DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that CHARLES E VN VET KELLEY

Located At 13 WELLSTONE UNIT

Job ID: 2012-03-3457-ALTCOMM

CBL: 423- A-005-013

has permission to Install 7 windows in unit 13

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SUDE OF THE PROPERTY PENALTY FOR REMOVING THIS SARD

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: 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 Inspections 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.

Required Inspections:

Final Inspection

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



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Acting Director of Planning and Urban Development Gregory Mitchell

Job ID: 2012-03-3457-ALTCOMM

Located At: 13 WELLSTONE

CBL: 423- A-005-013

UNIT

Conditions of Approval:

Zoning

1. This unit is a residential condominium in a building with five units. The use of the property is a PRUD with 72 residential condominiums. Any change of use shall require a separate permit application for review and approval.

Fire

Installation shall comply with City Code Chapter 10.

All construction shall comply with City Code Chapter 10.

City of Portland, Maine - Building or Use Permit Application

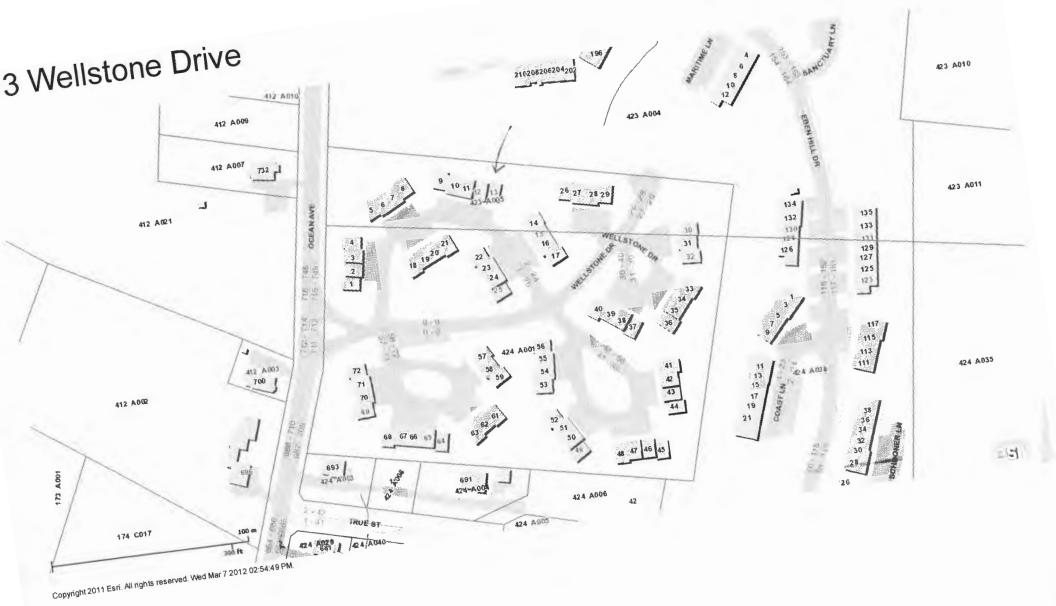
389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Job No: 2012-03-3457-ALTCOMM	Date Applied: 3/5/2012		CBL: 423- A-005-013			
Location of Construction: 13 WELLSTONE DRIVE	Owner Name: CHARLES E KELLEY VN VET		Owner Address: 695 OCEAN AVE, APT 13 PORTLAND,ME 04103		Phone:	
Business Name:	Contractor Name: Home Depot- Rick Fallone		Contractor Address: 345 Greenwood St Worcester MA 01606			Phone: (401) 935-2633
Lessee/Buyer's Name:	Phone:		Permit Type: BLDG - Building			Zone: R-5
Past Use: Proposed Use: Residential condo in five Same – install 7 repla		cement	Cost of Work: 4000.00			CEO District:
unit building – 72 Residential condos in the PRUD	windows		Fire Dept:	Approved W/ Denied N/A Lhne 3	(4/12)	Inspection: Use Group: R. Z. Type: 573 Signature:
Proposed Project Descriptio Install 7 replacement windows	Pedestrian Activities District (P.A.D.)					
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrial work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 		Zoning Approval				
		Special Zone or Reviews Shoreland Wetlands Flood Zone Subdivision Site Plan MajMinMM Date: Or or Reviews		Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied Date:	Not in Dis	1
nereby certify that I am the owner of e owner to make this application as e application is issued, I certify that the enforce the provision of the code(s)	his authorized agent and I agree the code official's authorized re	e to conform to	all applicable laws of	this jurisdiction. In addit	ion, if a permit for wo	rk described in
IGNATURE OF APPLICAN	IT Al	DDRESS		DAT	E	PHONE

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:	3 Welstone Dr					
Total Square Footage of Proposed Structure/A						
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer* Telephone:					
Chart# Block# Lot#	Name Ricktallone					
	Address 24 Suntset	7610500				
433 A005 013	· · · · · · · · · · · · · · · · · · ·	. 1010000				
-50	City, State & Zip MW, R. L CO 100					
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$ 3777-				
2 2 2012	Name Sally Kelley					
Mr. 05 2012	Address 13 Wellstone D	C of O Fee: \$				
,,,,,	City, State & Zip Rottland Me	Total Fee: \$				
- OE,	04103					
Current legal use (i.e. single family) If vacant, what was the previous use?						
Is property part of a subdivision?						
Project description:	1 Treplacement windows					
	No struct.					
Contractor's name: The HOME Depot						
Address: 345 Green woodst						
City, State & Zip WOTCESTE C Ma 01607 Telephone: 401352633						
Who should we contact when the permit is ready: Rrkallone Telephone: 4019352133						
Mailing address: 24 Suncise Dr Prov R.I. 02918						
Please submit all of the information outlined on the applicable Checklist. Failure to						
do so will result in the	automatic denial of your permit.					
Circ C II	C. II	language Danastonant				
in order to be sure the City fully understands the nay request additional information prior to the is:						
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.						
hereby certify that I am the Owner of record of the make I have been authorized by the owner to make this						
aws of this jurisdiction. In addition, if a permit for wo	rk described in this application is issued, I certify	that the Code Official's				
authorized representative shall have the authority to en provisions of the codes applicable to this permit.	iter all areas covered by this permit at any reasona	ble hour to enforce the				
[] 1	1					
Signature: Date: 2/11/12						
This is not a permit; you may not commence ANY work until the permit is issue						
F, ,						



PLEASE READ THIS

Branch Name: Boston Date:	Sold, Furnished and Installed by: THD At-Home Services, Inc. d/b/a The Home Deput At-Home Services 345A Greenwood Street, Unit 2, Worcester, MA 01607						
Branch Number: 31	Toll Free (800) 657-5182; Fax (508) 756-8823 Federal ID #75-2698460; MF. Lic # C 02439; R1 Cunt. Lic# 16427 CT Lic #1HC.0565522; MA Home Improvement Contractor Reg. # (26893						
Installation Address: 13 Wellstehe I							
Purchaser(s):	Work Phone: Home Phone: Cell Phone:						
Sally Kelley [1 [207] 76+0560 []						
	1 1 ()						
Home Address:	(The State of the						
(If different from installation Address) City State Zig E-mail Address (to receive project communications and Home Deput updates): 1 DO NOT wish to receive any marketing emails from The Home Deput							
Project Information: Undersigned ("Customer"), the owners of the property located at the above installation address, agrees to buy, and THD At-Home Services, Inc. ("The Home Depot") agrees to furnish, deliver and arrange for the installation ("Installation") of all materials described on the below and on the referenced Spec Sheet(s), all of which are incorporated into this Contract by this reference, along with any applicable State Supplement and Payment Summary attached hereto and any Change Orders (collectively, "Contract"):							
Job #: (Internal Melecture) Profing Siding Windows It	Spec Sheet(s) #: Project Amount						
6018793 Gutters / Covers Entry Doors	- 467625 3777						
Roofing Siding Windows In	ssubation.						
Roofing Siding Windows I	sulation						
Gutters / Covers Dentry Doors Dentry Dentry Doors Dentry Dentry Doors Dentry	sulation \$						
Gutters / Covers Entry Doors	(this coutract.						
Make Purchasess may not deposit more than one-third of the Cou	LODAL CONUME A MOUNT 3						
Customer agrees that, immediately upon completion of the work for each Product, Customer will execute a Completion Certificate (one for each Product as defined by an individual Spec Sheet) and pay any balance due. As applicable, each Customer under this Contract agrees to be jointly and severally obligated and liable hereunder. The Home Depot reserves the right to issue a Change Order or terminate this Contract or any individual Product(s) included herein, at							
its discretion, if The Home Depot or its authorized service provider determines that it cannot perform its obligations due to a structural problem with the home, environmental hazards such as mold, asbestos or lead paint, other safety concerns, pricing errors or because work required to complete the job was not included in the Contract.							
	, included as part of this Contract, sels forth the total						
Contract amount and payments required for the deposits and	E TO CUSTOMER						
You are entitled to a completely filled-in copy of the Contract at the time you sign. Do not sign a Completion Certificate (note: there is one Completion Certificate for each listed Product as defined by individual Spec Sheets) before work on that Product is complete.							
In the event of termination of this Contract, Customer agrees to pay The Home Depot the costs of materials, labor, expenses and services provided by The Home Depot or Authorized Service Provider through the date of termination, plus any other amounts set forth in this Agreement or allowed under applicable law. THE HOME DEPOT MAY WITHHOLD AMOUNTS OWED TO THE HOME DEPOT FROM THE DEPOSIT PAYMENT OR OTHER PAYMENTS MADE, WITHOUT LIMITING THE HOME DEPOT'S OTHER REMEDIES FOR RECOVERY OF SUCH AMOUNTS.							
Acceptance and Authorization: Customer agrees and understands that this Agreement is the entire agreement between Customer and The Home Depot with regard to the Products and Installation services and supersedes all prior discussions and agreements, either oral or written, relating to said Products and Installation. This Agreement cannot be assigned or amended except by a writing signed by Customer and The Home Depot. Customer acknowledges and agrees that Customer has read, understands, voluntarily accepts the terms of and has received a copy of this Agreement.							
Accepted by:	Submitted by:						
X Specification 1/18/17 Customer's Signature Date	X Sales Consultant's Signature Date						
X . Customer's Signature Date	Telephone No. (207) 7/2 - 278/						
CANCELLATION: CUSTOMER MAY CANCEL TO AGREEMENT WITHOUT PENALTY OR OBLIGATION BY DELIVERING WRITTEN NOTICE TO THE HOP DEPOT BY MIDNIGHT ON THE THIRD BUSINE	ON ME						
STATE SUPPLEMENT ATTACHED HERE							
CONTAINS A FORM TO USE IF ONE SPECIFICALLY PRESCRIBED BY LAW CUSTOMER'S STATE. NOTICE: ADDITIONAL TERMS AND CONDITIONS ARE:	IS IN STATED ON THE REVERSE SIDE AND ARE PART OF THIS CONTRACT						

WINDOW SPECIFICATION SHEET - Spec. Sheet #: 467625

Sob #: 6018793 Consultant: Ros Kierstee 2 Customer: 51/4 /61/14 100 # 60/8793 2/2 Hinge Locations Labor Existing Window Grids From outside, Measurements areduct Options Δ Options Left to Right Bays, Bows. AHS Carinta, 1 Pri, Rough Opening # of bars e of bars Location Color use L. A pr S Depot Glass Misc tems (ypr (F. S. GBG) Hardware Cade For doors use Screens "S" = stationary or Mul! "X" = operating Style W-aps Home Code (Y/N) St yle Code | Series Code Foor 411 DA DH DA 6500 DH 2077986414 Bez Mall to G 88 SERVICE 2410_SPECIAL SPECIAL CONSIDERATIONS: WH volce qmW Interior Casing Type Bay or Bow window : Seatboard Mater alsydryl only-Birth or Oak Bay Projection Angle (30 or 45 3) Bay Flanker Type (O-1, SH or Cent :: Top of window to toffic (inches) 07:28 I have reviewed and agree with all the job specifications above one the If thed to soff t. color at soffit metallal Special Ferms and Conditions on the wack of the yellow (Customer) copy. Construct Roof (Yes or No) Garden Window: 2012-02-10 Sestopaid Visitefativiryl only-White Plonite, 3lich or Oak Wall Thickness, (niches) Additional She f (Yes or No.)

1. There is no generate that new at ingles will result we sking small

#24-M \$47-10