

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED APR 10 2006 PERMIT NUMBER 2006-00982006 CITY OF PORTLAND

This is to certify that MATHIS APRIL L & ERIC TS has permission to 10" x 28" addition and new room between existing garage and dwelling and rear steps AT 52 WINDING WAY L 225 C016001

provided that the person or persons firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State 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 procured before this building or part thereof is occupied 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

Signature: [Handwritten Signature] 4/19/06 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0368	Issue Date: APR 19 2006	CBL: D225 COA 6001
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Location of Construction: 52 WINDING WAY	Owner Name: MATHIS APRIL L & ERIC T JTS	Owner Address: 52 WINDING WAY	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R3

Past Use: Single Family Home	Proposed Use: Single Family Home/ new kitchen, Bathroom, enlarge mudroom	Permit Fee: \$291.00	Cost of Work: \$30,000.00	CEO District: 3
Proposed Project Description: 10" x 28" addition and new mudroom between existing garage and dwelling and rear steps		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB 4/19/06 Signature: <i>[Signature]</i>	
		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: Idobson	Date Applied For: 03/20/2006	Zoning Approval		
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- 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"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: _____	Date: _____	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.

SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

4/21/06 - Gut books + size - OK to
pour concrete.

5/8/06 - Checked foundation before backfill -
Rocks - drainage - weatherproofing set all good
OK to Backfill. Jan M

6/1/06 - Went over changing first wall to tiles
for front - not framed yet - told them
to call. GMM

6/9/06 - First wall - OK to pour concrete
on front

7/11/06 Close in insp w/owner, plumb, elect. air test drains OK, H₂O
under pressure. Electrical OK

✓ Need to draft stop @ former ext wall balloon frame above LVL

✓ " draft stop in basement @ sill + New ~~walls~~ walls framed in
basement along foundation

✓ Need just hangers on I-joists over daylight basement slab

✓ Electric panel surround to small need 36" x 36" clearance.

✓ Install slid blocking @ new bearing points @ center bearing wall
Thru to The Girder.

- Exterior stairs need rising min 3/4" - graspable handrail

✓ 5' (new) furring @ entry wall only 2-2x6 * Not enough * Jan M

7/14/06 Re insp w/ owner. See checked items above - OK to proceed with

7/17/06 - Checked outlets - OK - all signs OK - all work
completed - (no cut permit. In-

PLUMBING APPLICATION

Department of Health and Human Services
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 52 W. ... Way

PROPERTY OWNERS NAME

Last: Mathis First: Lee

Applicant Name: M. Lee

Mailing Address of Owner/Applicant (If Different): 101 ...

9006 8235

PORTLAND PERMIT # 9938 TOWN COPY

Date Permit Issued: 6/29/06 \$ 3160.00 # Double Fee Charged

Tom Mathis
Local Plumbing Inspector Signature

L.P.I. # 07,44

225 C 016

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.

Signature of Owner/Applicant: [Signature] Date: 6/29/06

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>12743</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: 2em;">OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p>	1	Hosebibb / Sillcock	1	Bathtub (and Shower)
	1	Floor Drain	1	Shower (Separate)
<p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>	1	Urinal	1	Sink
	1	Drinking Fountain	1	Wash Basin
<p style="text-align: center; font-size: 2em;">OR</p> <p>TRANSFER FEE [\$6.00]</p>	1	Indirect Waste	1	Water Closet (Toilet)
	1	Water Treatment Softener, Filter, etc.	1	Clothes Washer
	1	Grease / Oil Separator	1	Dish Washer
	1	Dental Cuspidor	1	Garbage Disposal
	1	Bidet	1	Laundry Tub
	1	Other: _____	1	Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY