Application And Notes, If Any, Attached		Permit Number: <b>SPP</b> 096 3 2010
This is to certify that	SNE R /property owner	O'the of Dentile of
has permission to Repairs after fire, en	arge bathroom	City of Portland
AT	CBU_16	58 <del>-11001001</del>
provided that the person or pers	sons, firm or corporation accepting	g this permit shall comply with all
of the provisions of the Statutes	s of Maine and of the Ordinances	of the City of Portland regulating
the construction, maintenance a	and use of buildings and structure	s, 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 lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Health Dept.		
Appeal Board		// 10
Other Department Name		Director - Building & Inspection Services
Department Name		Director - Dunung a inspection services

PENALTY FOR REMOVING THIS CARD

## 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/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling
- X Final inspection required at completion of work, and in order to remove POSTED-NOTICE/ occupy the structure.

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.

		Building or Use Permit		Permit No:	Date Applied For:	CBL:
	-	Fel: (207) 874-8703, Fax: (	207) 874-8716	10-1096	09/03/2010	168 H001001
	ation of Construction:	Owner Name:		Owner Address:		Phone:
	5 SHERWOOD ST	TRUMBLE SHIRLEN		265 SHERWOOD	ST	
Bus	incss Name:	Contractor Name:		Contractor Address:		Phone
		property owner				
Less	see/Buyer's Name	Phone:		ermit Type: Alterations - Dwe	llings	
D	posed Use:					
1.1.1	ngle Family Home - Repairs a	fter fire, enlarge bathroom		l Project Description: s after fire, enlarge		
D	ept: Zoning State	is: Approved with Condition	s Reviewer:	Marge Schmucka	al Approval I	Date: 09/07/2010
	ote:					Ok to Issue:
		uired for future decks, sheds,	nools and/or pa	Tages		
		an additional dwelling unit.		5	nal kitahan aguinma	nt including but
2)		stoves, microwaves, refrigerat				ni uiciuding, oui
3)	This property shall remain a approval.	single family dwelling. Any c	change of use sha	ll require a separa	te permit application	n for review and
4)	This permit is being approve work.	d on the basis of plans submit	tted. Any deviat	ions shall require a	i separate approval l	pefore starting that
D	ept: Building State	is: Approved with Condition	s Reviewer:	Jonathan Rioux	Approval I	Date: 09/13/2010
N	ote:					Ok to Issue: 🗹
I)		ding permit; a close-in inspect e of girders. This permit does				s which may
2)	Hardwired interconnected ba level.	attery backup smoke detectors	s shall be installe	d in all bedrooms,	protecting the bedro	ooms, and on every
3)	There must be a 2" clearance level	e maintained between the chin	nney and any co	nbustible material,	with draft stopping	per code at each
4)		d for any electrical, plumbing, cial hood exhaust systems and				
	Application approval based	upon information provided by	applicant. Any	deviation from app	roved plans require	s senarate review

#### Comments:

9/13/2010-jrioux: Met with homeowner at counter, and received additional info (photos) for permits; headers are double or triple 2X8", will verify at close-in inspection.

City of Portland, Maine	- Building or Use	Permit Applicatio	on Pe	rmit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 8				10-1096			168 H	001001
Location of Construction:	Owner Name:		Owne	r Address:			Phone:	
265 SHERWOOD ST	TRUMBLE S	HIRLENE R	265	SHERWOOD	ST			
Business Name:	Contractor Name				Phone			
	property owne	r						
Lessce/Buyer's Name	Phone:		Permi	t Type:				Zone:
			Alte	erations - Dwe	llings			5
Past Use:	Proposed Use:		Perm	it Fee:	Cost of Worl	c: CI	EO District:	A 243
Single Family Home	Single Family	Home - Repairs after		\$510.00	\$49,00	0.00	4	
	fire, enlarge ba	athroom	FIRE	DEPT:	Approved	INSPECTION:		
				NA Denied Use Group			R)	Type: 50
						TRO	10005	~ /
Proposed Project Description:			1			71.9	1	11
Repairs after fire, enlarge bath	ıroom		Signa	ture		Signature:	//	15
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
"windows & s		sheotrick	Actio	Action Approved Approved w/Conditions Denied			Denied	
			Signa	lurc.		D	atc:	
Permit Taken By:	Date Applied For:			Zoning	Approva	1		
ldobson	09/03/2010			B		-	,	
1. This permit application d	oes not preclude the	Special Zone or Rev	iews	Zonin	g Appeal		Historic Pre	servation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		τ	Not in Distr	ict or Landmarl
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		Wetland		Miscellaneous			Does Not Require Review	
<ol> <li>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</li> </ol>		Flood Zone		Conditio	nal Use		] Requires Re	view
		Subdivision		Interpreta	ation		Approved	
		Site Plan			d		] Approved w	/Conditions
PERMIT	ISSUED	Maj Minor Mi Maj Minor Mi	ndit	Penied			Denied	3
SEP 1 :	3 2010	Diate. A	7/1D	Date <sup>.</sup>		Date	/	/
City of Po	ortland							

#### 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 Inspections

## **Original Receipt**

		B 9.3. 2010
Received from	Thin	leve Smith-
Location of Work	26	SShwood
Cost of Construction	\$	Building Fee: 570
Permit Fee	\$	Site Fee: Stop-
	Certifi	cate of Occupancy Fee:
		Total:
Building (IL) Plu	umbing (I5)	Electrical (I2) Site Plan (U2)
Other		
CBL: 186.1	1.1	
Check #:		Total Collected s
No work	is to be a	terted until normit issued

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

# SURG - A IZ IV

## **General 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: 265 Sherwood St						
Total Square Footage of Proposed Structure/Ar	ea Square Footage of Lot	Number of Stories				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# /68 H / Lessee/DBA (If Applicable)	Applicant *must be owner, Lessee or Buyer* Name Shirlene Trumb Address 265 Sherwood St City, State & Zip Portland, ME Owner (if different from Applicant) Name Address City, State & Zip	e 207-232				
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? <u>NO</u> If yes, please name <u>RECEIVED</u> Project description: Interior terrart fit-out of the CEIVED						
Contractor's name: Howe Owner SEP - 3 2010						
Address: <u>268 Sherwood St</u> City, State & Zip <u>Portland</u> IME <u>04103</u> City of Rephand Mane-3991 Who should we contact when the permit is ready: <u>Shirlene Trumble</u> Telephone: <u>232-3991</u> Mailing address: <u>Same</u>						

## Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections 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

This is not a permit; you may not commence ANY work until the permit is issued















