

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

Owner: H.T. BOX COMPANY INC 797-7131

Address: PO BOX 1040, Portland, 04104

LOCATION OF CONSTRUCTION: 65 Bell Street

CONTRACTOR: Structure and Design SUBCONTRACTORS: 985-4701

ADDRESS: 2 Main St., Kennebunk, Me 04043

Est. Construction Cost: \$206,000 Type of Use: warehouse

Past Use: \_\_\_\_\_

Building Dimensions L: \_\_\_\_\_ W: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

\_\_\_\_\_ Conversion - Explain: Construct new warehouse as per plans.

**COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE**

Residential Buildings Only:

# Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

**Foundation:**

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

**Floors:**

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Joist Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joist Size: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

**Exterior Walls:**

1. Studding Size: \_\_\_\_\_ Spacing: \_\_\_\_\_
2. No. windows: \_\_\_\_\_
3. No. Doors: \_\_\_\_\_
4. Header Sizes: \_\_\_\_\_ 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 Walls:**

1. Studding Size: \_\_\_\_\_ Spacing: \_\_\_\_\_
2. Header Sizes: \_\_\_\_\_ Span(s): \_\_\_\_\_
3. Wall Covering Type: \_\_\_\_\_
4. Fire Wall if required: \_\_\_\_\_
5. Other Materials: \_\_\_\_\_

**For Official Use Only**

Date: <u>August 29, 1988</u>	Subdivision: <u>Yes / No</u>
Inside Fire Laminia: _____	Name: _____
Rdg Code: _____	Lot: _____
Time Limit: _____	Disk: _____
Estimated Cost: <u>\$206,000</u>	Permit Expiration: _____
Value/Structure: _____	Ownership: _____ Public _____ Private
Fee: <u>\$1,050</u>	

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_
2. Ceiling Strapping Size: \_\_\_\_\_ Spacing: \_\_\_\_\_
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type: \_\_\_\_\_ Size: \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_

**Roof:**

1. Truss or Rafter Size: \_\_\_\_\_ Span: \_\_\_\_\_
2. Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
3. Roof Covering Type: \_\_\_\_\_
4. Other: \_\_\_\_\_

**Chimneys:**

Type: \_\_\_\_\_ Number of Fire Places: \_\_\_\_\_

**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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage: \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

**Zoning:**

District: \_\_\_\_\_ Street Frontage Req.: \_\_\_\_\_ Provided: \_\_\_\_\_

Required 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: \_\_\_\_\_

Shore and Floodplain Mgmt: \_\_\_\_\_ Special Exception: \_\_\_\_\_

Other: (Explain) \_\_\_\_\_

Date Approved: \_\_\_\_\_

Permit Received By: Nancy Grossman

Signature of Applicant: \_\_\_\_\_

Signature of CEO: \_\_\_\_\_

Inspection Dates: \_\_\_\_\_

