City of Davidson J. Mair		Da		No:	<del>-1</del>	#13 - 124		
City of Portland, Main 389 Congress Street, 041			03-0972	Issue Date:		CBL: 260 A017001		
	5, <b>Fax:</b> (207) 874-871		wner Address:	<del></del>	2003	Phone:		
Location of Construction:  Owner Name:  Prof. City Ch		aovrolot		wher Address: 00 Brighton Ave			774-5971	
		<u> </u>		ontractor Address:	·		Phone	
Business Name:	Contractor Name Keeley Constr		1	O. Box 1174Po		2077738499		
Lessee/Buyer's Name	Phone:	ruction		Permit Type:			Zone:	
Esset/Buyer's Name				Single Family			123	
Past Use: Proposed Use:				ermit Fee:	District:			
_		g 19'x31' SFR onto		crimer ec.	Cost of Work: \$0.0		3	
Single raining on ee,coe siz		ion of parcel; Lot #3		IRE DEPT:	SPECTION			
	on proposed p				se Group	roup 7 Type:		
				<i></i>	Denied	/	10/2//10	
				$\mathcal{N}\mathcal{M}$			~10/30/03	
	•			<i>V</i> /			1/1/2	
				gnature:		gnature	Melury	
			PΙ	EDESTRIANACTI	VITIES DISTRIC	CT (P.A.D	.) / 7	
			A	ction: Approv	ed Approve	ed w/Condi	tions Denied	
			c:	ignoturo		Date		
Per mit Taken By:	Date Applied For:	1	51					
k wd	08/12/2003		Zoning Approval					
		Special Zone or Reviews		Zoning Appeal		Hi	Historic Preservation	
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules		Shoreland		Variance			Not in District or Landmar	
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		☐ Wetland		Miscella	Miscellaneous		Ooes Not Require Review	
3. Building permits are vowithin six (6) months of	☐ Flood Zone		[ ] Conditio	Conditional Use		equires Review		
False information may permit and stop all wor	Subdivision	l	Interpretation			pproved		
1	To Site Plan		Approved		Approved w/Conditions			
						C	11	
		Maj [] Minor	MM Z	Denied			enied	
		Date: /0/30/	W3	Date:		Date:		
		' — — — — — — — — — — — — — — — — — — —				•		
		CEDTH	TOATION	т				
I i i			FICATION		. 4	41		
I hereby certify that I am the I have been authorized by th								
jurisdiction. In addition, if a shall have the authority <b>to</b> er such permit.	a permit for work describe	d in the applica	tion is issue	ed, I certify that t	the code officia	al's autho	rized representative	

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE



## CITY OF PORTLAND, MAINE

Department of Building Inspection

## Certificate of Occupancy

**LOCATION** 11 Rowe Ave

CBL 260 A0 17001

**Issued to** Forest City Chevrolet /Keeley Construction

**Date of Issue** 06/18/2004

changed as to use under Building Permit No. 03-0972 , 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 Residency, Use Group R-3, Type 5b, Boca 1999

**Limiting Conditions:** 

**This** was a relocated structure and have not inspected internal walls for framing, electric or plumbing. This does not constitute Code Compliance for these internal components not inspected.

This certificate supersedes certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from



## **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: 19 ROWE ST. (21)	METER MAKE & #
CMP ACCOUNT# 441 1737543001	OWNER
TENANT	PHONE#

				FHONE#					
							TOTAL	EACH	FEE
OUTLETS	35	Receptacles /	5	Switches	5	Smoke Detector	155	.20	11.00
	ر								
FIXTURES	8	Incandescent		Fluorescent		Strips	8	.20	1.60
					-				
SERVICES	T	Overhead		Underground		TTL AMPS <80	1	15.00	15.00
		Overhead		Underground		>80	0	25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS	1	(number of)						1.00	1.00
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING	11	oil/gas units		Interior		Exterior	)	5.00	5.00
APPLIANCES	Ti.	Ranges		Cook Tops		Wall Ovens	1	2.00	2.00
		Insta-Hot		Water heaters	\$	Fans		2.00	
	1	Dryers		Disposals	1	Dishwasher	1	2.00	2.00
		Compactors		Spa		Washing Machine	1	2.00	
		Others (denote)						2.00	
MISC. (number of)	f)	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			1	162		25.00	
	_	Alterations			1	7, 1 0 25		5.00	
		Fire Repairs				and improve the second of the		15.00	
	_	E Lights				1		1.00	
		E Generators				о, о мул в их ошивы эвримения	SECTION STATE OF THE SECTION S	20.00	
								4.00	1 00
PANELS	$\perp \perp$	Service		Remote	ļ	Main		4.00	4.00
TRANSFORMER		0-25 Kva						5.00	<u> </u>
		25-200 Kva			ļ			8.00	
		Over 200 Kva					_	10.00	1
					1	TOTAL AMOUNT DU			41.60
		MINIMUM FEE/CO	MM	IERCIAL 45.00	レ	MINIMUM FEE	35.00	)	145,0

CONTRACTORS NAME EASTERN ELECTRICAL CORP ADDRESS 20 BEDFERD ST. PTLD ME 04/01	MASTER LIC. # MC400///82_
ADDRESS 24) BEDFERD ST. PTLD ME CHILL	LIMITED LIC. #
TELEBRONE DOZ-LONOZ	

SIGNATURE OF CONTRACTOR <

Vhite Copy - Office

Yellow Copy - Applicant

DAVID BRADBURY

PLUMBING APPLICATION	ON	Diyision of Health Engineering					
PROPERTY ADDRESS							
Town or Partland		( 2007-81430640					
Street Subdivision Lot # 27 Rowe Si		Date Fermily Issuer:  S J W   FEE Charged					
PROPERTY OWNERS NAME	Permit						
Last: FOTMS + City Converge	Local	Plumbing Inspector Signature	L.P.I. # 🧲	10401			
Applicant Marc Couther							
Mailing Address of BH Target 1 Rd		260 AG17)					
(If Different) // (Slowester Owner/Applicant Statement	Me	Caution: Inspection Required					
I certify that the information submitted is correct to the b knowledge and understand that any falsification is reaso	est of my on for the Local	I have inspected the insta compliance with the Main	allation authorized ab ne Plumbing Rules.	ove and found it to be in			
Plumbing Inspectors to deny a Permit.	4/21/04						
Signature of Owner/Applicant	Date	Local Plumbing Inspect	tor Signature	Date Approved			
	PERMIT INFO	RMATION					
This Application is for Typ	e of Structure To Be Serv	ed:	Plumbing '	mbing To Be Installed By:			
1.   NEW PLUMBING  1.   SINGLE	FAMILY DWELLING		MASTER PL				
2. ☐ RELOCATED 2. ☐ MO PLUMBING	ODULAR OR MOBILE HOM	/I <del></del>	. □ OIL BURNE . □ MEG'D. HOI	URNERMAN D. HOUSING DEALER/MECHAN <b>IC</b>			
· 3. L. MULTIPE	E FAMILY DWELLING		4.   PUBLIC UTILITY EMPLOYEE				
4. ☐ OTHER-	-SPECIFY	5.	PROPERTY	OWNER 256000			
Hook-tip & Piping Relocation		·	Number Colum <b>Nume</b> of Fixe				
Maximum of 1 Hook-Up	Number Type of	f Fixture					
HOOK-UP: tê PUBIIc sewer in	Hesebilab / Sill Floor Drain	leeek		<b>htub (and Shewer)</b> ower (Separate) —			
the local Sanitary District.	Floor Drain			ower (Separate)			
OB	Urinal		Sin	<b>k</b>			
OR	Drinking Foun	tain	Wa	sh Basin			
HOOK-UP: to an existing subsurface wastewater disposal system.	Indirect Waste	,	Water Closet (Toilet)				
PIPING RELOCATION; of sanitary lines, drains, and piping without	Water Treatment	Softener, Filter, etc.	Clo	thes Washer			
new fixtures.	Grease / Oil S	Separator	Dis	h Washer			
	Dental Cuspid	lor	Gai	bage Disposal			
V OD	Bidet		Lau	indry Tub			
OR	Other:	γ	/ Wa	ter Heater			
ree 003				Fixtures (Septotet)			
[\$6.98]	Colum	in 2		Column 1			
				Fixtures (Subficial) Columb 2			
L S	RMIT FEE SCHEDULE CALCULATING FEE			Total Fixtures			
		<b></b>		Hixture, Fee Transfer Fee			
	7.T	- AC		Hobk-Up & Religiation Fee			
Page 1 of 1 HHE-211 Rev. 6;94	6'			Permit Fee (Total)			
HHE-211 Rev. 6;94	1	HU L	-97	(Total)			