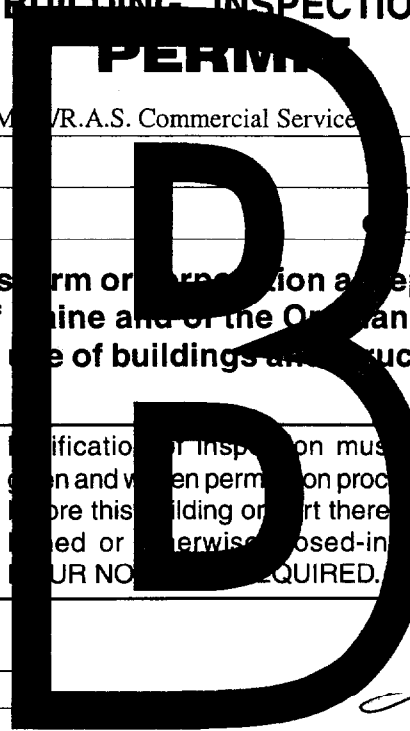


# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

Permit Number: 030192

Please Read  
Application And  
Notes, If Any,  
Attached



This is to certify that Dunn Timothy L & Susan M / R.A.S. Commercial Services  
has permission to Addition of full dormer  
AT 169 Warwick St 276 B006001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of Maine 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.

Inspection must be obtained and when permission is procured before this building or part thereof is occupied or otherwise closed-in. YOUR 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. **PERMIT ISSUED**  
Health Dept.  
Appeal Board  
Other **MAR 28 2003**  
Department Name

*[Signature]*  
Director - Building & Inspection Services

CITY OF PORTLAND

PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0192	Issue Date: MAR 28 2003	CBL: 276 B006001
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Location of Construction: 169 Warwick St	Owner Name: Dunn Timothy L & Susan M Jts	Owner Address: 169 Warwick St CITY OF PORTLAND	Phone: 207-761-4463
Business Name: n/a	Contractor Name: R.A.S. Commercial Services	Contractor Address: PO Box 460 Gray	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: Single Family	Proposed Use: Single Family / Addition of full dormer	Permit Fee: \$149.00	Cost of Work: \$18,000.00	CEO District: 3	12199A
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Proposed Project Description: Addition of full dormer	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied N/A	INSPECTION: Use Group: R-3 Type: SB BOCA 99
	Signature:	Signature:

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: gg	Date Applied For: 03/12/2003	<b>Zoning Approval</b>	
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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 checked="" type="checkbox"/> Wetland <i>4-436 Allow up to 20% expansion 250% show OK</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>to remain a single family</i> Major <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>3/19/03</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:
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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

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 03-0192	<b>Date Applied For:</b> 03/12/2003	<b>CBL:</b> 276 B006001
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<b>Location of Construction:</b> 169 Warwick St	<b>Owner Name:</b> Dunn Timothy L & Susan M Jts	<b>Owner Address:</b> 169 Warwick St	<b>Phone:</b> 207-761-4463
<b>Business Name:</b> n/a	<b>Contractor Name:</b> R.A.S. Commercial Services	<b>Contractor Address:</b> PO Box 460 Gray	<b>Phone:</b>
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> Additions - Dwellings	

<b>Proposed Use:</b> Single Family / Addition of full dormer	<b>Proposed Project Description:</b> Addition of full dormer
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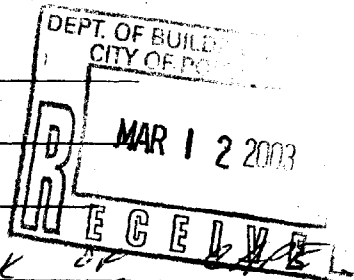
<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 03/19/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 03/28/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>

<b>Comments:</b> 3/25/03-tm: Rafters need to be 2"x10"-s, need header size, chimney must be 2' above ridge, skylight framing, window near shower?, clearance around chimney, floor plan of 2nd floor. Left message w/owner. 3/28/03-tm: ok to issue - rec'd new plans addressing all of the above.
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# 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: <u>169 WARNICK ST.</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot <u>12,199</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>276</u> Block# <u>B</u> Lot# <u>6</u>	Owner: <u>TIMOTHY &amp; SUSAN DVNN</u>	Telephone: <u>761-4463</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>SAME</u>	Cost Of Work: \$ <u>18,000</u> Fee: \$ <u>149.00</u>
Current use: <u>SINGLE FAMILY HOME</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>SAME</u>		
Project description: <u>FULL ADDITION OF FULL BORMER ON BACK OF</u>		
Contractor's name, address & telephone: <u>R.A.S. CONSTRUCTION, P.O. Box 460 GRAY, MAINE 892-6934</u>		
Who should we contact when the permit is ready: <u>TIMOTHY DVNN</u>		
Mailing address: <u>169 WARNICK ST.</u>		
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: <u>761-4463</u> <u>XX</u>		

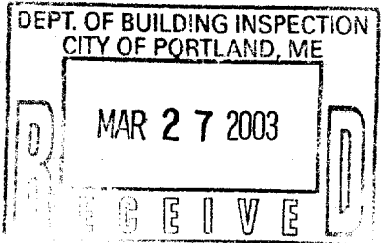


**IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.**

*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.*

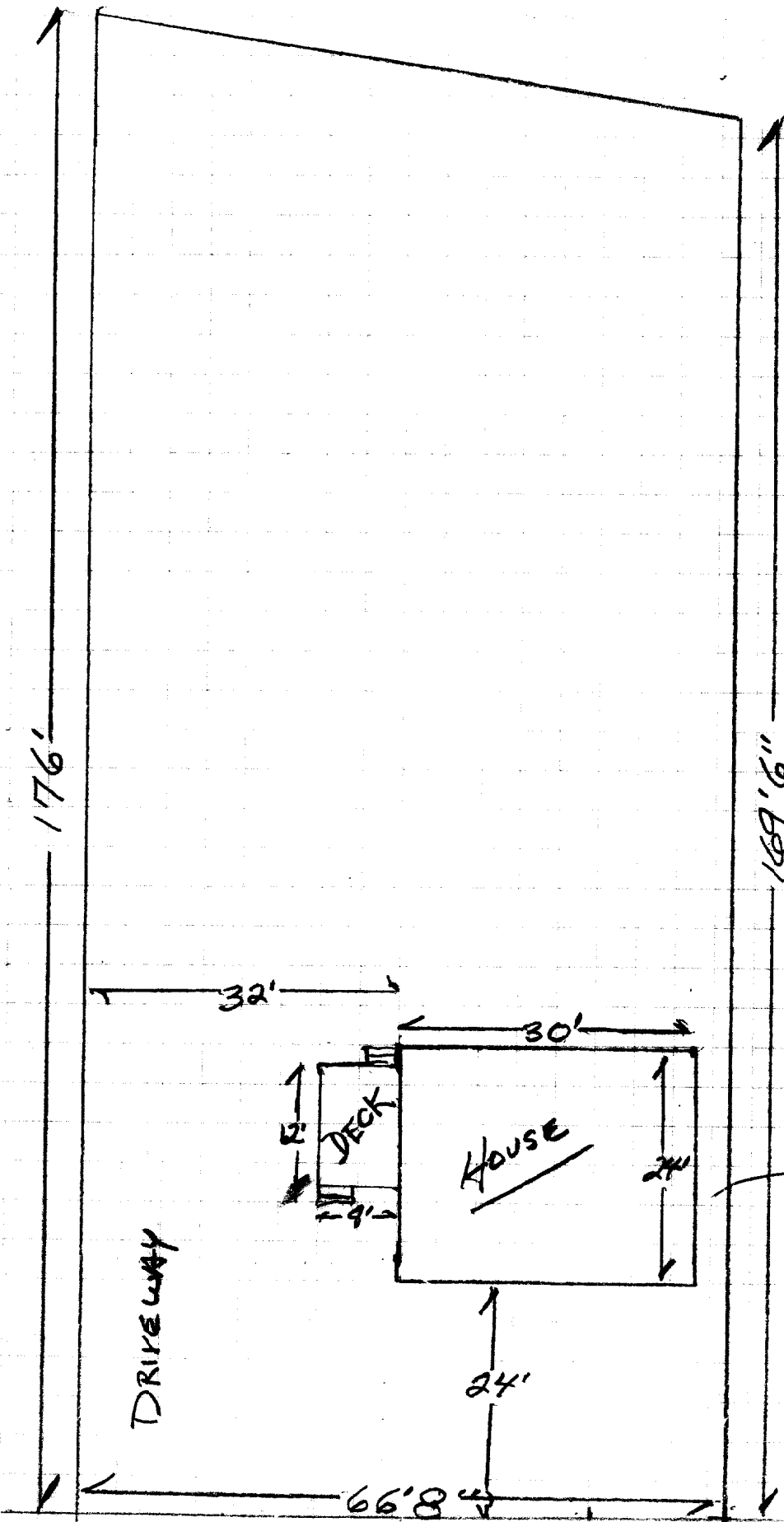
Signature of applicant: <u>[Signature]</u>	Date: <u>3/3/2003</u>
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**This is NOT a permit, you may not commence ANY work until the permit is issued.  
If you are in a Historic District you may be subject to additional permitting and fees with the  
Planning Department on the 4<sup>th</sup> floor of City Hall**



169 WARWICK ST.  
PORTLAND, Me  
04102

CHART# 276  
BLOCK # B  
LOT # 6



NOTE:

NO CHANGE IN  
FOOTPRINT

4'-8"

11-436 B  
80%  
expansion OK

WARWICK

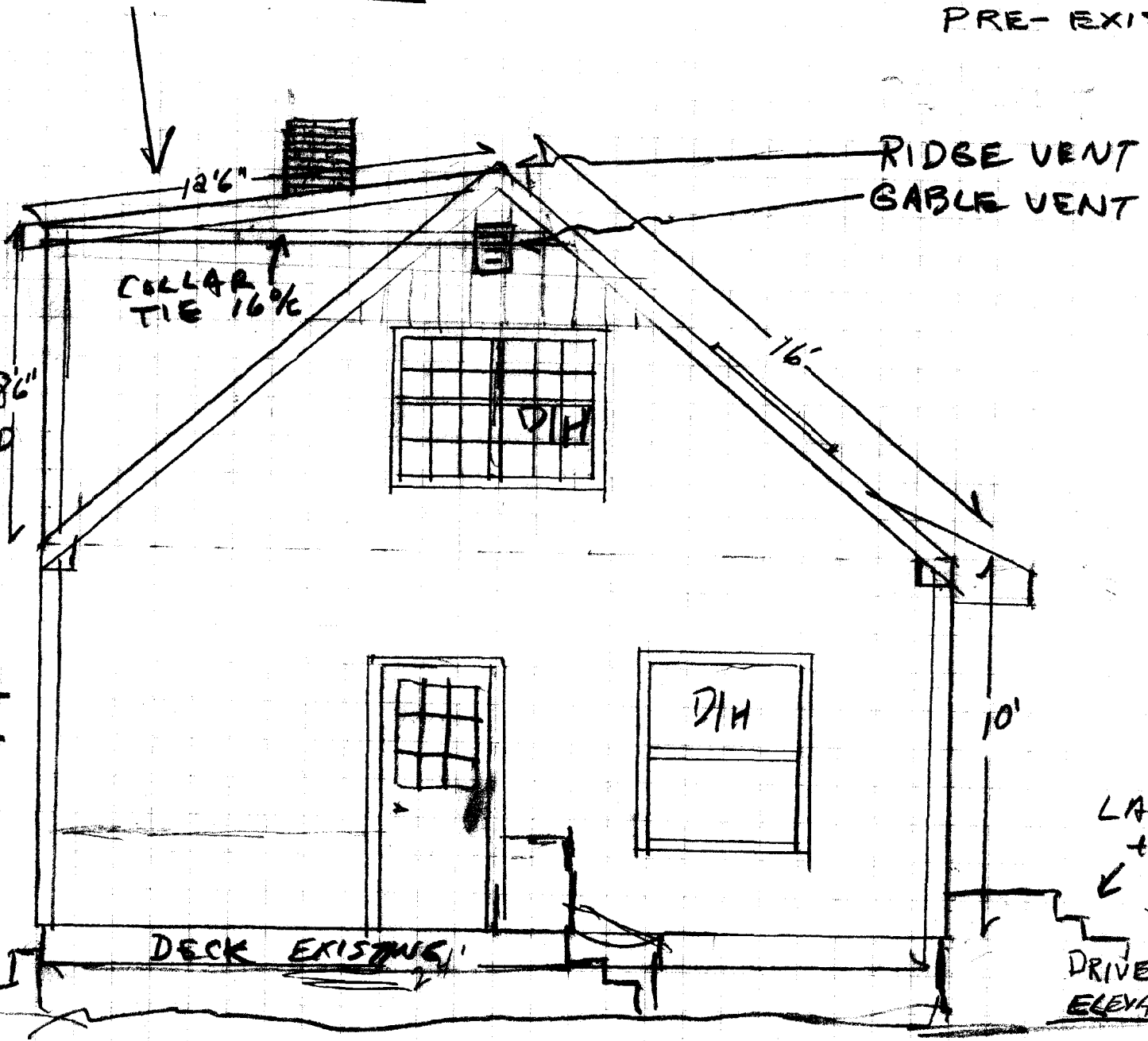
SCALE 1sq = 4'

SCALE = 1 SQ = 1 FOOT

WINDOWS + DOORS  
PRE-EXISTING

DORMER - NEW

- DORMER
- ① FACIA + RAKE  
✓ TO MATCH  
EXISTING
  - ② SIDING  
TO BE  
DETERMINED
  - ③ ROOF DECK  
5/8" CDX
  - ④ RAFTERS  
2X10" 16" o/c
  - ⑤ COLLAR TIES  
FRONT TO BACK  
2X6" 16" o/c



\* NOTES

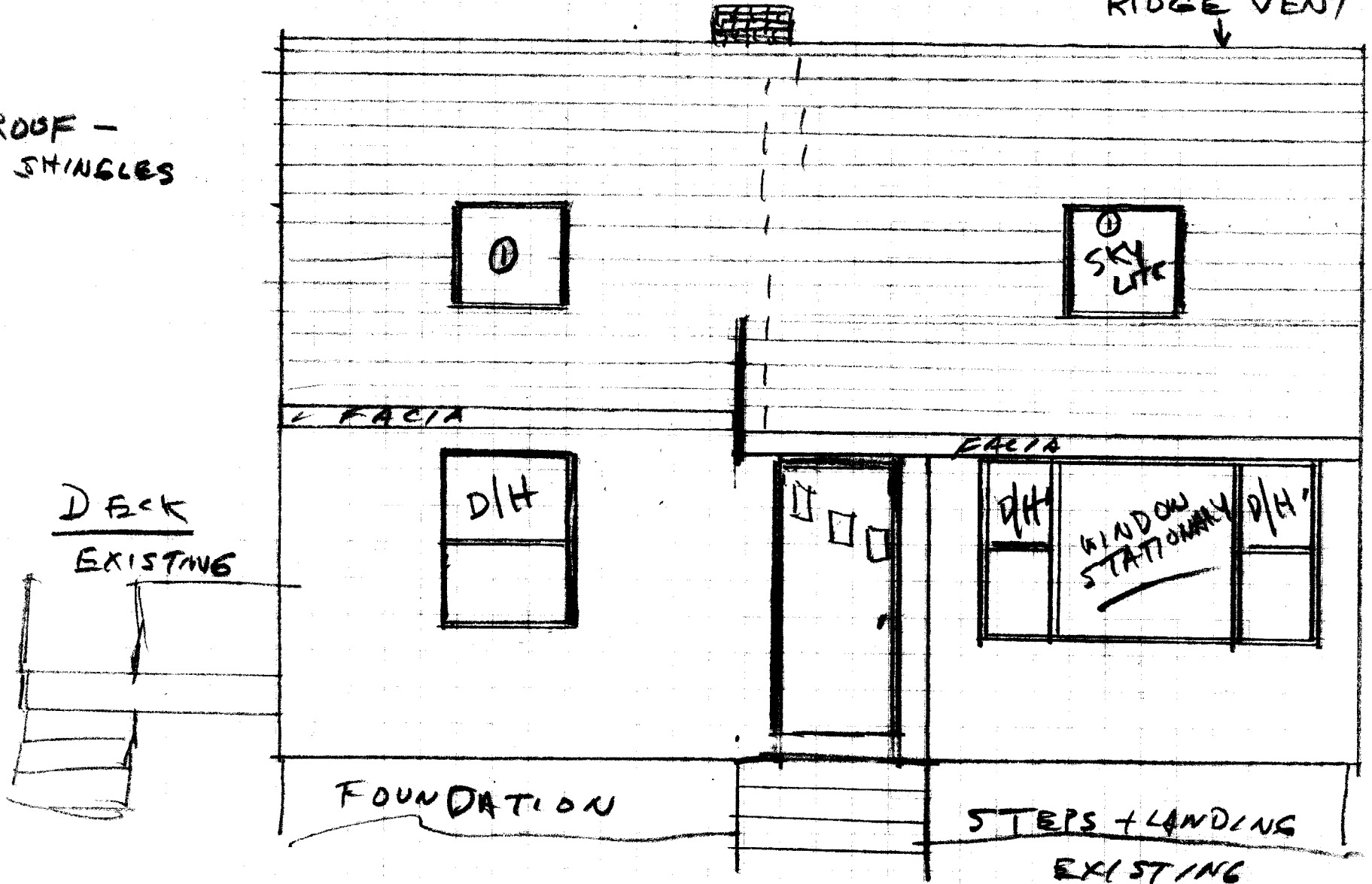
① - SKYLIGHT ROUGH OPENING  
TO BE FRAMED FOR B/W  
A 30" - 34" SKYLIGHT

SCALE = 1 SQ = 1 FOOT

1ST FLOOR DOOR + WIN  
EXISTING

2ND FLOOR SKYLIGHTS  
NEW  
RIDGE VENT  
↓

ROOF -  
SHINGLES



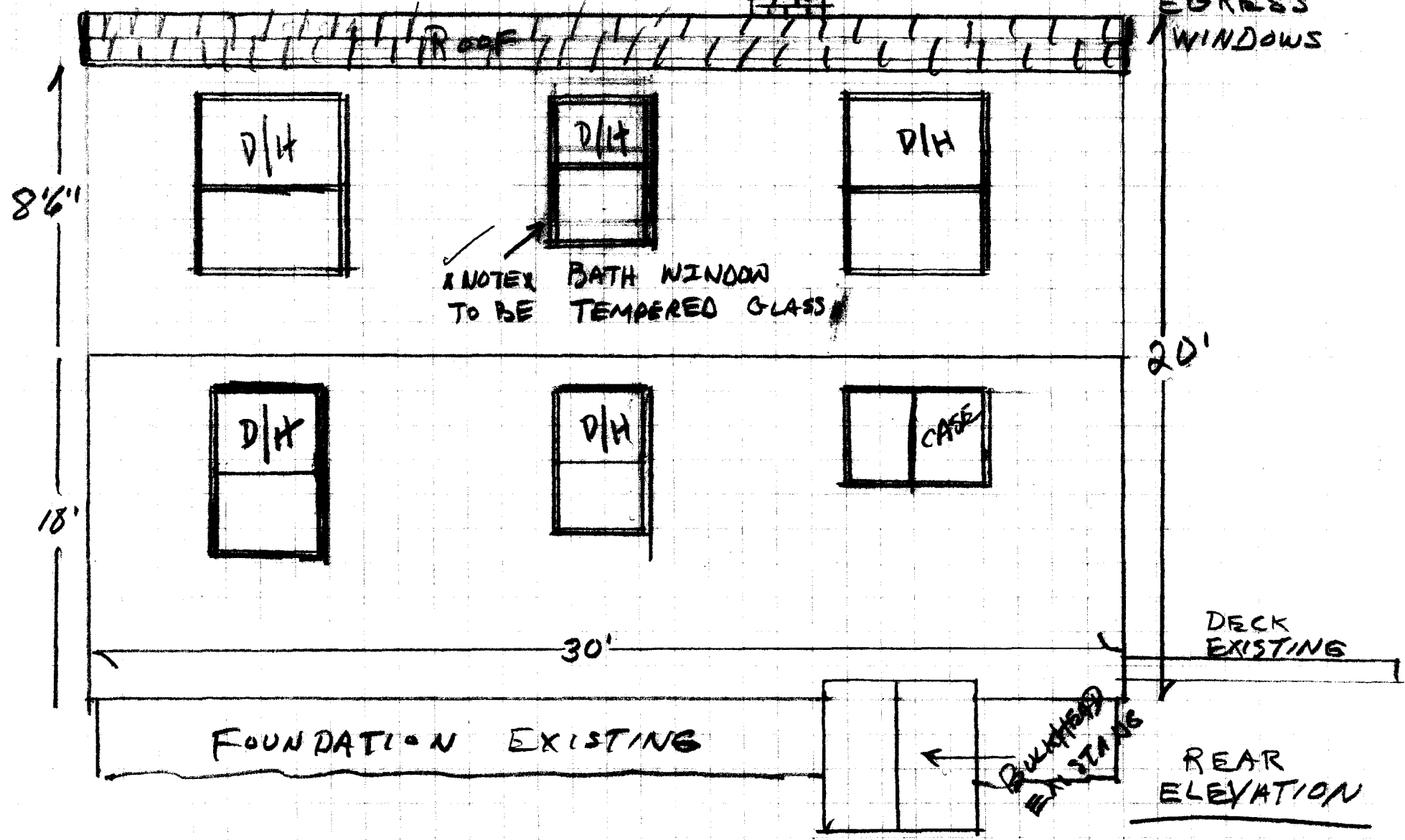
\*NOTE\* ALL NEW WINDOW HOLES TO INCLUDE 2" x 8" HEADERS ✓

SCALE - 1 SQ = 1 FOOT

NOTE: 1ST FLOOR WINDOWS EXISTING

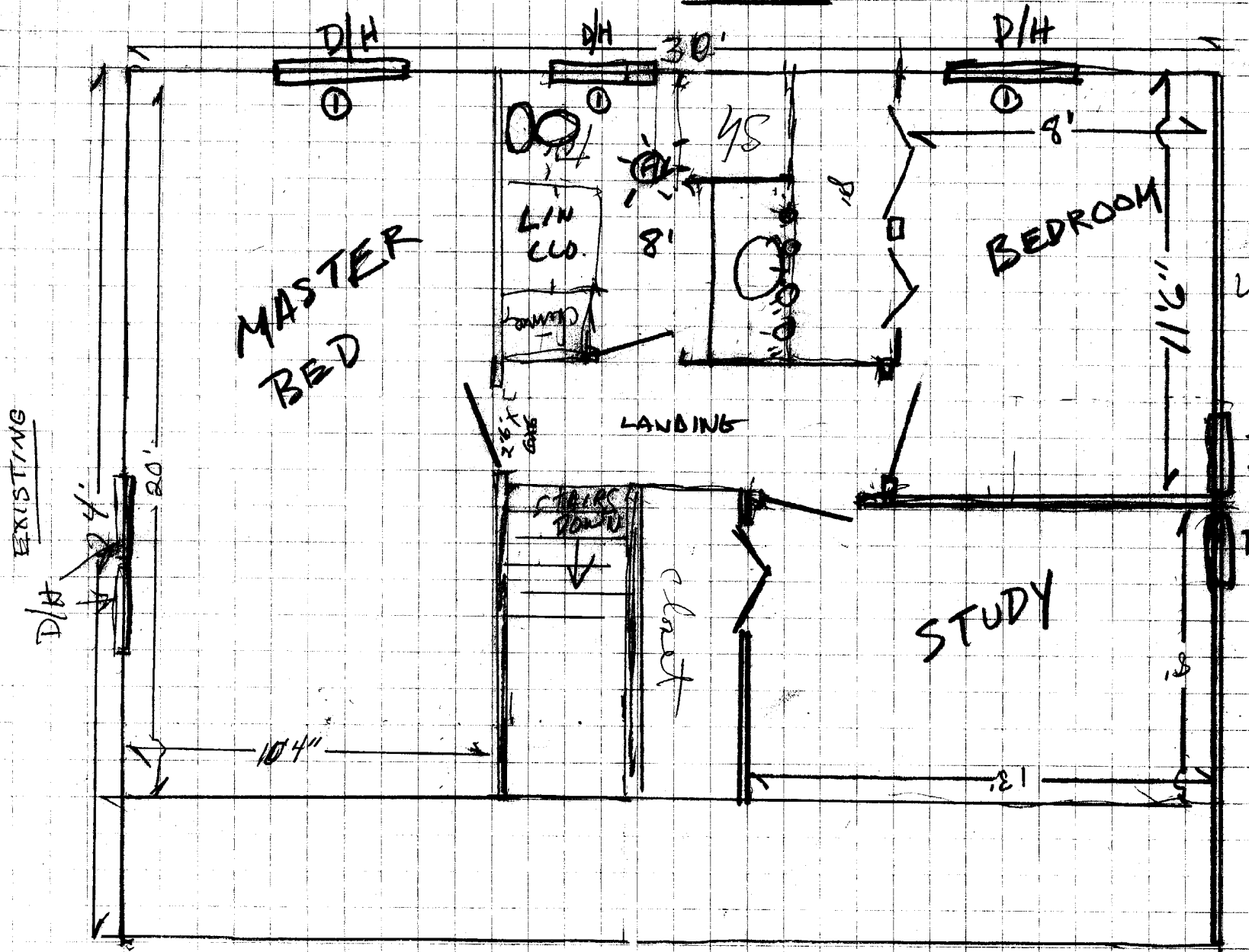
\*NOTE\* CHIMNEY TO BE AT LEAST 2' ABOVE ROOF  
CHIMNEY EXISTING

✓ 2ND FLOOR REAR BEDROOMS CODE EGRESS WINDOWS





REAR



2ND FLOOR

① ~~NEW WINDOWS~~  
 - BEDROOMS EGRESS  
 - HEADERS - 2" x 8"  
 ONCE DEMO COMPLETE

✓ 2" CLEARANCE TO BE MAINTAINED AROUND CHIMNEY.

✓ \* SMOKE DETECTORS TO BE HARD WIRED IN ALL ROOMS AND IN LANDING - ALL ON ONE CIRCUIT \*

FRONT

169 WARWICK ST.