Form # P 04 DISPLAY THIS CA	ARD ON PRINCIPAL FRONT	FAGE OF WORK
Please Read Application And Notes, If Any, Attached	TY OF PORTLAN	Permit Ruffief #89399UED
This is to certify thatMCALLISTER_RAYMC	ONE Andy Bulger	APR 1 1 2008
has permission to2 unit residential - kitcher	n reations - nove-, vall repla with 1 &	
AT 70 PLEASANT AVE	<b>   130</b> - C	202000 TY GE PORTLAND
provided that the person or perso of the provisions of the Statutes the construction, maintenance an this department.	of mine and or the Constances of	this permit shall comply with all the City of Portland regulating , and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	ificatio of inspa on mus e en and v en permoon proc d bre this ilding or art there s ied or cruite losed-in 4 UR NOL CONTRED.	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept	_	2 1 4/10/08
Health Dept		
Appeal Board		THA
Other Department Name		Director /Building & Inspection Services
PE	NALTY FOR REMOVING THIS CAR	

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## 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.

A Pre-construction Meeting will take place upon receipt of your building permit.

Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling Χ

Final ispection required at completion of work. Χ

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.** 

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE** SPACE MAY BE OCCUPIED.

made

Signature of Applicant/Designee

Signature of Inspections Official

Date

City of Portland, Ma	aine - Building or Use	Permit Applicati	on Pe	ermit No:	Issue Date:	CBL:	
389 Congress Street, 04	101 Tel: (207) 874-8703	3, Fax: (207) 874-87	/16	08-0308		130 C0	02001
Location of Construction:	Owner Name:		Owne	er Address:		Phone:	
70 PLEASANT AVE	MCALLISTE	R RAYMOND E	70 P	PLEASANT A	VE		
Business Name:	Contractor Name	e:	Contr	ractor Address:		Phone	
	Andy Bulger						
Lessee/Buyer's Name	Phone:			it Type:			Zone:
			Alte	erations - Dup			<u>14-2</u>
Past Use:	Proposed Use:		Perm	nit Fee:	Cost of Work:	CEO District:	
2 unit residential	2 unit resident			\$220.00	\$20,000.00	4	
	renovations - i replace with 1	remove full wall $r = \frac{1}{2}$ wall	FIRE	E DEPT:	] Approved INSP	ECTION: Group: 2-3	- 5
	replace with t	$\propto 1/2$ wall			Denied	Group: 727	Type: J
					1	- PC 20	<u>0</u> 3
		· · ·	<u> </u>	PIF	- ا	11	
Proposed Project Description:						Calif	
1/2 wall	n renovations - remove full v	wall replace with 1 &	Signa		VITIES DISTRICT	ature:	
1/2 wan			FEDE	STRIANACTI			)
			Actio	on: Approv	ed Approved	w/Conditions	Denied
			Signa	ature:		Date:	
Permit Taken By:	Date Applied For:			Zoning	Approval		
1.1							
Idobson	04/04/2008						
	on does not preclude the	Special Zone or Rev	iews	Zonin	g Appeal	Históric Pres	ervation
1. This permit applicati Applicant(s) from me		Special Zone or Rev	/iews	Zonin		Historic Press	
1. This permit applicati	on does not preclude the		/iews				
1. This permit applicati Applicant(s) from me Federal Rules.	on does not preclude the		/iews		;		t or Landmark
1. This permit applicati Applicant(s) from me Federal Rules.	on does not preclude the eeting applicable State and not include plumbing,	Shoreland	/iews	Variance	;	Not in Distric	t or Landmark
<ol> <li>This permit applicati Applicant(s) from me Federal Rules.</li> <li>Building permits do n septic or electrical we</li> <li>Building permits are</li> </ol>	on does not preclude the eeting applicable State and not include plumbing, ork. void if work is not started	Shoreland	/iews	Variance	neous	Not in Distric	et or Landmark quire Review
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#### 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

City of Portland, Maine - Bui	lding or Use Permi	t		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (	207) 874-8703, Fax: (	(207) 874	4-8716	08-0308	04/04/2008	130 C002001
Location of Construction:	Owner Name:			Owner Address:		Phone:
70 PLEASANT AVE	MCALLISTER RAY	MOND E		70 PLEASANT A	VE	
Business Name:	Contractor Name:			Contractor Address:		Phone
	Andy Bulger					
Lessee/Buyer's Name	Phone:			Permit Type:		
				Alterations - Dupl	ex	
Proposed Use:			Propose	d Project Description:		
2 unit residential - kitchen renovation with 1 & 1/2 wall	ns - remove full wall rep	lace		residential - kitcher & 1/2 wall	n renovations - remo	ve full wall replace
Dept:ZoningStatus:Note:1)This is NOT an approval for an a not limited to items such as stove	0	You SH.	ALL N	•	nal kitchen equipme	Ok to Issue: 🖌
<ol> <li>This property shall remain a two approval.</li> </ol>		-		-		on for review and
<ol> <li>This permit is being approved on deviations shall require a separat</li> </ol>				information from th	ne owner via phone	nessage. Any
<b>Dept:</b> Building <b>Status:</b> A	Approved with Condition	ns <b>Re</b> v	viewer:	Tammy Munson	Approval D	ate: 04/10/2008
Note:	••			-	• •	Ok to Issue:
1) The design load spec sheets for a	ny engineered beam(s)/	Trusses	must he	submitted to this o	ffice.	
	••••					
<ol> <li>Separate permits are required for Separate plans may need to be su</li> </ol>			•			

#### Comments:

4/7/2008-mes: The plans are very slim - where is this new work going? Is it in the main house? Or Garage? What floor? Just updating old kitchen or adding a full new kitchen? I left a phone messsage with Ray McAllister, the owner to answer these questions. Ray McAllister called back and stated that this was an existing kitchen on the first floor of the main house. This is not a new, additional kitchen.



## **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.

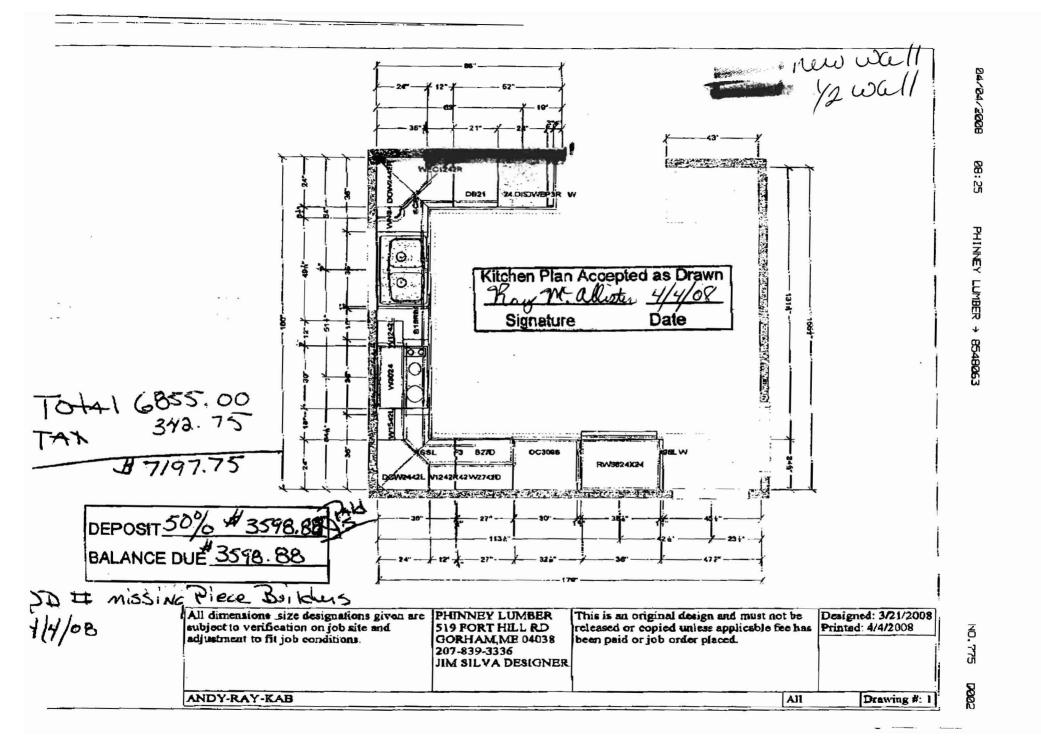
Location/Address of Construction: .70	PLEASANT AVE	
Total Square Footage of Proposed Structure/A	rea Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# /30 C 2	Applicant * <u>must</u> be owner, Lessee or Buyer Name Ray ME, ALL'Stor Address 70 PL ca Saut AVE City, State & Zip PortLand Me	2 774-111/
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of A anti
	Name	Work: \$ 4740000
	Address	C of O Fee: \$
	City, State & Zip	Total Fee: \$
Current legal use (i.e. single family)	family	
If vacant, what was the previous use?	/	
	If yes, please name	
Project description: wall.	l wall replace.	with half
Contractor's name: Andy B	ulger	
Address:		
City, State & Zip		elephone: <u>4/3 - 293</u>
Who should we contact when the permit is read	hy Kap McAllister T	elephone: <u>774 - 1111</u>
Mailing address:	Abrie	

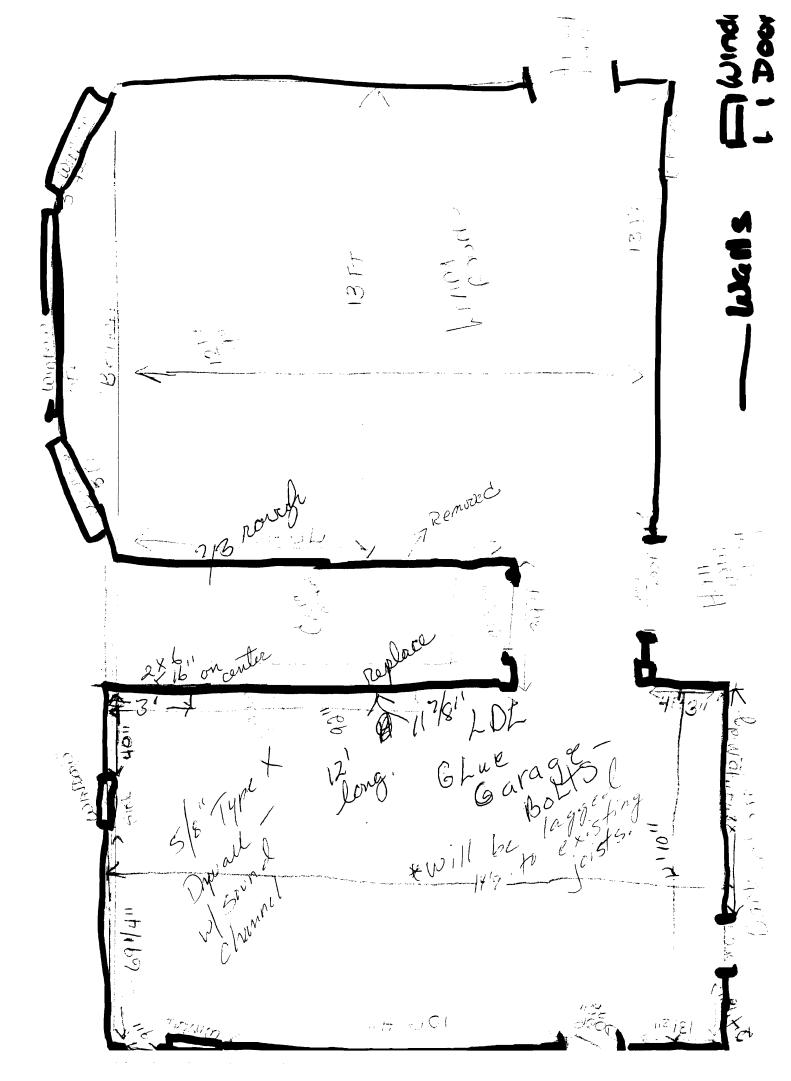
# Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 downlow copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandinaine.gov</u>, 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:	Row M.	allister	Date:	4/4/08		
	This is not a pern	uit; you may not co	mmence A	NY work until the pe	rmit is issue	







PLUMBING APPLICATI	ON	Department of Health and Human Ser Division of Environmental Health	rvices
PROPERTY ADDRESS         Town or       Plantation         Plantation       Perturbation         Street       Subdivision Lot #         Subdivision Lot #       70         PROPERTY OWNERS NAME         Last:       Mailing Address of Owner/Applicant (If Different)         Mailing Address of Owner/Applicant (If Different)       To REDUCE         I certify that the information submitted is correct to the knowledge and understand that any falsification is rease. Plumbing Inspectors to being a Permit.         Musting Address of Owner/Applicant       To REDUCE         Signature of Owner/Applicant       Signature of Owner/Applicant	mbing Rayob 2 t best of my son for the Local Mathe Date Local Plumbing Inspecte compliance with Local Plumbing Local Plumbing Inspecte compliance with Local Plumbing	Caution: Inspection Required         ed the installation authorized above and found it to be in         th the Maine Plumbing Rules.         ing Inspector Signature	
This Application is for     Type       1. □     NEW PLUMBING     1. □       2. □     RELOCATED     2. □	PERMIT INFORMATI De of Structure To Be Served: FAMILY DWELLING DULAR OR MOBILE HOME E FAMILY DWELLING - SPECIFY	O N         Plumbing To Be Installed By:         1. ☐ MASTER PLUMBER         2. ☐ OIL BURNERMAN         3. ☐ MFG'D. HOUSING DEALER/MECHAN         4. ☐ PUBLIC UTILITY EMPLOYEE         5. ☐ PROPERTY OWNER         LICENSE # [61,21,21,21]	NIC
Hook-Up & Piping Relocation         Maximum of 1 Hook-Up         HOOK-UP: to public sewer in         those cases where the connection         is not regulated and inspected by         the local Sanitary District.         OR         HOOK-UP: to an existing subsurface         wastewater disposal system.         PIPING RELOCATION: of sanitary         lines, drains, and piping without         new fixtures.	Column 2 Type of Fixture         Number       Hosebib / Sillcock         Hosebib / Sillcock         Floor Drain         Urinal         Drinking Fountain         Indirect Waste         Water Treatment Softener, Filter,         Grease / Oil Separator         Roof Drain         Bidet	Dish Washer Garbage Disposal Laundry Tub	
	Other: Fixtures (Subtotal) Column 2 T FEE SCHEDULE CULATING FEE TOWN COPY	Water Heater     Fixtures (Subtotal)       Column 1     Column 1       Fixtures (Subtotal)     Column 2       Total Fixtures     Fixture Fee       Transfer Fee     Hook-Up & Relocation Fee       Permit Fee     (Total)	

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STATE OF MAINE DEPT OF PROFESSIONAL & FINANCIAL REGULATION PLUMBERS EXAMINING BOARD

LICENSE # MS70002227

### RICHARD F. GOUZIE LICENSED MASTER PLUMBER

ISSUED Jan 01, 2008 EXPIRES Dec 31, 2009

THE REAL PROPERTY AND INCOMENTS

Form # P 01

### **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 4|18|2008Permit # 2009-4259CBL# 130-C-002

LOCATION:	70	PLEASANT	AVE	METER M	AKE & # _		
CMP ACCOUNT #					Ray	MC ALLISTER	
TENANT				_PHONE #	77	4-111	

							TAL EACH FEE
DUTLETS	10	Receptacles	5	Switches	5	Smoke Detector	.20
	_					0	
FIXTURES	8	Incandescent		Fluorescent		Strips	.20
		Overhead		Underground		TTL AMPS <800	15.00
		Overhead		Underground		>800	25.00
				Chaorground			
Temporary Service		Overhead		Underground		TTL AMPS	25.00
							25.00
METERS		(number of)					1.00
MOTORS		(number of)					2.00
RESID/COM		Electric units					1.00
HEATING		oil/gas units		Interior		Exterior	5.00
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00
		Insta-Hot		Water heaters	;	Fans	2.00
		Dryers		Disposals		Dishwasher	2.00
		Compactors		Spa		Washing Machine	2.00
		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)				18	008 2.00
		Circus/Carnv				APH 18	25.00
·		Alterations					5.00
··		Fire Repairs					15.00
		E Lights					1.00
		E Generators					20.00
PANELS		Service		Domoto		Main	
TRANSFORMER		0-25 Kva		Remote		Main	4.00
TANSFURMER							5.00
		25-200 Kva					8.00
		Over 200 Kva					10.00
		MINIMUM FEE/COM				TOTAL AMOUNT DUE	
			лвль			MINIMUM FEE 45.	

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White Copy - Office

SIGNATURE OF CONTRACTOR

**Yellow Copy - Applicant** 

2399