

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 061288

Please Read Application And Notes, If Any, Attached

This is to certify that Dodi Sidelinger/Mainely Properties & Construction, LLC.
has permission to Convert foundation to a daylight basement Permit to # 061182 & 061016.
AT 56 Ballpark Dr. Permit # 371 A036001

provided that the person or persons performing or causing to be performed any work accepting this permit shall comply with all of the provisions of the Statutes of the 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 is procured before this building or part thereof is occupied or service is resumed in it. 4 HOUR NOTICE 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

Jeanie Banks 9/12/06
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 ISSUED

Permit No: 06-1288	Issue Date: SEP 13 2006	CDL: 371 A036001
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Location of Construction: 56 Ballpark Dr	Owner Name: Dodi Sidelinger	Owner Address: 1424 Washington Ave.	Phone: 207-878-3595
Business Name: n/a	Contractor Name: Mainly Properties & Construction,	Contractor Address: P.O. Box 6012 Falmouth	Phone: 207-408-9535
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Amendment to Single Family	Zone: R-2
Past Use: Vacant	Proposed Use: New Single Family / Amendment to permit# 0661182 (foundation only) & # 061016, convert from basement to daylight basement. (started to pour, stop work order)	Permit Fee: \$130.00	Cost of Work: \$0.00
Proposed Project Description: Convert foundation to a daylight basement. Amendment to # 061182 & 061016.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB IRL-2003 Signature: JMB 9/12/06
		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: 09/01/2006	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 checked="" type="checkbox"/> Site Plan 2006-0126 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 9/7/06 JMB	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 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

9/19/06.

Inspected Foundation -
Damp-proofing, Drainage - Half fabric Area Belts
as per Amended plan

[Signature]

OK to Backfill.

01/30/07 - Close-in inspection w/ G. Roney
plumbing test on + OK - Fanon selective
OK - no issues seen - OK to close-in.

[Signature]

3/7/07 - Final for Coy 0 - told to permanently
close slider in hv room/Dur room (doing while there) -
Smokes OK - Outside Landscaping not done
Will give Coy 0 when DRC gives memo.

[Signature]

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name: <u>Dave D. Blaine</u>	
Mailing Address of Owner/Applicant (If Different):	

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 _____

PORTLAND PERMIT # 10172 TOWN COPY

07-8021
Date Permit Issued: 11/29/07 \$ 11310.00 Double Fee Charged
Jeanie Bourke L.P.I. # 0732
Local Plumbing Inspector Signature

371 A 036

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 # L 6615

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>OR</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> <p>OR</p> <p>TRANSFER FEE [\$6.00]</p>		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		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		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				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.

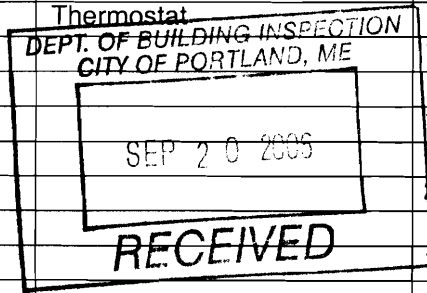


To the Chief Electrical Inspector, Portland Maine:
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 06-4842
Permit # 06-4842
CBL# 371 A 036

LOCATION: 56 Ballpark Dr Portland METER MAKE & # _____
CMP ACCOUNT # _____ OWNER Dod's Sedwinger
TENANT _____ PHONE # _____

					TOTAL EACH FEE	
OUTLETS	Receptacles	Switches	Smoke Detector		.20	
FIXTURES	Incandescent	Fluorescent	Strips		.20	
SERVICES	Overhead	Underground	TTL AMPS <800		15.00	
	Overhead	Underground	TTL AMPS >800	<u>300 Amps</u>	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				5.00	
	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 55.00	MINIMUM FEE 45.00	



CONTRACTORS NAME Joe Falcone MASTER LIC. # M510016408
 ADDRESS 137 Daggett St LIMITED LIC. # _____
 TELEPHONE 318 5144
 SIGNATURE OF CONTRACTOR Joe Falcone

White Copy - Office • Yellow Copy - Applicant