

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 021257

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
NOV - 7 2000
CITY OF PORTLAND

This is to certify that Dupont Sharoan J &/Bouchelean

has permission to rebuild roof - Hip Roof

AT 131 Central Ave

087 G00500

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and work on permit must be completed before this building or part thereof is occupied or closed-in. **48 HOUR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

- Fire Dept. _____
- Health Dept. _____
- Appeal Board _____
- Other _____
Department Name

[Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 02-1257	Issue Date: NOV -	CBL: 087 G005001
-----------------------	----------------------	---------------------

Location of Construction: 131 Central Ave	Owner Name: Dupont Sharoan J &	Owner Address: 131 Central Ave	Phone: 776-0025
Business Name:	Contractor Name: Boucher, Jean	Contractor Address: 488 Walker Road Lyman	Phone: 2073249069
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: IR-2

Past Use: single family	Proposed Use: single family - rebuilding roof to insulate	Permit Fee: \$79.00	Cost of Work: \$8,000.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied N/A	INSPECTION: Use Group: R-3 Type: SB BOCA 1999	

Proposed Project Description:
rebuild roof - Hip Roof

Signature: _____
Signature: %
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: tmm	Date Applied For: 11/06/2002	Zoning Approval
-------------------------	---------------------------------	------------------------

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: 11/6/02</p>	<p>Zoning Appeal</p> <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 <p>Date: _____</p>	<p>Historic Preservation</p> <input checked="" type="checkbox"/> Not in District 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 <p>Date: 11/6/02</p>
---	--	--	---

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

2/12/02 - Called for framing insp. -
NO access to space yet - not ready
for about another week. TM

12/09/03

Completed AR _____

ELECTRICAL PERMIT

City of Portland, Me.

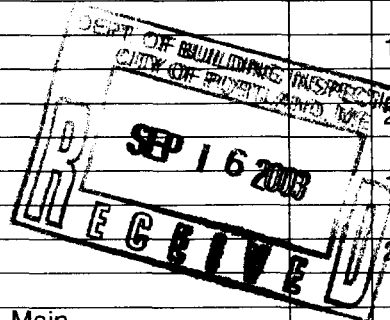


To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 9/16/03
 Permit # 2003 4564865
 CBL# 087 G 5

LOCATION: 131 Central ave, Peaks METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER JOE Dupont
 TENANT _____ PHONE # _____

		TOTAL EACH FEE			
OUTLETS	<u>10</u> Receptacles	<u>8</u> Switches		Smoke Detector	.20
FIXTURES	Incandescent	Fluorescent		Strips	.20
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	Ranges	Cook Tops		Wall Ovens	2.00
	Insta-Hot	Water heaters		Fans	2.00
	Dryers	Disposals		Dishwasher	2.00
	Compactors	Spa		Washing Machine	2.00
	Others (denote)				2.00
	MISC. (number of)	Air Cond/win			
	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
	MINIMUM FEE/COMMERCIAL	45.00			
	TOTAL AMOUNT DUE				
	MINIMUM FEE			35.00	



CONTRACTORS NAME MCINTYRE ELECTRIC MASTER LIC. # _____
 ADDRESS 8500 NORTON ST LANE G.E. LIMITED LIC. # LM50016936
 TELEPHONE 799-5155

SIGNATURE OF CONTRACTOR [Signature]
 White Copy - Office • Yellow Copy - Applicant