

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-0544		Issue Date: 5/16/01	CBL: 136 C003001
Location of Construction: 56 Hartley St	Owner Name: Lynch Teresa D & Geoffrey S Smith	Owner Address: 56 Hartley St Portland, Me 04101	Phone: 207-773-0497
Business Name: n/a	Contractor Name: Smith, Geoff	Contractor Address: 56 Hartley St Portland	Phone: 2077730497
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Additions - Dwellings	Zone:
Past Use: Single Family	Proposed Use: Same: Build 2 Additions; 8' X 12' at back entrance and 4' X 5.5' Side Addition. Call Teresa at 773-0497 when ready.	Permit Fee: \$102.00	Cost of Work: \$13,000.00
Proposed Project Description: Build 8' X 12' Addition at back entrance and 4' X 5.5' Side Addition.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A-3 Type: 53 PERMIT ISSUED WITH REQUIREMENTS <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: cjh	Date Applied For: 05/16/2001	Zoning Approval	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input 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"/> <i>to remain a single family</i> Date: <i>5/24/01</i>	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: <i>[Signature]</i>

**PERMIT ISSUED
WITH REQUIREMENTS****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

5/30/01 - Precor on site w/ owners - went over all req. - told them they needed to establish the side property line w/ another pin.

6/6/01 - Footing form insp. for addition to kitchen - Setback + size OK. TM.

6/13/01 Checked foundation wall + weatherstripping OK to backfill MMS

6/27/01 Property owner ran a string and represented side line and it agrees w/ survey. This should be checked again prior to pour - it appears it will be OK. TM + DC

ELECTRICAL PERMIT

City of Portland, Me.



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 10/16/01
 Permit # 20015024
 CBL# 136 C 003

LOCATION: 56 Hart St METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER teresa arch
 TENANT _____ PHONE # _____

TOTAL EACH FEE

OUTLETS	<u>10</u>	Receptacles	<u>6</u>	Switches		Smoke Detector			.20
FIXTURES	<u>42</u>	Incandescent		Fluorescent		Strips			.20
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		Ranges		Cook Tops		Wall Ovens			2.00
		Insta-Hot		Water heaters	/	Fans			2.00
		Dryers		Disposals		Dishwasher			2.00
		Compactors		Spa		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
	X	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

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME Peter L Doris MASTER LIC. # 04821
 ADDRESS 135 Polton street LIMITED LIC. # _____
 TELEPHONE 775-0888

SIGNATURE OF CONTRACTOR

Peter L Doris

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation	POB FALLS
Street Subdivision Lot #	56 WATLEY

PROPERTY OWNERS NAME

Last: TAYLOR	First: PHILLIP
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Applicant Name:	CAROL + WALTER
Mailing Address of Owner/Applicant (If Different)	21 WATLEY FALLS RD POB FALLS ME 04460

Date Permit Issued: 2/1/06	\$ 124.00	<input type="checkbox"/> If Double Fee Charged
Local Plumbing Inspector Signature: Thomas Maskell	L.P.I. # 0744	
136 0003		

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.

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.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

- ☒ NEW PLUMBING
- ☐ RELOCATED PLUMBING

Type of Structure To Be Served:

- ☒ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☐ OTHER - SPECIFY

Plumbing To Be Installed By:

- ☒ MASTER PLUMBER
- ☐ OIL BURNERMAN
- ☐ MFG'D. HOUSING DEALER/MECHANIC
- ☐ PUBLIC UTILITY EMPLOYEE
- ☐ PROPERTY OWNER

LICENSE # 4224

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Other:		Laundry Tub
		Fixtures (Subtotal) Column 2		Water Heater
OR TRANSFER FEE [\$6.00]			3	Fixtures (Subtotal) Column 1
			3	Fixtures (Subtotal) Column 2
			3	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
FEB 1 2006
RECEIVED

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Bar Harbor
Street Subdivision Lot #	66 North

PROPERTY OWNERS NAME

Last: Smith	First: Jeff
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Applicant Name:	David MacWilliams
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Mailing Address of Owner/Applicant (If Different)	119 Shilling St. Bar Harbor
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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.

David MacWilliams

Signature of Owner/Applicant

Date

Date Permit Issued:

10/30/01

\$ 2410.01

☐ If Double Fee Charged

L.P.I. # 01593

Local Plumbing Inspector Signature

136 C 003

Caution: Inspection Required

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

Local Plumbing Inspector Signature

Date Approved

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This Application is for

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2. ☐ RELOCATED PLUMBING

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1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. ☒ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D. HOUSING DEALER/MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # 1593

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock		Bathtub (and Shower)
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		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		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
OR TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			04	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)