

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

Location of Construction: Lot # 25 Auburn Pines <i>76 Garsue Dr</i>		Owner: <i>**Emery & Eileen Donatelle**</i>		Phone: ** 797-2597**		Permit No: 000362
Owner Address: 121 Deepwood Dr. 04103		Lessee/Buyer's Name:		Business Name: FAX 761-6139		
Contractor Name: <i>Owner/Same</i>		Address: 121 Deepwood Dr.		Phone: 775-8296		Permit Issued: APR 21 2000
Past Use: Vacant		Proposed Use: Single Family w/Attached		COST OF WORK: \$ 140,000.00		
				PERMIT FEE: \$ 864.00		Zone: CBL: 386A-B-025 386-B-025
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Proposed Project Description: Construct New Single Family w/ Attached Garage				INSPECTION: Use Group: A-3 Type: 5B BOCA 99 Signature: <i>[Signature]</i>		Zoning Approval: 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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input checked="" type="checkbox"/>
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Permit Taken By: GD		Date Applied For: April 10, 2000				

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..

****please call Mr. Donatelle for PickUp**

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

April 10, 2000

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: _____

PERMIT ISSUED WITH REQUIREMENTS

3/14
Front 25 Kg - 40 shown - OK
Rear 25 Kg - 85 shown - OK
Sides 14 Kg - 21 shown - OK

Subbacks OK T/M

5/12 - Precon on site w/owner - discussed all requirements (stairs, guards, etc.) T/M

7/20/00 Framing - Require approved hangers ceiling joists & rafters above Garage. Discussed Railing (Guard & Hand) requirements, Stairs & Egress Framing all DC

5-4-01: Final Insp. Needs Elect Receptacle Outside front: Rear, Htg System not Bonded to Elect, Final Grading. SKW

5-14-01: Outside Receptacles are installed, Owner/Contractor stated that he measured continuity of Htg system to Elect Ground @ <.01 All Else finished. 16 OHMS.

Simpson hanger #
Chimney disburse
Boardwalk Rail

CBL: 38p-A-B-25
Permit: 00036Z

Inspection Record	
Type	Date
Foundation:	_____
Framing:	_____
Plumbing:	_____
Final:	_____
Other:	_____

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland ME
Street Subdivision Lot #	76 GARFOTE 26 25

PROPERTY OWNER

Last:	DONATELLI	First:	EMERY
Applicant Name:	NORMAN I. MARTIN		
Mailing Address of Owner/Applicant (if Different)	96 Shepherd Lane Portland		

PORTLAND
Date Permit Issued: 7/17/01 7372 TOWN COPY
\$ 184.11 FEE If Double Fee Charged
L.P.I. # 0124
Local Plumbing Inspector Signature: [Signature]

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] 7/30/01
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.

[Signature] for SKW 7/30/01
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 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 _____	Plumbing To Be Installed By: 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>106163</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet	1	Laundry Tub
		Other: _____	1	Water Heater
OR TRANSFER FEE [\$6.00]	2	Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			14	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.

Residential
LOT 25 GARSO



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:

#2 Date 5/18/00
Permit # DC
CBL# 88600AB203

SITE LOCATION: 10+25 Auburn Pines 76 Garso Drive - 386A-B-25

OWNER Emergy Donatelle TENANT _____

						TOTAL EACH FEE			
OUTLETS	Receptacles	<u>80</u>	Switches	<u>20</u>	Smoke Detectors	<u>7</u>	<u>87</u>	.20	17.40
FIXTURES	incandescent	<u>12</u>	fluorescent		Strips	<u>9</u>	<u>16</u>	.20	3.20
SERVICES	Overhead		Underground	<u>1</u>	TTL AMPS	<800	<u>1</u>	15.00	<u>15.00</u>
	Overhead		Underground			>800		25.00	
Temporary Service	Overhead		Underground		TTL AMPS			25.00	
								25.00	
METERS	(number of)	<u>1</u>					<u>1</u>	1.00	<u>1.00</u>
MOTORS	(number of)							2.00	
RESID/COM	Electric units							1.00	
HEATING	oil/gas units		Interior		Exterior			5.00	
APPLIANCES	Ranges	<u>1</u>	Cook Tops		Wall Ovens		<u>1</u>	2.00	<u>2.00</u>
	Insta-Hot		Water heaters		Fans			2.00	
	Dryers	<u>1</u>	Disposals	<u>1</u>	Dishwasher	<u>1</u>	<u>3</u>	2.00	<u>6.00</u>
	Compactors		Spa		Washing Machine	<u>1</u>	<u>1</u>	2.00	<u>2.00</u>
	Others (denote)							2.00	
MISC. (number of)	Air Cond/win							3.00	
	Air Cond/cent							10.00	
	HVAC		EMS		Pools			5.00	
	Signs				Thermostat			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		Remote		Main	<u>1</u>	<u>1</u>	4.00	<u>4.00</u>
TRANSFORMER	0-25 Kva							5.00	
	25-200 Kva							8.00	
	Over 200 Kva							10.00	
						TOTAL AMOUNT DUE			<u>150.60</u>
						MINIMUM FEE/COMMERCIAL 35.00			
						MINIMUM FEE		25.00	

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME DEDERICK J EASTUP MASTER LIC. # M960017775
 ADDRESS 115 Brand Rd. Windham LIMITED LIC. # _____
 TELEPHONE 892-3083 CELL 831-1899

SIGNATURE OF CONTRACTOR Dederick Eastup