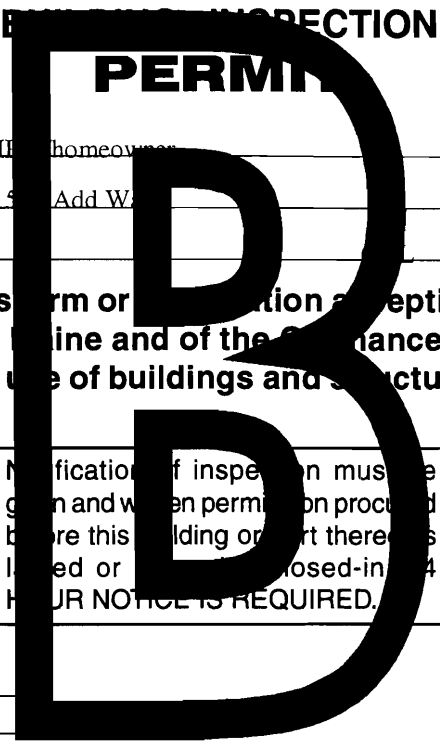


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached



PERMIT

Permit Number: 070192

This is to certify that DIMAJO CLORINDA HEI homeowner
has permission to Amendment to Permit #0515 Add Work
AT 75 ILLSLEY ST 167 E006001

PERMIT ISSUED
MAR 14 2007

provided that the person or persons who perform or supervise the work accepting this permit shall comply with all of the provisions of the Statutes of this State and of the Ordinances of the City of Portland relating to 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 when permission is procured before this building or part thereof is occupied or 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. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Thomas M. Maddy 3/5/07
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: 07-0192	Issue Date: PERMIT ISSUED	CBL: 167 F006001
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Location of Construction: 75 ILLSLEY ST	Owner Name: DIMAJO CLORINDA HEIRS	Owner Address: 75 ILLSLEY ST	Phone:
Business Name:	Contractor Name: homeowner	Contractor Address: CITY OF PORTLAND	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Duplex	Zone: R3

Past Use: Duplex	Proposed Use: Duplex- Amendment to Permit #051572 Add Wall	Permit Fee: \$30.00	Cost of Work: \$150.00	CEO District: 4
Proposed Project Description: Amendment to Permit #051572 Add Wall		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB JRC 2003	
		Signature:	Signature: Am 3/5/07	
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: ldobson	Date Applied For: 02/22/2007	Zoning Approval		
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1. This permit application does not 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..	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: _____	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 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: _____
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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



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 75 Illsley St CBL 167 F006001

Issued to Dimajo Clorinda Heirs Date of Issue 08/22/2008

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. 05-1572, 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

2nd floor apartment

APPROVED OCCUPANCY

Two Family Home
Use Group R3 Type5B
IRC 2003

Limiting Conditions: none

This certificate supersedes
certificate issued

Approved:

7-22-08

(Date)

Inspector

[Signature]

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.

ELECTRICAL PERMIT

City of Portland, Me.



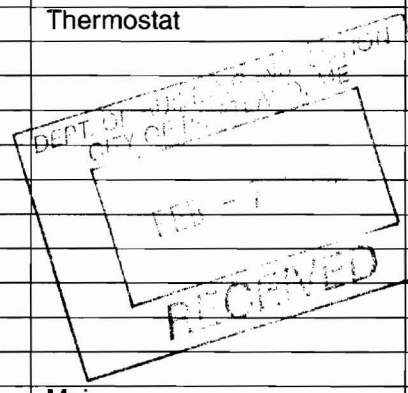
To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 2.7.06
 Permit # 2006-4106
 CBL# 16776

LOCATION: John Dimajo - 75 Illsley St METER MAKE & # _____
 CMP ACCOUNT # 441-1788079006 OWNER _____
 TENANT _____ PHONE # [scribble]

TOTAL EACH FEE

OUTLETS	Receptacles	Switches	Smoke Detector	
				.20
FIXTURES	Incandescent	Fluorescent	Strips	
				.20
SERVICES	Overhead	Underground	TTL AMPS <800	15.00
	Overhead	Underground	>800	25.00
				15.00
Temporary Service	Overhead	Underground	TTL AMPS	25.00
				25.00
METERS	(number of)			1.00
MOTORS	(number of)			2.00
RESID/COM	Electric units			1.00
HEATING	oil/gas units	Interior	Exterior	5.00
APPLIANCES	Ranges	Cook Tops	Wall Ovens	2.00
	Insta-Hot	Water heaters	Fans	2.00
	Dryers	Disposals	Dishwasher	2.00
	Compactors	Spa	Washing Machine	2.00
	Others (denote)			2.00
MISC. (number of)	Air Cond/win			3.00
	Air Cond/cent		Pools	10.00
	HVAC	EMS	Thermostat	5.00
	Signs			10.00
	Alarms/res			5.00
	Alarms/com			15.00
	Heavy Duty(CRKT)			2.00
	Circus/Carnv			25.00
	Alterations			5.00
	Fire Repairs			15.00
	E Lights			1.00
	E Generators			20.00
PANELS	Service	Remote	Main	4.00
TRANSFORMER	0-25 Kva			5.00
	25-200 Kva			8.00
	Over 200 Kva			10.00
				TOTAL AMOUNT DUE
				MINIMUM FEE 35.00
				MINIMUM FEE/COMMERCIAL 45.00



CONTRACTORS NAME Tolson Electric MASTER LIC. # 15110
 ADDRESS 94 Ash Swamp Rd Scarborough ME 04074 LIMITED LIC. # _____
 TELEPHONE 883-8025 OFFICE
671-2484 CELL
 SIGNATURE OF CONTRACTOR [Signature]