

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-1191	Issue Date:	CBL: 263 D009001
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Location of Construction: 94 Webb St	Owner Name: Morton-stanford Tracy &	Owner Address: 94 Webb St	Phone:
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	Zone: R-3
Past Use: Single Family Home	Proposed Use: Single Family Home / Remove old windows & replace w/ larger window	Permit Fee: \$48.00	Cost of Work: \$2,500.00
Proposed Project Description: Remove old windows & replace w/ larger window		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>N/A</i>	
		INSPECTION: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Use Group: R-3 Type: SB 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: 08/17/2004	Zoning Approval
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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 information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>8/19/04</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>8/19/04</i>
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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

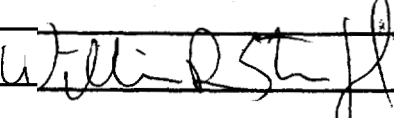
All Purpose Building Permit Application

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.

Location/Address of Construction: 94 Webb St. Portland		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 263D9	Owner: Bill & Tracy Stanford	Telephone: 773-1180 851-9550
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: SAM	Cost Of Work: \$2500. + - Fee: \$4800.00
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Project description: Remove Old windows + replace with larger ones		
Contractor's name, address & telephone: _____		
Mailing address: _____		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: _____		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant:  Date: 8/16/04

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

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Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	

Proposed Use: Single Family Home / Remove old windows & replace w/ larger window	Remove old windows & replace w/ larger window
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Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 08/19/2004
Note:	Ok to Issue: <input type="checkbox"/>		

Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 08/19/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) This permit is only for window replacement and enlargement as specified on th plans. This does NOT authorize any additions or expansions.			

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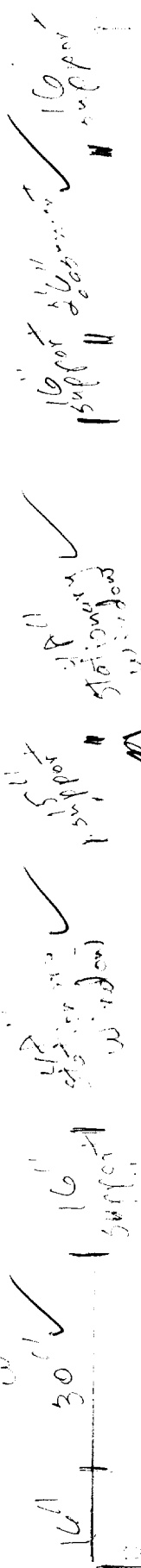


Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/19/2004
Note: **Ok to Issue:**

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Load case 10.

Case 10 window



All headers in this wall are of 2x4 (I think)

Headers in this window of 2x4s ~~Chalk~~

This part of project is a story addition

This header const.

Gable

Case 10

OK
Gable End
of 2x4s
headers constructed

All headers simply supported by 2x4s or 4x4



Gable End

4x4

Support

16"

8x4

Support

16"

Support

2 story load bearing wall

6' casement OK

2-2x12 Headers



BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, **you** are agreeing that **you** understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- | | | |
|-------------------------------------|---|---|
| <input type="checkbox"/> | Footing/Building Location Inspection; | Prior to pouring concrete |
| <input type="checkbox"/> | Re-Bar Schedule Inspection: | Prior to pouring concrete |
| <input type="checkbox"/> | Foundation Inspection: | Prior to placing ANY backfill |
| <input checked="" type="checkbox"/> | Framing/Rough Plumbing/Electrical: | Prior to any insulating or drywalling |
| <input checked="" type="checkbox"/> | Final/Certificate of Occupancy: | Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point. |

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. **All** projects **DO** require a final inspection

If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

NA **CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

William D. Stiff
Signature of Applicant/Designee

Date 8/23/04

James Bernick
Signature of Inspections Official

Date

CBL: 263 D00 Building Permit #: 041191