

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING DEPARTMENT

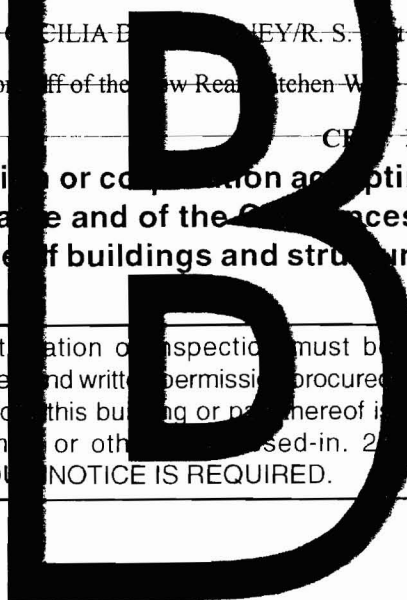
# PERMIT

Permit Number: 090279

Please Read Application And Notes, If Any, Attached

This is to certify that MCKENNEY PATRICK G & CECILIA B. MCKENNEY/R. S. MCKENNEY  
has permission to Addition of an 8'x14' Mud Room off of the new Rear Kitchen  
AT 34 ALBA ST CE# 133-C018001

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 written permission procured before this building or part thereof is lathed or otherwise finished-in. 24 HOURS 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]*  
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: 09-0279	Issue Date: 4/24/09	CBL: 133 C018001
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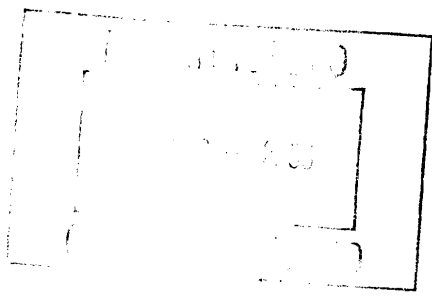
Location of Construction: 34 ALBA ST	Owner Name: MCKENNEY PATRICK G & CECI	Owner Address: 34 ALBA ST	Phone: 207-749-3768
Business Name:	Contractor Name: R. S. Carter Construction	Contractor Address: PO Box 11138 Portland	Phone: 2078740000
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home - Addition of an 8'x14' Mud Room off of the New Rear Kitchen Way	Permit Fee: \$220.00	Cost of Work: \$19,500.00	CEO District: 5
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: 5B IRC-2003	

Proposed Project Description: Addition of an 8'x14' Mud Room off of the New Rear Kitchen Way	Signature:	Signature: <i>[Signature]</i>
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: lmd	Date Applied For: 04/07/2009	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>o.k.</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 4/24/09 <i>[Signature]</i>	<b>Zoning Appeal</b> <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: <i>[Signature]</i>	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input checked="" 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: 4/24/09
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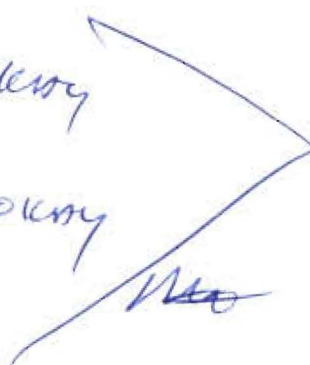
**CERTIFICATION**

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

04/29/09 Footings okay

05/01/09 Backfill okay



9/4/09 - all work completed - OK to

close out

M

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

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

<b>Permit No:</b> 09-0304	<b>Date Applied For:</b> 04/10/2009	<b>CBL:</b> 133 C018001
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<b>Location of Construction:</b> 34 ALBA ST	<b>Owner Name:</b> MCKENNEY PATRICK G & CECI	<b>Owner Address:</b> 34 ALBA ST	<b>Phone:</b> 207-773-2511
<b>Business Name:</b>	<b>Contractor Name:</b> R S Carter Construction	<b>Contractor Address:</b> PO Box 11138 Portland	<b>Phone:</b> (207) 838-9395
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	

<b>Proposed Use:</b> Single Family Home - Amendment to 09-0222, to include Total Interior Demolition of all Walls, Electrical, Plumbing. Addition of New Support Beams, Addition of Deck of Mudroom.	<b>Proposed Project Description:</b> Amendment to 09-0222, to include Total Interior Demolition of all Walls, Electrical, Plumbing. Addition of New Support Beams, Addition off Deck of Mudroom.
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Chris Hanson      **Approval Date:** 04/24/2009  
**Note:**      **Ok to Issue:**

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Chris Hanson      **Approval Date:** 04/24/2009  
**Note:**      **Ok to Issue:**

- 1) There must be a 2" clearance maintained between the chimney and any combustible material, with draft stopping per code at each level
- 2) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 3) Frost protection must be installed per the enclosed detail as discussed w/owner/contractor.
- 4) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.
- 5) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



# 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: <u>34 ALBA ST. PTLD, ME</u>		
Total Square Footage of Proposed Structure/Area <u>120 SQ FT.</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>133      C      18</u>	Applicant * <u>must</u> be owner, Lessee or Buyer* Name <u>DAVID GALIN</u> Address <u>80 MABEL ST.</u> City, State & Zip <u>PTLD, ME 04103</u>	Telephone:  <u>(207) 749-3768</u>
Lessee/DBA (If Applicable)  <u>APR - 7 2009</u>	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>19,500.00</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>SINGLE FAMILY</u> If vacant, what was the previous use? <u>SINGLE FAMILY</u> Proposed Specific use: <u>SINGLE FAMILY</u> Is property part of a subdivision? <u>NO</u> If yes, please name _____ Project description: <u>FROST WALL + CONSTRUCTION OF AN 8'X14' (120 SQ) MUD ROOM. THE MUD ROOM WILL BE OFF OF THE NEW REAR KITCHEN WALL.</u>		
Contractor's name: <u>R.S. CARTER CONSTRUCTION</u> Address: <u>P.O. BOX 11138, PTLD, ME 04104-7138</u> City, State & Zip <u>PTLD ME 04104-7138</u> Telephone: <u>838-9395</u> Who should we contact when the permit is ready: <u>STUART CARTER</u> Telephone: <u>838-9395</u> Mailing address: <u>P.O. BOX 11138 PTLD ME 04104-7138</u>		

**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 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: [Signature] Date: 4/6/09

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

**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.**

  X   **Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers**

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

  X   **Final inspection required at completion of work.**

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.**

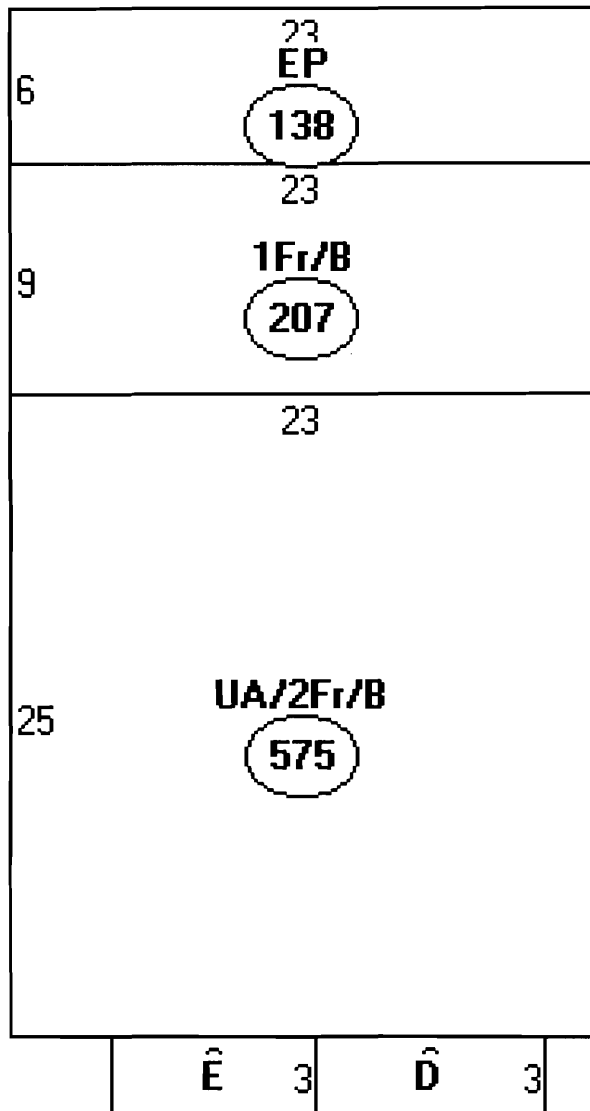
**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

  *X David Gulia*    
Signature of Applicant/Designee

  4.24.09    
Date

  *Jpn*    
Signature of Inspections Official

  4.24.09    
Date



Descriptor/Area

A: UA/2Fr/B  
575 sqft

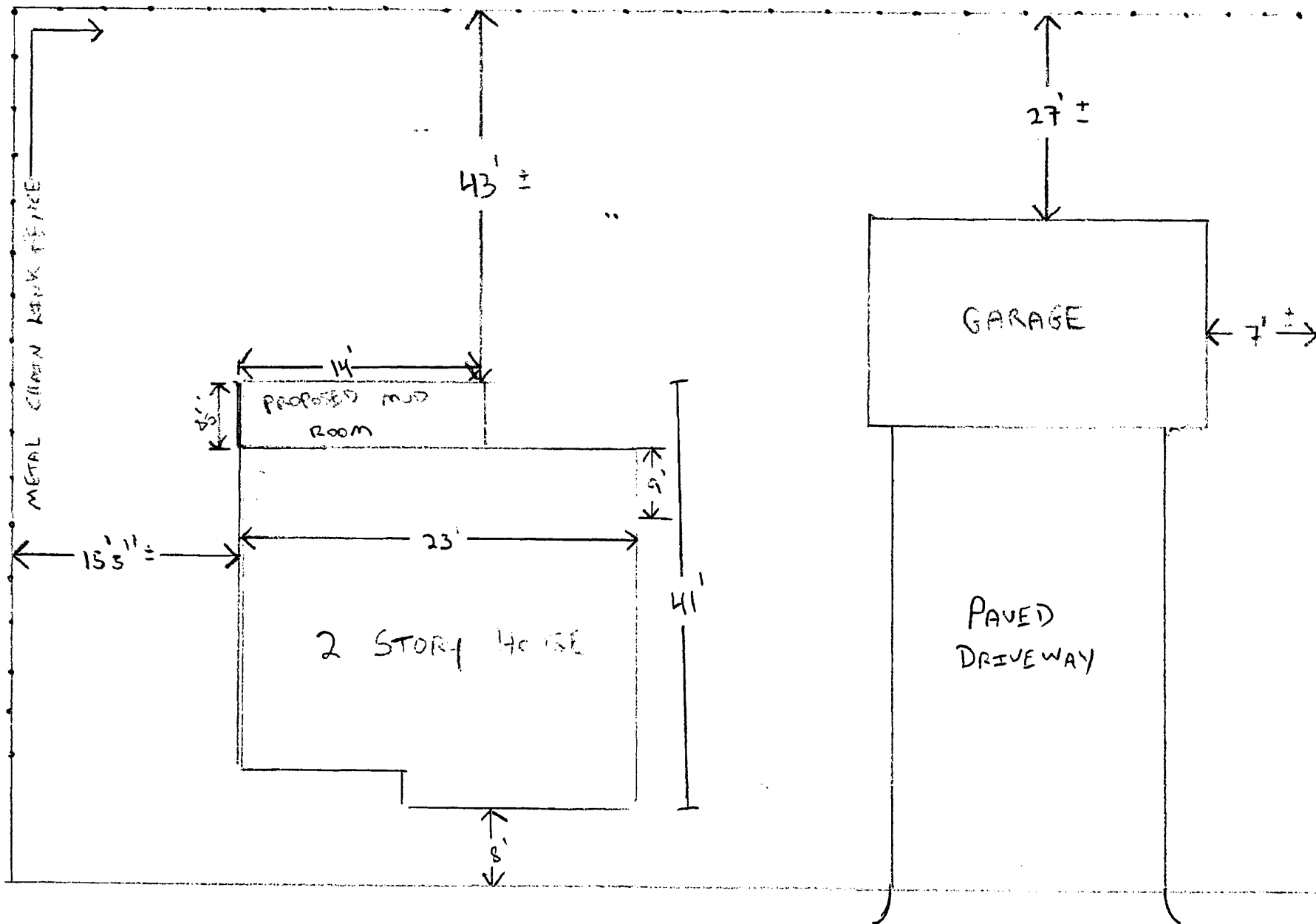
B: 1Fr/B  
207 sqft

C: EP  
138 sqft

D: OP  
27 sqft

E: FBAY  
24 sqft

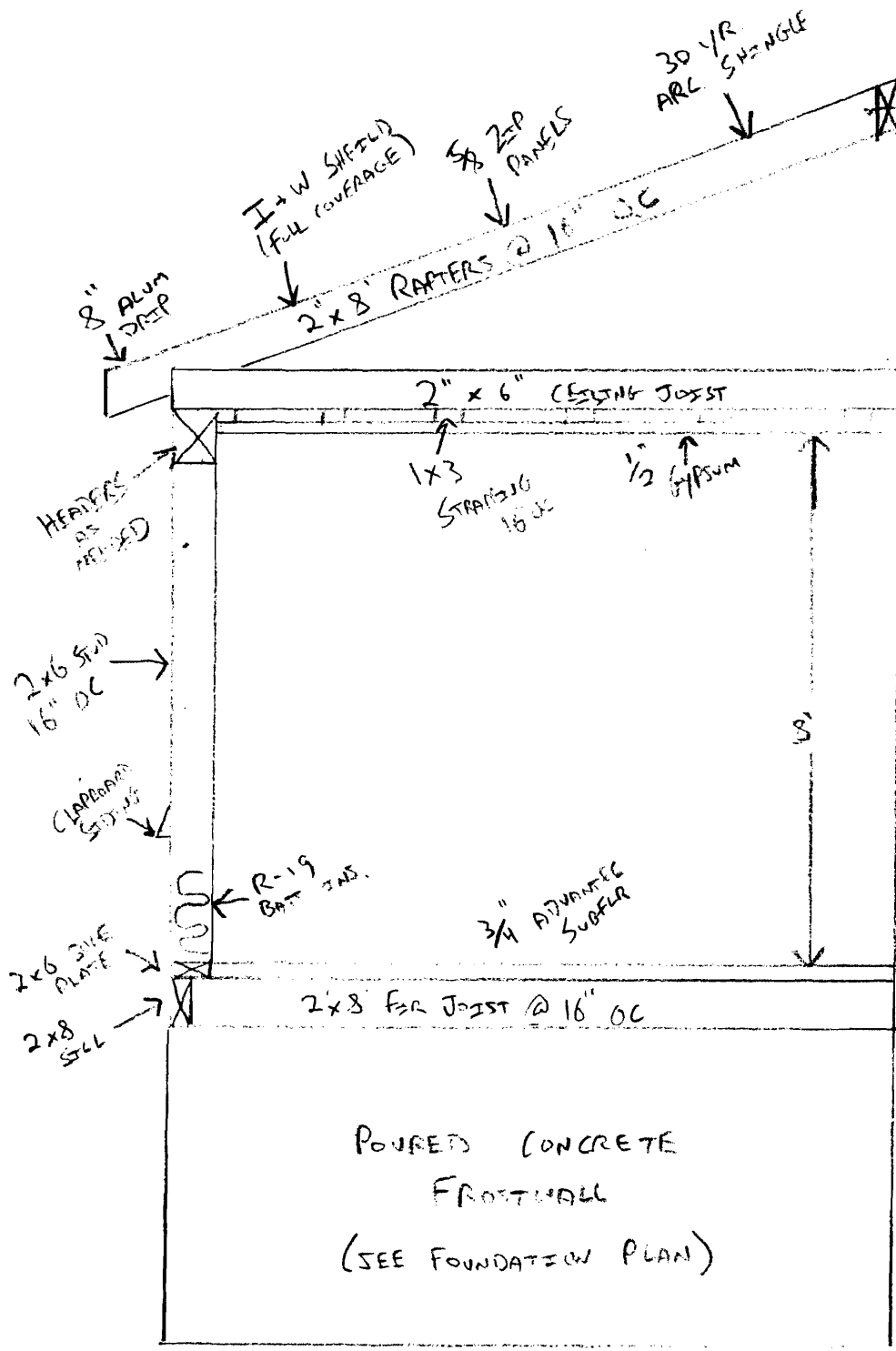
PLU 1 PLAN - ALBA ST



ALBA ST.



34 ALBA ST  
CROSS SECTION  
MVD ROOM



lay or bolt into  
 EXISTING BK'G  
 STRUCTURE

see permit-09-0301  
 for more  
 details  
 Q

POURED CONCRETE  
 FROSTWALL  
 (SEE FOUNDATION PLAN)

EXISTING  
 FOUNDATION

TYPICAL 2x8 FLOOR SYSTEM (S/S STEPS)  
ADVANCED T+E SUBFLOOR METAL BRIDGING

2x10' Box GULL

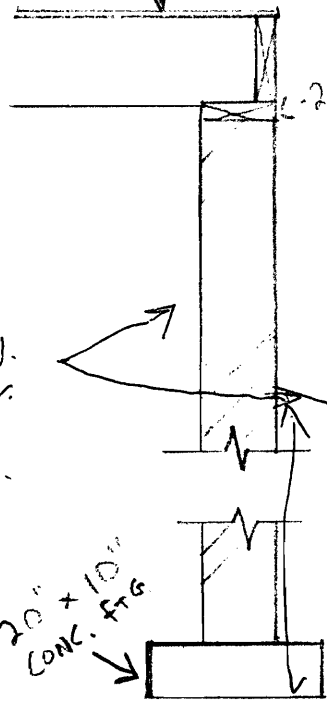
2x6 FT SILL - ANCHORS BOLTS 6' MIN.

8" CONCRETE WALL FORM TIE (LUGGED) w/ EMENT

MIN. 98"

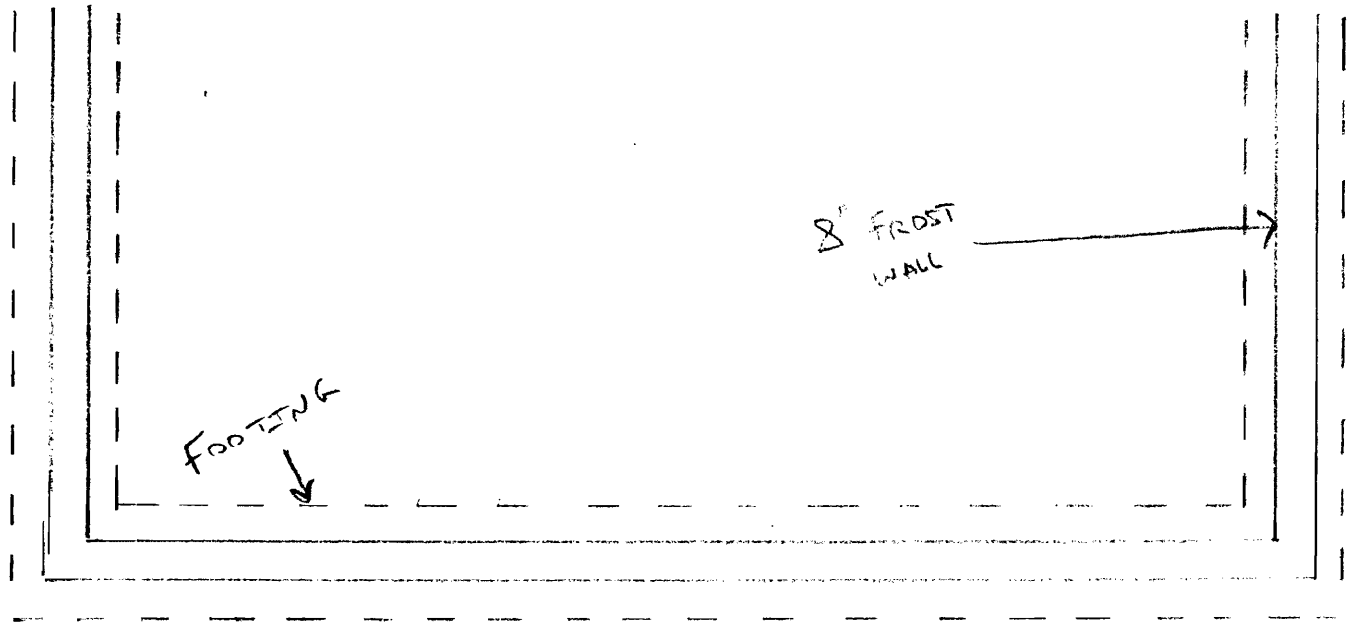
SLOPE GRADE AWAY

20" x 10" CONC. FTG



TYPICAL FROST WALL SECTION - MUD ROOM

34 ALBA ST.



14'



# CITY OF PORTLAND, MAINE

Department of Building Inspections

## Original Receipt

\_\_\_\_\_ April 11 20 09 \_\_\_\_\_

Received from A.S. Carter Construction

Location of Work 34 ALON ST.

Cost of Construction \$ 19,500.00 Building Fee: 220

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

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

**Total:** \_\_\_\_\_

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

Other Site Work Order 100.00

CBL: 133-C-018

Check #: 4590 **Total Collected \$** 220.00

**No work is to be started until permit issued.**

If permit is Withdrawn or Denied, amount of the Refund is based on \$20.00 or 20% of the fee, (whichever is greater)

In order to receive a refund, you MUST present the Original Receipt.

Taken by: Carter

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