Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

NCRECTION PERM

Permit Number: 070216

epting this permit shall comply with all

uctures, and of the application on file in

nances of the City of Portland regulating

RD M JTS /Eastern Shore H LEARY JANET M & GUIL This is to certify that_ Imp

rm or

ine and of the

winterize porch and rebuild has permission to

AT 340 AUBURN ST

383 A006001

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and e of buildings and this department.

Apply to Public Works for street line and grade if nature of work requires such information.

ificatio f inspe on mus n and v en perm on proc lding or re this rt there ed or osed-in JR NO ι∠QUIRED.

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

PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED MAR - 1 2007 CITY OF PORTLAND

Cit	y of Portland, Maine	- Building or Use	Permi	t Application	n Pe	ermit No:	Issue Date	:	CBL:	
389	Congress Street, 04101	Tel: (207) 874-8703	B, Fax:	(207) 874-871	6	07-0216	03/	01/2007	383 A0	06001
Location of Construction: Owner Name:				Owner Address:				Phone:		
Business Name: Contract			LEARY JANET M & GUILFORD Contractor Name:			AUBURN ST				
					Contractor Address: 60 60A7 Rd 200		py nution	Phone 207-797-3		
		Eastern Shore	Home	mprovements			Jumberlan d	falmenth	My 2018214792	
		Pnone:	Phone:		ı	uit Type:	allinge		Zone:	
Past Use: Proposed		Desperal Han			Alterations - Dwellings Permit Fee: Cost of Work:			le lor	O Districts	<u> </u>
	gle Family	Proposed Use:	Single Family/ winterize rear screen		1	ш ree: '‰86*"	\$26,00	-	O District: 5	
OIII	igic i umity	porchand rebu			$\overline{}$	E DEPT:		INSPECTI		
					Approved			e Group: R-3 Type:5B		
							Denied			
								1 1	KC-sic	X) 3
_	posed Project Description:	-					IRC-2003 Signature: 3/1/07 CLM		()0	
wir	nterize porch and rebuild de	eck			Signature:		Signature: 31107 CLM.			
				PEDESTRIAN ACTIVITIE		VITIES DIST	S DISTRICT (P.A.D.) /			
					Action: Approved Approved Approved		proved w/Conditions Denied			
				Signature:			Date:			
Permit Taken By: Date Applied For:						Zoning	Approva	ıl		
csl		03/01/2007	- Cne	oiol Zono oz Dovic	TRO .	Zonia	a Anneal		Historic Pres	onvotion
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		J `			ng Appeal					
		Shoreland		Variance			Not in District or Landmar			
2. Building permits do not include plumbing,		│	etland	Miscellaneous		Does Not Require Review		quire Review		
septic or electrical work.										
3.	Building permits are void		Fl	ood Zone	Conditional Use			Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building			l I Su	bdivision	Interpretation		Approved			
permit and stop all work										
			Si	te Plan	\	Approve	d		Approved w/	Conditions
	PERMIT ISS	UED	 Mai [Minor MM		Denied	۸۱۱۸		Denied \	Λ
					6		NH		Permed N	H
MAR - 1 2007			Date: 3/1/67 ()		JI	Date:	,	Date:		
	mail - 1 201	0/		1100						
	01774.05.5			ſ						
i	CITY OF PORTI	LAND								
			(ERTIFICATION)N					

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

4/10/07 - Close-in Figs O.K. L. Close.

existing forent foundam.

Eled. C.K.

**Etty Stors Need to be widoned.

C.C. M.

C.C. M.

C.C. M.

•	,		ilding or Use Permit (207) 874-8703, Fax: (1-8716	Permit No: 07-0216	Date Applied For: 03/01/2007	CBL:	3 A006001	
Location o	of Construction:		Owner Name:			Owner Address:			Phone:	
340 AU	BURN ST		LEARY JANET M &	GUILFO:	RD :	340 AUBURN ST				
Business N	Contractor Name: Eastern Shore Home Improvements			Contractor Address:			,			
			mprovem	ents	1 Birkdale Road Cumberland		(207) 821-4992			
Lessee/Bu	yer's Name	er's Name Phone:			F	Permit Type:	•			
						Alterations - Dwe	llings			
Single F Dept:	Family/ winterize Zoning		n porchand rebuild attache Approved with Condition			ze porch and rebui	Id deck Approval E	Date:	03/01/200	<u></u>
Note:	Zoning	Status.	Approved with Condition	is Kev	icwei.	Cillis Hallson	Approvari		Issue: ✓	
1) This	-	approved o	on the basis of plans submi	itted. Any	/ deviati	ions shall require a	separate approval b	pefore s	tarting that	
Dept:	Building	Status:	Approved with Condition	ns Rev	iewer:	Chris Hanson	Approval D	Date:	03/01/200	7
Note:								Ok to	Issue:	
			or any electrical, plumbing ubmitted for approval as a							

- 2) Fastener schedule per the IRC 2003
- 3) As discussed during the review process, ballusters must be spaced with less than a 4" opening between each.
- 4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take pla	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electric	cal: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.
Phase, REGARDLESS OF THE NOTICE	Cur, the project cannot go on to the next E OR CIRCUMSTANCES. ES MUST BE ISSUED AND PAID FOR, PIED 3-/-07 Date Date

This page contains a detailed description of the Parcel ID you selected. Press the New Search button at the bottom of the screen to submit a new query.

Current Owner Information

Card Number

1 of 1 383 A006001

Parcel ID Location

340 AUBURN ST

Land Use

SINGLE FAMILY

Owner Address

LEARY JANET M & GUILFORD M JTS

340 AUBURN ST

PORTLAND ME 04103

Book/Page

12690/320

Legal

383-A-6

AUBURN ST 336-342

30000 SF

Current Assessed Valuation

Land \$103,000 Building \$105,100

Total \$208,100

Property Information

Year Built 1922

Style Bungalow Story Height

Sq. Ft. 1092

Total Acres 0.689

Bedrooms 3

Full Baths 1

Half Baths 1

Total Rooms

Attic Part Finsh Basement Ful1

Outbuildings

Туре GARAGE-WD/CB Quantity

Year Built 1958

Size 14X36 Grade

Condition A

Sales Information

Date 08/27/1996 10/25/1993

Type LAND + BLDING LAND + BLDING

Price \$107,000 \$97,500

Book/Page 12690-320 11041-114

Picture and Sketch

Picture

Sketch

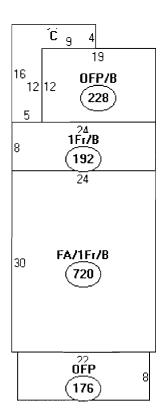
Tax Map

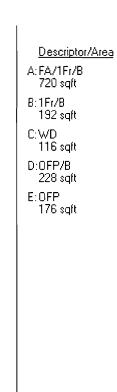
Click here to view Tax Roll Information.

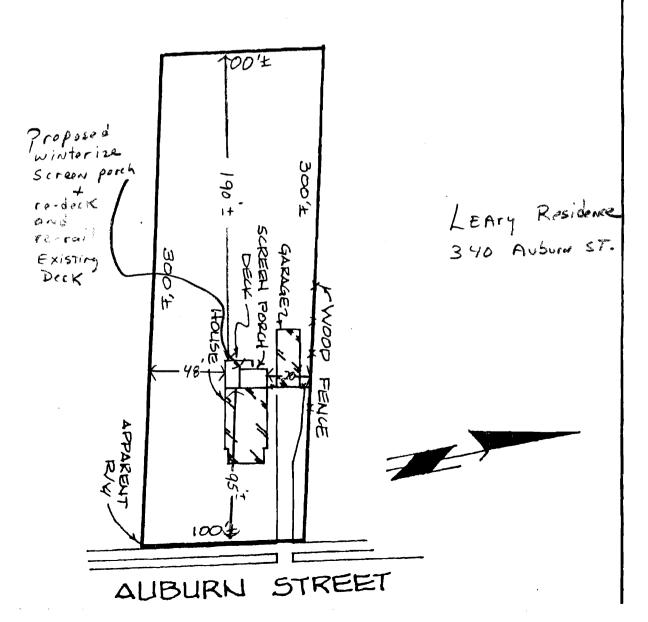
Any information concerning tax payments should be directed to the Treasury office at 874-8490 or emailed.

New Search!

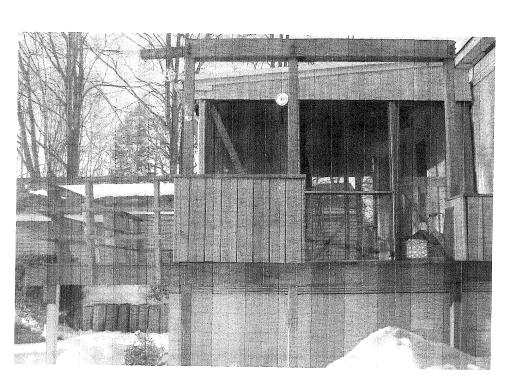


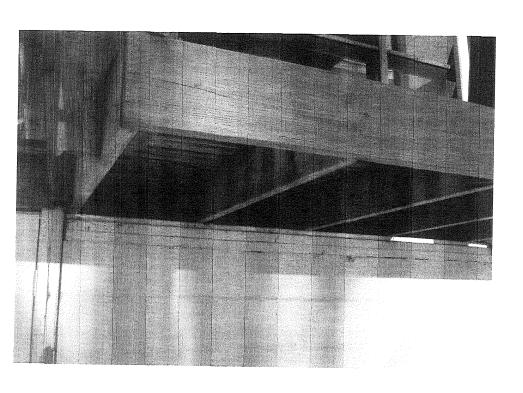


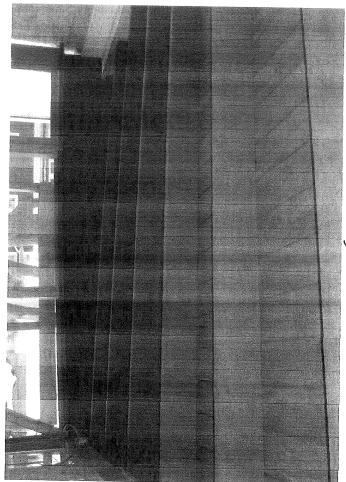




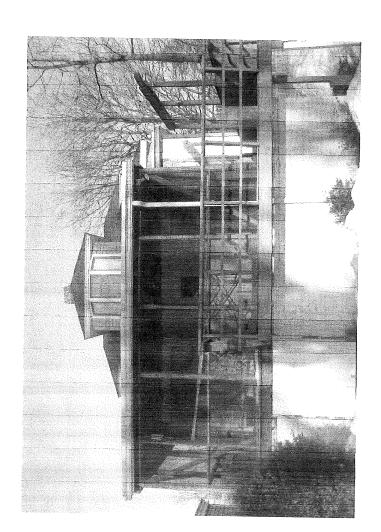


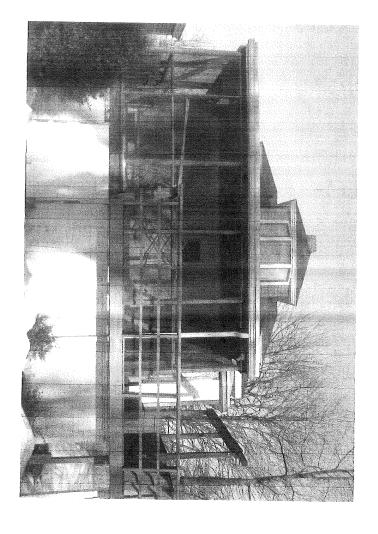


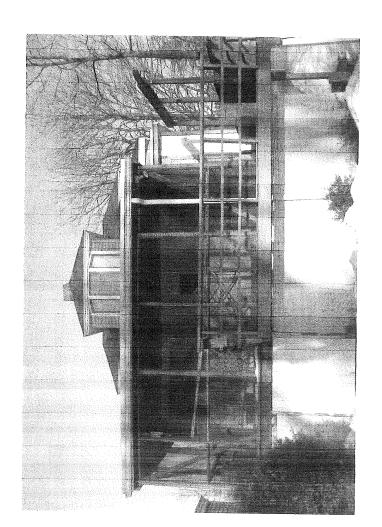


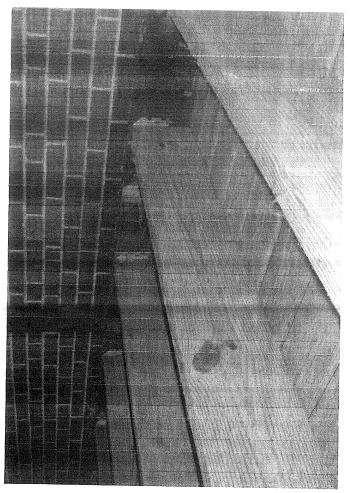


Coiling

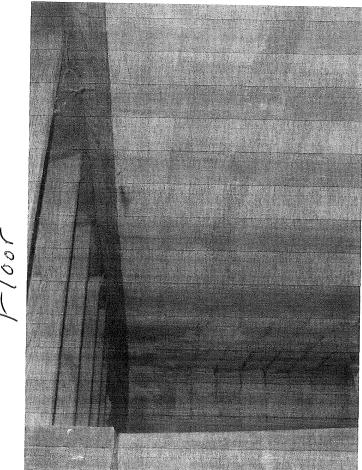






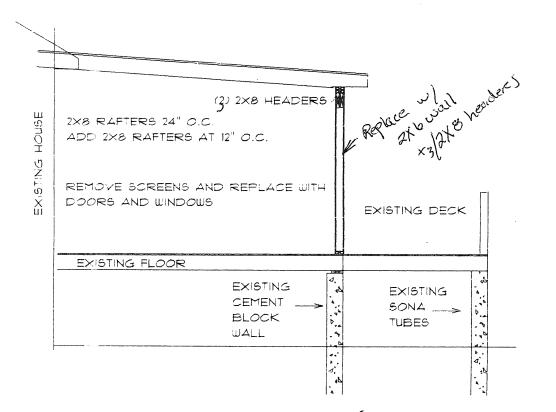


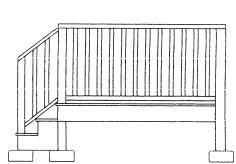
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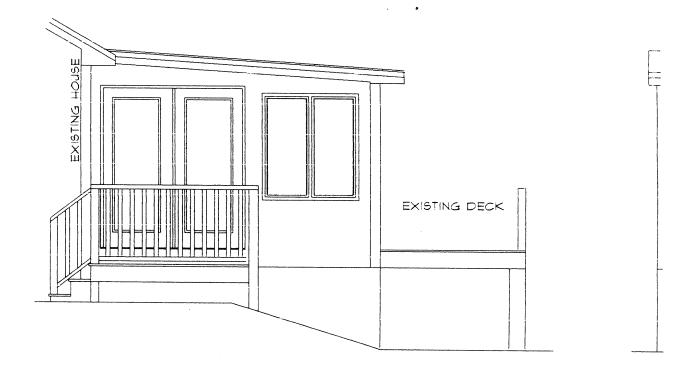
Floor

ARCHITECTURAL OR ENGINEERING COP IS BUILT ACCORDING TO ALL STATE AN DRAWINGS BEFORE CONSTRUCTION STA TO BE. IF ANY ERRORS ARE FOUND, HE





NEW STAIRS TO BE MIN 5 1/2" P/T FRA STAIRS TO BE MAX 7 3/4" RISE, 10" M HANDRAIL AND RAILING AT 36"



HAT THEY ARE FOR PICTORIAL REFERENCE ONLY, THEY FURTHER UNDERSTAND THAT HOUSE CALLS INC. IS NOT AN FURTHER UNDERSTAND THAT IT IS THE BUILDER OR GENERAL CONTRACTOR'S RESPONSIBILITY TO SEE THAT THIS RENOVATION LDING CODES THAT ARE IN EFFECT AT THE TIME OF CONSTRUCTION. THE OWNERS AND THE BUILDER, WILL GO OVER THESE FY THAT THEY ARE SUITABLE FOR THEIR NEEDS, AND TO VERIFY THAT ALL MEASUREMENTS ARE WHAT THEY WANT THEM DRAWN BY Y CORRECT THEM BEFORE CONSTRUCTION STARTS. SCALE RESIDENCE DOOR YE AND CE THE NG PORCH SLIDING Ü MAIRS MPLY $\overline{\Omega}$ OWN <u>n</u> EXISTING SCREENROOM Ô SLIDING WINDOW REMOVE SCREENS AND REPLACE W/ 2 HIGH WALL AND ADD WINDOWS AND SLIDING DOORS 5' SLIDING WINDOWS 4 EXISTING DECK DRAWING 151 ROOSEVELT TRAIL, WINDHAM, ME HOUSE CALLS INC. HOME PLANNING & DESIGN EXISTING DECK

TENANT

ELECTRICAL PERMIT City of Portland, Me.

National Electrical Code and the following specifications:

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,

Date	QB)	3	.23.0
Permit #	2007-	421	7

7112/1/ CL		CBL#	= 003-H-6
LOCATION: 340 Huburn ST	METER MAKE & #		
CMP ACCOUNT #	OWNER AND I	F 1	Paru

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 >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 CTION 5.00 Alarms/com 15.00 Heavy Duty(CRKT) 2.00 Circus/Carny 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 55.00 MINIMUM FEE 45.00

CONTRACTORS NAME_ Holsom MS60015110 MASTER LIC. # ar borough LIMITED LIC. #

TELEPHONE 883 - 802

White Copy - Office

SIGNATURE OF CONTRACTOR

Yellow Copy - Applicant