

COMMENTS

6/26/00 Close In, egress windows, stairs, Fire Retardant all
OK to close. (C)

8-17-00 Did final inspection on finished garage
space GR & MW Electrical & masonry final
w/ Rich Libby Close permit # 000322

CBL 212 A 60

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

ELECTRICAL PERMIT

City of Portland, Me.

S/F Jon



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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 5/31/00
 Permit # 461
 CBL# 212-A-0600

SITE LOCATION: 18 TIDE MILL RD PORTLAND ME 04102

OWNER TOM DYKES **TENANT** -

TOTAL EACH FEE

Category	Sub-category	Quantity	Unit	Rate	Total
OUTLETS	Receptacles	10		.20	
	Switches	8			
	Smoke Detectors				
FIXTURES	incandescent	6		.20	
	fluorescent				
SERVICES	Overhead		Underground	TTL AMPS <800	15.00
	Overhead		Underground	TTL AMPS >800	25.00
Temporary Service	Overhead		Underground	TTL AMPS	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				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/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 35.00					
MINIMUM FEE					25.00
					25.00

INSPECTION: Will be ready _____ or will call

CONTRACTORS NAME PETER RAINEY **MASTER LIC. #** 13029
ADDRESS 78 WAINWRIGHT WEST SO. PORTLAND ME **LIMITED LIC. #** _____
TELEPHONE 541-3840

SIGNATURE OF CONTRACTOR Peter Rainey 5-31-00

PLUMBING APPLICATION

212A60

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland

Street Subdivision Lot #: 18 Tidemill Rd

PROPERTY OWNERS NAME

Last: Dykes First: Thomas

Applicant Name: James Cedaro

Mailing Address of Owner/Applicant (if Different): 28 Tenney Ln Scit.

#3

PORTLAND 7334 TOWN COPY

Date Permit issued: 16 20 1001 \$ 1240.00 If Double Fee Charged

Thomas Dykes L.P.I. # 0029

Local Plumbing Inspector Signature

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.

James Cedaro Signature of Owner/Applicant 6/20/10 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

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type of Structure To Be Served:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>17632</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p style="text-align: center; font-size: 1.5em;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p>		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<p style="text-align: center; font-size: 1.5em;">OR</p> <p>TRANSFER FEE [\$6.00]</p>		Fixtures (Subtotal) Column 2	3	
	<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p>			
			3	Total Fixtures
				Fixtures Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			24	Permit Fee (Total)