

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: 02-0008	Issue Date: 4/2002	CBL: 371 A014001
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Location of Construction: 1925 Washington Ave	Owner Name: Chiem Mai D	Owner Address: 1925 Washington Ave	Phone: 207-878-7926
Business Name: n/a	Contractor Name: Oates, Vincent	Contractor Address: 48 Rockland Ave Portland	Phone: 2078312145
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Additions - Dwellings	Zone: R2

Past Use: Single Family	Proposed Use: Single Family / Finish bathroom on second floor. Add Deck	Permit Fee: \$90.00	Cost of Work: \$10,500.00	CEO District: 2
Proposed Project Description: Build Second floor addition bathroom & deck.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB	
		Signature: _____		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: 01/04/2002
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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: 1/4/02	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: 1/4/02	

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: 1925 WASHINGTON AVE 1/4/02 (207) 878-7926
 ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

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 1-31-02
 Permit # 2002-4085
 CBL# 371A 014

LOCATION: 1925 Washington Ave METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER MAJ D. Chiem
 TENANT _____ PHONE # 878-7926

TOTAL EACH FEE

Category	Quantity	Item Description	Fee	Total
OUTLETS	12	Receptacles	.20	2.40
FIXTURES	10	Incandescent	.20	2.00
SERVICES		Overhead	15.00	
		Underground	25.00	
Temporary Service		Overhead	25.00	
		Underground	25.00	
METERS	(number of)		1.00	
MOTORS	(number of)		2.00	
RESID/COM		Electric units	1.00	
HEATING		oil/gas units	5.00	
APPLIANCES		Ranges	2.00	
		Insta-Hot	2.00	
		Dryers	2.00	
		Compactors	2.00	
		Others (denote)	2.00	
		Air Cond/win	3.00	
		Air Cond/cent	10.00	
		HVAC	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	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		

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME Duxley Electric MASTER LIC. # MS20025931
 ADDRESS P.O. Box 6029 Brunswick LIMITED LIC. # _____
 TELEPHONE 729-6345

SIGNATURE OF CONTRACTOR [Signature] Alan Duxley

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	1425 WASHINGTON AVE - PORTLAND ME 04103

PROPERTY OWNERS NAME

Last: CHIEM First: MAI

Applicant Name:	13300 COLLEGE LIC # M 590009320
Mailing Address of Owner/Applicant (If Different)	295 PLYMOUTH RD PLYMOUTH MAINE 04105

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: 2/7/02

2002 8071

Caution: Permit Required

PORTLAND 7985 TOWN COPY

Date Permit Issued: 2.7.02 \$ 60 Double Fee FEE Charged

Local Plumbing Inspector Signature: _____ L.P.I. # _____

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

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 # 093701

Hook-Up & Piping Relocation Maximum of 1 Hook-Up

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.

OR

HOOK-UP: to an existing subsurface wastewater disposal system.

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE
[\$6.00]

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

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE

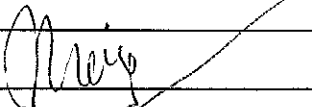
All Purpose Building Permit Application

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>1925 Washington Ave</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>371</u> Block# <u>A</u> Lot# <u>014</u>	Owner: <u>Tony Mai Chiem</u>	Telephone: <u>878-7926</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Tony Mai Chiem</u> <u>1925 Washington Ave</u> <u>Portland Me 04103</u>	Cost Of Work: \$ <u>10,500</u> Fee: \$ <u>87.00</u>
Current use: <u>Single Family</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Master Bathroom & Deck added to S/F</u>		
Project description: <u>Finish Bathroom 2nd Floor Addition</u>		
Contractor's name, address & telephone: <u>Vincent Oates 48 Rockland Ave</u> <u>Portland Me</u>		
Who should we contact when the permit is ready: <u>Vincent Oates</u>		
Mailing address: <u>48 Rockland Ave</u> <u>Portland Me 04102</u>		Phone: <u>831-2145</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: 	Date: <u>1-2-02</u>
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This is not a permit, you may not commence ANY work until the permit is issued

Building

10
Floor Joists 2x8 16" on center
Walls 2x6 ✓ Height 7'6"
Headers 2x8 ✓
Rafters 2x6 ✓ 16" on center 10'6" span
Plywood for roof $\frac{5}{8}$ " $\frac{1}{2}$ " or $\frac{3}{4}$ " CDX w/ H clips
Walls $\frac{1}{2}$ " waferboard ✓
2 windows 48" x 48" Tempered Glass ^{if within} 3' of shower or tub
1 Sliding Door 60" x 6'8" $\frac{3}{4}$ x 2x8
 $\frac{2}{2}$ x 2x10
inside Bathroom wall & ceiling $\frac{1}{2}$ " moisture board

Insulation

Deck

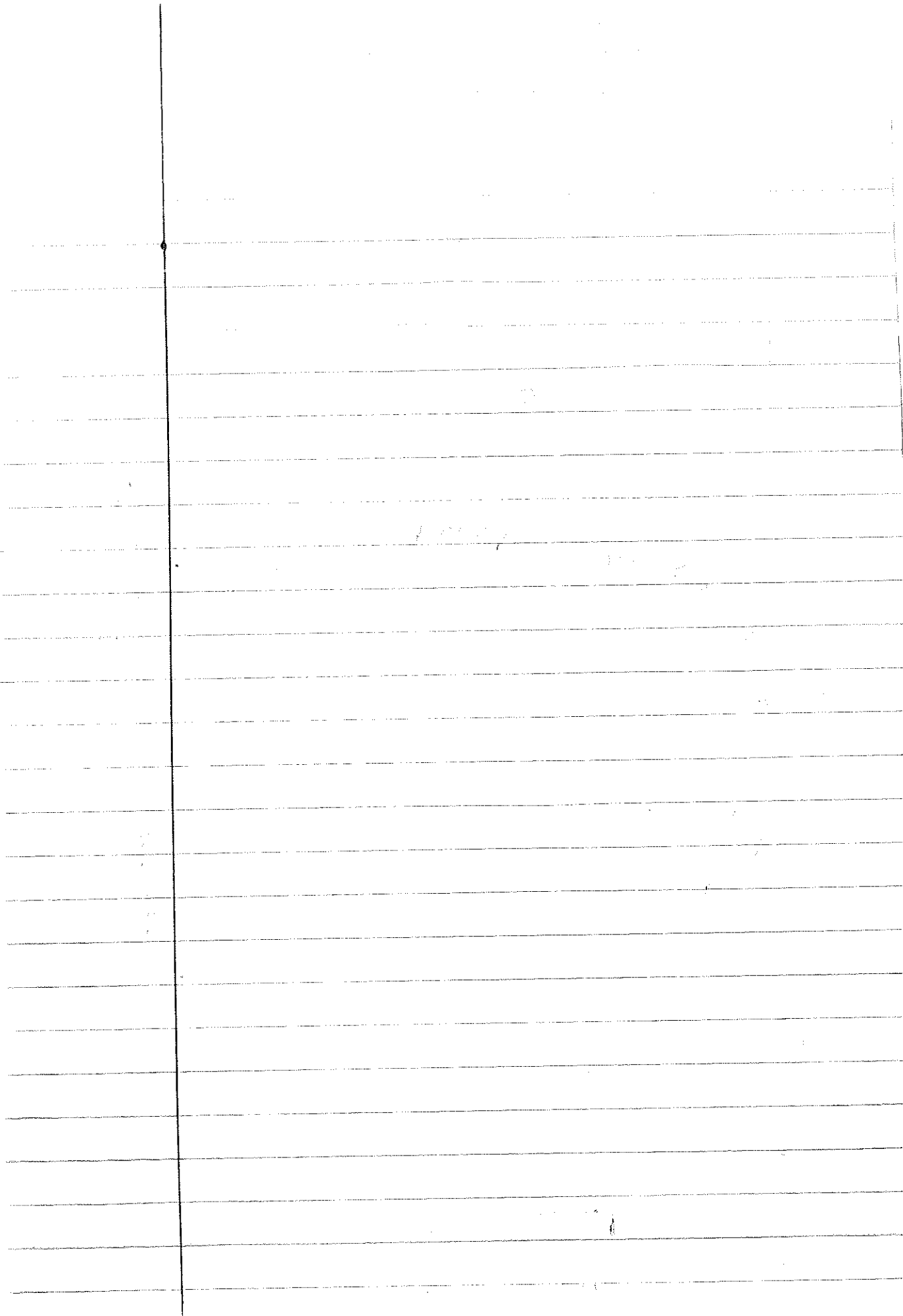
Rubber Membrane ✓

2 sections of Deck free floating on rubber membrane

Railings are 42" high with ^{less than} 4" between each spindle

Garage

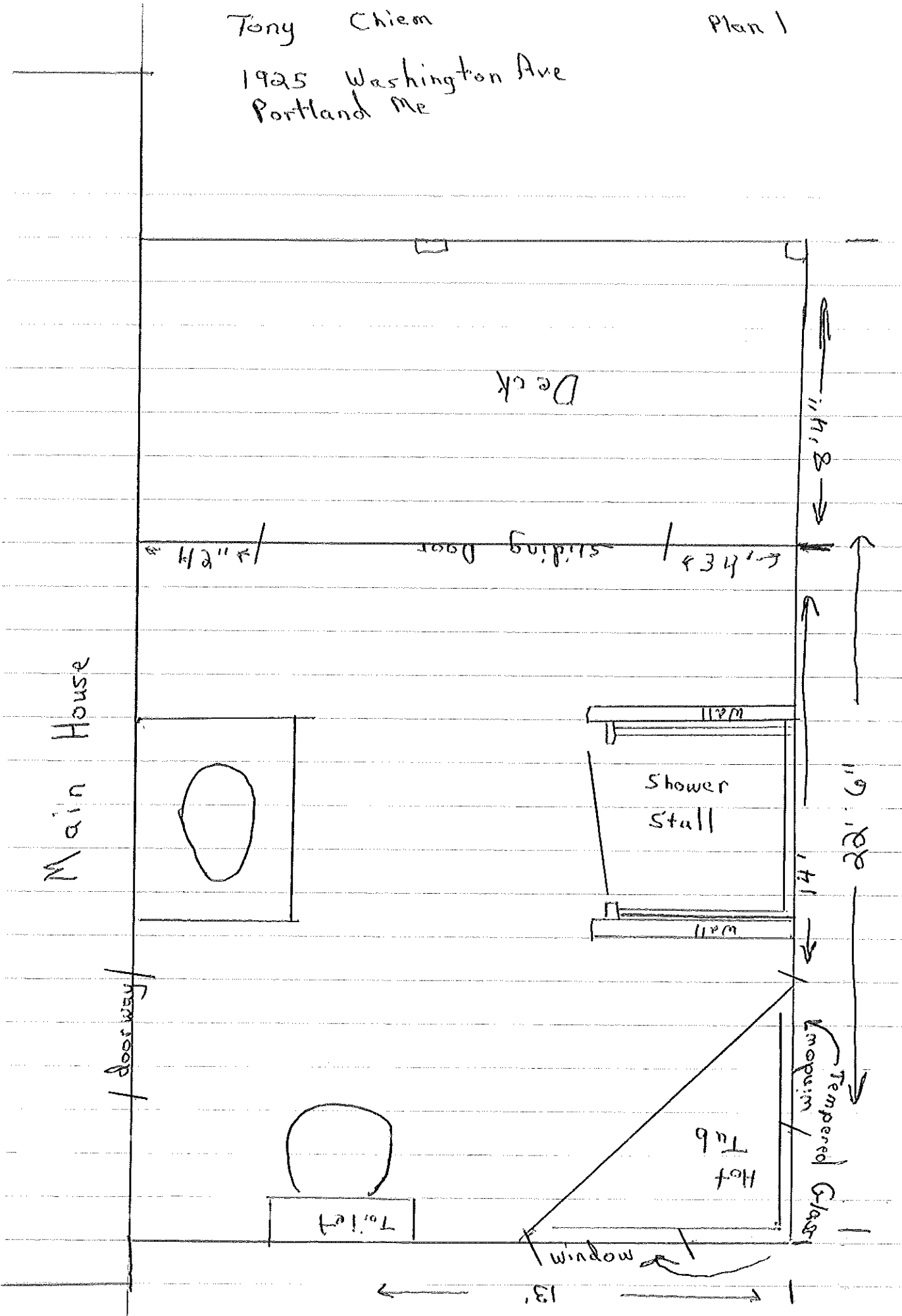
ceiling $\frac{5}{8}$ Fire code sheetrock taped
wall between garage & family room $\frac{5}{8}$ Fire code
 $\frac{5}{8}$ " Type X all around garage taped



Tony Chiem

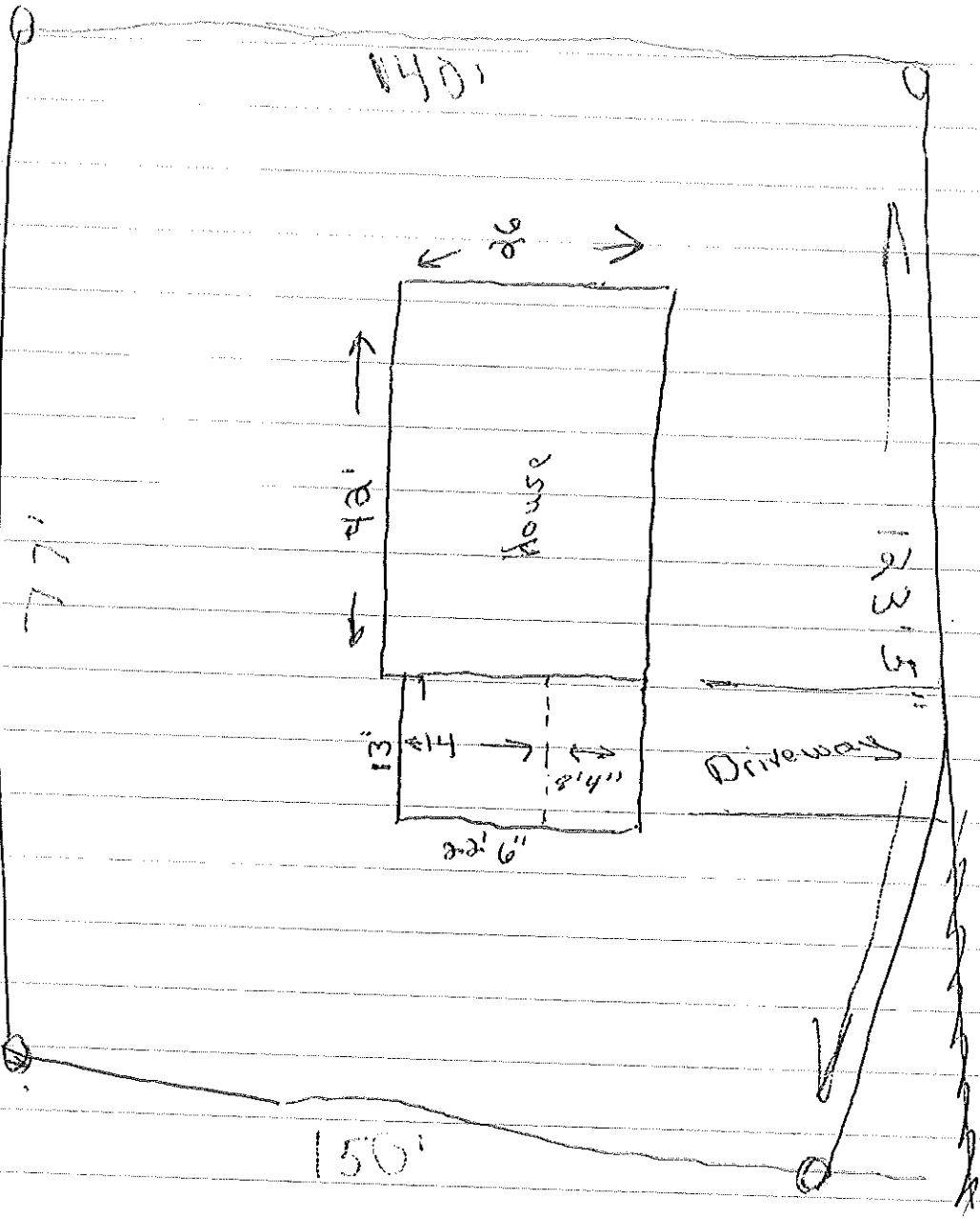
Plan 1

1925 Washington Ave
Portland Me



Lot

1925 Washington Ave



JOB INVOICE

Vinny Carpentry & Remodeling
 48 Rockland Ave
 Portland Me
 04102

Tel # 831-2145

TO	Tony Mai Chiem
ADDRESS	1925 Washington Ave Portland Me
ATTENTION	04103

DATE ORDERED	12-29-01	ORDER TAKEN BY	
PHONE NO.		CUSTOMER ORDER #	
JOB LOCATION			
JOB PHONE		STARTING DATE	
TERMS			

QTY.	MATERIAL	UNIT	AMOUNT
	Finish Bathroom off, cut out door from bedroom install windows & door side addition, shingle roof insulate walls, floor ceiling, sheetrock walls with green board		
	Strap garage ceiling and put up 5/8 fire code sheetrock		
	Put Beam in Kitchen		
	Start to finish		

DESCRIPTION OF WORK
 Remove Roof and put steeper roof pitch, sister all floor joist take down sheetrock in garage, put ceiling joist in bathroom rubber roof deck and finish off

MISCELLANEOUS CHARGES
 Does ^{not} include Plumber & Electrician

LABOR	HRS.	RATE	AMOUNT
I require 2,500 to get started			

WORK ORDERED BY	
DATE ORDERED	
DATE COMPLETED	

CUSTOMER APPROVAL SIGNATURE _____
 AUTHORIZED SIGNATURE *Vincent Bates*

TOTAL LABOR and TOTAL MATERIALS	10,500.00
TOTAL MISCELLANEOUS	
SUBTOTAL	
TAX	
GRAND TOTAL	10,500.00

BOISE CASCADE - BC CALC™ 2001 DESIGN REPORT - US

Thursday, January 24, 2002 13:00



Double - 1 3/4" x 5 1/2" V-L SP 2900

Job Name :
Address :

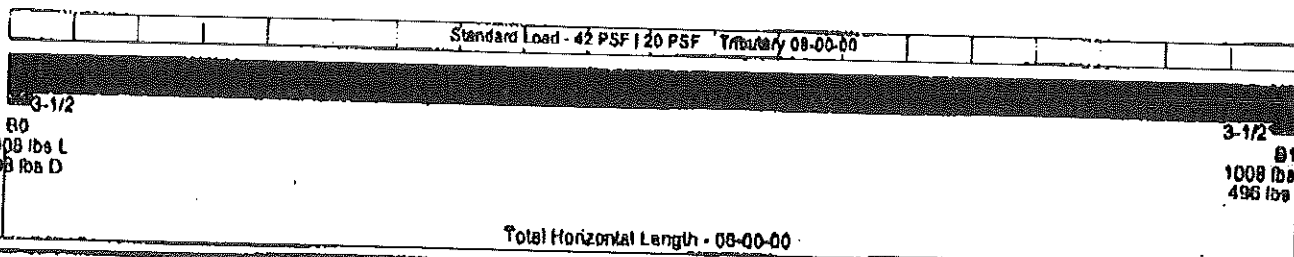
City, State, Zip -

Code Reports - ICBO 5512, BOCA 99-82, SBCCI 8052

File Name:
Customer Name:
Specifier:
Designer:
Company:
Misc:

- RUFUS DEERING
- JOHN
- WOOD STRUCTURES, INC
- WOOD STRUCTURES, INC

Unit:



General Data

Version: US Imperial
Member Type: - Floor Beam
Number of Spans - 1
Left Cantilever - No
Right Cantilever - No
Slope 0/12
Tributary 08-00-00
Repetitive n/a
Construction Type n/a

Live Load 42 PSF
Dead Load 20 PSF
Part Load 0 PSF
Duration 115

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-accepted design properties and analysis methods. Installation of Boise Cascade engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Ref.	Start	End	Live	Dead	Trib.	Dur
S	Standard	Unf. Area Load	Left	00-00-00	06-00-00	42 PSF	20 PSF	08-00-00	115

Controls Summary

Control Type	Value	% Allowable	Duration	Loadcase	Span Location
Moment	2256 ft-lbs	42.2%	@ 115%	2	1 - Internal
End Shear	1274 lbs	28.8%	@ 115%	2	1 - Left
Total Deflection	L/477 (0.151")	50.2%		2	1
Live Deflection	L/713 (0.101")	50.6%		2	1
Max. Defl.	0.151" (Limit: 1")	15.1%		2	1
Span/Depth	13.1				1

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allowed	Case	Material
B0	Wall/Plate	3-1/2" x 3-1/2"	1504 lbs	28.9%	2	Spruce-Pine-Fir
B1	Wall/Plate	3-1/2" x 3-1/2"	1504 lbs	28.9%	2	Spruce-Pine-Fir

NOTES:

Design meets Code minimum (L/240) Total load deflection criteria.
Design meets Code minimum (L/360) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.

WOOD STRUCTURES DOES NOT HANDLE LVL'S SMALLER THAN 5 1/2" BUT KATRINA @ W.S. FELT 3/5" LVL'S WOULD BE MORE THAN SUFFICIENT TO CARRY THIS LOAD. IF I CAN BE OF ANY HELP PLEASE CALL ME

JOHN M. 772-6505