

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

## BUILDING INSPECTION PERMIT

Permit Number: 061786

Please Read Application And Notes, If Any, Attached

This is to certify that BIRD PATRICIA M /Aaron owners

has permission to add 1/2 bath, remodel second floor bathroom renovations

AT 19 BEDELL ST 134 D004001

provided that the person or persons who accept 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 occupied or services closed-in. 24 HOUR NOTICE 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

*Thomas M. Manley* 12/19/06  
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:<br>06-1786 | Issue Date: | CBL:<br>134 D004001 |
|-----------------------|-------------|---------------------|

|   |                                  |   |                      |
|---|----------------------------------|---|----------------------|
| Location of Construction:<br>19 BEDELL ST | Owner Name:<br>BIRD PATRICIA M   | Owner Address:<br>19 BEDELL ST                      | Phone:               |
| Business Name:                            | Contractor Name:<br>Aaron Peters | Contractor Address:<br>74 Flaggy Meadow Road Buxton | Phone:<br>2078383423 |
| Lessee/Buyer's Name                       | Phone:                           | Permit Type:<br>Additions - Dwellings               | Zone:<br>R-5         |

|  |   |  |   |                    |
|--|---|--|---|--------------------|
| Past Use:<br>Single Family Home  | Proposed Use:<br>Single Family Home - add 1/2 bath, remodel second floor bath, interior renovations | Permit Fee:<br>\$70.00   | Cost of Work:<br>\$5,000.00                           | CEO District:<br>5 |
| Proposed Project Description:<br>add 1/2 bath, remodel second floor bath, interior renovations |   | FIRE DEPT:<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied | INSPECTION:<br>Use Group: R3 Type: SB<br><br>IRC 2003 |                    |

|  |  |
|--|--|
| Signature:   | Signature: <i>[Signature]</i> 12/19/06 |
| 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:<br>Idobson | Date Applied For:<br>12/14/2006 | <b>Zoning Approval</b> |
|-----------------------------|---------------------------------|------------------------|

|   |  |  |  |
|---|--|--|--|
| <p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>3. 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..</p> | <p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland <i>to remain single family</i></p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>ok</i><br/>Date: 12/15/06</p> | <p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p> | <p><b>Historic Preservation</b></p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p><i>[Signature]</i><br/>Date:</p> |
|---|--|--|--|

**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.

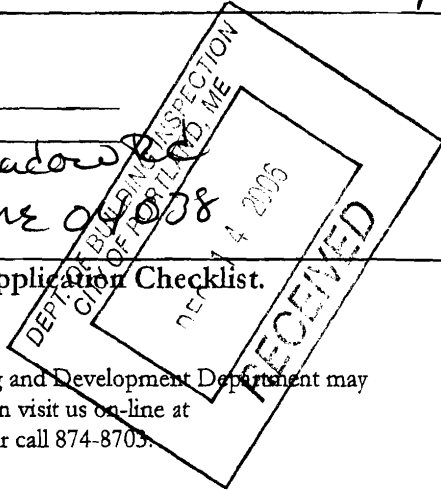
|   |         |      |       |
|---|---------|------|-------|
| SIGNATURE OF APPLICANT                      | ADDRESS | DATE | PHONE |
| RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE |         | DATE | PHONE |



# 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>18 Baddell St. Brt ME</u>   |  |   |
| Total Square Footage of Proposed Structure<br><u>1456 total</u>  |  | Square Footage of Lot   |
| Tax Assessor's Chart, Block & Lot<br>Chart#      Block#      Lot#<br><u>134      D      4</u>  | Owner:<br><u>Patty Bird</u>  | Telephone:<br><u>756 4189</u>   |
| Lessee/Buyer's Name (If Applicable)  | Applicant name, address & telephone:<br><u>Aaron Peters</u><br><u>Box 263 Gorham ME 04038</u><br><u>838-3423</u> | Cost Of Work: \$ <u><del>10,000</del> 5,000</u><br>Fee: \$ <u>70/00</u><br>C of O Fee: \$ _____ |
| Current Specific use: _____<br>If vacant, what was the previous use? _____<br>Proposed Specific use: _____   |  |   |
| Project description: <u>Remodel kitchen</u><br><u>Remodel up Bath</u><br><u>Change Front coat closet to 1/2 Bath down * This is only local change</u>  |  |   |
| Contractor's name, address & telephone:<br><u>Aaron Peters</u><br>Who should we contact when the permit is ready: <u>Aaron Peters</u><br>Mailing address: _____ Phone: <u>838-3423</u><br><u>74 Flagg Meadow Rd</u><br><u>Buxton, ME 04038</u> |  |   |



Please submit all of the information outlined in the Commercial Application 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 visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections 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 of applicant: <u>[Signature]</u> | Date: <u>Dec 19/06</u> |
|--|------------------------|

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

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

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

|                              |  |                            |
|------------------------------|--|----------------------------|
| <b>Permit No:</b><br>06-1786 | <b>Date Applied For:</b><br>12/14/2006 | <b>CBL:</b><br>134 D004001 |
|------------------------------|--|----------------------------|

|  |   |  |                                |
|--|---|--|--------------------------------|
| <b>Location of Construction:</b><br>19 BEDELL ST | <b>Owner Name:</b><br>BIRD PATRICIA M   | <b>Owner Address:</b><br>19 BEDELL ST                      | <b>Phone:</b>                  |
| <b>Business Name:</b>                            | <b>Contractor Name:</b><br>Aaron Peters | <b>Contractor Address:</b><br>74 Flaggy Meadow Road Buxton | <b>Phone</b><br>(207) 838-3423 |
| <b>Lessee/Buyer's Name</b>                       | <b>Phone:</b>                           | <b>Permit Type:</b><br>Additions - Dwellings               |                                |

|  |   |
|--|---|
| <b>Proposed Use:</b><br>Single Family Home - add 1/2 bath, remodel second floor bath, interior renovations | <b>Proposed Project Description:</b><br>add 1/2 bath, remodel second floor bath, interior renovations |
|--|---|

**Dept:** Zoning      **Status:** Approved      **Reviewer:** Marge Schmuckal      **Approval Date:** 12/15/2006  
**Note:** **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tom Markley      **Approval Date:** 12/19/2006  
**Note:** **Ok to Issue:**

- 1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.

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| <b>Lessee/Buyer's Name</b>                       | <b>Phone:</b>                           | <b>Permit Type:</b><br>Additions - Dwellings               |                                |

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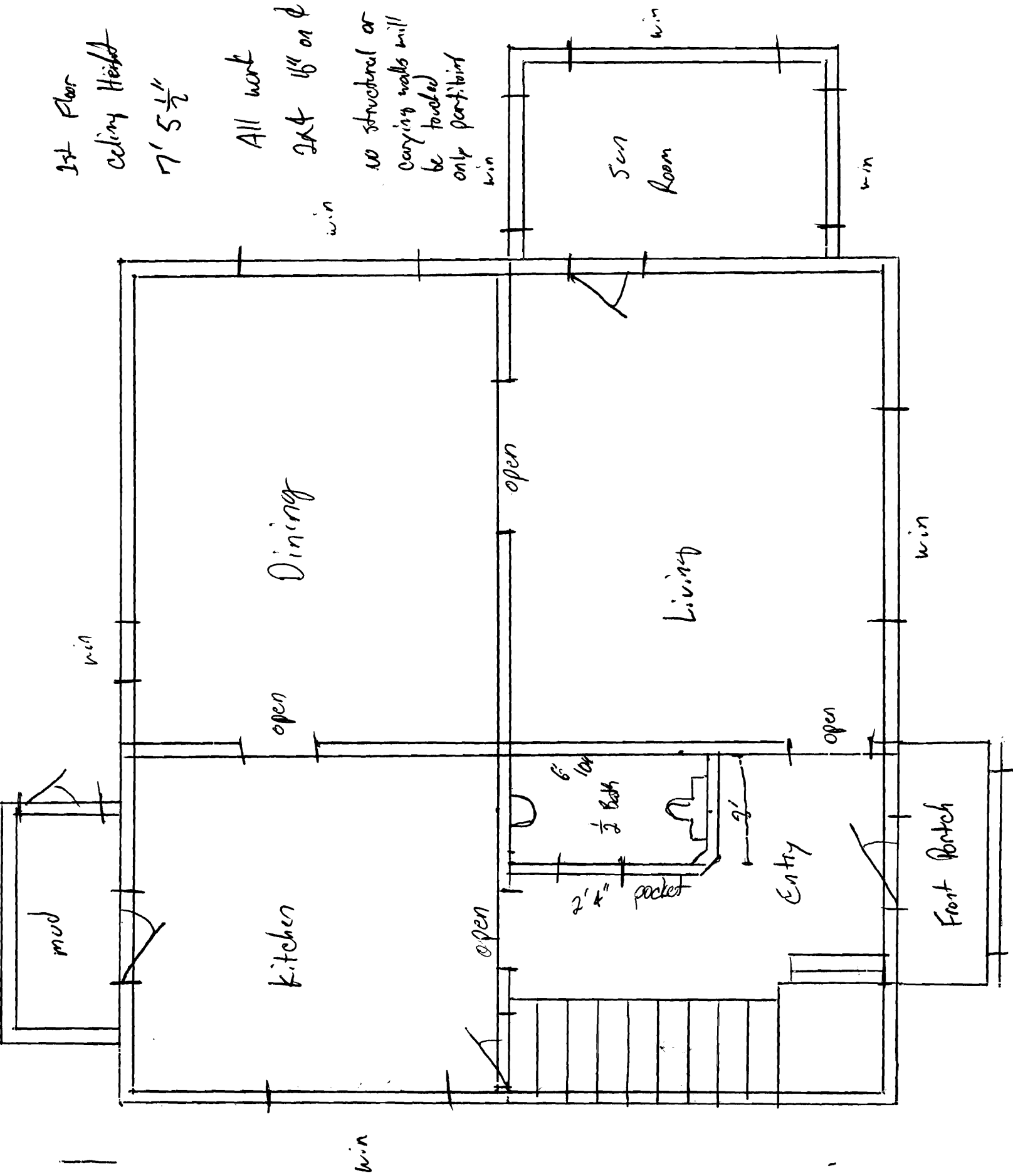
|  |                         |                                  |   |
|--|-------------------------|----------------------------------|---|
| <b>Dept:</b> Zoning  | <b>Status:</b> Approved | <b>Reviewer:</b> Marge Schmuckal | <b>Approval Date:</b> 12/15/2006                        |
| <b>Note:</b>   |                         |                                  | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| <ol style="list-style-type: none"> <li>1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.</li> <li>2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.</li> <li>3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.</li> </ol> |                         |                                  |   |

|   |   |                              |   |
|---|---|------------------------------|---|
| <b>Dept:</b> Building   | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Tom Markley | <b>Approval Date:</b> 12/19/2006                        |
| <b>Note:</b>  |   |                              | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| <ol style="list-style-type: none"> <li>1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.</li> <li>2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.</li> </ol> |   |                              |   |

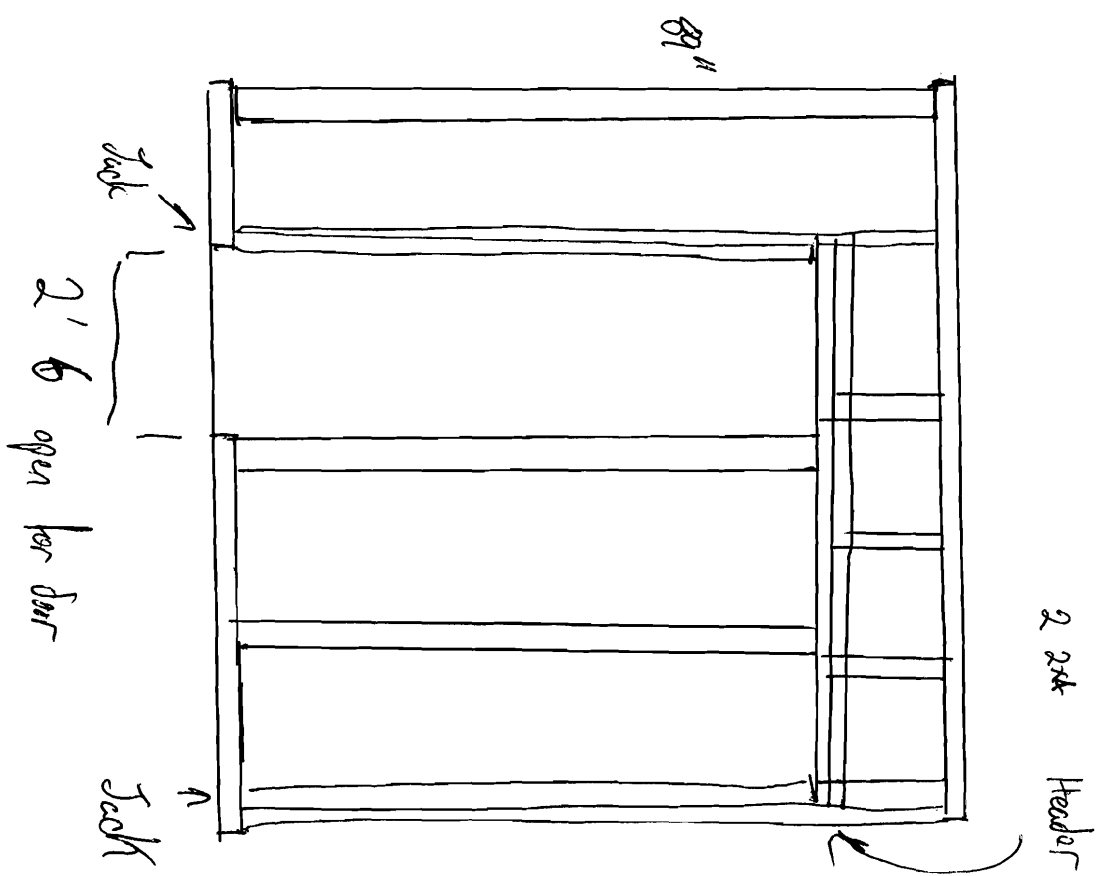
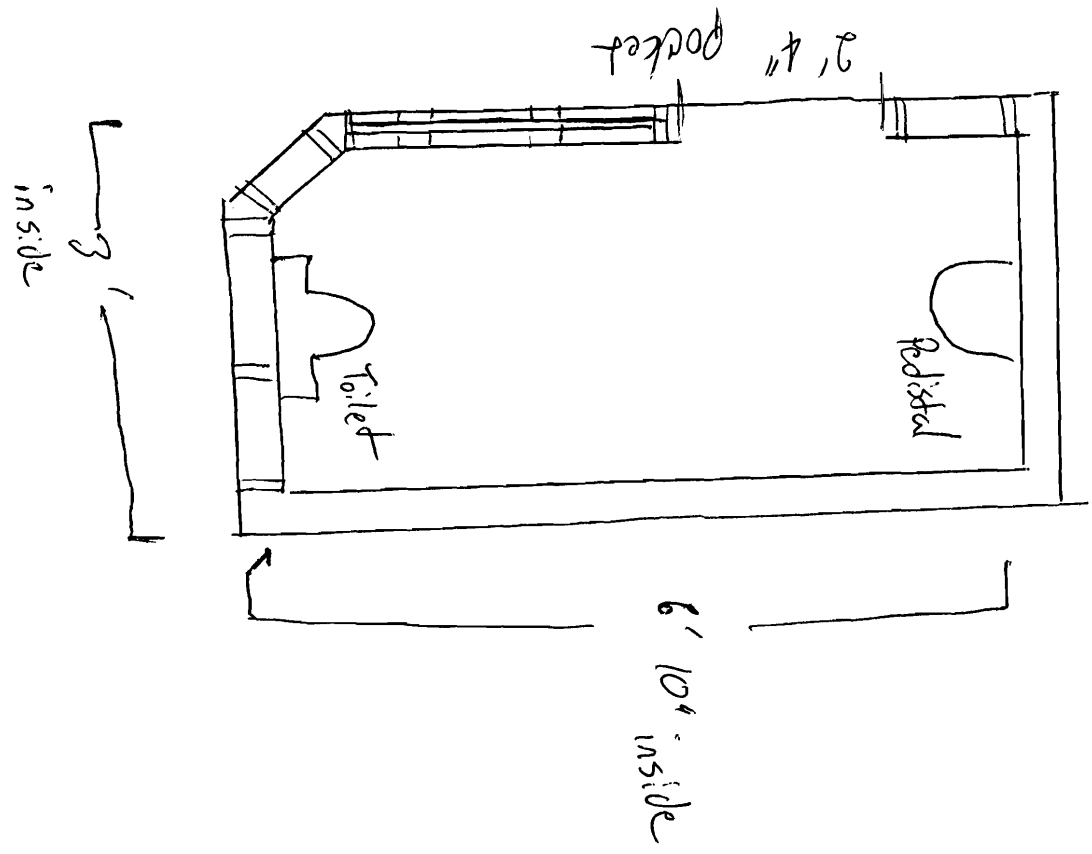
1st Floor  
ceiling Height  
7' 5 1/2"

All work  
2x4 16" on d

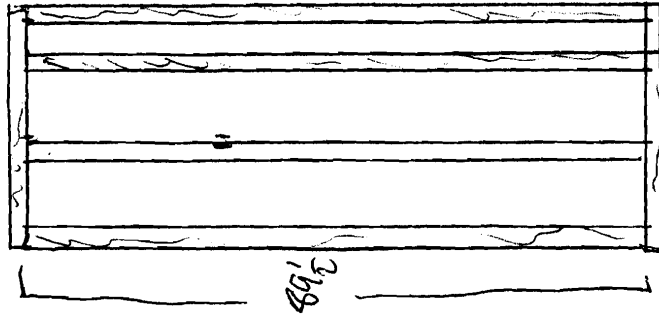
no structural or  
carrying walls will  
be touched  
only partition



Entry Bath 2x4 16" on c



2nd Floor  
Ceiling Height  
7' - 7"



2x4 16" on c  
normal 3/4 professional

