

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 04006
FEB 02 2004
CITY OF PORTLAND

This is to certify that Paules Michelle E/Chris Har
has permission to 23' x 23' story & half garage 8' x 23' remove existing garage & shed
AT 81 Carlyle Rd 141 C012001

provided that the person or persons who apply for or accept this permit shall comply with all of the provisions of the Statutes of the State 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 otherwise 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

Seamus Bonke 2/2/04
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: 04-0065	Issue Date: PERMIT ISSUED FEB 02 2004 CITY OF PORTLAND	CBL: 141 C012001
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Location of Construction: 81 Carlyle Rd	Owner Name: Paules Michelle E	Owner Address: 81 Carlyle Rd	Phone: 761-9044
Business Name:	Contractor Name: Chris Hanson	Contractor Address: 739 New Gloucester Road No. Yarmo	Phone: 2076504426
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R3

Past Use: single family	Proposed Use: single family w/garage & mudroom addition	Permit Fee: \$921.00	Cost of Work: \$100,000.00	CEO District: 4
Proposed Project Description: 23' x 23' story & half garage w/8' x 23' mudroom. Remove existing garage & shed		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB BOLTA 1/19/04 Signature: JMB 2/2/04	
		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: tmm	Date Applied For: 01/23/2004	Zoning Approval	
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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"/> Date: JMB 2/2/04	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: JMB
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CERTIFICATION

I hereby certify that I am the owner of record of the name'd 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

ELECTRICAL PERMIT

City of Portland, Me.



4

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 6/14/04
 Permit # 2004-4602
 CBL# 141 C12

LOCATION: 81 Carlisle METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Michelle Paules
 TENANT _____ PHONE # 761-9044

040065

							TOTAL	EACH FEE	
OUTLETS	<u>25</u>	Receptacles	<u>10</u>	Switches	<u>3</u>	Smoke Detector		.20	
FIXTURES	<u>16</u>	Incandescent	<u>2</u>	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	
		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	<u>35.00</u>

JUN 14 2004
 ELECTRICAL

CONTRACTORS NAME Badger Electric MASTER LIC. # MS10016362
 ADDRESS 405 Lawrence Rd. LIMITED LIC. # _____
 TELEPHONE 688-4900

SIGNATURE OF CONTRACTOR [Signature]
 White Copy - Office Yellow Copy - Applicant