

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: John Capizzo Rolf Amore Phone # _____
 Address: Winding Way
 LOCATION OF CONSTRUCTION 3rd and 5th St. Peaks Island 85 T-2, 3, 4
 Contractor: Island Bay Services Sub.: 766-2108
 Address: PO Box 48 Peaks Island Phone # 64108
 Est. Construction Cost: 55,000. Proposed Use: Single Family
 Past Use: _____
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ - W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion Construct New

For Official Use Only **PERMIT ISSUED**
 Date Oct 26, 1989 Subdivision: _____
 Inside Fire Limits _____ Name NOV 17 1989
 Bldg Code _____ Lot _____
 Time Limit _____ Ownership: City of Portland Public _____ Private _____
 Estimated Cost: 205,000.00 Permit _____

Zoning: IR-750. Site Plan Minor
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____ Side _____
 Review Required: most have 2 parking spaces
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) _____
OK valid - 11-16-89

Foundation:
 1. Type of Soil: Gravelly rock
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: 16x8
 4. Foundation Size: 45x50
 5. Other _____

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: 2x10
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: 2x10 @x8 Spacing 16" O.C.
 5. Bridging Type: solid Size: _____
 6. Floor Sheathing Type: 3/4T & D Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size: 2x6 Spacing _____
 2. No. windows 20
 3. No. Doors 4
 4. Header Sizes _____ Span(s) _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size 1x4
 7. Insulation Type Fiberglass Size _____
 8. Sheathing Type plywood Size _____
 9. Siding Type cedar Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

Interior Walls:
 1. Studding Size: 2x4 Spacing 16"
 2. Header Sizes 2x6 Span(s) _____
 3. Wall Covering Type sheet rock
 4. Fire Wall if required _____
 5. Other Materials _____

Ceiling:
 1. Ceiling Joists Size: 2x8
 2. Ceiling Strapping Size 1x3 Spacing _____
 3. Type Ceilings: sheet rock
 4. Insulation Type _____ Size _____
 5. Ceiling Height: 7'6" min

Roof:
 1. Truss or Rafter Size 2x8 or larger Span _____
 2. Sheathing Type plywood Size _____
 3. Roof Covering Type asphalt shingles

Chimneys:
 Type: mascon Number of Fire Places 0

Heating:
 Type of Heat: Oil forced water

Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes X No _____

Plumbing:
 1. Approval of soil test if required Yes _____ No _____
 2. No. of Tubs or Showers 2
 3. No. of Flushes 2
 4. No. of Lavatories 2
 5. No. of Other Fixtures _____

Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Dunlap

Signature of Applicant Deborah Good Date 11/20/89

Signature of CEO _____ Date _____

Inspection Dates _____

