

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND**

Please Read  
Application And  
Notes, If Any,  
Attached

BUILDING DEPARTMENT

**PERMIT**

Permit Number: 051177

This is to certify that DUPLISSIE JAMES M

has permission to 3 Unit Condo/ Interior renovations & adding fire doors to code

AT 44 OCEAN AVE 129 B006001

**PERMIT ISSUED**  
SEP 23 2005  
CITY OF PORTLAND

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission procured before this building or part thereof is altered or closed-in. FOUR HOUR NOTICE IS REQUIRED.

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

**OTHER REQUIRED APPROVALS**

Fire Dept. Coreq Class PFD 9-2005

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_  
Department Name

*[Signature]*  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1177	Issue Date: <b>PERMIT ISSUED</b> SEP 23 2005	CBL: 29 B006001
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<b>Location of Construction:</b> 44 OCEAN AVE	<b>Owner Name:</b> DUPLISSIE JAMES M	<b>Owner Address:</b> 70 WINNOCKS NECK RD	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Change of Use - Condo Conversion	<b>Zone:</b>

<b>Past Use:</b> 3 Unit Residential	<b>Proposed Use:</b> 3 Unit Condo/ Interior renovations & adding firedoors to code	<b>Permit Fee:</b> \$1,344.00	<b>Cost of Work:</b> \$72,500.00	<b>CEO District:</b> 4
<b>Proposed Project Description:</b> 3 Unit Condo/ Interior renovations & adding firedoors to code		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: R2 Type: 5B 9/23/05	
<i>Legal use: 3 family Dwelling</i>		<b>Signature:</b> <i>Greg Luss</i>	<b>Signature:</b> <i>[Signature]</i>	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
<b>Signature:</b>		<b>Date:</b>		

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 08/17/2005	<b>Zoning Approval</b>		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied
	Date: <i>9/12/05</i>	Date: <i>9/12/05</i>	Date: <i>[Signature]</i>

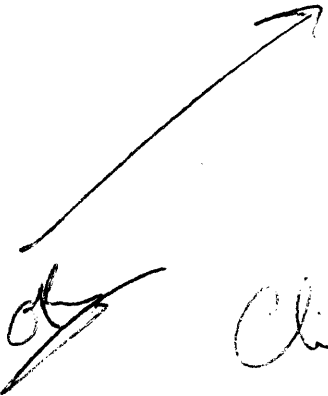
**CERTIFICATION**

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

Final Inspection 3/9/07

- \* Adjust Spring loaded hinges to self-close.
- \* Garage disposal can to be installed with back-up panel to transoms.
- \* Balers are sprinkled.
- ? Does the Basement entry door need to be Smoke & Fire Rated.
- \* Support Railing on second floor deck.



4/17/07

OK w/ fire dept then  
Issue C.O.  
Ch.

Ch.A.



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 44 OCEAN AVE

CBL 129 B006001

Issued to DUPLISSIE JAMES M

Date of Issue 05/08/2007

**This is to certify** that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 05-1177, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Unit 1 First Floor

APPROVED OCCUPANCY

Residential Condominium  
R 2 Type 5B

**Limiting Conditions:**

This does not certify City of Portland Building Code compliance, only a change in the from of ownership.

This certificate supersedes  
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.



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Department of Building Inspection

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PORTION OF BUILDING OR PREMISES

Unit 2 Second Floor

APPROVED OCCUPANCY

Residential Condominium  
R-2 Type 5B

**Limiting Conditions:**

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This certificate supersedes  
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

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PORTION OF BUILDING OR PREMISES

Unit 3 Third Floor

APPROVED OCCUPANCY

Residential Condominiums  
R-2 Type 5B

**Limiting Conditions:**

This does not certify City of Portland Building Code compliance, only a change of use.

This certificate supersedes  
certificate issued

Approved:

*[Signature]*

(Date)

Inspector

*[Signature]*

Inspector of Buildings

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# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation: WILMINGTON  
Street: 4249 DEW AVE  
Subdivision Lot #: PORTLAND 04103

## PROPERTY OWNERS NAME

Last: O'HANLON First: JOHN  
Applicant Name: DAVID A. RAUD  
Mailing Address of Owner/Applicant (If Different): 10 PAK ST. KENNEBUNK 04043

2005-8348  
PORTLAND PERMIT # 9573 TOWN COPY  
Date Permit Issued: 9/08/05 \$ 132.99  If Double Fee Charged  
Local Plumbing Inspector Signature: [Signature] L.P.I. # 01826  
129 B 004

## Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

## Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

[Signature] 9/29/05  
Signature of Owner/Applicant Date

[Signature] Date Approved

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	<b>Plumbing To Be Installed By:</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>8324</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b>  HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock	3	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b>  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	3	Sink
		Drinking Fountain	3	Wash Basin
<b>OR</b>  TRANSFER FEE (\$6.00)		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	3	Clothes Washer
<b>OR</b>  TRANSFER FEE (\$6.00)		Grease / Oil Separator	3	Dish Washer
		Dental Cuspidor	3	Garbage Disposal
<b>OR</b>  TRANSFER FEE (\$6.00)		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			21	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

# ELECTRICAL PERMIT

## City of Portland, Me.

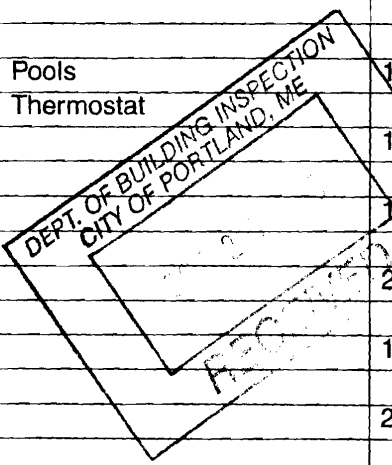


To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 10/26/05  
 Permit # 2005-5018  
 CBL# 129 B6

LOCATION: 4244 Ocean Ave METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # 96580398 OWNER CYNTHIA O'HANLON  
 TENANT \_\_\_\_\_ PHONE # 625-2224

						TOTAL EACH FEE	
OUTLETS		Receptacles	<u>60</u>	Switches	<u>45</u>	Smoke Detector	<u>16</u> .20 <u>21</u>
FIXTURES	<u>18</u>	Incandescent	<del>30</del>	Fluorescent	<u>10</u>	Strips	.20 <u>5.60</u>
SERVICES	<u>1</u>	Overhead		Underground		TTL AMPS <u>200</u> <800	15.00 <u>15</u>
		Overhead		Underground		>800	25.00
Temporary Service		Overhead		Underground		TTL AMPS	25.00
							25.00
METERS	<u>4</u>	(number of)					1.00 <u>4</u>
MOTORS		(number of)					2.00
RESID/COM		Electric units					1.00
HEATING		oil/gas units		Interior		Exterior	5.00
APPLIANCES	<u>3</u>	Ranges		Cook Tops		Wall Ovens	2.00
		Insta-Hot		Water heaters	<u>1</u>	Fans	2.00 <u>2</u>
	<u>3</u>	Dryers		Disposals	<u>3</u>	Dishwasher	2.00 <u>12</u>
		Compactors		Spa	<u>3</u>	Washing Machine	2.00 <u>6</u>
		Others (denote)					2.00
MISC. (number of)		Air Cond/win					3.00
		Air Cond/cent				Pools	10.00
		HVAC		EMS		Thermostat	5.00
		Signs					10.00
		Alarms/res					5.00
		Alarms/com					15.00
		Heavy Duty(CRKT)					2.00
		Circus/Carnv					25.00
		Alterations					5.00
		Fire Repairs					15.00
		E Lights					1.00
		E Generators					20.00
PANELS		Service	<u>3</u>	Remote	<u>1</u>	Main	4.00 <u>14</u>
TRANSFORMER		0-25 Kva					5.00
		25-200 Kva					8.00
		Over 200 Kva					10.00
						TOTAL AMOUNT DUE	
						MINIMUM FEE/COMMERCIAL 45.00	
						MINIMUM FEE 35.00	<u>87.60/100</u>



CONTRACTORS NAME ROGER GELINAS MASTER LIC. # 4876  
 ADDRESS 6 Romeo Lane B107 LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 468-7935-2821865