



DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND BUILDING PERMIT



This is to certify that Cindy Becker

Located At 1524 CONGRESS ST

Job ID: 2012-06-4140-DRG

CBL: 196-D-010-001

has permission to Install new shed

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 the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

Required Inspections:

Building location inspection

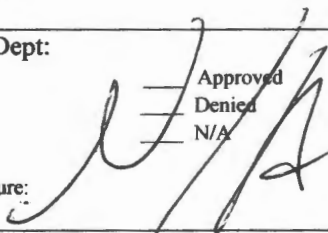

Final Installation inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-06-4140-DRG	Date Applied: 6/1/2012	CBL: 196- D-010-001	
Location of Construction: 1524 CONGRESS ST	Owner Name: CINDY BECKER	Owner Address: 1524 CONGRESS ST PORTLAND, ME 04102	Phone: 239-6768
Business Name:	Contractor Name: Eastern Shed Company	Contractor Address: 39 BARTHELMESS LANE, HAMPSTEAD, NH 03841	Phone: 978-688-4222
Lessee/Buyer's Name:	Phone:	Permit Type: SHED	Zone: R-5
Past Use: Single Family dwelling	Proposed Use: Same: Single Family dwelling - to erect a detached shed-14' x 24'	Cost of Work: \$10,000.00	CEO District:
		Fire Dept: <div style="text-align: center;">Approved Denied N/A</div> Signature: 	Inspection: Use Group: 12-3 Type: SB Signature: 
Proposed Project Description: Installation of a Shed		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Brad		Zoning Approval	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building Permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.

Special Zone or Reviews

- ☐ Shoreland
☐ Wetlands
☐ Flood Zone
☐ Subdivision
☐ Site Plan

___ Maj ___ Min ___ MM

Date:

9/5/12

Zoning Appeal

- ☐ Variance
☐ Miscellaneous
☐ Conditional Use
☐ Interpretation
☐ Approved
☐ Denied

Date:

Historic Preservation

- ☒ Not in Dist or Landmark
☐ Does not Require Review
☐ Requires Review
☐ Approved
☐ Approved w/Conditions
☐ 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 appication 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



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.

Entered
6/1/12
28

Location/Address of Construction: <u>1524 Congress St, Portland, ME</u>			
Total Square Footage of Proposed Structure/Area <u>336</u>		Square Footage of Lot	Number of Stories <u>1</u>
Part Assessor's Chart, Block & Lot Chart# <u>196</u> Block# <u>D</u> Lot# <u>10</u>	Applicant: (must be owner, lessee or buyer) Name <u>Cindy Becker</u> Address <u>1524 Congress St</u> City, State & Zip <u>Portland, ME</u>		Telephone: <u>207-239-6768</u>
Lessee/DBA RECEIVED JUN 01 2012 Dept of Building Inspections City of Portland Maine	Owner: (if different from applicant) Name Address City, State & Zip		Cost of Work: \$ <u>9,300</u> C of O Fee: \$ Historic Review: \$ Planning Admin.: \$ Total Fee: \$ <u>120.00</u>
	Current legal use (i.e. single family) <u>Single family</u> Number of Residential Units <u>1</u> If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? If yes, please name Project description: <u>14' x 24' = 336 sq ft</u>		
Contractor's name: <u>Eastern Shed Company</u>		Email:	
Address: <u>39 Bartholomew Lane</u>			
City, State & Zip: <u>Hampstead, NH 03841</u>		Telephone: <u>978-688-1222</u>	
Who should we contact when the permit is ready: <u>Robert Condon</u>		Telephone: <u>207-239-6268</u>	
Mailing address: <u>1524 Congress St, Portland, ME</u>			

Please submit all of the information outlined on the applicable 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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

and 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: Cindy Becker Date: 06-01-2012

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

need to sign



PORTLAND MAINE

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Receipts Details:

Tender Information: Check , Check Number: 428

Tender Amount: 120.00

Receipt Header:

Cashier Id: bsaucier

Receipt Date: 6/1/2012

Receipt Number: 44532

Receipt Details:

Referance ID:	6739	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	120.00	Charge Amount:	120.00
Job ID: Job ID: 2012-06-4140-DRG - Installation of a Shed			
Additional Comments: 1524 Congress			

Thank You for your Payment!



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/11/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

Noyes Insurance Agency Inc
P.O. Box 420
63 Main Street
Plymouth NH 03264

CONTACT NAME: Dawn Wilkins

PHONE (603) 536-1735

FAX (603) 536-4298

E-MAIL: dwilkins@noyesins.com

ADDRESS: dwilkins@noyesins.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Peerless Insurance Company

24198

INSURER B: Excelsior Ins. Co.

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED

Eastern Shed Co., Inc.
39 Bartholomew Road

Hampstead

NH 03841

COVERAGES

CERTIFICATE NUMBER: CL124200095

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		CBP4930969	11/15/2011	11/15/2012	MED EXP (Any one person) \$ 15,000
						PERSONAL & ADV INJURY \$ 1,000,000
A	AUTOMOBILE LIABILITY					GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> ANY AUTO					PRODUCTS - COMPIOP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> ALL OWNED AUTOS		DA4930966	11/15/2011	11/15/2012	
	<input checked="" type="checkbox"/> HIRED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
A	UMBRELLA LIAB					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> EXCESS LIAB					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> OCCUR					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> CLAIMS-MADE					Non-owned \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					AGGREGATE \$
	<input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below					
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATUTORY LIMITS OTH. ER
	<input checked="" type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. EACH ACCIDENT \$ 500,000
	<input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Job: Shed Delivery. Officer excluded from Workers Comp; Joanne Bartolotta

State: MA

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

NOYES INSURANCE AGENCY, INC.

Dawn Wilkins AGENT

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ACORD 25 (2010/05)

CHATEAU SPECIFICATIONS

WALL HEIGHT - 6'3"
(7' 3" & 8'3" WALL HEIGHTS AVAILABLE)

PEAK HEIGHTS:
8'6 1/2" - 6' DEEP MODELS
9' - 8' DEEP MODELS
9'5" - 10' DEEP MODELS
9'11" - 12' DEEP MODELS
10'4 1/2" - 14' DEEP MODELS

(Please note these are exterior measurements)

FLOOR

2" x 6" Pressure Treated floor joists 16" on center
5/8" Exterior CDX exterior grade plywood (Pressure Treated 5/8" & 3/4" available)
Note: We are proud to say we do not use particle board anywhere on our sheds
Note: 2" x 6" floor joists 12" or 8" on center are also available (as an option)
larger floor joists also available (as an option)

ROOF

2" x 6" roof trusses 16" on center (all sizes)
1/2" exterior grade CDX plywood (not particle board)
25 year warranty 3-tab roof shingles (8 color choices available)
30 year warranty Architectural shingles are available as an optional upgrade

WALLS

2" x 4" framing 16" on center, 6'3" Wall Height
(1 Foot Taller Walls available.) Priced per lineal foot: Pine \$4.50 per lineal foot, Cedar & Vinyl \$5.50 per lineal foot. Example: 8 x 12 vinyl shed (8+8+12+12) = 40 linear feet x \$5.50 = \$220

SIDING

Pine - 8" horizontal tongue & groove 1" boards
Cedar - 6" or 8" horizontal tongue & groove 1" boards
Vinyl Sheds - Vinyl Siding over exterior grade CDX Plywood (not particle board)
25 standard color choices available

DOORS

Our Sheds come standard with 1 60" 6-panel double doors with keyed lock handle (36" single, 54" and 72" double 6-panel doors available)

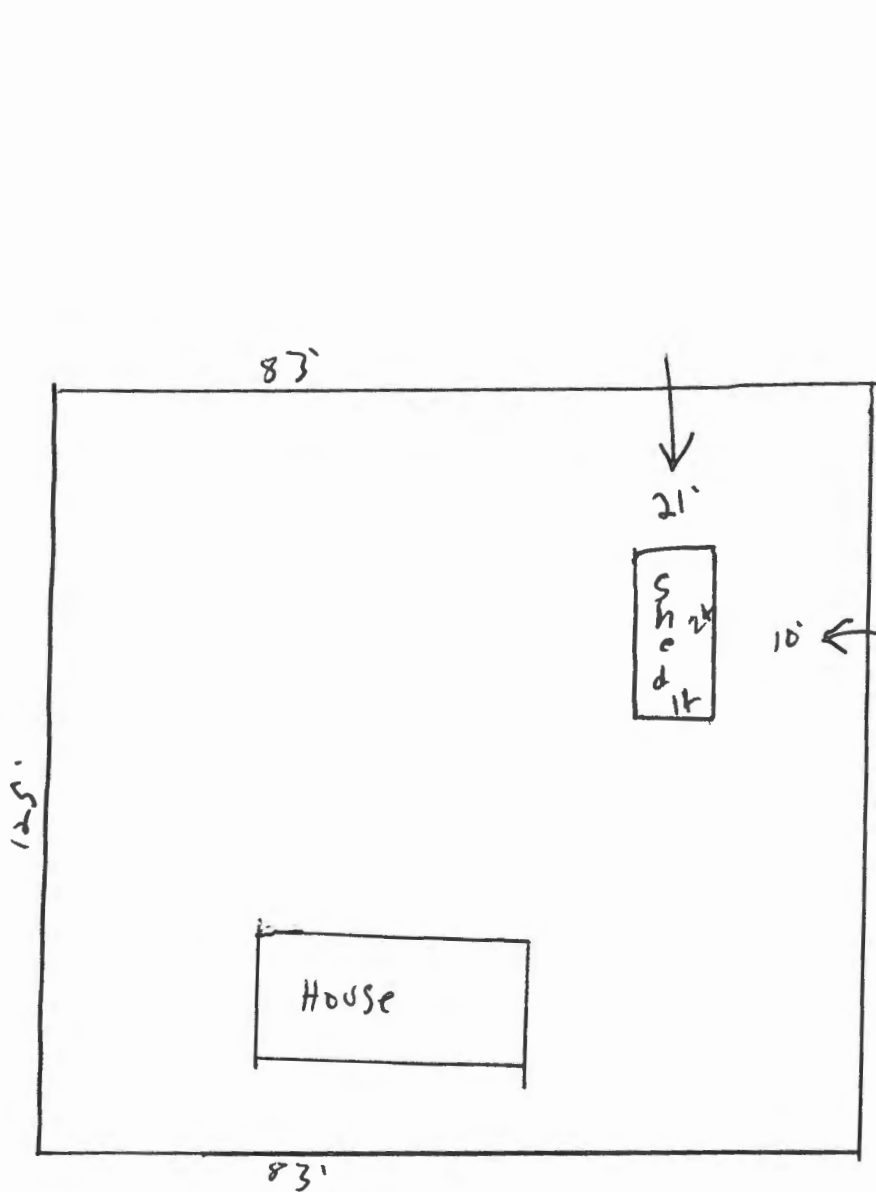
WINDOWS

Our sheds come with aluminum single hung window(s) with screen and vinyl shutters are standard. Quantity varies per size

* please note beyond the specifications for the Chateau, Charles Gehrig also ordered 2' higher walls, 3/4" pressure treated floor plywood, 8" on center floor joists, 2 30"x36" windows, 79" high 60" double door, and also includes a ridge vent.

Changed Specifications

Specs on Back



R-5

~~144 #~~
Needs Area of 5'
from ~~REAR~~ Side PL
showing 21' & 10' respectively
This is greater than
144 # is 336 #

125'
REAR: 20' req - 21' shown
Side: 8' req - 10' shown
Front N/A