Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CIT	Y 3)F PORTLAND	
Diagram Diagram	PULL DING INSPECTION	
Attached	PERIVIN	nit NurPERMIT ISSUED
This is to certify thatROBERTS CHRISTOPHE	Fohn Egan	
has permission to interior renovations to first		MAR 1 7 2006
AT 1363 CONGRESS ST	188 C00100	1
provided that the person or persons	serm or the tion seepting this p	ermit shall compty with a
of the provisions of the Statutes of	figurine and of the Continuous of the Continuous	City of Portland regulating
the construction, maintenance and	e of buildings and uctures, and	of the application on file
this department.		

Apply to Public Works for street line and grade if nature of work requires such information.

ification of inspection must be en and voten permoon proceed or the ilding or the inspection of the in

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

OTHER REQUIRED APPROVALS

PENALTY FOR REMOVINGTHISCARD

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	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion; Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electri	cal: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00fee per inspection at this point.
Certificate of Occupancy is not required for you if your project requires a Certificate of Cinspection If any of the inspections do not occupance, REGARDLESS OF THE NOTICE	Occupancy. All projects DO require a final cur, the project cannot go on to the next
CERIFICATE OF OCCUPANICE BEFORE THE SPACE-MAY BE OCCUPANICE	ES MUST BE ISSUED AND PAID FOR,
Turtedy A. Dolut	, , , , , , , , , , , , , , , , , , ,
Signature of Applicant/Designee	
Signature of Inspections Official	
CBL: /88 / Building Permit#	:_060214

					PERA	1221 TIM	ED	7	
City of Portland, Maine - Bui	0		111	rmit No:	ssue Date		EM.	1	
389 Congress Street, 04101 Tel: ((207) 874-8703	3, Fax: (207) 874-87	16	06-02 4	1 440	4 -7	188 C0	0.001	
Location of Construction:	Owner Name:		Owne	er Address:	MAH	1 / 20 1	Phone	1	
1363 CONGRESS ST	ROBERTS CHRISTOPHER		136	3 CONGRES	SS <u>ST</u>		l		
Business Name:	Contractor Yame: John Egan		Contractor Address: CTV OF P			PORTI	ORTH AMP		
Lessee/Buyer's Name	Phone:		Perm	it Type:				Zone:	
			Alt	erations - Co	mmercial			I R P	
Past Use:	Proposed Use:		Pern	it Fee:	Cost of Wor	k: CEO) District:	 	
l ' '		Residential 3 unit - interior		\$453.00 \$47,500.00			0 3		
	renovations to first floor unit		FIRE	EDEPT:	Approved	INSPECTIO	X(<u>- </u>	
legatuse	: 3dvelli	n vinte		ه مرا المحدد	Denied	Use Group:		Гуре 🗲	
		7		W. 60			3/17/06		
Proposed Project Description:			1	SESTIV , C		7	$\mathcal{L}(\mathcal{L}(\mathcal{L}(\mathcal{L}(\mathcal{L}(\mathcal{L}(\mathcal{L}(\mathcal{L}($	/ -	
interior renovations to first floor unit	nterior renovations to first floor unit		Signature Core Signature S			Signature:	· / / / / /		
			Actio			proved w/Cond	1	Denied	
			Signa	iture:		Date	e:		
Permit Taken By: Date A	pplied For:			Zoning	g Approva	1			
dmartin 02110	612006			Zomnę	5 ripprova	.1			
1. This permit application does not	preclude the	Special Zone or Rev	or Reviews Zoning Appeal		I	Historic Preservation			
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance			Not in District or Landmar		
2. Building permits do not include properties or electrical work.	olumbing,	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 Review				
		Subdivision		Interpretation			Approved		
		Site Plan		Approv	ed		Approved w/	Conditions	
		Maj Minor@ MM	1	Denied			Denied		
		Ok wl cordinas Date 2124106 ABM		late		Date:	ABN	,	
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his authorized in the application is	the project agentissued,	t and I agree I certify that	to conform the code off	to all applic icial's autho	able laws orized repr	of this resentative	
SIGNATURE OF APPLICANT		ADDRES	SS		DATE		РНО	NE	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				DATE			РНО	NE	

•	aine - Building or Use Perm 4101 Tel: (207) 874-8703,Fax	Permit No: 06-0214	Date Applied For: 02/16/2006	CBL: 188 C001001	
ocation of Construction:	Owner Name:		Owner Address:	•	Phone:
1363 CONGRESS ST	ROBERTS CHRIST	OPHER	1363 CONGRESS		
usiness Name:	Contractor Name:		Contractor Address:		Phone
	John Egan		Windham		
essee/Buyer's Name	Phone:		Permit Type:		!
			Alterations - Com	mercial	
'roposedUse:		Propose	d Project Description:		
-	ior renovations to first floor unit.		or renovations to fi		
Dept: Building Note:	Status: Approved with Condition	ons Reviewer:	Mike Nugent	Approval Da	nte: 03/17/2006 Ok to Issue:
1) Must install UL liste	d fire separation ensemble				
Dept: Fire	Status: Approved with Condition	ons Reviewer:	Cptn Greg Cass	Approval Da	nte: 02/24/2006
Note:					Ok to Issue:
Submit sprinkler plan	novation requires this apartment to a,	•	•	kler system.	

Comments:

2/21/2006-amachado: Left message with Chris Roberts. We need much more detail about what he intends to do with his renovations.



Total Square Footage of Unit #1 Including Deck:

1758 sqft

Work to be performed on the following spaces within Unit #1:

BR #1:12'2" x 11'10" **144 sqft**

BR #2: 12'2" x 11'2" 136 sqft

Master BR: 15'9" x 11' 173.25 sqft

Master Bath: 12'4" x 6'6" 80 sqft

35.16 sqft 3/4 Bath: 6'11" x 4'1"

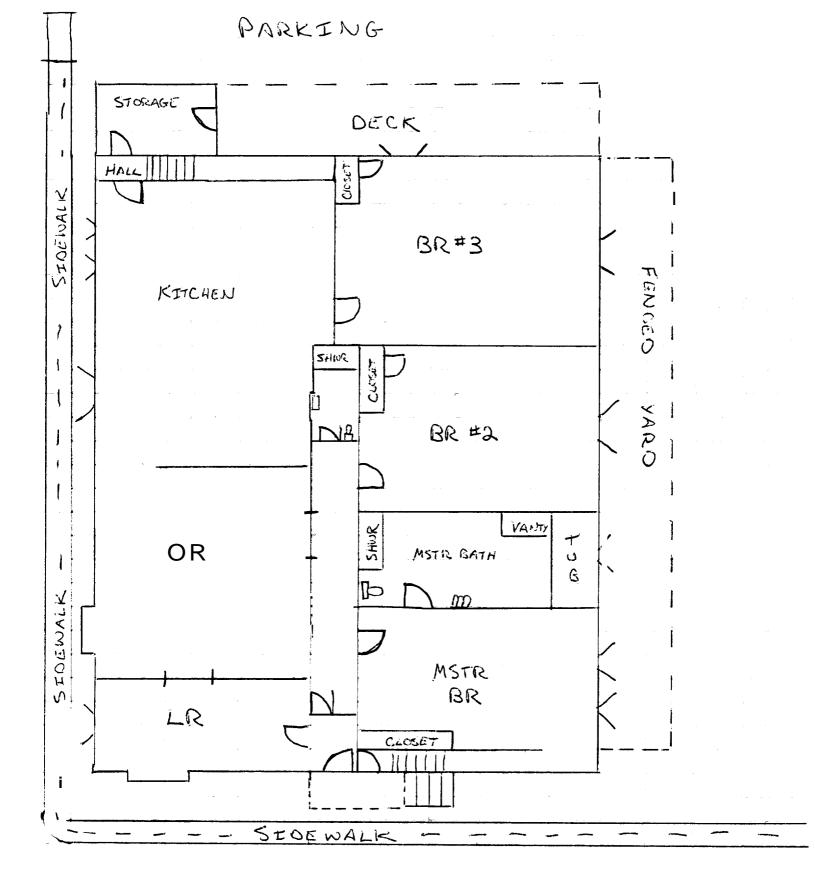
Kitchen: 15'3" x 11'11" 181.73 sqft

Hallway: 22'10" x 3'2" 173.25 sqft

822.49 sqft **Total Square Footage of Project:**

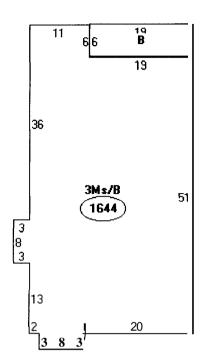
Divided by Total SqFt of **Unit** #1 1758 sqft

Ratio = 17581822.4946.78% of Unit #1



NOTE. NOT DRAWN TO SCALE

TOTAL SQUARE FOOTAGE UNIT #1 INCLUDING DECK 1758 SOFT



Descriptor/Area A:3Ms/B 1644 sqft B:3s⊕P 114 sqft

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: 1363	Congress S	Street, Aortland, ME o	410	72
Total Square Footage of Proposed Structure		Square Footage of Lot		
7,610 soft				
Tax Assessor's Chart, Block & Lot	Owner:			Telephone:
Chart# Block# Lot#	Christop	her A. Roberts		207-712-2422
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Cost Of			
	Christopher	A. Roberts		ork: \$ <u>47,5のひ.</u> たの
	DO BOX		Fe	ee: \$ 453. 00
·	Partland	ME 04104 20252245		
			C	of O Fee: \$
Current Specific use: <u>Kitchen/Bath/</u> Proposed Specific use: <u>Kitchen/Bath/</u>	3 80 April			
Project description: Remodel of 1st, replace with new Remodel femodel 3/4 bath. Shout rock to install new lights and contify e	Floor Unit	remove old kitches with new fixtures	11 5 7	eapineTs and Tub, sink, TaileT, show
semaled 3/4 bath. Short rock	hallways	and ceilings in 3 b	ed s	coms, Electrician
To install now lights and certify &	lactrical,	plumber to connect w	oliv	remit tixins
Contractor's name, address & telephone: 50	71 -		· wctl	vam, MC
Who should we contact when the permit is read Mailing address: On Roy 324	ly: Chuston	her A. Roberis		
Mailing address: Po Gox 3311	Phone: 301	7-712-2422		
Portland, ME 04104				
Please submit all of the information out	lined in the	Commercial Application (Che	cklist.

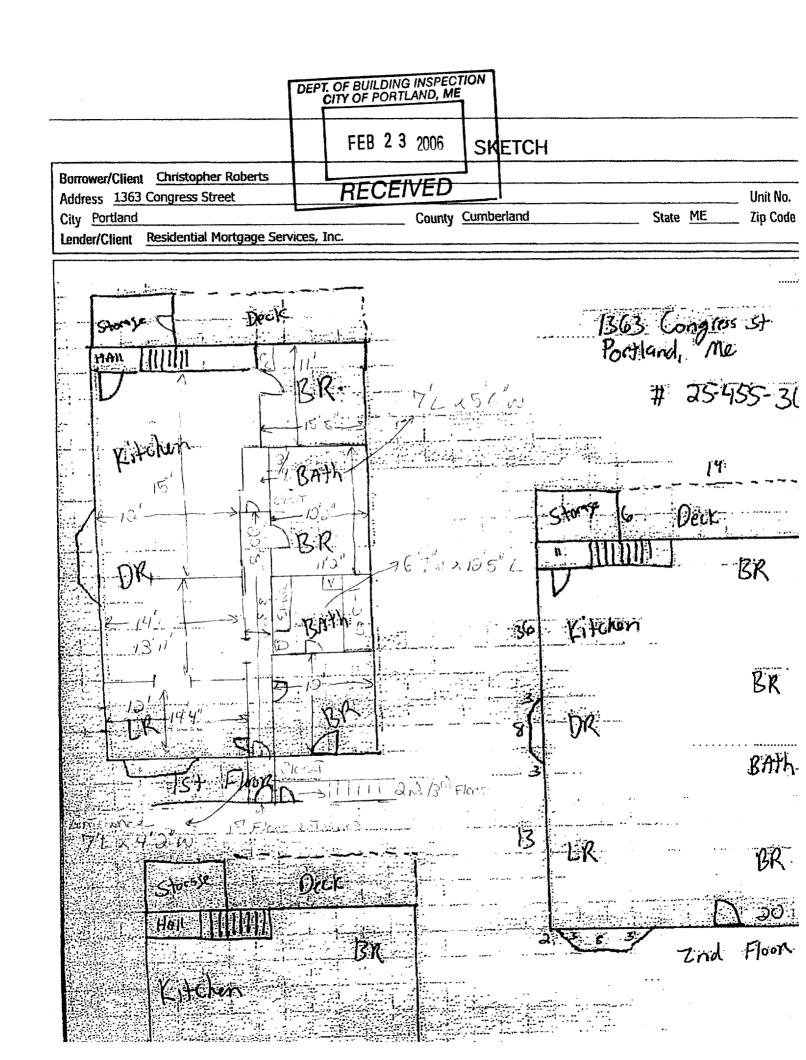
Please submit all of the information outlined in the Commercial Application Checklist Failure to do so will result in the automatic denial of your permit.

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 www.portlandmaine.gov, step by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

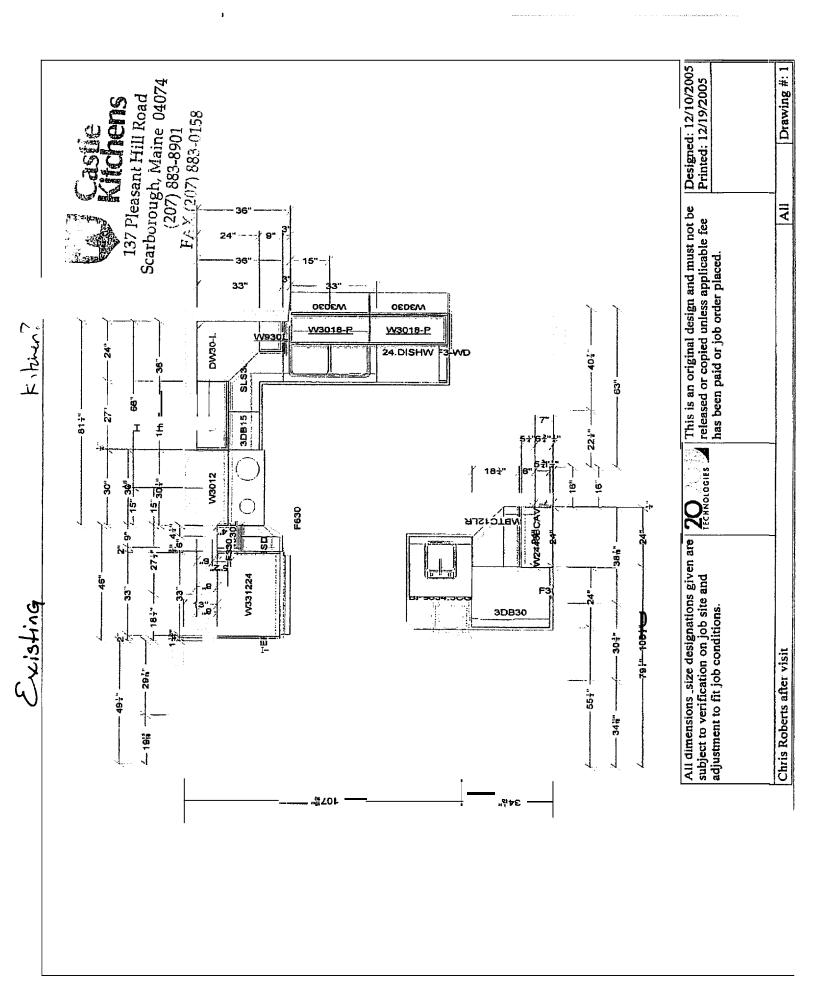
Signature of applicant:	Rustealer	1 Politz	Date: 1'27'06
-			

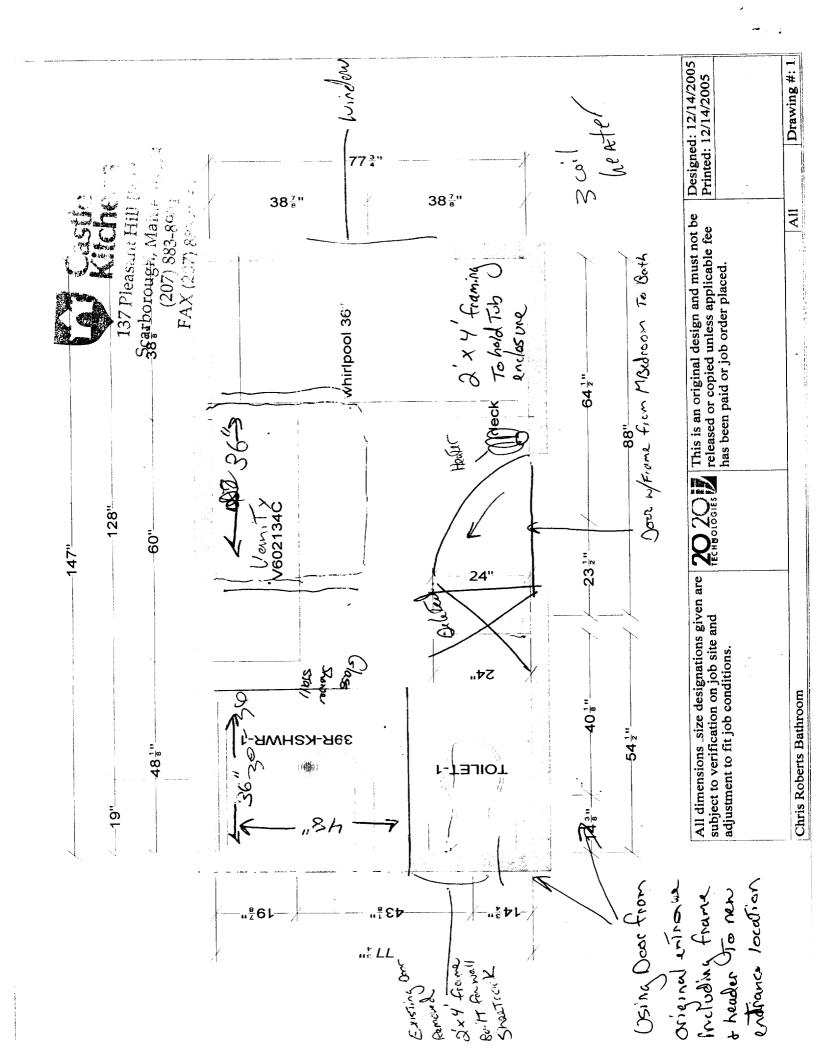
This is not a permit; you may not commence ANY work until the permit is issued.



1363 Compress Street ()nit#1
All collings in 3BR MB and 3/4 Bath To be replaced with - 5/3 Shortrock trouted for water resistence
All outer walls in Master Bath and one wallie BRFL To Be replaced
Times halloway walk placed to be storged, and replaced with molding 6" shallow
There hallmax male places to be stopped, and replaced with motiding 6" shows. There will be no recessed lighting in kitchen / Both a hallmay only surface mount.
Tolet in Master Both from walling shower to pall of room invesors
Toschation and five reduciporcied retained beis to be used in certifice -
Bleva-th inschation to be used on existing outer wall of Martin BR.
سويوه د د د د د د سر سر د د سرسوره د د د د د د د د د د د د د د د د د د د

and the second control of the contro





10 jet pramed with 2'x4' construction Shower J00/2 and framework from close Palesial Sink Bird Chimnet

1363 porgress St. Arland, ME CY102

Three-Quarter Both layout

Permit City of

BUILDING PERMIT APPLICATION Fee

Zone

8 Interier Walls: Exterior Walls: Foundation: Explain Conversion Is Proposed Use: # of Existing Res. Units LOCATION OF CONSTRUCTION Owner: Est. Construction Cost; Address: Contractor Address: Please fill out any part which applies to job. Proper plans must accompany form. **Building Dimensions** Metal Materials 10. Masonry Materials Other Materials Wall Covering Type 9. Siding Type 3. No. Doors Lally Column Spacing: Fire Wall if required Header Sizes. Corner Posts Size 2. No. windows 6. Floor Sheathing Type: 7. Other Material: Girder Size: 4. Header Sizes Joists Size: Sills Size: Foundation Size: Footings Size: Studding Size. Studding Size Type of Soil: Sheathing Type Insulation Type Bridging Type: Set Backs - Front Bracing: Seasonal # Bedrooms 00000 € О Т Condominium # of New Res. Units CONTROL TORNING with renovations 10000-Span' PERMITAIRESUED Size Size N_o Spojeg Rear Su. Total Sq. Ft. Past Use: Proposed Use: White - Tax Assessor Size: Size: Size: SpE(·) Phone # Phone # from three-family to Sills must be anchored Conversion 野岛 ing Sila Sila Side(s) 16" Pa 2002 00 Permit Recomped of State of Applicant State of Appl Chimneys: Type:_ CONTINUED TO REVERSE SIDE IVOIY Tag - CEO III MR. CAPPEL Ceiling: Swimming Pools: Roof: Heating: Review Required: Zoning: Plumbing: Electrical: Date Estimated Cost Time Limit_ Bldg Code_ Inside Fire Limits 2. Sheathing Type
3. Roof Covering Type 3. Must conform to National Electrical Code and State Law. 2. Pool Size: 1. Type: 5. No. of Other Fixtures 4. No. of Lavatories 3. No. of Flushes Type of Heat: Type Ceilings: Special Exception Shoreland Zoning Yes Street'Frontage Provided: Service Entrance Size: Truss or Rafter Size 4. Insulation Type Ceiling Strapping Size Other_ Conditional Use: Planning Board Approval: Yes Provided Setbacks: Front. No. of Tubs or Showers 1. Ceiling Joists Size: Zoning Board Approval: Yes. Approval of soil test if required Ceiling Height: (Explain) For Official Use Only ď Number of Fire Places Variance Z Vo Spacing Back Smoke Detector Required Floodplain Yes Ownersh Yes Size Action Approved. Size Site Plan Date: Square FootageJUN - 5 1992 Date Signature HISTORIC PRESERVAT ************ 7 Side ö Not in District nor Landon #10T Requires Review. Does not require review

Yes

N

Z

Approved with Cond

Subdivision

Side