3/16/01 840p Work No.	Previous Torgent-ons house
peine tramed ZXIZ	Reflect Require survey
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anti de i)	
AM 3/19(50)	and drawing should be
2/- /	11. 41.
1 / D / C / C / C / C / C / C / C / C / C	
	011 101 111 10 11
- 4/6/01 Plumbing Rough-In DG-	Called Coloy Work & Mike Piphilpo
required trosion control	& Street to be clopmed (C)
4/19/01 Close In OK Supp	good columns Jobendales
under LVL/10 Support	Columns aclosed at SO)
9/24/01 OK by CSTE	
	1
	If the
0176	Inspection Record
00/360	Type Date
	Foundation:
212-A-46	Framing:
	Plumbing: Final:
	Other:

CITY OF PORTLAND, MAINE

Department of Building Inspection



Certificate of

LOCATION 21 Tide Mill Rd

CBL 212 A04600101

Issued to Diphilippo, Michael A./Michael A. Diphilippo

Date of Issue

09/26/2001

This is to certify that the building, premises, or part thereof, at the above location, built — altered - changed as to use under Building Permit No. 00-1366 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Entire

Single Family Type: 5-B Boca: 1999

Limiting Conditions:

None

This certificate supersedes certificate issued

Approved:

Inspector

Inspector of Buildings

Ar elect

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

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: LOCATION: METER MAKE & # OWNER Mike Diphillips CMP ACCOUNT # TENANT **PHONE #** TOTAL EACH FEE **OUTLETS** Receptacles **Switches** Smoke Detector .20 **FIXTURES** Incandescent Fluorescent Strips SERVICES Overhead Underground TTL AMPS <800 15.00 Overhead Underground >800 25.00 Overhead Temporary Service 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 4 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/Carny 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 52.60 MINIMUM FEE/COMMERCIAL 45.00 MINIMUM FEE 35.00 INSPECTION: Will be ready or will call **CONTRACTORS NAME** ADDRESS Kacine

LIMITED LIC. #_

SIGNATURE OF CONTRACTOR

TELEPHONE

PLUMBING APPLICATION			212-A-016		Department of Human Sciences Division of Health Engineering	
	Town or Plantation Street Libbdivision Lot #	I Rd	PORTLAND Date 3 , 28, 0)		7647 TOWN COPY	
	Applicant Name: Mailing Address of Owner/Applicant	se Hin	Issued: Cocal Plyngering Ansect	tor-Signature	\$ Double Fee Charged	
_	(If Different) Owner/Applicant Statement I certify that the information submitted is correct to the knowledge and understand that any falsification is reas Plumbing the process to deny a Permit.	best of my		e installation autho	ction Required norized above and found it to be in g Rules.	
_	Signature of Owner/Applicant Date		Local Plumbing Inspector Signature 725/01 Date Approve			
				T		
	This Application is for 1. NEW PLUMBING 2. RELOCATED PLUMBING 3. MULTIPLE FAMILY DWELL 4. OTHER – SPECIFY		NG BILE HOME	Plumbing To Be Installed By: 1. MASTER PLUMBER 2. OIL BURNERMAN 3. MFG'D. HOUSING DEALER/MECHANIC 4. PUBLIC UTILITY EMPLOYEE 5. 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.	Hose	ebibb / Sillcock	- , 2,	Bathtub (and Shower) Shower (Separate)	
	OR	Urina		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sink	
_	HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		king Fountain	17	Wash Basin	
-			ect Waste Treatment Softener Filter etc	15	Water Closet (Toilet)	
			Treatment Softener, Filter, etc. se / Oil Separator	1	Clothes Washer Dish Washer	
			al Cuspidor	1-1-	Garbage Disposal	
	TDANGED SEE			1	Laundry Tub	
			r:		Water Heater	
	[\$6.00]		ixtures (Subtotal) Column 2		Fortures (Subtotal) Column 1 Fortures (Subtotal)	
C	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			Column 2 Total Fixtures Fixture Fee Transfer Fee		
	Page 1 of 1 HHE-211 Rev. 6;94			1337	Hook-Up & Relocation Fee Permit Fee (Total)	

TOWAL CODY

(Total)