

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 51 Tremaine Street		Owner: Christina Anderson		Phone: 878-8783		Permit No: 961159	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: NOV 21 1996 CITY OF PORTLAND </div>	
Past Use: Single Family Dwelling		Proposed Use: Same w/home occ/child care		COST OF WORK: \$ _____ PERMIT FEE: \$ 25.00			
Proposed Project Description: Change of Use - Home Daycare		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zoning Approval: <i>[Signature]</i> 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"/>		Zone: _____ CBL: 143-A-016	
Permit Taken By: Vicki Dover		Date Applied For: 11/15/96					

1. This permit application doesn't 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..

Mail permit

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: Christina Anderson ADDRESS: 51 Tremaine St., Portland 04103 DATE: 11/15/96 PHONE: 878-8783

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

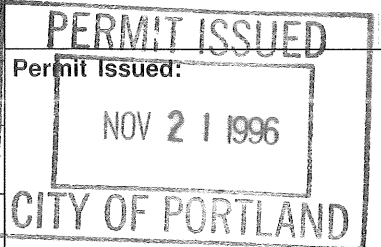
Approved
 Approved with Conditions
 Denied

Date: 11/15/96

CEO DISTRICT 6
[Signature]

143-A-016
City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 51 Tremaine Street		Owner: Christina Anderson		Phone: 878-8783	Permit No: 901159
Owner Address:		Leasee/Buyer's Name:		BusinessName:	
Contractor Name:		Address:		Phone:	
Past Use: Single Family Dwelling	Proposed Use: Same w/home occ/child care	COST OF WORK: \$		PERMIT FEE: \$ 25.00	
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <u>R3</u> Type: <u>00C296</u>	
Proposed Project Description: Change of Use - Home Daycare		Signature:		Signature: <u>Hoffen</u>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: <u>Hoffen</u> <u>19/Nov/96</u>	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		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"/>	
Permit Taken By: Vicki Dover		Date Applied For: 11/15/96		Zone: CBL: <u>143-A-016</u>	



PERMIT ISSUED WITH REQUIREMENTS

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Christina Anderson 51 Tremaine St., Portland 04103 878-8783 11/15/96
 SIGNATURE OF APPLICANT Christina Anderson ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:**
- Approved
 - Approved with Conditions
 - Denied

Date: 11/12/96
C. Anderson

CEO DISTRICT 6

MA. Leary



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

143-A-16

LOCATION 51 Tremaine St

Issued to Christina Anderson

Date of Issue 09 April 1997

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 961159, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Entire

Single Family
w/daycare

Limiting Conditions:

This certificate supersedes
certificate issued 04 February 1997

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

51 Tremaine
Portland, 04103

Christina Anderson
878-8783

Portland Code

Sec 14.410 Home occupation

(1)

a. please look at page two.

b. N/A

c. I have a playroom with 2 closets and a storage room.

d. I am aware of that and when the time comes I will comply.

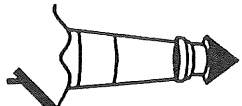
e. Don't plan on doing any alterations.

f. I have room for 4 cars in my driveway and were I am at the top of the dead end street there are two parking spots there. The parents won't be here all at once.

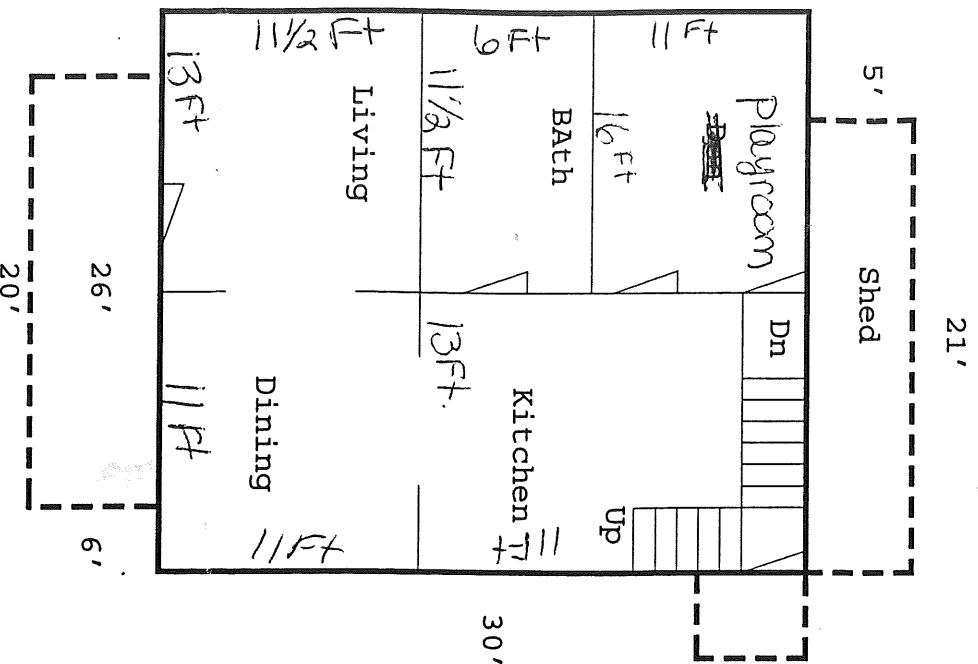
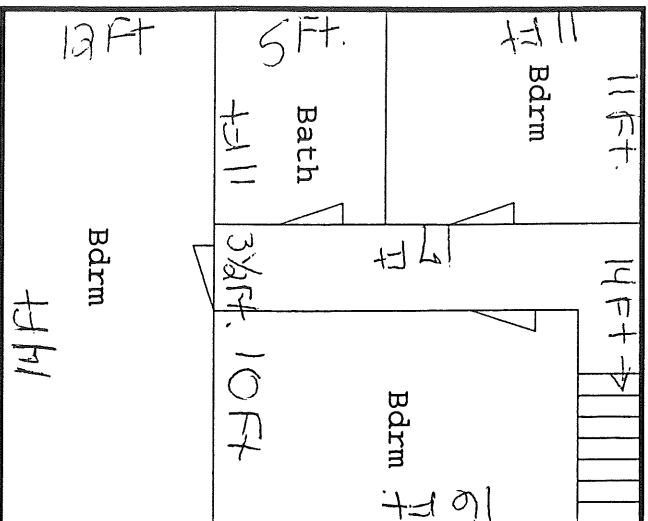
g. The only noise that you will here are children playing. My house is next to St. Joseph's school and there are always kids

outside playing, and thats
alot more then 0's children.
I will have a covered diaper
pail.

H. I will work alone
I. It will be quick
drop off and pickups. And
were I am at the end of
the dead end street there
isnt really any traffic at all.
J. N/A



BEACON APPRAISAL



RECORD OF BUILDINGS
 GRADE DENOTES QUALITY OF CONSTRUCTION: A—EXCELLENT; B—GOOD; C—AVERAGE; D—CHEAP; E—VERY CHEAP

YEAR 19

YEAR 19

1st - 6⁰⁰ WK
 2nd - 8⁰⁰ WK
 3rd - 6⁰⁰ WK
 Total - 20⁰⁰

CONSTRUCTION

FOUNDATION		FLOOR CONST.		PLUMBING	
CONCRETE		WOOD JOIST	✓	BATHROOM	3 ✓
CONCRETE BLOCK		STEEL JOIST		TOILET ROOM	
BRICK OR STONE	✓	MILL TYPE		WATER CLOSET	
PIERS		REIN. CONCRETE		LAVATORY	
CELLAR AREA FULL	✓	FLOOR FINISH		KITCHEN SINK	3 ✓
1/4 1/2 3/4		B	1 2 3	STD. WAT. HEAT	3 ✓
NO. CELLAR		CEMENT	✓	AUTO. WAT. HEAT	
EXTERIOR WALLS		EARTH		ELECT. WAT. SYST.	
CLAPBOARDS	✓	PINE	✓✓✓	LAUNDRY TUBS	
WIDE SIDING		HARDWOOD	✓	NO PLUMBING	
DROP SIDING		TERRAZZO		TILING	
NO SHEATHING		TILE		BATH FL. & WCOT.	
WOOD SHINGLES		ATTIC FLR. & STAIRS		TOILET FL. & WCOT.	
ASBES. SHINGLES		INTERIOR FINISH		LIGHTING	
STUCCO ON FRAME		B	1 2 3	ELECTRIC	✓
STUCCO ON TILE		PINE	✓✓✓	NO LIGHTING	
BRICK VENEER		HARDWOOD	✓	NO. OF ROOMS	
BRICK ON TILE		PLASTER	✓✓✓	BSMT.	2ND 5
SOLID BRICK		UNFINISHED		1ST 5	3RD 4
STONE VENEER		METAL CLG.		OCCUPANCY	
CONC. OR CIND. BL.		RECREAT. ROOM		SINGLE FAMILY	
TERRA COTTA		FINISHED ATTIC		TWO FAMILY 3	✓
VITROLITE		FIREPLACE		APARTMENT	
PLATE GLASS		HEATING		STORE	
INSULATION		PIPELESS FURNACE		THEATRE	
WEATHERSTRIP.		HOT AIR FURNACE		HOTEL	
ROOFING		FORCED AIR FURN.		OFFICES	
ASPH. SHINGLES	✓	STEAM		WAREHOUSE	
WOOD SHINGLES		HOT WAT. OR VAPOR		COMM. GARAGE	
ASBES. SHINGLES		NO HEATING	✓	GAS STATION	
SLATE TILE		ECONOMIC CLASS			
METAL		OVER BUILT			
COMPOSITION		UNDER BUILT			
ROLL ROOFING		GAS BURNER		DT. 5/17/50	AR. CS
INSULATION		OIL BURNER		LD. 50	PD.
		STOKER		MS.	CK. 1

Inf. FROM TENANT.

COMPUTATIONS

UNIT	1951				
1044 S. F.	6720				
S. F.					
ADDITIONS	+550				
BASEMENT					
WALLS					
ROOF					
FLOORS					
ATTIC					
FINISH					
FIREPLACE					
HEATING	-760				
PLUMBING	+700				
TILING					
M.F.	+670				
TOTAL	7880				
FACT. +5	340				
REP. VAL.	8220				

SUMMARY OF BUILDINGS

OCC'Y	TYPE	GR.	AGE	REMOD.	COND.	REP. VAL.	P. D.	PHY. VAL.	F. D.	SOUND VAL.	TAX VAL.	YF
Dwg.	A 2 1/2 S/F	C	56+		F	8220	55%	3700	A	3700	2225	5
	B								B			
	C								C			
	D								D			
	E								E			
	F								F			
	G								G			
YEAR	1951					1951 TOTAL BLDGS.				3700	2225	
TAX VAL.						19				19		
OLD VAL.	2225					19				19		
CHANGE						10				10		

