Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

Permit Number: 101076 2010

City of Portland

This is to certify that	Bracklow Kristen C/Jim Roy
has permission to	Egress window in the basement
AT 14 Torrey St	

CBL 156-C005001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part hereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. ______



Cit	y of Portland, Maine	- Building or Use 1	Permi	t Application	n r	ermit No:	Issue Date	•	CBL:	
389	Congress Street, 04101	Tel: (207) 874-8703	, Fax:	(207) 874-871	6	10-1076			156 C0	05001
Loca	tion of Construction:	Owner Name:			Own	ter Address:			Phone:	
14	Torrey St	Bracklow Kris	ten C		14 Torrey St				207-774-8701	
Busi	ness Name:	Contractor Name	:	_	Con	tractor Address:			Phone	
		Jim Roy			Po	ortland				
Less	ee/Buyer's Name	Phone:			Pern	nit Type:	d .			Zone: -2
			_]	Al	Iterations - Dw	ellings			K /
Past	Use:	Proposed Use:		_	Рег	mit Fec:	Cost of Wor	k: (EO District:	7
Sin	gle Family	Single Family	/ Egres	s window in		\$50.00	\$2,20	00.00	4	
		the basement			FIR	RE DEPT:	Approved	INSPEC		•
						NA	Denied	Use Gro	up: R3	Type: 5B
								TIN	× 1	
_	_			_				The	4 2003	7
	osed Project Description:									1/
Egr	ess window in the basemen	nt			_	nature:		Signature		1
					PEU	DESTRIAN ACT	IVITIES DIST	RICT (P.	A.D.	
					Act	ion. Appro	ved 🗌 Apı	proved w/@	onditions [Denied
					Sign	nature.		1	Date:	
Pern	nit Taken By:	Date Applied For:				Zoning	Approva	ıl		
gg		08/31/2010								
ĺ,	This permit application de	oes not preclude the	Spe	cial Zone or Revie	WS	Zoni	ng Appeal		Historic Pres	crvation
	Applicant(s) from meeting Federal Rules.	g applicable State and	SF	noreland		☐ Varianc	e		Not in Distric	ct or Landmark
_				To					7	
2.	Building permits do not in septic or electrical work.	nclude plumbing,	🗆 w	etland		Miscella	aneous	1	Does Not Red	quire Review
3.	Building permits are void	if work is not started	Flo	ood Zone		Condition	onal Use	r	Requires Rev	iew
٥.	within six (6) months of t									
	False information may in		☐ Su	ubdivision		Interpre	tation		Approved	
	permit and stop all work	,								
			☐ Sı	te Plan		Approve	ed		Approved w/	Conditions
	PERM	IIT ISSUED				1				
			Maj [Minor MM		Denied		[Denicd /	
	OC.	B 0 0 0040	OK	with con	di	#~g			S	\prec
	SEI	2 0 2010	Dater	59/2	40	Date		Dat	le;	/
				יו י	10					
	City	of Portland								

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.

City of Portland, Maine - Bui	lding or Use Permi	t		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (4-8716	10-1076	08/31/2010	156 C005001
Location of Construction:	Owner Name:		C)wner Address:		Phone:
14 Torrey St	Bracklow Kristen C			14 Torrey St		207-774-8701
Business Name:	Contractor Name:		(Contractor Address:		Phone
	Jim Roy			Portland		
Lessee/Buyer's Name	Phone:		P	ermit Type:		
				Alterations - Dwel	lings	
Proposed Use:			Proposed	Project Description:		
Single Family / Egress window in the	basement	1	Egress	window in the base	ement	
			-8			
Dept: Zoning Status: /	Approved with Condition	ns Day	vionyone	Marge Schmucka	l Approval Da	ate: 09/03/2010
-	Approved with Collation	iis Kev	viewer:	Marge Schillucka	Approvario	
Note:						Ok to Issue:
AGAIN it is reiterated that this a plumb up for future kitchen appli		OT PERM	ИІТТЕD	for an additional d	lwelling unit. You n	nay not wire or
This is NOT an approval for an a not limited to items such as stove						t including, but
This property shall remain a sing approval.	le family dwelling. Any	change of	f use sha	Il require a separat	e permit application	for review and
This permit is being approved on work.	the basis of plans subm	itted. An	y deviati	ions shall require a	separate approval be	efore starting that
Dept: Building Status: /	Approved with Condition	ns Rev	viewer:	Jonathan Rioux	Approval Da	ate: 09/20/2010
Note:	• •					Ok to Issue:
1) Snow maintenance plan must be	in place for egress (well) window	in bedro	oom.		
Hardwired interconnected battery bedroom.					the area giving acc	ess to the
Application approval based upon and approrval prior to work.	information provided b	y applicar	nt. Any d	deviation from appr	roved plans requires	separate review

Comments:

9/8/2010-jrioux: Spoke with owner she would like to ammend the permit to include a basement bedroom.

9/20/2010-jrioux: Met with Owner @ counter Permit # 06-1126 was used to convert basement to living space in '06.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.

X Framing and final inspection required at completion of wor	X	Framing an	d final inspectio	n required at	completion	of wor
--------------------------------------------------------------	---	------------	-------------------	---------------	------------	--------

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

CBL: 156 C005001 Building Permit #: 10-1076

FOUNDATION CUT OUT

Date

Assignment: To: From: Page No.: TOP OF FOUNDATION 2-2X10 P7 CONCRETE BAS EMENT LFLOOR WINDOW Form 4A-BW. © 2000 Mathematics Help Central http://www.mathematicshelpcentral.com



Original Receipt

Ago	17 31 2012
Received from Kaska Backlew	
Location of Work 14 Tarray St	
Cost of Construction \$ 3,300	Building Fee:
Permit Fee \$	_ Site Fee:
Certificate of O	ccupancy Fee:
	Total: 50.00
Building (IL) Plumbing (I5) Electri	cal (I2) Site Plan (U2)
Other	
CBL: 156-C-5	
Check #: Tota	al Collected s 50 00

No work is to be started until permit issued. Please keep original receipt for your records.

Taken by: ____

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

General Building Permit Application

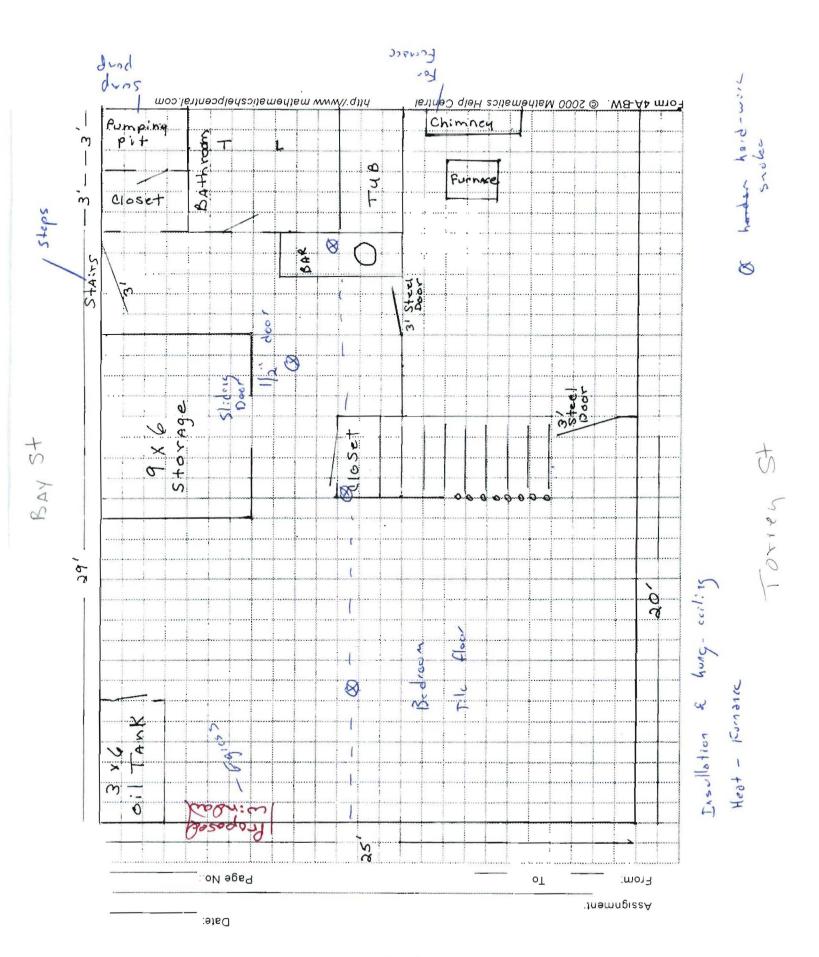
If you or the property owner owes real estate or personal property takes or user charges of any w within the Cir. baymen, arrangements must be made before permits of any kind are accomme

	torrey St Por	Hand Ms
Location/Address of Construction: (4 - Total Square Footage of Proposed Structure/	Area Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 156 C 5	Applicant must be owner, Lessee or Name Kristen Brac Address 14 Torrey S	Klaw 207 + 774-8701
Lessee/DBA (If Applicable)	City, State & Zip Portland M Owner (if different from Applicant) Name	Cost Of Work: \$2_2DD
	Address City, State & Zip	C of O Fee: \$ Total Fee: \$
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? Project description:	SAMINUMBER of Residence SAMINUMBER of Residence Services of Reside	RECEIVED AUG 3 1 2010
Contractor's name! Jim R	es in Basemen	City of Portland Maine
Contractor's name. Address: City, State & Zip Who should we contact when the permit is react wailing address:	dy: Kris Bracklow	Telephone: Telephone: 774 - 870(

In m Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:	t. R.	Sla	Date:	8 1	131 /	10	-
	The state of the s			1			



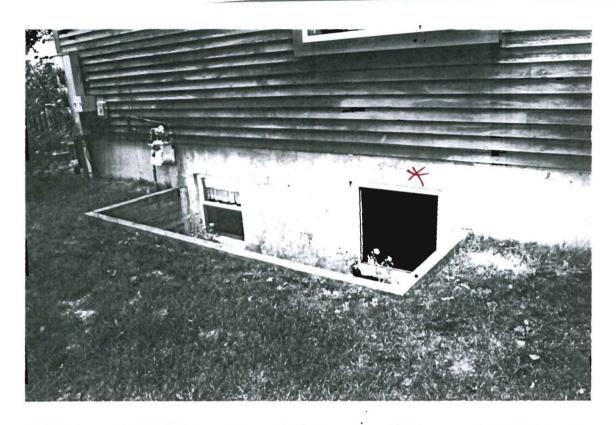
20H U4070

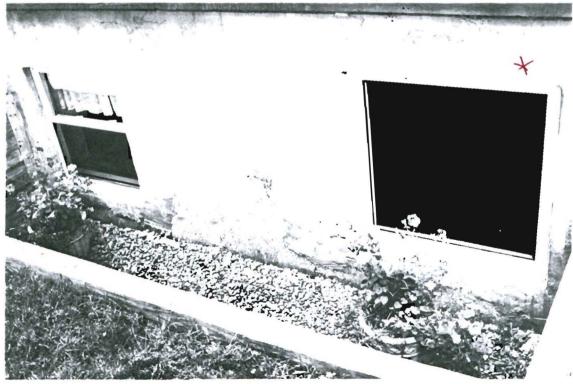
Date: Assignment: To: From: oil Tank 6'10" Floor
1/2" Sheet rock

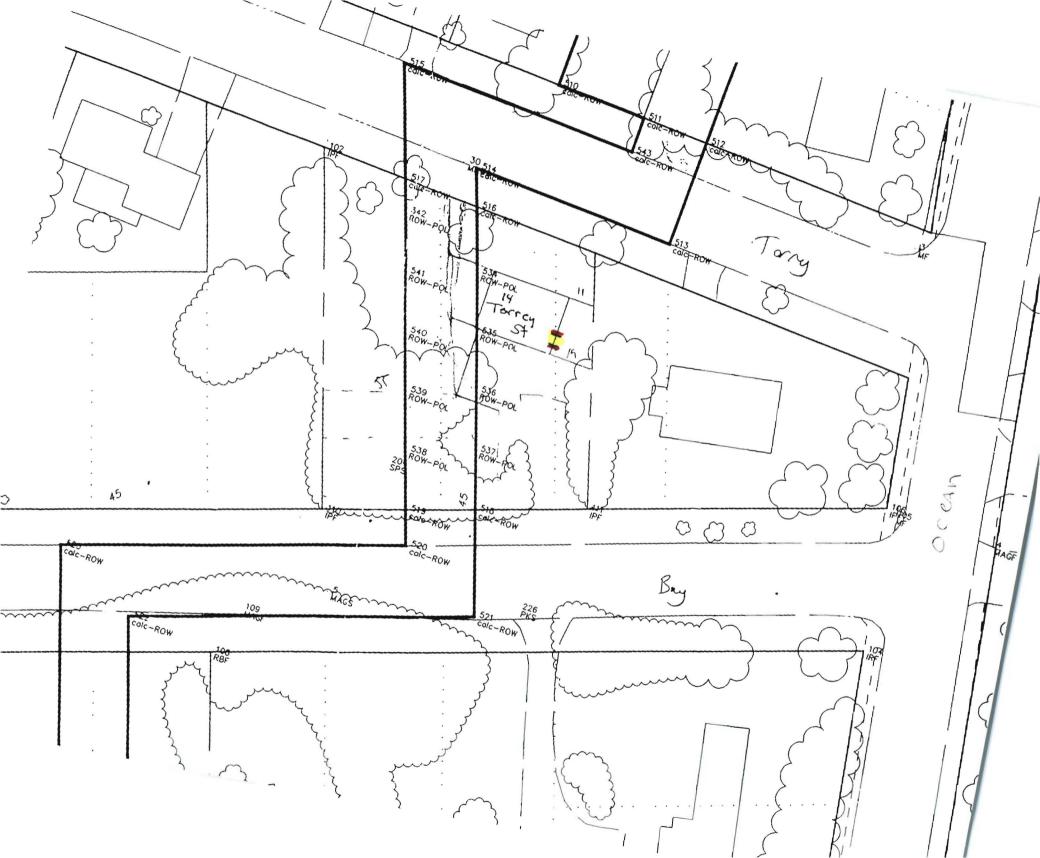
http://www.mathematicshelpcentral.com

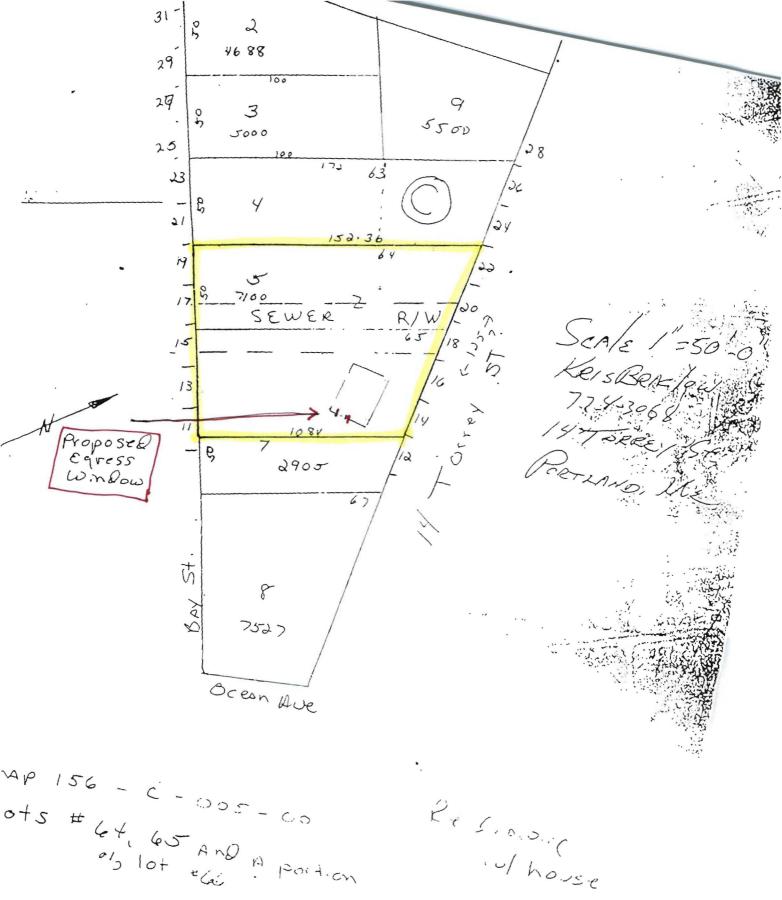
Form 4A-BW © 2000 Mathematics Help Central











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- 282 POLAND RD AUBURN, ME 04210 207-784-4009 • Fax: 207-782-7780
- ☐ 1087 HAMMOND ST BANGOR, ME 04401 207-945-9416 • Fax: 207-947-4960
- 20 SPRING ST BRUNSWICK, ME 04011 207-729-9924 • Fax: 207-798-5674
- ☐ 5 SUMMIT ST FAIRFIELD, ME 04937 207-453-7322 • Fax: 207-453-9493



MAIN OFFICE 2 HAMMOND DRIVE • PO BOX 500 BELGRADE, MAINE 04917

207-495-3303 • FAX: 207-495-2304 www.hammondlumber.com

- ☐ 389 FARMINGTON FALLS RD FARMINGTON, ME 04938 207-778-3518 • Fax: 207-778-3283
- ☐ 17 MINDEN ST GREENVILLE, ME 04441 207-695-4583 • Fax: 207-695-3977
- ☐ 300 RIVERSIDE ST PORTLAND, ME 04103 207-771-8880 • Fax: 207-771-8882
- ☐ 34 PENNELL ST SKOWHEGAN, ME 04976 207-474-8122 • Fax: 207-474-6504

To:	Kris Bracklow
Company:	***************************************
From:	HAMMOND LUMBER COMPANY 282 Poland Road Auburn, Maine 04210 Phone: (207)784-4009 FAX: (207)782-7780 Toll Free: 800-HEY-AUBN (800-439-2826) Email: mducharme@hammondlumber.com
Date:	August 25, 2010
Number of Pages:	(including cover page)

Comments:

Any questions please give me a call	

Salesperson: SPR	3	PEC REPORT	Project: jim roy
Report: Andersen Unit Spec Report	Today's Date:	10.1 08/25/2010 08/24/2010	Quote No: 6201 Page: 1 Of 2
Disclaimer/Notes			
Item 0001 Unit Size			
Unit Operation Location	Arm: Straight		
Dimensions: Wildt Unit. 2' 11 15/ Rough Opening. 3' 0' Max. Cir. Open: 2' 6' Subfloor to Sill Stop: 4' 0 3' Projection:	/16" 2' 11 15/16" 1/2" 3' 0 1/2" 1/8" 2' 7 1/16"		
Operating Specifications: Glass Area: Vent Area. Max. Ctr. Open: Extension Jambs:	6.80 SQ FEET 6.50 SQ FEET 6.50 SQ FEET		
None			
Vinyl Clad Exteri	00		

other items.

= EcoExcel Package ed to be increased to allow for use of building wraps or flashings or sill panning or brackets or fasteners or = Other Tax Credit Eligible Products

