

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

## DEPARTMENT OF BUILDING INSPECTION PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 060600

PERMIT ISSUED  
MAY 19 2006  
CITY OF PORTLAND

This is to certify that Orlando Carmela D & /Turn Contracting & Remodeling  
has permission to Remodel Bath and increase size by expanding into adjoining room.  
AT 14 Tarbell Ave 332 E004001

provided that the person or persons who perform or supervise the work accepting this permit shall comply with all of the provisions of the Statutes of this State 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 when permission proceeds before this building or part thereof is closed or enclosed-in 24 HOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

*[Signature]*  
5/18/06  
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: 06-0600	Issue Date:	CBL: 332 F004001
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Location of Construction: 14 Tarbell Ave 64	Owner Name: Orlando Carmela D &	Owner Address: 14 Tarbell Ave	<b>PERMIT ISSUED</b> MAY 19 2006 CITY OF PORTLAND
Business Name:	Contractor Name: Turner Contracting & Remodeling	Contractor Address: P.O. Box 2106 Windham	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-2

Past Use: Single Family	Proposed Use: Single Family	Permit Fee: \$75.00	Cost of Work: \$6,000.00	CEO District: 5
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Proposed Project Description: Remodel Bath and increase size by expanding into adjoining room.	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>N/A</i>	INSPECTION: Use Group: R-3 Type: 5B IRC 2003 Signature: <i>[Signature]</i>
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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: gad	Date Applied For: 04/24/2006	<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 type="checkbox"/> Wetland <i>interior alterations only</i> <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>5/1/06</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>[Signature]</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

6/13/06 Close in insp w/ Fred T.

- verified canister lights Listed for wet locations
  - verified shower canister & pendant on GFCI circuits.
  - question on venting of claw tub (using horizontal wet vent allowance)
- note to Don McCoy - he will put @ 2" vent on tub. OK
- Framing OK - Air test on Drains  
OK to proceed JMB

Close out

# ELECTRICAL PERMIT

## City of Portland, Me.

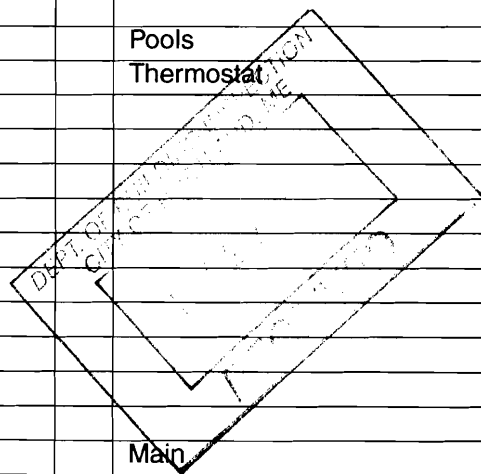


To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 5.22.06  
 Permit # -2006-4455-  
 CBL# 332-F-4

LOCATION: 14 Turbell Rd METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER Holden  
 TENANT \_\_\_\_\_ PHONE # \_\_\_\_\_

							TOTAL	EACH	FEE	
OUTLETS	10	Receptacles	10	Switches	1	Smoke Detector		.20		
FIXTURES	4	Incandescent		Fluorescent		Strips		.20		
SERVICES		Overhead		Underground		TTL AMPS <800		15.00		
		Overhead		Underground		>800		25.00		
Temporary Service		Overhead		Underground		TTL AMPS		25.00		
								25.00		
METERS		(number of)						1.00		
MOTORS		(number of)						2.00		
RESID/COM		Electric units						1.00		
HEATING		oil/gas units		Interior		Exterior		5.00		
APPLIANCES		Ranges		Cook Tops		Wall Ovens		2.00		
		Insta-Hot		Water heaters		Fans		2.00		
		Dryers		Disposals		Dishwasher		2.00		
		Compactors		Spa		Washing Machine		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		4.00		
TRANSFORMER		0-25 Kva						5.00		
		25-200 Kva						8.00		
		Over 200 Kva						10.00		
							TOTAL AMOUNT DUE			
							MINIMUM FEE/COMMERCIAL	45.00		
							MINIMUM FEE		35.00	



CONTRACTORS NAME Seth Nielsen MASTER LIC. # MS60018820  
 ADDRESS 130 Plumrose Rd LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 939-6759

SIGNATURE OF CONTRACTOR [Signature] [Signature]  
 White Copy - Office • Yellow Copy - Applicant

[Handwritten Signature]  
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