

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

PERMIT ISSUED		CBL:
Permit No: 02-0316	Issue Date: APR 9 2002	300 E005001

Location of Construction: 103 W Commonwealth Dr	Owner Name: Moran John H &	Owner Address: 103 W Commonwealth Dr	Phone: 207-797-0357
Business Name: n/a	Contractor Name: Leighton, Jeffrey	Contractor Address: Underwood Road Falmouth	Phone: 2077813411
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Alterations - Dwellings	Zone:

Past Use: Single Family	Proposed Use: Single Family / Replace exterior existing masonry chimney.	Permit Fee: \$51.00	Cost of Work: \$3,500.00	CEO District: 1
Proposed Project Description: Replace Exterior Chimney		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-3</i> Type: <i>5B</i> <i>4/9/02</i>	
		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: 04/08/2002	Zoning Approval
-------------------------------	--	------------------------

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: _____	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 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: _____
--	---	---	---

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 _____

4/11/02

Pad for Chimney OK. AR

020316

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.

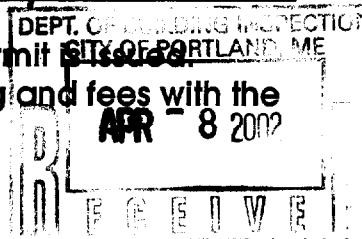
Location/Address of Construction: <u>103 W. Commonwealth Dr.</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot <u>5630</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>300</u> Block# <u>E</u> Lot# <u>005</u>	Owner: <u>John H + Bridget T Moran</u>	Telephone: <u>707797-0357</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Same as above</u>	Cost Of Work: <u>\$3500.</u> Fee: <u>\$51.00</u>
Current use: <u>single family residence</u>		
If the location is currently vacant, what was prior use: <u>NIA</u>		
Approximately how long has it been vacant: <u>NIA</u>		
Proposed use: <u>REPLACE EXISTING MASONRY CHIMNEY.</u>		
Project description: <u>replace exterior chimney</u>		
Contractor's name, address & telephone: <u>Jeffrey Leighton Underwood Rd Falmouth, Me 781-3411</u>		
Who should we contact when the permit is ready:		
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: <u>774-6266</u> - CALL JUTTER WHEN READY <u>aw</u>		

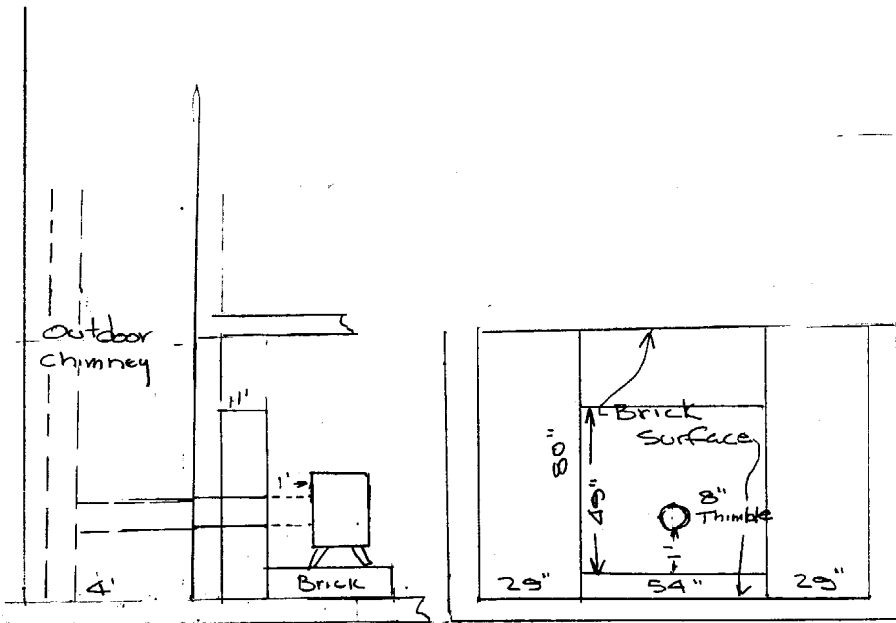
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

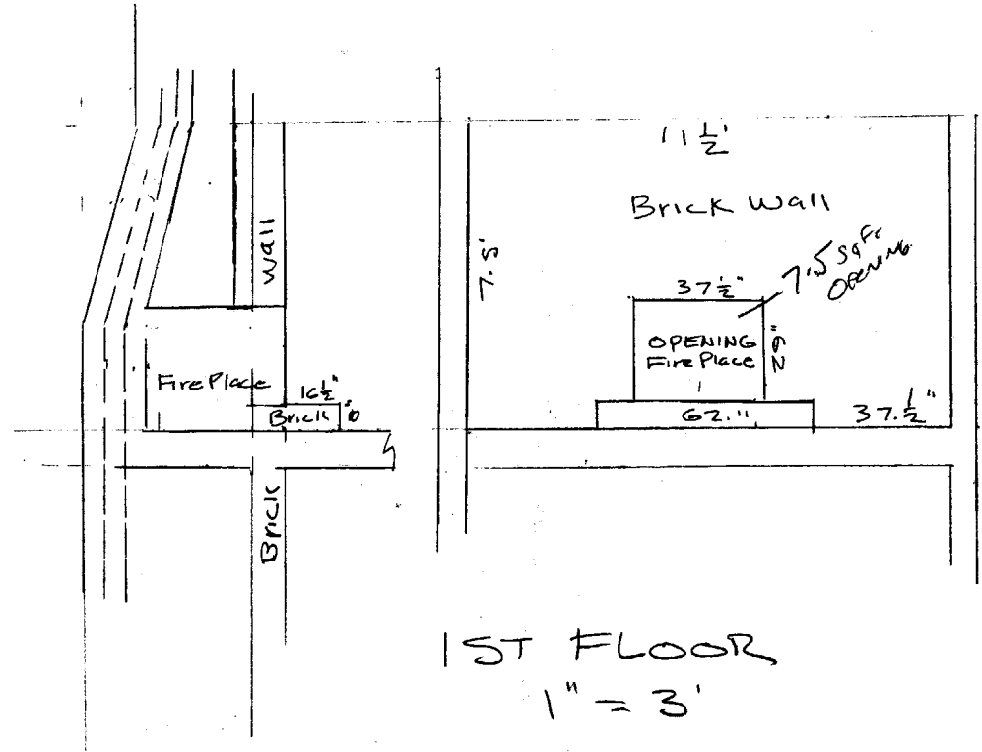
Signature of applicant: <u>John H Moran</u>	Date: <u>4/7/02</u>
---	---------------------

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



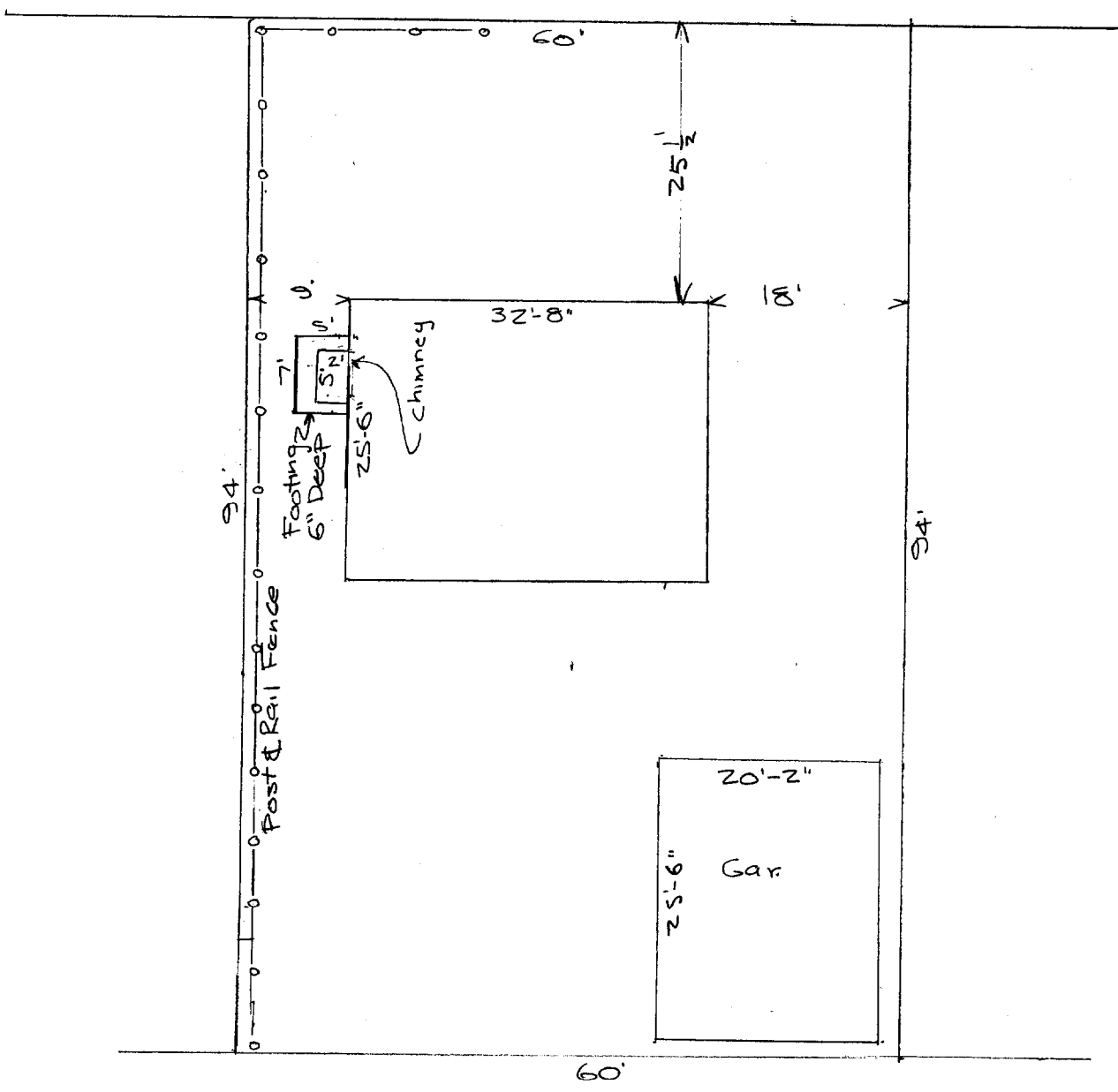


BASEMENT
1" = 3'

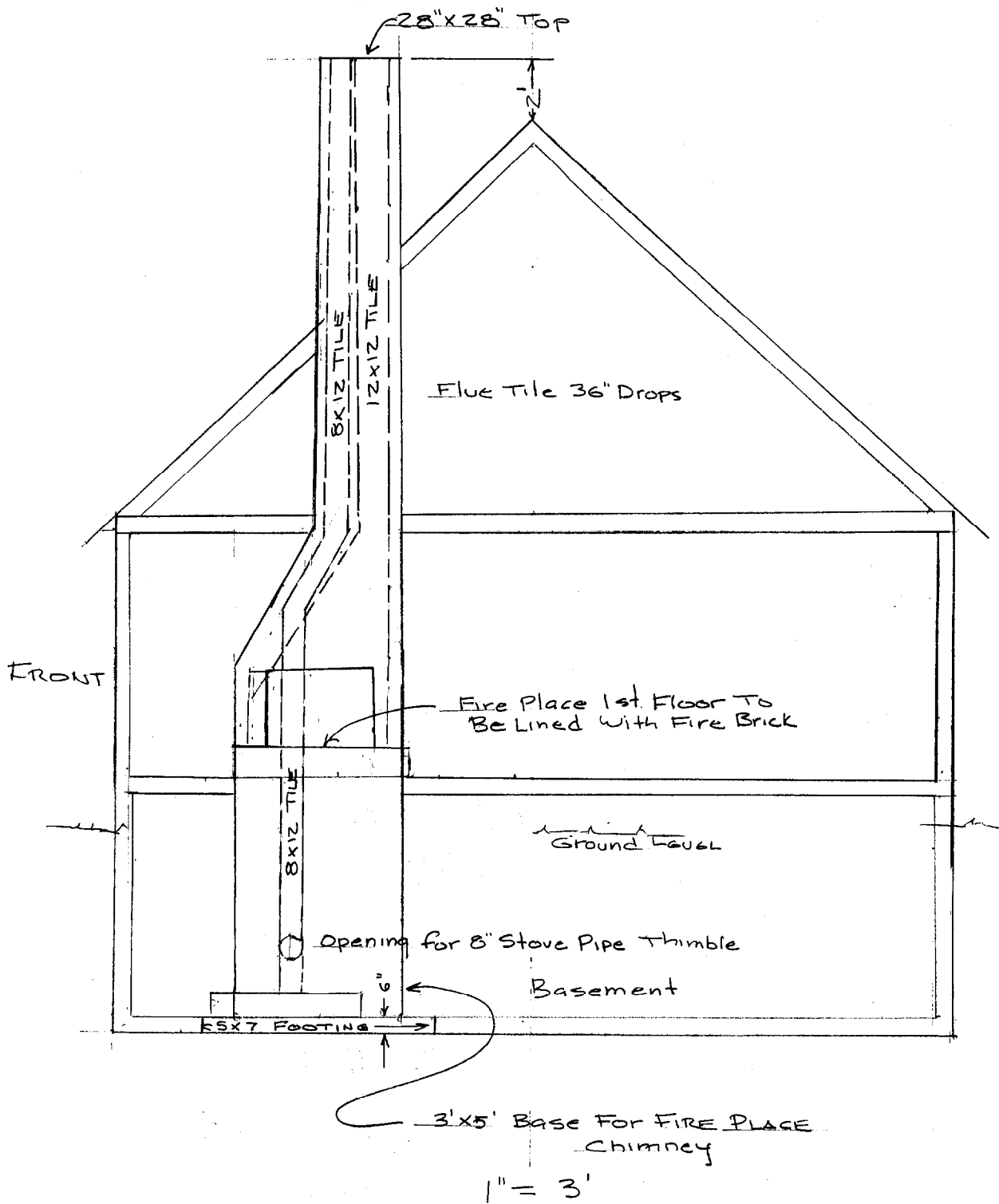


1ST FLOOR
1" = 3'

WEST COMMONWEALTH



RIGHT SIDE OF HOUSE



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.

JB **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

JA **Footing/Building Location Inspection:** Prior to pouring concrete

NA **Re-Bar Schedule Inspection:** Prior to pouring concrete

NA **Foundation Inspection:** Prior to placing ANY backfill

JA **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling
Chimney - Fire Box - combustibles

~~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

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

NA **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

John H. Moran
Signature of applicant/designee

4/11/02
Date

Seamus Burke
Signature of Inspections Official

4/11/02
Date

CBL: 300 F 005 Building Permit #: 020316