

656-676 AUBURN STREET

SHAW-WALKER

Full cut #9201R - Half cut #9202R - Third cut #9203R - Fifth cut #9205R



BY REFERENCE TO CODE

# APPLICATION FOR PERMIT

PERMIT ISSUED

OCT 29 1971

1356

CITY of PORTLAND

Class of Building or Type of Structure

Portland, Maine, Sept. 20, 1971

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 668 Auburn St. Within Fire Limits? \_\_\_\_\_ Dist. No. \_\_\_\_\_  
 Owner's name and address Brian F. McAvoy Telephone 797-4075  
 Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
 Contractor's name and address owner Telephone \_\_\_\_\_  
 Architect \_\_\_\_\_ Specifications \_\_\_\_\_ Plans YES No. of sheets 2  
 Proposed use of building Stable & storage shed No. families \_\_\_\_\_  
 Last use \_\_\_\_\_ No. families \_\_\_\_\_  
 Material TRACO No. stories 1 Heat \_\_\_\_\_ Style of roof pitch Roofing asphalt  
 Other buildings on same lot House  
 Estimated cost \$ 200. Fee \$ 3.00

## General Description of New Work

To construct 10' x 16' stable & storage shed

appeal sustained 10/28/71

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** owner

## Details of New Work

Is any plumbing involved in this work? no Is any electrical work involved in this work? no  
 Is connection to be made to public sewer? no If not, what is proposed for sewage? \_\_\_\_\_  
 Has septic tank notice been sent? \_\_\_\_\_ Form notice sent? \_\_\_\_\_  
 Height average grade to top of plate 6'6" Height average grade to highest point of roof 8'  
 Size, front 16' depth 10' No. stories 1 solid or filled land? solid earth or rock? earth  
 Material of foundation 8" concret blocks 4" below grade 8" Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
 Kind of roof asphalt shed Rise per foot 6" Roof covering asphalt  
 No. of chimneys none Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_ Kind of heat \_\_\_\_\_ fuel \_\_\_\_\_  
 Framing Lumber—Kind hemlock Dressed or full size? dressed Corner posts 4 x 4 Sills 4 x 6  
 Size Girder \_\_\_\_\_ Columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.  
 Joists and rafters: 1st floor 2x6, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 2 x 6  
 On centers: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 2 x 6-12" o.c.  
 Maximum span: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 10-ft.  
 If one story building with masonry walls, thickness of walls? \_\_\_\_\_ height? \_\_\_\_\_

## If a Garage

No. cars now accommodated on same lot \_\_\_\_\_, to be accommodated \_\_\_\_\_ number commercial cars to be accommodated \_\_\_\_\_  
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? \_\_\_\_\_

APPROVED:

## Miscellaneous

Will work require disturbing of any tree on a public street? \_\_\_\_\_  
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

FILE COPY

Signature of owner

By:

Mrs. Brian McAvoy

*[Handwritten Signature]*

161502 9/20/71

CITY OF PORTLAND, MAINE  
IN THE BOARD OF APPEALS

VARIANCE APPEAL

Brian F. McAvoy, owner of property at 668 Auburn St.  
under the provisions of Section 24 of the Zoning Ordinance of the City of Portland,  
hereby respectfully petitions the Board of Appeals for a variance from the provisions  
of said Ordinance to permit: and certificate of occupancy for establishing a  
stable for one shetland pony at the above named location, as an accessory  
use to the existing dwelling. This permit is presently not allowable in  
the R-1 Residential Zone in which the property is located because this lot  
has only about two acres instead of three, as required by Section 602.2A.7  
of the Zoning Ordinance.

LEGAL BASIS OF APPEAL: Such variance may be granted only if the Board of Appeals  
finds that the strict application of the provisions of the Ordinance would result  
in undue hardship in the development of property which is inconsistent with the  
intent and purpose of the Ordinance; that there are exceptional or unique circum-  
stances relating to the property that do not generally apply to other property in  
the same zone or neighborhood, which have not arisen as a result of action of the  
applicant subsequent to the adoption of this Ordinance whether in violation of the  
provisions of the Ordinance or not; that property in the same zone or neighborhood  
will not be adversely affected by the granting of the variance; and that the granting  
of the variance will not be contrary to the intent and purpose of the Ordinance.

Marie C. M. Gray  
APPELLANT

DECISION

After public hearing held October 28, 1971, the Board of Appeals finds that  
all of the above conditions do exist with respect to this property and that  
a variance should be granted in this case.

It is, therefore, determined that a variance from the provisions of the Zoning  
Ordinance should be granted in this case.

W. B. Keefe  
Harry M. Shroeder  
W. Ceelo Establin  
Board of Appeals

656-676 Auburn Street

Sept. 28, 1971

Brian McAvoy  
668 Auburn Street

cc to: Corporation Counsel

Dear Mr. McAvoy:

Building permit and certificate of occupancy for establishing a stable for one shetland pony, at the above named location, as an accessory use to the existing dwelling is not allowable in the R-1 Residential Zone in which this property is located because this lot has only about two acres instead of three, as required by Section 602.2A.7 of the Zoning Ordinance.

We understand that you would like to exercise your appeal rights in this matter. Accordingly you or your authorized representative should come to this office in Room 113, City Hall to file the appeal on forms which are available here. A fee of \$15.00 for a variance appeal should be paid at this office at the time the appeal is filed.

Very truly yours,

A. Allan Soule,  
Assistant Director

AAE :js



October 22, 1971

Brian F. McAvoy  
668 Auburn St.

02 October 28, 1971

PERMIT # 1447 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Claire B. Audette

Address: 668 Auburn St, Portland, ME 04103

LOCATION OF CONSTRUCTION 656-668 Auburn Street  
 Future Owner - Douglas & Shirley Blodgett-54 Hodgins  
 & CONTRACTOR St., Port., ME SUBCONTRACTORS: 051 #

ADDRESS: \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_ Type of Use: \_\_\_\_\_

Part Used: \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion - Explain Single Family

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

# Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

Foundation:

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other \_\_\_\_\_

Floor:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. Doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Materials \_\_\_\_\_

Interior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
5. Other Materials \_\_\_\_\_

For Official Use Only	
Date: <u>October 23, 1987</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Blgd Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost _____	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fees _____	

- Ceiling:
1. Ceiling Joists Size: \_\_\_\_\_
  2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_
  3. Type Ceilings: \_\_\_\_\_
  4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
  5. Ceiling Height: \_\_\_\_\_

- Roof:
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_
  2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
  3. Roof Covering Type \_\_\_\_\_
  4. Other \_\_\_\_\_

Chimneys: Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating: Type of Heat: \_\_\_\_\_

Electrical: Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing: 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_

2. No. of Tubs or Showers \_\_\_\_\_

3. No. of Flushes \_\_\_\_\_

4. No. of Lavatories \_\_\_\_\_

5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools: 1. Type: \_\_\_\_\_

2. Pool Size: \_\_\_\_\_

3. Must conform to National Electrical Code and State Law.

Zoning: District \_\_\_\_\_ Street Frontage Req. \_\_\_\_\_ Provided \_\_\_\_\_

Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required: Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_

Shore and Floodplain Mgmt. \_\_\_\_\_ Special Exception \_\_\_\_\_

Other (Explain) \_\_\_\_\_

Date Approved: \_\_\_\_\_

Permit Received By Joyce M. Rinaldi

Signature of Applicant Douglas Blodgett Date Oct. 23, 1987

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_

K. Taylor

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207)289-3826

**PROPERTY ADDRESS**  
Town Or Plantation: **PORTLAND**  
Street Subdivision Lot #: **668 AUBURN STREET**  
**PROPERTY OWNERS NAME**  
Last: **BLODGETT** First: **DOUG/SHIRLEY**  
Applicant Name:  
Mailing Address of Owner/Applicant (if Different): **54 HODGINS STREET PORTLAND, MAINE 04103**

PORTLAND PERMIT # 2,701 TOWN COPY  
Date Permitted: **1/6/88** FEE: **\$140** Double Fee Charged:   
Local Plumbing Inspector Signature: *[Signature]* L.P.I. # **123**

**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 Inspector to deny a Permit.

**Caution: Inspection Required**  
I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Signature of Owner/Applicant

Date

Local Plumbing Inspector Signature

**JAN 6 - 1988**

**PERMIT INFORMATION**

**THIS APPLICATION IS FOR:**  
1.  NEW SYSTEM  
2.  REPLACEMENT SYSTEM  
3.  EXPANDED SYSTEM  
4.  EXPERIMENTAL SYSTEM

**SEASONAL CONVERSION**  
to be completed by the LPI  
5.  SYSTEM COMPLIES WITH RULES  
6.  CONNECTED TO SANITARY SEWER  
7.  SYSTEM INSTALLED - P#  
8.  SYSTEM DESIGN RECORDED AND ATTACHED

**IF REPLACEMENT SYSTEM:**  
YEAR FAILING SYSTEM INSTALLED \_\_\_\_\_  
THE FAILING SYSTEM IS:  
1.  BED 3.  TRENCH  
2.  CHAMBER 4.  OTHER: \_\_\_\_\_

**THIS APPLICATION REQUIRES:**  
1.  NO RULE VARIANCE  
2.  NEW SYSTEM VARIANCE Attach New System Variance Form  
3.  REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form  
a.  Requiring Local Plumbing Inspector Approval  
b.  Requires State and Local Plumbing Inspector Approval  
4.  MINIMUM LOT SIZE VARIANCE

**INSTALLATION IS:**  
**COMPLETE SYSTEM**  
1.  NON-ENGINEERED SYSTEM  
2.  PRIMITIVE SYSTEM (Includes Alternative Toilet)  
3.  ENGINEERED (+2000 gpd)  
**INDIVIDUALLY INSTALLED COMPONENTS:**  
4.  TREATMENT TANK (ONLY)  
5.  HOLDING TANK \_\_\_\_\_ GAL  
6.  ALTERNATIVE TOILET (ONLY)  
7.  NON-ENGINEERED DISPOSAL AREA (ONLY)  
8.  ENGINEERED DISPOSAL AREA (ONLY)  
9.  SEPARATED LAUNDRY SYSTEM

**SIZE OF PROPERTY** **32000 SF** **ZONING** **RES**

**DISPOSAL SYSTEM TO SERVE:**  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER \_\_\_\_\_ SPECIFY \_\_\_\_\_

**TYPE OF WATER SUPPLY**  
**PUBLIC WATER SUPPLY**

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

**TREATMENT TANK**  
1.  SEPTIC:  Regular  Low Profile  
2.  AEROBIC  
SIZE: **1000** GALS.

**WATER CONSERVATION**  
1.  NONE  
2.  LOW VOLUME TOILET  
3.  SEPARATED LAUNDRY SYSTEM  
4.  ALTERNATIVE TOILET SPECIFY: \_\_\_\_\_

**PUMPING**  
1.  NOT REQUIRED  
2.  MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)  
3.  REQUIRED DOSE: \_\_\_\_\_ GALS.

**CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)**  
**3 BEDROOM SINGLE FAMILY RESIDENCE**

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**  
PROFILE: **7** CONDITION: **C**  
DEPTH TO LIMITING FACTOR: **18"**

**SIZE RATINGS USED FOR DESIGN PURPOSES**  
1.  SMALL  
2.  MEDIUM  
3.  MEDIUM-LARGE  
4.  LARGE  
5.  EXTRA LARGE

**DISPOSAL AREA TYPE/SIZE**  
1.  BED **1000** Sq. Ft.  
2.  CHAMBER \_\_\_\_\_ Sq. Ft.  
 REGULAR  H-20  
3.  TRENCH \_\_\_\_\_ Linear Ft.  
4.  OTHER: \_\_\_\_\_

**DESIGN FLOW:** **303** (GALLONS/DAY)

**SITE EVALUATOR STATEMENT**

On **JULY 2, 1987** (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

*[Signature]*  
Site Evaluator Signature

**040**  
SEI

**July 13, 1987**  
Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

**PORTLAND**

Street, Road, Subdivision

**668 AUBURN STREET**

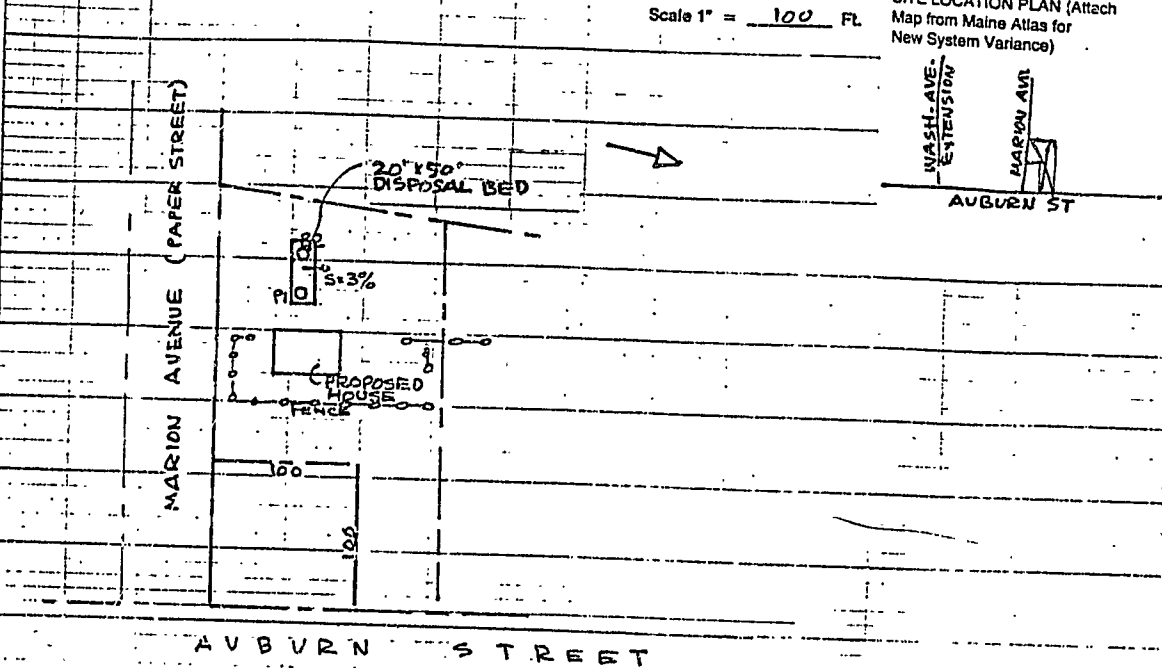
Owners Name

**DOUG / SHIRLEY BLODGETT**

**SITE PLAN**

Scale 1" = 100 FT.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



SOIL DESCRIPTION AND CLASSIFICATION				(Location of Observation Holes Shown Above)			
Observation Hole <u>P1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring				Observation Hole <u>B2</u> <input type="checkbox"/> Test Pit <input checked="" type="checkbox"/> Boring			
HUMUS 1" Depth of Organic Horizon Above Mineral Soil				HUMUS 1" Depth of Organic Horizon Above Mineral Soil			
Texture	Consistency	Color	Mottling	Texture	Consistency	Color	Mottling
0-6" SANDY LOAM		DARK BROWN		0-6" SANDY LOAM			
6-15" CRIALLE							
15-20" MEDIUM TO FINE SAND		ORANGE-BROWN	COMMON				COMMON
20-30" SILT/SAND	FIRM	OLIVE GRAY					
30-40"							
40-50"							
50"							
Soil <u>7</u> Profile <u>PH7</u>	Classification <u>C</u> Consistency	Slope <u>3%</u>	Limiting Factor <u>19'</u>	Soil <u>7</u> Profile <u>PH7</u>	Classification <u>C</u> Consistency	Slope <u>3%</u>	Limiting Factor <u>13'</u>
<input type="checkbox"/> Ground Water <input type="checkbox"/> Reticulate Layer <input type="checkbox"/> Bedrock				<input type="checkbox"/> Ground Water <input type="checkbox"/> Reticulate Layer <input type="checkbox"/> Bedrock			



**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207)269-3826

**PROPERTY ADDRESS**

Town Or Plantation: **PORTLAND**

Street Subdivision Lot #: **668 AUBURN STREET**

**PROPERTY OWNERS NAME**

Last: **BLODGETT** First: **DOUG/SHIRLEY**

Applicant Name:

Mailing Address of Owner/Applicant (If Different): **54 HODGINS STREET PORTLAND, MAINE 04103**

**Caution: Permit Required**

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

**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 Inspector to deny a Permit.

Signature of Owner/Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

**PERMIT INFORMATION**

<p><b>THIS APPLICATION IS FOR:</b></p> <p>1. <input checked="" type="checkbox"/> NEW SYSTEM</p> <p>2. <input type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p><b>THIS APPLICATION REQUIRES:</b></p> <p>1. <input checked="" type="checkbox"/> NO RULE VARIANCE</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p>3. <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>a. <input type="checkbox"/> Requiring Local Plumbing Inspector Approval</p> <p>b. <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</p>	<p><b>INSTALLATION IS:</b></p> <p><b>COMPLETE SYSTEM</b></p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd)</p> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK _____ GAL</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p><b>SEASONAL CONVERSION</b> to be completed by the LPI</p> <p>5. <input type="checkbox"/> SYSTEM COMPLIES WITH RULES</p> <p>6. <input type="checkbox"/> CONNECTED TO SANITARY SEWER</p> <p>7. <input type="checkbox"/> SYSTEM INSTALLED - P# _____</p> <p>8. <input type="checkbox"/> SYSTEM DESIGN RECORDED AND ATTACHED</p>	<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p><b>THE FAILING SYSTEM IS:</b></p> <p>1. <input type="checkbox"/> BED      3. <input type="checkbox"/> TRENCH</p> <p>2. <input type="checkbox"/> CHAMBER      4. <input type="checkbox"/> OTHER: _____</p>	<p><b>DISPOSAL SYSTEM TO SERVE:</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>SIZE OF PROPERTY</b> 32000± SF</p> <p><b>ZONING</b> RES</p>	<p><b>TYPE OF WATER SUPPLY</b> PUBLIC WATER SUPPLY</p>	

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<p><b>TREATMENT TANK</b></p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <b>1000</b> GALS.</p>	<p><b>WATER CONSERVATION</b></p> <p>1. <input checked="" type="checkbox"/> NONE</p> <p>2. <input type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET SPECIFY: _____</p>	<p><b>PUMPING</b></p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED DOSE: _____ GALS.</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p><b>3 BEDROOM SINGLE FAMILY RESIDENCE</b></p> <p>DESIGN FLOW: <b>30.7</b> (GALLONS/DAY)</p>
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <p>PROFILE: <b>7</b>      CONDITION: <b>C</b></p> <p>DEPTH TO LIMITING FACTOR: <b>18"</b></p>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input checked="" type="checkbox"/> MEDIUM-LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRA LARGE</p>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <p>1. <input checked="" type="checkbox"/> BED <b>1000</b> Sq. Ft.</p> <p>2. <input type="checkbox"/> CHAMBER _____ Sq. Ft. <input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	

**SITE EVALUATOR STATEMENT**

On **JULY 2, 1987** (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

*John H. Hildebrand*  
Site Evaluator Signature

**040** SE#

**July 13, 1987** Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)



GENERAL INSTALLATIONS

Permit Number  
Location  
Owner  
Date of Permit  
Final Inspection  
By Inspector

Permit Application Register Page No.

INSPECTIONS  
Service called to  
by  
12/14/81  
City of  
Chicago

PROGRESS INSPECTIONS  
City of Chicago

PERMITS

DATE

REMARKS

12/14/81  
Service called to Chicago City of Chicago  
to work on the grounds for installation







912625

Permit # \_\_\_\_\_ City of \_\_\_\_\_ BUILDING PERMIT APPLICATION Fee \_\_\_\_\_ Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 LOCATION OF CONSTRUCTION N \_\_\_\_\_  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: \_\_\_\_\_  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion \_\_\_\_\_

**PERMIT ISSUED**  
**For Official Use Only**  
 Date 5/17/91 Subdivision \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit \_\_\_\_\_ Ownership \_\_\_\_\_  
 Estimated Cost 11,373  
**CITY OF PORTLAND**

**Foundations:**  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

**Floors:**  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

**Exterior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Size \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

**Interior Walls:**  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Size \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

**Zoning:**  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

**Review Required:**  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Y. \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain) OK 5-12-91 **HISTORIC PRESERVATION**

**Ceiling:**  
 1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor Landmark.  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.  
 3. Type Ceilings: \_\_\_\_\_ Requires Review.  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

**Roof:**  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_  
 Action: Denial  
 Approved with Conditions \_\_\_\_\_  
 Date: 5/17/91  
 Signature: \_\_\_\_\_

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

**Heating:**  
 Type of Heat: \_\_\_\_\_

**Electrical:**  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**  
 1. Approval of soil, if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By: Louise E. Chase  
 Signature of Applicant: Marie B. Audette Date: 5/17/91  
 Signature of CEO: Marie Audette Date: \_\_\_\_\_  
**PERMIT ISSUED WITH REQUIREMENTS**  
 Inspection Dates: \_\_\_\_\_  
 White Tax Assessor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_ White Tag: MS Mr. Leary  
 © Copyright GPOG 1988

PLOT PLAN

N

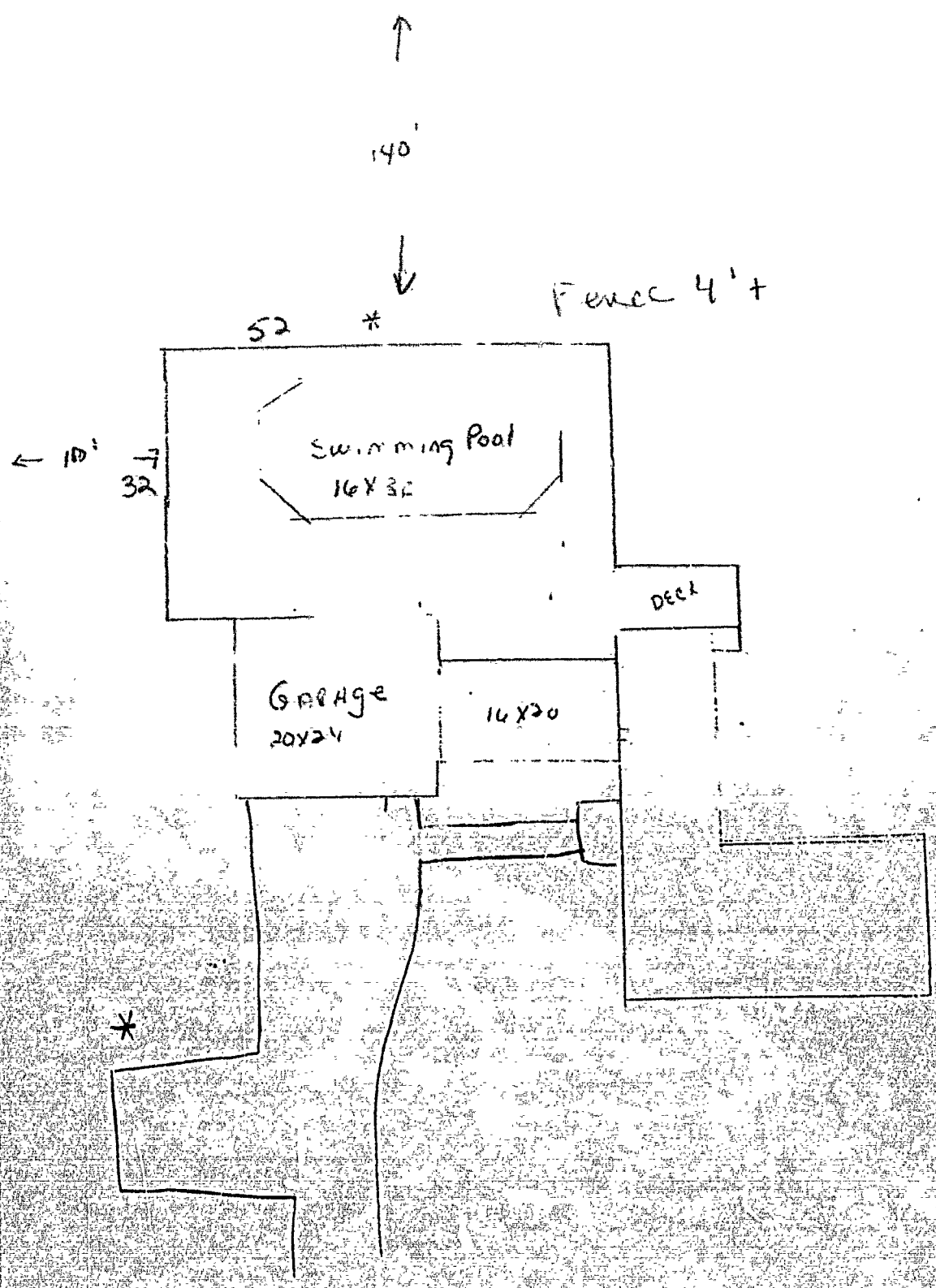


**FEES (Breakdown From Front)**  
Base Fee \$ 75 -  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

**COMMENTS** 5-24-91 No work yet. 6-3-91 Pool has already been installed.  
6-11-91 Everything is complete.

Signature of Applicant Clare B. Audette Date 5/17/91





THIS IS NOT A BOUNDARY SURVEY

**CERTIFICATION PLAN**

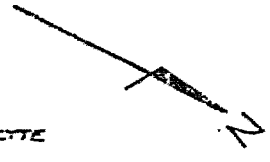
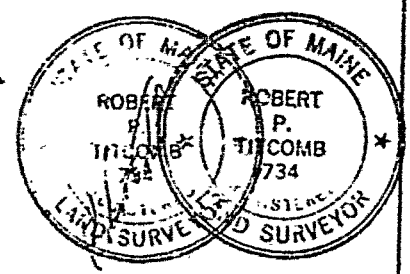
668 AUBURN ST.  
PORTLAND, MAINE

No 172-282

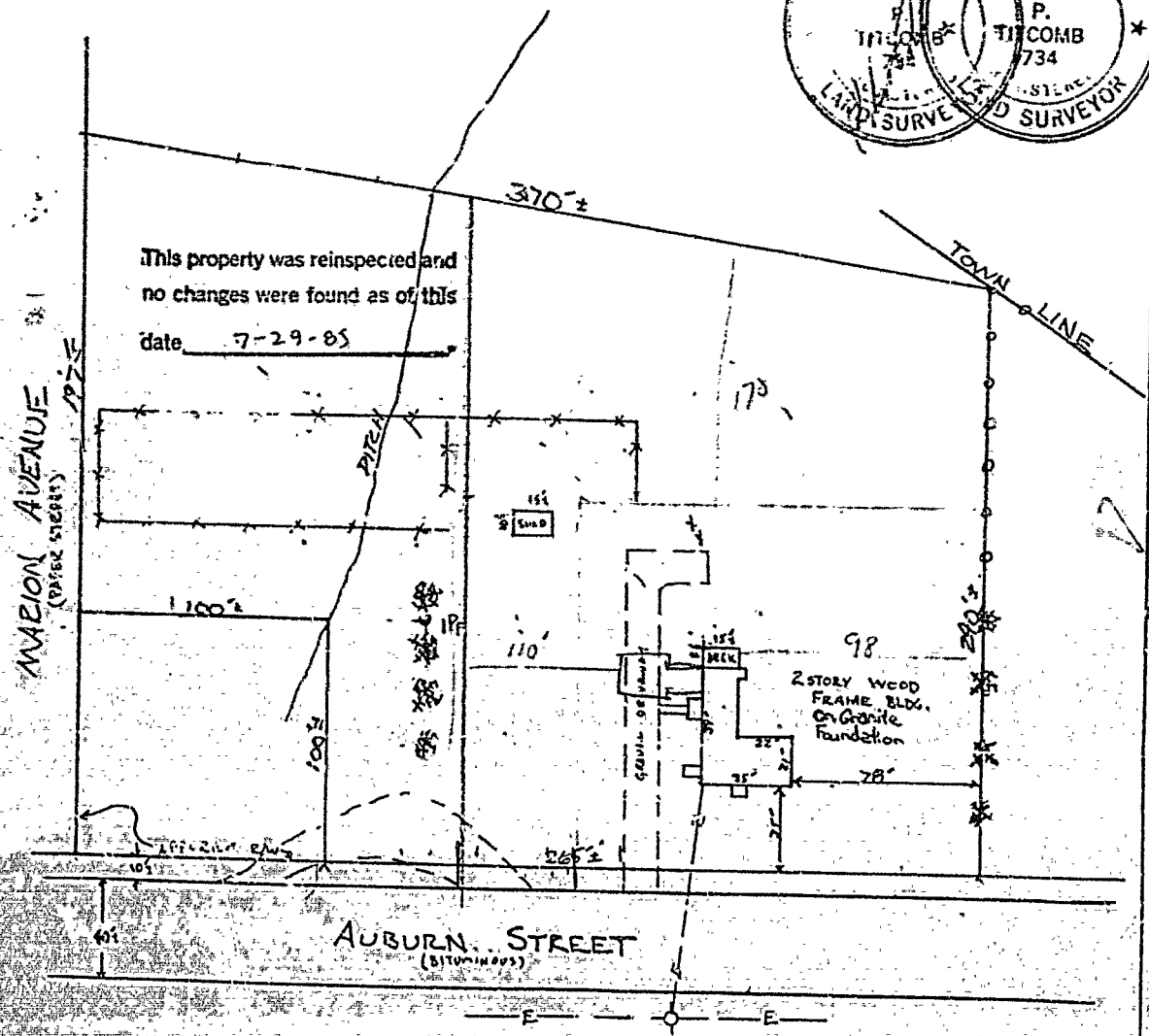
I hereby certify that the location of the dwelling shown on this plan does conform with the local zoning laws in effect at the time of construction. The property does not fall within a special flood hazard zone.

SELLER BRAIN F. + MARIE E. McAVOY

BUYER WAYNE W. + CLAIRE B. AUDETTE



This property was reinspected and no changes were found as of this date 7-29-85



This plan was not made from an instrument survey.  
The certifications are for mortgage purposes only.  
This plan applies only to conditions existing as of the date shown hereon. This plan is not for recording.

Date 2-26-82 Scale 1"=60'

Robert P. Titcomb, Inc. Fairmouth, Maine



# COUNTRYSIDE POOLS, INC.

RR #3 BOX 82C GORHAM, MAINE 04038  
(207) 839-5726

## BASIC POOL PACKAGE INCLUDES:

**POOL WALL**-The panels are made from 14 gauge steel. - Limited Lifetime Warranty  
2.75 oz. of zinc per sq. ft.

**ADJUSTABLE A FRAME** - The Adjustable Notched A-Frames are used for strength  
and perfect alignment of steel walls. They are built of the same  
corrosion resistant steel as the walls.

**CONCRETE FOOTING**-Locks the entire base of the pool wall together.

**6" RADIUS CORNERS**- Standard

**LINER**- 20 mil standard - 15yr. warranty - Monarch Tile/Monarch Marble Bottom

**COPING IMPERIAL ALUMINUM**-Concrete Receptor coping for easy care and  
maintenance (white).

**SAFETY ROPE**-Delineates shallow end from Hopper. Included on all Hopper models.

**LADDER**-3 step stainless steel ladder provides safe and easy exit from your pool.

**SKIMMER**-Hayward Automatic Skimmer with removable basket for coarse debris. 2  
skimmers installed on most units.

**RETURN FITTINGS**-2 Hayward throughwall fittings, includes directional control.

**VACUUM HOSE CONNECTION**-Makes vacuuming easier by providing a central vacuum  
hose connection point.

**VACUUM HOSE AND MAINTENANCE KIT**-Pole, Net, Vac Head, Brush

**PUMP SYSTEM**-Hayward Super Pump-A-Quiet, rugged, corrosion resistant pump.

**PLUMBING**-is constructed of strong, durable, chemical resistant PVC.

**FILTER SYSTEM**-Hayward High Rate Sand or Diatomaceous Earth Filter.

**UNDERGROUND WASTELINE**-installed whenever possible.

**AUTOMATIC CHLORINATOR**-Constant feed, easy to use, adjustable rate.

**TEST KIT**-Provides five essential tests, chlorine, ph, total alkalinity, acid  
demand and alkalinity demand.

**POOL WILL BE CHEMICALLY STABILIZED.**

**EXCAVATION AND FINISHED GRADING**-Utilizing existing materials.

**COUNTRYSIDE POOLS-CARRIES A COMPLETE LINE OF:**

\*Wahl Brand Chemicals

\*Hayward Pumps, Filters & Accessories

\*Aarnson - Pool cleaning Equipment

\*Test kits and refills

\*Toys, games & floats

\*Repair parts, O-Rings, Hardware and Fittings

\*If you need something and we do not stock it -  
please ask and we will check availability

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 660 Auburn St.		Owner: Douglas P. Blodgett, Sr.		Phone: 797-9357		Permit No: 041000	
Owner Address: 660 Auburn St.-Ptld, ME 04103		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: James W. Girard		Address:		Phone:		Permit Issued: SEP 21 CITY OF PORTLAND Zoning: CBT	
Past Use: 1-fam		Proposed Use: 1-fam w addition		COST OF WORK: \$ 25,000		PERMIT FEE: \$ 145	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: construct addition - 4'x16' - bedroom & living room		Signature:		Signature:		Zoning Approval: 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"/>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		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	
		Signature:		Date:		Historic Preservation: <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review	

1. This permit application doesn't 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.

**PERMIT ISSUED  
WITH REQUIREMENTS**

L. Chase  
9/16/94

**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 the City of Portland. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative has the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such work.

Signature of Applicant: *Douglas P. Blodgett Sr.* ADDRESS: \_\_\_\_\_ DATE: *9/16/94* PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK: TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: *9/19/94*

Signature: *[Signature]*

CEO DISTRICT: **7**  
D. JORDAN





COMMENTS

- 9-22-94 - Footings clear to pour
- 9-30-94 Forms OK clear to backfill
- 10-11-94 Framing not yet complete (Plumbing permit required)
- 10-13-94 Framing completed (except stair system) and it may be water tested for a period
- 12-6-94 - Need AC/DC powered Smoke Det. + handrails up stairs  
Plumbing OK
- 12-13-94 - Smoke Detectors to code - Handrail not on (will be after furniture)  
Plumbing OK per permit

Inspection Record		Date
Type		
Foundation:	Forms OK	9-27-94
Framing:		
Plumbing:	Final OK	12-5-94
Final:	OK per plans	12-12-94
Other:		



Inspection Services  
Samuel P. Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

CITY OF PORTLAND

September 20, 1994

Douglas F. Blodgett, Sr.  
660 Auburn St  
Portland, Me 04103

Re: 660 Auburn St

Dear Mr. Blodgett, Sr.

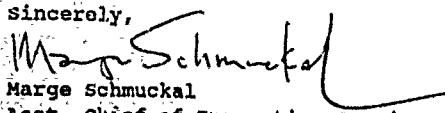
Your application to construct an addition (24'x16') for bedroom & livingroom has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not preclude the applicant from meeting applicable state and Federal laws.

No Certificate of Occupancy can be issued until all requirements of this letter are met.

1. The use of this building shall remain a single family dwelling. Any change in this status would necessitate the need for a change of use permit.
2. Separate permits must be taken out for the plumbing and electrical work.
3. All the noted conditions must be met on the attached building permit report (#1, 3, 7, 8, 10, 12, 13, 14, 15).

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

  
Marge Schmuckal  
Asst. Chief of Inspection Services

cc: James W. Girard, 106 Saco Ave, OOB, ME 04063

BUILDING PERMIT REPORT

Address 660 Auburn Street Date 7/19/94  
Reason for Permit Construct Addition 24' x 16' bedroom and  
Living Room Bldg. Owner: Douglas P. Blodgett, Sr.  
Contractor: JAMES W. Girard  
Permit Applicant: OWNER  
Approval: with conditions #1, 3, 7, 8, 10, 12, 13, 14, 15

CONDITION OF APPROVAL:

- ✓ 1. Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection).
2. Precaution must be taken to protect concrete from freezing.
- ✓ 3. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
4. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hr., including fire doors with selfclosers.
5. Each apartment shall have access to (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
6. The boiler shall be protected by enclosing with one (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible locations between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
- ✓ 7. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of special knowledge or separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping room must have minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm), and a minimum net clear opening of 5.7 sq. ft.

(over)

X 8. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code 919.3.2 (BOCA National Building Code 1993), and NFPA 101 Chapter 18 & 19. (smoke detectors shall be installed and maintained at the following locations):

1. In the immediate vicinity of bedrooms
2. In all bedrooms
3. In each story within a dwelling unit, including basements

9. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by Fire Partitions and floor/ceiling assembly; which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1993).

X 10. Guardrails & Handrails - A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Group 42", except Use Group R which is 36". In occupancies in Use Group A, B, H-4, I1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

11. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10, section 8 and subsections 1023.0 & 1024.0 of the City's building code (The BOCA National Building Code/1993).

X 12. Stair construction in Use Group R-3, R-4 is a minimum of 9" tread and 8-1/4" maximum rise.

X 13. Headroom in habitable space is a minimum of 7'6".

X 14. The minimum headroom in all parts of a stairway shall not be less than 80 inches.

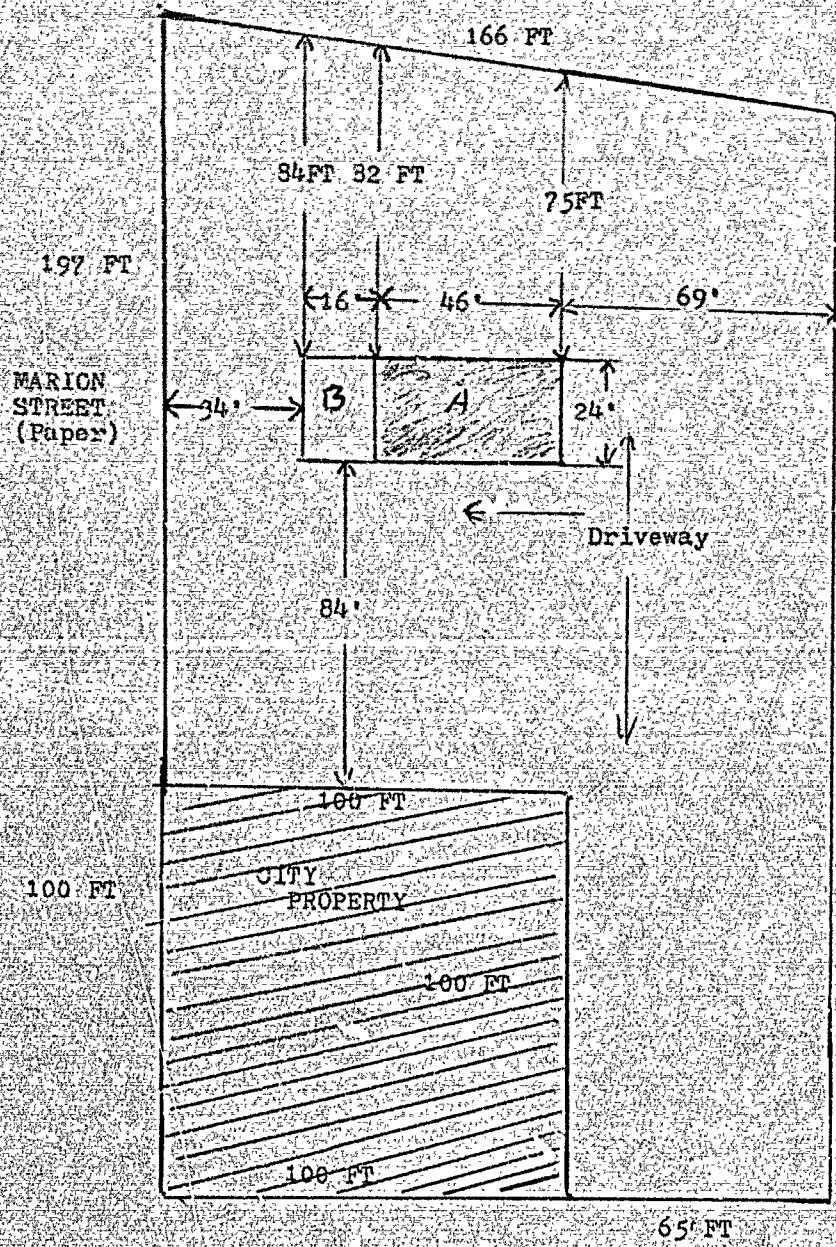
X 15. All construction and demolition debris must be disposed at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate or occupancy is issued or demolition permit is granted.

16. Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

17. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

*P. Samuel Hoffses*  
P. Samuel Hoffses  
Chief of Inspections

/s/ 01/14/14 (redo w/additions)



A: Existing house  
24' x 46'

B: Proposed 2-story  
addition 24' x 16'  
attached  
1st fl; single rm.  
2nd fl; bedrm/full  
bath

273 FT

Mr. & Mrs.  
Douglas P. Elodgett  
660 Auburn Street  
Portland, ME 04103-2132  
(207)-797-9357

Parcel #386-B-26

100 FT

CITY  
PROPERTY

100 FT

100 FT

65 FT

658-666

AUBURN STREET

N (approx.)



James W. Girard

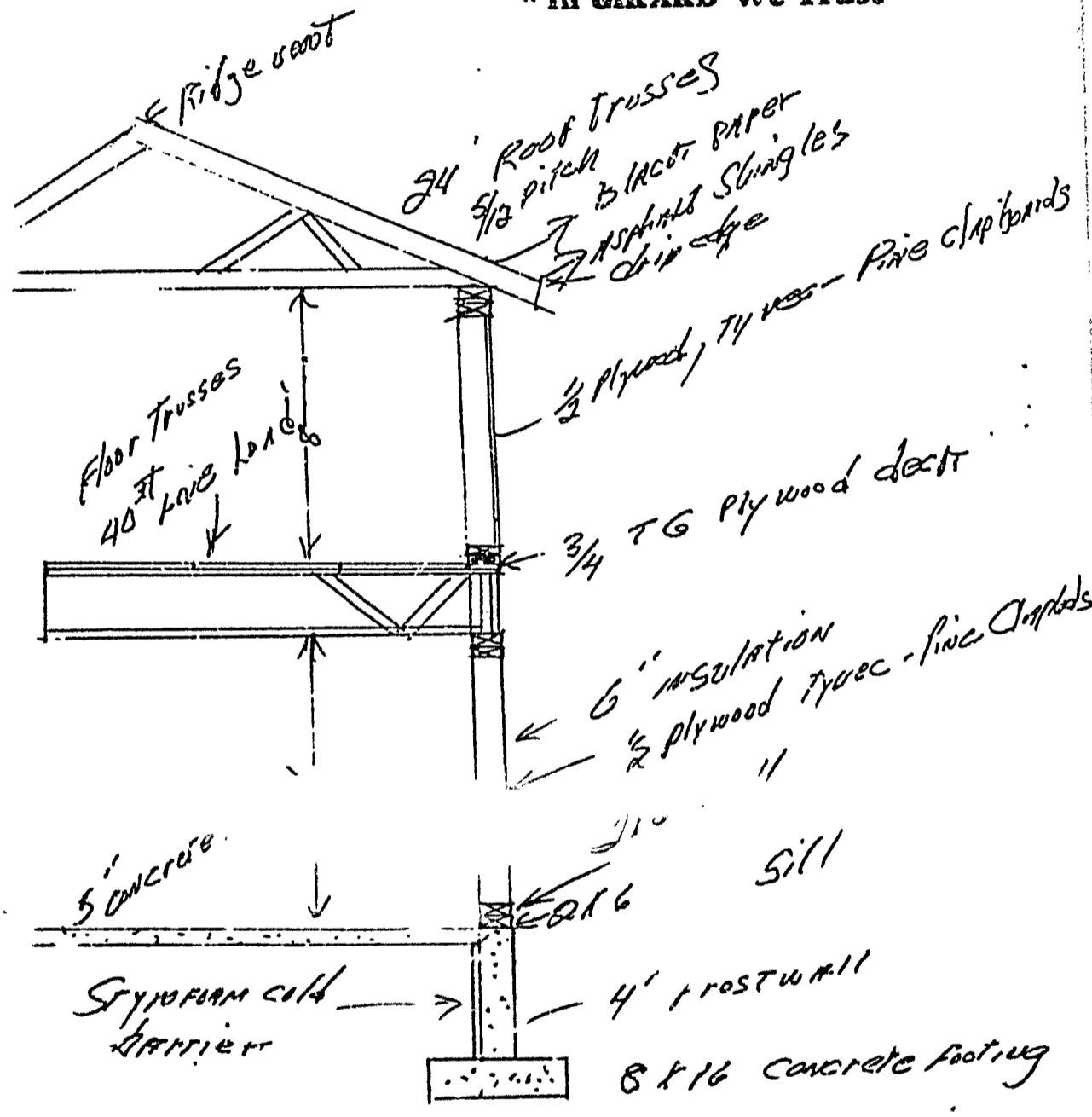
INSULATION: 12" in Ceiling  
6" in walls

Mr. & Mrs. Douglas Blodgett  
660 Auburn Street  
Portland, ME 04103-2133

Parcel #386-B-26

General Contractor Builder & Roofer

"In GIRARD We Trust"



106 Saco Ave. / Old Orchard Beach, Me. 04063 / Tel. 934-2077

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 885-3828

**PROPERTY ADDRESS**

Town Or Plantation: Portland

Street Subdivision Lot #: 660 Auburn St

**PROPERTY OWNERS NAME**

Last: Budget First: Douglas

Applicant Name: The Budget Plumbing Bros

Mailing Address of Owner/Applicant (if Different): 1111 1/2 St. Portland, ME

**Caution: Permit Required**

PORTLAND 5033 TOWN COPY

Date Permit Issued: 10-28-94 \$ 133 FEE

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # \_\_\_\_\_

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and understand that said falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 10-28-94

**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: [Signature] Date Approved: 12-13-94

**PERMIT INFORMATION**

<b>This Application is for</b>	<b>Type Of Structure To Be Served</b>	<b>Plumbing To Be Installed By:</b>
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>12358</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<b>HOOK-UP:</b> to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.		Hose/Abc / Silcock	1	Bath Tub and Shower
		Floor Drain		Shower (separate)
<b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures		Urinal	1	Sink
		Drinking Fountain		Wash Basin
Number of Hook-Ups & Relocations		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Dish Washer
		Grease / Oil Separator		Dish Washer
				Garbage Disposal
				Water Heater
TRANSFER FEE (\$0.00)		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee
				<b>\$12</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY