

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

# BUILDING PERMIT

This is to certify that KURT E &» OLAFSEN

Located At 19 AMHERST

Job ID: 2011-08-1918-ALTR

CBL: 131 - - J - 003 - 001 - - - - -

has permission to Update existing kitchen & add 1/2 bath

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

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

\_\_\_\_\_  
Fire Prevention Officer

\_\_\_\_\_  
Code Enforcement Officer / Plan Reviewer

*[Handwritten signature and date 8/12/11]*

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY  
PENALTY FOR REMOVING THIS CARD**



# PORTLAND MAINE

*Strengthening a Remarkable City, Building a Community for Life • [www.portlandmaine.gov](http://www.portlandmaine.gov)*

Director of Planning and Urban Development  
Penny St. Louis

Job ID: 2011-08-1918-ALTR

Located At: 19 AMHERST

CBL: 131 - - J - 003 - 001 - - - -

## **Conditions of Approval:**

### **Building**

1. Separate permits are required for plumbing and electrical.

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

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

Job No: <b>2011-08-1918-ALTR</b>	Date Applied: <b>8/5/2011</b>	CBL: <b>131 - - J - 003 - 001 - - - - -</b>	
Location of Construction: <b>19 AMHERST ST</b>	Owner Name: <b>TODD MICHAELIS</b>	Owner Address: <b>19 AMHERST ST PORTLAND, ME - MAINE 04103</b>	Phone:
Business Name:	Contractor Name: <b>Snow Construction, Jay Snow</b>	Contractor Address: <b>144 Watkins Shore Rd, Casco, ME 04015</b>	Phone: <b>( ) - 671-0319</b>
Lessee/Buyer's Name:	Phone:	Permit Type: <b>interior alterations</b>	Zone: <b>R-5</b>
Past Use: <b>Single family dwelling</b>	Proposed Use: <b>Same: Single Family dwelling - to update exiting kitchen and dining area and to add 1/2 bath</b>	Cost of Work: <b>\$5000.00</b>	CEO District:
		Fire Dept: <i>MA</i>	Inspection: <i>R-3</i>
		Approved Denied <i>MA</i>	Use Group: <i>SB</i>
		Signature: <i>[Signature]</i>	Type: <i>TRC 09</i>
Proposed Project Description: <b>Remodel Kitchen /Dining add 1/2 bath</b>		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Lannie		<b>Zoning Approval</b>	

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in Dist or Landmark
<input type="checkbox"/> Wetlands	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
<input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>ok with conditions</i>	Date:	Date:
<i>8/10/11</i>		<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	PHON

Email

CD  +YS ✓

Flash Drive



# General Building Permit Application

R-5  
55567

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: <u>19 Amherst ST Portland, ME 04102</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>131</u> <u>J</u> <u>3</u>	Applicant:      Email: _____ Name Address City, State & Zip	Telephone: <u>207-671-0315</u>
Lessee/DBA      Email: _____	Owner:      Email: _____ Name <u>Todd Michaelis</u> Address <u>15 Amherst ST</u> <u>Portland, ME 04102</u> City, State & Zip	Cost of Work: \$ _____ C of O Fee: \$ <u>5,000</u> Historic Review: \$ _____ Planning Amin.: \$ _____ Total Fee: \$ <u>70</u>
Current legal use (i.e. single family) <u>Single</u> Number of Residential Units _____ If vacant, what was the previous use? _____ Proposed Specific use: <u>Revised Kitchen + Dining + Add 1/2 Bath</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>updating kitchen cabinets; Dining area. Add 1/2 Bath</u>		
Contractor's name: <u>SNOW Construction INC</u> Email: _____		
Address: <u>144 Watkins Shore Rd</u>		
City, State & Zip <u>Casco, ME 04015</u> Telephone: _____		
Who should we contact when the permit is ready: <u>Jay Snow</u> Telephone: <del>207-671-0315</del> <u>207-671-0315</u>		
Mailing address: _____		

11.5.8

**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 download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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.

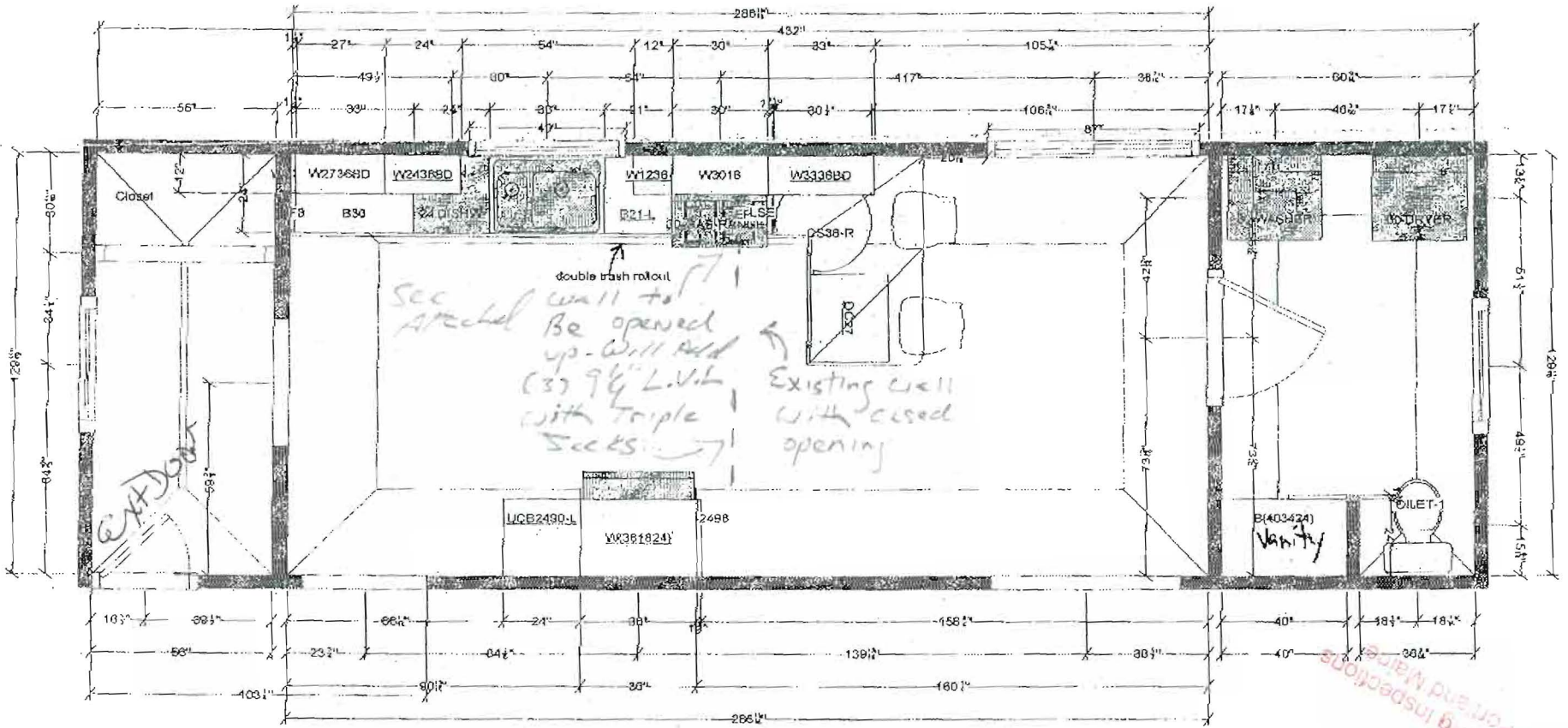
Signature: \_\_\_\_\_ Date: 02-05-11

**This is not a permit; you may not commence ANY work until the permit is issued**

Jul 12 2011 04:20pm P003/007

Design's Kitchen&Bath Fax:2078930020

858-7433 Fax



1st Floor

RECEIVED  
AUG - 5 - 2011  
Dept. of Building Inspections  
City of Portland, Maine

<p>All dimensions size designations given are subject to verification on job site and adjustment to fit job conditions.</p>	<p>DESIGNS KITCHEN BATH 207-893-2773 619 ROOSEVELT TRAIL WINDHAM, ME 04062 ED J WILLIAMS, JR</p>	<p>This is an original design and must not be released or copied unless applicable fee has been paid or job order placed.</p>	<p>Designed: 7/11/2011 Printed: 7/12/2011</p>
<p>Snow Construction</p>	<p>All</p>	<p>Drawing #: 1</p>	<p>Scale : 0 1/4" = 1'</p>

C-10' 9" - 7

Triple Lumber Header (3)

Triple 2x4 Jacks

Exterior Wall

Floor

Basement

Triple 2x4 Jacks

2x6" Blocking

C-10' 9" - 7

EXT BRICKY

Concrete Kelly Column with steel plates

Concrete Sill

RECEIVED

APR - 5 2011

Dept. of Building Inspections  
City of Philadelphia

CONCRETE  
SILL



**CITY OF PORTLAND, MAINE**  
Department of Building Inspections

**Original Receipt**

\_\_\_\_\_ 8.5. 20 11 \_\_\_\_\_

Received from \_\_\_\_\_ Snow Const- \_\_\_\_\_

Location of Work \_\_\_\_\_ 1711th St \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_ Building Fee: \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Site Fee: \_\_\_\_\_

Certificate of Occupancy Fee: \_\_\_\_\_

Total: \_\_\_\_\_ 70 \_\_\_\_\_

Building (IL) \_\_\_\_\_ Plumbing (I5) \_\_\_\_\_ Electrical (I2) \_\_\_\_\_ Site Plan (U2) \_\_\_\_\_

Other \_\_\_\_\_

CBL: \_\_\_\_\_ 13-7-13 \_\_\_\_\_

Check #: \_\_\_\_\_ 1494 \_\_\_\_\_ Total Collected \$ \_\_\_\_\_ 70 \_\_\_\_\_

**No work is to be started until permit issued.  
Please keep original receipt for your records.**

Taken by: \_\_\_\_\_ [Signature] \_\_\_\_\_

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy