

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

Location of Construction: 115 Penn Ave lot 13		Owner: **** Pines of Portland ****		Phone: ****772-2127****	
Owner Address: ***		Lessee/Buyer's Name:		Phone:	
Contractor Name: SAA		Address:		Phone:	
Past Use: VACANT		Proposed Use: single family		COST OF WORK: \$ 0	
				PERMIT FEE: \$ 30.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group R-3 Type SA BOCA 94 Signature: <i>[Signature]</i>	
Proposed Project Description: amend permit 000625 style of home see plans		Signature:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date:	
Permit Taken By: K		Date Applied For: Sept 8 2000 K			

Permit No: **001038**

Permit Issued:
SEP 15 2000

Zone: **R-3** CBL: **405A-6-001**

Zoning Approval: *[Signature]*

Special Zone of Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 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

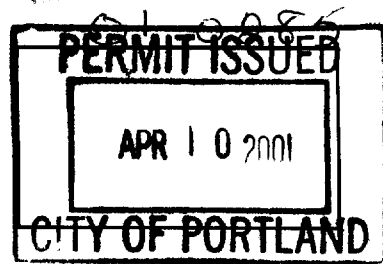
SIGNATURE OF APPLICANT	ADDRESS:	DATE: Sept 8 2000	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

PERMIT ISSUED WITH REQUIREMENTS



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

^{CALL} 405 AG 001 Area 2

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Penn Ave #115 Lot 13 / Vermont Ave. Use of Building Home Date 3/27/01

Name and address of owner of appliance The Pines of Portland
426 Forest Ave.

Installer's name and address Bill Rees Builders INSULC
515 Riverside Ind Parkway 04103 Telephone 878-6609

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name:

F.M.I.

U.L. Approved Yes No

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # _____
- Gas # PNT 3025
- Other _____

Type of Chimney:

Masonry Lined
Factory built _____

Metal
Factory Built U.L. Listing # _____

Direct Vent
Type Horiz. UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 150'

Number of Tanks one

Distance from Tank to Center of Flame _____ feet.

Approved

Approved with Conditions

Fire: 1847

See attached letter or requirement

Ele.: _____

Bldg.: Chris Coakley

\$30.00

Signature of Installer Bill Rees

405-A 6-001

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	Portland
Street Subdivision Lot #	115 Kennebec (Lot 13)
Last: <i>Muller</i>	First: <i>Amey</i>
Applicant Name:	James Cedeno
Mailing Address of Owner/Applicant (If Different)	28 Tenney Hill Street

#2

PORTLAND 7614 TOWN COPY

Date Permit Issued: 2/26/01

\$ _____

If Double Fee Charged

L.P.I. # _____

Local Plumbing Inspector Signature: *[Signature]*

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: 2-26-01

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: 2/26/01

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>L2637</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.	2	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain	3	Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			14	Total Fixtures
			6	Fixture Fee
			84	Transfer Fee
				Hook-Up & Relocation Fee
			84	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

ELECTRICAL PERMIT

City of Portland, Me.



8/F DCA-MC

Ⓢ

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 10-30-04
 Permit # 928
 CBL# 405A-G-001

LOCATION: LOT # 13 PENN AVE METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER The Pines of Portland
 TENANT THE PINES PHONE # _____

							TOTAL EACH FEE			
OUTLETS	21	Receptacles		Switches	25	Smoke Detector	7	.20	21.40	
FIXTURES	15	Incandescent		Fluorescent		Strips		.20	3.00	
SERVICES		Overhead	1	Underground		TTL AMPS	<800	15.00	15.00	
		Overhead		Underground			>800	25.00		
Temporary Service		Overhead		Underground		TTL AMPS		25.00		
								25.00		
METERS	1	(number of)						1.00	1.00	
MOTORS		(number of)						2.00		
RESID/COM		Electric units						1.00		
HEATING		oil/gas units		Interior		Exterior		5.00		
APPLIANCES	X	Ranges		Cook Tops		Wall Ovens		2.00	2.00	
		Insta-Hot		Water heaters		Fans		2.00		
	X	Dryers	X	Disposals	X	Dishwasher		2.00	10.00	
		Compactors	X	Pa	X	Washing Machine		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	1	Main		4.00	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		54.40

INSPECTION: Will be ready _____ or will call X

CONTRACTORS NAME Ronald Lauahon MASTER LIC. # MS6001474
 ADDRESS P.O. Box 1297 Scarborough 0407 LIMITED LIC. # _____
 TELEPHONE 883-5850 329-1030

SIGNATURE OF CONTRACTOR Ronald Lauahon



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 115 Penn Ave CBL; 405-A-G-001 (lot #13)

Issued to Pines of Portland

Date of Issue July 6, 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. 000625, 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/garage
Use Group R3
Type 5B
Boca 1999

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

7/14/01
(Date)

Inspector

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.