

**DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK**  
**CITY OF PORTLAND**

Please Read  
Application And  
Notes, If Any,  
Attached

**BUILDING INSPECTION**

**PERMIT**

Permit Number: 040371

This is to certify that Illingworth Paul &/no contractor / self  
 has permission to add 2 bathrooms in third floor  
 AT 3 Runnells St 184 E007001

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 laid or closed-in. **48 HOUR 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. \_\_\_\_\_  
 Health Dept. \_\_\_\_\_  
 Appeal Board \_\_\_\_\_  
 Other \_\_\_\_\_

Department Name

CITY OF PORTLAND

PERMIT ISSUED

APR 08 2004

**PENALTY FOR REMOVING THIS CARD**

Director Building & Inspection Services

# 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:

Date 11-4-00  
Permit # 2004-5173  
CBL# 184E7

LOCATION: 3 Runnells ST. METER MAKE & # \_\_\_\_\_  
CMP ACCOUNT # \_\_\_\_\_ OWNER Thomas Esten  
TENANT \_\_\_\_\_ PHONE # 632-1853

						TOTAL EACH FEE			
OUTLETS	<u>6</u>	Receptacles	<u>4</u>	Switches		Smoke Detector	.20	<u>2.00</u>	
FIXTURES		Incandescent		Fluorescent		Strips	.20		
SERVICES		Overhead		Underground		TTL AMPS <800	15.00		
		Overhead		Underground		>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		
						TOTAL AMOUNT DUE			
						MINIMUM FEE/COMMERCIAL 45.00	MINIMUM FEE 35.00	<u>35.00</u>	

CONTRACTORS NAME Burleigh Elec. MASTER LIC. # MC60017266  
ADDRESS 125 Presumpscot St. LIMITED LIC. # \_\_\_\_\_  
TELEPHONE (207) 772-4747

SIGNATURE OF CONTRACTOR \_\_\_\_\_

White Copy - Office • Yellow Copy - Applicant

CL# 33899

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 04-0371	Issue Date: APR 08 2004	CEL: 184 E007001
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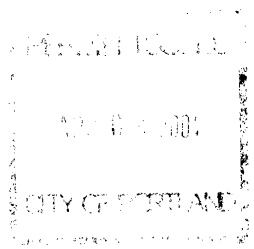
Location of Construction: 3 Runnells St	Owner Name: Illingworth Paul &	Owner Address: 3 Runnells St CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-5

Past Use: two family	Proposed Use: two family - add 2 bathrooms in third floor	Permit Fee: \$84.00	Cost of Work: \$6,400.00	CEO District: 3
Proposed Project Description: add 2 bathrooms in third floor		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied N/A	INSPECTION: Use Group: R-3 Type: SB BOCA 1999	
		Signature:	Signature:	

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: tmm	Date Applied For: 04/08/2004	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: 4/8/04	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <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: 4/8/04
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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: 04-0371	Date Applied For: 04/08/2004	CBL: 184 E007001
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Location of Construction: 3 Runnells St	Owner Name: Illingworth Paul &	Owner Address: 3 Runnells St	Phone:
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: two family - add 2 bathrooms in third floor	Proposed Project Description: add 2 bathrooms in third floor
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 04/08/2004

**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:** 04/08/2004

**Note:** **Ok to Issue:**

1) Separate permits are required for any electrical or plumbing work.



# APPLICATION FOR PERMIT TO REPAIR BUILDING

PERMIT ISSUED  
Permit No. 41274

Third Class Building

Portland, Maine March 27, 1940

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to repair the following described building in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 155 Fessall Street Within fire limits? Yes Dist. No. \_\_\_\_\_  
Owner's name and address Fred Corthall, 611 Field Street Telephone \_\_\_\_\_  
Contractor's name and address J. H. Kennedy, 105 Froble St. Telephone 3-2672  
Use of building dwelling house 2 family  
No. stories 2 Style of roof pitch Type of present roof covering Asphalt

## General Description of New Work

To Repair after fire to former condition. No alterations  
(Cause - Unknown)

Chimney to be taken down to sound brick and rebuilt.

CERTIFICATE OF OCCUPANCY  
REQUIREMENT IS WAIVED

## If Roof Covering is to be Repaired or Renewed

Is any plumbing work involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_  
Are repairs or renewal due to damage by fire? Yes If so, what area damaged? \_\_\_\_\_ sq. ft.  
Area of roof to be repaired now? \_\_\_\_\_ sq. ft.  
Type of roofing to be used Asphalt roofing No. plies \_\_\_\_\_  
Trade name and grade of roof covering to be used Class C Und. Lab.  
Estimated cost \$ 1,500.

Fred Corthall

Signature of owner

*Fred Corthall*

Fee \$ 3.75

INSPECTION COPY

1374C



# 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.

\_\_\_\_\_ **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

\_\_\_\_\_ **Footing/Building Location Inspection:** Prior to pouring concrete

\_\_\_\_\_ **Re-Bar Schedule Inspection:** Prior to pouring concrete

\_\_\_\_\_ **Foundation Inspection:** Prior to placing ANY backfill

**Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

**Final/Certificate of Occupancy:** 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.**

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

Thomas Deke  
Signature of Applicant/Designee

Date 4/8/04

Signature of Inspections Official

Date

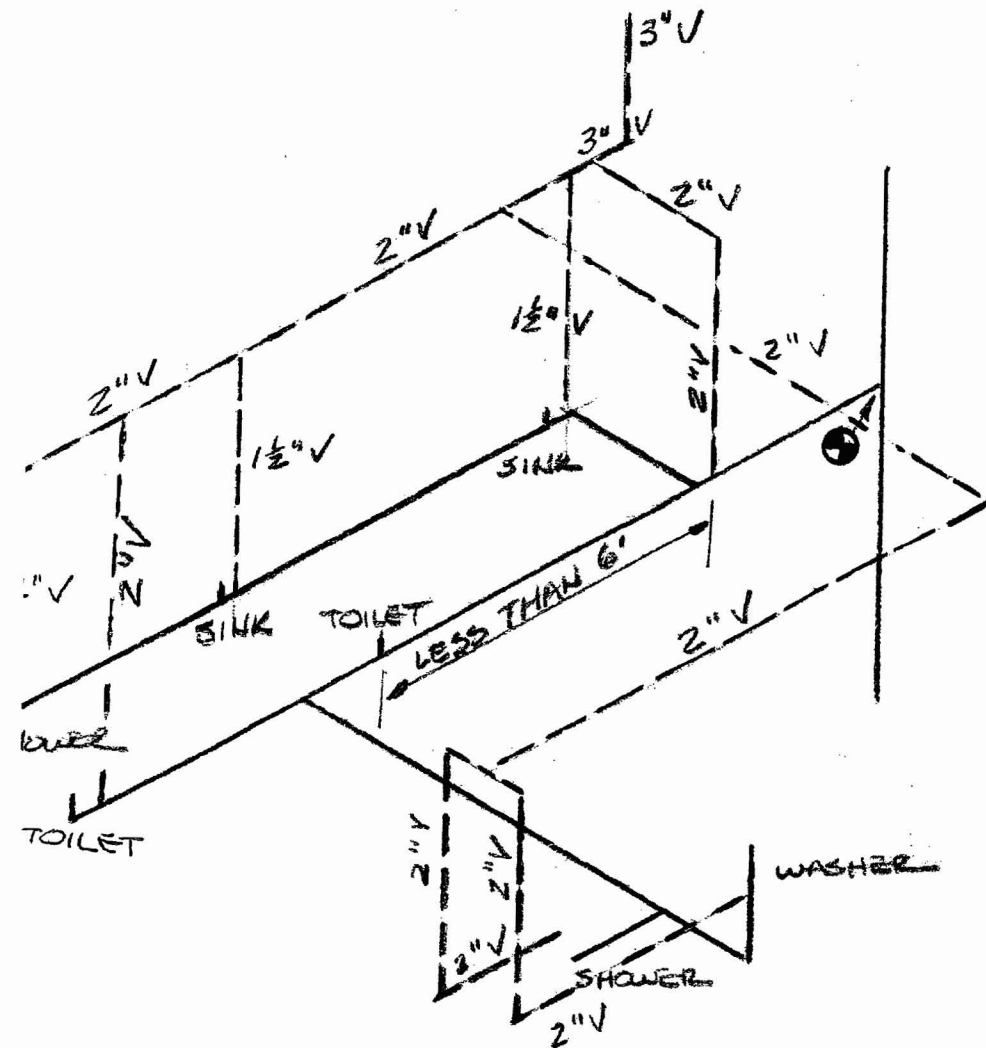
CBL: 184-E-7 Building Permit #: 04-0371





# PLUMBING PLAN

1/4" = 1'-0"



DRAIN / VENT ISOMETRIC  
NTS

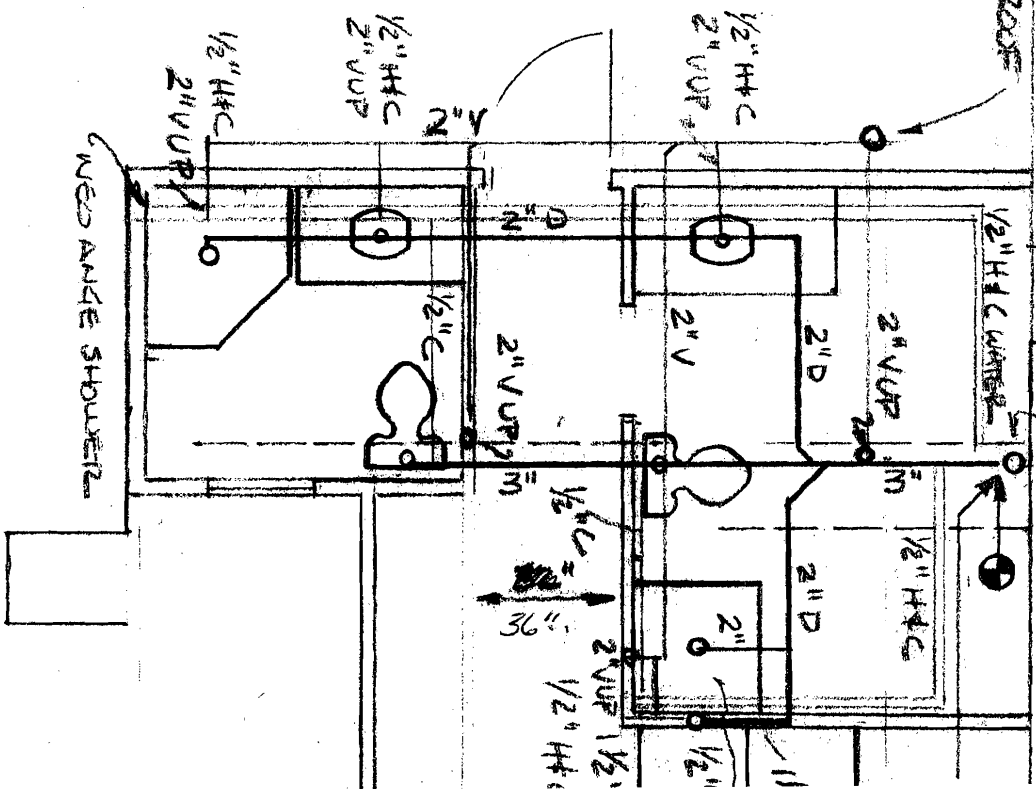
## NOTES:

1. Contractor to verify all dimensions in field. All piping connections shown on drawings are schematic. Contractor to provide connections where appropriate given field conditions.
2. All plumbing to meet State of Maine Internal Plumbing Rules, Edition.
3. All plumbing to meet City of Portland Plumbing Codes and BOC
4. Rectangular shower to be 32"x32" by 72" high, Lasko 1323-C or equivalent.
5. Neo-Angle shower to be 38"x38"x 76", Mirolin Kitset Series, or equivalent.
6. Vanities, sinks and faucets provided by owner, plumbed by contractor.
7. Toilets to be floor mounted, water lines down through walls to toilets. Provided by plumbing contractor.
8. Washing machine wall box to be Symmons Laundry Mate 600 or equivalent. Provide trap for laundry drain in wall behind washer floor.
9. Connect to existing stack/vent as shown. Contractor to verify exact location in field.
10. Connect to existing hot and cold water in bathroom below. Contractor to verify exact location in field. Insulate all new cold water piping with 1/2" armafex or equivalent.
11. Provide 3" vent through roof, height and location per plumbing rules, seal roof penetration.

4" OD  
EXIST WASTE/VENT STACK JOIST LINE (DYE

3" VENT THRU ROOF

⊕ CONNECT TO EXISTING



PLUMBING PLAN

14" x 10"

