

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 071326

PERMIT ISSUED

OCT 23 2007

This is to certify that VALENTE JANET L /True with Home Systemhas permission to install 3 season walls on existing porchAT 20 PROVIDENCE ST

169 D00500

provided that the person or persons who perform or supervise the construction accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission procured before this building or part thereof is loaded or service closed-in. 24 HOUR NOTICE 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

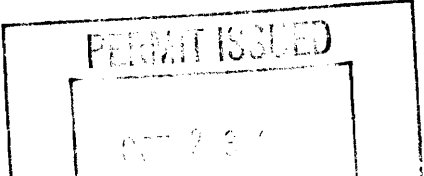
Thomas M. Mulla 10/23/07
Director - Building & Inspection Services

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: 07-1326		Issue Date:		CBL: 169 D005001	
Location of Construction: 20 PROVIDENCE ST		Owner Name: VALENTE JANET L		Owner Address: 20 PROVIDENCE ST	
Business Name:		Contractor Name: TrueNorth Home System		Contractor Address: 91 Industrial Park Rd Saco	
Lessee/Buyer's Name		Phone:		Phone: 2079852300	
Permit Type: Additions - Dwellings		Zone: R3			
Past Use: Single Family Home		Proposed Use: Single Family Home - install 3 season walls on existing porch		Permit Fee: \$130.00	
				Cost of Work: \$10,301.00	
				CEO District: 4	
Proposed Project Description: install 3 season walls on existing porch		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: R3 Type: SB FRC 2003	
		Signature:		Signature: Jm 10/23/07	
		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: Idobson	Date Applied For: 10/23/2007	Zoning Approval		
<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: Jm 10/23/07	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 checked="" 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: Jm 10/23/07
				

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 - Building or Use Permit

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

Permit No: 07-1326	Date Applied For: 10/23/2007	CBL: 169 D005001
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Location of Construction: 20 PROVIDENCE ST	Owner Name: VALENTE JANET L	Owner Address: 20 PROVIDENCE ST	Phone:
Business Name:	Contractor Name: TrueNorth Home System	Contractor Address: 91 Industrial Park Rd Saco	Phone (207) 985-2300
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family Home - install 3 season walls on existing porch	Proposed Project Description: install 3 season walls on existing porch
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 10/23/2007**Note:** **Ok to Issue:** ☒

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 10/23/2007**Note:** **Ok to Issue:** ☒

- 1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 2) Separate permits are required for any electrical, plumbing, or HVAC systems.
Separate plans may need to be submitted for approval as a part of this process.



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: <u>20 PROVIDENCE ST. PORTLAND, ME. 04103</u>		
Total Square Footage of Proposed Structure <u>126.5 SQ FT.</u>		Square Footage of Lot <u>10,562 SQ FT</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>169 D005 001</u>	Owner: <u>VALENTE, JANET</u>	Telephone: <u>772-0574</u>
Lessee/Buyer's Name (If Applicable) <u>NA.</u>	Applicant name, address & telephone: TrueNorth Home Systems 91 Industrial Park Road Saco, ME 04072 <u>985-2300 Ex 211</u>	Cost Of Work: \$ <u>10,301</u> Fee: \$ _____ C of O Fee: \$ _____
Current Specific use: <u>SINGLE FAM.</u> If vacant, what was the previous use? <u>NA</u> Proposed Specific use: <u>NA SAME</u>		
Project description: <u>INSTALL OUR 3 SEASON WALL PATIOS ON AN EXISTING PORCH.</u>		
Contractor's name, address & telephone: TrueNorth Home Systems 91 Industrial Park Road Saco, ME 04072 Who should we contact when the permit is issued: _____ Mailing address: _____ <u>985-2300 Ex. 211</u>		

Please submit all of the information outlined in the Commercial Application 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 visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703. OCT 23 2007

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 of applicant: [Signature]

Date: 9/26/07

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



Office Use ONLY
C.I.D. 4047
C.T.C.I.C. 070909

Kennebunk Division
71 Portland Rd., Kennebunk, ME 04043
Tel: 207-985-2300 • Fax 207-985-1691

Brewer Division
P.O. Box 699, Brewer, ME 04412
421 Wilson St., Brewer, ME 04412
Tel: 207-992-2805 • Fax: 207-922-2809

Mailing Address

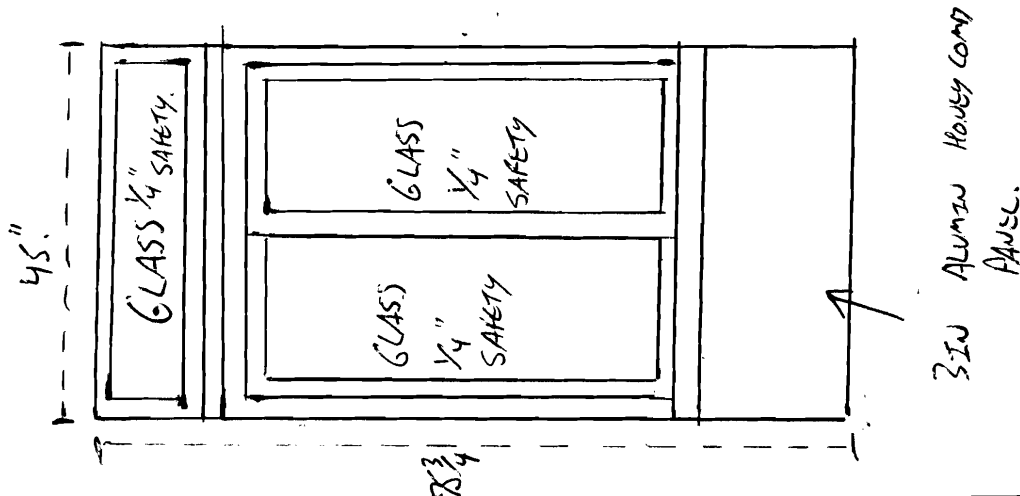
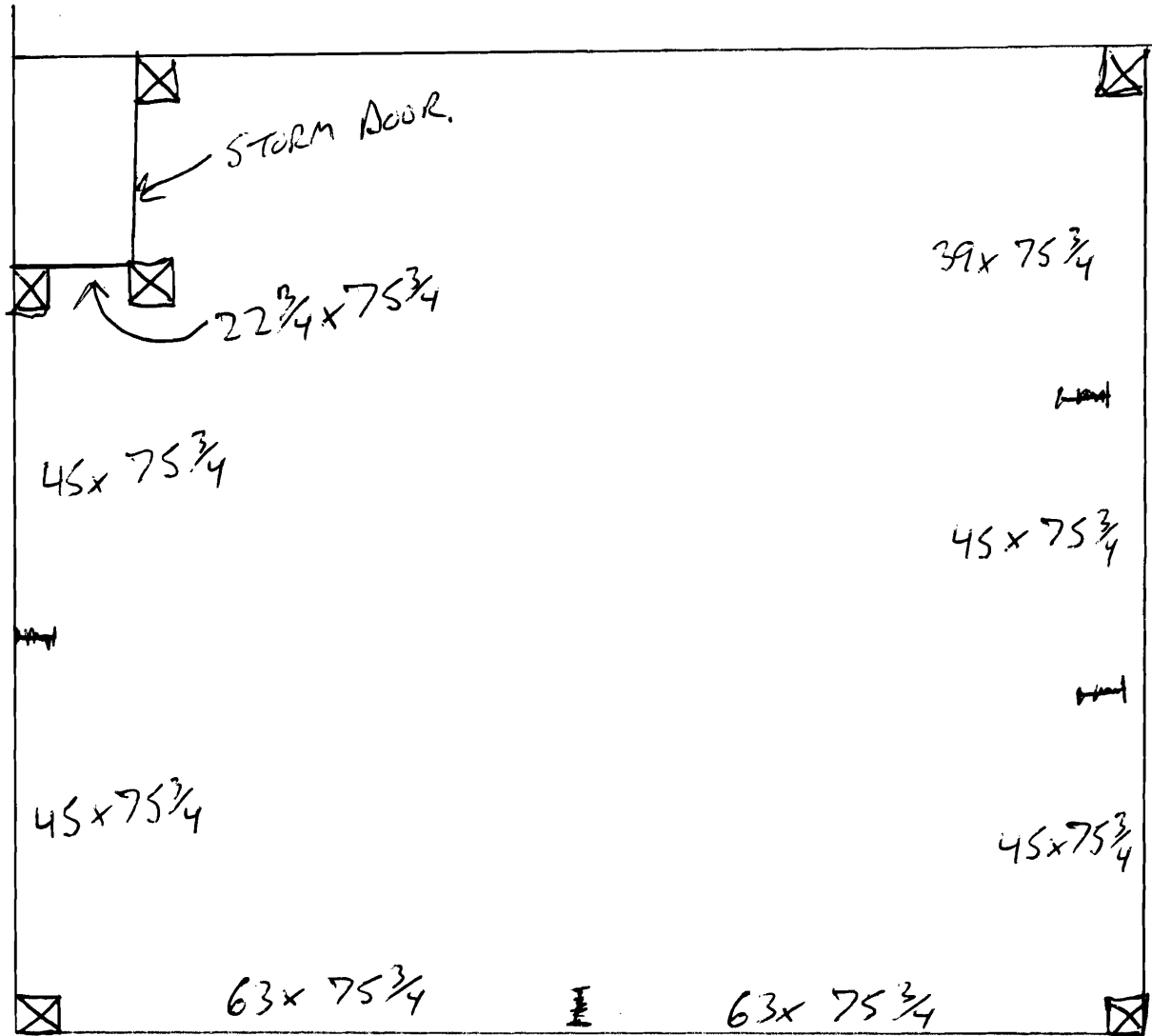
Job Address

Name <u>Jan Valente</u>		Date: <u>9/7/07</u>
Street <u>20 Providence St.</u>		
City, State, Zip <u>Portland, ME 04103</u>		
E-mail Address:		Phone: <u>772-0574</u> W(C) <u>294-4800</u>
<p>A-Wall</p> <p>Wing Glass: Y <input checked="" type="radio"/> N Transom Glass: <input checked="" type="radio"/> Y N Knee wall Glass: Y <input checked="" type="radio"/> N</p>	<p>B-Wall</p> <p>Transom Glass: <input checked="" type="radio"/> Y N Knee Wall Glass: Y <input checked="" type="radio"/> N</p>	<p>C-Wall</p> <p>Wing Glass: Y <input checked="" type="radio"/> N Transom Glass: <input checked="" type="radio"/> Y N Knee wall Glass: Y <input checked="" type="radio"/> N</p>
<p>Room Selection:</p> <p><u>3-Season</u> Under Existing: <u>YES</u> COLOR <u>N/A</u></p> <p><u>3-Season w/dual glazing</u> Studio Slope: _____ Roof: _____</p> <p><u>Vinyl Sunroom</u> A-Frame: _____ Walls: <u>WHITE</u></p> <p><u>Conservatory</u> Dormer: Y <input checked="" type="radio"/> N Other: _____</p>		
All Dimensions nominal Room Dimension: W <u>12</u> x P <u>12</u>		
Deck Work: All framing in treated lumber and built to local code.		
Room Deck: NEW: _____ V W C Insulation <input checked="" type="radio"/> N Steps: <u>V W C</u>		
Exterior Deck: NEW: _____ V W C Railings: <u>V W C</u>		
Other: <u>1/2 sub floor</u> V = Vinyl W = Treated Wood C = Composite		
Accessories:		
Lattice: Y <input checked="" type="radio"/> N Wood Vinyl Fan Mount: Y <input checked="" type="radio"/> N Entry Door/House Wall: <input checked="" type="radio"/> N <u>5206</u>		
Skirting: Y <input checked="" type="radio"/> N Wood/Vinyl Key Lock: <input checked="" type="radio"/> Y N New / Existing Opening <input checked="" type="radio"/> N (INSWING)		
Flooring: Y <input checked="" type="radio"/> N Basic Electric (V only) _____		
Exterior Wall: _____ Color: _____ Style: _____		
<u>GUTTER ON "C" SIDE, WRAP FASCIA + RAFTERS</u>		
<u>OTHER: NEW FOOTING, CARRIER BEAM, etc -</u>		
<u>FIBERGLASS DOOR W/ PSIN BRASS LOCKSET.</u>		
<p><small>TrueNorth Home Systems does not provide electrical, plumbing, paint/stain or finished floor covering unless otherwise noted. All Betterliving Patio & Sunrooms have a 15-year Manufacturers Warranty PLUS lifetime on glass breakage - TrueNorth Home Systems provides 5-year Workmanship Warranty To Original Purchaser.</small></p> <p>Price includes labor, materials, taxes and clean-up. Make all checks payable to: MWS, Inc.</p>		
Total Investment Of:		<p>Balance Acquired Through MWS, Inc. Approved Financing <u>Deposit 9-8-07</u> <u>check #503</u> <u>Jan.</u></p>
Initial Deposit With Order:		
Additional Deposit Due <u> </u> / <u> </u> / <u> </u> :		
Balance Due Upon Completion:		

The above prices, specifications and conditions are satisfactory and are hereby accepted. Contractor is authorized to do work as specified. Payment will be made as outlined above. Terms are as specified on the back of this agreement.

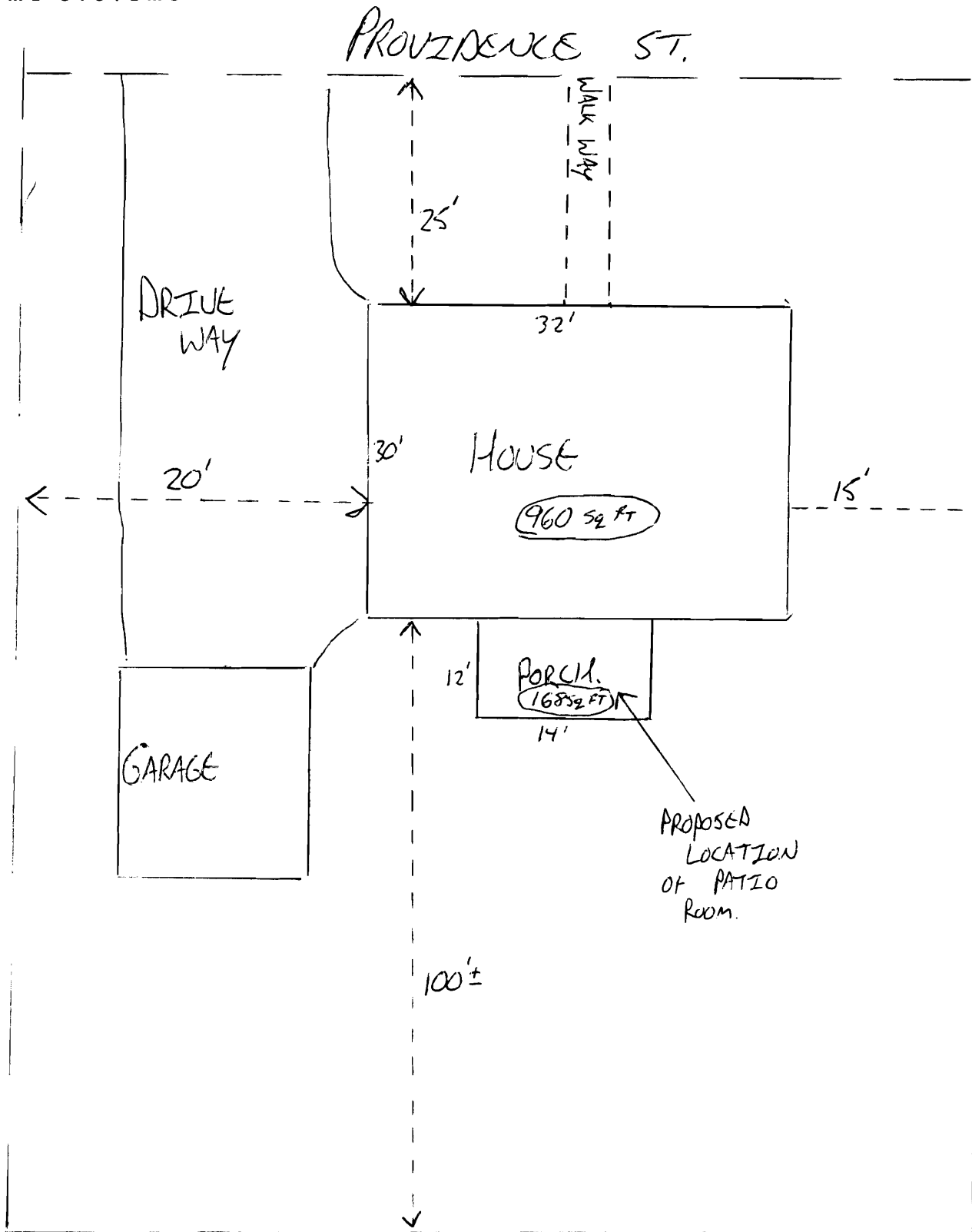
Date Accepted: _____
James Morrow
Company Authorized Representative

Signature: Jan Valente
Signature: _____



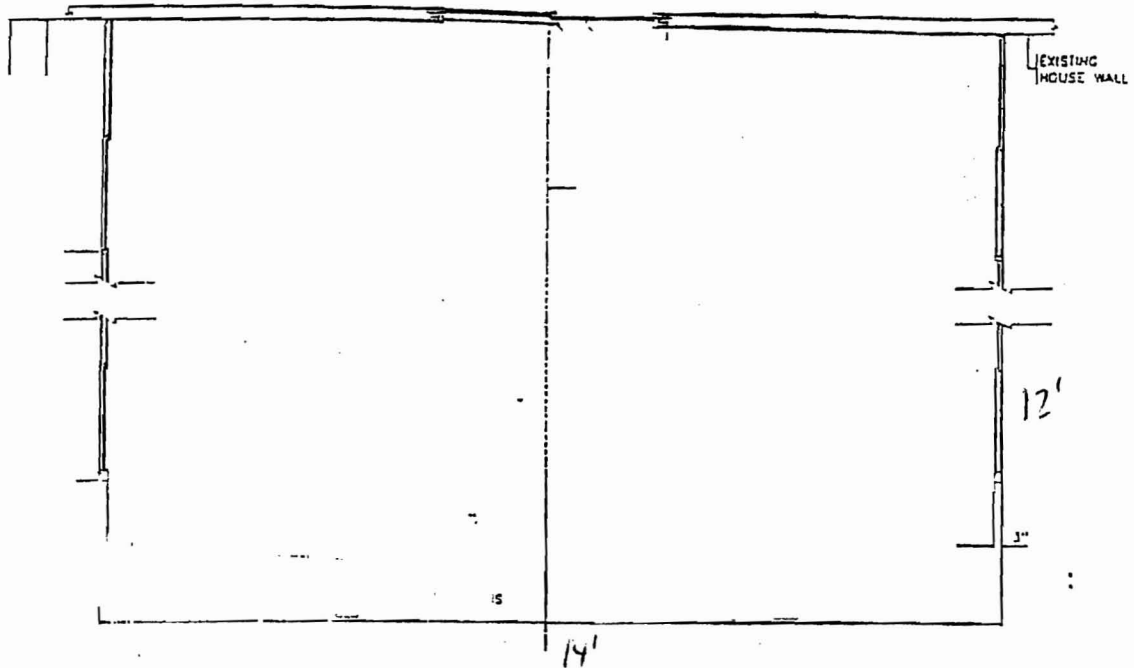
PLOT PLAN.

VALENTIS, JANET
20 PROVIDENCE ST.

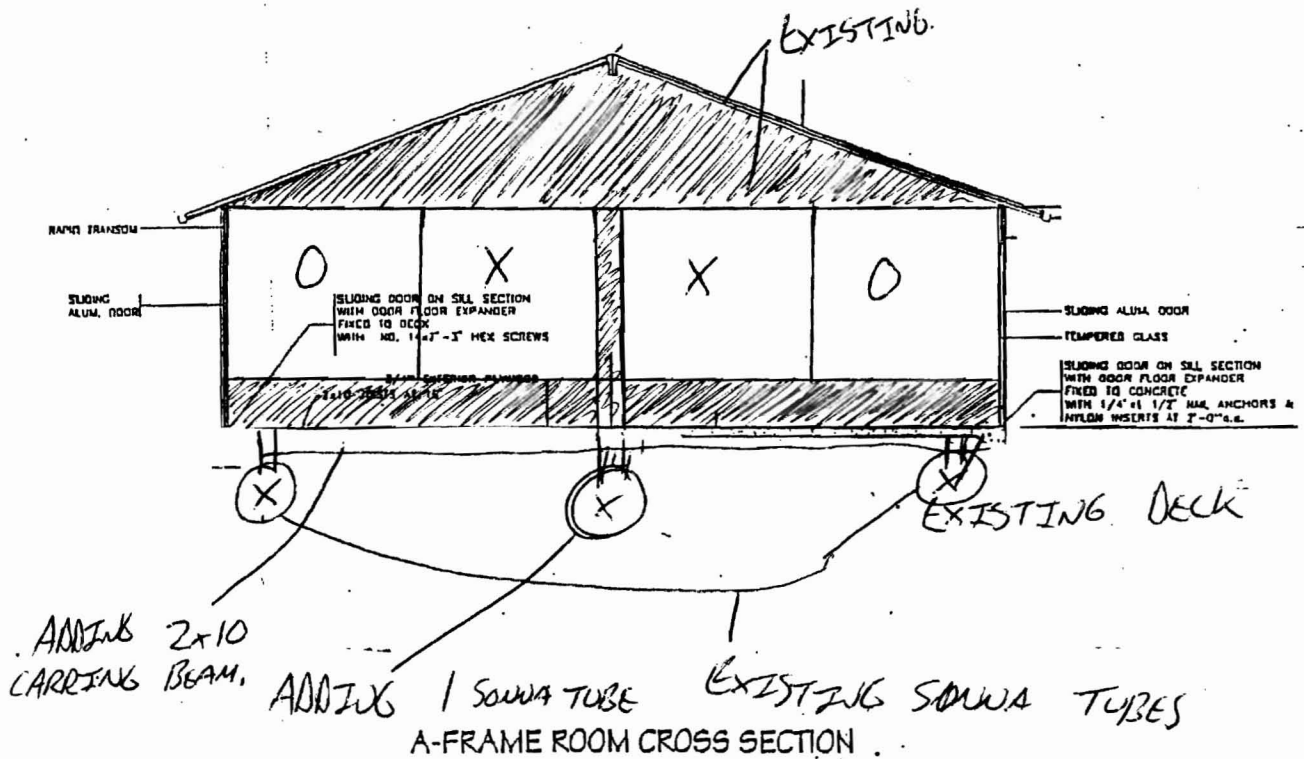


20 PROVIDENCE ST.
VALENTE, JANET.

FIGURE 40.1 - A-FRAME ROOM



A-FRAME ROOM FLOOR PLAN



SEE NOTES ON PAGE 4.0.2

PLACER, JAVIST,
JOB NAME

20 MECHABUCK ST
JOB ADDRESS

24" TO Grade

3/4" Advantech
Plywood

2x8pt
Double Rim

2x10
Carrying Beam

2x8 Joists,
16" O.C.

4x4pt
Sandwiched between
2x10 Beams
10" Long tube
4/8" in ground
Spaced no
more than
8' apart

3 Solid Tubes,
2 EXISTING ANALOG / IN MIDDLE.

(X)

(X)

(X)

4x4pt
Sandwiched between
2x10 Beams

95"

134"

BUILDING PERMIT INSPECTION PROCEDURES

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

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.

<input checked="" type="checkbox"/> <u>Footings/Building Location Inspection:</u>	Prior to pouring concrete
<input checked="" type="checkbox"/> <u>Re-Bar Schedule Inspection:</u>	Prior to pouring concrete
<input checked="" type="checkbox"/> <u>Foundation Inspection:</u>	Prior to placing ANY backfill
<input checked="" type="checkbox"/> <u>Framing/Rough Plumbing/Electrical:</u>	Prior to any insulating or drywalling
<input checked="" type="checkbox"/> <u>Final/Certificate of Occupancy:</u>	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.

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

XLS 2
Signature of Applicant/Designee

Date

[Signature]
Signature of Inspections Official

Date

CBL: 169-D-5

Building Permit #: 071326