Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

### CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU **TION** 

Permit Number: 090076

ting this permit shall comply with all

ces of the City of Portland regulating

127 A003046

STAIS GLADYCE B /David C This is to certify that Bathroom Addition with-in exi g space has permission to \_

provided that the person or persons, file or co of the provisions of the Statutes of Ma e and of the 🕰 buildings and structures, and of the application on file in the construction, maintenance and use

this department.

AT 290 BAXTER BLVD

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

Noti ition of spectio nust be give nd writte ermissid rocured his buil ereof is befo or oth éd-in. 24 lath NOTICE IS REQUIRED. HOU

on ac

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

OTHER REQUIRED APPROVALS

Fire Dept. CAPT. A. Aauteur

Health Dept.

Appeal Board \_

Other \_\_

Department Name

PENALTY FOR REMOVING THIS CARD

| •  | <b>Maine - Building or</b><br>04101 Tel: (207) 874                   |                 |                           |                                     |                  | 09-0076                   |             | O            | 127 A0                     | 03046         |
|--|--|-----------------|---------------------------|-------------------------------------|------------------|---------------------------|-------------|--------------|----------------------------|---------------|
| Location of Construction:  | Owner Na   |                 |                           | 207,071,071                         |                  | ner Address:              | 17/         | <del>/</del> | Phone:                     |               |
| 290 BAXTER BLVD  |  | STAIS GLADYCE B |                           |                                     | 2 BURMA RD       |                           |             |              | 207-650-                   | 3831          |
| Business Name: Contractor Name   |  |                 |                           |                                     | tractor Address: |                           |             | Phone        |                            |               |
| David Conley   |  |                 |                           | 156 Pleasnat Hill Road Hollis Cente |                  |                           | s Center    | 20765038     | 831                        |               |
| Lessee/Buyer's Name Phone:   |  |                 |                           |                                     | Permit Type:     |                           |             |              | •                          | Zone:         |
| _  |  |                 |                           |                                     | A                | dditions - Dwell          | ings        |              |                            | 15-6          |
| Past Use:  | Use: Proposed Use:   |                 |                           |                                     | Per              | mit Fee:                  | Cost of Wor | k: CF        | O District:                | ┐ `           |
|  |  |                 | room Addition with-in     |                                     |                  | \$50.00                   | \$3,00      |              | 3                          |               |
|  | existing   | space           |                           |                                     | FIR              | RE DEPT:                  | Approved    | INSPECT      | ION:                       | m             |
|  |  |                 |                           | _                                   |                  |                           | Denied      | Use Group    | K-2                        | Type: 5 V     |
| lowed ica is   | 1.0. 1. 1. 1.  | cata .          | doc.                      | m 4 blde                            | ,                |                           |             |              | R-2<br>IBC-2               | 1003          |
| legh Cuze, 5   | 10.//  | 701             | <u> </u>                  | ~ T ben                             | 1                |                           |             | ľ            | •                          |               |
| Proposed Project Descripti<br>Bathroom Addition wi   |  |                 |                           |                                     | ر ا              | nature:                   | )           | Signature:   | 1                          | 1/10/2        |
| Batilloom Addition wi  | ui-iii existing space  |                 |                           |                                     |                  | DESTRIAN ACTIV            | /ITIES DIST |              | .D.)                       | <u> </u>      |
|  |  |                 |                           |                                     |                  |                           |             |              |                            | D : 1         |
|  |  |                 |                           |                                     | Act              | ion: Approve              | ed App      | proved w/Co  | nditions                   | Denied        |
|  |  |                 |                           |                                     | Sign             | nature:                   |             | Da           | ate:                       |               |
| Permit Taken By:   |  |                 |                           | Zoning Approval                     |                  |                           |             |              |                            |               |
| lmd  | 02/03/2009   |                 | Sno                       | cial Zone or Revie                  | ****             | Zonine                    | g Appeal    |              | Historic Pres              | amention      |
|  | cation does not preclude   |                 | l                         |                                     | ws               |                           | g Appeai    |              |                            |               |
| Applicant(s) from Federal Rules.   | Applicant(s) from meeting applicable State and Federal Rules.        |                 | ☐ Shoreland               |                                     |                  | ☐ Variance                |             |              | Not in District or Landmar |               |
| 2. Building permits do not include plumbing, septic or electrical work.                            |  |                 | ☐ Wetland ☐ Miscellaneous |                                     |                  | ☐ Does Not Require Review |             |              |                            |               |
| 3. Building permits are void if work is not started within six (6) months of the date of issuance. |  |                 | ☐ Flood Zone              |                                     | Conditional Use  |                           |             | Requires Rev | view                       |               |
|  | False information may invalidate a building permit and stop all work |                 |                           | Subdivision                         |                  | ☐ Interpretation          |             |              | Approved                   |               |
|  |  | 7               | ☐ Sit                     | e Plan                              |                  | Approved                  | I           |              | Approved w/                | Conditions (  |
|  |  |                 | Maj □                     | Minor MM                            |                  | Denied                    |             |              | Denied                     |               |
|  |  | \               | ا الم                     |                                     | $\sqrt{\lambda}$ | Men                       |             |              | Comes                      | $\rightarrow$ |
|  |  |                 | Date:                     |                                     |                  | Date:                     |             | Date:        |                            | )             |
| •  |  |                 |                           | 7 2/                                | 2/               | <u>л</u> 9                |             |              |                            | -/-           |
|  |  |                 |                           | 4                                   | 2/0              | 2                         |             |              |                            |               |
|  | - CHILLIAN   |                 |                           |                                     |                  |                           |             |              |                            |               |
|  |  |                 |                           |                                     |                  |                           |             |              |                            |               |
|  |  |                 |                           |                                     |                  |                           |             |              |                            |               |
|  |  |                 |                           | <b>ERTIFICATION</b>                 |                  |                           |             |              |                            |               |
|  | n the owner of record of   |                 |                           |                                     |                  |                           |             |              |                            |               |
|  | by the owner to make th<br>n, if a permit for work de                |                 |                           |                                     |                  |                           |             |              |                            |               |
|  | to enter all areas covere  |                 |                           |                                     |                  |                           |             |              |                            |               |
| such permit.   |  | -               | -                         | -                                   |                  |                           | -           |              |                            |               |
| SIGNATURE OF APPLICA   | NT   |                 |                           | ADDRESS                             | <u> </u>         |                           | DATE        |              | PHO                        | ONE .         |
|  |  |                 |                           |                                     |                  |                           |             |              |                            |               |
| RESPONSIBLE PERSON I   | N CHARGE OF WORK, TITI   | Æ               |                           |                                     |                  |                           | DATE        |              | PHO                        | NE.           |
|  |  |                 |                           |                                     |                  |                           | -/11L       |              | 1110                       |               |

### **BUILDING PERMIT INSPECTION PROCEDURES**

Please call 874-8703 or 874-8693 (ONLY)

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 are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

| Order Release" will be incurred if the procedure is not followed  | lowed as stated below.      |
|---|-----------------------------|
| A Pre-construction Meeting will take place upon receipt of  | your building permit.       |
| X Framing/Rough Plumbing/Electrical: Prior to A   | ny Insulating or drywalling |
| X Final inspection required at completion of work.  |                             |
| Certificate of Occupancy is not required for certain projects. Your project requires a Certificate of Occupancy. All projects | -                           |
| If any of the inspections do not occur, the project cannot g<br>REGARDLESS OF THE NOTICE OR CIRCUMSTANCE                      | <u>=</u> :                  |
| CERIFICATE OF OCCUPANICES MUST BE ISSUED A THE SPACE MAY BE OCCUPIED.   | ND PAID FOR, BEFORE         |
| V. David Contin   |                             |
| Signature of Applicant Designee   | Date                        |
|   | <u> 9.12.08</u>             |
| Signature of Inspections Official   | Date                        |

**CBL:** 127 A003046 **Building Permit #:** 09-0076

| City of Portland, Maine   | Permit No:  | Date Applied For: | CBL:                   |                      |                     |  |
|---|---|-------------------|------------------------|----------------------|---------------------|--|
| 389 Congress Street, 04101  | Tel: (207) 874-8703, Fax: (                       | 207) 874-8716     | 09-0076                | 02/03/2009           | 127 A003046         |  |
| Location of Construction:   | ion of Construction: Owner Name:                  |                   |                        | Owner Address:       |                     |  |
| 290 BAXTER BLVD   | STAIS GLADYCE B                                   |                   | 2 BURMA RD             |                      | 207-650-3831        |  |
| Business Name:  | Contractor Name:                                  | -                 | Contractor Address:    | Phone                |                     |  |
|   | David Conley                                      |                   | 156 Pleasnat Hill F    | Road Hollis Center   | (207) 650-3831      |  |
| Lessee/Buyer's Name   | Phone:  |                   | Permit Type:           |                      | •                   |  |
|   |   |                   | Additions - Dwell      | ings                 |                     |  |
| Proposed Use:   |   | Propose           | d Project Description: |                      |                     |  |
| Condo - Bathroom Addition v   | vith-in existing space                            | Bathro            | om Addition with-      | in existing space    |                     |  |
|   |   |                   |                        |                      |                     |  |
|   |   |                   |                        |                      |                     |  |
|   |   |                   |                        |                      |                     |  |
|   |   |                   |                        |                      |                     |  |
| Dept: Zoning Sta  | atus: Approved with Condition                     | s Reviewer:       | Marge Schmucka         | l Approval D         | ate: 02/03/2009     |  |
| Note:   | rr  |                   | <i>3</i>               |                      | Ok to Issue:        |  |
|   | for an additional dwelling unit.                  | You SHALL NO      | OT add anv addition    | nal kitchen equipmer | nt including, but   |  |
|   | s stoves, microwaves, refrigerat                  |                   |                        |                      | Ο,                  |  |
| This property shall remain application for review and                           | n a total of 54 residential condon<br>l approval. | niniums in 4 bui  | ldings. Any change     | of use shall require | a separate permit   |  |
| <ol><li>This permit is being approwork.</li></ol>                               | oved on the basis of plans submit                 | tted. Any deviat  | ions shall require a   | separate approval b  | efore starting that |  |
| Dept: Building Sta  | atus: Approved with Condition                     | s Reviewer:       | Chris Hanson           | Approval D           | ate: 02/10/2009     |  |
| Note:   |   |                   |                        |                      | Ok to Issue:        |  |
| 1) This permit DOES NOT o   | ertify the use of the property or                 | huilding It only  | vauthorizes the con    | struction activities |                     |  |
| •   |   |                   |                        |                      |                     |  |
| <ol> <li>Separate permits are requi<br/>approval as a part of this p</li> </ol> | red for any electrical, plumbing, process.        | , HVAC or exha    | ust systems. Separa    | te plans may need to | be submitted for    |  |
| Dept: Fire Sta  | atus: Approved                                    | Reviewer:         | Capt Keith Gautre      | eau Approval D       | ate: 02/10/2009     |  |
| Note:   |   |                   |                        |                      | Ok to Issue:        |  |

#### Comments:

2/3/2009-mes: buildt in 1930 or so - four buildings with a total of 54 residential condos (converted 12-10-71 and our condo requirements went into effect on 11/16/81) - Bldg #1 = 12 res - Bldg #2 = 12 res - Bldg #3 = 12 res - Bldg #4 = 18 res.

# General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any

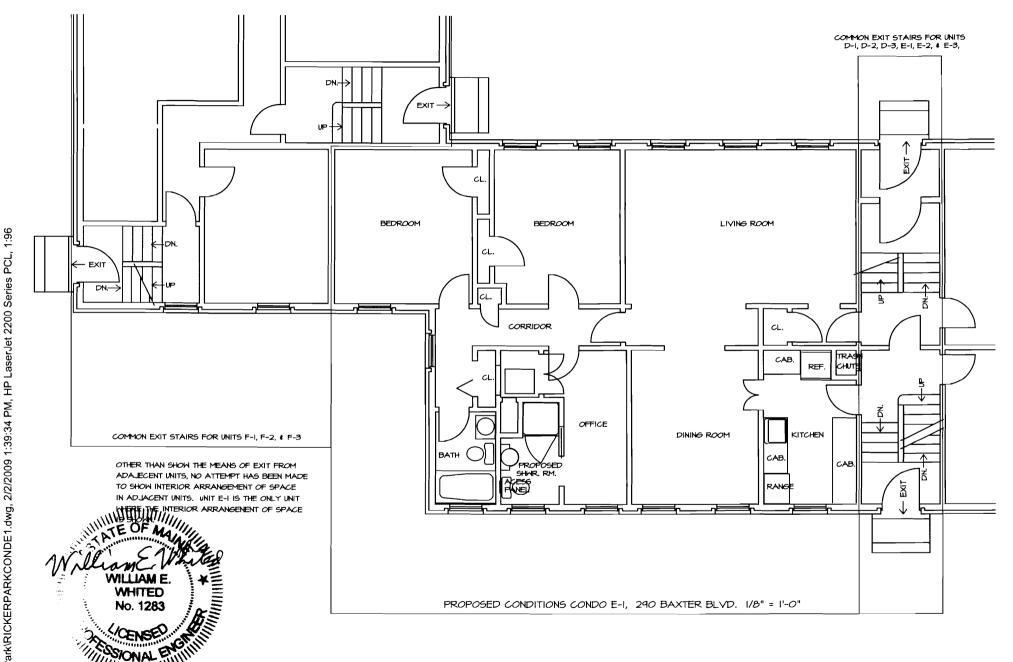
| Location/Address of Construction: 290  | Barter BLVD  |                   |  |  |  |
|--|--|-------------------|--|--|--|
| Total Square Footage, of Proposed Structure/1  | Area Square Footage of Lot                                       | Number of Stories |  |  |  |
| Tax Assessor's Chart, Blook & Lot  | Applicant *must be owner, Lessee or Buye                         | r* Telephone:     |  |  |  |
| Chart# Block# Lot#   | Name Clarge David Coste  | 207-650-3831      |  |  |  |
| 127 A 083046   | Address 156 Plansant Hill Rd.                                    |                   |  |  |  |
|  | City, State & Zip Hill's Center He 040                           | 142               |  |  |  |
| Lessee/DBA (If Applicable)   | Owner (if different from Applicant)                              | Cost Of           |  |  |  |
| 783 → <u>2009</u>  | Name Gladyce Stais   | Work: \$ 3,000    |  |  |  |
| 201.5  | Address 290 Bexter BLVD  | C of O Fee: \$    |  |  |  |
|  | City, State & Zip<br>Portland Me                                 | Total Fee: \$ 50  |  |  |  |
| Proposed Specific use: Saule la Is property part of a subdivision?  Project description:  Loughete New                                   | If yes, please name  |                   |  |  |  |
| Contractor's name: David Cowley  |  |                   |  |  |  |
| Address: 156 Placeaut Hill Ro  | l  |                   |  |  |  |
| 11ddress   | City, State & Zip Hollis Coutter Me 14042 Telephone: 207 650 385 |                   |  |  |  |
| City, State & Zip Hollis Coutter M.  |  |                   |  |  |  |
| City, State & Zip Hollis Coutter M.  |  |                   |  |  |  |
| City, State & Zip Hallis Coeffer M. Who should we contact when the permit is read  |  |                   |  |  |  |
| City, State & Zip Holl's Couffer M. Who should we contact when the permit is read Mailing address:  Please submit all of the information | dy: Contractor Te  | elephone: Same    |  |  |  |

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: | Smil Carolin | Date: 2/3/09 |  |
|------------|--------------|--------------|--|
|            |              |              |  |

This is not a permit, you may not commence ANY work until the permit is issue

Revised 09-26-08



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TELE, 207 781 9838



Condos Discorral

Condos Discorral

(do TASSED Condo Conversion

Ordonance on 11-16-81

