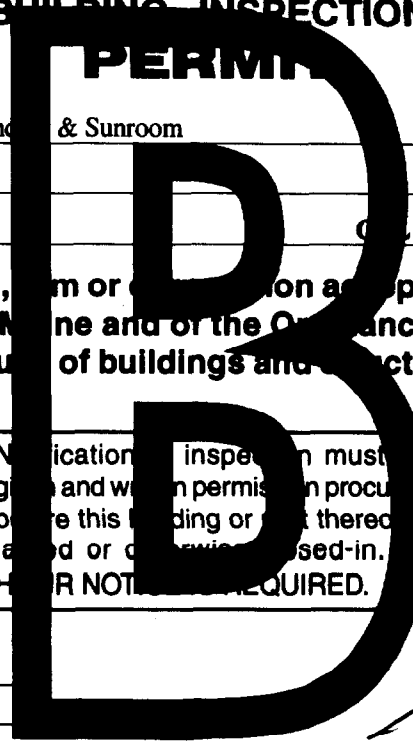


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Permit Number: 030886

Please Read
Application And
Notes, If Any,
Attached



This is to certify that Kayser Sheila A/Maine Windows & Sunroom
has permission to Build 10' x 10' sunroom
AT 107 W Commonwealth Dr 300 E007001

provided that the person or persons, firm or corporation accepting 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.

Notification of inspection must be given and work on permit must be completed before this building or part thereof is leased or otherwise used-in. HOUR NOTIFICATION 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


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: 03-0886	Issue Date:	CBL: 300 E007001
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Location of Construction: 107 W Commonwealth Dr	Owner Name: Kayser Sheila A	Owner Address: 107 W Commonwealth Dr	Phone: 797-5125
Business Name:	Contractor Name: Maine Window & Sunroom	Contractor Address: 71 Portland Rd. Kennebunk	Phone: 2079852300
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: Single Family	Proposed Use: Single Family w/10' x 10'sunroom	Permit Fee: \$93.00	Cost of Work: \$8,000.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: R-3 Type: SB BOCA 99	

Proposed Project Description: Build 10' x 10' sunroom	Signature: <i>[Signature]</i>	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: kwd	Date Applied For: 07/24/2003	Zoning Approval
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<ol style="list-style-type: none"> 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 <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: 1/24/03	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: 1/24/03
	<i>OK Under 14-433B</i>		

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

Portland

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.

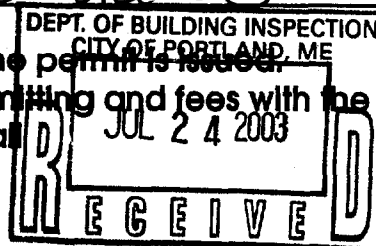
Location/Address of Construction: <u>107 West Commonwealth Drive</u>		
Total Square Footage of Proposed Structure <u>100</u>	Square Footage of Lot <u>6588</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>300</u> Block# <u>E</u> Lot# <u>007</u>	Owner: <u>Sheila Kayser</u>	Telephone: <u>797-5125</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>MWS Inc.</u>	Cost Of Work: \$ <u>8,000.00</u> Fee: \$ <u>79.00</u>
Current use: <u>Deck</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Sunroom</u>		
Project description: <u>To enclose 10x10 Existing Deck with 10x10 sunroom</u>		
Contractor's name, address & telephone: <u>MWS Inc.</u>		
Who should we contact when the permit is ready: <u>Tammy ex 135</u>		
Mailing address: <u>71 Portland Rd Kennebunk 04043</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>985-2300</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>Tammy Patch</u>	Date: <u>6-26-03</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 4th floor of City Hall



ROOF SPAN DESIGN TABLES (HONEYCOMB PANELS)⁽¹⁾
FOR LESSOR OF ULTIMATE LOAD/2.5 OR LOAD AT SPAN/120

PANEL SPAN (ft)	PANEL CONFIG.	ALLOWABLE LIVE ROOF LOADS FOR HONEYCOMB (H/C) PANELS							
		20 (psf)	25 (psf)	30 (psf)	35 (psf)	40 (psf)	45 (psf)	50 (psf)	55 (psf)
8	3" HC	.	.	.	.	.	.	.	.
8	3" HC + H	.	.	.	.	.	.	.	.
8	4.5" HC	.	.	.	.	.	.	.	.
8	4.5" HC + H	.	.	.	.	.	.	.	.
8	6" HC	.	.	.	.	.	.	.	.
8	6" HC + H	.	.	.	.	.	.	.	.
9	3" HC	.	.	.	.	.	.	.	.
9	3" HC + H	.	.	.	.	.	.	.	.
9	4.5" HC	.	.	.	.	.	.	.	.
9	4.5" HC + H	.	.	.	.	.	.	.	.
9	6" HC	.	.	.	.	.	.	.	.
9	6" HC + H	.	.	.	.	.	.	.	.
10	3" HC	.	.	.	.	.	.	.	.
10	3" HC + H + SKY	.	.	.	.	.	.	.	.
10	4.5" HC	.	.	.	.	.	.	.	.
10	4.5" HC + H	.	.	.	.	.	.	.	.
10	6" HC	.	.	.	.	.	.	.	.
10	6" HC + H	.	.	.	.	.	.	.	.
11	3" HC	.	.	.	.	.	.	.	.
11	3" HC + H + SKY	.	.	.	.	.	.	.	.
11	3" HC + H	.	.	.	.	.	.	.	.
11	4.5" HC	.	.	.	.	.	.	.	.
11	4.5" HC + H	.	.	.	.	.	.	.	.
11	6" HC	.	.	.	.	.	.	.	.
11	6" HC + H	.	.	.	.	.	.	.	.
12	3" HC	.	.	.	.	.	.	.	.
12	3" HC + H + SKY	.	.	.	.	.	.	.	.
12	3" HC + H	.	.	.	.	.	.	.	.
12	4.5" HC	.	.	.	.	.	.	.	.
12	4.5" HC + H + SKY	.	.	.	.	.	.	.	.
12	4.5" HC + H	.	.	.	.	.	.	.	.
12	6" HC	.	.	.	.	.	.	.	.
12	6" HC + H	.	.	.	.	.	.	.	.
13	3" HC	.	.	.	.	.	.	.	.
13	3" HC + H + SKY	.	.	.	.	.	.	.	.
13	3" HC + H	.	.	.	.	.	.	.	.
13	4.5" HC	.	.	.	.	.	.	.	.
13	4.5" HC + H + SKY	.	.	.	.	.	.	.	.
13	4.5" HC + H	.	.	.	.	.	.	.	.
13	6" HC	.	.	.	.	.	.	.	.
13	6" HC + H	.	.	.	.	.	.	.	.

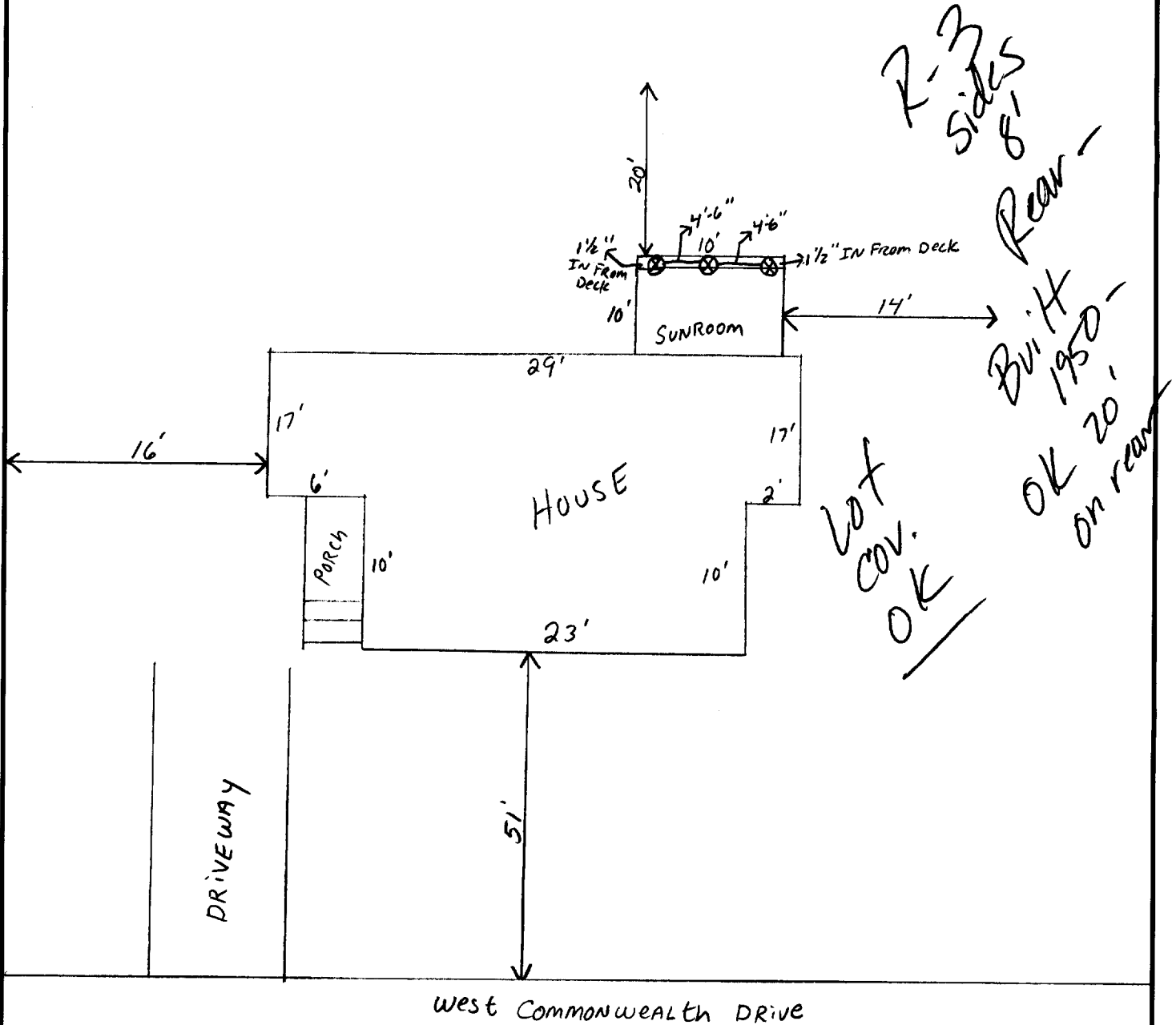
SEE NOTES ON PAGE 2.1.0





"We Treat Your Home Like Our Own."

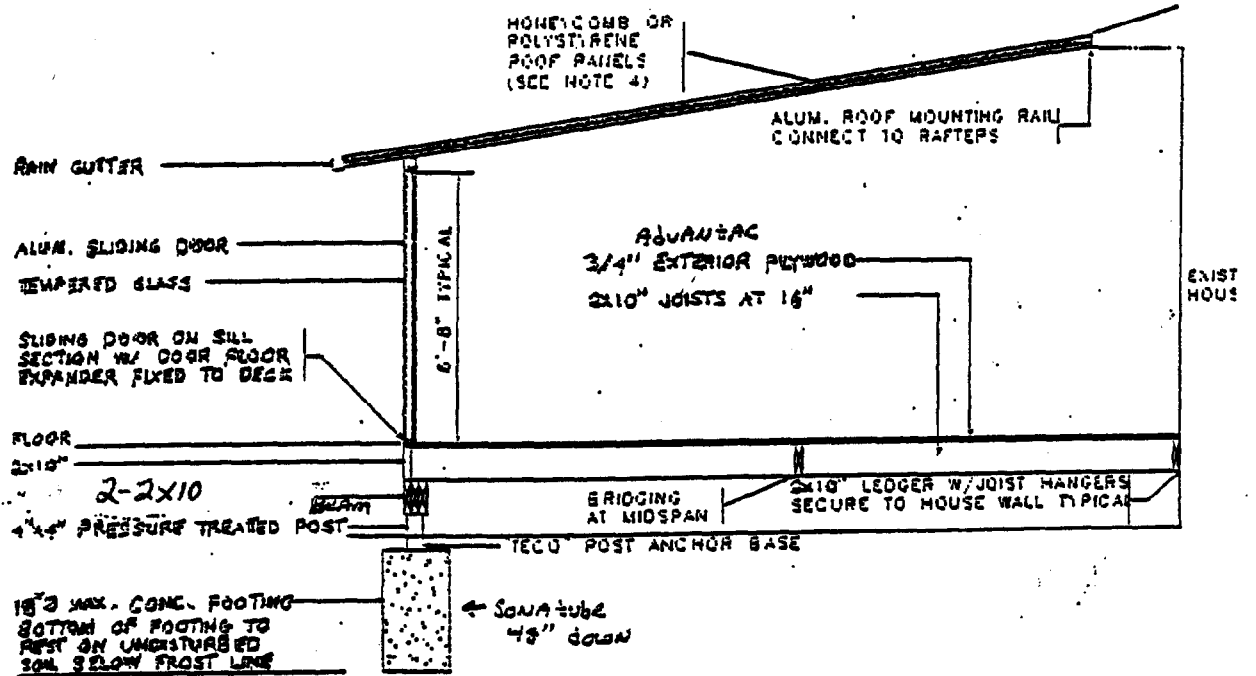
Sheila Kayser
107 West Commonwealth Drive
Portland, Me. 04103



Established 1989

FIGURE 50-2

STUDIO ROOM CROSS SECTION



STUDIO ROOM CROSS SECTION (WOODEN DECK)



"We Treat Your Home Like Our Own."

DATE: 6/18/03

JOB NAME & ADDRESS:

Sheila Kayser
107 West Commonwealth Tr.
Portland, ME 04103

I, Sheila Kayser, hereby authorize **Maine Window & Sunroom** to act as my agent to acquire a building permit for my home improvement project.

X Sheila Kayser
Signature

10 Years of Excellence