

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0853	Issue Date: JUL 18 2003	CBL: 389 G013001
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Location of Construction: 45 Clapboard Rd	Owner Name: Pedro Lisa A	Owner Address: 45 Clapboard Rd CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: Dardano, David	Contractor Address: 38 West Lynne Avenue Portland	Phone: 2078783422
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone:

Past Use: single family	Proposed Use: single family - add bath in basement	Permit Fee: \$75.00	Cost of Work: \$5,880.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB BOLA 99	

Proposed Project Description: add bathroom in basement	Signature:	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: tmm	Date Applied For: 07/18/2003	Zoning Approval
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- 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 Maj <input type="checkbox"/> Manor <input type="checkbox"/> MM <input type="checkbox"/> Date: 7/18/03	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: 7/18/03
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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

ELECTRICAL PERMIT

City of Portland, Me.



[Signature]
 Date 9/9/03
 Permit # _____
 CBL# 389 G-013

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:

LOCATION: 45 Clapboard Rd METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Luisa Pedro
 TENANT _____ PHONE # _____

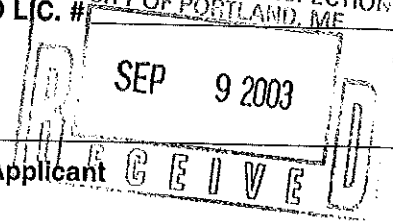
				TOTAL EACH FEE	
OUTLETS	Receptacles	Switches	Smoke Detector	.20	.20
FIXTURES	Incandescent	Fluorescent	Strips	.20	.20
SERVICES	Overhead	Underground	TTL AMPS <800	15.00	
	Overhead	Underground	>800	25.00	
Temporary Service	Overhead	Underground	TTL AMPS	25.00	
METERS	(number of)			25.00	
MOTORS	(number of)			1.00	
RESID/COM	Electric units			2.00	2.00
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		10.00	
		HVAC	EMS	5.00	
		Signs		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	4.00	
TRANSFORMER	0-25 Kva			5.00	
	25-200 Kva			8.00	
	Over 200 Kva			10.00	
TOTAL AMOUNT DUE					
MINIMUM FEE/COMMERCIAL 45.00				MINIMUM FEE	35.00
					35.00

Close

CONTRACTORS NAME Paul John
 ADDRESS 60 Old Orchard Rd, Saco
 TELEPHONE 282-7154

MASTER LICENSE # 4927
 LIMITED LIC. # _____
 DEPT. OF BUILDINGS INSPECTION
 CITY OF PORTLAND, ME

SIGNATURE OF CONTRACTOR *Paul R. John*



Cash

White Copy - Office • Yellow Copy - Applicant

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	PORTLAND
Street	45 Clifford St.
Subdivision Lot #	

PROPERTY OWNERS NAME

Last: <u>Podro</u>	First: <u>LISA</u>
Applicant Name: <u>DAVID DARDANO</u>	
Mailing Address of Owner/Applicant (If Different)	

2003-8299

PORTLAND	8600	TOWN COPY	<input type="checkbox"/> If Double Fee Charged
Date Permit Issued: <u>08/26/03</u>	\$ <u>24.00</u>	L.P.I. # <u>360</u>	
Local Plumbing Inspector Signature			

389 6 013

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.

David Podro 8/26/03
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

- NEW PLUMBING
- RELOCATED PLUMBING

Type of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER - SPECIFY _____

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 02648

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	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.		Hosebibb / Sillcock	<u>2</u>	Bathtub (and Shower)
		Floor Drain	<u>1</u>	Shower (Separate)
OR		Urinal	<u>1</u>	Sink
		Drinking Fountain		Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste	<u>1</u>	Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
OR		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
TRANSFER FEE [\$6.00]		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

DEPT. OF BUILDING INSPECTION	Fixtures (Subtotal) Column 2
CITY OF PORTLAND	Fixtures (Subtotal) Column 1
	Total Fixtures
<u>24</u>	Fixture Fee
	Transfer Fee
<u>15</u>	Hook-Up & Relocation Fee
<u>24</u>	Permit Fee (Total)

OK 1422 TOWN COPY

24
10
34.00

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.

_____ **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

_____ **Footing/Building Location Inspection:** Prior to pouring concrete

_____ **Re-Bar Schedule Inspection:** Prior to pouring concrete

_____ **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.**

_____ **CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

Scott A. Pedro
Signature of applicant/designee

7/18/03
Date

Signature of Inspections Official

7/19/03
Date

CBL: 389-G-13 Building Permit #: 03-0853



Residential 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>45 Clapboard Rd. Portland ME 04103</u>		
Total Square Footage of Proposed Structure (Improvement) <u>~ 48 sq. ft</u>	Square Footage of Lot <u>9500 sq. ft</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>389 - 6 - 013 - 001</u>	Owner: <u>Lisa A. Pedro</u>	Telephone: <u>878-8986</u>
Lessee/Buyer's Name (If Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>Lisa A. Pedro</u> <u>Same as above</u>	Cost Of Work: \$ <u>5880</u> Fee: \$ <u>75</u>
Current Specific use: <u>unfinished ^{area of} basement</u>		
Proposed Specific use: <u>3/4 bath</u>		
Project description:		
Contractor's name, address & telephone: <u>David Dardano</u> <u>20 Shepherd Lane</u> <u>Portland ME 04103</u> <u>878-3922</u>		
Who should we contact when the permit is ready: <u>Lisa A. Pedro</u>		
Mailing address: <u>45 Clapboard Rd.</u> <u>Portland ME 04103</u>		Phone: <u>878-8986</u>

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

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections 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 of applicant: <u>Lisa A. Pedro</u>	Date: <u>7-16-03</u>
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$7.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

Permit Number: 030853

This is to certify that Pedro Lisa A /Dardano, David

has permission to add bathroom in basement

AT 45 Clapboard Rd

OBZ 389 G013001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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.

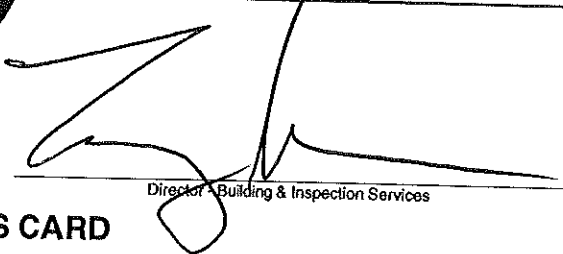
Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procured before this building or part thereof is latched or completely closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

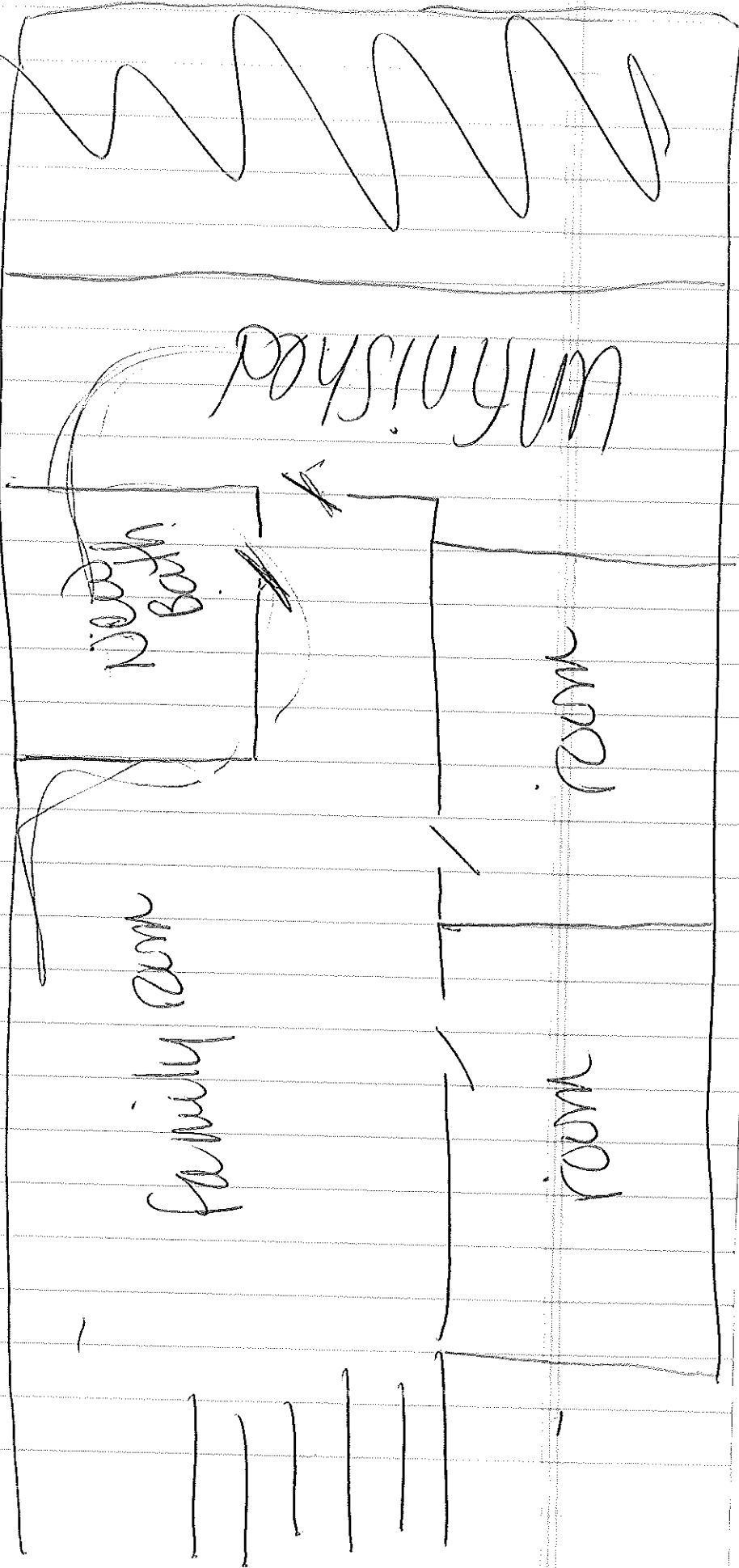
Fire Dept. **PERMIT ISSUED**
Health Dept. _____
Appeal Board **JUL 18 2003**
Other _____
Department Name



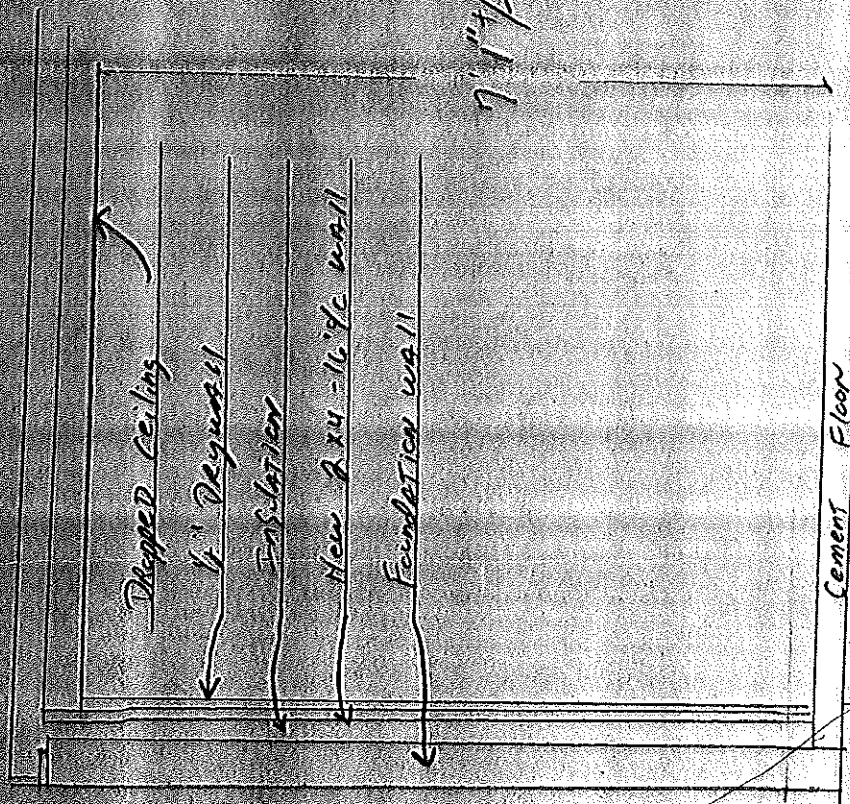
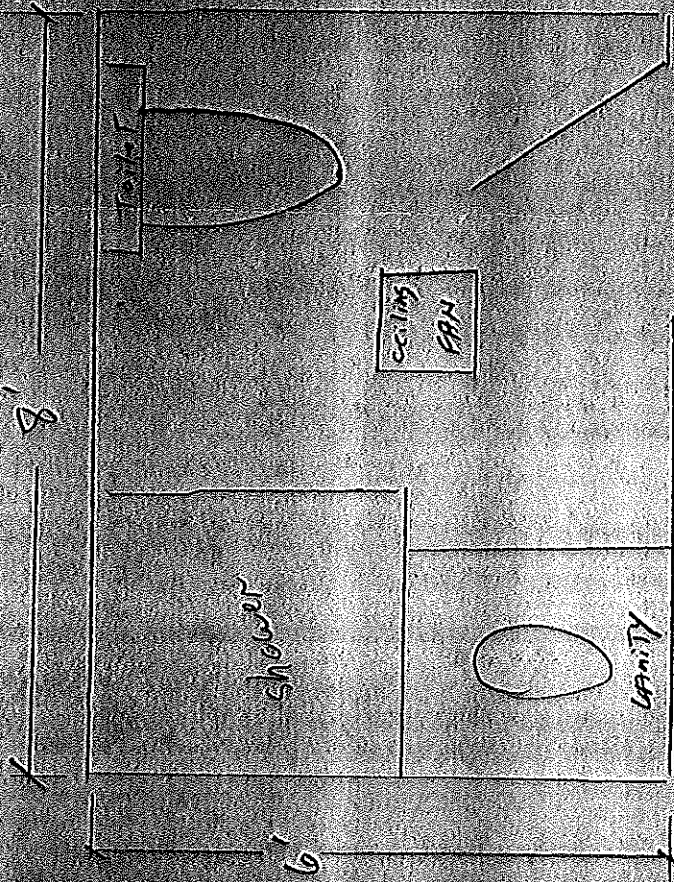
Director Building & Inspection Services

CITY OF PORTLAND

PENALTY FOR REMOVING THIS CARD



Build New Bath in Basement



1 Story ranch

OWNER: LISA PEDRO
 45 CLAPBOARD ST
 PORTLAND, ME 04103
 878-8989

CONTRACTOR:
 DAVID DARDANO
 20 SHEPHERD LANE
 PORTLAND, ME 04103
 878-3922

ELECTRICAL PERMIT

City of Portland, Me.



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:

Date 9/9/03
 Permit # 00034839
 CBL# 3896-013

LOCATION: 45 Clapboard Rd METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Luisa Pedro
 TENANT _____ PHONE # _____

				TOTAL EACH FEE		
OUTLETS		Receptacles	Switches	Smoke Detector	.20	.20
FIXTURES		Incandescent	Fluorescent	Strips	.20	.20
SERVICES		Overhead	Underground	TTL AMPS <800	15.00	
		Overhead	Underground	>800	25.00	
Temporary Service		Overhead	Underground	TTL AMPS	25.00	
METERS		(number of)			25.00	
MOTORS		(number of)			1.00	
RESID/COM		Electric units			2.00	2.00
HEATING		oil/gas units	Interior	Exterior	5.00	
					2.00	
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			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	4.00	
TRANSFORMER		0-25 Kva			5.00	
		25-200 Kva			8.00	
		Over 200 Kva			10.00	
				TOTAL AMOUNT DUE		
				MINIMUM FEE/COMMERCIAL 45.00	35.00	35.00

CONTRACTORS NAME Paul John
 ADDRESS 60 Old Orchard Rd, Saco
 TELEPHONE 282-7154

MASTER LICENSE # 4922
 LIMITED LIC. # _____
 DEPT. OF BUILDING INSPECTION
 CITY OF PORTLAND, ME

SIGNATURE OF CONTRACTOR Paul R. John

