

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 02-0818 Issue Date: AUG - 1 2002 CBL: 136 C001001

Location of Construction: 27 Florence St	Owner Name: Brochu Janet A	Owner Address: 27 Florence St	Phone: -7240
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CITY OF PORTLAND

Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone:
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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	Zone: R-5
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Past Use: Two Family	Proposed Use: Two Family	Permit Fee: \$30.00	Cost of Work: \$500.00	CEO District: 3
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legal 2 family

FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	INSPECTION: Use Group: R5 Type: EB
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BOCA 99

Proposed Project Description:
Alterations to Interior Doorways.

Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gad	Date Applied For: 07/23/2002	Zoning Approval	
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- 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

Shoreland

Wetland

Flood Zone

Subdivision

Site Plan

Maj Minor MM

Date: *ok 7/25/02*

Zoning Appeal

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

Date: _____

Historic Preservation

Not in District or Landmar

Does Not Require Review

Requires Review

Approved

Approved w/Conditions

Denied

Date: *[Signature]*

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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 020818

Please Read Application And Notes, If Any, Attached

This is to certify that Brochu Janet A /Applicant

has permission to Alterations to Interior Doorways

AT 27 Florence St C 136 C001001

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 laid out or enclosed-in. **HEAR 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


Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

02-0818

All Purpose 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>27 FLORENCE ST.</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>136</u> Block# <u>C</u> Lot# <u>001</u>	Owner: <u>JANET BROCHU</u>	Telephone: <u>(207) 650-7240</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>STEVE BROCHU</u> <u>106 GAGNE ST.</u> <u>LEWISTON ME. 04240</u>	Cost Of Work: \$ <u>500.⁰⁰</u> Fee: \$ <u>30.⁰⁰</u>
Current use: <u>DWELLING 2 FAMILY</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: <u>Interior Doorways Widening</u> <u>OPENING #1 GOING FROM 30 X 78" DOOR OPENING TO: 70 X 100" OPENING</u> <u>OPENING #2 FROM 30 X 78" OPENING TO: 30 X 100" OPENING MOVED OVER 20" TO LEFT</u>		
Contractor's name, address & telephone: <u>STEVE BROCHU 106 GAGNE ST. LEWISTON, ME. 04240 (207) 576-0576</u>		
Who should we contact when the permit is ready: <u>STEVE BROCHU (207) 576-0576 *</u>		
Mailing address: <u>106 GAGNE ST. LEWISTON, ME.</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE:		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: 	Date: <u>7/24/02</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

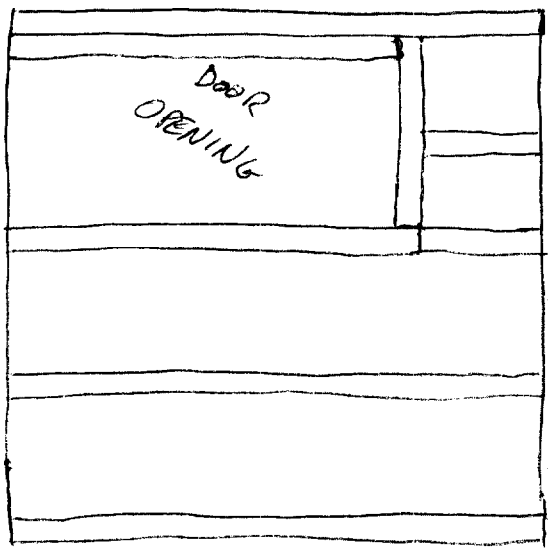
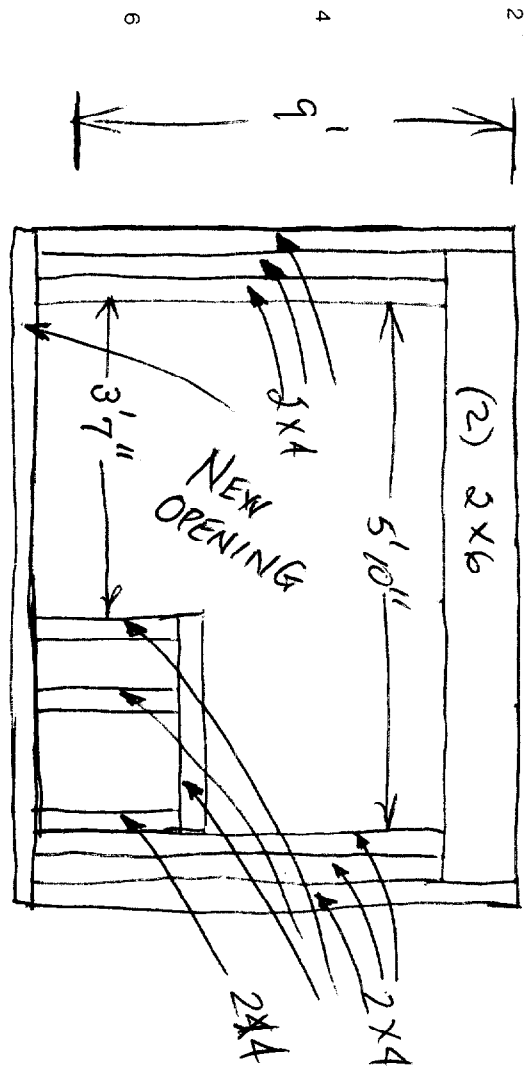
Kitchen Planning Sheet

Customer _____ Date _____
 Address _____ Phone _____
 By _____ Sheet # _____ Of _____ Sheets
 0 2 4 6 8 10 12 14 16 18 20

OPENING # 1
 WILL BE

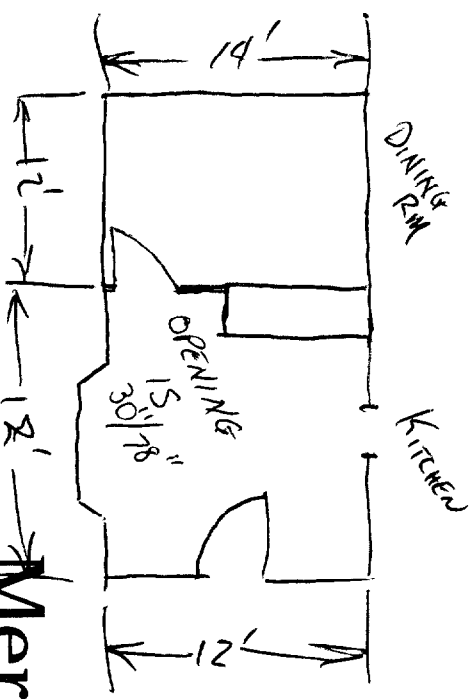
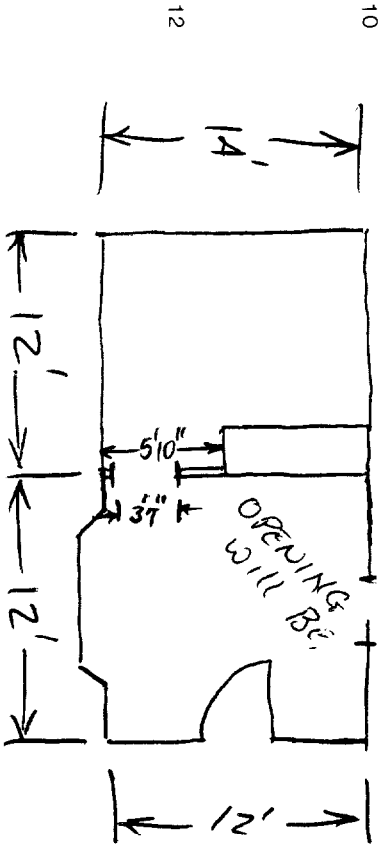
Non-bearing opening

* ALL 2x3 CONSTRUCTION
 IS
 OPENING #1



DINING RM

KITCHEN



DINING RM

KITCHEN

Merillat

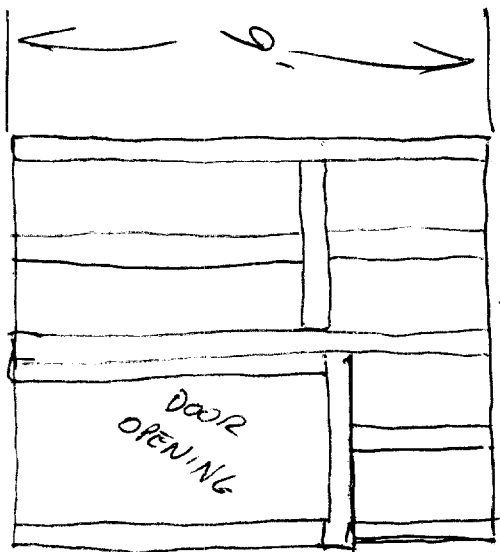
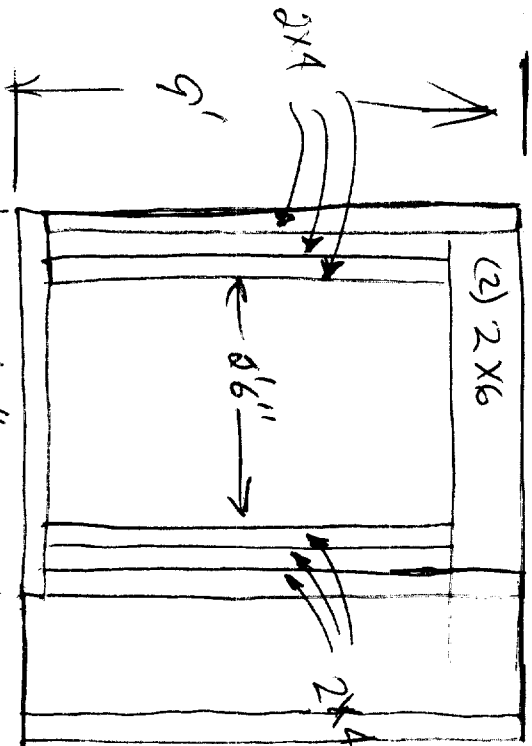
Scale: 1/2" = 1'0" (Each Square = 3")
 Note: At corners check both cabinets and appliances for clearance of doors and drawers.

Kitchen Planning Sheet

Customer _____ Date _____
 Address _____ Phone _____
 By _____ Sheet # _____ Of _____ Sheets

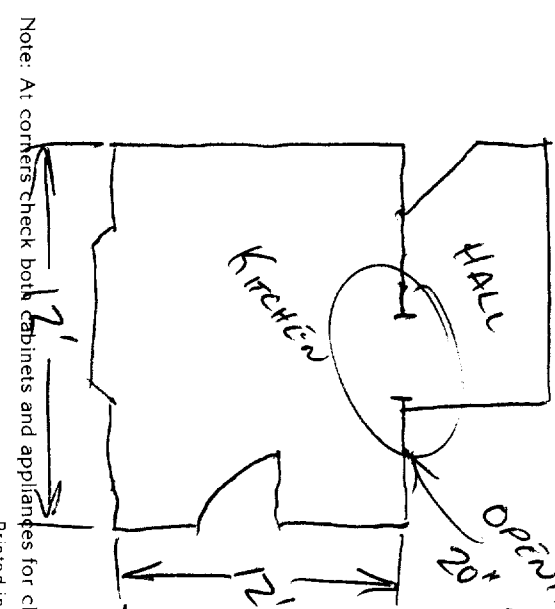
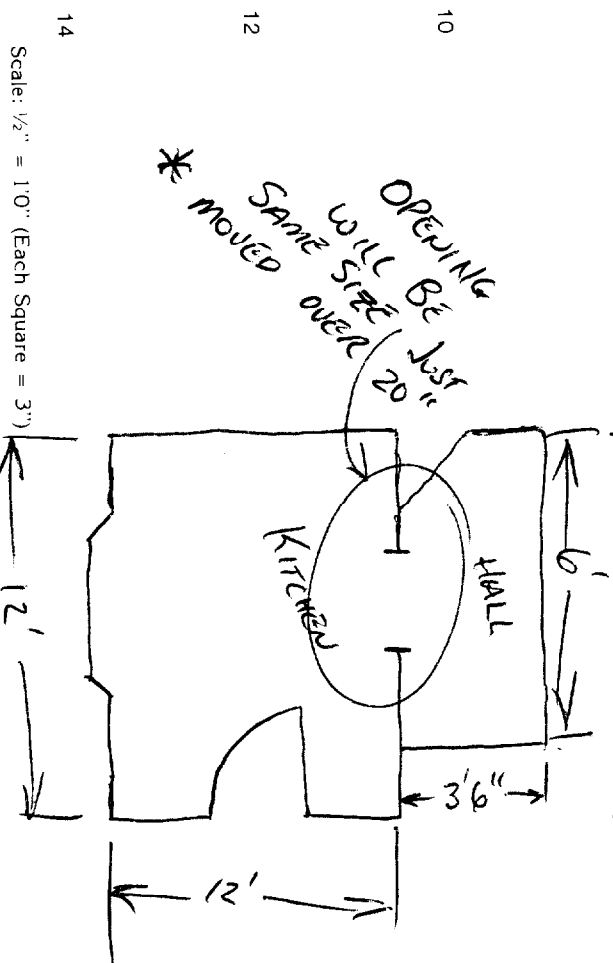
OPENING #2
 WILL BE.

OPENING #2
 IS
 * ALL 2x3 CONSTRUCTION



OPENING WILL BE JUST SAME SIZE OVER 20" * MOVED OVER

OPENING IS 20" TO RIGHT OF NEW OPENING



14

12

10

8

6

4

2

0

Scale: 1/2" = 1'0" (Each Square = 3")

Note: At corners check both cabinets and appliances for clearance of doors and drawers.

