

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|-----------------------|---------------------------|---------------------|
| Permit No: 06-0330 | Issue Date: 03/13/2006 | CBL: 191 A008001 |
|-----------------------|---------------------------|---------------------|

| | | | |
|---|--|---|--------------------|
| Location of Construction: 31 Mitton St | Owner Name: Hinsman Carl A & Anna K Jts | Owner Address: 31 Mitton St | Phone: 874-6355 |
| Business Name: | Contractor Name: self | Contractor Address: Portland | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Alterations - Dwellings | Zone: R5 |

| | | | | |
|----------------------------|---|--|--|--------------------|
| Past Use: Single Family | Proposed Use: Single Family w/interior renovations for a 1/2 bath on the 1st floor | Permit Fee: \$30.00 | Cost of Work: \$1,000.00 | CEO District: 3 |
| | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: R3 Type SB IRC-2003 Signature: JMB 3/13/06 | |

| | | |
|--|------------|------------------------|
| Proposed Project Description: Renovate room on the 1st floor for a 1/2 bath | Signature: | Signature: JMB 3/13/06 |
| 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: jmb | Date Applied For: 03/13/2006 | Zoning Approval | |
|-------------------------|---------------------------------|------------------------|--|

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

| Special Zone or Reviews | Zoning Appeal | Historic Preservation |
|--|---|--|
| <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>all interior</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 3/13/06</i> | <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: | <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: |



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.

6/2/06 - Close in - plumb, elec, + framing OK.
O/C to drywall. gmm

9/12/06 final O.K. Close out.
Ch. N.S.



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:

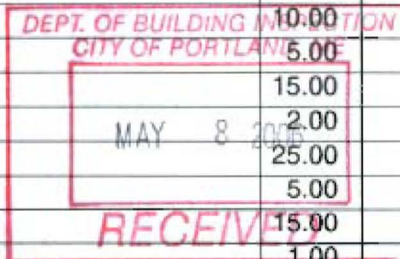
Date 5/7/2006

Permit # 06 0330

CBL# 191/A-8

LOCATION: 31 MITTON ST METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER ANNA + CARL HINSMAN
 TENANT OWNER PHONE # 874-6355

| | | | | | TOTAL EACH FEE | |
|-------------------|-------------------|------------------|--------------|---------------|------------------------------|-------|
| OUTLETS | / | Receptacles | / | Switches | Smoke Detector | .20 |
| 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 | | | |
| | | 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 | 35.00 |



CONTRACTORS NAME _____ MASTER LIC. # _____
 ADDRESS _____ LIMITED LIC. # _____
 TELEPHONE _____

SIGNATURE OF CONTRACTOR CH Hinsman (OWNER) 5/7/2006 #1388

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

| | |
|---|--------------------|
| Town or Plantation | PORTLAND |
| Street | 31 MITTON ST |
| PROPERTY OWNERS NAME | |
| Last: HINSMAN | First: ANNA + CARL |
| Applicant Name: | CARL HINSMAN |
| Mailing Address of Owner/Applicant (If Different) | |

| | | |
|--|---------------|---|
| PORTLAND | PERMIT # 9897 | TOWN COPY |
| Date Permit Issued: 5/8/06 | \$ 24.00 | <input type="checkbox"/> Double Fee FEE Charged |
| Thomas Markley Local Plumbing Inspector Signature | L.P.I. # 0744 | |
| 191 A 008 | | |

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.

Carl Hinsman 5/7/06
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

| | | |
|---|--|---|
| This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING | Type of Structure To Be Served: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____ | Plumbing To Be Installed By: 1. <input type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input checked="" type="checkbox"/> PROPERTY OWNER LICENSE # _____ |
|---|--|---|

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | Number | Column 2 Type of Fixture | Number | Column 1 Type of Fixture |
|---|--------|--|--------|---------------------------------|
| HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. | | Hosebibb / Sillcock | | Bathtub (and Shower) |
| | | Floor Drain | | Shower (Separate) |
| OR | | Urinal | 1 | Sink |
| | 1 | Drinking Fountain | | Wash Basin |
| HOOK-UP: to an existing subsurface wastewater disposal system. | | Indirect Waste | 1 | Water Closet (Toilet) |
| PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | | Grease / Oil Separator | | Dish Washer |
| OR | | Roof Drain | | Garbage Disposal |
| | | Bidet | | Laundry Tub |
| TRANSFER FEE [\$6.00] | | Other: _____ | | Water Heater |
| | | Fixtures (Subtotal) Column 2 | 2 | Fixtures (Subtotal) Column 1 |
| | | | 2 | Fixtures (Subtotal) Column 2 |
| | | | | Total Fixtures |
| | | | | Fixture Fee |
| | | | | Transfer Fee |
| | | | | Hook-Up & Relocation Fee |
| | | | | Permit Fee (Total) |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

1320

10/24

34



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: <u>31 MITTON ST</u> | | |
| Total Square Footage of Proposed Structure <u>~ 25 feet</u> | | Square Footage of Lot |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# | Owner: <u>CARL HINSMAN</u> <u>ANNA HINSMAN</u> | Telephone: <u>207-874-6355</u> |
| Lessee/Buyer's Name (If Applicable) | Applicant name, address & telephone: <u>CARL HINSMAN</u> <u>ANNA HINSMAN</u> <u>31 MITTON ST</u> <u>PORTLAND, ME 04102</u> | Cost Of Work: \$ <u>~ 1,000.00</u> Fee: \$ <u>30.00</u> C of O Fee: \$ _____ |
| Current Specific use: <u>Foyer SF Home</u> | | |
| If vacant, what was the previous use? _____ | | |
| Proposed Specific use: <u>1/2 bathroom</u> | | |
| Project description: <u>Add two walls to the corner of an existing foyer (10' x 11') to create a 1/2 bath approximately 4' x 6'.</u> | | |
| Contractor's name, address & telephone: | | |
| Who should we contact when the permit is ready: <u>CARL HINSMAN</u> | | |
| Mailing address: <u>31 MITTON ST</u> Phone: <u>874-6355</u> <u>PORTLAND, ME 04102</u> | | |

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, stop 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: <u>CH Hinsman</u> | Date: <u>3/13/2006</u> |
|---|------------------------|

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

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| Business Name: | Contractor Name: self | Contractor Address: Portland | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Alterations - Dwellings | |

| | |
|---|--|
| Proposed Use: Single Family w/interior renovations for a 1/2 bath on the 1st floor | Proposed Project Description: Renovate room on the 1st floor for a 1/2 bath |
|---|--|

Dept: Zoning Status: Approved Reviewer: Jeanine Bourke Approval Date: 03/13/2006
Note: Ok to Issue:

Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 03/13/2006
Note: Ok to Issue:

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND**BUILDING INSPECTION****PERMIT****PERMIT ISSUED**

Permit Number: 060330

MAR 13 2006**CITY OF PORTLAND**Please Read
Application And
Notes, If Any,
AttachedThis is to certify that Hinsman Carl A & Anna K. J. Selfhas permission to Renovate room on the 1st floor for a 1/2AT 31 Mitton St

CALL 191 A008001

provided that the person or persons in or in possession of 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 proceeds before this building or part thereof is started or closed-in. 4 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

Jamie Bowke 3/13/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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 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.

NA CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

[Signature]
Signature of Applicant/Designee

3/13/2006
Date

[Signature]
Signature of Inspections Official

3/13/06
Date

CBL: 191/A-8

Building Permit #:

06-0330