



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 107 Tucker Ave 332-D-012

Issued to **Mindy Ray and Marsha Stoltz**

Date of Issue **Sept. 18 2000**

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. **000648**, 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 with home occupation
Massage Therapy/Parity Therapy Use group R3
type 5B boca 99**

Limiting Conditions:

This certificate supersedes
certificate issued **June 29, 2000**

Approved:

9-18-00
(Date)

Jamie Bourke
Inspector

[Signature]
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 107 Tucker Ave. 332-D-012

Issued to Mindy, Ray, & Marsha Stultz

Date of Issue June 29, 2000

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PORTION OF BUILDING OR PREMISES

Entire

Limiting Conditions:

Temporary until July 30, 2000 due to DRC requirements.

APPROVED OCCUPANCY

Single family dwelling
with home occupaton massage / Pálarity
Use group R-3
Type 5B
BOCA 99
Therapy

This certificate supersedes
certificate issued

Approved:

6/30/00
(Date)

A. Rowe
Inspector

[Signature]
Inspector of Buildings

DC

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

COMMENTS

6-20-00 Inspected for change of use per conditions stated ok JB
On Hold until Temp CO is made permanent June 15, 2000 date -

Spoke w/ Mindy and Larry Lyden about the Temp CO issue JB

6-20-00 called owners to notify of the hold status until permanent CO. JB

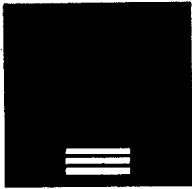
6-29-00 Approved by Mike N. for extension of Temporary CO. until
7/30/00 due to DRC requirements JB

CBL: 332-D-012

permit: 000648

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____



DeLUCA-HOFFMAN ASSOCIATES, INC.
CONSULTING ENGINEERS

778 MAIN STREET
SUITE 8
SOUTH PORTLAND, MAINE 04106
TEL. 207 775 1121
FAX 207 879 0896

#1 Steve

- ROADWAY DESIGN
- ENVIRONMENTAL ENGINEERING
- TRAFFIC STUDIES AND MANAGEMENT
- PERMITTING
- AIRPORT ENGINEERING
- SITE PLANNING
- CONSTRUCTION ADMINISTRATION

MEMORANDUM

332-D-12

TO: Code Enforcement
Kandi Talbot, Planner

FROM: Chris Earle, Construction Representative
Reviewed by Steve Bushey, P.E., Acting Development Review Coordinator

DATE: August 2, 2000

RE: Certificate of Occupancy – 107 Tucker Avenue

On July 27, 2000, the site was reviewed for compliance with the conditions of approval.

It is our opinion that a **permanent certificate of occupancy could be issued**, assuming Code Enforcement has no outstanding issues.

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:

Date 4/18/00
 Permit # #40
 CBL# 332-D-012

SITE LOCATION: 107 Tucker Ave. extension Lot 14

OWNER Larry Lyden / Paul Vosc **TENANT** _____

							TOTAL	EACH FEE		
OUTLETS	Receptacles	40	Switches	25	Smoke Detectors	6	.20		14.20	
FIXTURES	incandescent	15	fluorescent	3	Strips		.20		3.00	
SERVICES	Overhead		Underground	X	TTL AMPS <u>100</u>	<800	15.00		15.00	
	Overhead		Underground			>800	25.00			
Temporary Service	Overhead		Underground		TTL AMPS		25.00			
							25.00			
METERS	(number of)	1					1.00		1.00	
MOTORS	(number of)						2.00			
RESID/COM	Electric units						1.00			
HEATING	oil/gas units	1	Interior		Exterior		5.00		5.00	
	APPLIANCES	Ranges	1	Cook Tops		Wall Ovens	2.00		2.00	
	Insta-Hot		Water heaters		Fans		2.00			
	Dryers	1	Disposals		Dishwasher	1	2.00		2.00	
	Compactors		Spa		Washing Machine	1	2.00		2.00	
	Others (denote)						2.00			
MISC. (number of)	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						25.00			
	Alterations						5.00			
	Fire Repairs						15.00			
	E Lights						1.00			
	E Generators						20.00			
	PANELS	Service		Remote		Main	1	4.00		4.00
	TRANSFORMER	0-25 Kva						5.00		
		25-200 Kva						8.00		
Over 200 Kva							10.00			
TOTAL AMOUNT DUE										
MINIMUM FEE/COMMERCIAL 35.00							MINIMUM FEE	25.00		35.20

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME Carl F. Stephenson **MASTER LIC. #** _____
ADDRESS 235 Fowler Rd **LIMITED LIC. #** LM50016788
TELEPHONE Cape Elizabeth me 999-8784

SIGNATURE OF CONTRACTOR Carl F. Stephenson # 838-5433

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

332-D-012

WLB

PROPERTY ADDRESS

Town or Plantation: Portland

Street Subdivision Lot #: 107

PORTLAND

Date Permit Issued: 12 2 00

7150 72 TOWN COPY

\$ If Double Fee Charged

FEE Charged

L.P.I. # 011214

Local Plumbing Inspector Signature: [Signature]

Last: [Signature] First: [Signature]

Applicant Name: Scott [Signature]

Mailing Address of Owner/Applicant (If Different): [Address]

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: [Date]

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: [Signature] Date Approved: 9-14-00

This Application is for:

1. NEW PLUMBING

2. RELOCATED PLUMBING

Type of Structure To Be Served:

1. SINGLE FAMILY DWELLING

2. MODULAR OR MOBILE HOME

3. MULTIPLE FAMILY DWELLING

4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. MASTER PLUMBER

2. OIL BURNERMAN

3. MFG'D. HOUSING DEALER/MECHANIC

4. PUBLIC UTILITY EMPLOYEE

5. PROPERTY OWNER

LICENSE # 627559

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>OR</p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>	2	Hosebibb / Silcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	1	Water Heater
<p>OR</p> <p>TRANSFER FEE [\$6.00]</p>	Fixtures (Subtotal) Column 2		10	
			10	
			72	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				72
				72



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

FEB 18 2000

CITY OF PORTLAND

#1

332-D-012

000118

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Lot 14 TUCKER #107 Use of Building _____ Date 2/15/00
Name and address of owner of appliance Larry Lydon

Installer's name and address PETER J KIMBALL 108 HARRIET ST S. PORTLAND ME 04106
Telephone 799-5461

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: NEW YORKER

U.L. Approved Yes No

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # MS 0000 5132
- Gas # _____
- Other _____

Type of Chimney:

Masonry Lined
Factory built _____

Metal
Factory Built U.L. Listing # _____

Direct Vent
Type SS1 UL# YES

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame 5' + feet.

fee 30.00

Approved

Approved with Conditions

Fire: HMM

Ele.: _____

Bldg.: H

See attached letter or requirement

Signature of Installer _____

ELECTRICAL INSTALLATIONS

Permit Number _____

Location _____

Owner _____

Date of Permit _____

Final Inspection 5/15

By Inspector D. Goodale

INSPECTION: Service 01/26/00 by #1000
 Service called in 01/27/00
 Closing-in _____ by _____

PROGRESS INSPECTIONS: 02/02/00 Closing OK
 _____ | _____ | not ready
2/4/00 | Close to OK | DC
 _____ | _____ | _____
 _____ | _____ | _____
 _____ | _____ | _____

DATE:	REMARKS:
01/19/00	Grounding busbars missing } FAILED
"	expansion joint " }
"	wiring tape " }
"	pull box (GFC ground rod) }
2/4/00	- Add Smoke Detector to 1st floor
	- Add Pull Chain light to Attic Scuttle