

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED

Permit Number: 0911409

This is to certify that WALLACE DAVID R & SUSAN M JTS Inc City Architect
has permission to Interior alterations Make spare bedroom into master with make dining room into spare bedroom
AT 18 PINELOCH DR CL 396 C020001 DEC 16 2009

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 written permission procured before this building or part thereof is lathed or otherwise worked-in. 24 HOURS 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

Thomas M. Mackley 12/15/09
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: 09-1409	Issue Date:	CBL: 396 C020001
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Location of Construction: 18 PINELOCH DR	Owner Name: WALLACE DAVID R & SUSAN	Owner Address: 18 PINELOCH DR	Phone:
Business Name:	Contractor Name: Port City Architecture	Contractor Address: 65 Newbury Street Portland	Phone 2077619000
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-2

Past Use: Single Family Home	Proposed Use: Single Family Home - Interior alterations Make spare bedroom into master bath make dining room into spare bedroom	Permit Fee: \$50.00	Cost of Work: \$3,000.00	CEO District: 5
Proposed Project Description: Interior alterations Make spare bedroom into master bath make dining room into spare bedroom		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R3</i> Type: <i>SB</i> <i>IRC 2003</i> Signature: <i>dm 12/15/09</i>	
		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: Ldobson	Date Applied For: 12/11/2009	Zoning Approval		
<ol style="list-style-type: none">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.. PERMIT ISSUED DEC 16 2009		Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>all work within existing footprint</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>Ok w/land use</i> Date: <i>12/14/09</i> <i>ASB</i>	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: <i>ASB</i>

City of Portland

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

12-24-09 OK - rough in elec (plumb/AT) note: GFI protection on switches outside

1-27-10 OK - Final: (now installed 3 new CO DET.) shower) hgt ay

hgt ay

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-1409	Date Applied For: 12/11/2009	CBL: 396 C020001
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Location of Construction: 18 PINELOCH DR	Owner Name: WALLACE DAVID R & SUSAN	Owner Address: 18 PINELOCH DR	Phone:
Business Name:	Contractor Name: Port City Architecture	Contractor Address: 65 Newbury Street Portland	Phone (207) 761-9000
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home - Interior alterations Make spare bedroom into master bath make dining room into spare bedroom	Proposed Project Description: Interior alterations Make spare bedroom into master bath make dining room into spare bedroom
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 12/11/2009**Note:** **Ok to Issue:** ☒

- 1) Since this is all interior work, no plot plan was submitted, so there is no determination of the legal footprint of the building.
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 12/15/2009**Note:** **Ok to Issue:** ☒

- 1) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 2) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.
- 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

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.

A Pre-construction Meeting will take place upon receipt of your building permit.

 X Those building a new single family dwelling or adding a new bedroom to an existing dwelling shall install a CO detector in each area within or giving access to bedrooms. That detection must be powered by the electrical service in the building and battery

 X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

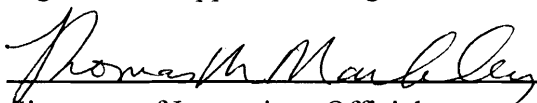
 X Final inspection required at completion of work.

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.

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee



Signature of Inspections Official

Date

12/15/09
Date

PERMIT ISSUED

DEC 16 2009

City of Portland



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.

Location/Address of Construction: <u>18 Pinebrook -</u>			
Total Square Footage of Proposed Structure/Area		Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>386</u> <u>C</u> <u>20</u>		Applicant * <u>must</u> be owner, Lessee or Buyer* Name <u>Dave & Sue Wallace</u> Address <u>18 Pinebrook Drive</u> City, State & Zip <u>Portland, Me 04103</u>	
Telephone: <u>878-2317</u>			
Lessee/DBA (If Applicable)		Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>3000</u> C of O Fee: \$ _____ Total Fee: \$ <u>50</u>
Current legal use (i.e. single family) <u>Single Family</u> Number of Residential Units _____			
If vacant, what was the previous use? _____			
Proposed Specific use: _____			
Is property part of a subdivision? _____ If yes, please name _____			
Project description: <u>Make spare bedroom into master bath + make Dining room into New spare Bedroom</u>			
Contractor's name: <u>Jamie Header Port City Carpentry</u>			
Address: <u>110 Rousing Brook Rd.</u>			
City, State & Zip <u>Portland, Me</u> <u>04103</u>		Telephone: <u>415-7011</u>	
Who should we contact when the permit is ready: <u>Jamie Header</u>		Telephone: <u>415-7011</u>	
Mailing address: <u>Same as above</u>			

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

RECEIVED

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.

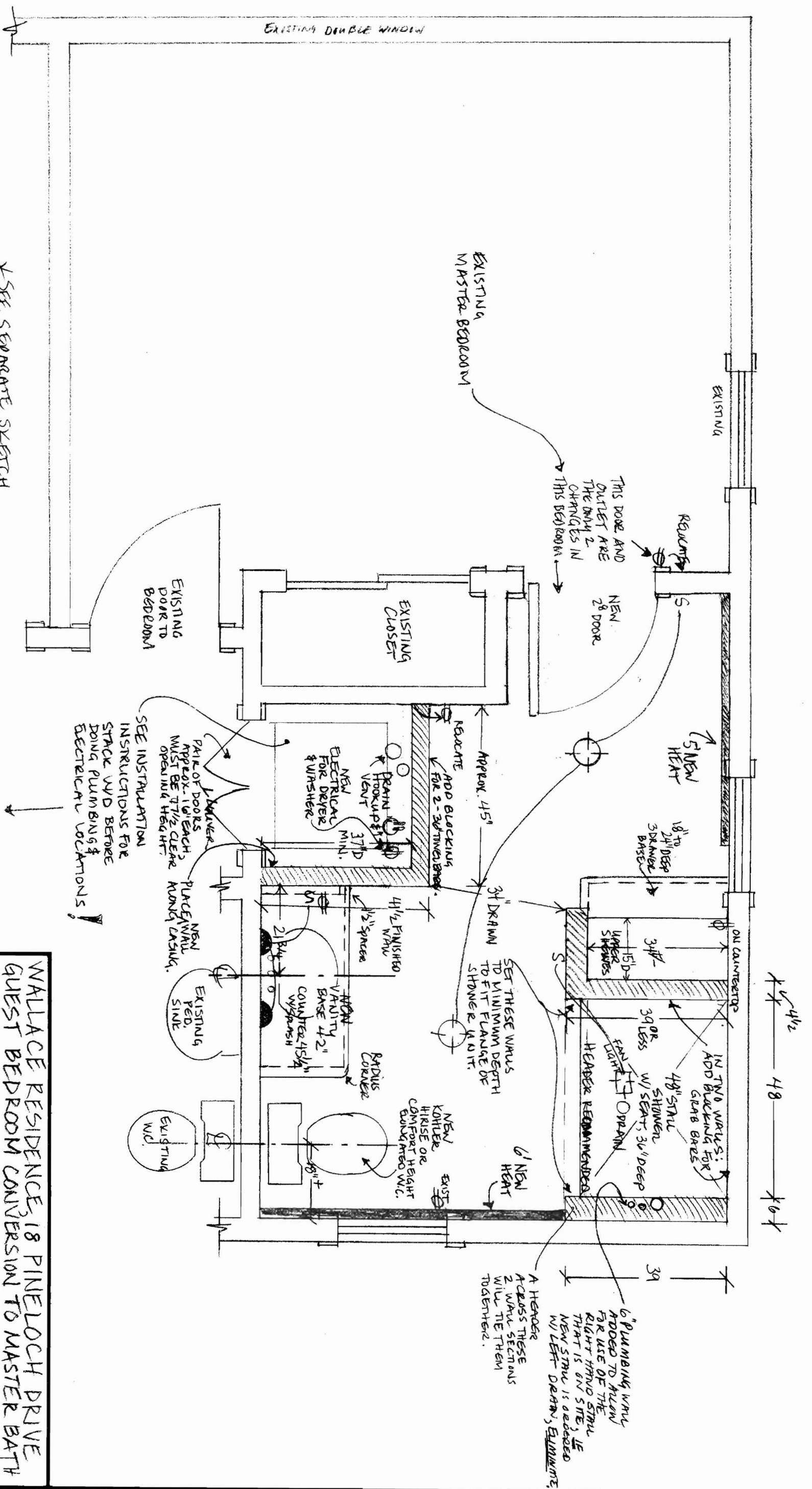
DEC 11 2009
Dept. of Building Inspections
City of Portland Maine

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorized me 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: [Signature]

Date: 12/11/09

This is not a permit; you may not commence ANY work until the permit is issued

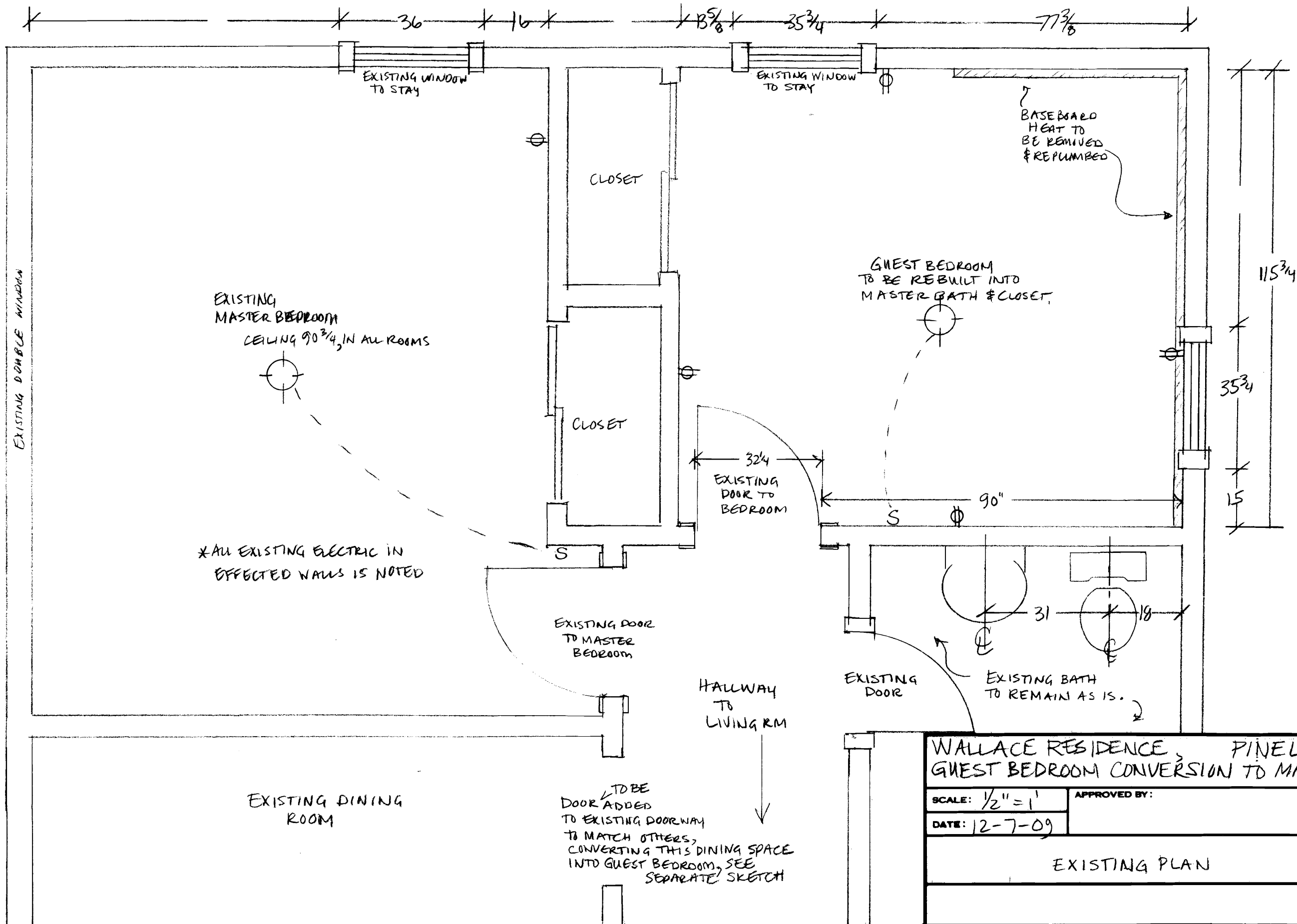


* SEE SEPARATE SKETCH FOR DINING ROOM CONVERSION TO BEDROOM *

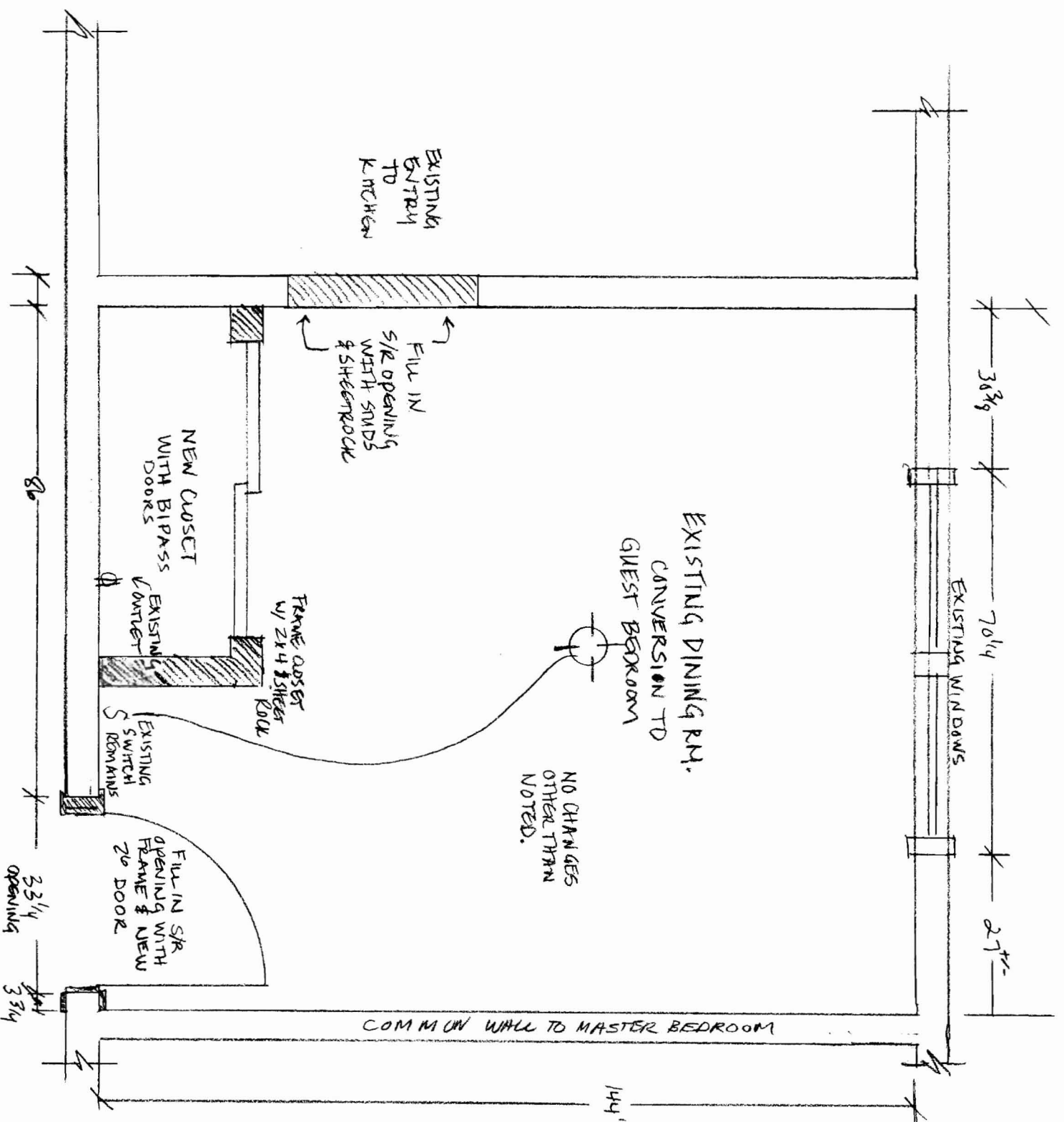
* FLOOR SHOULD BE STRENGTHENED UNDER W/D, ALSO A POSSIBLE FLOOR DRAIN SHOULD BE INSTALLED IN CASE OF OVERFLOW.

* WALLS BUILT AROUND W/D SHOULD HAVE INSULATION FOR SOUND BUFFERING

WALLACE RESIDENCE, 18 PINELOCH DRIVE			
GUEST BEDROOM CONVERSION TO MASTER BATH			
SCALE: 1/2" = 1'	APPROVED BY:		
DATE: 12-9-09	DRAWN BY: M. BEANE		
RENOVATION PLAN		SEE EXISTING PLAN ON SEPARATE SHEET DATED 12/7	DRAWING NUMBER



WALLACE RESIDENCE, PINELOCH DR. GUEST BEDROOM CONVERSION TO MASTER BATH		
SCALE: 1/2" = 1'	APPROVED BY:	DRAWN BY M. BEALE
DATE: 12-7-09		REVISED
EXISTING PLAN		
		DRAWING NUMBER



WALLACE RESIDENCE, PINELOCH DRIVE
DINING ROOM CONVERSION TO GUEST BEDROOM

SCALE: 1/2" = 1'
DATE: 12-10-09
APPROVED BY:
DRAWN BY M. Beale
REVISED

EXISTING PLAN SHOWING RENOVATION

DRAWING NUMBER



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

12-11 20 09

Received from Port City

Location of Work 18 Pine Street

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 50

Building (IL) _____ Plumbing (IS) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: B96-C-20

Check #: _____ Total Collected \$ 50

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: P. J.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy