

924462

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 25.00 Zone _____ Map # _____ Lot# _____

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

Owner Matthew Chamberlain Phone # 758-5536 Pager _____

Address: 66 Hearn Rd Scarborough 04074

LOCATION OF CONSTRUCTION 169 Woodford St.

Contractor _____ Sub: _____

Address _____ Phone # _____

Est. Construction Cost: 250.00 Proposed Use: 2-fam w/int reno

Past Use: 2-fam

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Make Interior Renovation as per plans

For Official Use Only

Date December 31, 1992

Inside Fire Limits _____

Hdg Code _____

Time Limit _____

Estimated Cost _____

Subdivision _____

Name _____

Lot _____

Ownership _____

Private _____

PERMIT ISSUED

CITY OF PORTLAND

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) _____

Foundation:

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

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder 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 Sizes _____ Span(s) _____
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 Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

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

Roof:

1. Truss or Rafter Size _____ Span _____ Action: Approved
2. Sheathing Type _____ Size _____ Action: Approved with Conditions
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____ Date: _____
Signature: _____

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 _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

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

Permit Received By Mary Gresik

Signature of Applicant Matthew Chamberlain Date Dec 31, 1992

CEO's District C Matthew Chamberlain

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

White - Tax Assessor

[Signature]