Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read Application And Notes, If Any,

such information.

Attached	PERMIT	Permit Number: 071372
This is to certify thatSESTO LOUIS A & S	USAN JTS/Kind Plus, Paul Sau cau	PERMIT ISSUED
has permission toenclosed three season r	room ≈ 12*24 c ;.	
provided that the person or person of the provisions of the Statutes the construction, maintenance a this department.	ons, rm or production as epting of the ine and of the contained ances	this permit shall comply with a of the City Of Politication on file is
Apply to Public Works for street line and grade if nature of work requires	fication inspect in must be a nandwish permit on procult be re this ding or it thereo	A certificate of occupancy must be procured by owner before this build-

ed or

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. Appeal Board Other Department Name procured by owner before this building or part thereof is occupied.

PENALTY FOR REMOVING THIS CARD

IR NOTICE TO MEQUIRED.

osed-in,

389 Congress Street, 04101 Tel: (2	<u></u>	- (207) 874-871				007001	
Location of Construction:	Owner Name:	C A O CUCANINI ITO	Owner Address	-	Phone:		
111 CURTIS RD		S A & SUSAN N JTS	111 CURTIS		207-797-	2538	
Business Name:	Contractor Name		Contractor Add		Phone		
		Paul Sauvageau		d Lane Gorham	2078078		
Lessee/Buyer's Name Phone:			Permit Type:			Zone:	
			<u></u>			R-2	
Past Use: Proposed			Permit Fee:	Cost of Work	ì		
single family house with porch		nouse with enclosed			0.00 5		
	inree season ro	oom and 12*24 deck.	FIRE DEPT:	Approved	INSPECTION:	- ~	
			1	Denied	Use Group: スク	Type:	
•			}		+01-2	202	
			4	Ì	-the c	205	
Proposed Project Description: enclosed three season room and 12*24	l dools			j	a Hours	12/14/0	
enclosed three season room and 12 · 24	r deck.		Signature:	ACTIVITIES DISTI	Signature: Wife	19/1/0	
			PEDESTRIAN.			, ,	
			Action: A	pproved Appr	oved w/Conditions	Denied	
			Signature:		Date:		
Permit Taken By: Date Ap	plied For:	<u> </u>	Zor	ing Approval			
lmd 11/02			201	ing Approva	L		
This permit application does not p	reclude the	Special Zone or Revi	ews	Zoning Appeal	Historic Pre	servation	
Applicant(s) from meeting applications Federal Rules.		Shoreland	☐ Va	riance	Not in Distri	ict or Landma	
2. Building permits do not include p septic or electrical work.	lumbing,	Wetland	Пм	iscellaneous	Does Not Re	equire Review	
3. Building permits are void if work	is not started	Flood Zone	Conditional Use		Requires Re	Requires Review Approved	
within six (6) months of the date of							
False information may invalidate	a building	Subdivision	☐ Int	Interpretation			
permit and stop all work			1		Į.		
		Site Plan	□ A _I	proved	Approved w	/Conditions	
			ĺ				
		Maj 🔲 Minor 🦳 MM		nied	Denied		
		Crulwordihan	1		ten		
		Date: 11/1/07 /18	h Date:		Date:		
h pro i.							
l DEC 1.							
L'EU	1 1						
Chy Chia		CERTIFICATI					

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

12/14/01 Paul came in - started job needed of and
12/14/01 Paul came in - started job needed of and
got despirate. I explained the consequences, although the
got despirate appear well over the requirement.
Setbacks appear well over the requirement.

The did take Photo of sound - Should give to inspector.

Will call for close in Small place of inspector.

Will call for close in Small place of inspector.

Observe No issues seen - for M

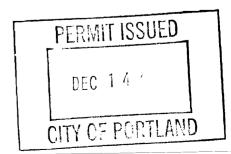
No other issues seen - for M

City of Portland, Maine - Buil	ding or Use Permit	Permit N	0:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: ((207) 874-	8716 07	7-1372 	11/02/2007	393 A00	07001
Location of Construction:	Owner Name:		Owner Add	ress:		Phone:	
111 CURTIS RD	SESTO LOUIS A & S	SUSAN N J	TS 111 CUR	TIS RD		207-797-2	538
Business Name:	Contractor Name:		Contractor	Address:		Phone	
	Kitchens Plus, Paul Sa	uvageau	60 Briarw	ood Lane	Gorham	(207) 807-	-8188
Lessee/Buyer's Name	Phone:		Permit Type	:			
			Addition	s - Dwelli	ngs		
Proposed Use:		' Pı	roposed Project D	escription:			
single family house - build 12' x 13', three season room on existing deck and add 12' x 24' deck. build 12' x 13', three season room on existing deck and add 12' x 24' deck. build 12' x 13', three season room on existing deck and add 12' x 24' deck.							
Dept: Zoning Status: A	1 14 0 14			ahada		. 11/1	- · · · · · ·
	pproved with Condition	is Revi e	ewer: Ann Ma	cnado	Approval Da		5/2007
Note:	••				••	Ok to Issue	:
	••				••	Ok to Issue	: 🗆
Note: 1) This permit is being approved on	the basis of plans submi	tted. Any o	deviations shall	require a	separate approval be	Ok to Issue fore starting	e: g that
Note: 1) This permit is being approved on work. 2) This property shall remain a single approval.	the basis of plans submi	itted. Any o	deviations shall	require a	separate approval be	Ok to Issue fore starting for review a	e: g that
Note: 1) This permit is being approved on work. 2) This property shall remain a single approval.	the basis of plans submi	itted. Any o	deviations shall se shall require	require a	separate approval be e permit application Approval Da	Ok to Issue fore starting for review a	g that add 4/2007
Note: 1) This permit is being approved on work. 2) This property shall remain a single approval. Dept: Building Status: A	the basis of plans submited family dwelling. Any of the pproved with Condition	change of u	deviations shall se shall require ewer: Jeanine	require a a separat Bourke	separate approval be permit application Approval Da	Ok to Issue fore starting for review a te: 12/1 Ok to Issue	g that 14/2007 2: ✓
Note: 1) This permit is being approved on work. 2) This property shall remain a single approval. Dept: Building Status: A Note: 1) Permit approved based on the plant.	the basis of plans submite family dwelling. Any of pproved with Condition as submitted and review any electrical, plumbing	change of under the change of under the change of under the change of under the change of the change	deviations shall see shall require ewer: Jeanine r/contractor, wi	require a a separat Bourke	separate approval be permit application Approval Da	Ok to Issue fore starting for review a te: 12/1 Ok to Issue	g that additional distribution of the distri

Comments:

11/14/2007-amachado: Left message for owner. Spoke to contractor, Paul at Kitchen Plus. Need a drawing of the existing structure with dimensions, and the addition. Plot plan that was submitted was not detailed enough.

12/14/2007-jmb: Spoke with Paul, contractor, I took the permit with Tammys notes and reviewed the information. They have been playing phone tag. Need to add sauna tube to reduce 24' span to 8' bearings and add another under the 3-2x8 for the floor and roof looad. Ok to issue with conditions



General Building Permit Application

The property owner owes real estate or partitle City. Property 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.

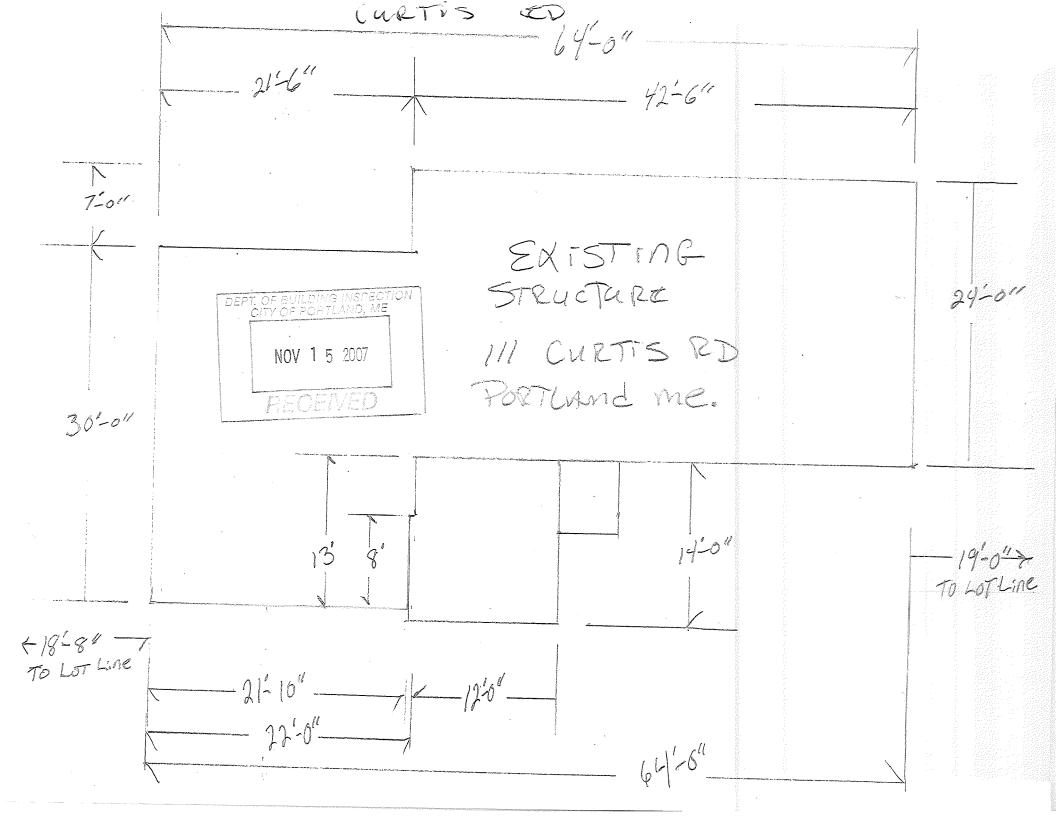
Location/Address of Construction: ///	Curtis Rd			
Total Square Footage of Proposed Structure/A				
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	* Telephone:		
Chart# Block# Lot#	Name Sue Sesta	797 2538		
373	Address III CURTIS RD			
	City, State & Zip Portland			
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$ 14935.00		
Lessee DBA (If Applicable) NOV 2 - 2007	Name	Work: \$ 1 1 4 5 5 . 00		
	Address	C of O Fee: \$		
J	City, State & Zip	Total Fee: \$		
_		Total Fee: \$		
Current legal use (i.e. single family)	5			
If vacant, what was the previous use?				
Proposed Specific use: Is property part of a subdivision?	If yes, please name	-		
l ==		,		
MARC EXISTING	orch into 3 scas	on Room		
4150 APD 12 x 24 De LK 7654Me				
Contractor's name: Kitchens	Tus PAUL SALVAG	EAU		
Address: 60 Bl: Alway &	La,			
City, State & Zip BORham M	4. 04038 T	elephone: 807-8188		
Who should we contact when the permit is read	ly: T	elephone:		
Mailing address:				
Diagram h '4 - 11 - f 4h - ' - f 4	.11 1 11 11 01 111			

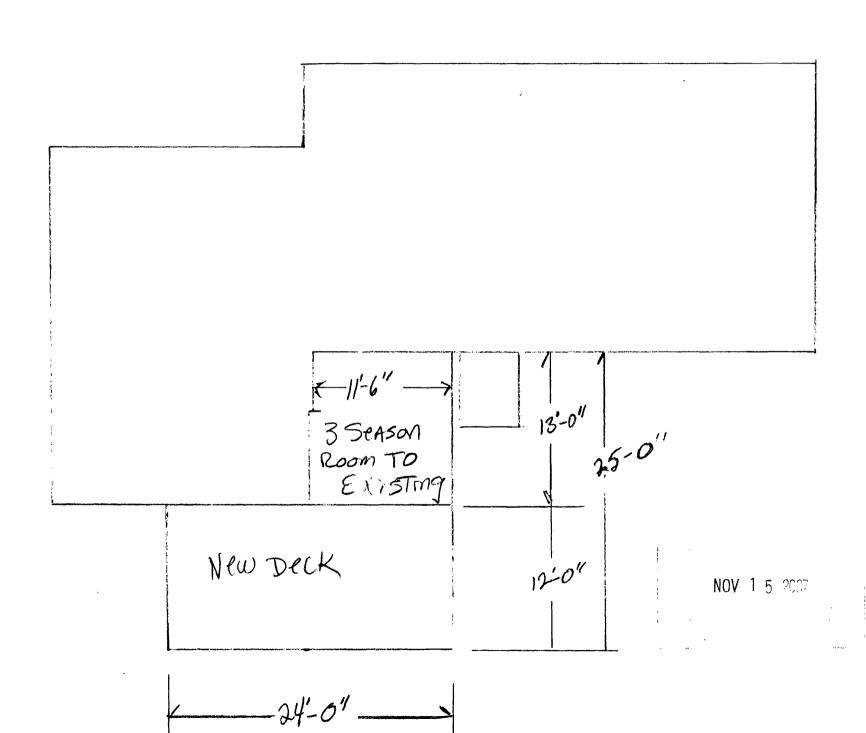
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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:	A	Date: 11/1/27
	Thi	s is not a permit; you may not commence ANY work until the permit is issue





To come Checky

SUR MADE AN ERROR ON

SURROOM SPAN OF JOIST AND

RAZIERS. THE ACUAL SPAN IS 13'-0",

TO ACOMODATE FOR This SPAN AN

ADDITIONAL CARRYING BERM WILL BE

ADDEL TO SUN ROOM Flood JOIST AT

6' FROM FX. JTMO STRUCTURE.

Also RAFTERS WILL have To be 2x16

TO ACCOMODATE SPAN.

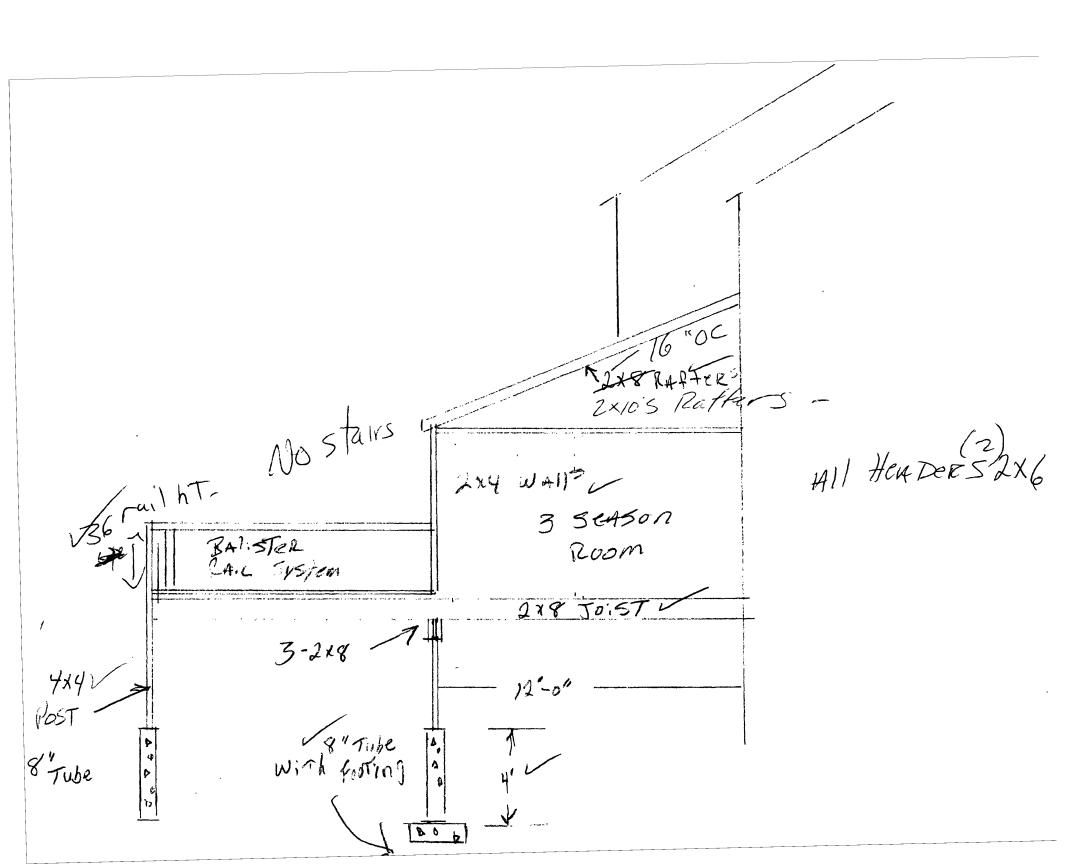
NOV 1 5 2007

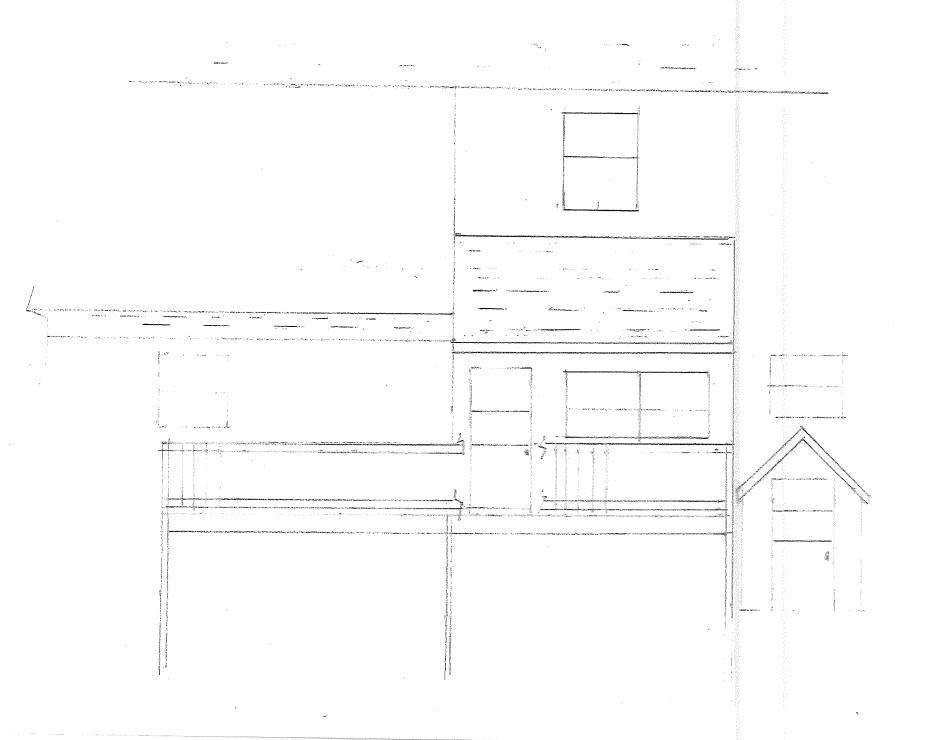
My Apologizes

Smearly

Paul Saux: -!!

Kitchens Plus





Main House Existing Deck GARAGE Added 2-2x8
W/New saunas <
W/Footings Span too large Add sauna 3(Exg) 12×24 2×8 50.57 New Deck 3-8" Tube weed to Add 2- 22107 WITH CLEAT Y FOOTINGS 4# for 8's pans

RAFIRS

2×8 @

16" O.C.

Mote: 2×10 13

HILLSIDE LUMBER INC. 781 COUNTY ROAD WESTBROOK ME 04092-1910

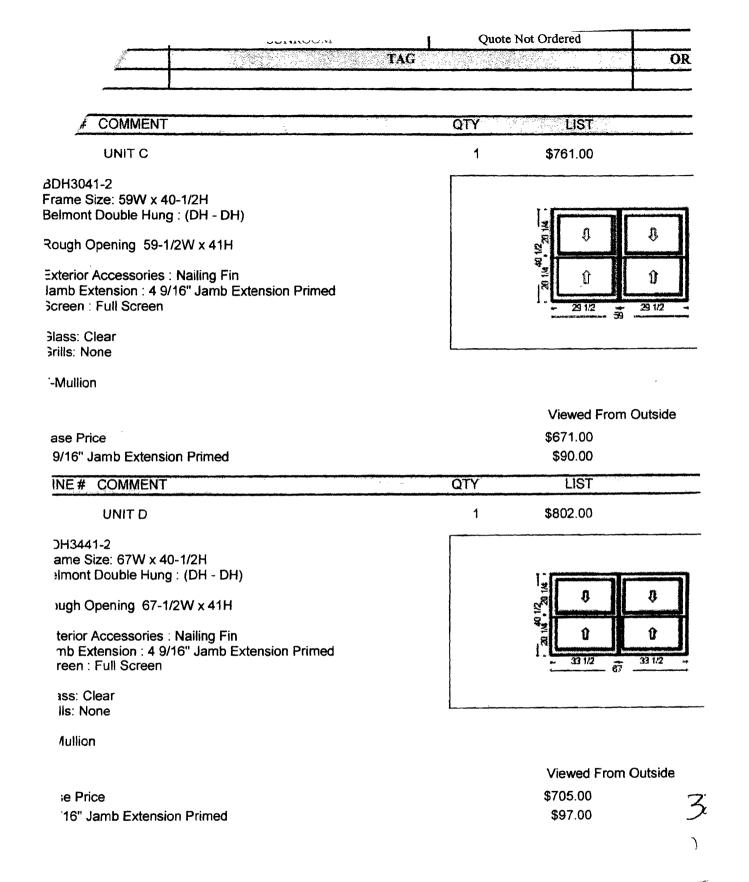
PHONE: (207) 839-2575

C	ust No	Job No	Purchase Order		Reference		Terms		Clerk	Date	Time
	8188					NET	10TH		RO	10/20/07	12:05
	Sold To	:		1	Ship To:						
	KITC	HEN'S PLUS		l		- 1	EXP. DATE:	12/19	/07	DOC#	627219
	60 B	RIARWOOD L	ANE	Į		1			TERM#551	****	******
						į				* EST	IMATE *
	GORH	AM	MB 04038				SLSPR:	NT WA	RREN THOMPSON T	J ****	******
•	(207) 807-8188		•			TAX :	001 H	ILLSIDE LUMBER	EST	. 627219

1 EA BS BROCKMAY SMITH MILLMORK THERMA TRU DOOR 2/s x 6/s SMOOTH STAR FIBERGIASS 6243 FRAME: 4-9/16 FRAME DEFRISE CASING: 908 BRICK MOULD PRY SILL: HIGH PERFORMANCE ADJ. DEADDOLT?: NO HINGES: ZINC DICHROM (BRASS) TAXABLE 180.00 /EA 380.00 /EA 380.00 /EA 380.00 /EA TAXABLE 180.00 /EA 380.00 /EA	LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION		UNITS	PRICE/PER	extension
2/8 x 6/6 SMOOTH STAR FIBERGLASS 8243 FRAME: 4-9/16 FRAME DEFENSE CASING: 908 BRICK MOULD PFJ SILL: HIGH PERFORMANCE ADJ. DEADBOLTF: NO HINGES: ZINC DICHROM (BRASS) TAXABLE 380.00 NON-TAXABLE 0.00	1		1	EA	BS	BROCKWAY SMITH MILLWORK		1	380.00 /EA	380.00
## ## ## ## ## ## ## ## ## ## ## ## ##	2					THERMA TRU DOOR				
FRAME: 4-9/16 FRAME DEFENSE CASINS: 908 BRICK HOULD PEU SILL: HIGH PEEPORMANCE ADJ. DEADBOLT?: NO HINGES: ZINC DICHROM (BRASS) TAXABLE 580.00 NON-TAXABLE 0.00	3		1			2/8 X 6/6 SMOOTH STAR FIBERGLASS				
CASING: 908 BRICK MOULD PFJ SILL: MICH PERFORMANCE ADJ. DEADBOLT: NO NINGES: ZINC DICHROM (BRASS) TAXABLE 380.00 NON-TAXABLE 0.00	4					#243				
SILL: NIGH PERPORMANCE ADJ. DEADSOLT?: NO NINGES: ZINC DICHROM (BRASS) TAXABLE 380.00 NON-TAXABLE 0.00	5					FRAME: 4-9/16 FRAME DEFENSE				
B DEADBOLT?: NO HINGES: ZINC DICHROM (ERASS) TAXABLE 380.00 NON-TAXABLE 0.00	6			1		CASING: 908 BRICK MOULD PFJ				
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TAXABLE 380.00 NON-TAXABLE 0.00	8					DEADBOLT?: NO		<u>'</u>		
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TAX AMOUNT 19.00 TOTAL AMOUNT 399.00

Received By



Æ.	QUULLIIAIL	Value of the second	
	SUNROOM	Quote Not Ordered	CHUCK
	TAG	F	ORDERED BY
			CHUCK

COMMENT QTY LIST EXTENDED

NEW UNIT A

1 \$495.00

\$495.00

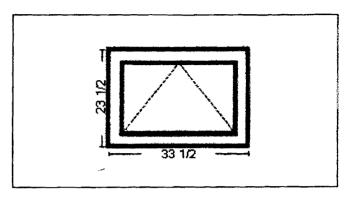
3AW3424

Frame Size: 33-1/2W x 23-1/2H New Belmont Casement: (AW)

Rough Opening 34W x 24H

Exterior Accessories : 1 1/2" Integral J-Trim Jamb Extension : 4 9/16" Jamb Extension Primed

Glass: Clear Grills: None



Viewed From Outside

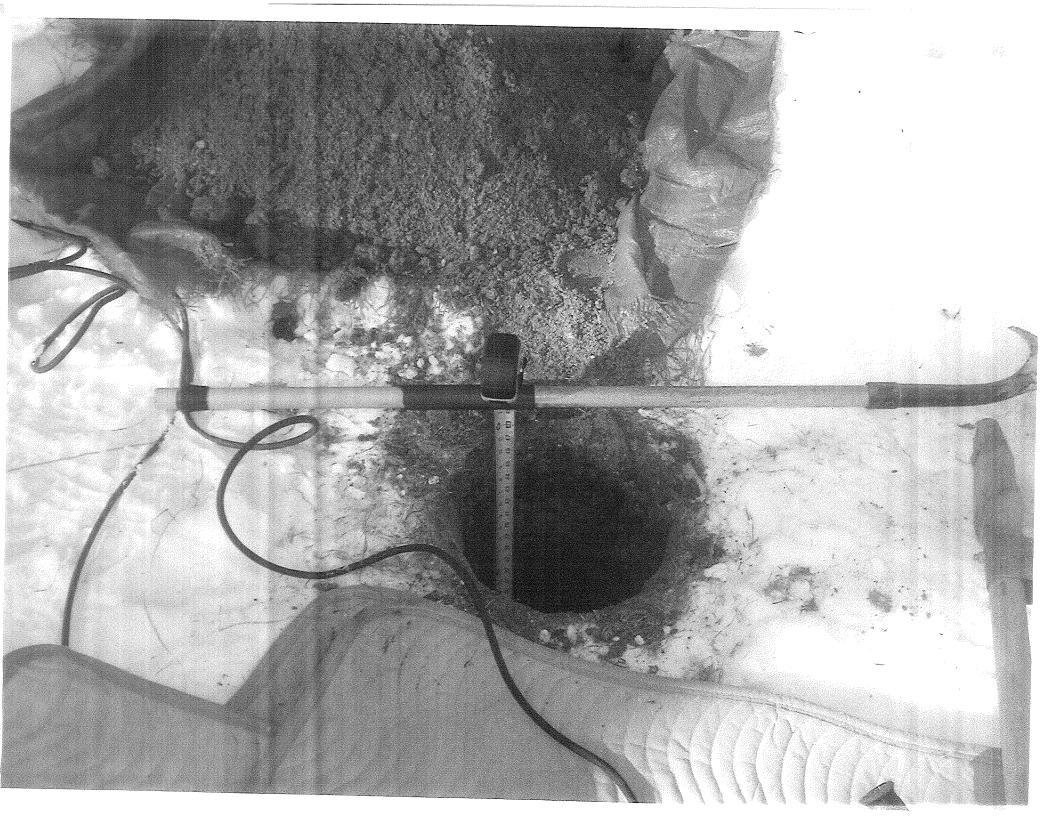
Base Price

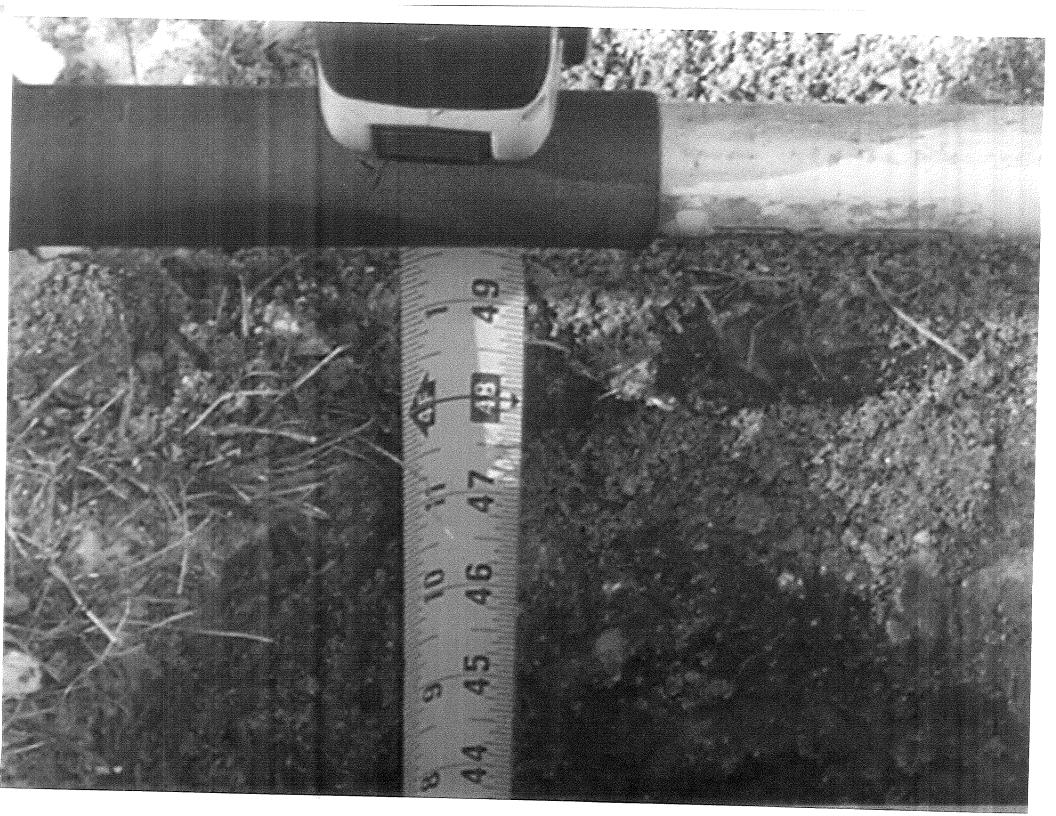
1 1/2" Integral J-Trim

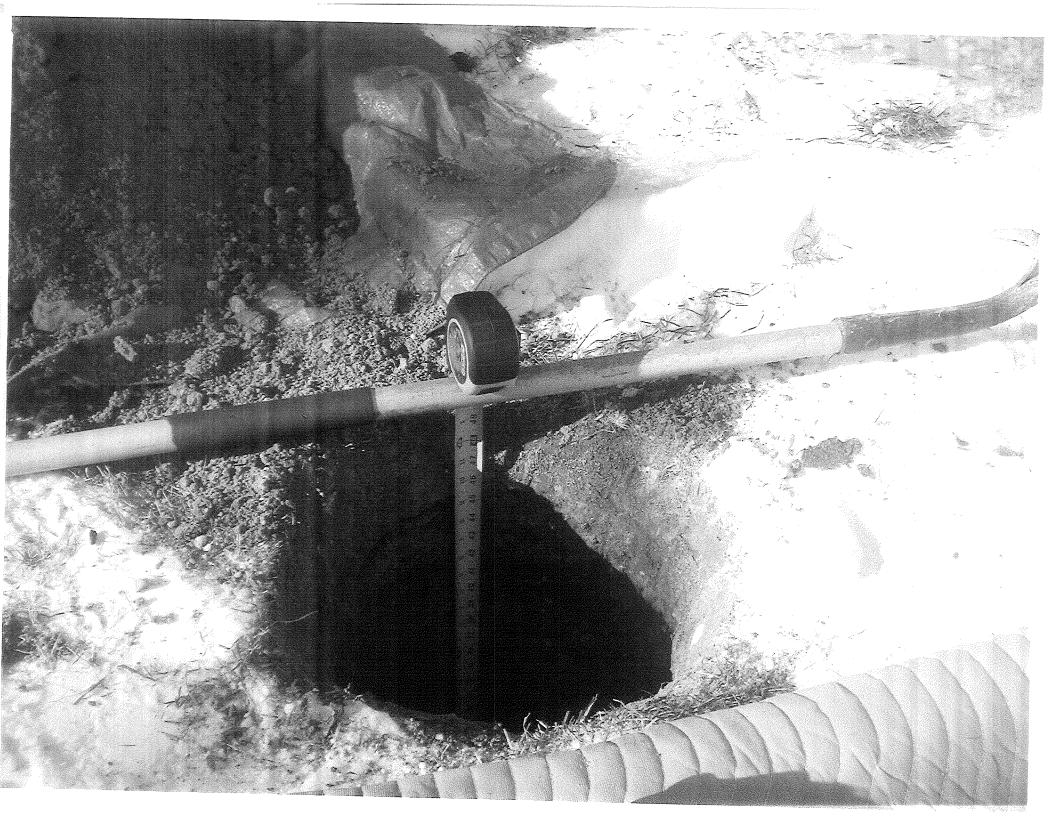
4 9/16" Jamb Extension Primed

\$406.00 \$37.00

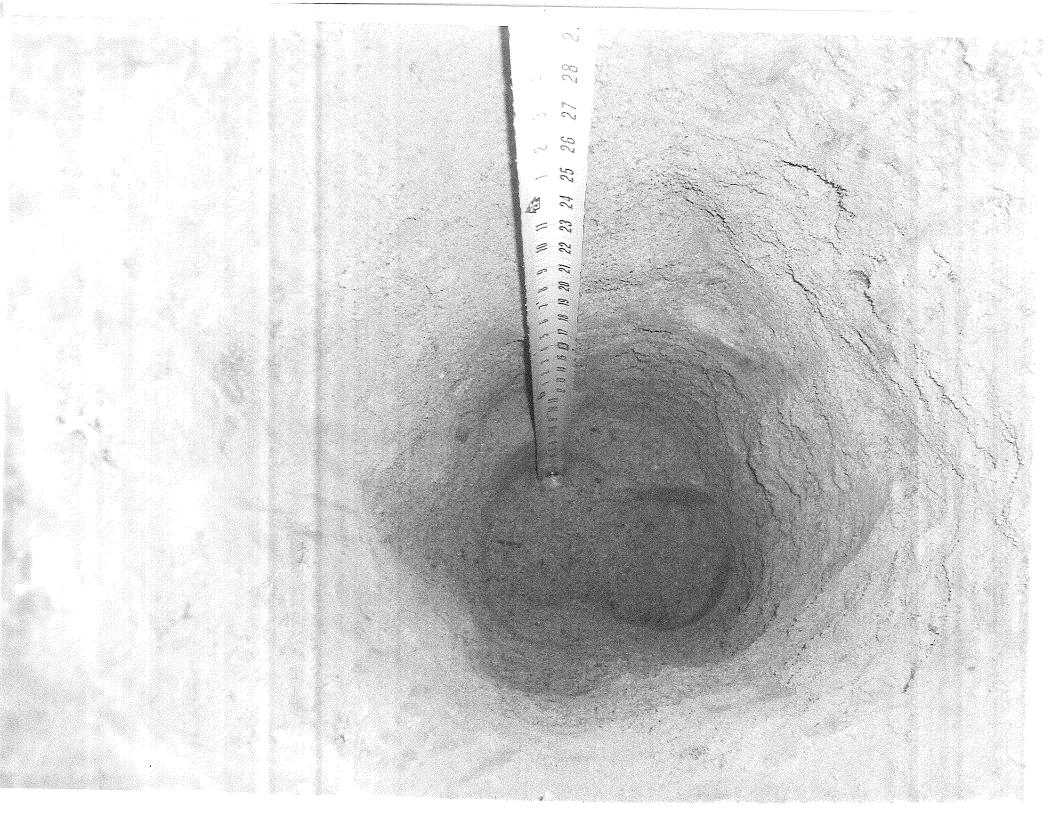
\$52.00

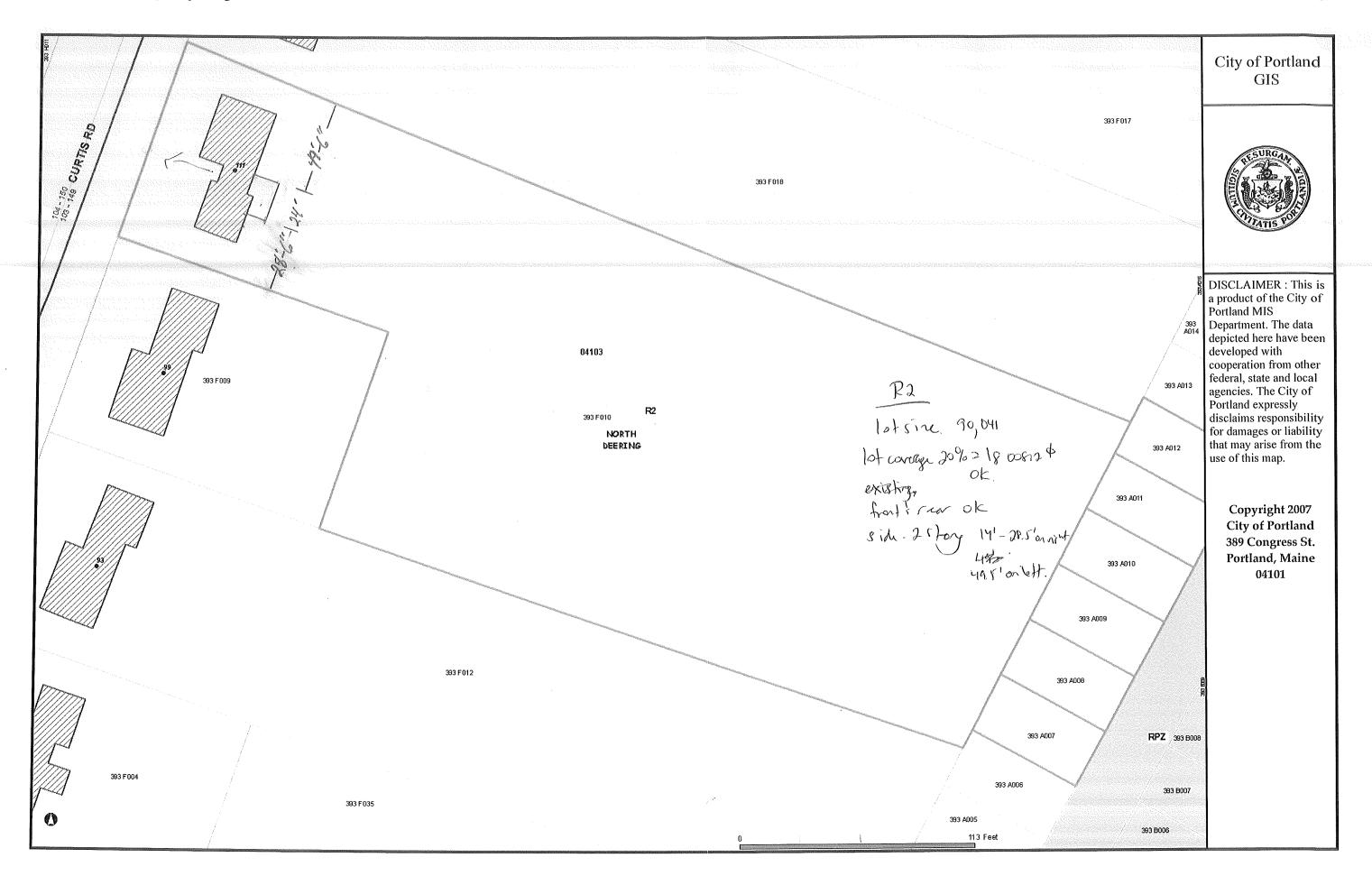












ELECTRICAL PERMITCity of Portland, Me.

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	12-18-07
Permit #	2007-4929
CBL#	753-A-7-

January III Cuche Pol	CBL#/ / T
LOCATION: /// CUSTIS Rd	METER MAKE & #
CMP ACCOUNT #	OWNER SUSAN Sesto
TENANT	PHONE # 807-8188

OUTLETS	6	Receptacles	U	Switches	Smoke Detector	TAL EACH FEE
		T. COPICO	-7	Owitories	Smoke Detector	.20
FIXTURES	4	Incandescent		Fluorescent	Strips	
-Alexander Addition	-			T Idorodoon	Ottipa	.20
SERVICES		Overhead		Underground	TTL AMPS <800	15.00
		Overhead		Underground	>800	25.00
					7800	25.00
Temporary Service		Overhead		Underground	TTL AMPS	25.00
a substantia de la composición de la c					TIL / IWI G	25.00
METERS		(number of)				1.00
MOTORS	-	(number of)				2.00
RESID/COM		Electric units				1.00
HEATING		oil/gas units		Interior	Exterior	5.00
APPLIANCES		Ranges		Cook Tops	Wall Ovens	2.00
		Insta-Hot		Water heaters	Fans	1 : : I
		Dryers		Disposals	Dishwasher	2.00
		Compactors		Spa	Washing Machine	2.00
		Others (denote)		Opa	vvdorning Macrime	
MISC. (number of)		Air Cond/win				2.00
		Air Cond/cent			Pools	3.00
		HVAC		EMS	Thermostat	5.00
		Signs			momostat	10.00
		Alarms/res				5.00
		Alarms/com				15.00
		Heavy Duty(CRKT)				2.00
		Circus/Carny				25.00
		Alterations				5.00
		Fire Repairs				15.00
		E Lights				1.00
	$\neg \uparrow$	E Generators				20.00
					Rank A	20.00
PANELS		Service		Remote	Main	4.00
TRANSFORMER	$\neg \uparrow$	0-25 Kva			THE T	5.00
		25-200 Kva				8.00
		Over 200 Kva				10.00
					TOTAL AMOUNT DUE	10.00
		MINIMUM FEE/COMMERCIAL 55.00			MINIMUM FEE 45.00	

ADDRESS 287 BOX

12 Chfutha

MASTER LIC. # 45

LIMITED LIC. #

TELEPHONE C-415-6094

SIGNATURE OF CONTRACTOR

White copy - Office

Yellow Copy - Applicant