

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

## BUILDING INSPECTION

### PERMIT

Permit Number: 080338

Please Read Application And Notes, If Any, Attached

This is to certify that CARRIERE NOREITA E & LAUDE M CARRIERE JTS/Property  
has permission to Single Family Home w/ attached garage, 24' attached garage, entry way & 3/4 bath  
AT 64 BROOK RD 375 C028001

provided that the person or persons who accept 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.

Classification of inspection must be given and when permission procedure before this building or part thereof is started or service closed-in. 4 HOUR NOT REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

**PERMIT ISSUED**

**MAY 21 2008**

**CITY OF PORTLAND**

Department Name

**OTHER REQUIRED APPROVALS**

Fire Dept. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_

*[Signature]* 5/21/08  
Director Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

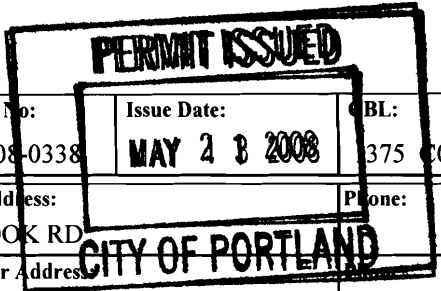
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**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0338	Issue Date: <b>MAY 21 2008</b>	BL: 375 028001
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Location of Construction: 64 BROOK RD	Owner Name: CARRIERE NOREITA E & CLAU	Owner Address: 64 BROOK RD	Phone:
Business Name:	Contractor Name: property owner	Contractor Address:	
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

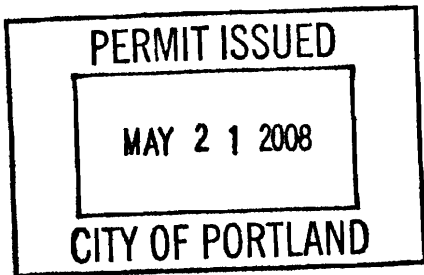


Past Use: Single Family Home	Proposed Use: Single Family Home w/ attached garage - Build 11' x 24' attached garage, entry way & 3/4 bath full dormer window.	Permit Fee: \$220.00	Cost of Work: \$20,000.00	CEO District: 5
Proposed Project Description: Single Family Home w/ attached garage - Build 11' x 24' attached garage, entry way & 3/4 bath full dormer window.		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: R-3 Type: SB <i>IRC 2003</i>	
		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: Idobson	Date Applied For: 04/10/2008	<b>Zoning Approval</b>	
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- 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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input checked="" type="checkbox"/> Shoreland stream protection - rec. of lot - house is at least 25' beyond the 75 setback. <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"/> OK w/ cond. hor Date: 4/17/08 ABM	<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:	<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 ABM 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

6-3-08 -- Setbacks - found rear property pins -  
lines marked w/ string - OK for setbacks  
+ sill - OK AM.

6/10/08 - OK to back fill w/ fill

see amendment for clearance + finish.

# 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 9.25.08  
 Permit # 2008-4685  
 CBL# 379-c-028

LOCATION: 64 Brook Road METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER Claud Carriere  
 TENANT \_\_\_\_\_ PHONE # 899-3436

							TOTAL EACH FEE	
OUTLETS	14	Receptacles	10	Switches	4	Smoke Detector	.20	<del>1</del>
FIXTURES	4	Incandescent		Fluorescent	1	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	1	Remote Sub		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

DEPT. OF BUILDING INSPECTION  
 CITY OF PORTLAND  
 SEP 25 2008  
 RECEIVED

CONTRACTORS NAME David Breunig MASTER LIC. # 04901  
 ADDRESS 10 Royal Grant way LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 856-2856

SIGNATURE OF CONTRACTOR David Breunig

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation: PORTLAND

Street Subdivision Lot #: 64 BROOK RD

## PROPERTY OWNERS NAME

Last: CARRIERE First: CLAUDE

Applicant Name: DAN BURKE

Mailing Address of Owner/Applicant (If Different): 16 PARSONS RD  
NO YACONNE ME 04997

2008 - 8259

PORTLAND PERMIT # 10762 TOWN COPY

Date Permit Issued: 9 24 08 \$ 40  If Double Fee Charged

[Signature] L.P.I. # 10169

375-C-028

## 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] Date: 10/1/08

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

<p><b>This Application is for</b></p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p><b>Plumbing To Be Installed By:</b></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # _____</p>
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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.		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal		Sink
		Drinking Fountain	1	Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	1	Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
OR		Dental Cuspidor		Garbage Disposal
		Bidet	1	Laundry Tub
		Other: _____		Water Heater
TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			1	Fixtures (Subtotal) Column 2
			4	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)