

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

PERMIT ISSUED
Permit Number: 051407
OCT 25 2005
CITY OF PORTLAND

This is to certify that Strout Development Llc/Richard and Gerry
has permission to build 21x7' dormer on unit #605 unit reference
AT 836 Washington Ave 170 B017001

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 when permission is 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. Gary Cass FED 10/24/05
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Debbie Bourke 10/24/05
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:	05-1407	Issue Date:	OCT 25 2005	JOB:	1707B017001
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Location of Construction: 836 Washington Ave	Owner Name: Strout Development Llc	Owner Address: 47 Revere St	Phone: 409-9876
Business Name:	Contractor Name: Richmond Gerrish	Contractor Address: 135 Puritan Drive	Phone: 207-887745
Lessee/Buyer's Name:	Phone:	Permit Type: Alterations - Multi Family	Zone: R5

Past Use: 5 unit residence entire property use: 12 residential condominium units per permit #05-0101	Proposed Use: 5 unit residence with 21x7' dormer added to unit #6 (building #4- 5 units)	Permit Fee: \$48.00	Cost of Work: \$2,400.00	CEO District: 4
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied w/ Conditions	INSPECTION: Use Group: R3 Type: 5B IBC-2003
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Proposed Project Description:
build 21x7' dormer on unit #6 of 5 unit residence
Just shell of Dormer

Signature: *Gregory Cross* Signature: *AMB 10/24/05*
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: jharris	Date Applied For: 09/23/2005	Zoning Approval
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- 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 checked="" type="checkbox"/> Wetland <i>OK per 1A-436 using 1987 50% Allowed</i> <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: <i>10/14/05</i>	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: <i>AMB</i>
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closed

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

ELECTRICAL PERMIT

City of Portland, Me.

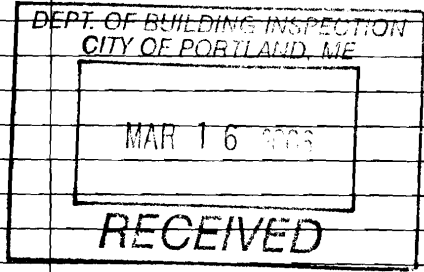


To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications: #6

Date March 16, 06
 Permit # 064221
 CBL# 170 B 017

LOCATION: 838 WASHINGTON AV METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER JEFF CORBIN
 TENANT _____ PHONE # _____

							TOTAL EACH FEE		
OUTLETS	20 3	Receptacles	6	Switches	2	Smoke Detector	.20	5.60 60	
FIXTURES		Incandescent		Fluorescent		Strips	.20		
SERVICES		Overhead		Underground		TTL AMPS <800	15.00		
		Overhead		Underground		TTL AMPS >800	25.00		
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			
		REPAIRS JACT				TOTAL AMOUNT DUE			
		MINIMUM FEE/COMMERCIAL 45.00				MINIMUM FEE	35.00		



CONTRACTORS NAME M W LEVINE
 ADDRESS POB 875 GRAY ME
 TELEPHONE 650 1346
 SIGNATURE OF CONTRACTOR M W Levine

MASTER LIC. # 3507
 LIMITED LIC. # _____
#19756