Form # P 04	DISPLAY	THIS	CARD	ON	PRINCIP	PAL F	RONT	AGE OF	WORK		
Please Read Application And Notes, If Any, Attached		С	BU		ERM			D Permit.Numb	er::090304		
This is to certify	thatMCKE	NNEY PATF	LICK G &	CILI	AI	EY/R S			0000		
has permission f		ment to 09-02	222, to incl	Tot				Electrical, Plum	bing. Additio	n of Ne	₩
of the prov	hat the pers risions of th uction, mair ment.	e Statute	s of Ma	e ai	nd of the		nces of	the City of	Portland	regul	ating
1 1 1 2	blic Works for s nature of work ation.		Not give befo lath HOI	this or o	ritte bui <u>ng or p</u>	si procu nerec sed-in.	urec of is	A certificate procured by ing or part the	owner before	e this b	
	REQUIRED APPR										
-								Δ.			
							1	11 1 11		í	
							- 10 V	4 140	J	der co	
Other	Department Name						N	Director - Building &	Inspection Services	<u>1: C.4</u>	
		F	PENALT	Y FOF	REMOVI		SCARD			ę. t	

Cit	y of Portland, Maine	- Building or Use	Permit Application	on Pe	ermit No:	Issue Date:	CBL:	
	Congress Street, 04101	-			09-0304	1/24/09	133 C018001	
Location of Construction: Owner Name:				Own	er Address:		Phone:	
34 ALBA ST MCKENNEY			PATRICK G & CEC	I 34 A	ALBA ST		207-773-2511	
Busi	ness Name:	Contractor Name			ractor Address:		Phone	
		R S Carter Co	nstruction		Box 11138 Po	rtland	2078389395	
Less	ee/Buyer's Name	Phone:			Permit Type:		Zone:	
					lditions - Dwel	lings		
Past	Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:	
Sin	gle Family Home		Single Family Home - Amendment			\$250.00 \$23,000.00		
			include Total Interior all Walls, Electrical,	FIRI	E DEPT:		PECTION:	
			dition of New Suppor	t l] Denied Use	Group: R-3 Type: 578 TR(-2003 nature: 4/24/29 CC	
			Beams, Addition of Deck of				-TPC-2003	
		Mudroom						
· ·	osed Project Description: endment to 09-0222, to inc	luda Total Interior Der	nalition of all Walls	0.5	- 4	S i	nature: 4/24/09 CC	
	ctrical, Plumbing. Addition			-	ature:			
	Audroom.	or rie a support Deal	is, Addition of Deck		PEDESTRIAN ACTIVITIES DISTRICT (P.A.Į		•	
			Action: Approved Ap		ed Approved	oved w/Conditions Denied		
				Sign	Signature: Date:		Date:	
Permit Taken By: Date Applied For:				Zoning	Approval			
lm	d	04/10/2009						
1.	This permit application do		Special Zone or Rev	lews	ews Zoning Appeal		Historic Preservation	
	Applicant(s) from meeting Federal Rules.	g applicable State and	Shoreland				Not in District or Landma	
2. Building permits do not include plumbing,		clude plumbing,	Wetland		Miscellaneous		Does Not Require Review	
septic or electrical work.		Flood Zone Condition		nal Lico	Requires Review			
3.	Building permits are void within six (6) months of th				Conditional Use		requires Review	
	False information may inv		Subdivision		Interpretation		Approved	
permit and stop all work								
		Site Plan		Approved		Approved w/Conditions		
		ALL OVER	- Maj Minor Mi	M 🗌	Denied			
	P	ERMIT ISSUED	Date: 1240	CSIH	Date:		Date: CSH.	
		APR 2 4 2009						
		FILL F 1000						
		A 915						
	C	YOFMATIM						
		and a second	CEDTIFICAT	ION				

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

owny to pour fostings man set bouchs owny MAN 04/29/09 05/01/05 Foundation works a klow Ballfill Dieroy WA

6/24/09- checked promins/ plumbers) elactric-all OK to close in'- Jum 9/4/05- checked for final all concl es Complete OK to Close and,

Jung

City of Portlan	d, Maine - Bui	ilding or Use Permi	t	Permit No:	Date Applied For:	CBL:	
389 Congress Str	eet, 04101 Tel:	(207) 874-8703, Fax: ((207) 874-871	6 09-0279	04/07/2009	133 C018001	
Location of Construct	ion:	Owner Name:		Owner Address:		Phone:	
34 ALBA ST		MCKENNEY PATRI	CK G & CECI	34 ALBA ST		207-749-3768	
Business Name:		Contractor Name:		Contractor Address:		Phone	
		R. S. Carter Construct	ion	PO Box 11138 Por	rtland	(207) 874-0000	
Lessee/Buyer's Name		Phone:		Permit Type:			
				Additions - Dwell	ings		
Proposed Use:			Propos	ed Project Description:			
New Rear Kitcher		n 8'x14' Mud Room off o	f the Addi	tion of an 8 x 14' Mu	d Room off of the No	ew Rear Kitchen Way	
Dept: Zoning Note:	Status:	Approved with Condition	ns Reviewe	: Chris Hanson	Approval D	ate: 04/24/2009 Ok to Issue: 🗹	
 As discussed during the review process, the property must be clearly identified prior to pouring concrete and compliance with the required setbacks must be established. Due to the proximity of the setbacks of the proposed addition, it may be required to be located by a surveyor. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and 							
2) This property approval.	shan remain a sing	he failing dwenning. Any	change of use s	ian require a separar	te permit application		
3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.							
Dept: Building Note:	Status:	Approved with Condition	ns Reviewe	: Chris Hanson	Approval D	ate: 04/24/2009 Ok to Issue: 🗹	
1) There must be level	a 2" clearance ma	intained between the chin	mney and any c	ombustible material,	with draft stopping	per code at each	
 Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level. 							
 Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans. 							
4) Frost protection must be installed per the enclosed detail as discussed w/owner/contractor.							
5) 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.							
	6) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.						

CHARTER CONTRACTOR

General Building Permit Application

5' 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: 31 ALBA ST. PTD ME Total Square Footage of Proposed Structure/Area Square Footage of Lot Number of Stories Tax Assessor's Chart, Block & Lot Applicant 'must be owner, Lessee or Buyer' Telephone: Chart# Block# Lot# Address Telephone: 133 C IS Address MABEL ST. FTD City, State & Zip D MABEL ST. FT3-2511 Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Name Address C of O Fee: \$			
Total Square Footage of Proposed Structure/Area Square Footage of Lot Number of Stories Tax Assessor's Chart, Block & Lot Applicant "must be owner, Lessee or Buyer" Telephone: Chart# Block# Lot# Address Telephone: 133 C Is Owner (if different from Applicant) PTD , ME O'W03 Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Number of Residential Units G of O Fee: \$	Location/Address of Construction: 31	ALBA ST. PTLD	ME
Chart# Block# Lot# Name DAVED GALEN/ 133 C IS Address D0 MABEL ST. 773-2511 Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Work: \$	Total Square Footage of Proposed Structure/A 207 Sci FT	irea Square Footage of Lot Ô, 193 A	Number of Stories
Name Name PAGES GALTN Address D MABEC ST. PA3-2511 Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Name Name Work: \$		Applicant *must be owner, Lessee or H	Buyer [*] Telephone:
133 C 1.5 City, State & Zip PTD MA BEC ST City, State & Zip Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Name Address C of O Fee: \$	Chart# Block# Lot#		772-251
City, State & Zip \mathcal{FD} , \mathcal{ME} 04/03 Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Name Address C of O Fee: \$	133 18		
Lessee/DBA (If Applicable) Owner (if different from Applicant) Cost Of Name Address C of O Fee: \$		City, State & Zip PTW, ME O	4/03
Name Address C of O Fee: \$	Lessee/DBA (If Applicable)		Cost Of
City, State & Zip Total Fee: \$		Name	Work: \$
Current legal use (i.e. single family)		Address	C of O Fee: \$
Current legal use (i.e. single family)		City, State & Zip	
If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? If yes, please name Project description: If property part of a subdivision? Project description: If property part of a subdivision? If yes, please name Project description: If property part of a subdivision? If yes, please name Project description: If property part of a subdivision? If yes, please name Project description: If property part of a subdivision? If yes, please name If yes, please name Project description: If property part of a subdivision? If yes, please name If yes, please name Project description: If property part of a subdivision? If yes, please name If yes, please name Project description: If property part of a subdivision? If yes, please name If yes, please name If yes, please name Project description: If property part of a subdivision? If yes, please name			Total Fee: \$
Is property part of a subdivision? If yes, please name Project description: If yes, please name Contractor's name: AMENDMENT-09-0222 Address:	If vacant, what was the previous use?		
Project description: LAMENDMENT-09-0222 Contractor's name: Address: City, State & Zip Telephone: Who should we contact when the permit is ready: Telephone:	Is property part of a subdivision?	If yes, please name	
Address:	Project description: + AMENDMENT	-09-0222	
City, State & Zip Telephone: Who should we contact when the permit is ready: Telephone:	Contractor's name:		
Who should we contact when the permit is ready: Telephone:	Address:		
- · · · -	City, State & Zip		Telephone:
Mailing address:	Who should we contact when the permit is ready:		Telephone:
	Mailing address:		

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 <u>www.portlandmaine.gov</u>, 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:

Date:

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

Applicant: R.S Carter

Date: 4/22/09 C-B-L: 132-6-018

Address: 34 Alba St

CHECK-LIST AGAINST ZONING ORDINANCE

Date - 4/22/09 Zone Location - R-5 Interior or corner lot -Proposed Use/Work -Servage Disposal -Lot Street Frontage -Front Yard - 25 - 8 to existing. Rear Yard - 25 - 43 +- Jhewn. Side Yard - 21/2 Story -16 - 15-5 Shown Projections -Width of Lot - 100 - 89 Shown Height -Lot Area -30% Lot Coverage/ Impervious Surface -Area per Family -Off-street Parking -Loading Bays -Site Plan -Shoreland Zoning/ Stream Protection -

Flood Plains -

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 <u>DO</u> 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.

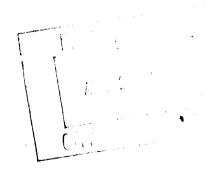
CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

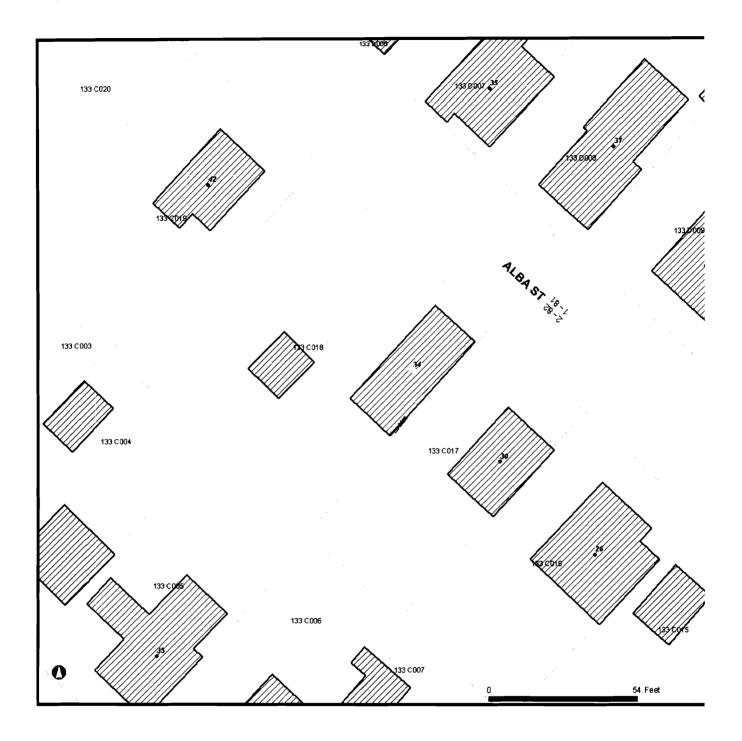
Signature of Applicant/Designee

Signature of Inspections Official

Date

Date







34 ALBA ST. PARTIAL SIDE



34 ALBA ST.

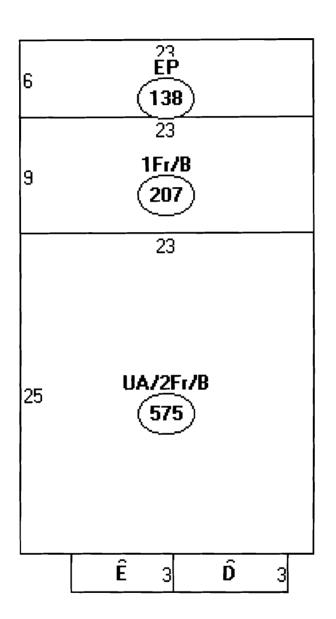


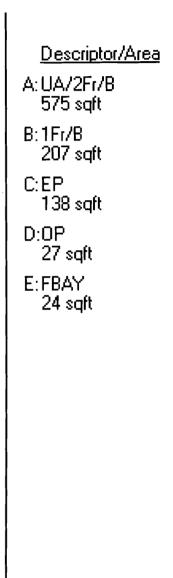


34 ALBA ST.

REAR







R.S. CARTER CONSTRUCTIO

Box 11138, Portland ME 04104-7138

34 Alba St. other contract items.

1) removal of plaster and lathe, and existing plumbing and knob and tube. Including all disposal. \$4,200.00

2) rewiring home. (this cost does not include wiring both additions:).

3) Install ½ sheetrock to all walls and 5/8 firerock to all ceilings, finished to paint ready.

4) Cost of deck off of mudroom (see Drawing enclosed)

5) Sistering of rafters in attic. Currently 2"x4" rafters 24"OC, we will sister each with a 2"x6" to stabilize. New knee walls to be built underneath at 4'.

6) Insulate all exterior walls, floors and ceilings. Minimums: 2x6 wall: R-19 2x4 walls: R-15 (R-19) High Den.) Floors: R- 19 Ceilings: R- 38 \$3,300.00

TOTAL OF ADDITIONAL CONTRACT WORK: \$23,080.00

\$3,400.00

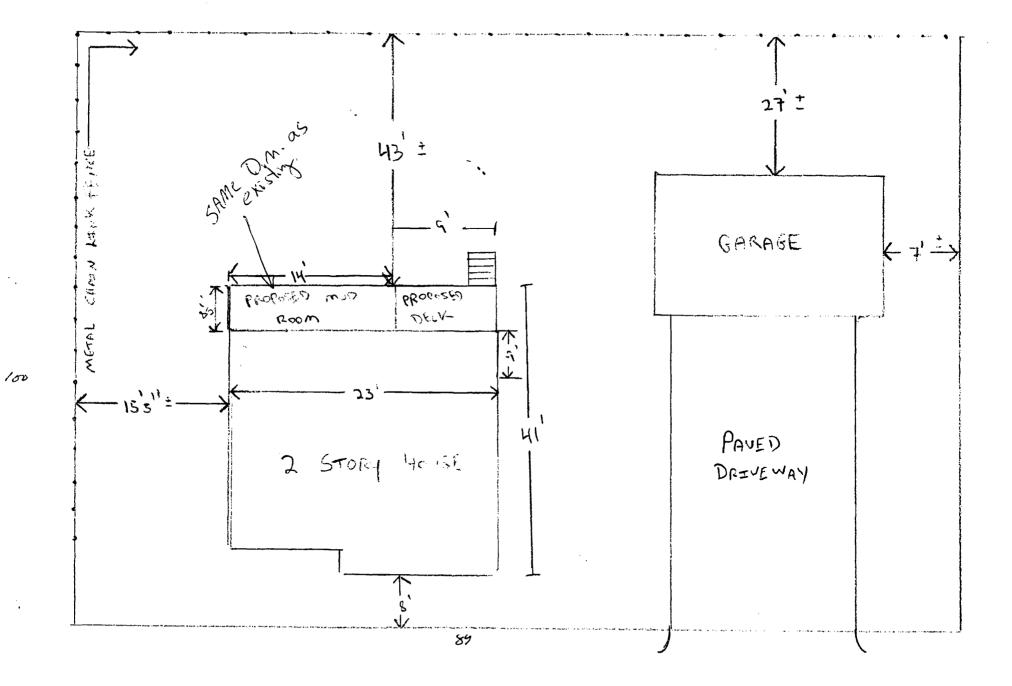
\$2,100.00

\$6,300.00

(207)838-9395

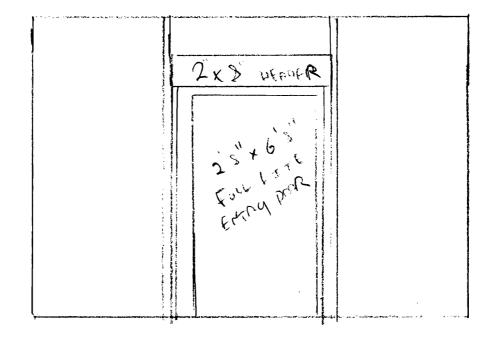
\$3,780.00

PLOT PLAN - ALBA ST

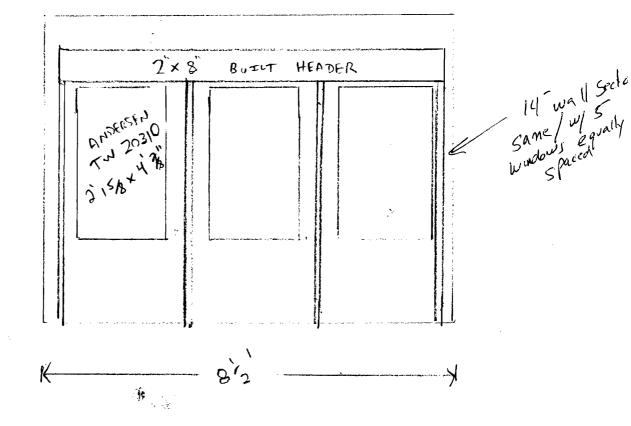


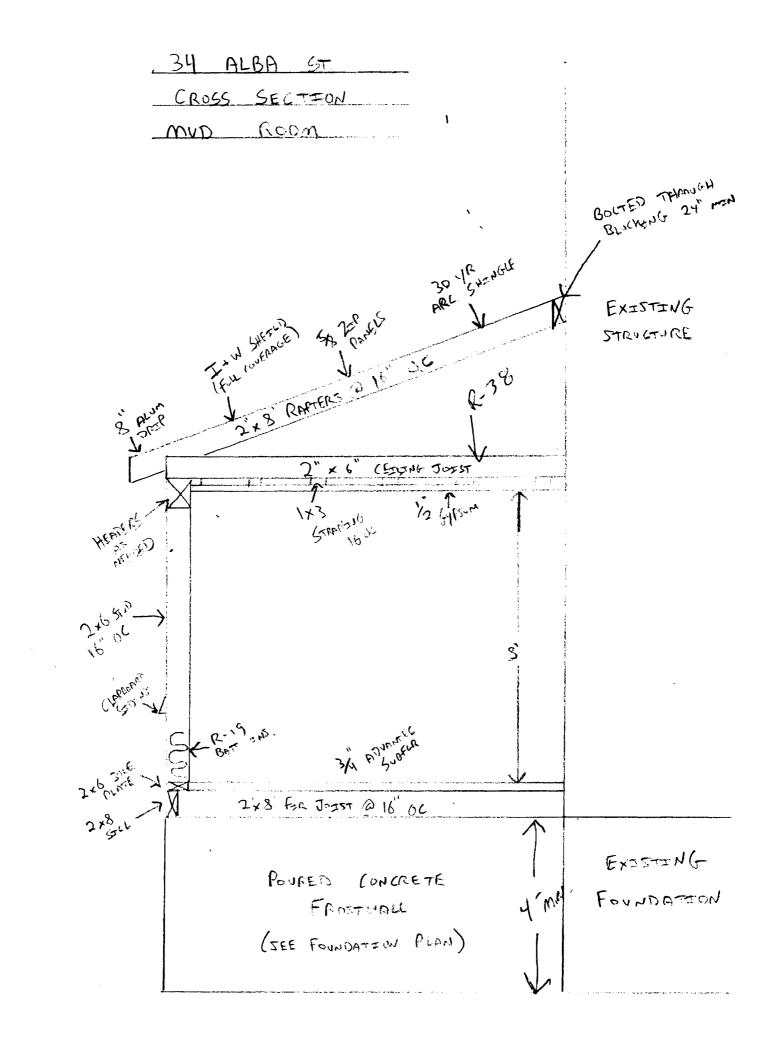
ALBA ST.

34 ALBA GT. WENDOW DOOR - MUDICOOM



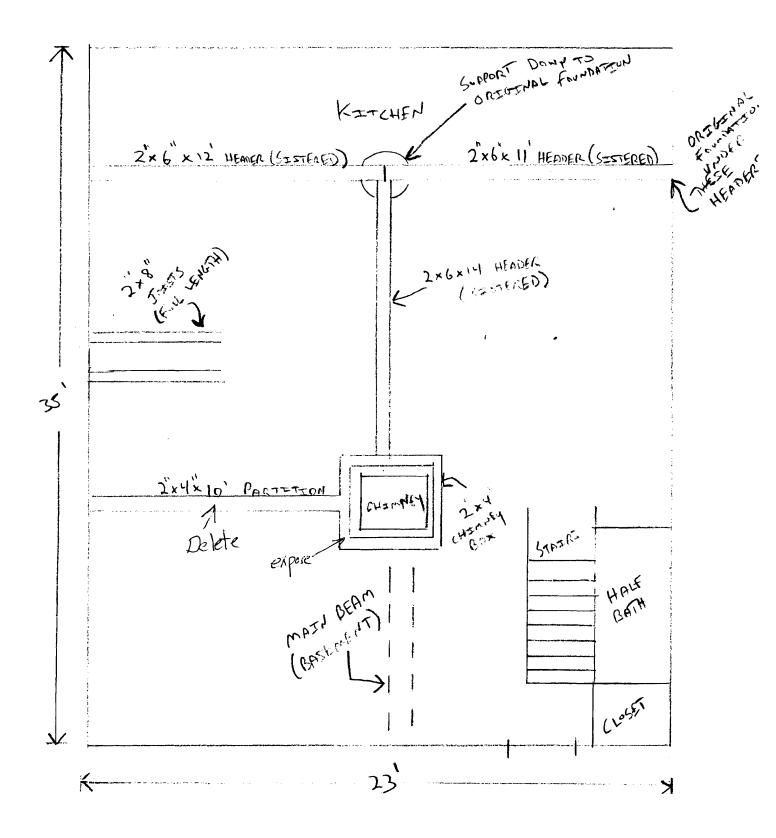
.





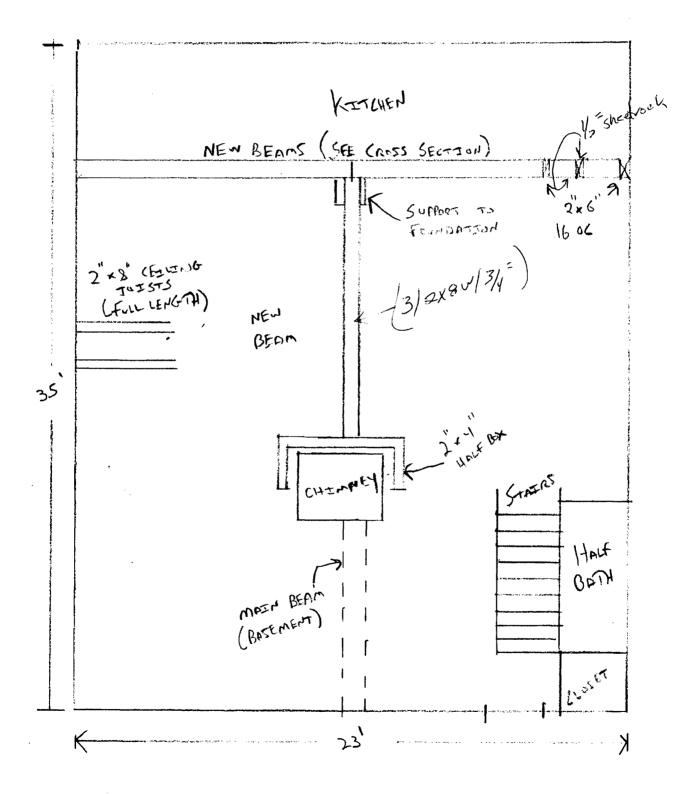
34 ALBA STREET

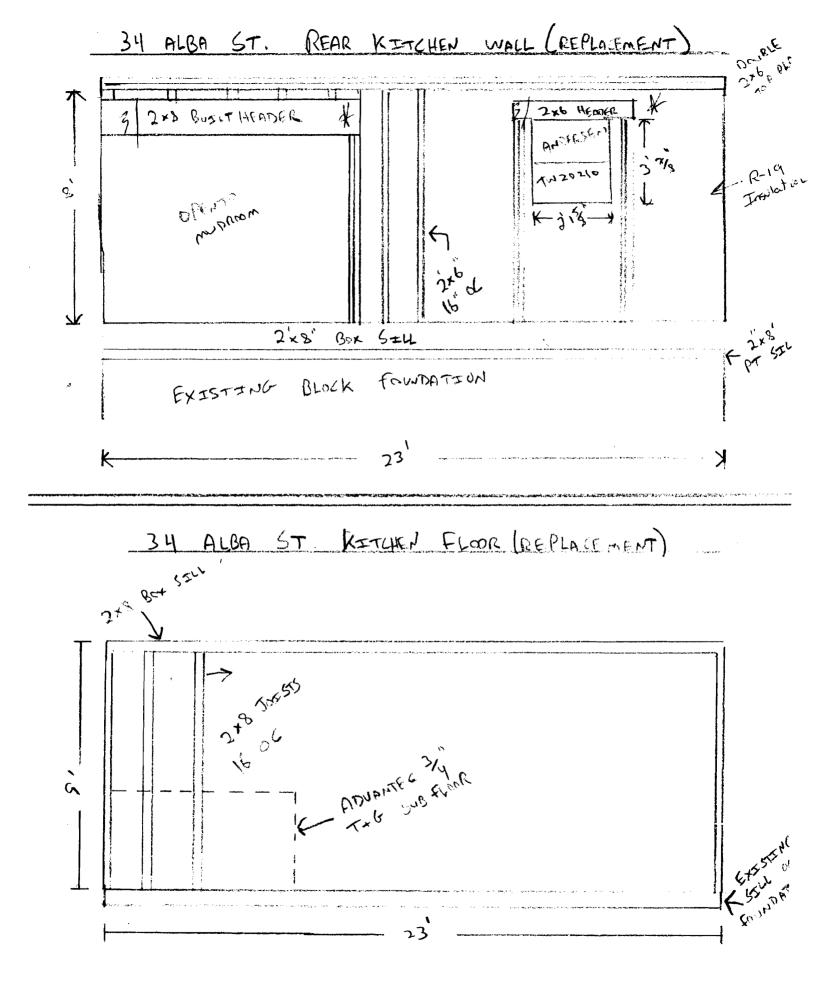
EXISTING 1ST FLOOR LAYOUT

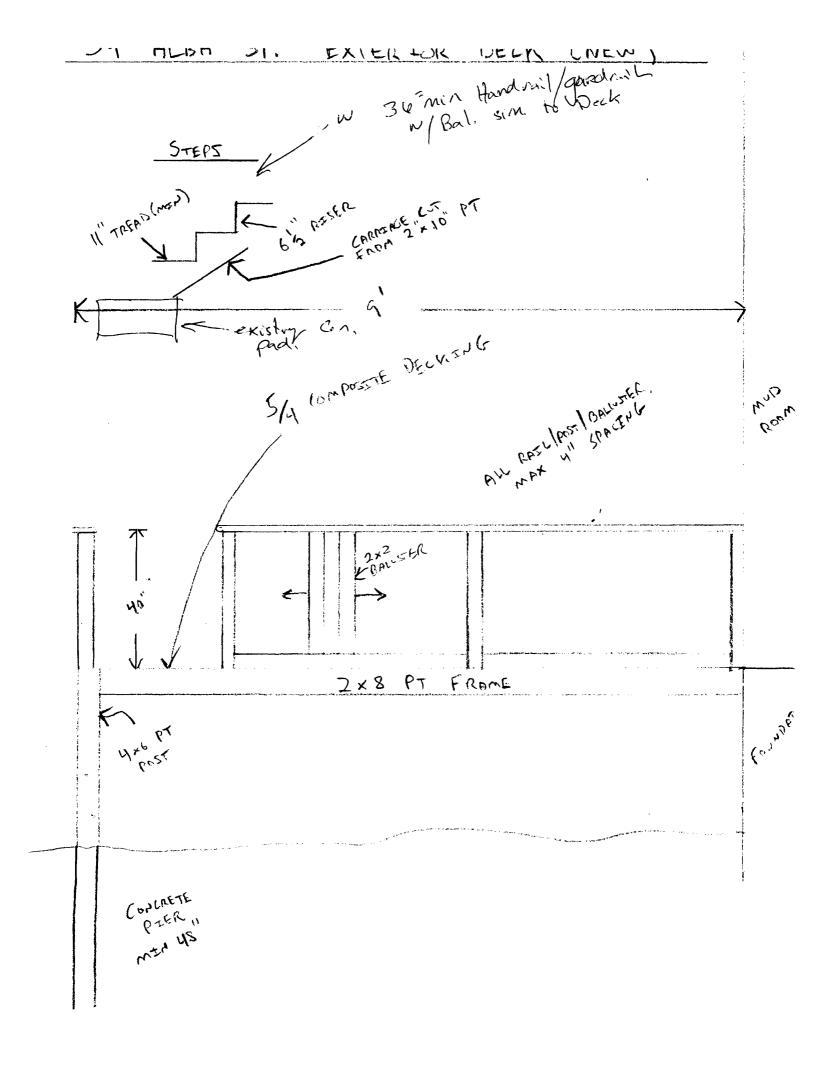


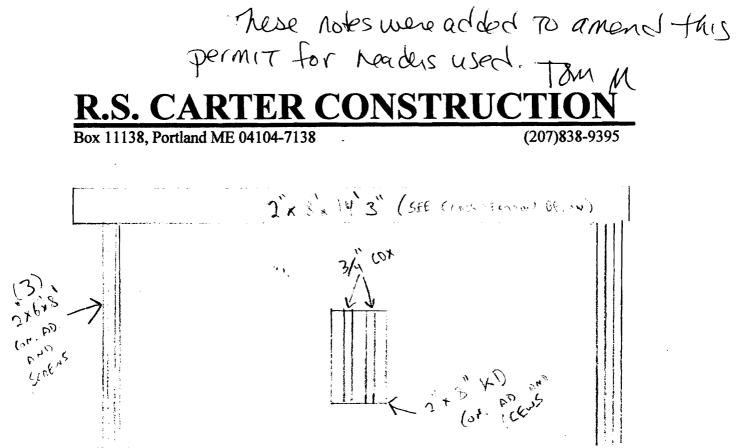
34 ALBA STREET

PROPOSED 15 FLOOR LAYOUT

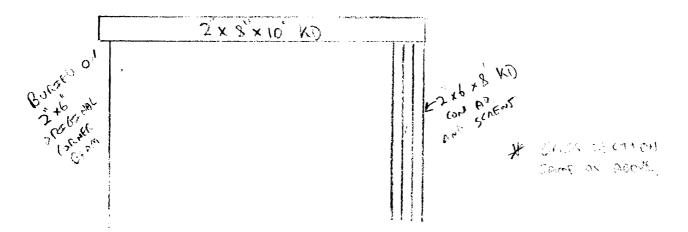




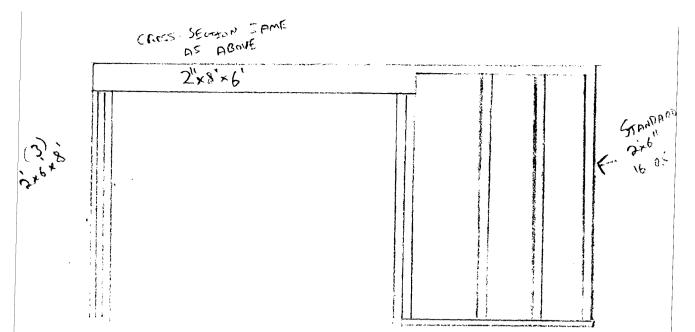




1) The above drawing is of a beam that is built to replace a beam of the same length, built of a pair of 2'x6' boards. This has caused the the floor above to sag. The beams on this floor above the support beam are not co-joined, but one piece. So the present will be jacked out and new beam installed.



2) The drawing above is of header built to replace an undersized header that carried $\frac{1}{2}$ of the original back of the house, before an addition years ago. It too was undersized, no jacking will be necessary.

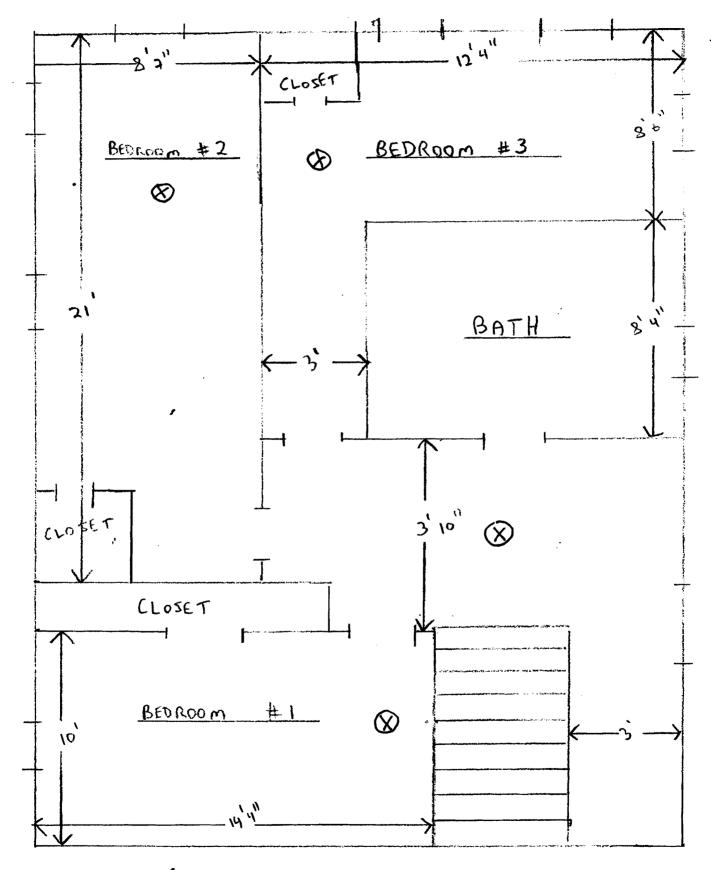


3) The above drawing represents the other half of the original rear wall of the house. This wall will be built to accommodate a new kitchen, a short header will be built to support between center support and wall.

4) We will remove the plaster and lathe in the home to accommodate replacement of all knob and tube and other ungrounded wiring. This will also give us an opportunity to install new plumbing. Design yet to be determined.

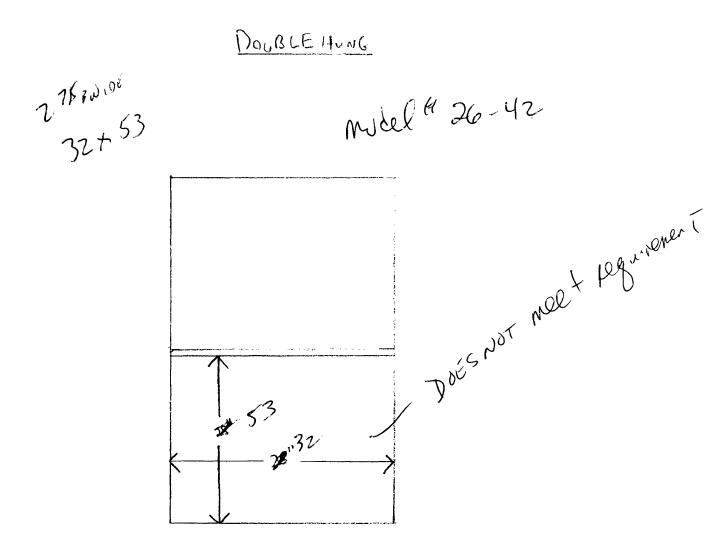
5) Since the home is balloon framed, we will install new fireblocking between the verticle elements between the first and second floors

PROPOSED 2nd FLOOR LAYOUT ALBA STREET



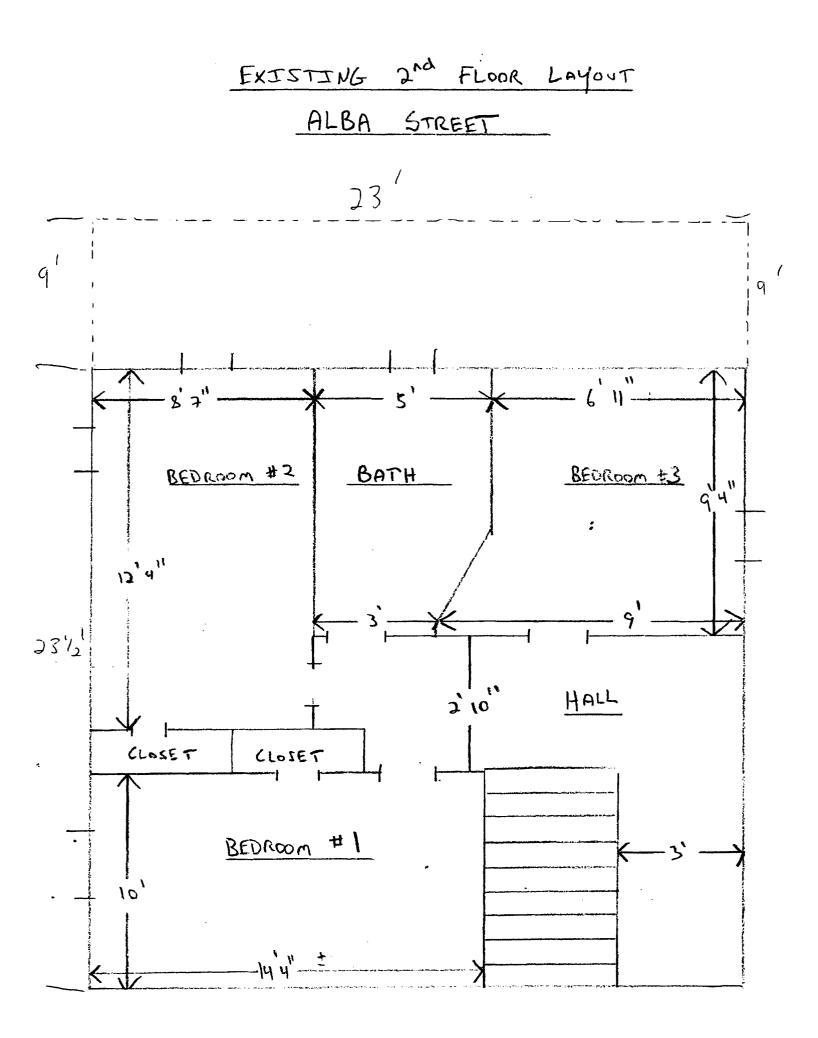
🛇 - Smoke Detectors

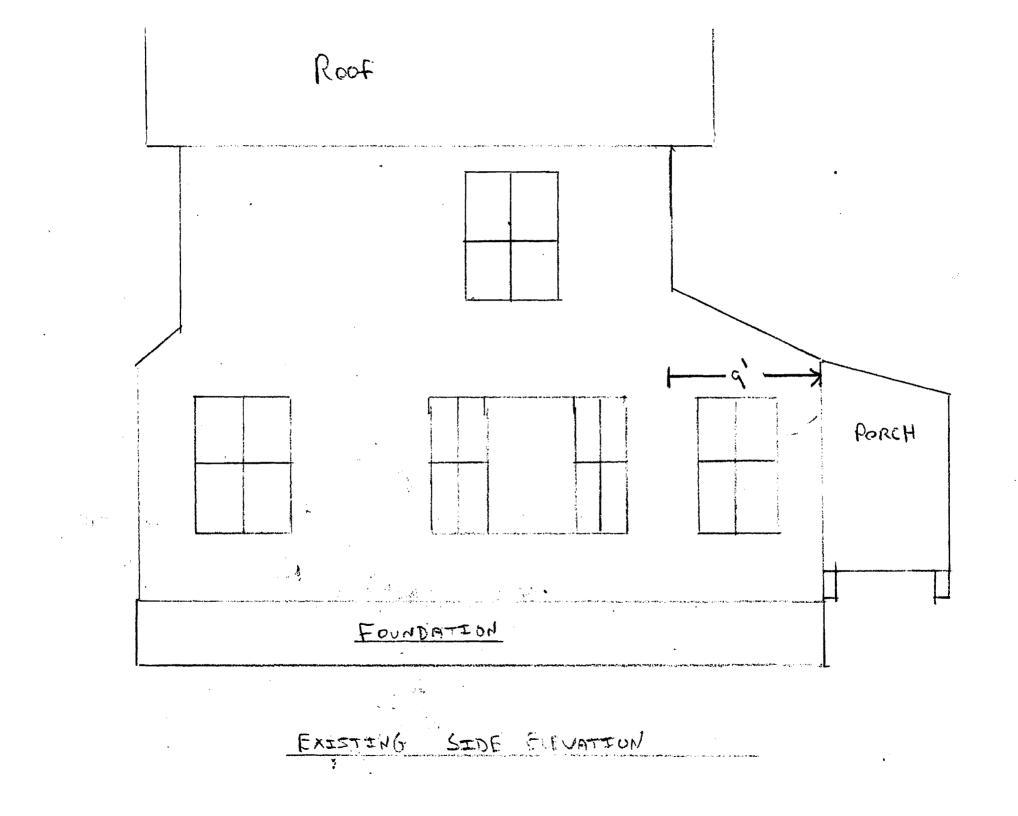
ALL NEW BEDROOM HENDOWS WELL HAVE THE DEMENSIONS BELOW

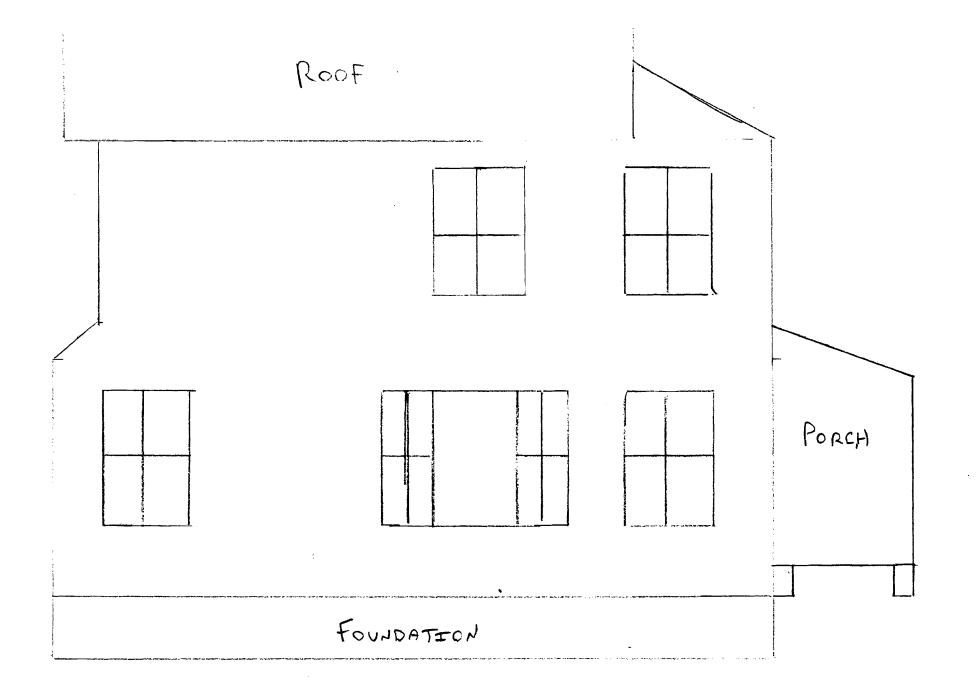


BOTTOM OF WINDOW LESS THAN 40" FROM f=NTSHED FLOOR

34 ALBA ST.







PROPOSED STDE ELEVATION



CITY OF PORTLAND, MAINE Department of Building Inspections

Original Receipt

Capito 20	07
Received from h.S. Carlos Construction	
Location of Work 34 ALBAST.	
Cost of Construction \$ Building Fee:	
Permit Fee \$ Site Fee:	
Certificate of Occupancy Fee:	
Total:	
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U	2)
Other anendment to - 09.0222	
CBL: 133.C.015	
Check #: Total Collected s_25	000
No work is to be started until permit issu	ued.

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 <u>MUST</u> present the Original Receipt.

Taken by: Don Forth

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