

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION PERMIT

Permit Number: 060057

This is to certify that LAYNE MARTHA A /CSI holders

has permission to remodel living room and Kitchen

AT 37 ROSEMONT AVE 176 A009001

provided that the person or persons who accept 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.

Modification of inspection must be given and when permission proceed before this building or part thereof is started or service closed-in. 4 YOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

PERMIT ISSUED
OTHER REQUIRED APPROVALS
FEB - 3 2006
CITY OF PORTLAND

Fire Dept.
Health Dept.
Appeal Board
Other

[Signature]
2/3/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

PERMIT ISSUED

Permit No: 06-0057	Issue Date: FEB - 3 2006	CBL: 176 A009001
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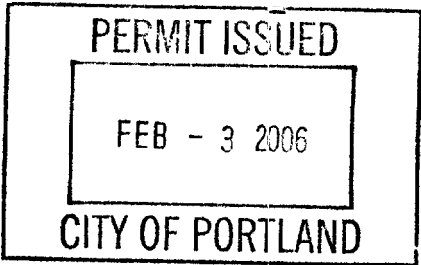
Location of Construction: 37 ROSEMONT AVE	Owner Name: LAYNE MARTHA A	Owner Address: 37 ROSEMONT AVE	Phone:
Business Name:	Contractor Name: CSI Builders	Contractor Address: 492 Woodfords Street Portland	Phone: 2077975454
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-5

Past Use: Single Family Home	Proposed Use: Single Family Home/ remodel living room and Kitchen	Permit Fee: \$93.00	Cost of Work: \$8,000.00	CEO District: 3
Proposed Project Description:		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>W/A</i>	INSPECTION: Use Group <i>R-3</i> Type <i>SB</i> <i>IRC 2003</i> Signature: <i>[Signature]</i>	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied	Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 01/11/2006	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 checked="" 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>2/3/06</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>2/3/06</i>
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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 - Building or Use Permit

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

Permit No: 06-0057	Date Applied For: 01/11/2006	CBL: 176 A009001
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Location of Construction: 37 ROSEMONT AVE	Owner Name: LAYNE MARTHA A	Owner Address: 37 ROSEMONT AVE	Phone:
Business Name:	Contractor Name: CSI Builders	Contractor Address: 492 Woodfords Street Portland	Phone (207) 797-5454
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Single Family Home/ remodel living room and Kitchen	remodel living room and Kitchen
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 0210312006

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.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 0210312006

Note: **Ok to Issue:**

- 1) There must be a 2" clearance maintained between the chimney and any combustible material, and fire blocking per code at each level
- 2) Separate permits are required for any electrical, plumbing, or heatmg.
- 3) Permit approved based on the plans submitted and reviewed wiownericontractor, with additional information as agreed on and as noted on plans.



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.

Total Square Footage of Proposed Structure EXISTING			Square Footage of Lot EXISTING		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 176 A 9			Owner: MARTY LAYNE 37 ROSEMONT AVE PORTLAND, ME 04103		Telephone: 828-5205
Lessee/Buyer's Name (If Applicable)			Applicant name, address & telephone: C.S.I. BUILDERS INC. 41 Woodville Rd. Falmouth, ME 04103		cost Of Work: \$ 8,000 Fee: \$ C of O Fee: \$ 100 93.00
Current Specific use: <u>LIVING ROOM - Kitchen</u>					
If vacant, what was the previous use? _____					
Proposed Specific use: <u>SAME</u>					
Project description: <u>Remodel Living room + Kitchen wall</u>					
Contractor's name, address & telephone: <u>C.S.I. BUILDERS INC.</u>					
Who should we contact when the permit is needed? <u>ANAN ROSENBAUM</u>					
Mailing address: <u>04105</u>					

Please
Failure
In order
request
www.portland.gov

9:30
Friday
2/3/06

the Commercial Application Checklist.
of your permit.

For the project, the Planning and Development Department may
For further information visit us on-line at
Room 315 City Hall or call 874-8703.

I hereby certify
that I have been authorized
to act as the authorized representative of the property owner.
In addition, I certify that the Code Official's authorized representative shall have the authority to enforce the provisions of the codes applicable to this permit.

I hereby certify that the owner of record authorizes the proposed work and that I have been authorized to act as the authorized representative of the property owner. I agree to conform to all applicable laws of this jurisdiction. In addition, I certify that the Code Official's authorized representative shall have the authority to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>1/11/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.