Form # P 04 DISPLAY THIS	S CARD ON PRINCIPAL FRONTAGE OF WORK
Please Read Application And Notes, If Any, Attached	CITY OF PORTLAND PERMIT PERMIT SSUED
This is to certify that ROBERTS CH	RISTOPHER
has permission to <u>Build-Interior</u>	renovations to jird floor it FEB - 9 2007
AT 1363_CONGRESS_ST	_ 188 C001003
of the provisions of the Stathe construction, maintenathis department.	nce and use of buildings and survictures, and of the application on file in fication of inspersion must be g n and when permition procurd A certificate of occupancy must be
OTHER REQUIRED APPROVALS Fire Dept Health Dept Appeal Board Other Department Name	2/8/07
	PENALTY FOR REMOVING THIS CARD

.

City of Portland, Maine	- Building or Use	Permit Applicatio	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-87	16 07-0133		188 C001003
Location of Construction:	Owner Name:		Owner Address:		Phone:
1363 CONGRESS ST	ROBERTS CI	HRISTOPHER	1363 CONGRES	S ST # 2	
Business Name:	Contractor Name	2:	Contractor Address:		Phone
	Owner				
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Mu	lti Family	Zone:
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:
3 Unit Residential Condo Unit		ntial Condo Unit- renovations to third	\$270.00 FIRE DEPT:	\$25,000.0 Approved IN Denied U	SPECTION:
	Legat	3 D.U.	Sprinchbe	rea	Ise Group: R^2 Type: SB IBC^2 PCO^3
Proposed Project Description: Build- Interior renovations to third floor unit			Sprinchlu Signature:	IVITIES DISTRI	ignature: CT (P.A.D.) red w/Conditions Denied
			Signature:		Date:
Permit Taken By: Idobson	Date Applied For: 02/07/2007		Zoning	g Approval	
1. This permit application do	bes not preclude the	Special Zone or Revi	iews Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting Federal Rules.			🗌 Varianc	ce	Not in District or Landmar
2. Building permits do not ir septic or electrical work.	clude plumbing,	Wetland	- Miscell	aneous	Does Not Require Review
3. Building permits are void within six (6) months of the second		Flood 20ne	Conditi	onal Use	Requires Review
False information may inv permit and stop all work	alidate a building	Subdivision	lnterpre	etation	Approved
		Site Plan	Approv	ed	Approved w/Conditions
PERMIT	ISS/JED	Maj 🗌 Minor 📫 MM	1 Denied		Denied
	1 2007	Date: 2 4 4 7	Date:		Date: 2 9/07

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

City of Portland, Maine - Buil	ding or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (0	07) 874-8716	07-0133	02/07/2007	188 C001003
Location of Construction:	Owner Name:	(Owner Address:		Phone:
1363 CONGRESS ST	ROBERTS CHRISTOP	HER	1363 CONGRESS		
Business Name:	Contractor Name:	(Contractor Address:		Phone
	Owner				
Lessee/Buyer's Name	Phone:	I	ermit Type:		
			Alterations - Mult	i Family	
Proposed Use:		Proposed	l Project Description:		
3 Unit Residential Condo Unit- Build floor unit	- Interior renovations to the	hird Build-	Interior renovation	s to third floor unit	
Dept:ZoningStatus:ANote:1)This is NOT an approval for an aconot limited to items such as stoves		ou SHALL NC		al kitchen equipment	Ok to Issue: 🔽
Dept: Building Status: A	pproved with Conditions	Reviewer:	Tammy Munson	Approval Da	te: 02/07/2007
Note:					Ok to Issue: 🔽
 Separate permits are required for Separate plans may need to be sub 					
2) All penetrations between dwelling and recessed lighting/vent fixtures				ted with approved fire	estop materials,
3) Hardwired interconnected battery level.	backup smoke detectors s	shall be installe	d in all bedrooms, j	protecting the bedroo	ms, and on every
Dept: Fire Status: A Note:	pproved with Conditions	Reviewer:	Cptn Greg Cass	Approval Da	te: 02/09/2007 Ok to Issue: ☑
1) Sprinkler system required for prio Sprinkler shall be extended to this					

	PERMIT ISSU	ED	
	FEB - 9 200)7	
(CITY OF PORTL	AND	

THE PARTY OF THE P

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 Street (mit 3, Arthund, ME c	54102
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:
Chart# Block# Lot#	Christopher A. Roberts	207-712-2422
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of
	Christopher A Roberts	Work: \$ 25,000.00
N/A	PC COX 33/1	Fee: \$ 243 100
	Portland, ME 04104	1
	207.112-2422	C of O Fee: \$
Current Specific use: Residential Cond	lominium Unit	
If vacant, what was the previous use?A		
Proposed Specific use: Residential (cho	lominium Unit	
Project description: See ATTached Build 2 closelts using 2 x 4 n	- Denovations 3th A	=1000 anden
Build Nalk-in shower stall wind Contractor's name, address & telephone:	2 2 × 4 wood 36" x 417"	1
Contractor's name, address & telephone: 🥂	hustopher Roberts (above)	T. OF BUILDING INSPECTION CITY OF POBIL/ ND. ME
Who should we contact when the permit is a	ready: Christopher Reberts	BUILDING ILAND, MAL
Mailing address:	Phone: 207-712-2422	T. OF DE POL
PO Box 3311		1 2001
Partland, ME 04104		FEB 7 2001
Please submit all of the information o	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 <u>www.portlandmaine.gov</u>, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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Signature of applicant:	Rustephen	A. Robits	Date: 3/5/07	

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

1363 CONGRESS STREET UNIT 3

Bedroom #1:

- Demo plaster ceiling and walls
- Install insulation, resillent channel
- Sheetrock with 5/8" sheetrock, tape and seam
- Remove existing closet to existing wall
- Construct 24" x 72" new closet framed by 2"x4" with header add bifold doors
- Sheetrock with 5/8" sheetrock, tape and seam

Bedroom #2:

- Remove doorcasing to existing closet
- Frame with 2x4 to existing sole plate and face plate (3) 2x4
- Remove plaster ceiling and walls
- Install insulation, resillent channel
- Sheetrock 5/8" for new ceiling and walls taped and seamed
- Construct new closet 2x4 24" x 72" with header to add bifold doors
- Sheetrock 5/8" tape and seam and of 2x4"

Bedroom #3:

- Demo plaster ceiling and walls
- Install insulation, resillent channel
- Sheetrock 5/8" for new walls/ceiling tape and seamed

Bathroom:

- Demo wall for existing closet to BR#2
- Remove plaster from walls and ceiling
- Insulate walls, add resillent channel to ceiling sheetrock with 5/8" water resistant sheetrock, taped and seamed
- Frame former closet space 36" x 47" with 2x4 framing for new walk-in shower stall
- Furr out walls in stall for adding tile and plumbing
- Create fire blocking enclosures for recessed lights in bathroom (4) and fire channel for light/fan to remove moisture with venting (1)

Hallway to Bath and Bedrooms:

- Remove plaster walls/ceiling
- Insulate/resillent channel
- Sheetrock 5/8" for new ceiling taped and seamed

Kitchen:

- Remove all plaster walls/ceiling
- Insulate walls and add resillent channel to outer common wall
- Sheetrock with 5/8" sheetrock taped and seamed

DR & LR:

- Remove plaster ceilings and walls
- Insulate, add resillent channel
- Sheetrock with 5/8" sheetrock taped and seamed

Storage Room:

- Remove plaster ceiling and walls
- Insulate, add resillent channel to common outer wall
- Sheetrock with 5/8" sheetrock taped and seamed

* Fire blocking with 1 hour burn rated commercial spray foam and 5/8" sheetrock to be put in place in areas where balloon construction is evident in eaves and joists.



THIRD FLOOR 1,230 S.F.



				PERMIT	ISSUED	7
City of Portland, Maine - Bui 389 Congress Street, 04101 Tel: (•		1 1	Issue Date:	188 C00	001
Location of Construction:	Owner Name:		Owner Address:		Phone	
1363 CONGRESS ST	ROBERTS CH	HRISTOPHER	1363 CONGRE	SS ST		
Business Name:	Contractor Yame John Egan	:	Contractor Addres Windham	SE CITY OF PO	RTIAND	
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - C	ommercial		Zone:
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:	1
Residential 3 unit	Residential 3 u	init - interior	\$453.00	\$47,500.00	3	ľ
legaluse	renovations to : 3 dwc11i		FIRE DEPT:	Approved	Group:	Гуре 55
Proposed Project Description:	<u> </u>		- Desser	onloc	Y A	79 /
interior renovations to first floor unit		Signature Lene CVF-33 Signature: UN PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			lugg	
		Action: 🔲 App	roved 门 Approved	w/Conditions	Denied	
			Signature:		Date:	
	pplied For: 612006		Zonir	ng Approval		
This permit application does not	preclude the	Special Zone or Rev	views Zo	ning Appeal	Historic Prese	rvation
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 		Shoreland	🗌 Varia	nce	Z Not in District	tor Landmarl
2. Building permits do not include septic or electrical work.	plumbing,	Wetland	Misco	ellaneous	Does Not Req	uire 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	Cond	Conditional Use		ew
		Subdivision	🔲 Interp	Interpretation		
		🗍 Site Plan	🗔 Аррго	oved	[] Approved w/C	Conditions
		Maj 🗌 Minor@ Ml	M Denie	d	Denied	Ì
		OK willowithous Date 2174106 A	BA late		Date: ABM	

CERTIFICATION

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SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

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