

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 020467

Please Read Application And Notes, If Any, Attached

This is to certify that Foster Steven N &/Construct Systems of New England has permission to Amendment to permit # 0203 reducing 10' x 10' area. AT 11 James St 131 L003001

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 of inspection must be given and when permission is procured before this building or part thereof is altered or closed-in. 24 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

Signature of 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: 02-0467	Issue Date:	CBL: 131 L003001
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Location of Construction: 11 James St	Owner Name: Foster Steven N &	Owner Address: 11 James St	Phone: 207-871-1154
Business Name: n/a	Contractor Name: 749-2236 Construction Systems of New Engla	Contractor Address: 10A Thompson's Point Portland	Phone: 2078719070
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Amendment to Single Family	Zone: 2-5

Past Use: Single Family	Proposed Use: Single Family / Amendment to permit # 020392; reducing a 10' x 10' area.	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied N/A	INSPECTION: Use Group: KB Type: SB BOCA 1999 Signature: JMa	

Proposed Project Description:
Amendment to permit # 020392, reducing 10' x 10' area.
Reducing size of addition.

Signature: N/A
Signature: JMa
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: N/A Date:

Permit Taken By: gg	Date Applied For: 05/08/2002	Zoning Approval
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<ol style="list-style-type: none"> 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input checked="" 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: 5/20/02	Zoning Appeal <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:	Historic Preservation <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: 5/20/02
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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

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	11 JAMES ST

PROPERTY OWNERS NAME

Last: <u>Fisher</u>	First: <u>Thomas</u>
Applicant Name:	<u>Thomas Fisher (H)</u>
Mailing Address of Owner/Applicant (If Different)	<u>1407 S. Vermont St Portland ME 04103</u>

PORTLAND 8130 TOWN COPY

Date Permit Issued: 6/14/02 \$ 616.00 Double Fee Charged

Thomas M. Mably
Local Plumbing Inspector Signature L.P.I. # 01603

131-L-3
079 017

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.

Thomas Fisher _____
Signature of Owner/Applicant Date

Caution: Inspection Required

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

Thomas M. Mably _____
Local Plumbing Inspector Signature Date Approved 6/20/02

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input checked="" 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 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>05083</u>
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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
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. <div style="text-align: center; font-size: 2em; font-weight: bold;">OR</div> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock	/	Bathtub (and Shower)
		Floor Drain	/	Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	/	Sink
		Drinking Fountain	2	Wash Basin
<div style="text-align: center; font-size: 2em; font-weight: bold;">OR</div> <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	2	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
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			10	Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

ELECTRICAL PERMIT

City of Portland, Me.



S/F

~~AKB~~

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 6/17/02
 Permit # 2000 4484
 CBL# 131 1003

LOCATION: 11 James st. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Foster - Eringhaus
 TENANT _____ PHONE # _____

TOTAL EACH FEE

OUTLETS	15	Receptacles	15	Switches	4	Smoke Detector			.20	6.80
FIXTURES	5	Incandescent		Fluorescent	2	Strips			.20	1.40
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	1	Ranges		Cook Tops		Wall Ovens			2.00	2.00
		Insta-Hot		Water heaters	2	Fans			2.00	4.00
	1	Dryers		Disposals	1	Dishwasher			2.00	4.00
		Compactors		Spa	1	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			4.00	
	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		35.00

CONTRACTORS NAME Jeff Hight Elec. MASTER LIC. # 14229
 ADDRESS 17 Racine Ave Portland 04103 LIMITED LIC. # _____
 TELEPHONE 797-4643

SIGNATURE OF CONTRACTOR [Signature]