Form # P 04

#### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

#### **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

## BU

Permit Number: 090065

This is to certify that SEARS CATHERINE has permission to Bathroom Addition in  AT 121 BRADLEY ST  provided that the person or pers of the provisions of the Statutes the construction, maintenance a	cons, file or co	ting this permit shall comply with all es of the City of Portland regulating tres, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Noti ation of spectio must be given he written ermission rocure before this built gor parthereof lather or other sed-in. 20 HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build-
OTHER REQUIRED APPROVALS  Fire Dept.  Health Dept.  Appeal Board  Other  Department Name	ENALTY FOR REMOVING THIS	Montage 01/28/09  CARD

City of Portland, Ma	aine - Buil	lding or Use	Permi	t Applicatio	n Pe	rmit No:	Issue Date	:	CBL:		
389 Congress Street, 04	4101 Tel: (	207) 874-8703	B, Fax:	(207) 874-871	6	09-0065			178 G0	07001	
Location of Construction:		Owner Name:		_	Owne	er Address:		-	Phone:		
121 BRADLEY ST	_	SEARS CATHERINE ANN & QUE		121 BRADLEY ST				207-775-1591			
Business Name: Contractor Nam				Contractor Address:				Phone			
		Tom Williams	<u> </u>		28 N	Mallison Stree	et Gorham		20723987	722	
Lessee/Buyer's Name		Phone:			Perm	it Type:				Zone:	
					Ado	ditions - Dwe	llings				
Past Use: Proposed Use:				Perm	it Fee:	Cost of Wor	·k:	CEO District:	7		
ļ ·		Single Family				\$120.00	\$10,00	00.00	3		
		cisting Space		FIRE	E DEPT:	Approved	INSPE	CTION:			
							Denied	Use Gr	oup: R 3	Type: 503	
						_			oup:R3 RCZ		
									RC 2	w 3	
Proposed Project Description	•			_					1.	6.1	
Bathroom Addition in Ex	cisting Space	;		96 <b>70</b>	Signa	iture:		Signatu	nature: /// 0 ( /2 8/09		
				i ja Ad	PEDE	ESTRIAN ACT	IVITIES DIS	TRICT (I	Γ (P.A.D.)		
					Actio	on: Appro	ved  Ap	proved w/	Conditions	Denied	
						_ ··					
					Signa	ature:			Date:		
Permit Taken By:		oplied For:				Zoning	Approva	al			
lmd	01/28	3/2009				,					
1. This permit applicat	ion does not	preclude the	Spe	cial Zone or Revi	ews	Zoni	ng Appeal		Historic Pres	ervation	
Applicant(s) from meeting applicable State and Federal Rules.		☐ Shoreland		☐ Variance			Not in District or Landmark				
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Review				
3. 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		☐ Flood Zone		Conditional Use		Requires Rev	view				
			Subdivision		☐ Interpretation			Approved			
			☐ Si	te Plan		Approve	ed		Approved w/	Conditions	
			Maj [	Minor MM		Denied			Denied		
				h/.					1	100/0	
			Date:	m 0//28	105	Date:		D	ate: Mod/	<u> 28/89'</u>	
I hereby certify that I am to I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to	o make this appl or work describe	med proication and in the	as his authorize application is i	he pro d agen ssued,	it and I agree I certify that	to conform the code of	to all ap ficial's a	oplicable laws outhorized repr	of this resentative	
SIGNATURE OF APPLICANT	Γ			ADDRES	S		DATE	,	РНО	ONE	
RESPONSIBLE PERSON IN C	THARGE OF W	ORK TITLE					DATE		PHO	NF	

### 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: /3/ Total Square Footage of Proposed Structure/		Square Footage of Lot		Number of Stories
80 59 -11	/			Trenting of Ottorion
Tax Assessor's Chart, Block & Lot	Applicant *	must be owner, Lessee or Bu	yer"	Telephone:
Chart# Block# Lot#		atherine Sears		
	Address /	21 Bradley St.		207-775-1591
	City, State &	& Zip fortland oyk	02	
Lessee/DBA (If Applicable)	Owner (if d	lifferent from Applicant)	Со	st Of <b>10,000</b> ork: \$ <b>10,000</b>
	Name		Wa	ork: \$ 10,000
3 2009	Address		C	of O Fee: \$
JAN 27 2009	City, State &	c Zip	То	tal Fee: \$
Proposed Specific use:   By Thrown  Is property part of a subdivision?  Project description:   Contractor's name:   Tom William  Address:   28 Mallison St.  City, State & Zip Gorham Mt.  Who should we contact when the permit is read	MS 04038	T	elepho	one: <u>207</u> 239-872,
Contractor's name: Tom William St.  Address: 28 Mallison St.	MS	T	elepho	
Contractor's name:	by: Toly outlined on automatic of	the applicable Checklishenial of your permit.	elepho	ne: <u>207 239-872</u> , ne: illure to ment Department
Contractor's name:	by: Toly outlined on automatic of the pance of a pern	The applicable Checklish denial of your permit.  The project, the Planning and Denit. For further information of the project o	elepho elepho st. Fa	one: 207 239-872, ne:  while to  ment Department ownload copies of
Contractor's name:	outlined on automatic of a perm is Division on-limed property, or opplication as his/described in this	the applicable Checklish denial of your permit.  e project, the Planning and Denit. For further information or that the owner of record author when authorized agent. I agree to sapplication is issued, I certify the	elepho elepho st. Fa evelopi r to do or stop rizes the	ne: 202 239-872 ne:  net Department ownload copies of by the Inspections e proposed work and cm to all applicable Code Official's
Contractor's name:	outlined on automatic of a perm is Division on-limed property, or opplication as his/described in this	the applicable Checklish denial of your permit.  e project, the Planning and Denit. For further information or that the owner of record author when authorized agent. I agree to sapplication is issued, I certify the	elepho elepho st. Fa evelopi r to do or stop rizes the	ne: 202 239-872 ne:  net Department ownload copies of by the Inspections e proposed work and cm to all applicable Code Official's

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

City of Portland Mai	ne - Building or Use Permit		Permit No:	Date Applied For:	CBL:	
•	01 Tel: (207) 874-8703, Fax: (20	)7) <b>874-8</b> 71 <i>6</i>	09-0065	01/28/2009	178 G007001	
Location of Construction:	Owner Name:		Owner Address:	-	Phone:	
121 BRADLEY ST	SEARS CATHERINE A	NN & QUE	121 BRADLEY ST	207-775-1591		
Business Name:	Contractor Name:	·	Contractor Address:	Phone		
	Tom Williams	Tom Williams		28 Mallison Street Gorham		
Lessee/Buyer's Name	Phone:		Permit Type: Additions - Dwellings			
Proposed Use:		Propose	d Project Description:			
-	room Addition in Existing Space	I -	oom Addition in Ex	isting Space		
Dept: Zoning	Status: Approved with Conditions	Reviewer:	Tom Markley	Approval D	Date: 01/28/2009	
Note:	••		•	• •	Ok to Issue:	
, , , , , , , , , , , , , , , , , , , ,	al for an additional dwelling unit. You has stoves, microwaves, refrigerators		•	* *	nt including, but	
<ol><li>This property shall remapproval.</li></ol>	nain a single family dwelling. Any cha	ange of use sh	all require a separat	e permit application	ı for review and	
Dept: Building	Status: Approved with Conditions	Reviewer:	Tom Markley	Approval D	Date: 01/28/2009	
Note:					Ok to Issue:	
Separate permits are re approval as a part of th	quired for any electrical, plumbing, H is process.	IVAC or exha	ust systems. Separa	te plans may need to	o be submitted for	
2) Application approval be and approrval prior to	ased upon information provided by apwork.	pplicant. Any	deviation from app	roved plans requires	s separate review	



### Permitting By Appointment

As part of Portland's city-wide effort to improve customer service and help streamline doing business within the City, the Inspections Division has developed a new permitting system for qualified properties and for specific construction projects. Under this new program, you may be eligible to receive a building permit on the day you have a scheduled appointment with Inspection staff.

This permitting program applies only to existing one and two family homes not located within a historic district or shore land zone.
Eligible Projects
Please submit a complete application with the required plans
☐ Interior renovations, gut rehabs including structural changes
□ Attached and detached garages
Additions, decks, sheds, pools, dormers (two family addition must be less than 500 s.f.)
Rebuild of any exterior structure listed above
Inspections are still required per City Code of Ordinance.
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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a> , stop by the Building Inspections office, room 315 City Hall or call 874-8703.
I hereby certify that this project meets the above criteria and that the work performed will not go beyond these parameters.
Signature of applicant: Messey MML Date: 1/27/07

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# Proposed Batheooin

124

Scale 1 = 1

Portland, ME 04102 vanity Contractor Tom Williams 28 Mallison St. Gorham, ME 04038 (207) 239-8722 78" Shower is Kit consisting of base w/glass sides
Prefab vanity

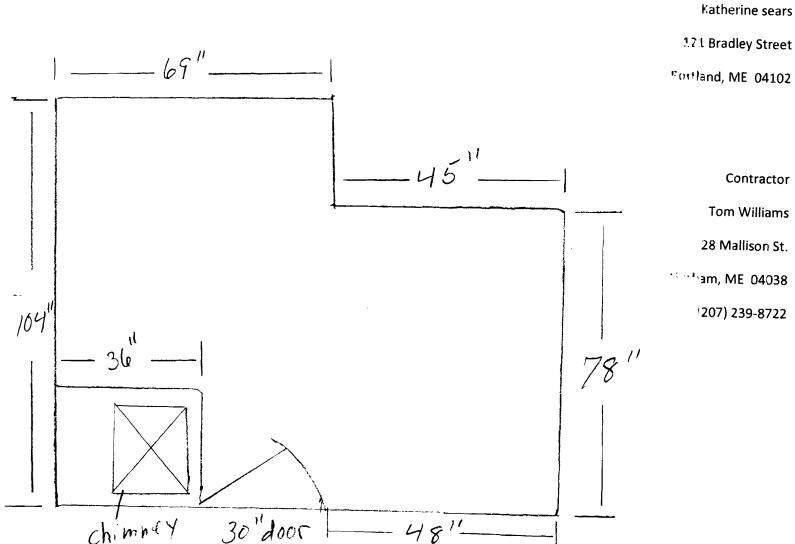
**Property Location** 

121 Bradley Street

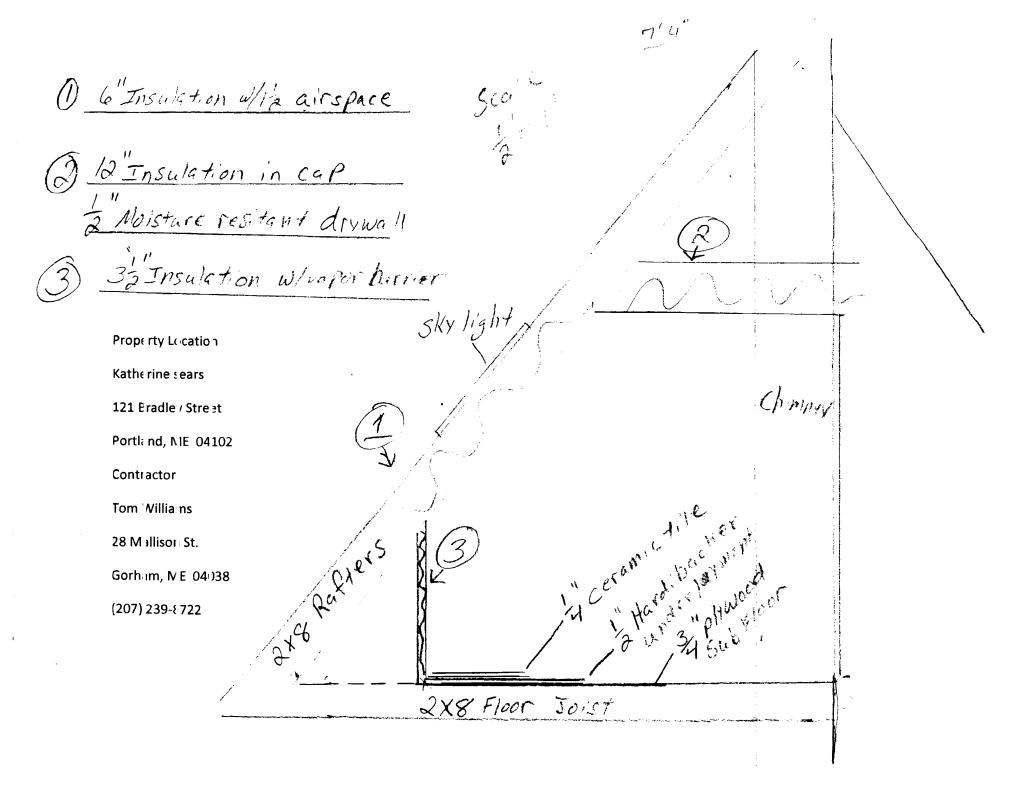
Katherine sears

# Existing Room Footprint

500 e



Property Location



#### **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 receip	ot of your building permit.
X Framing/Rough Plumbing/Electrical: Prior t	o Any Insulating or drywalling
X Final inspection required at completion of we	ork.
Certificate of Occupancy is not required for certain project your project requires a Certificate of Occupancy. All project	•
If any of the inspections do not occur, the project cannot REGARDLESS OF THE NOTICE OR CIRCUMSTA	•
CERIFICATE OF OCCUPANICES MUST BE ISSUE THE SPACE MAY BE OCCUPIED.	D AND PAID FOR, BEFORE
Thomas Mille	1/28/09
Signature of Applicant/Designee	Date 1 3 8 0 5
Signature of Inspections Official	Date .

**CBL**: 178 G007001 **Building Permit #**: 09-0065