

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 051189
DEC 15 2005
CITY OF PORTLAND

This is to certify that Mardigan Stephen /East Coast Developments LLC

has permission to build a single family w/ a 1 car detached garage & deck

AT 148 Plymouth St City of Portland, OR 97201 345 A007001

provided that the person or persons, firm or corporation 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 procured before this building or part thereof is started or occupied. 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

Jamie Brunk 12/19/05
Director - Building & Inspection Services

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: 05-1189	Issue Date:	CBL: 345 A007001
-----------------------	-------------	---------------------

Location of Construction: 148 Plymouth St <b>152</b>	Owner Name: Mardigan Stephen	Owner Address: 460 Baxter Blvd	Phone:
Business Name:	Contractor Name: East Coast Developement LLC	Contractor Address: P.O. Box 3561 Portland	Phone: 2074157586
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	Zone: <b>R3</b>

Past Use: Vacant Land	Proposed Use: Single Family home/ build a single family w/ a 1 car attached garage & deck	Permit Fee: \$1,221.00	Cost of Work: \$125,000.00	CEO District: 5
Proposed Project Description: build a single family w/ a 1 car attached garage & deck		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>R3</b> Type: <b>SB</b> <b>IRC-2003</b>	
		Signature:	Signature: <b>JMB 10/19/05</b>	
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: Idobson	Date Applied For: 08/19/2005	<b>Zoning Approval</b>		
-----------------------------	---------------------------------	------------------------	--	--

- 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..

<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <b>MA</b> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <b>Amely Zone X</b> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <b>2005-0189</b> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/> <b>OK with conditions</b> Date: <b>8/26/05</b>	<b>Zoning Appeal</b> <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	<b>Historic Preservation</b> <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: _____
---	--	--

**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	

1/25/06 Footings - Forming guy holes about 1' up -  
not ready to pour

1/26/06 Setback - Footing to Front for 25' to existing R/W side  
29' left side 11' Rear yet to be per plan

2/6/06 Backfill insp - Turstone main fabric OK to fill JMK

1/4/06 structural services + electrical only ELEC OK

3/22/06. checked framing / plumbing for leaks

Electric done earlier - test on plumbing and  
OK - no issues seen with framing - Erics /  
Stairs all OK - OK to close - on walls.  
JMK

7/19/06

~~Deck needs 2x12 joists~~

- ~~needs additional piece for 11' 3" span new some tube~~
- ~~post needs post protection~~

~~ceiling cant issue in basement. additional column needed.~~

~~electric meter ground need to jump the meter~~

~~ledge needs min of 3 nails per joint~~

~~stairs from garage to building not done~~

~~no info on Heating system - need. - ?~~

SMH by J. Bourke

~~1) door load spec. for emergency egress.~~

~~2) New some tube for deck 3) handrail for stairs~~

2/27/07 all done - JMK for M



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 150 Plymouth St CBL 345 A007001

Issued to Mardigan Stephen /East Coast Development LLC Date of Issue 02/27/2007

**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. 05-1189, 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 Occupancy, Type 5b, Use Group R-3, IRC 2003

**Limiting Conditions:**

**This certificate supersedes certificate issued**

Approved:

2/27/07  
\_\_\_\_\_  
(Date) Inspector

\_\_\_\_\_  
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.

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Health Engineering

Richard  
854-1829  
7/2/05

## PROPERTY ADDRESS

Town or Plantation: Portland  
Street: 139 Plymouth St  
Subdivision Lot #:

## PROPERTY OWNERS NAME

Last: East Coast Dev  
First:

Applicant Name: Martin x Son

Mailing Address of Owner/Applicant (If Different): THARZY RD west

Date Permit Issued: 3.8.04 \$ 172.09 FEE  Double Fee Charged  
 Local Plumbing Inspector Signature: Thomas Markley L.P.I. # 0744  
343 B 013

## 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]

Signature of Owner/Applicant

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

Date Approved

## PERMIT INFORMATION

### This Application is for

- NEW PLUMBING
- RELOCATED PLUMBING

### Type of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER - SPECIFY \_\_\_\_\_

### Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 02727

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p><b>OR</b></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>	0,2	Hosebibb / Sillcock	0,1	Bathtub (and Shower)
		Floor Drain	0,1	Shower (Separate)
		Urinal	0,4	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	0,3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Other: _____		Laundry Tub
		Fixtures (Subtotal) Column 2	0,9	Water Heater
		0,2	Fixtures (Subtotal) Column 1	
		1,1	Fixtures (Subtotal) Column 2	
			<b>Total Fixtures</b>	
			Fixture Fee	
			Transfer Fee	
			Hook-Up & Relocation Fee	
		82	<b>Permit Fee (Total)</b>	

**OR**

TRANSFER FEE  
\$6.00

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME  
MAR - 8 2005  
RECEIVED

1/1 2462

10/72

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	
<b>PROPERTY OWNERS NAME</b>	
Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

Date Permit Issued: 3 20 06 \$ 1154  If Double Fee Charged

Thomas N. Malley L.P.I. # 0744

Local Plumbing Inspector Signature

345 A 7

## 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

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

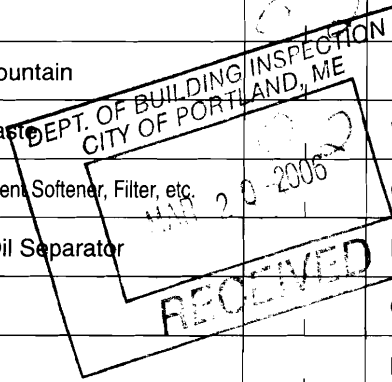
Date Approved

## PERMIT INFORMATION

<b>This Application is for</b>	<b>Type of Structure To Be Served:</b>	<b>Plumbing To Be Installed By:</b>
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>02121</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.	<u>02</u>	Hosebibb / Sillcock	<u>01</u>	Bathtub (and Shower)
		Floor Drain	<u>01</u>	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	<u>02</u>	Sink
		Drinking Fountain		Wash Basin
<b>OR</b> TRANSFER FEE [\$6.00]		Indirect Waste	<u>02</u>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	<u>02</u>	Fixtures (Subtotal) Column 1
			<u>08</u>	Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			<u>51</u>	<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

## PROPERTY OWNERS NAME

Last: \_\_\_\_\_ First: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
Mailing Address of Owner/Applicant (If Different): \_\_\_\_\_

PORTLAND PERMIT # 10184 TOWN COPY

Date Permit Issued: 2/8/07 \$ 550.00  If Double Fee Charged

[Signature]  
Local Plumbing Inspector Signature

L.P.I. # 360

Application and the Maine Plumbing Rules.

345 A 7

## 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 \_\_\_\_\_ 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 \_\_\_\_\_ Date Approved \_\_\_\_\_

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served:</b> 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	<b>Plumbing To Be Installed By:</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER  LICENSE # <u>1777</u>
---	--	---

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	2	Hosebib / Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain		Wash Basin
<b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
			1	Fixtures (Subtotal) Column 2
			12	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

# ELECTRICAL PERMIT

## City of Portland, Me.

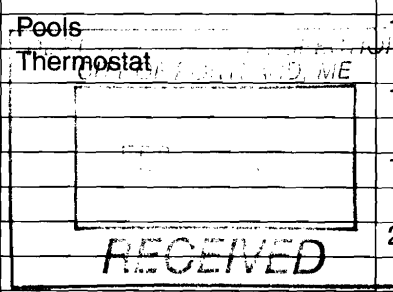


To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date Feb 21 06  
 Permit # 06-4148  
 CBL# ~~06-4148~~ 345A007

LOCATION: 150 PLYMOUTH ST METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER STEVE MADDIGAN  
 TENANT \_\_\_\_\_ PHONE # 772-5555

							TOTAL EACH FEE		
OUTLETS	35	Receptacles	25	Switches	6	Smoke Detector	.20	13.20	
FIXTURES	5	Incandescent		Fluorescent	3	Strips	.20	1.60	
SERVICES	✓	Overhead		Underground		TTL AMPS <800	15.00	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	1	Ranges		Cook Tops		Wall Ovens	2.00	2.00	
		Insta-Hot		Water heaters		Fans	2.00		
		Dryers	1	Disposals	1	Dishwasher	2.00	6.00	
		Compactors		Spa	1	Washing Machine	2.00	2.00	
		Others (denote)					2.00		
MISC. (number of)		Air Cond/win					3.00		
		Air Cond/cent				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 100AMP	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 45.00							MINIMUM FEE 35.00		44.20



CONTRACTORS NAME BAUMANN ELECTRIC INC. MASTER LIC. # MS 60017684  
 ADDRESS 20 ORCHARD RD. CAPE ELIZABETH LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 838-0475

SIGNATURE OF CONTRACTOR \_\_\_\_\_

# 2611