Form # P 04 DISPLAY THIS CA	RD ON PRINCIPAL FRONTA	GE OF WORK
Please Read Application And	TY OF PORTLAND	
Notes, If Any, Attached	PERIMA	Permit Number: 070021
This is to certify thatVERONEAU NANCY J /	K: Builders	PERMIT ISSUED
has permission to Remodel Bathroom, move	e w	JAN 1 7 2007
AT 40 CALDWELL ST	L 176 B02	
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	of the and of the chances of the	s permit shall comply with all ne City of Portland regulating nd of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	bre this adding or any there as	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		111/07
Health Dept		
Appeal Board		
Other Department Name		Director - Building Inspection Services
PEN	NALTY FOR REMOVING THIS CARD	

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City of Portland, Ma	ine - Building or Use	Permit Applicatio	n Peri	mit No:	Issue Date:	CBL:	<u></u>
•	101 Tel: (207) 874-870			07-0021		176 B0	22001
Location of Construction: Owner Name:		Owner	Address:		Phone:		
40 CALDWELL ST	VERONEAU	VERONEAU NANCY J		ALDWELL S	T		
Business Name:	Contractor Nam	ne:	Contra	ctor Address:		Phone	
	King Builders	S	102 E	Baxter Blvd. I	Portland	20765369	974
Lessee/Buyer's Name	Phone:		Permit	Type: rations - Dwe			Zone:
Past Use:	Proposed Use:		Permit		Cost of Work:	CEO District:	<u> ;-</u>
Single Family Home		Home - Remodel					
Bathroom, mo			FIRE			$\frac{\text{PECTION:}}{\text{Group: } \mathcal{R} - 3}$	Type: 5B
Proposed Project Description:			1 /		c	- Cala	1
Remodel Bathroom, mov	e wall		Signature: Signature:			\leq	
			Action Signat	a: 📋 Approv	ed Approved	I w/Conditions	Denied
Permit Taken By:	Date Applied For:			Zoning	Approval		
ldobson	01/05/2007						
	on does not preclude the	Special Zone or Revi	ews	Zonin	g Appeal	Historic Pres	
Applicant(s) from me Federal Rules.	eeting applicable State and	Shoreland	har	Variance		Not in Distri	et or Landmark
2. Building permits do not include plumbing, septic or electrical work.		Wetland Work		Miscellaneous		Does Not Re	equire Review
3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		Conditional Use		🔲 Requires Re	view
False information may invalidate a building permit and stop all work		Subdivision		Interpretation		Approved	
		Site Plan			d	Approved w	/Conditions
PERMIT IS	SUED	Maj Minor MM	1	Denied		Denied ABM	
JAN 1-7	2 miles	De ul cardinais Date: 1/8/07 AM	и	Date:		Date:	
CITY OF POI							

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.

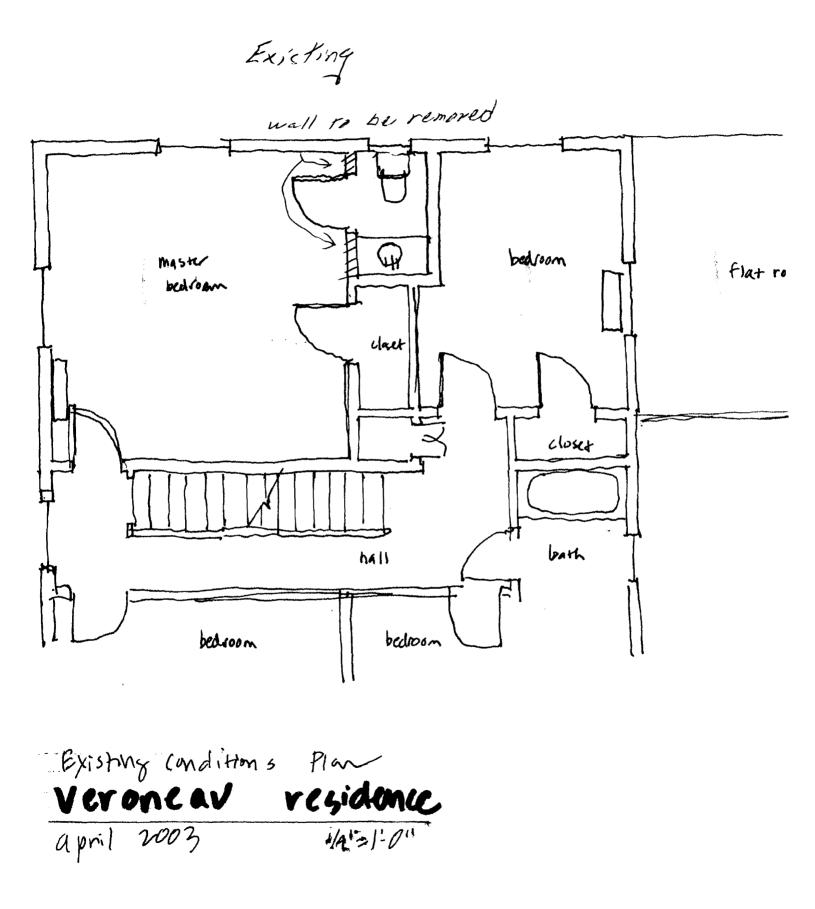
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
PESDONSIDI E DEDSON IN CHADGE OF WORK TITLE			BUONE

City of Portland, Maine - Bu	0	Permit No: 07-0021	Date Applied For: 01/05/2007	CBL: 176 B022001		
389 Congress Street, 04101 Ter. (207) 874-8705, Fax: (207) 874-8710						
Location of Construction:	ocation of Construction: Owner Name: Ow			Owner Address: Phone:		
40 CALDWELL ST	VERONEAU NANCY	J	40 CALDWELL ST			
Business Name:	Contractor Name:	(Contractor Address:		Phone	
	King Builders		102 Baxter Blvd. Portland		(207) 653-6974	
Lessee/Buyer's Name	Phone:	P	Permit Type:			
			Alterations - Dwe	llings		
Proposed Use:		Proposed	Project Description			
Single Family Home - Remodel Bat	hroom, move wall	Remod	el Bathroom, mov	e wall		
Dept: Zoning Status:	Approved with Conditions	s Reviewer:	Ann Machado	Approval I	Date: 01/08/2007	
Note:					Ok to Issue:	
 This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval. 						
 This permit is being approved o work. 	n the basis of plans submit	tted. Any deviati	ions shall require a	a separate approval t	before starting that	
Dept: Building Status:	Approved with Conditions	s Reviewer:	Tammy Munson	Approval D	Date: 01/11/2007	
Note: Ok to Issue:						
1) Separate permits are required for Separate plans may need to be s		•				



All Purpose 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.

rotal Square Footage of Proposed Struc ろう	ture	Courses Fasters				
<u></u>		Square Footage	of Lot			
		10243	<u>.</u>			
ax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	1		Telephone:		
176 B 22	Mar	of Vero.	ncau			
essee/Buyer's Name (If Applicable)	telephone	name, address & King Brij/du	-	ost Of /ork: \$ <i>5_0_0</i> 0		
NA	102 Be	ter Blud.		**: \$?0 FOD		
Current use: <u>Single Famil</u>						
the location is currently vacant, what v		NA		\$\		
pproximately how long has it been vac	cant:					
Proposed use: <u>Same</u> Project description: <u>Removel</u> bathroom						
oject description: Remodel be	Throom			$\frac{1}{\sqrt{2}}$		
ontractor's name, address & telephone	King E	Builders, 4				
'ho should we contact when the permi	t Is ready:	eoff Ring	$\overline{}$			
alling address: 102 Baster	Blud.	-	$\backslash \bigvee$	X		
e will contact you by phone when the view the requirements before starting o nd a \$100.00 fee if any work starts befor	any work, with	a Plan Reviewer.	A stop work			
HE REQUIRED INFORMATION IS NOT INC		SUBMISSIONS THE	PERMIT WILL B			
VIED AT THE DISCRETION OF THE BUILDING ORMATION IN ORDER TO APROVE THIS P	-,	DEPARTMENT, WE I	MAY REQUIRE	ADDITIONAL		
əby cərtify that I am the Owner of record of the I ə been authorized by the owner to make this app						
diction. In addition, if a permit for work described I have the authority to enter all areas covered by Is permit.	In this application	n Is Issued, I certify that	the Code Officie	al's authorized representative		
gnature of applicant: Keetha	ATL	Da	ie: //5	-10-1		
This is NOT a permit, you play n ou are in a Historic District you m						



wer wall to be built since in colo bathroom n Shur bedroom Master bedram 12' × 13' +/-Spruce 2×4 Framing and Scheme B-Vor oncou residence april 2003 14=1-0"

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BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 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.

Footing/Building Location Inspecti	on: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electric	al: Prior to any insulating or drywalling
Final/Ce rtificate of Occupa ncy: 1	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per nspection 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

 $\frac{\sqrt{gaK}}{\sqrt{gaK}}$ If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

_ CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, **BEFORE THE SPACE MAY BE OCCUPIED**

Signature of Applicant/Designee

Signature of Inspections Official

Date Date

CBL: 174 B 6.22 Building Permit #: 07 - 002

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Instin 1-10

PLUM	BING /	APPLICATI	ON			Department of Health and Human Services Division of Environmental Health	
E	ROPERT	Y ADDRESS		6			
Town or Plantation Portland				ITL & OZZ			
Street Subdivision Lot # 40 caldwell St PROPERTY OWNERS NAME				PORTLAND PERMIT # 10168 STATE COPY			
PRC	PERTY O	WNERS NAME	1990 Carlot		107	S	
				Jennie Da	uhe	L.P.I.# 07.312	
Last: Applicant		First:		- (Local Plumbing inspecto	r Signature		
Name: Mailing Address of Owner/Applicant	Robert 158 St	John st	Purtland	- 0`	7-80	2176	
(If Different) Owner/Applicant Statement I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a/Permit.							
Signa	ture of Owner		Date	Local Plumbing Ir	Ispector Signatu	re Date Approved	
			ERMIT	TINFORMATIO	N		
This Application	on is for	Тур	pe of Structur	e To Be Served:	Plu	imbing To Be Installed By:	
1. D NEW PLUM	IBING	1. 🕅 SINGLE	FAMILY DWEI	LLING	1, 🗷 MAS	TER PLUMBER	
2. 🗆 RELOCATE	=D	2. 🗆 MC		MOBILE HOME		BURNERMAN	
PLUMBING		3. 🗆 MULTIPL	E FAMILY DW	/ELLING			
		4. 🗆 OTHER -	- SPECIFY				
					5. 🗌 P R O	PERTY OWNER	
l					LICENS	E# 1568	
	p & Piping Re sum of 1 Hook		Number	Column 2 Type of Fixture	Number	Column1 Type of Fixture	
	UP: to public	sewer in the connection	. H	Hosebib / Sillcock		Bathtub (and Shower)	
is not re		inspected by	F	-loor Drain	1	Shower (Separate)	
	OR		ι	Jrinal		Sink	
HOOK- wastewa	<u>UP:</u> to an exi ater disposal	isting subsurface system.	E	Drinking Fountain	j	Wash Basin	
			Iı	ndirect Waste	1	Water Closet (Toilet)	
lines, dr	now fixtures		Vater Treatment Softener, Filter, etc.		Clothes Washer		
Green CITY OF BUILDING GREEN			Grease / Oil Separator		Dish Washer		
ME COUL			joor Drain	, i i	Garbage Disposal		
		linet		Laundry Tub			
			other:		Water Heater		
		RECOLLETVE	D_{\perp}	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE					Fixtures (Subtotal) Column 2		
					Total Fixtures		
					Fixture Fee		
						Transfer Fee	
					Hook-Up & Relocation Fee		
		$\land \land$		ir/ 1		Permit Fee	

INADINA CROWF

(207) 883-2999

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