

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED

JAN 21 2003

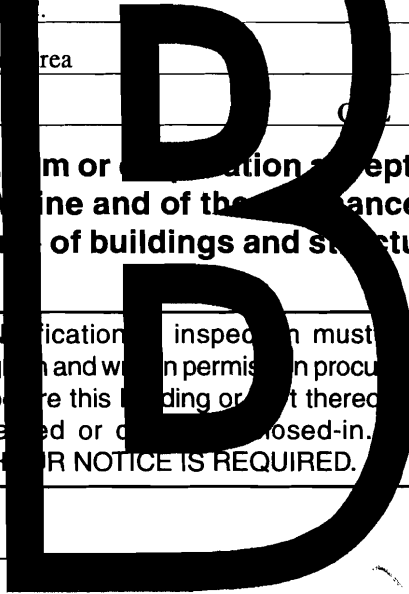
Permit Number: 030043

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

This is to certify that Potthoff Alan D &/Kitchens
 has permission to Renovation of bath and kitchen area
 AT 57 Lawn Ave Call 131 F009001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 inspection must given and work in permit in progress before this building or part thereof is occupied or closed-in. 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. _____
 Health Dept. _____
 Appeal Board _____
 Other _____
Department Name

Jamie Bouke 1/21/03
 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 ISSUED

Permit No: 03-0043	Issue Date: JAN 21 2003	CBL: 31 F009001
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Location of Construction: 57 Lawn Ave	Owner Name: Potthoff Alan D &	Owner Address: 57 Lawn Ave	Phone: 871
Business Name:	Contractor Name: Kitchens INC.	Contractor Address: 352 Warren Ave. Portland	Phone: 2078782124
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-5

Past Use: Single Family	Proposed Use: Single Family	Permit Fee:	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: Renovation of bath and kitchen area		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: GB BOCA 1997 Signature: jmb 1/21/03	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date:		

Permit Taken By: jmb	Date Applied For: 01/21/2003	Zoning Approval	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<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"/> Date: 1/21/03 jmb	<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 Date:	<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:

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

W

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

2003 0641

Date Permit Issued: 1 12 4 1 0 3 \$ 480.00 If Double Fee Charged

A. Rowe L.P.I. # 01641

Local Plumbing Inspector Signature

131 F 009

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 of Owner/Applicant

Date

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input 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 # _____
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP: to an existing subsurface wastewater disposal system. OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<input style="width: 50px; height: 20px;" type="text"/> TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				7
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee Permit Fee (Total)

ELECTRICAL PERMIT

City of Portland, Me.



BP

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 1/30/03
 Permit # 2003 4073
 CBL# 131 F009

LOCATION: 57 LAWN AVE. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER ALAN POTTHOFF
 TENANT _____ PHONE # 773-8871

TOTAL EACH FEE

OUTLETS	<u>16</u>	Receptacles	<u>8</u>	Switches		Smoke Detector			.20
FIXTURES	<u>13</u>	Incandescent		Fluorescent		Strips			.20
SERVICES		Overhead		Underground		TTL AMPS	<800		15.00
		Overhead		Underground			>800		25.00
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	<u>1</u>	Ranges		Cook Tops		Wall Ovens			2.00
		Insta-Hot		Water heaters		Fans			2.00
		Dryers	<u>1</u>	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)							2.00
		Circus/Carnv							25.00
		Alterations							5.00
		Fire Repairs							15.00
		E Lights							1.00
		E Generators							20.00
	PANELS		Service		Remote		Main		
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>35.00</u>

CONTRACTORS NAME C&W ELECTRIC, INC. MASTER LIC. # MC60017597
 ADDRESS 24 OLD ORCHARD RD. GORHAM, ME 04038 LIMITED LIC. # _____
 TELEPHONE (207) 839-8317 671-5644 (CELL)

SIGNATURE OF CONTRACTOR *Greg Cull*