Form # P 04 DISPLAY THIS CAN	RD ON PRINCIPAL FRON	TAGE OF WORK
Please Read Application And Notes, If Any, Attached	BUILDING INSPECTION PERMIT	Permit Number: 100591
This is to certify that <u>BURKHOLDER BRAD</u> has permission to <u>Create year round room fi</u>		· · · · · · · · · · · · · · · · · · ·
AT _AT	CBL 087	7 ¥021001
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	f Maine and of the Ordinances of use of buildings and structures Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24	of the City of Portland regulating
OTHER REQUIRED APPROVALS Fire Dept Health Dept Appeal Board Other Department Name PEN	ALTY FOR REMOVING THIS CAR	JUN 2 1 2010 City of Portland Director - Building & Inspection Services

And a state of the second state of the second

City of Portland, Maine - Building or Use Permit Application				n Pe	ermit No:	Issue Date:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871				10-0591			087 YO	21001	
Location of Construction:	eation of Construction: Owner Name:		Owner Address:		19	Phone:			
181 ISLAND AVE Peaks Island	BURKHOLDE	URKHOLDER BRAD A			181 ISLAND AVE				
Business Name:	Contractor Name:	e: Contractor Address: Phone			ione				
	property owner								
Lessee/Buyer's Name	Phone:				nit Type: terations - Dwe	llings			Zone: IR-2
Past Use:	Proposed Use:			Pern	nit Fec:	Cost of Work:	CEOI	District:	1
Two Family - Seasonal Room	Two Family -	Year R	ound Room -	\$80.00 \$6,000.00		00	I		
	Create year round room from existing seasonal room (one story			FIR	E DEPT:	Approved IN Denied U	SPECTION se Group: P	3	Type:SB
Proposed Project Description:							FRC-	200	3
Create year round room from existing	seasonal room (one sto		Sign	ature.	e:	gnature:	661	20/10
create year round room from existing	seasonal room (one sto	(y)	-				Dela	<u>a pro-</u>
<i>x</i>			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) / Action Approved Approved w/Conditions Denied					Denied	
				Sign	alure:		Date.		
Permit Taken By: Date Ap	oplied For:				Zoning	Approval	_		
Idobson 05/28	3/2010			Zoning Approva					
1. This permit application does not	nreclude the	Spe	cial Zone or Revie	WS	Zoning	g Appeal	His	toric Pres	servation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland these is about 17.				No	Not in District or Landmark		
 Building permits do not include plumbing, septic or electrical work. 		Wetland for water.		Miscellaneous		Do	Does Not Require Review		
 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 		Flood Zone		Conditional Use		🗌 Re	Requires Review		
				Interpretation		🗌 Ap	Approved		
		Sil Sil	ie Plan			1	🗌 Ар	proved w/	Conditions
PERMIT ISSUED		Maj Minor MM				📋 De	nied ABN		
			612/10 ABU		Date:		Date:	1 Bril	
JUN 2 1 2010									
City of Portland									

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

389 Congress Street, 04101 Tel:	uilding or Use Permit	Permit No: 10-0591	Date Applied For: 05/28/2010	CBL: 087 Y021001
Location of Construction:	Owner Name:	Owner Address:		Phone:
181 ISLAND AVE Peaks Island	BURKHOLDER BRAD A	181 ISLAND AV	/F	r none.
Business Name:	Contractor Name:	Contractor Address:		
business wante.	property owner	Contractor Address.	Contractor Address.	
Lessee/Buyer's Name	Phone:	Permit Type:		
sessere bayer straine		Alterations - Dw	ellings	
Proposed Use:		Proposed Project Descriptio		
Two Family - Year Round Room -	Construction of the second sec	Create year round room		al na am (ana atom)
existing scasonal room (one story)				
Note: 16' x 12' deck was enclosed	1 w/ glass in 1975 (#818).	Reviewer: Ann Machado	Approval I	Ok to Issue: 🔽
Note: 16' x 12' deck was enclosed 1) This property shall remain a two	d w/ glass in 1975 (#818). o family dwelling. Any change o	f use shall require a separat	e permit application f	Ok to Issue: 🔽 or review and
 Note: 16' x 12' deck was enclosed 1) This property shall remain a two approval. 2) This permit is being approved of work. 	d w/ glass in 1975 (#818). o family dwelling. Any change o on the basis of plans submitted.	f use shall require a separat Any deviations shall require	e permit application f a separate approval l	Ok to Issue: 🔽 or review and before starting that
 Note: 16' x 12' deck was enclosed 1) This property shall remain a two approval. 2) This permit is being approved of work. Dept: Building Status: 	d w/ glass in 1975 (#818). o family dwelling. Any change o on the basis of plans submitted.	f use shall require a separat	e permit application f a separate approval l	Ok to Issue: or review and before starting that Date: 06/21/2010
 Note: 16' x 12' deck was enclosed 1) This property shall remain a two approval. 2) This permit is being approved of work. 	d w/ glass in 1975 (#818). o family dwelling. Any change o on the basis of plans submitted. Approved with Conditions	of use shall require a separat Any deviations shall require Reviewer : Jeanine Bourke	e permit application f a separate approval l Approval I	Ok to Issue: or review and before starting that Date: 06/21/2010 Ok to Issue:
 Note: 16' x 12' deck was enclosed 1) This property shall remain a two approval. 2) This permit is being approved of work. Dept: Building Status: Note: 1) Permit approved based on the p noted on plans. 2) Separate permits are required for 	d w/ glass in 1975 (#818). o family dwelling. Any change o on the basis of plans submitted. Approved with Conditions	of use shall require a separat Any deviations shall require Reviewer: Jeanine Bourke cowner/contractor, with addit akler, fire alarm HVAC system	e permit application f a separate approval l Approval I ional information as a ems, heating appliance	Ok to Issue: or review and before starting that Date: 06/21/2010 Ok to Issue: agreed on and as ces, commercial
 Note: 16' x 12' deck was enclosed 1) This property shall remain a two approval. 2) This permit is being approved of work. Dept: Building Status: Note: 1) Permit approved based on the p noted on plans. 2) Separate permits are required for 	d w/ glass in 1975 (#818). o family dwelling. Any change o on the basis of plans submitted. Approved with Conditions plans submitted and reviewed w/o or any electrical, plumbing, sprint anks. Separate plans may need t	of use shall require a separat Any deviations shall require Reviewer: Jeanine Bourke cowner/contractor, with addit okler, fire alarm HVAC syst o be submitted for approval	e permit application f a separate approval b Approval f ional information as a tems, heating appliance as a part of this proce	Ok to Issue: or review and before starting that Date: 06/21/2010 Ok to Issue: agreed on and as ces, commercial ess.

Comments:

6/1/2010-amachado: Left vcm for Brad Burkholder. Permit in 2008 had legal use as two family. Has this changed? I the deck on the roof new?

6/2/2010-amachado: Recieved voicemail from Brad Burkholder and spoke to his wife. Using the house as a one family at the moment, but don't want to change it to a single family.

6/16/2010-jmb: Left msg at home for Brad B. For clarification on insulation factors of floor, walls and ceiling and window u factors.

6/21/2010-jmb: Spoke to Brad B., he confirmed information as noted on the plans, ok to issue

PERMIT ISSUED

JUN 2 1 2010 City of Portland

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 Inspection 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 with construction.
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR 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.



JUN 2 1 2010

City of Portland



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any roperty within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 181	FSLAND AVE. PEAKS	ISLAND MR.				
Total Square Footage of Proposed Structure/A.	rea Square Footage of Lot	Number of Stories				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# J/	Applicant * <u>must be owner</u> , Lessee or B Name BRAD BURKHOLDE Address 181 ISLAND AVE					
	City, State & Zip PEAKS ISL. C	04108				
Lessee/DBA (If Applicable)	Owner (iNdifferent from Applicant) Name	Work: <u>\$</u> 6000-				
RECEIVED	Address	C of O Fee: \$				
MAY 2 8 2010	City, State & Zip	Total Fee: S_80				
Current legal use (i.e. single family spection If vacant, where was the previous us taines en Proposed Specific use: Loung Space	sonal use Number of Resid					
Is property part of a subdivision? <u>No</u> If yes, please name Project description:						
Seusonal Room - Create year round Room!						
Contractor's name: <u>SELF - BR4D</u>	BURKHOLDER	-				
Address: Same		-				
City, State & Zip						
Who should we contact when the permit is read	dy: BRAD BURKHULDER					
Mailing address: Same		- 766-5631				

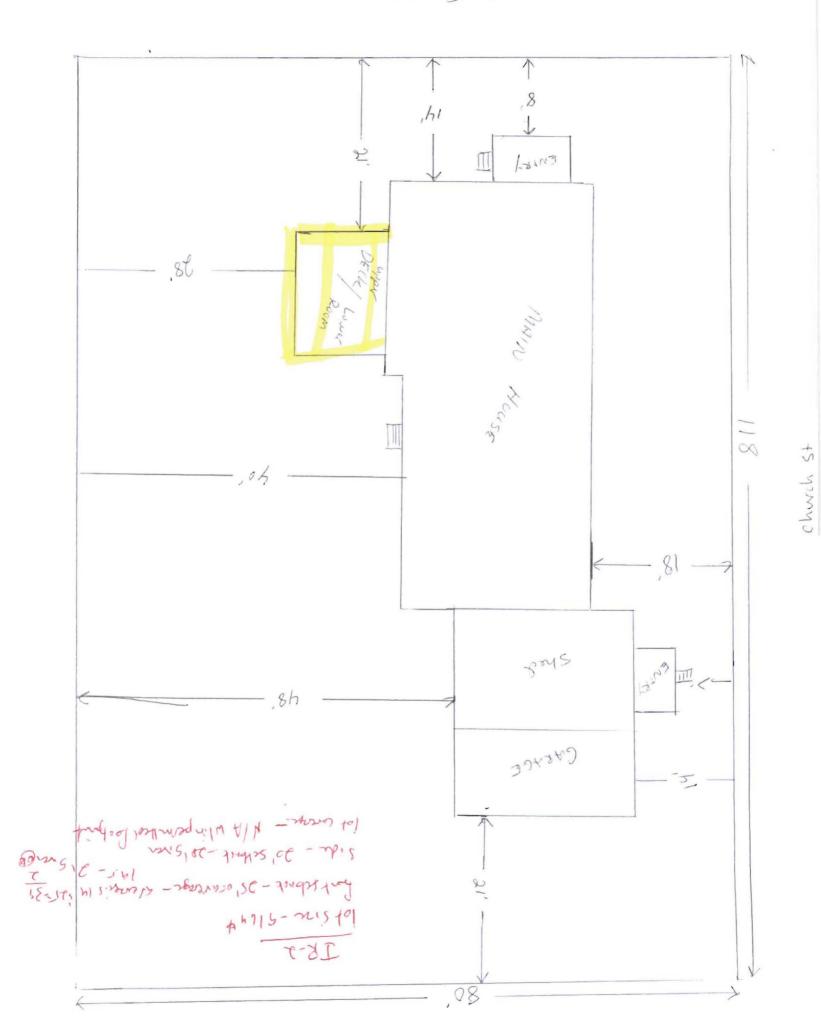
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

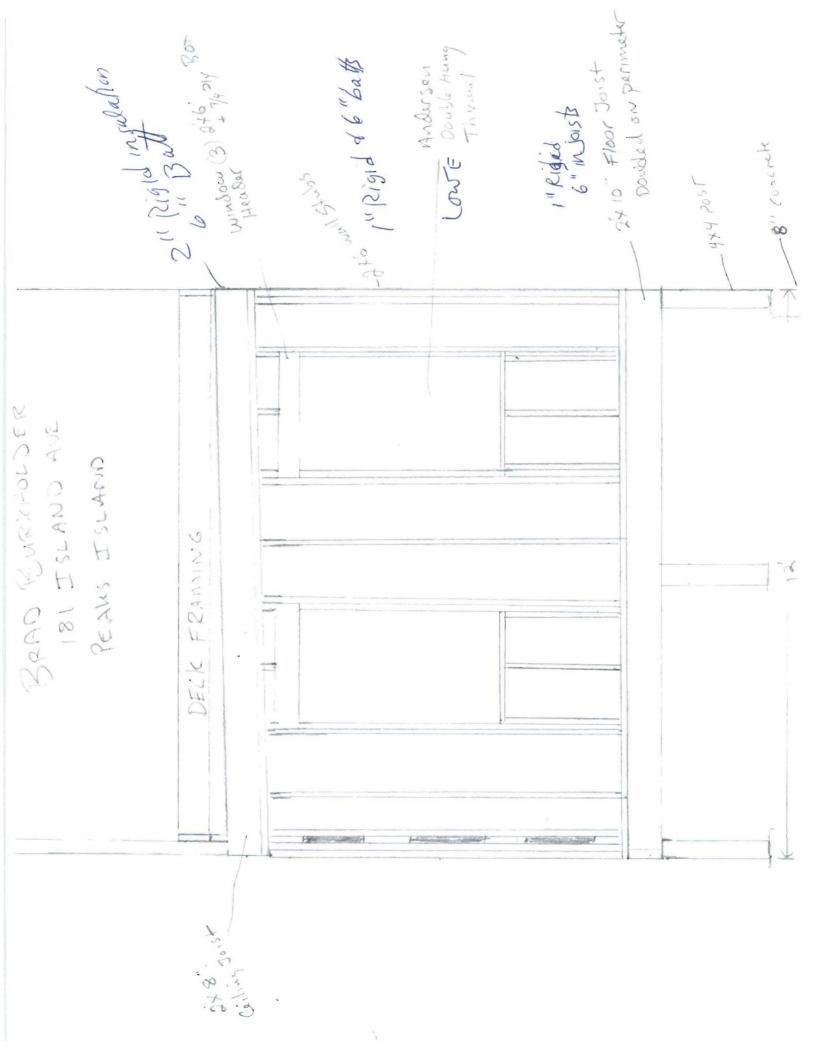
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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.

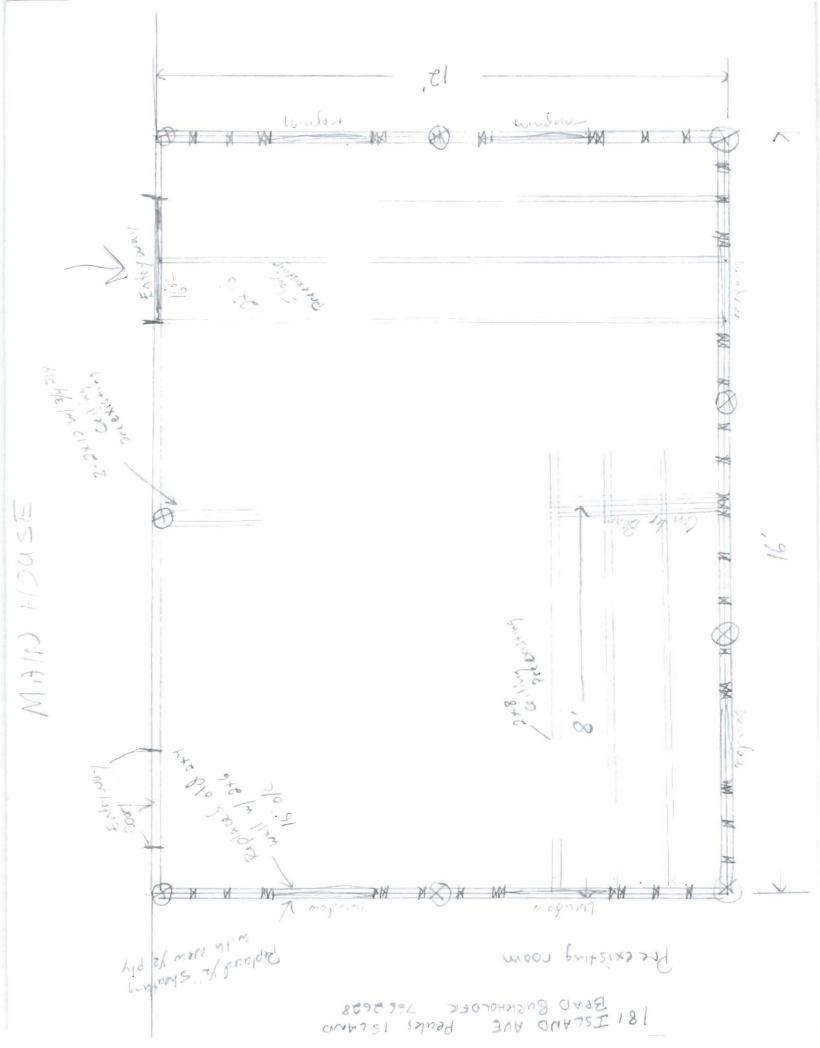
Signature:	BandBAUL	Date:	5-28-10	

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



³⁰⁴ OULDST 181





suff budat trans ,96 1 louse Ave ,85 01 Mar 120 12/01 Appret 22 Ctrogorg no willbub to without Scale 1' = 16'0" ("10" = 110") Hindder annerma 15-4 - 18+ 207 818# - 5661