

PERMIT # 001642 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Paul Rowell # 772-6941
 Address: 18 Clifton St.

LOCATION OF CONSTRUCTION 18 Clifton St.

CONTRACTOR: Spero J. Dyer SUBCONTRACTORS: 773-3659

ADDRESS: 527 D. St. 6563 Portland, Maine 04101

Est. Construction Cost: 15,000 Type of Use: Apartment

Past Use: _____

Building Dimensions L: _____ W: _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain: Interior renovations

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE: new dry wall

Residential Buildings Only: # Of Dwelling Units _____ # Of New Dwelling Units _____

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

Floors
 1. Sills Size: _____ Sills must be anchored.
 2. Girders Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16' O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls
 1. Studding Size: _____ Spacing: _____
 2. No. windows: _____
 3. No. Doors: _____
 4. Header Size: _____ Spacing: _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size: _____
 7. Insulation Type: _____ Size: _____
 8. Sheathing Type: _____ Size: _____
 9. Siding Type: _____ Weather Exposure: _____
 10. Masonry Materials: _____
 11. Metal Materials: _____

Interior Walls
 1. Studding Size: _____ Spacing: _____
 2. Header Size: _____ Spacing: _____
 3. Wall Covering Type: _____
 4. Fire Wall if required: _____
 5. Other Materials: _____

For Official Use Only

Date: <u>January 11, 1989</u>	Subscriber: Yes / No _____
Inside Fire Lines: _____	Name: _____
Edg. Code: _____	Lot: _____
Time Month: _____	Block: _____
Estimated Cost: <u>15,000.00</u>	Permit Expiration: _____
Value/Structure: _____	Ownership: _____ Public _____ Private _____
Fee: <u>95.00</u>	

Ceilings
 1. Ceiling Joists Size: _____
 2. Ceiling Sheathing Size: _____ Spacing: _____
 3. Type Ceiling: _____
 4. Insulation Type: _____ Size: _____
 5. Ceiling Height: _____

Roof
 1. Truss or Rafter Size: _____ Spacing: _____
 2. Sheathing Type: _____
 3. Roof Covering Type: _____
 4. Other: _____

Chimneys
 Type: _____ Number of Fire Places: _____

Heating
 Type of Heat: _____

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

Plumbing
 1. Approval of soil test if required: Yes _____ No _____
 2. No. of Tubs or Showers: 00.00
 3. No. of Fixtures: _____
 4. No. of Lavatories: _____
 5. No. of Other Fixtures: 100.00

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

Zoning
 District: R-3 Street Frontage Req: _____ Provided: _____
 Required Setback: Front _____ Back _____ Side _____

Review Required
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance: _____ Site Plan: _____ Subdivision: _____
 Signs and Floodplain Mgmt: _____ Special Exemption: _____
 Other: (Explain) _____
 Date Approved: OK William D. [Signature] 2-8-89

Permit Received By: Inborah Goods

Signature of Applicant: _____ Date: Jan 11 1989

Signature of CEO: _____

Inspection Dates: _____

PERMIT ISSUED WITH LETTER

8911 11

White-Tax Assessor Yellow-GPCOG White Tag CEO © Copyright GPCOG 1987