

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

BUILDING INSPECTION PERMIT

Permit Number: 080155

This is to certify that KIRBY MARILYN A & ANTHONY M COURTNEY, ITS/Bonnie Jackson

has permission to Family room renovations

AT 517 SUMMIT ST

385 B014001

PERMIT ISSUED
FEB 27 2008
CITY OF PORTLAND

provided that the person or persons who apply for or 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.

Notification of inspection must be given and when permission is procured before this building or part thereof is occupied or service is provided. 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 _____

Thomas H. Manly 2/27/08
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 No: 08-0155 | Issue Date: | CBL: <i>2 B-003</i> 385 B014001 |
|-----------------------|-------------|------------------------------------|

| | | | |
|--|--|---|---------------------|
| Location of Construction: 517 SUMMIT ST | Owner Name: KIRBY MARILYN A & ANN M C | Owner Address: 517 SUMMIT ST | Phone: |
| Business Name: | Contractor Name: Bonnie Jackson | Contractor Address: 88 Pillsbury st South Portland | Phone 2072323196 |
| Lessee/Buyer's Name | Phone: | Permit Type: Alterations - Dwellings | Zones <i>R-2</i> |

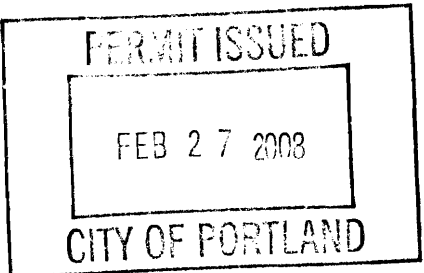
| | | | | | |
|---------------------------------|---|--|--|--------------------|--------------------------------|
| Past Use: single family home | Proposed Use: single family home - family room renovations | Permit Fee: \$160.00 <i>30.00</i> | Cost of Work: \$6,000.00 | CEO District: 5 | <i>68534</i> <i>110,164</i> |
| | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: <i>R3</i> Type: <i>SB</i> <i>IRC 2003</i> | | |

| | | |
|--|------------|------------------------------|
| Proposed Project Description: Family room renovations | Signature: | Signature: <i>Jm 2/27/08</i> |
| 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: lmd | Date Applied For: 02/22/2008 | Zoning Approval |
|-------------------------|---------------------------------|------------------------|

- 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied Date: <i>2/26/08</i> | 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: |
|--|---|--|



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 |

City of Portland, Maine - Building or Use Permit

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

| | | |
|------------------------------|--|----------------------------|
| Permit No: 08-0155 | Date Applied For: 02/22/2008 | CBL: 385 B014001 |
|------------------------------|--|----------------------------|

| | | | |
|---|---|--|--------------------------------|
| Location of Construction: 517 SUMMIT ST | Owner Name: KIRBY MARILYN A & ANN M C | Owner Address: 517 SUMMIT ST | Phone: |
| Business Name: | Contractor Name: Bonnie Jackson | Contractor Address: 88 Pillsbury st South Portland | Phone (207) 232-3196 |
| Lessee/Buyer's Name | Phone: | Permit Type: Alterations - Dwellings | |

| | |
|--|---|
| Proposed Use: single family home - family room renovations | Proposed Project Description: Family room renovations |
|--|---|

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 02/26/2008

Note: **Ok to Issue:**

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 02/27/2008

Note: **Ok to Issue:**

- 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



General 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>517 SUMMIT ST</u> | | |
| Total Square Footage of Proposed Structure/Area | | Square Footage of Lot |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>385</u> <u>B</u> <u>14</u> | Applicant * must be owner, Lessee or Buyer * Name Address City, State & Zip | Telephone: |
| Lessee/DBA (If Applicable) | Owner (if different from Applicant) Name Address City, State & Zip | Cost Of Work: \$ <u>1,000⁰⁰</u> C of O Fee: \$ _____ Total Fee: \$ <u>80⁰⁰</u> |
| Current legal use (i.e. single family) <u>SINGLE FAMILY</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>Renovate family room. Replace existing windows with vinyl new construction windows -see specs. Replace entry door with 36" fiberglass unit.</u> | | |
| Contractor's name: <u>Bonnie Jackson</u> | | |
| Address: <u>88 Pillsbury St</u> | | Cell <u>232 3196</u> |
| City, State & Zip <u>South Portland ME 04106</u> | | Telephone: <u>799-6386</u> |
| Who should we contact when the permit is ready: _____ | | Telephone: _____ |
| Mailing address: _____ | | |

FEB 22 2008

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

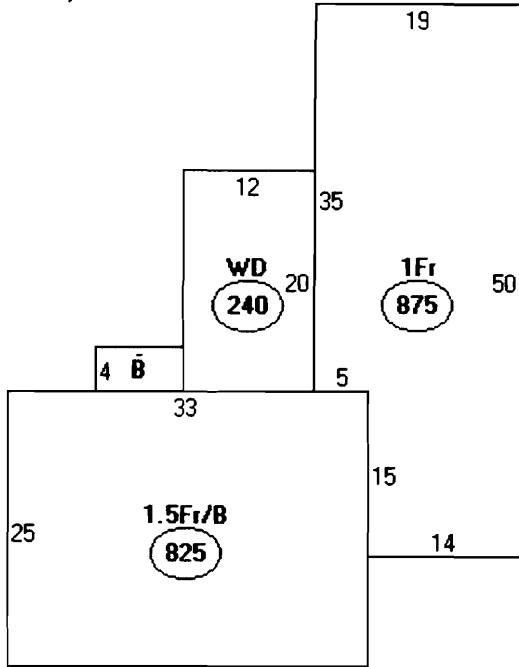
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: [Signature] Date: 2.22.08

This is not a permit; you may not commence ANY work until the permit is issue

08-0023

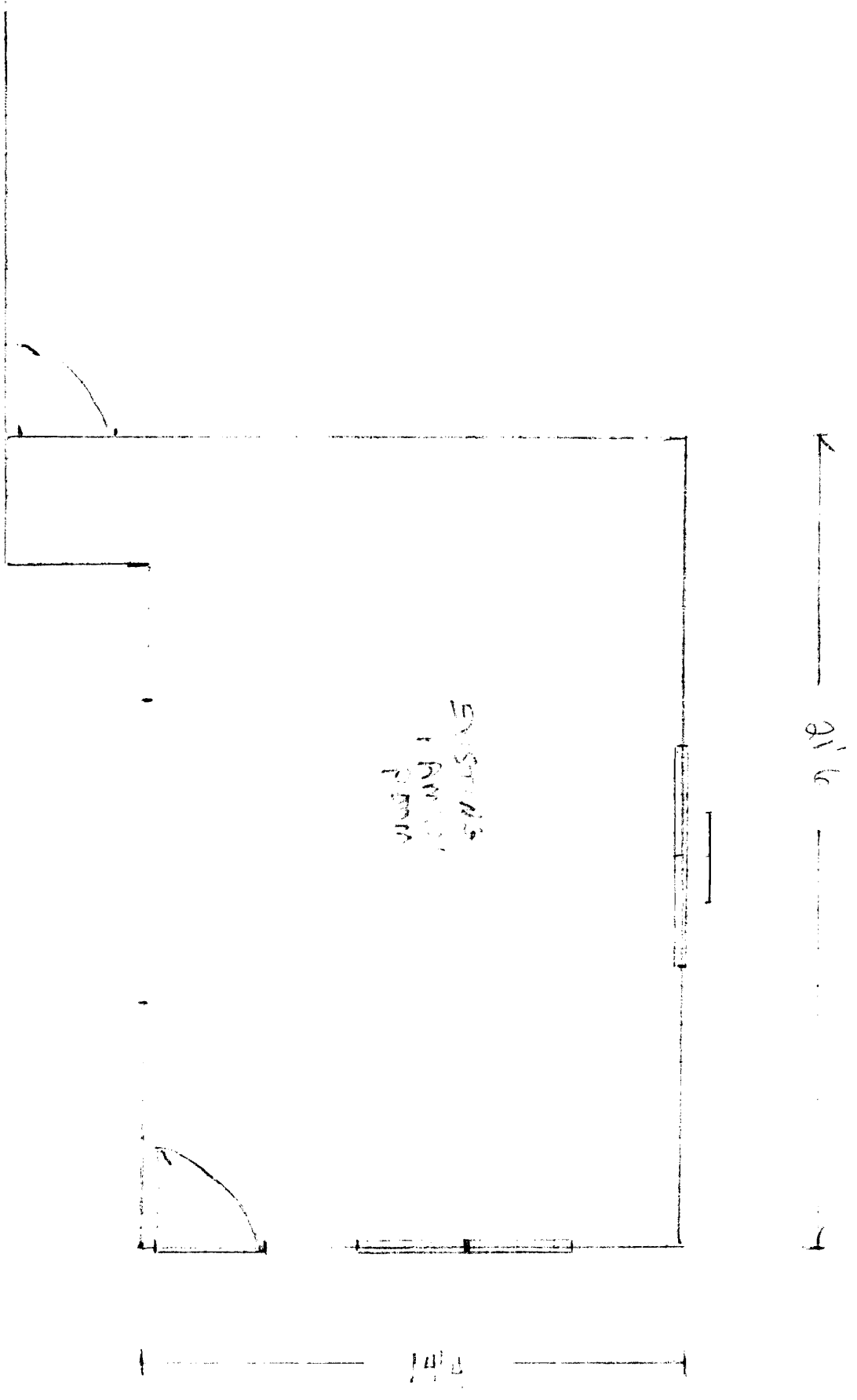


| Descriptor/Area | |
|-----------------|----------|
| A: 1.5Fr/B | 825 sqft |
| B: FUB | 32 sqft |
| C: WD | 240 sqft |
| D: 1Fr | 875 sqft |

825
 32
 240
 875

 1972P

$$6853^{\#} \times 35\% = 2398.55^{\#} \text{ sqft}$$

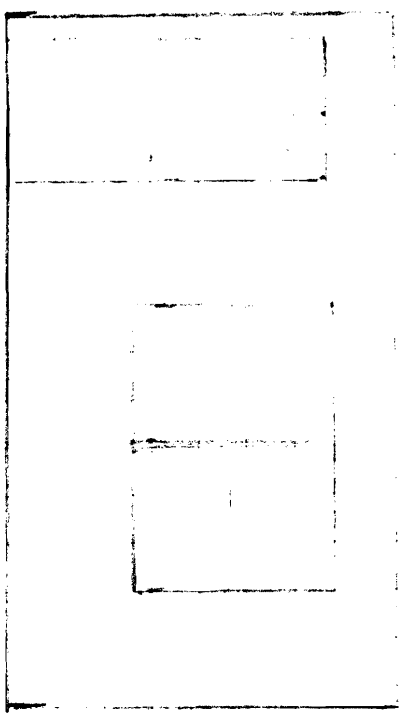


Windows

Paradigm DH 3248
i Low E + Argon

Door

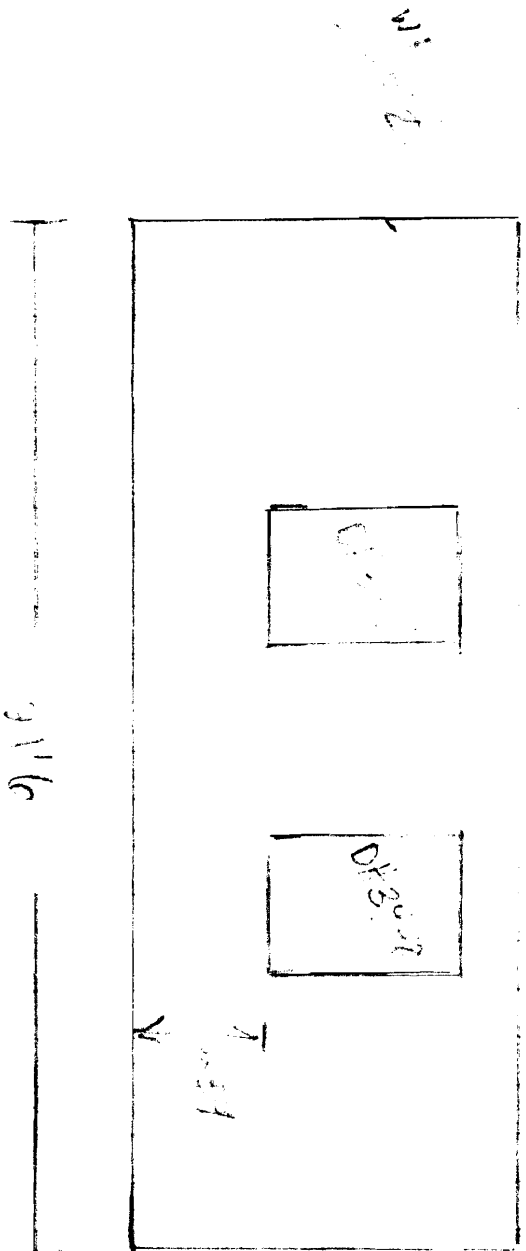
Thermatrac 3'0" x 6'8"
Fiberglass 9 1/4"
adj. sill
single bore



FLOOR

Paradygm NC $u = .30$
 w low $\epsilon + \text{Argon}$

S.D.E. v. h. i. i.
 Change from / w. m.
 to two



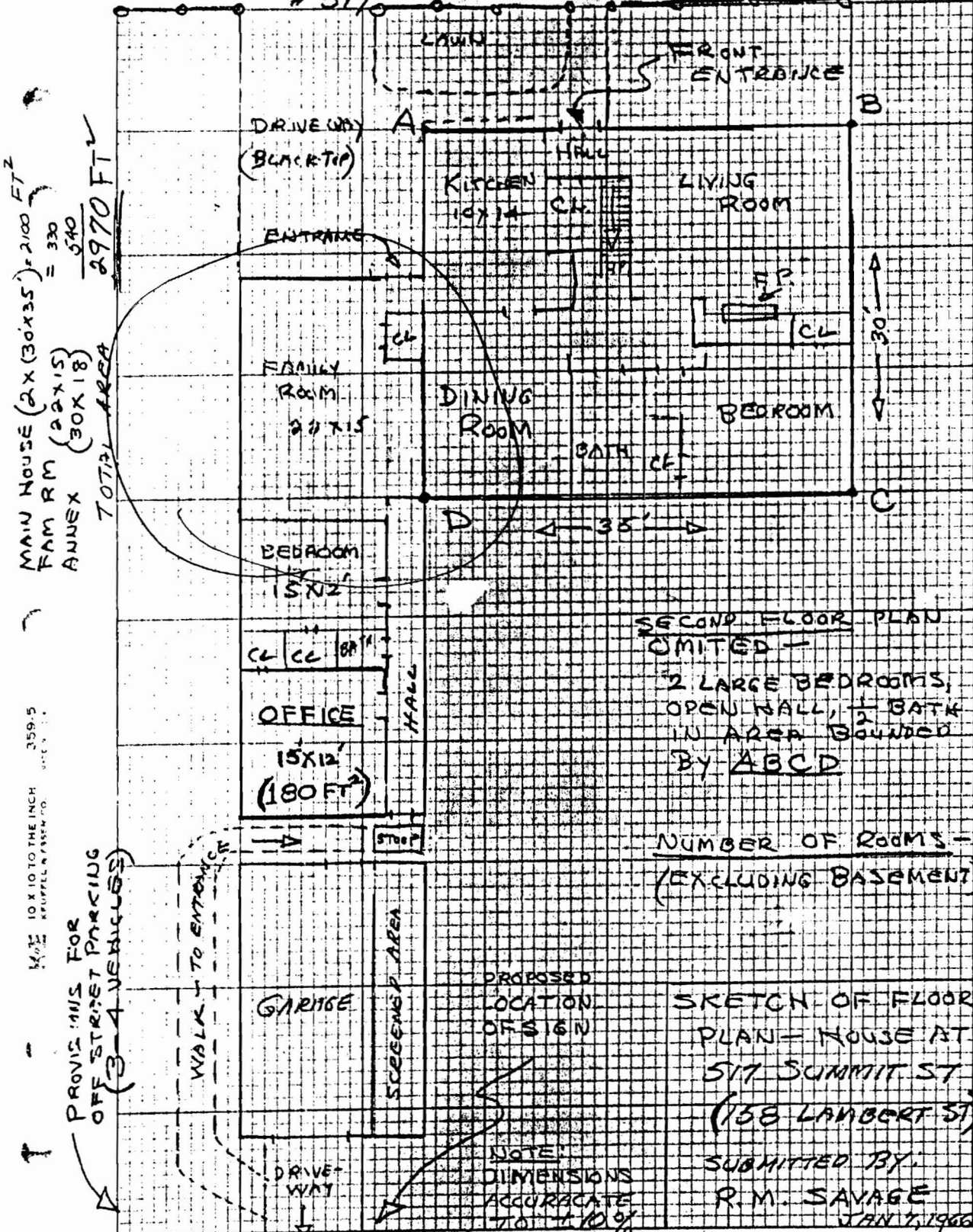
MEMBER
 (2) 2000



R. M. Savage

SUMMIT ST
#517

RAIL FENCE



MAIN HOUSE (2x(30x35)) = 2100 FT²
 FAM RM (22x15) = 330
 ANNEX (30x18) = 540
 TOTAL AREA 2970 FT²

SCALE 1/4" = 10' TO THE INCH
 359-5
 RUPPEL PAPER CO.

PROVISIONS FOR OFF STREET PARKING (3-4 VEHICLES)

DRIVEWAY LENGTH: 75 FT

SECOND FLOOR PLAN LIMITED -
 2 LARGE BEDROOMS,
 OPEN HALL, 1/2 BATH
 IN AREA BOUNDED
 BY ABCD

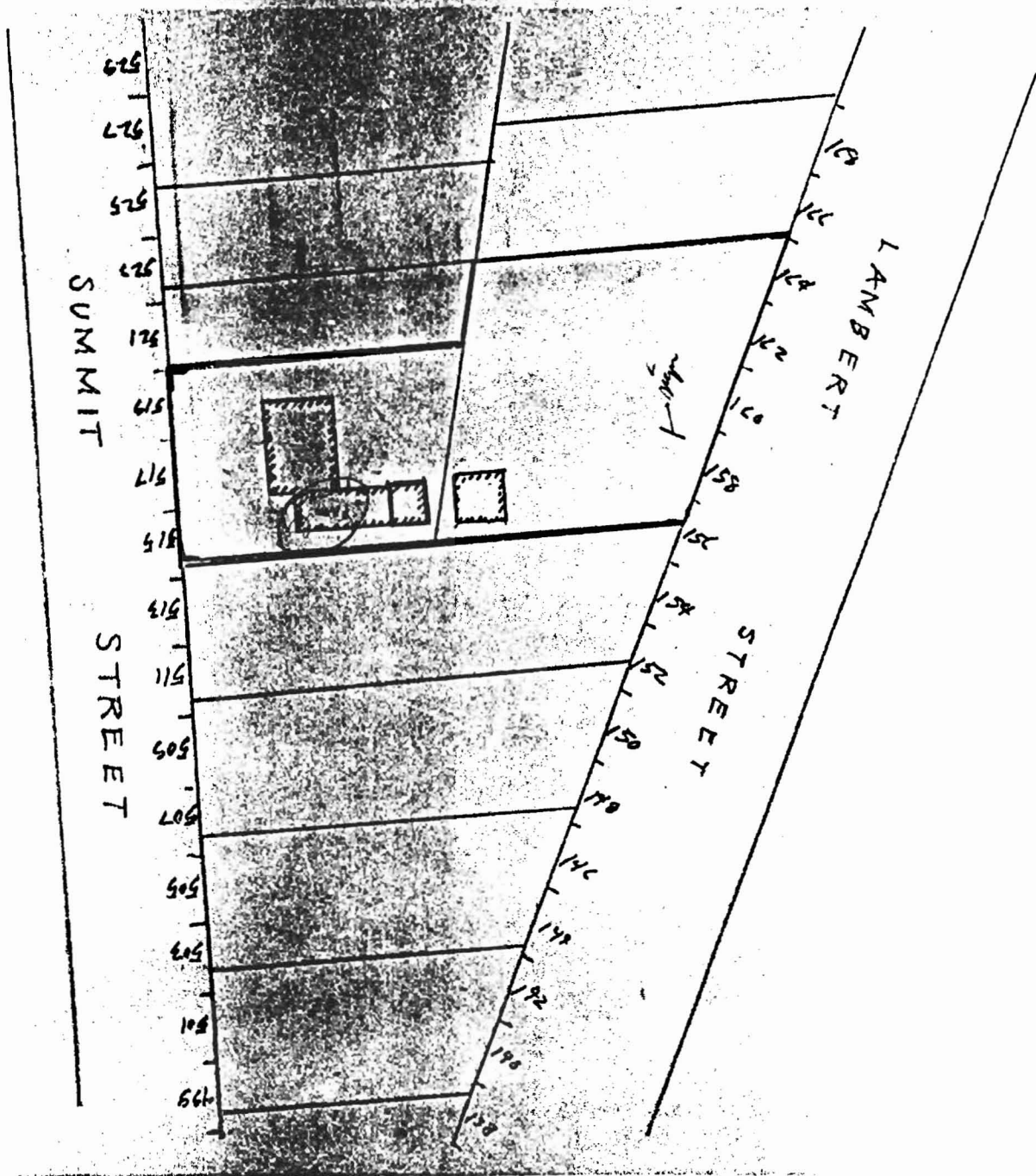
NUMBER OF ROOMS - 9
 (EXCLUDING BASEMENT)

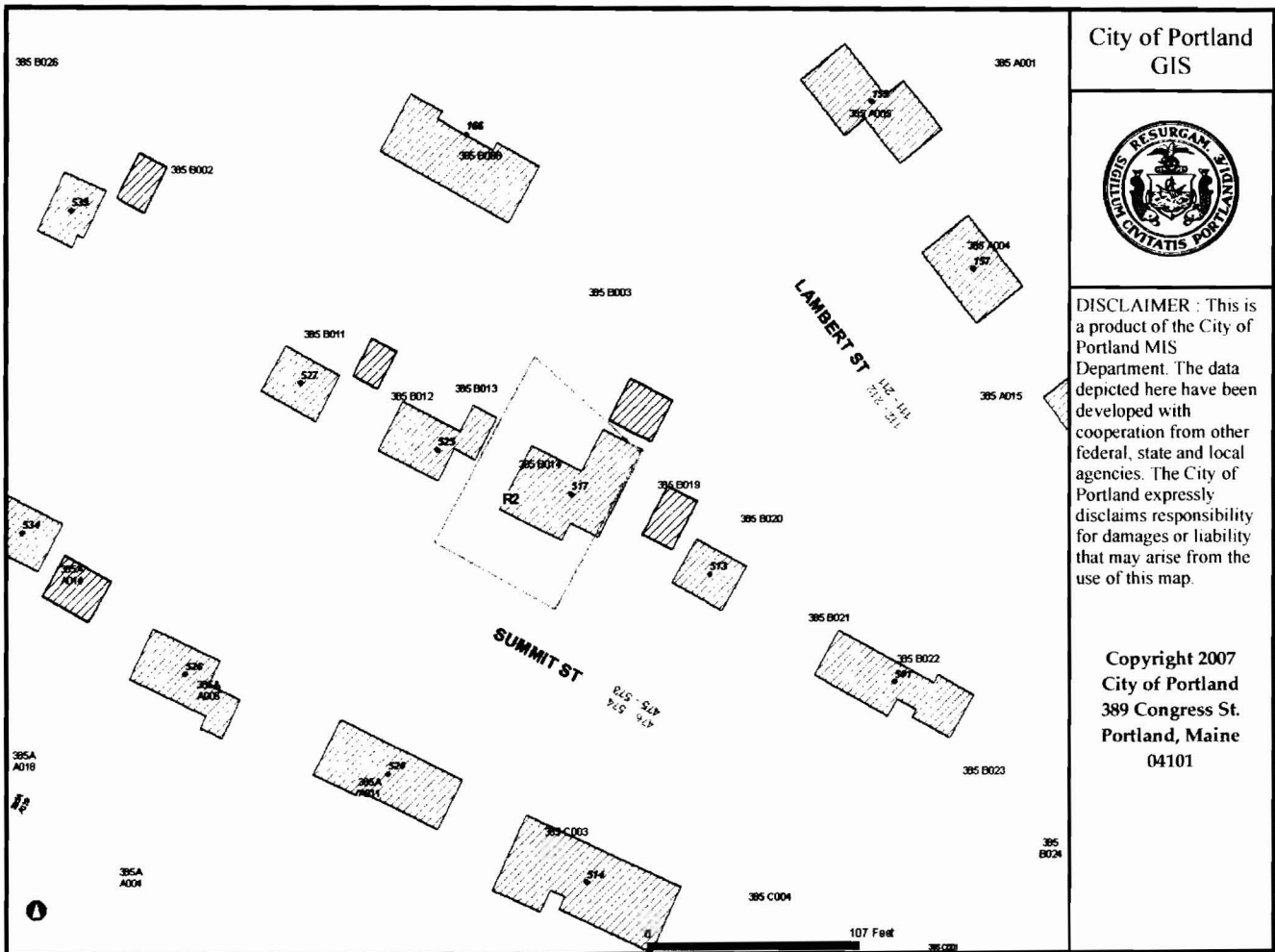
SKETCH OF FLOOR PLAN - HOUSE AT
 517 SUMMIT ST
 (158 LAMBERT ST)

SUBMITTED BY:
 R. M. SAVAGE
 JAN 7, 1966

DROPPED LOCATION OF SIGN
 NOTE: DIMENSIONS ACCURATE TO ±10%

#158 LAMBERT ST





BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

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 place upon receipt of your building permit.

- NA Footing/Building Location Inspection: Prior to pouring concrete
- NA Re-Bar Schedule Inspection: Prior to pouring concrete
- NA Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: 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.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects **DO** require a final inspection

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

NA CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

Brian Jackson
Signature of Applicant/Designee

2-27-08

Date

Tom R. Markley
Signature of Inspections Official

2/27/08

Date

CBL: 385-8014

Building Permit #: 08-0155