PORTLAND MAINE

*Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov*

Jeff Levine, AICP, Director
Director of Planning and Urban Development

Tammy Munson
Director, Inspections Division

# Electronic Signature and Fee Payment Confirmation

*Notice: Your electronic signature is considered a legal signature per state law.*

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a ***legal signature*** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are ***paid in full*** to the Inspections Office, City of Portland Maine by method noted below:

☐ Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.

☒ Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.

☐ I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature: [signature] Date: March 31, 2014

I have provided digital copies and sent them on: Date:

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.

# General 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.

**Address/Location of Construction:** 45-47 Falmouth Street Port Me Unit Bw

**Total Square Footage of Proposed Structure:** 43 square Feet

**Tax Assessor's Chart, Block & Lot**

| Chart# | Block# | Lot# |
|---|---|---|
| 116 | D | 15 |

**Applicant Name:** Matt Solnik
Address 5 Essential way
City, State & Zip Scarborough Me 04074
Telephone: 207-329-4994
Email: MATHSOLNK@Hotmail.com

**Lessee/Owner Name** (if different than applicant) Ralph Giles
Address: 1400 Lowell Rd
City, State & Zip: Concord Ma. 01742
Telephone & E-mail: 978-371-0922

**Contractor Name:** (if different from Applicant)
Address:
City, State & Zip:
Telephone & E-mail:

Cost Of Work: $ 10,600
C of O Fee: $
Historic Rev $
**Total Fees : $**

**Current use** (i.e. single family) Multi Family
**If vacant, what was the previous use?**
**Proposed Specific use:**
Is property part of a subdivision? ___ If yes, please name
**Project description:** Bathroom Remodel

**Who should we contact when the permit is ready:**

**Address:** Matt Solnik
**City, State & Zip:** Scarborough Me 04074
**E-mail Address:** MattSolnik@Hotmail.com
**Telephone:** 207-329-4994

**Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.**

**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 www.portlandmaine.gov, 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:** [signature] **Date:** March 31, 2014

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

# Commercial Interior & Change of Use Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

## One (1) complete set of construction drawings must include:

Note: Construction documents for costs in excess of $50,000.00 must be prepared by a Design Professional and bear their seal.

- ☐ Cross sections w/framing details
- ☐ Detail of any new walls or permanent partitions
- ☐ Floor plans and elevations
- ☐ Window and door schedules
- ☐ Complete electrical and plumbing layout.
- ☐ Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment or other types of work that may require special review
- ☐ Insulation R-factors of walls, ceilings, floors & U-factors of windows as per the IEEC 2009
- ☐ Proof of ownership is required if it is inconsistent with the assessors records.
- ☐ Reduced plans or electronic files in PDF format are required if originals are larger than 11" x 17".
- ☐ Per State Fire Marshall, all new bathrooms must be ADA compliant.

Separate permits are required for internal and external plumbing, HVAC & electrical installations.

**For additions less than 500 sq. ft. or that does not affect parking or traffic, a site plan exemption should be filed including:**

- ☐ The shape and dimension of the lot, footprint of the existing and proposed structure and the distance from the actual property lines.
- ☐ Location and dimensions of parking areas and driveways, street spaces and building frontage.
- ☐ Dimensional floor plan of existing space and dimensional floor plan of proposed space.

A Minor Site Plan Review is required for any change of use between 5,000 and 10,000 sq. ft. (cumulatively within a 3-year period)



Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936

**Fire Department requirements.**

The following shall be submitted on a separate sheet:

- ☐ Name, address and phone number of applicant **and** the project architect.
- ☐ Proposed use of structure (NFPA and IBC classification)
- ☐ Square footage of proposed structure (total and per story)
- ☐ Existing and proposed fire protection of structure.
- ☐ Separate plans shall be submitted for
  - a) Suppression system
  - b) Detection System (separate permit is required)
- ☐ A separate Life Safety Plan must include:
  - a) Fire resistance ratings of all means of egress
  - b) Travel distance from most remote point to exit discharge
  - c) Location of any required fire extinguishers
  - d) Location of emergency lighting
  - e) Location of exit signs
  - f) NFPA 101 code summary
- ☐ Elevators shall be sized to fit an 80" x 24" stretcher.

For questions on Fire Department requirements call the Fire Prevention Officer at (207) 874-8405.

**Please submit all of the information outlined in this application checklist. If the application is incomplete, the application may be refused.**

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

Permit Fee: **$30.00 for the first $1000.00 construction cost, $10.00 per additional $1000.00 cost**

**This is not a Permit; you may not commence any work until the Permit is issued.**

# Certificate of Design Application

From Designer: _____

Date: _____

Job Name: _____

Address of Construction: _____

## 2009 International Building Code

Construction project was designed to the building code criteria listed below:

Building Code & Year _____ Use Group Classification (s) _____

Type of Construction _____

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2009 IBC _____

Is the Structure mixed use? _____ If yes, separated or non separated or non separated (section 302.3) _____

Supervisory alarm System? _____Geotechnical/Soils report required? (See Section 1802.2) _____

**Structural Design Calculations**

_____Submitted for all structural members (106.1 – 106.11)

**Design Loads on Construction Documents** (1603)

Uniformly distributed floor live loads (7603.11, 1807)

| Floor Area Use | Loads Shown |
|---|---|
| | |
| | |
| | |
| | |
| | |

**Wind loads (1603.1.4, 1609)**

_____Design option utilized (1609.1.1, 1609.6)

_____Basic wind speed (1809.3)

_____Building category and wind importance Factor, $I_w$ table 1604.5, 1609.5)

_____Wind exposure category (1609.4)

_____Internal pressure coefficient (ASCE 7)

_____Component and cladding pressures (1609.1.1, 1609.6.2.2)

_____Main force wind pressures (7603.1.1, 1609.6.2.1)

**Earth design data (1603.1.5, 1614-1623)**

_____Design option utilized (1614.1)

_____Seismic use group ("Category")

_____Spectral response coefficients, SDs & SD1 (1615.1)

_____Site class (1615.1.5)

_____Live load reduction

_____Roof *live* loads (1603.1.2, 1607.11)

_____Roof snow loads (1603.7.3, 1608)

_____Ground snow load, $P_g$ (1608.2)

_____If $P_g$ > 10 psf, flat-roof snow load $P_f$

_____If $P_g$ > 10 psf, snow exposure factor, $C_e$

_____If $P_g$ > 10 psf, snow load importance factor, $I_s$

_____Roof thermal factor, $C_t$ (1608.4)

_____Sloped roof snowload, $P_s$ (1608.4)

_____Seismic design category (1616.3)

_____Basic seismic force resisting system (1617.6.2)

_____Response modification coefficient, $R$, and deflection amplification factor $C_d$ (1617.6.2)

_____Analysis procedure (1616.6, 1617.5)

_____Design base shear (1617.4, 16175.5.1)

**Flood loads (1803.1.6, 1612)**

_____Flood Hazard area (1612.3)

_____Elevation of structure

**Other loads**

_____Concentrated loads (1607.4)

_____Partition loads (1607.5)

_____Misc. loads (Table 1607.8, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404

# Accessibility Building Code Certificate

**Designer:** _____

**Address of Project:** _____

**Nature of Project:** _____

_____

_____

The technical submissions covering the proposed construction work as described above have been designed in compliance with applicable referenced standards found in the Maine Human Rights Law and Federal Americans with Disability Act. Residential Buildings with 4 units or more must conform to the Federal Fair Housing Accessibility Standards. Please provide proof of compliance if applicable.

**(SEAL)**

Signature: _____

Title: _____

Firm: _____

Address: _____

_____

Phone: _____

**For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov**



Building Inspections Division • 389 Congress Street • Portland, Maine 04101 • (207) 874-8703 • FACSIMILE (207) 874-8716 • TTY (207) 874-8936

# Certificate of Design

**Date:** _____

**From:** _____

These plans and / or specifications covering construction work on:

_____

_____

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the **2009 International Building Code** and local amendments.

Signature: _____

Title: _____

**(SEAL)**

Firm: _____

Address: _____

_____

Phone: _____

**For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov**