

084103

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$170 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: John Thaxter Phone # 774-5533

Address: Box 7231; Ptld, ME 04112

LOCATION OF CONSTRUCTION 53-55 Bell St.

Contractor: Thaxter Co Sub: _____

Address: _____ Phone # _____

Est. Construction Cost: 30,000 Proposed Use: office/storage

_____ Past Use: 2-fam dwlg

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Change of Use - from 2-fam dwlg to

commercial (office/storage) Ceiling

Foundation: - with interior renovations -

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ (Side(s)) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other: _____

Floor: _____ Sills must be anchored.

1. Sills Size: _____
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____ Spacing 16" O.C.
4. Joists Size: _____
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Wall: _____

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Size _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Wall: _____

1. Studding Size _____ Spacing _____
2. Header Size _____ Spacing _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

PERMIT ISSUED WITH LETTER

White - Tax Assessor

For Official Use Only

Date 8/21/92 Subdivision _____ Name SEP 10 1992

Inside Fire Limits _____ Lot _____

High Code _____ Ownership _____ Public _____ Private _____

Time Limit _____

Estimated Cost 30,000

Zoning: T2

Street Frontage Provided: _____ Back _____ Side _____ Side _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____

Special Exception _____

Other: WDA - 8-25-92

HISTORIC PRESERVATION

1. Ceiling Joists Size: _____ Span Action: Not in District per Lashera.
2. Ceiling Strapping Size _____ Spacing _____ Does not require retrofit.
3. Type Ceiling: _____
4. Insulation Type _____ Size _____ Requires Retrofit.
5. Ceiling Height: _____

Roof:

1. Truss or Rafters Size _____ Span Action: Approved
2. Sheathing Type _____ Size _____ Approved with Condition
3. Roof Covering Type _____

Chimneys: _____ Number of Fire Places _____ Date of Installation _____

Heating: _____ Type of Heat: _____

Electrical: _____ Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing: _____

1. Approval of soil test if required: Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Fixtures _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools: _____

1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant John Thaxter 8/21/92

CEO's District ER

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]