Form # P 04

#### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	CITY	OF PORTLAN	ID	
Please Read Application And Notes, If Any, Attached	В	PERMIT	Permit Nun	ber: 020987 PERMIT ISSUE
This is to certify that_	Floyd H Christian & /Thomp	& John dworkers		
	Pahuild Existing Deck 13'-	x 12'- 2		SEP - 4 2002

AT 2 Central Ave Ext

has permission to \_

provided that the person or persons, of the provisions of the Statutes of N the construction, maintenance and u this department.

Rebuild Existing Deck - 13'-

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

ication insped must and wr n permis procu gi b e this t dina or t thered Josed-in. la d or d R NOTICE IS REQUIRED.

ne and of the

ration

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

088 K045001

of buildings and six tures, and of the application on file in

epting this permit shall comply

ences of the City of Portland regulating

Fire Dept. Health Dept. Appeal Board **SEP - 4** 2002 Other \_

NALTY FOR REMOVING THIS CARD

						PEF	RMIT	ISSU	of con-	
City of Portland, Maine - Bu 389 Congress Street, 04101 Tel	_			<b>.</b>	it No: 02-09	987	Issue Da SEP –		CBL: 088	K045001
Location of Construction:	Owner Name:			Owner A	ddress	1	VE D	ODTI	Phone:	
2 Central Ave Ext							UF P	UKIL	AND8 -86	52-2841
Business Name: Contractor Name:			Contract					Phone		
		Johnson	Woodworkers			Avel	Peaks Is	land	207766	
Lessee/Buyer's Name	Phone:			Permit T		4 - Cim	ala Wass	21		Zone:
			J	<u> </u>			gle Fam			
Past Use:	Proposed Use:			Permit I	Fee:	(	Cost of W		CEO District	t:
single family	single family -	rebuild	existing deck	EIDE D	EDT.			\$0.00		<u>l</u>
				FIRE D	EPT:		Approved		ECTION:	Туре
							Denied		$R \cdot 3$	SB
Proposed Project Description:	!			1					BUCA	1999
Rebuild Existing Deck - 13'-11" x	12'- 2"			Signatur	·e				iture: Au E	
Resulta Existing Beek 13 11 X	12 2					ACTIV	ITIES DI			<del>- 11                                  </del>
									•.•	□ Domind
				Action	-	pproved	1 F	approved	w/Conditions [	Denied
				Signatur		. •	<b>A</b>	1	Date:	
09	/04/2002				ZOI	nng A	Appro	vai		
		Spe	ecial Zone or Revie	ews		Zoning	Appeal		Historic P	Preservation
<ol> <li>This permit application does n     Applicant(s) from meeting app     Federal Rules.</li> </ol>		☐ Sł	noreland		☐ Va	riance			Not in Di	strict or Landma
2. Building permits do not includ septic or electrical work.	le plumbing,	☐ Wetland ☐ Miscellaneous			Does Not	Require Review				
3. Building permits are void if we within six (6) months of the da		Flood Zone Conditional Use			Requires	Review				
False information may invalidate permit and stop all work		☐ Su	ubdivision		In	erpretat	ion		Approved	I
		☐ Si	te Plan		A <sub>I</sub>	proved			Approved	l w/Conditions
PERMIT ISSU	甲	Maj [	Minor MM		[_] De	enied			Denied	
SEP - 4 200	2	Date:	1/4/22 m	$E_{\perp}$	late:				late:	
I hereby certify that I am the owner I have been authorized by the owner jurisdiction. In addition, if a permit shall have the authority to enter all a such permit.	of record of the na to make this appli for work describe	med procession and the design that the design in the desig	as his authorized application is is	ne propos l agent a sued, I c	nd I ag certify	gree to that th	conforr e code o	n to all a official's	applicable lav	ws of this epresentative
SIGNATURE OF APPLICANT			ADDRESS	}			DAT	Έ	P	HONE
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE						DAT	Έ	P	HONE

Smothfoles ok. M All Framing complete Buardiails installed Front Step landing complete JB

> 02-0987 008-K-045

#### All Purpose Building Permit Application

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

Location/Address & Construction: 2 Central Arc Ext				
Total Square Footage of Lot  E x 15 カッツ				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# CNSS K 045 Christian H. and Norma Floyd  Telephone: 781 -862-2841				
Lessee/Buyer's Name (If Applicable)  Applicant name, address & cost Of telephone: Thompson Johnson Wood-Work: \$ / COS Works  3-14 Scushone Ave 766-5219  Peaks Island Me				
Current use: Residence				
If the location is currently vacant, what was prior use:				
Approximately how long has it been vacant:				
Proposed use: amon amond to permit # 0 2 063 Project description: To rebailed portion of deck that had to be removed to replace rim joist (sill) on house				
Contractor's name, address & telephone: Thompson Johnson Wood works				
Who should we contact when the permit is ready: Otis Thompson Mailing address: 344 Scushore Aug.  Peaks Island, Maine 04108				
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00fee if any work starts before the permit is picked up. PHONE: 766-5219				

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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 of applicant:	Of C. Thom	Date: 9/3/02
	<del></del>	7-7-3

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4<sup>th</sup> floor of City Hall

Amendment to permit # 02-0663 repair 2'6" of deck at house DOOR 70 BE REBUILT 2'6" TEMPORARY BEAM EXISTING 10'8" 10 - 4x6 BEAM W/ 3 4x6 POST - Existing deck 13'11" x 4"+1" 12'9" - 2/2 feet closest to house removed to repair rim joist - Joists of deck 16" on center and are 2x8's PT 5/4 X 6" PT - Decking is - Existing joists will be sistered from 466 Beam to Ledger at house +14" flashing 2x8 Deck Joints Attacked to ledger with joint hangers 2x6 stud wall Rim joint 3-2x10's Galvanized o o Foundation cement block

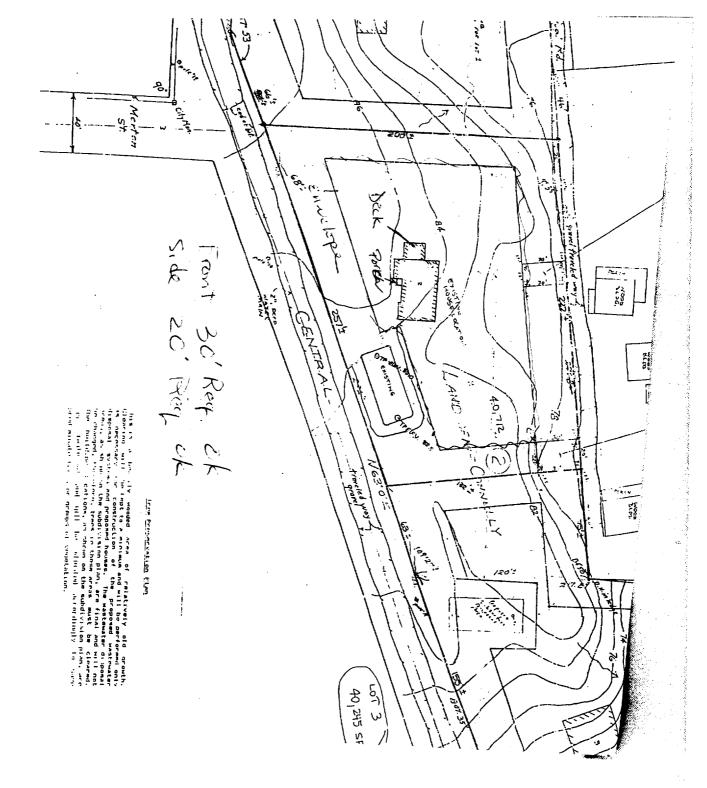
Guardral @ 36" 4" O.C. ballusters

#### **BUILDING PERMIT INSPECTION PROCEDURES**

## Please call 874-8703 or to schedule your **inspections as agreed upon**Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

greeing that you understand the "Stop Work Order" and "Stop ocedure is not followed as stated duled with your inspection team upon Review Coordinator at 874-8632 must begins on any project other than
Prior to pouring concrete
Prior to pouring concrete
Prior to placing ANY backfill
Prior to any insulating or drywalling
o any occupancy of the structure or IOTE: There is a \$75.00 fee per tion at this point.
projects. Your inspector can advise ncy. All projects DO require a final
e project cannot go on <b>to</b> the next IRCUMSTANCES.
ST BE ISSUED AND PAID FOR,
7/2/02
Date /7/2
Date
663
ut 02-0987



	•	ne - Building or Use 1 01 Tel: (207) 874-8703		ш	rmit No: 02-066	Issue Date:	2 2002 CBL:	K045001
	tion of Construction:	Owner Name:	(207) 07 1 07	=	r Address:		hone	
2 C	entral Ave Ext	Floyd H Christ	ian &	2 Ce	entral Ave	ELTY OF PO	ORTIANO	62-2841
Busi	ness Name:	Contractor Name			actor Addre		Phone	
İ		Thompson & J	ohnson Woodworker	344	Seashore A	Ave Peaks Island	d <b>/2077</b>	665219
Less	ee/Buyer's Name	Phone:			it <b>Type:</b> erations <b>-</b> I	Owellings		Zone: LR-1
Past Res	Use: sidence	Proposed Use: Residence	<b>_</b>	Perm	it Fee: \$233.0		0.00 3	ict;
					EBEPT:	Approved Denied	INSPECTION Use Group: 12 3	3 Type:& 4 /999 M
Kep	place sill and rot - no fo	otprint change.		Signa PEDE			Signature.	. •
				Actio			oved w/Conditions	☐ Denied
				Signa	iture:		Date:	
Pern	nit Taken By:	Date Applied For:			Zoni	ng Approval		
jm	у	06/17/2002						
1.	This permit application	n does not preclude the	Special Zone or Rev	iews	Z	oning Appeal	Historic	Preservation
		eting applicable <b>State</b> and	☐ Shoreland		uari vari	ance	Not in	District or Landmark
2.	Building permits do no septic or electrical wor		☐ Wetland ,		☐ Miso	cellaneous	Does N	ot Require Review
3.	Building permits are v within six (6) months of	oid if work is not <b>started</b> of the <b>date</b> of issuance.	☐ Flood Zong		Cone	ditional USE	Requir	res Review
	False information may permit and stop all wo	_	Subdivision		Inter	pretation	Approv	ved
			Site Plan		Appr	roved	Approv	ved w/Conditions
			Maj Minor Mi	м 🗀	Deni	ed	☐ Denied	1/12
			)ate: 1/2/02		late:		late: 7/	1102
<b>T.</b>	reby certify that I <b>am</b> the		CERTIFICAT				•	

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 OP WORK, TTTLE		DATE	PHONE

# 02-0663

# All Purpose Building Permit Application If you or the property owner owes real estate or personal property taxes or user charges on any property within

the City, payment arrangements must be made before permits of any kind are accepted.
Location/Address of Construction: 2 Central Avenue, Peaks Island, Portland, Me 04108
Total Square Footage of Proposed Structure Square Footage of Lot
Tax Assessor's Chart, Block & Lot Owner: Chris and Norma Floyd Chart# Block# Lot# Oxford Street 1-781-862-2841
Lessee/Buyer's Name (If Applicable)  Applicant name, address & Cost Of Estimated telephone: Thompson Johnson Wedler Work: \$ 30,000,00
c
Project description: Reconstruction of dry rot in walls and insect damage in north wall of existing structure, Reconstruction and repair of kitchen entry and existing deck at front door. Install vapor parrier in crawl space with crushed stone in one portion of crawl space. Istall insulation and vapor barriers as needed in areas of reconstruction.
Contractor's name, address & telephone: Thompson Johnson Woodworks, 344 Seashure Ave., Peuts Island, Portland, Me 04108
Who should we contact when the permit is ready:
Mailingaddress: Same as above  766-6219 Phone 332-4625
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.
Thereby 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 forwark described in this application k issued. I certify that the Code Official's authorized representative

shall have the authority to enter all areas covered by this permit atony reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant:	Thompson	Date: (	DET	OF BUILDING INSPECT	ION
This is not a permit, you n	nay not commence AN	IY work until th		ermitis issued,	

### **BUILDING PERMIT INSPECTION PROCEDURES** Please call 874-8703 or to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their **designee** is **required** to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you inspection procedure and additional fees Work Order Release" will be incurred if below.  Pre-construction Meeting: Must receipt of this permit. Jay Reynolds, Devel also be contacted at this time, before any sissingle family additions or alterations.	from a "Stop Work Order" and "Stop the procedure is not followed as stated be scheduled with your inspection team upon opment Review Coordinator at 874-8632 must
Footing/Building Location Inspec	etion; Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	leal: Prior to any insulating or drywalling
Final/Certificate of occupancy:	Prior to any occupancy of the structure or use. <b>NOTE:</b> There is a \$75.00 fee per inspection at this point.
you <b>if</b> your project <b>requires</b> a Certificate of inspection	cur, <b>the</b> project cannot <b>go</b> on to <b>the</b> next
CERIFICATE OF OCCUPANICE BEFORE THE SPACE MAY BE OCCUPANICE Signature of applicant designee	ES MUST BE ISSUED AND PAID FOR, PIED  7/2/02  Date //2/02
Signature of Inspections Official	Date
CBL: <u>98-K-45</u> Building Permit #: <u>(</u>	52-0663

Thompson Johnson Woodworks
344 Seashore Avenue
Peaks Island
Portland, Maine
04108
Phone (207) 766-5219
Cell Phone (207) 332-4525

June 10, 2002 Estimate

Norma and Chris Floyd, 16 Oxford Street, Lexington, Massachusetts 02420	Sheathing
	3/1" Plywood Exterior Gradi
with building wrap and siding are replaced. c. During the process outlined above it may be be necessary to rebuild the foot knee-wall that supports the sill. d. Paint the exterior walls and trim e. Damage to the interior wall of the two bedrooms will be repaired as a last step in the work on your house.	Kneewall 2x6 Studs
f. During step 1 each night tarps will be used to cover the work site to prevent additional water damage g. During reconstruction of the exterior wall fungicides will be used to help prevent rot from developing anew.	Tyuck builling wrap
Approximate time to complete step 1:4 weeks	Edy vapor

Step 2- Replace and repair the sill and sub-flooring under the door in the kitchen, rebuild door jamb, rehang entry door, install door trim, install new storm door, rebuild will study the front porch and stairs. Reconstruction of the sill and floor in this area will follow in will be similar manner to step 1.

Approximate time to complete step 2: 4 weeks (Although the area to be reconstructed Rim Joist is smaller than the north side of the house, the repair of the floor and the reframing the door will require more detailed and finish work. There is no knee-wall on this side of the house.)

Step 3- Install the vapor barrier, crushed stone, and insulation in the crawl space.

- a. Remove and dispose of the old insulation and plastic.
- b. Clean and prepare the dirt floor and concrete walls to accept the vapor barrier.
- c. Install two layers of plastic, using tape and adhesive to dose seams in the