



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 657 Auburn St

CBL 386A B030001

Issued to Lozier Jacqueline J /Ryan Raymond

Date of Issue 01/20/2004

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 02-1323 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Single Family Dwelling(30'x40') w/ attached 22'.24.
Two Car Garage

APPROVED OCCUPANCY

Use Group R2 Type 5b
Boca 1999

Limiting Conditions:

This is a temporary certificate of occupancy and shall expire 05/31/04. All exterior site work must be complete by that date. This certificate covers permit #02-1323 only. Any future work shall require separate permit(s)

This certificate supersedes
certificate issued

Approved:

1/20/04

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

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

Location of Construction: 657 Auburn St		Owner Name: Lozier Jacqueline J		Owner Address: Po Box 503		Issue Date: FEB 20, 2003		CBL: 386A B030001	
Business Name: n/a		Contractor Name: Ryan Raymond		Contractor Address: 389 Main street Westbrook		Phone: 207-929-6503		CITY OF PORTLAND	
Lessee/Buyer's Name n/a		Phone: n/a		Permit Type: Single Family				Zone: R-2	
Past Use: Vacant		Proposed Use: Single Family / New 30' x 40' Ranch style single family home with 24' x 22' two car attached garage, including 8' x 16' deck.		Permit Fee: \$1,148.00		Cost of Work: \$150,000.00		CEO District: 2	
Proposed Project Description: Build 30' x 40' Single Family Home with 24' x 22' two car attached garage and 8' x 22' deck.				FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: R3 Type: SB Signature: DOCA 1/9/99 SMB 2/20/03			
				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: gg		Date Applied For: 11/27/2002		Zoning Approval					

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..

Special Zone or Reviews		Zoning Appeal		Historic Preservation	
<input type="checkbox"/> Shoreland		<input type="checkbox"/> Variance		<input checked="" type="checkbox"/> Not in District or Landmark	
<input type="checkbox"/> Wetland		<input type="checkbox"/> Miscellaneous		<input type="checkbox"/> Does Not Require Review	
<input type="checkbox"/> Flood Zone		<input type="checkbox"/> Conditional Use		<input type="checkbox"/> Requires Review	
<input type="checkbox"/> Subdivision		<input type="checkbox"/> Interpretation		<input type="checkbox"/> Approved	
<input checked="" type="checkbox"/> Site Plan		<input type="checkbox"/> Approved		<input type="checkbox"/> Approved w/Conditions	
# 2002-0246		<input type="checkbox"/> Denied		<input type="checkbox"/> Denied	
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/>		Date: 12/31/02		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

TO: Inspections
FROM: Jay Reynolds, Development Review Coordinator
DATE: December 12, 2003
RE: C. of O. for #657 Auburn Street
(CBL 386AB030) (ID 2002-0246)

After visiting the site, I have the following comments:

Site work incomplete:

1. Loam and Seed.
2. Planter relocation.

I anticipate this work can be completed by **June 1, 2004**.

At this time, **I recommend issuing a temporary Certificate of Occupancy.**

Please contact me if you have any questions or comments.
Thank You.

Cc: Sarah Hopkins, Development Review Services Manager
Mike Nugent, Inspection Services Manager

File: O:\plan\drc\auburn657a.doc

PLUMBING APPLICATION

PROPERTY ADDRESS	
Town or Plantation	PORTLAND
Street	657 AUBURN ST.
Subdivision Lot #	
PROPERTY OWNERS NAME	
Last: LOZIER	First: JACQUELINE
Applicant Name:	JACKIE LOZIER
Mailing Address of Owner/Applicant (If Different)	PO Box 503 BAR MILLS, ME 04004

2003-8182 360

PORTLAND 8479 TOWN COPY

Date Permit Issued: 6/5/03 \$916.00 ☐ Double Fee FEE Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

386 AB 030

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] 6/5/03

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

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
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 # 08654

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	0,2	Hosebibb / Sillcock	0,2	Bathtub (and Shower)
OR	0,0	Floor Drain	0,1	Shower (Separate)
	0,0	Urinal	0,4	Sink
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	0,0	Drinking Fountain	0,0	Wash Basin
OR	0,0	Indirect Waste	0,3	Water Closet (Toilet)
	0,0	Water Treatment Softener, Filter, etc.	0,1	Clothes Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	0,0	Grease / Oil Separator	0,1	Dish Washer
OR	0,0	Dental Cuspidor	0,0	Garbage Disposal
	0,0	Bidet	0,0	Laundry Tub
<input type="checkbox"/> TRANSFER FEE [\$6.00]	0,0	Other: _____	0,1	Water Heater
	0,2	Fixtures (Subtotal) Column 2	1,3	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		0,2	Fixtures (Subtotal) Column 2	
		1,5	Total Fixtures	
			Fixture Fee	
			Transfer Fee	
			Hook-Up & Relocation Fee	
			Permit Fee	
			(Total)	

96 10 156

3/26/03 checked setbacks - all within allowed limits - OK to pour footings. Tom M

4/3/02 - Checked foundation walls - OK
Chairs OK - weatherproofing OK - fabric/rocks OK.
OK to Backfill. Tom M

6/19/03 for Close In
① Trusses OK, Joint System, Stud System
② No tests on Supply or Waste lines
③ Stairs going to Hse & Hangar to Cellar - Rough lists OK
④ Chimney Not even started
⑤ Shower/tub not in place - will probably need
Safety flooring

~~Close in not given~~
Left message w/ Contractor - Spoke w/ owner in office

7/11/03 OK to close. AC

11/25/03 Final inspection. On site w/ Ryan Raymond. OK. But Temporary
clo Pending DRC memo. JR

11/12/03 Jay Reynolds memo REC'D JR

PLUMBING APPLICATION

Town or Plantation

PORTLAND

Street

657 AUBURN ST.

Subdivision Lot #

Last: LOZIER

First: JACQUELINE

Applicant Name:

JACKIE LOZIER

Mailing Address of Owner/Applicant (If Different)

PO BOX 503
BAR MILLS, ME 04004

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 of Owner/Applicant

6/5/03

Date

PORTLAND

PERMIT # 8479

STATE COPY

Date Permit Issued

6/5/03

\$

960.00

Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 360

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

This Application is for

Type of Structure To Be Served:

Plumbing To Be Installed By:

1. ☒ NEW PLUMBING

2. ☐ RELOCATED PLUMBING

1. ☒ SINGLE FAMILY DWELLING

2. ☐ MODULAR OR MOBILE HOME

3. ☐ MULTIPLE FAMILY DWELLING

4. ☐ OTHER - SPECIFY

1. ☒ MASTER PLUMBER

2. ☐ OIL BURNERMAN

3. ☐ MFG'D. HOUSING DEALER/MECHANIC

4. ☐ PUBLIC UTILITY EMPLOYEE

5. ☐ PROPERTY OWNER

LICENSE # 08,654

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	0.2	Hosebibb / Sillcock	0.2	Bathtub (and Shower)
	0.0	Floor Drain	0.1	Shower (Separate)
	0.0	Urinal	0.4	Sink
OR	0.0	Drinking Fountain	0.0	Wash Basin
	0.0	Indirect Waste	0.3	Water Closet (Toilet)
	0.0	Water Treatment Softener, Filter, etc.	0.1	Clothes Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.	0.0	Grease / Oil Separator	0.1	Dish Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	0.0	Dental Cuspidor	0.0	Garbage Disposal
	0.0	Bidet	0.0	Laundry Tub
	0.0	Other: _____	0.1	Water Heater
OR	0.2	Fixtures (Subtotal) Column 2	1.3	Total Fixtures
			0.2	
<input type="checkbox"/> TRANSFER FEE [\$6.00]				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

96
10
1

874-8716

386-AB-30

FAX TO: Jeanie Bourke
Code Enforcement Officer
City of Portland

FAX FROM: Jackie Lozier
749-7705

Regarding: 657 Auburn Street

Please be advised that we've eliminated the chimney from our plans as previously approved for 657 Auburn Street. Instead, we will be installing an oil fired furnace with a power vent.

Please let me know if you need more information from me.

Thank you for all your help.

Jackie

