

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

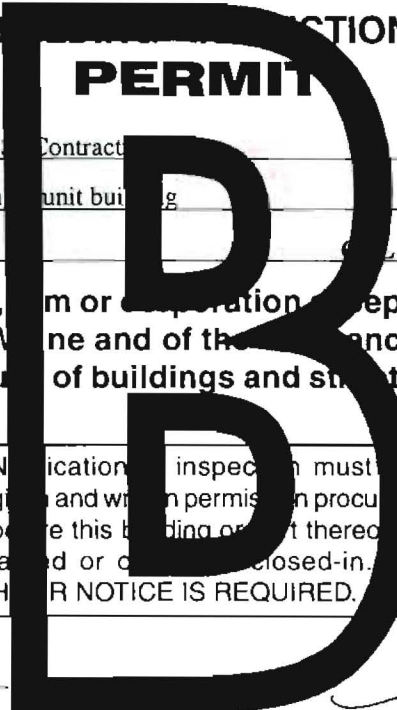
PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 050119
FEB 14 2005
CITY OF PORTLAND

This is to certify that Egr - Plantation Vistas Inc/Tr Contract
has permission to Repair fire damage in existin unit buildg
AT 988 Washington Ave
CITY OF PORTLAND 161 B025001

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 thereof is altered or closed-in. HEAVY 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.
Health Dept.
Appeal Board
Other
Department Name

Handwritten signature and date 2/11/05
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: 05-0119	Issue Date: FEB 14 2005	CBL: 161 B025001
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Location of Construction: 988 Washington Ave	Owner Name: Eqr - Plantation Vistas Inc	Owner Address: Po Box 87407 (19301)	Phone:
Business Name:	Contractor Name: TSI Contracting Inc.	Contractor Address: 5285 Lake Pointe Cir Dr Suite 500	Phone: 6787582892
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-3

Past Use: Residential 2 Unit	Proposed Use: Residential 2 unit / Repair fire damage in existing 2 unit building	Permit Fee: \$273.00	Cost of Work: \$28,000.00	CEO District: 4
Proposed Project Description: Repair fire damage in existing 2 unit building		FIRE DEPT: N/A	INSPECTION: Use Group: R Type: SB IRC 2003	

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: Idobson	Date Applied For: 02/03/2005	Zoning Approval	
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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: 2/11/05	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: 2/11/05
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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.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

2/23/05 Close in inspection for unit 79 + 80 Met on site
w/ electrician and g.c. O.K. to close in gk

07/19/05 - Final inspection for units # 79, #80
okay to issue c/o's

WAG

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-0119	Date Applied For: 02/03/2005	CBL: 161 B025001
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Location of Construction: 988 Washington Ave	Owner Name: Eqr - Plantation Vistas Inc	Owner Address: Po Box 87407 (19301)	Phone:
Business Name:	Contractor Name: TSI Contracting Inc.	Contractor Address: 5285 Lake Pinte Ctr Dr Suite 5 Cummi	Phone (678) 758-2892
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Residential 2 unit / Repair fire damage in existing 2 unit building	Proposed Project Description: Repair fire damage in existing 2 unit building
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Dept: Zoning **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 02/11/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 02/11/2005
Note: **Ok to Issue:**

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, or heating.
- 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Comments:
 2/10/05-tmm: Left message for contractor - need fire wall detail as discussed at counter.


All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>46 Tamarlane</u>		
Total Square Footage of Proposed Structure <u>Unit 79 864 sqft - Unit 80 864 sqft</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>* 161 B 025</u>	Owner: <u>Equity Residential Prop. Management Corp.</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>DAVID Scroggins 5295 Lake Pointe Ct. Dr. Ste 5 Cumming GA 30041</u>	Cost Of Work: <u>\$ 28,033.00</u> Fee: <u>\$ 273.00</u>
Current use: <u>8: Residential 2 unit</u>		
If the location is currently vacant, what was prior use: <u>Residential Apartments</u>		
Approximately how long has it been vacant: <u>124 DAYS</u>		
Proposed use: <u>Fire damage in existing Multi-dwelling (2 unit)</u>		
Project description:		
Contractor's name, address & telephone: <u>T.S.I Contracting Inc. 5295 Lake Pointe Dr. Dr. Ste 5 Cumming GA 30041</u>		
Who should we contact when the permit is ready: <u>DAVID Scroggins</u>		
Mailing address: <u>46 A Tamarlane (Lensing office) Portland, ME 04103</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>678-758-2892</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

 <p style="font-size: small;">Signature of applicant: <u>[Signature]</u></p>	<p>Date: <u>1-31-05</u></p>
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This is NOT a permit, you may not commence ANY work until the permit is issued.
 If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.


A Pre-construction Meeting will take place upon receipt of your building permit.

- NA Footing/Building Location Inspection: Prior to pouring concrete
- NA Re-Bar Schedule Inspection: Prior to pouring concrete
- NA Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

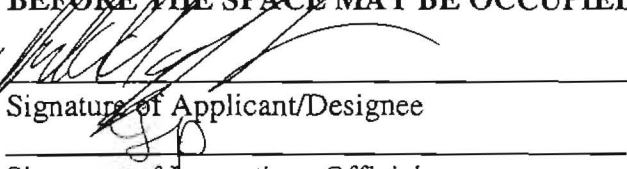
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

NA CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED


Signature of Applicant/Designee

2-17-05
Date


Signature of Inspections Official

02/17/05
Date

CBL: 13025

Building Permit #: 050119

00

Delete Schedule Add Find Print Permit Print C of O Print Insp Invoicing Taxes Due Close

Prmt Text93 22642 Constr Type New Num1 50119

Permit Nbr 05-0119 Location of Construction 988 Washington Ave Appl. Date 02/03/2005
Status Hold Permit Type Alterations - Dwellings Issue Date
CBL 161 B025001 District Nbr 4 Estimated Cost \$28,000.00 Date Closed

Comment Date	Comment	Add	Delete	Save	Print
02/10/200	Left message for contractor - need fire wall detail as discussed at counter.				
Name	tmm	Follow Up Date		Completed	<input type="checkbox"/>

CreatedBy Idobson CreateDate 02/03/2005 ModBy tmm ModDate 02/10/2005



Date: 2-11-05

Time: 11:30

To: TAMMY MASON

Fax: 207-874-8716

From: DAVID SCROGGI'S

Fax: 770-886-0774

This Fax contains 3, including the cover page.

Call me If you have any ?
770-886-7777

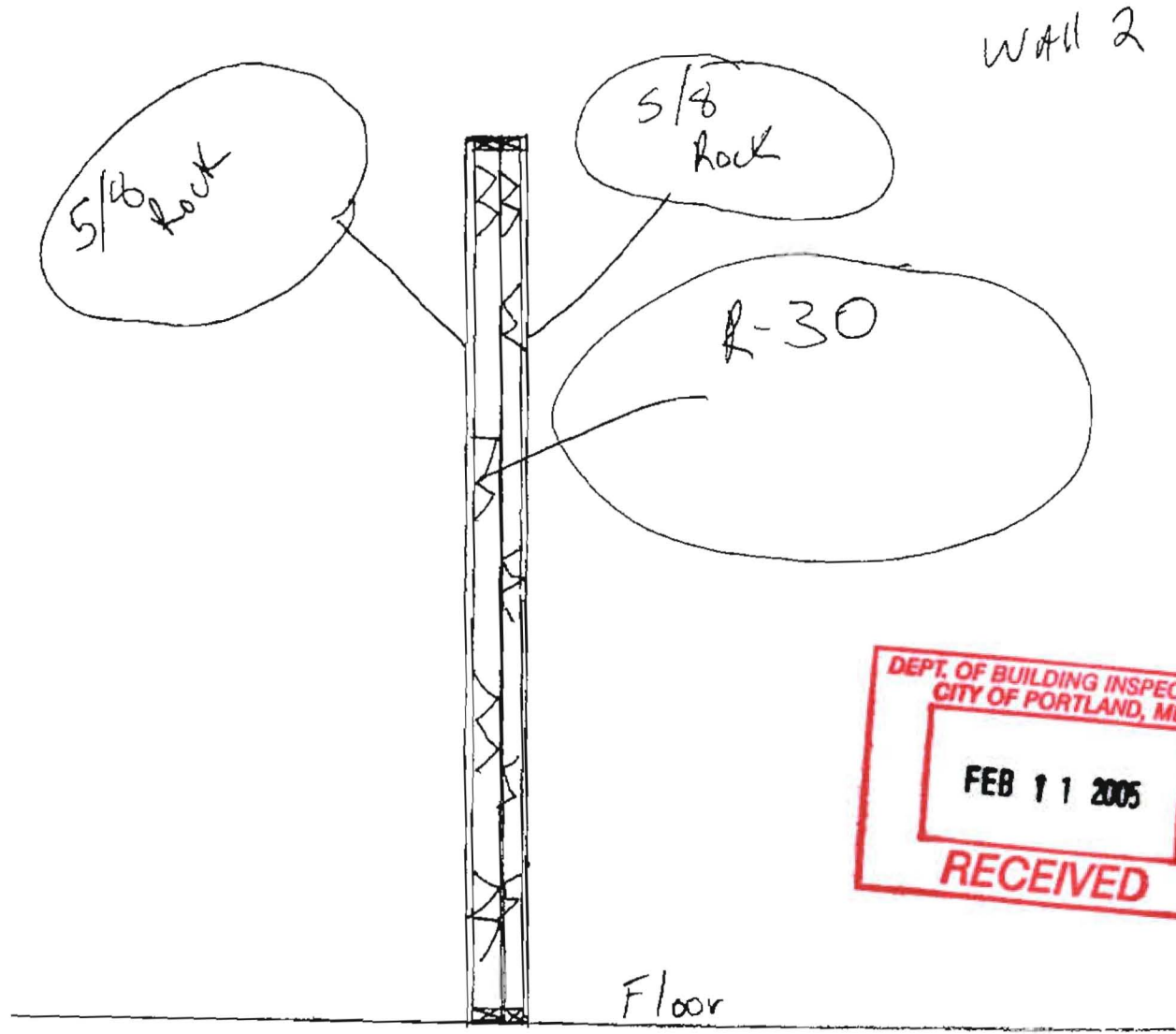
If this fax does not complete transmission, please call 770-886-7777.



5295 Lake Pointe Center Drive, Suite J Cumming GA 30041
770-886-7777 770-886-0774 fax www.tsicontracting.com

(B)

46 Tamarlane
Portland, me
07103



DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME

FEB 11 2005

RECEIVED

TAMMY MUNSON

Tamarlane

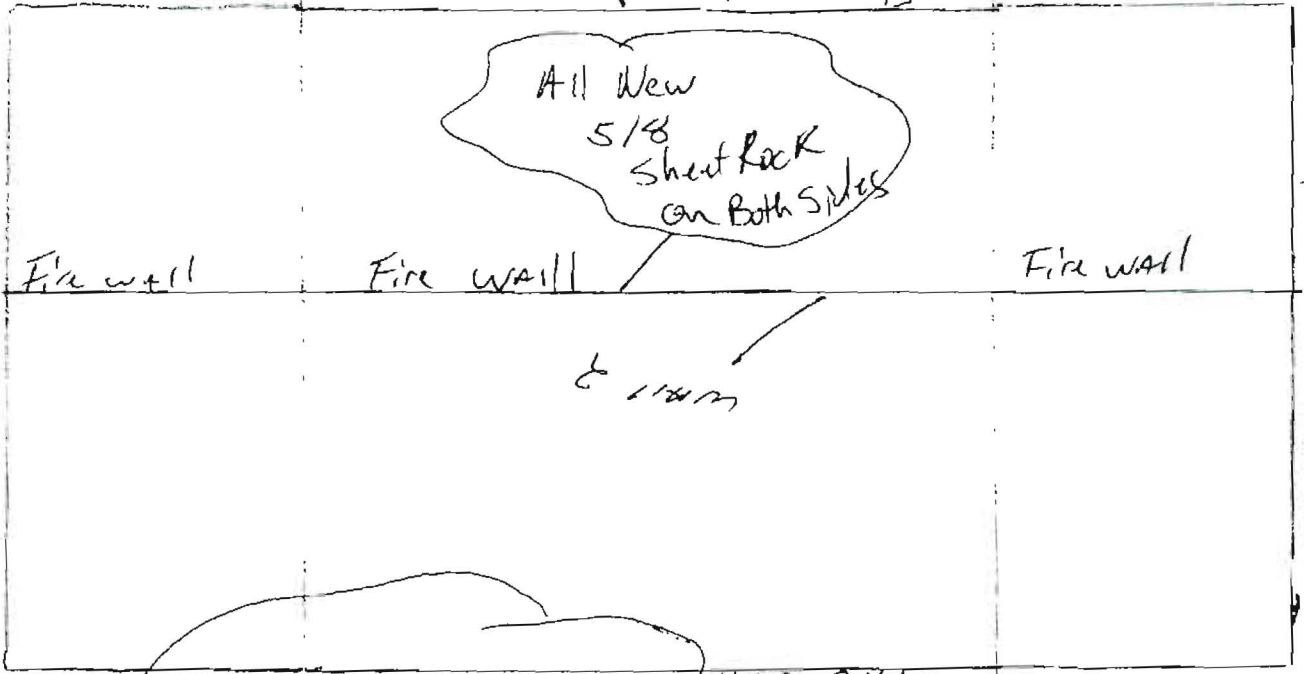


2nd Floor

No work done on this wall

TAMMUNSON

TAMMUNSON



No work on Fire walls on 1st Floor

replace two sheets of 5/8 rock

3 walls

416 Tammunson
Portland, ME
04103



Job 388735	Truss 002	Truss Type GABLE	Qty 4	Ply 1	DOWNEAST - TAMAR 12/06/04 RON
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Wood Structures, Inc., Biddeford, ME 04005 5.200 s Dec 2 2003 MiTek Industries, Inc. Mon Dec 20 14:09:03 2004 Page 1

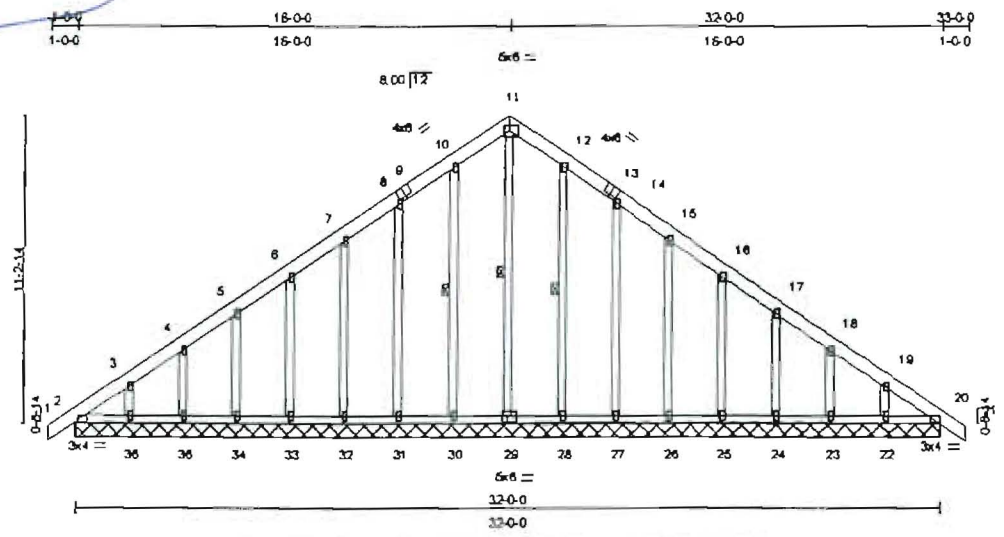


Plate Offsets (X,Y): [29:0-3-0,0-3-0]

LOADING (psf)	SPACING	CSI	DEFL	PLATES	GRIP
TCLL 56.0	Plates Increase 2-0-0 Lumber Increase 1.15	TC 0.07 BC 0.03 WB 0.25 (Matrix)	in (loc) l/def L/d Vert(LL) n/a - n/a 999 Vert(TL) -0.00 21 >999 180 Horz(TL) 0.01 20 n/a n/a	M120	197/144
TCDL 10.0	Rep Stress Incr YES			Weight: 205 lb	
BCLL 0.0	Code BOCA/ANSI95				
BCDL 10.0					

LUMBER	BRACING
TOP CHORD 2 X 6 SPF 1650F 1.5E	TOP CHORD Sheathed or 6-0-0 oc purlins.
BOT CHORD 2 X 4 SPF 1650F 1.5E	BOT CHORD Rigid ceiling directly applied or 10-0-0 oc bracing.
OTHERS 2 X 4 SPF 1650F 1.5E	WEBS 1 Row at midpt 11-29, 10-30, 12-28

REACTIONS (lb/size) 2=328/32-0-0, 20=328/32-0-0, 29=253/32-0-0, 30=297/32-0-0, 31=306/32-0-0, 32=304/32-0-0, 33=304/32-0-0, 34=304/32-0-0, 35=307/32-0-0, 36=289/32-0-0, 28=297/32-0-0, 27=306/32-0-0, 26=304/32-0-0, 25=304/32-0-0, 24=304/32-0-0, 23=307/32-0-0, 22=289/32-0-0

Max Horz 2=-367(load case 4)
 Max Uplift 2=-142(load case 4), 20=-36(load case 5), 30=-45(load case 6), 31=-101(load case 6), 32=-90(load case 6), 33=-89(load case 6), 34=-88(load case 6), 35=-93(load case 6), 36=-94(load case 6), 28=-25(load case 7), 27=-106(load case 7), 26=-90(load case 7), 25=-89(load case 7), 24=-89(load case 7), 23=-92(load case 7), 22=-88(load case 7)

Continued on page 2

12/20/2004 2:15 PAGE 4/5 RIGHTFAX

Job	Truss	Truss Type	Qty	Ply	DOWNEAST - TAMAR 12/06/04 RON
388735	002	GABLE	4	1	Job Reference (optional)

Wood Structures, Inc., Biddeford, ME 04005

5.200 s Dec 2 2003 MiTek Industries, Inc. Mon Dec 20 14:09:03 2004 Page 2

FORCES (lb) - Maximum Compression/Maximum Tension

TOP CHORD 1-2=0/73, 2-3=-353/261, 3-4=-292/242, 4-5=-243/236, 5-6=-195/230, 6-7=-148/224, 7-8=-128/262, 8-9=-130/300, 9-10=-116/310, 10-11=-129/316, 11-12=-129/302, 12-13=-116/265, 13-14=-130/255, 14-15=-128/185, 15-16=-128/113, 16-17=-128/72, 17-18=-129/65, 18-19=-127/70, 19-20=-190/84, 20-21=0/73

BOT CHORD 2-36=-53/218, 35-36=-53/218, 34-35=-53/218, 33-34=-53/218, 32-33=-53/218, 31-32=-53/218, 30-31=-53/218, 29-30=-53/218, 28-29=-53/218, 27-28=-53/218, 26-27=-53/218, 25-26=-53/218, 24-25=-53/218, 23-24=-53/218, 22-23=-53/218, 20-22=-53/218

WEBS 11-29=-219/0, 10-30=-318/65, 8-31=-327/121, 7-32=-319/110, 6-33=-320/109, 5-34=-320/109, 4-35=-323/112, 3-36=-304/116, 12-28=-318/45, 14-27=-327/126, 15-26=-319/110, 16-25=-320/109, 17-24=-320/109, 18-23=-323/112, 19-22=-304/110

NOTES

- 1) Wind: ASCE 7-98; 90mph; h=35ft; TCDL=5.0psf; BCDL=5.0psf; Category II; Exp C; enclosed; MWFRS gable end zone; cantilever left and right exposed ; Lumber DOL=1.60 plate grip DOL=1.60.
- 2) Truss designed for wind loads in the plane of the truss only. For studs exposed to wind (normal to the face), see MiTek "Standard Gable End Detail"
- 3) Design load is based on 56.0 psf specified roof snow load.
- 4) Unbalanced snow loads have been considered for this design.
- 5) All plates are 2x4 M1120 unless otherwise indicated.
- 6) Gable requires continuous bottom chord bearing.
- 7) Gable studs spaced at 2-0-0 oc.
- 8) Provide mechanical connection (by others) of truss to bearing plate capable of withstanding 142 lb uplift at joint 2, 36 lb uplift at joint 20, 45 lb uplift at joint 30, 101 lb uplift at joint 31, 90 lb uplift at joint 32, 89 lb uplift at joint 33, 88 lb uplift at joint 34, 93 lb uplift at joint 35, 94 lb uplift at joint 36, 25 lb uplift at joint 28, 106 lb uplift at joint 27, 90 lb uplift at joint 26, 89 lb uplift at joint 25, 89 lb uplift at joint 24, 92 lb uplift at joint 23 and 88 lb uplift at joint 22.

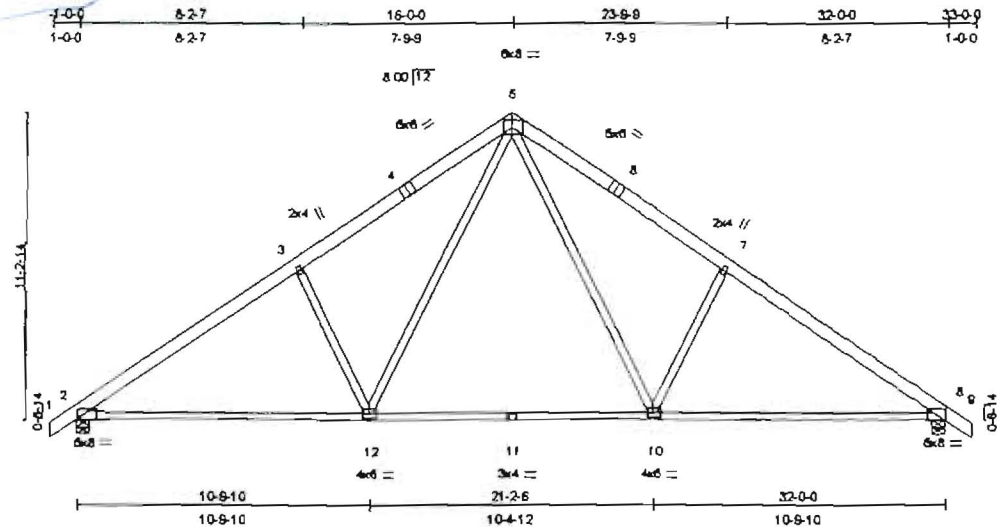
LOAD CASE(S) Standard

12/20/2004 2:15 PAGE 5/5 RightFax

Job 388735	Truss 001	Truss Type FINK	Qty 13	Ply 1	DOWNEAST - TAMAR 12/06/04 RON Job Reference (optional)
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Wood Structures, Inc., Biddeford, ME 04005

5.200 s Dec 2 2003 MiTek Industries, Inc. Mon Dec 20 14:09:02 2004 Page 1



Scale = 1/8" = 1'-0"

Plate Offsets (X,Y): [2:0-0-0,0-0-4], [8:0-0-0,0-0-4]

LOADING (psf)	SPACING 2-0-0	CSI	DEFL in (loc) l/defl L/d	PLATES GRIP
TCLL 56.0	Plates Increase 1.15	TC 0.68	Vert(LL) -0.19 2-12 >999 240	MII20 197/144
TCDL 10.0	Lumber Increase 1.15	BC 0.74	Vert(TL) -0.43 8-10 >880 180	
BCLL 0.0	Rep Stress Incr YES	WB 0.51	Horz(TL) 0.11 8 n/a n/a	
BCDL 10.0	Code BOCA/ANSI95	(Matrix)		Weight: 151 lb

LUMBER	BRACING
TOP CHORD 2 X 6 SPF 1650F 1.5E	TOP CHORD Sheathed or 4-1-13 oc purtins.
BOT CHORD 2 X 4 SPF 1650F 1.5E	BOT CHORD Rigid ceiling directly applied or 10-0-0 oc bracing.
WEBS 2 X 4 SPF 1650F 1.5E	

REACTIONS (lb/size) 2=2559/0-5-8, 8=2559/0-5-8
 Max Horz 2=-367(load case 4)
 Max Uplift 2=-344(load case 6), 8=-344(load case 7)

FORCES (lb) - Maximum Compression/Maximum Tension
 TOP CHORD 1-2=0/76, 2-3=-3448/390, 3-4=-3039/452, 4-5=-2740/491, 5-6=-2740/492, 6-7=-3039/452, 7-8=-3448/391, 8-9=0/76
 BOT CHORD 2-12=-385/2665, 11-12=-99/1792, 10-11=-99/1792, 8-10=-191/2665
 WEBS 3-12=-1148/385, 5-12=-272/1400, 5-10=-272/1400, 7-10=-1148/385

Continued on page 2

12/20/2004 2:15 PAGE 2/5 RIGHT FAX

Job	Truss	Truss Type	Qty	Ply	Job Reference (optional)
388735	001	FINK	13	1	DOWNEAST - TAMAR 12/06/04 RON

Wood Structures, Inc., Biddeford, ME 04005

5.200 s Dec 2 2003 MiTek Industries, Inc. Mon Dec 20 14:09:02 2004 Page 2

NOTES

- 1) Wind: ASCE 7-98; 90mph; h=35ft; TCDL=5.0psf; BCDL=5.0psf; Category II; Exp C; enclosed; MWFRS gable end zone; cantilever left and right exposed ; Lumber DOL=1.60 plate grip DOL=1.60.
- 2) Design load is based on 56.0 psf specified roof snow load.
- 3) Unbalanced snow loads have been considered for this design.
- 4) Provide mechanical connection (by others) of truss to bearing plate capable of withstanding 344 lb uplift at joint 2 and 344 lb uplift at joint 8.

LOAD CASE(S) Standard

2nd Floor

All Sheet Rock to be replaced on 2nd Floor unit 79
All Electrical to be replaced
Shower & Tub replace

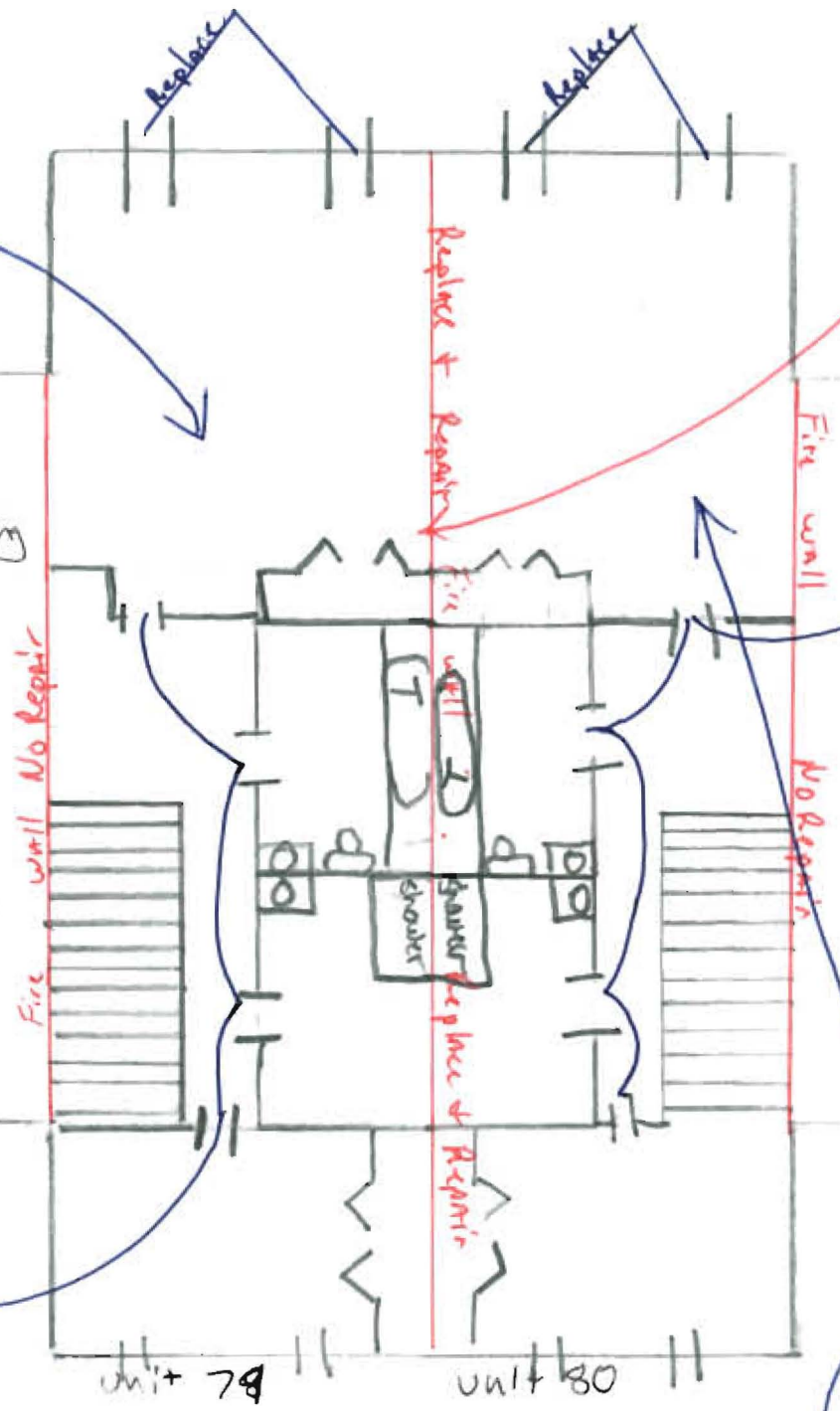
Fire wall
Repair & replace
up to attic
2nd Floor only

Fire walls to have 1/2 osb placed on them
To keep the walls from getting damaged

All windows & door openings to remain the same
Not to be removed or relocated

All Doors to be replaced

Note: All Insulation to be R-33 Fiber



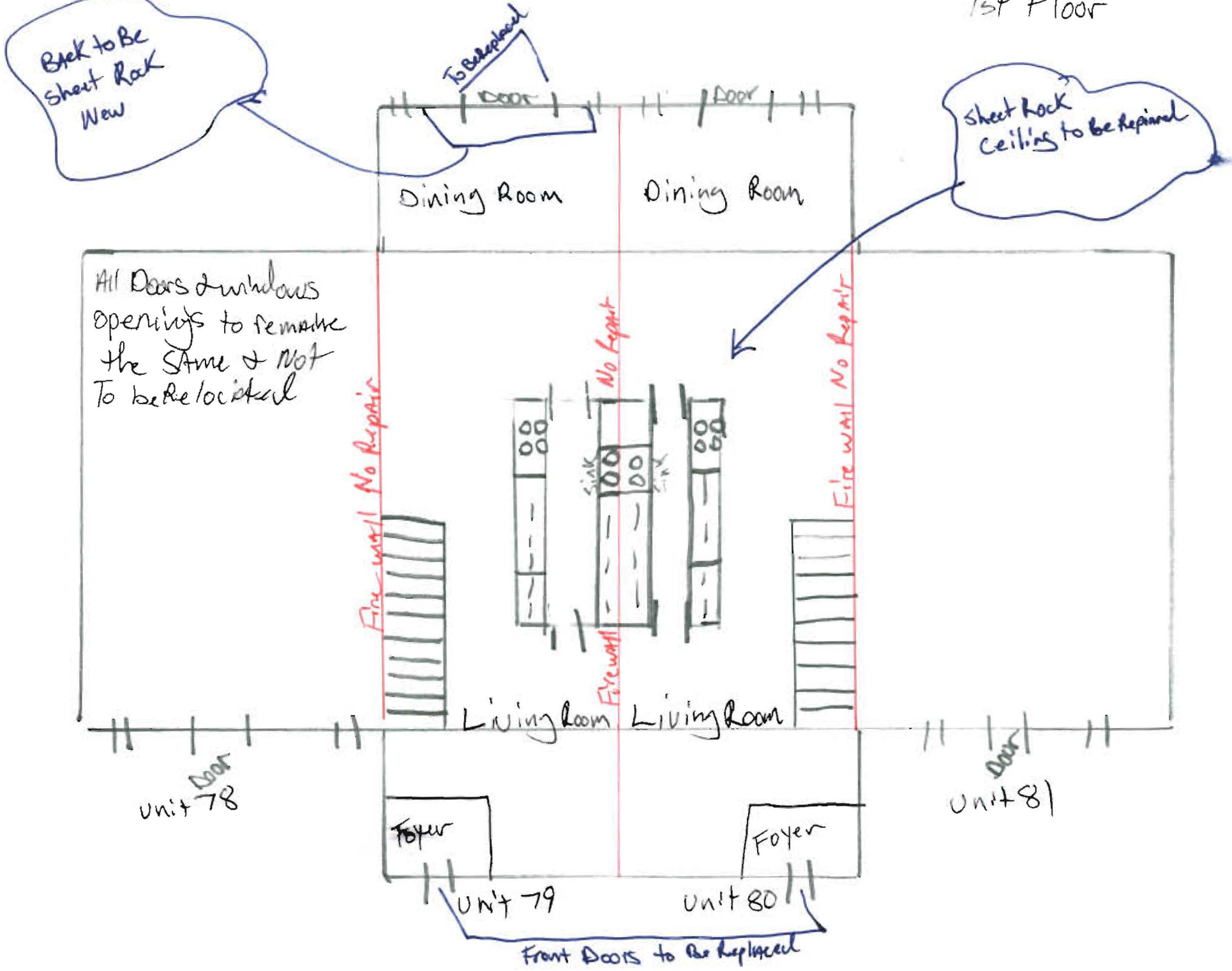
All Doors to be replaced

Replace only
Sheet Rock @ Ceiling
and patch holes on the walls

1st Floor

Back to Be
Sheet Rock
New

Sheet Rock
Ceiling to be Repaired



All Doors & Windows
openings to remain
the same & not
to be relocated

Dining Room

Dining Room

Living Room

Living Room

Foyer

Foyer

Unit 79

Unit 80

Unit 78

Unit 81

Front Doors to Be Replaced

To Be Replaced

Door

Door

Fire wall No Repair

No Repair
Fire wall

Fire wall No Repair

Scope of Work:

Contractor is to provide all labor, supervision, material, equipment, and permits to perform the following work. All work in this section shall conform to the municipal, county, state and federal codes of the agencies having jurisdiction over this work. Contractor is responsible for applying and securing all required permits prior to the commencement of the work. Copies of the permits shall be sent to the Project Manager prior to the start to work. The contractor has visited the site and verified all quantities and takeoff. The intent of these specifications is to address the repairs to apartments ## 79 and 80 at Tamarlane Apartments, including but not limited to any demolition, sheet rocking, painting, plumbing, electrical work, and finish carpentry that is required to complete the apartment and make it ready for lease. The contractor will supply all needed materials except for those that are identified as being supplied by the owner in this contract.

Location of Work:

Tamarlane Apartments
48A Tamarlane Lane
Portland, ME 04103

General Conditions:

1. All work is to be performed Monday – Saturday between 8am and 5:00pm. Work may be performed on Sundays with the advanced permission of the property manager or Maintenance Director, and the project manager.
2. Once work has commenced contractor shall staff project with full crew until project is complete.
3. Contractor's onsite manager is to meet with the Property Manager or Maintenance Director daily and inform them of the previous days progress and the anticipate progress of the day.
4. Contractor's onsite manager shall be responsible to inform the Property Manager or Maintenance Director at least 48 hours prior to starting work in order to notify residents.

Description of Work -(Specifications):

1. Contractor is to supply all labor, supervision, materials, equipment and permits necessary in order to provide the owner with a complete job.
2. The contractor shall remove and install a new electrical panel inside unit to match the existing size.
3. The Contractor shall remove and install new wiring, new outlets, two new baseboard heaters, new light fixtures that are burned.
4. The Contractor shall remove and install a new tub and shower combo in bedroom # 2, remove and replace a shower unit in master bedroom, remove and install bathroom vent fans.
5. The Contractor shall remove and install 2 new toilets in both bedrooms, remove and install 2 sinks and faucets.

6. The Contractor shall remove and install 7 new interior doors to match existing, remove and install 5 new window units, a new rear entry door, new baseboard in upper level of unit, shelving in the closets.
7. The Contractor shall install 2 vanities and counters.
8. The Contractor shall remove and install new studs and charred joist where needed.
9. Contractor shall power wash exterior of building and remove loose paint on good siding and trim.
10. Contractor shall use kilz on all walls with smoke damage.
11. Contractor shall install new trusses, roof decking, ½ roof, 25 years 3 tab shingles GAF roof, 30 lb. felt, replace all damage ¾" plywood roof decking. Color to match the existing.
12. Contractor shall remove and install new sheetrock where fire damaged, 2x4 wall studs to replace of burned studs, new sheathing to replaced damaged one.
13. Contractor shall paint entire unit interior to match color of other units, paint doors, all trim, remove and install insulation in ceilings and walls as needed.
14. Contractor shall remove and install new vinyl to match existing, new soffit and fascia, new trim, new sheathing where burned.
15. Contractor shall install Tyvek for vapor barrier.
16. Contractor shall install R-33 fiber insulation on exterior walls.
17. Contractor shall install new sliding glass door. To match size and color to existing.
18. All work shall meet or exceed all applicable codes. The Contractor shall comply with all applicable OSHA regulations. The Owner reserves the right to stop the work at any time when a hazardous condition exists or is discovered.
19. Permits shall be secured by the contractor prior to the start of work unless otherwise indicated in writing by Owner. Original copies of all permits must be submitted to the Property Manager with copies to the Owner. The original permits shall be posted at the work site and shall be forwarded to the Owner upon completion of the work. Contractors shall have all licenses required by local code, statute or law.
20. Insurance requirements for this contract shall be as listed in the Supplementary General Conditions. An insurance certificate meeting the requirements must be submitted to the Project Manager and the Property Manager before work begins.
21. The Project Manager and Maintenance Director will determine the work schedule.
22. Project Manager and Maintenance Director will accept the work.
23. Workers are to be fully clothed at all times in a manner appropriate for the weather conditions. Workers shall not play radios or tapes that are disturbing to the residents and they shall only use designated restroom facilities. There shall be no consumption of alcoholic beverages or illegal drug use before or during the workday, either on or off the property.
24. All job-site personnel shall be United States Citizens or aliens properly documented and permitted to work in accordance with immigration and naturalization services regulations.



CITY OF PORTLAND, MAINE

Department of Building Inspections

761 _____ 20 05

Received from TST Contracting

Location of Work 46 Tamarlane

Cost of Construction \$ 28,033.00

Permit Fee \$ 273.00

Building (I1) Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 1661 B 025

Check #: 7734

Total Collected \$ 273.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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