- Single Family Dwelling Unit
- Multiple Family Dwelling Number of Units: _____
- Other: _____

TYPE OF WATER SUPPLY

PUBLIC WATER

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- Concrete
- Polypropylene
- Low Profile
- Plastic
- Other

Size: **1000** Gallons

DISPOSAL AREA TYPE / SIZE

- Bed _____ Sq Ft
- Proprietary Design **1200** Sq Ft
- Cluster Linear
- Regular H 20
- Trench
- Other

GARBAGE DISPOSAL UNIT

- No
- Yes

Multi-compartment tank

Tank in series

Increase in tank capacity

Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

4 BEDROOMS AT 90 GALLONS PER DAY EACH =

DESIGN FLOW: **360** (Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE	DESIGN
2	A
DEPTH TO FIRST LIMITING FACTOR	16

DISPOSAL AREA SIZING

- Small - 2.00
- Medium - 2.60
- Medium Large - 3.30
- Large - 4.10
- Extra-Large - 5.00

PUMPING

- Not required
- May be required
- Required

DOSE: **150** Gallons

SITE EVALUATOR'S STATEMENT

On **12/10/97** (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules.

Albert Frick
Site Evaluator Signature

163
SF

12/29/97
Date



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 60 Seal Cove Ln

CBL 083E A0200010

Issued to Dietz, Jonathan/North Atlantic Custome Builders, Inc.

Date of Issue 09/02/1999 (7-26-01)

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 99-0948, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

Entire PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Use Group R-3
Single Family Residency
Type 5B
BOCA 96

Limiting Conditions:
None

This certificate supersedes
certificate issued

Approved:

7/26/01 Thomas M. Markley
(Date) Inspector

G. Samuel Ash
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.