

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

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED  
Permit Number: 0517085  
CITY OF PORTLAND

This is to certify that SIMMONS DEANE J & SHAWBYL JTS (David Dardano)  
has permission to install a bathroom in an existing space second  
AT 5 OVERSET RD 393 F022001

provided that the person or persons who perform or supervise the construction accepting this permit shall comply with all of the provisions of the Statutes of the State 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 leased or enclosed-in-4 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*[Signature]* 12/1/05  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 05-1718	Issue Date: <b>PERMIT ISSUED</b>	CBL: 393, F022001
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<b>Location of Construction:</b> 5 OVERSET RD	<b>Owner Name:</b> SIMMONS DEANE J & SHERYL J	<b>Owner Address:</b> 5 OVERSET RD	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> David Dardano	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	<b>one:</b>
<b>Past Use:</b> Single Family Home	<b>Proposed Use:</b> Single Family Home/ install a bathroom in an existing space on second flr.	<b>Permit Fee:</b> \$129.00	<b>Cost of Work:</b> \$12,000.00
<b>Proposed Project Description:</b> install a bathroom in an existing space on second flr.		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i> Signature	<b>INSPECTION:</b> Use Group <i>R-3</i> Type <i>IRC 2003</i> Signature
		<b>Action:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
		<b>Signature:</b>	<b>Date:</b>

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 11/28/2005	<b>Zoning Approval</b>		
1.	<b>Special Zone or Reviews</b>	<b>Zoning Appeal</b>	<b>Historic Preservation</b>	
2.	<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark	
3.	<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 type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions	
	Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied	
	Date: <i>12/1/05</i>	Date:	Date: <i>12/01/05</i>	

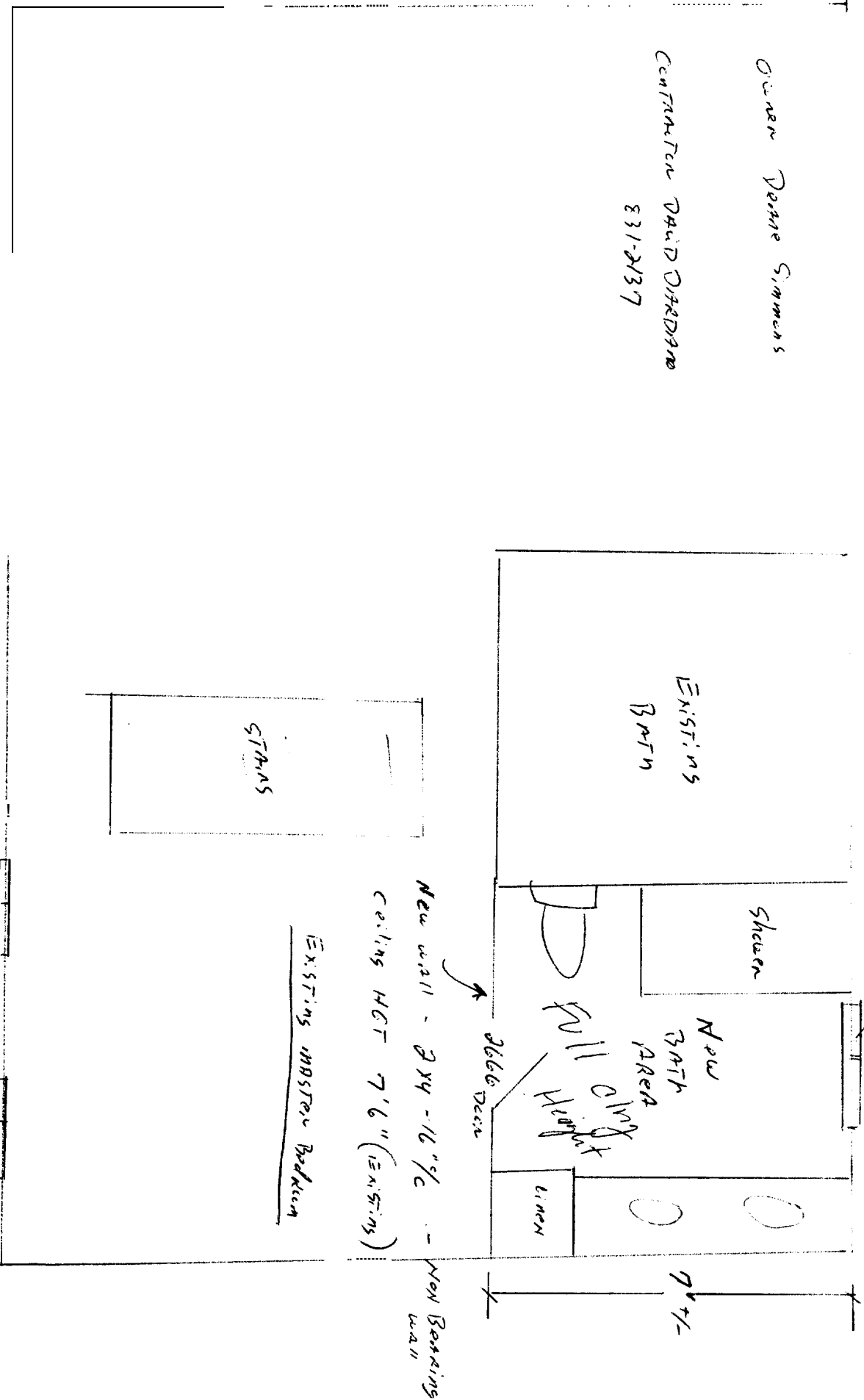
**CERTIFICATION**

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	

Owner Denise Simmons

Contractor DAVID O'HARDANE  
831-2137



5' Recessed  
22' x 22' x 5'  
Same opening  
Header  
2x2  
Frame

2nd Floor

(FRONT)

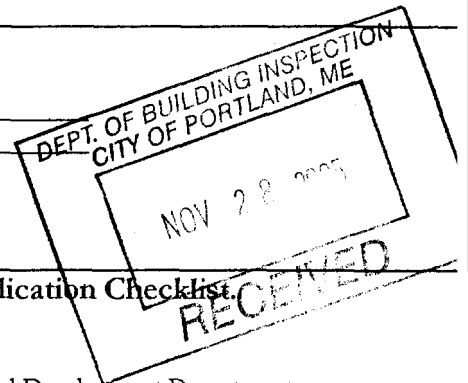
SOVERSOI Rd



# General 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.

Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# 393      F      22		Owner: DEANE + Sheryl SIMMONS	Telephone:
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone: DAVID DARDANO 115 HOPE AVE PORTLAND, ME E 31-2137	cost Of Work: \$ 12,000 - Fee: \$ _____ C of O Fee: \$ _____
Current Specific use: _____ Proposed Specific use: _____			
Project description: Add A bathroom next to existing on 2 <sup>nd</sup> Floor. Remove closet to make room for bath room. Approx 7'x10'			
Contractor's name, address & telephone:			
Who should we contact when the permit is ready: DAVID DARDANO		Phone: 831-2137	
Mailing address: 115 HOPE AVE. PORTLAND, ME 04103			



**Please submit all of the information outlined in the Commercial Application 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 visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), 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: <i>David Dardano</i>	Date: 11-28-05
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**This is not a permit; you may not commence ANY work until the permit is issued.**

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 05-1718	<b>Date Applied For:</b> 1112812005	<b>CBL:</b> 393 F022001
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<b>Location of Construction:</b> 5 OVERSET RD	<b>Owner Name:</b> SIMMONS DEANE J & SHERYL J	<b>Owner Address:</b> 5 OVERSET RD	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> David Dardano	<b>Contractor Address:</b> 115 Hope Ave Portland	<b>Phone</b> (207) 831-2137
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	

<b>Proposed Use:</b> Single Family Home/ install a bathroom in an exisiting space on second flr.	<b>Proposed Project Description:</b> install a bathroom in an exisiting space on second flr.
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Dept: Zoning      Status: Approved      Reviewer: Tammy Munson      Approval Date: 1210112005  
 Note:      **Ok to Issue:**

Dept: Building      Status: Approved      Reviewer: Tammy Munson      Approval Date: 1210112005  
 Note:      **Ok to Issue:**