

Form # P 04

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

Please Read  
Application And  
Notes, If Any,  
Attached

BU **DB** ION

**PERMIT**

Permit Number: 1001960  
**PERMIT ISSUED**

This is to certify that LOMBARD JUDY L /William Knight

AUG - 6 2010

has permission to remove 1 wall to create Handicapped bathroom

AT 224 MAINE AVE

CP 406-B020001

City of Portland

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 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

Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**



# CITY OF PORTLAND, MAINE

Department of Building Inspections

## Original Receipt

8.3 2010

Received from

William Wight

Location of Work

224-Maine

Cost of Construction

\$

Building Fee:

Permit Fee

\$

Site Fee:

Certificate of Occupancy Fee:

Total:

30

Building (12)

Plumbing (15)

Electrical (12)

Site Plan (12)

Other

CBL:

Check #:

1342

Total Collected \$

30

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

Taken by:

T. 12

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

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

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

Permit No: 10-0950	Issue Date:	CBL: 406 B020001
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Location of Construction: 224 MAINE AVE	Owner Name: LOMBARD JUDY L	Owner Address: 224 MAINE AVE	Phone:
Business Name:	Contractor Name: William Wight	Contractor Address: 29 Jacobs Way Gorham	Phone: 2073183689
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-3

Past Use: Single Family Home	Proposed Use: Single Family Home - remove 1 wall to create Handi-cap bathroom	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 4
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB
<i>WA</i> Signature:	<i>TRC 2003</i> Signature:

Proposed Project Description:  
remove 1 wall to create Handi-cap bathroom

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: 08/05/2010	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p> <p style="font-size: 2em; font-weight: bold; text-align: center;">PERMIT ISSUED</p> <p style="font-size: 1.5em; text-align: center;">AUG - 6 2010</p> <p style="text-align: center;">City of Portland</p>	<p><b>Special Zone or Reviews</b></p> <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"/> MM <input type="checkbox"/> Date: <i>8/6/10</i> <i>APM</i>	<p><b>Zoning Appeal</b></p> <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:	<p><b>Historic Preservation</b></p> <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>APM</i>
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**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

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

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

<b>Permit No:</b> 10-0950	<b>Date Applied For:</b> 08/05/2010	<b>CBL:</b> 406 B020001
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<b>Location of Construction:</b> 224 MAINE AVE	<b>Owner Name:</b> LOMBARD JUDY L	<b>Owner Address:</b> 224 MAINE AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> William Wight	<b>Contractor Address:</b> 29 Jacobs Way Gorham	<b>Phone:</b> (207) 318-3689
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> Single Family Home - remove 1 wall to create Handi-cap bathroom	<b>Proposed Project Description:</b> remove 1 wall to create Handi-cap bathroom
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 08/06/2010
<b>Note:</b>			<b>Ok to Issue:</b> ✓
1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.			
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 08/06/2010
<b>Note:</b>			<b>Ok to Issue:</b> ✓
1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.			
2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

**PERMIT ISSUED**

AUG - 6 2010

City of Portland

## **BUILDING PERMIT INSPECTION PROCEDURES**

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

**or email: [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov)**

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months, if the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.**

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

  **X**   **Final inspection required at completion of work.**

**The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.**

**PERMIT ISSUED**

**AUG - 6 2010**

**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>224 Maine Ave Portland</u>		
Total Square Footage of Proposed Structure/Area <u>80 sq Ft</u>	Square Footage of Lot <u>N/A</u>	Number of Stories <u>N/A</u>
Tax Assessor's Chart, Block & Lot Chart# <u>Y06</u> Block# <u>B</u> Lot# <u>20</u>	Applicant *must be owner, Lessee or Buyer* Name <u>Judy Lombard</u> Address <u>224 Maine Ave</u> City, State & Zip <u>Portland ME 04102</u>	Telephone: <u>318 3689</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Bill Wight</u> Address <u>29 Jacobs Way</u> City, State & Zip <u>Gorham, ME 04038</u>	Cost Of Work: \$ <u>1,000<sup>00</sup></u> C of O Fee: \$ <u>NA</u> Total Fee: \$ <u>1,000<sup>00</sup></u>
Current legal use (i.e. <u>single family</u> ) _____ Number of Residential Units <u>1</u>		
If vacant, what was the previous use? <u>NA</u>		
Proposed Specific use: <u>NA</u>		
Is property part of a subdivision? <u>NA</u> If yes, please name _____		
Project description: <u>Remove one wall to be ADA compliant HANDICAP BATH</u>		
Contractor's name: <u>William Wight</u>		
Address: <u>29 Jacobs Way</u>		
City, State & Zip <u>Gorham, ME 04038</u>		Telephone: <u>318 3689</u>
Who should we contact when the permit is ready: <u>Bill Wight</u>		Telephone: <u>318 3689</u>
Mailing address: <u>29 Jacobs Way Gorham</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.

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](http://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.

RECEIVED  
AUG 10 2010  
INSPECTION DIVISION

Signature: William Wight Date: 8/2/10

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

**ATT: Lannie Dobson**

**RE: Bill Wight  
Wm Wight Carpentry**

**Pease find attached floor plan for Judy Lombard Job  
If you have any questions please call me at 207-318-3689  
Thank You Bill Wight**

Bill Wright Contractor  
318 3689  
Sudh Kambard Top

