

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

Location of Construction: 46 Wyoming Ave.		Owner: Pines of Portland		Phone:		Permit No: 010159
Owner Address: 426 Forest Ave. Portland, Me.		Lessee/Buyer's Name:		Phone:		
Contractor Name: see owner		Address: " "		Phone:		Zone: 2-3 CBL: 400-A-044 Zoning Approval: <i>[Signature]</i> 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"/> minor <input type="checkbox"/> min
Past Use: Amend permit # 001397		Proposed Use: Amend permit # 001397		COST OF WORK: \$ _____ FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		
Proposed Project Description: Change roof pitch (Gable end to face street. move location of gas fireplace, window modifications. Lot 25						
Permit Taken By: Chris		Date Applied For: 3/07/2001		CIN		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

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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: _____

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: **March 2, 2001** PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

PERMIT ISSUED WITH REQUIREMENTS
CEO DISTRICT
 2

FRONT BEDRM 24" x 33"

24 1/2 x 33

COMMENTS

- 3-12-01 Apoke with Greg McCormick - Asked to Fax left side Elevation Showing Foundation detail for daylight basement for measurement of height JB
- 3/13/01 Received Daylight Basement submission from Greg McCormick. Elevation Showing Foundation cut out for windows. Called Greg to verify Footing and wall goes 4" below grade at window cut-out. JB
- 3/27/01 Detail needed in wall beside refrigerator - wire next to front Door (2 impd) - needs Blocking on Box (4 gang) - need flashing around chimney - Simplex receptacle needed in upstairs bathroom - Egress windows in Bedroom (= 5.67 (24.75 x 33 = 144) need 5.7 cubic ft - This was largest window measured - Hangers needed near basement stairs - Hangers need in Basement various areas - *Note: steel beam 14" x 18" spanning 30' need specs and bearing requirement. ^{need} Plates protecting plumbing. JB
- 3/29/01 Sam inspected Beam support & w/Engineer's advice added support as indicated on plans - ok to close JB
- 6-11-01: Final for C of O Failed, Missing @ Deck stairs, 8 1/4" Riser @ Main Stairs to 2nd fl. Oak to Carpet, Elect @ Island; Pig. 116^w/TR
- 6/12/01 OK for C of O. Above.

CBL 400-A-044

PERMIT 0-1397

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	400 A 044

400 A 044

PORTLAND 7648 TOWN COPY

Date Permit Issued: 3/27/01 \$ 718.00 Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 01124

Last: Mulken First: Amy

Applicant Name: James Ceclano

Mailing Address of Owner/Applicant (If Different): 28 Ferry Hill Street

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: [Signature] Date: 3/27/01

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: [Signature] Date Approved: 6/13/01

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 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 _____	Plumbing To Be Installed By: 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 # <u>L7637</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
OR HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain	3	Wash Basin
		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
OR TRANSFER FEE [\$6.00]	Fixtures (Subtotal) Column 2		11	Fixtures (Subtotal) Column 1
	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		12	Fixtures (Subtotal) Column 2
			13	Total Fixtures
				Fixture Fee
				Transfer Fee
			Hook-Up & Relocation Fee	
			Permit Fee (Total)	

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 3/21/01 1363
 Permit # ~~1363~~
 CBL# 400-B-DIS
400-A-044

LOCATION: LOT 25 WYOMING ST METER MAKE & # _____
 CMP ACCOUNT # 46 Wyoming OWNER PINES OF PORTLAND-AMY MULKERIN
 TENANT _____ PHONE # 772-2127

							TOTAL EACH FEE		
OUTLETS	70	Receptacles	30	Switches	7	Smoke Detector	107	.20	21.40
FIXTURES	20	Incandescent	3	Fluorescent		Strips	23	.20	4.60
SERVICES		Overhead	✓	Underground		TTL AMPS <800		15.00	15.00
		Overhead		Underground		>800		25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS		(number of)					1	1.00	1.00
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES	1	Ranges		Cook Tops		Wall Ovens	1	2.00	2.00
		Insta-Hot		Water heaters	2	Fans	2	2.00	4.00 4-
	1	Dryers	1	Disposals	1	Dishwasher	3	2.00	12.00 6-
		Compactors		Spa	1	Washing Machine	1	2.00	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	
							MINIMUM FEE	35.00	46.00

INSPECTION: Will be ready MON 3-26 or will call _____

CONTRACTORS NAME DANIEL MERCHANT MASTER LIC. # 60014285
 ADDRESS 100 SABBADY PT RD WINDHAM 04062 LIMITED LIC. # _____
 TELEPHONE 838-5243

SIGNATURE OF CONTRACTOR Daniel G. Merchant

ELECTRICAL INSTALLATIONS—

INSPECTION: Service 4/24/01 by J Bourke
 Service called in _____
 Closing-in 3/27/01 by Jeanie Bourke

Permit Number _____
 Location _____
 Owner _____
 Date of Permit _____
 Final Inspection _____
 By Inspector _____

PROGRESS INSPECTIONS: _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____

DATE:	REMARKS:
3/27/01	Close in - outlet (receptacle) needed on wall beside refrigerator - crimped wire at front door switch - contractor fixed on site. J Bourke
4/19/01	underground lateral service - Failed - must adequately protect conductor cables from physical damage as they rise to meter box. Must either provide for expansion slip or looped cable at meter. Must provide caution tape. JB
4/24/01	underground service - may not black top or bring hardscape up to foundation. Riser in PVC not protected from damage if in walkway area. ok to call CMP hookup JB
6-11-01	Final inspection <u>OK</u>



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 46 Wyoming AVE. CBL: 400-A-044

Issued to Pines of Portland

Date of Issue June 12, 2001

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. 01-0159, 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

Entire

APPROVED OCCUPANCY

Single Family W/Attached Garage
Use Group R3
Type 5B
Boca 1999

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

6/12/01

(Date)

Elect-SKW

[Signature]
Inspector

[Signature]
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.