

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING PERMIT

PERMIT

Permit Number: 091104

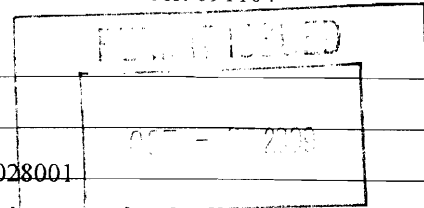
Please Read
Application And
Notes, If Any,
Attached

This is to certify that KING TERESA A & BRUCE R /Timothy Williams

has permission to Convert Sunroom into Full Bath

AT 16 RICHMOND ST

CB# 431 C028001



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 red-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

Thomas M. Muelley 10/10/09
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

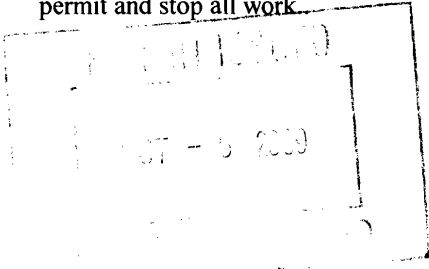
Permit No: 09-1104	Issue Date:	CBL: 431 C028001
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Location of Construction: 16 RICHMOND ST	Owner Name: KING TERESA A & BRUCE R JT	Owner Address: 16 RICHMOND ST	Phone:
Business Name:	Contractor Name: Timothy Higgins	Contractor Address: 242 Veranda St Portland	Phone 2078385870
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R5

Past Use: Single Family Home	Proposed Use: Single Family Home = Convert Sunroom into Full Bath area	Permit Fee: \$120.00	Cost of Work: \$9,800.00	CEO District: 4
Proposed Project Description: Convert Sunroom into Full Bath area		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB DEC 2003	
		Signature:	Signature: Jm 10/6/09	
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: 10/06/2009	Zoning Approval		
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- 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.



Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input checked="" type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: Jm	Date:	Date: Jm

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

10/28/09 checked plumbing / Framing / electrical
for clean - test on this ok - no issues seen
OK to close all on
John M

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 **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.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

X J. J. Cable
Signature of Applicant/Designee

Oct 8/09
Date

Thomas H. MacAlu
Signature of Inspections Official

10/6/09
Date

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-1104	Date Applied For: 10/06/2009	CBL: 431 C028001
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Location of Construction: 16 RICHMOND ST	Owner Name: KING TERESA A & BRUCE R JTS	Owner Address: 16 RICHMOND ST	Phone:
Business Name:	Contractor Name: Timothy Higgins	Contractor Address: 242 Veranda St Portland	Phone (207) 838-5870
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family Home = Convert Sunroom into Full Bath area	Proposed Project Description: Convert Sunroom into Full Bath area
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 10/06/2009

Note: **Ok to Issue:**

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 10/06/2009

Note: **Ok to Issue:**

- 1) 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.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



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>16 Richmond St. Portland</u>		
Total Square Footage of Proposed Structure/Area <u>81 sq ft</u>	Square Footage of Lot <u>5000 sq ft</u>	Number of Stories <u>2</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>431 C 28</u>	Applicant "must be owner, Lessee or Buyer" Name <u>Bruce King</u> Address <u>16 Richmond St</u> City, State & Zip <u>Port. ME 04103</u>	Telephone: <u>838-5870</u>
Lessee/DBA (If Applicable) <u>N/A</u>	Owner (if different from Applicant) Name <u>N/A</u> Address City, State & Zip	Cost Of Work: \$ <u>9800</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>Single Family</u> Number of Residential Units <u>1</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>Bath Area</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>convert sun room into full bath area</u>		
Contractor's name: <u>Timothy A Higgins</u> Address: <u>242 Vermont St</u> City, State & Zip: <u>Portland, ME</u> Telephone: <u>838-5870</u> Who should we contact when the permit is ready: <u>Timothy Higgins</u> Telephone: <u>838-5870</u> Mailing address: _____		

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, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

RECEIVED

OCT 6 2009

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 understand that in order to obtain a permit to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I understand that the City 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: Timothy Higgins

Date: Oct 5 09

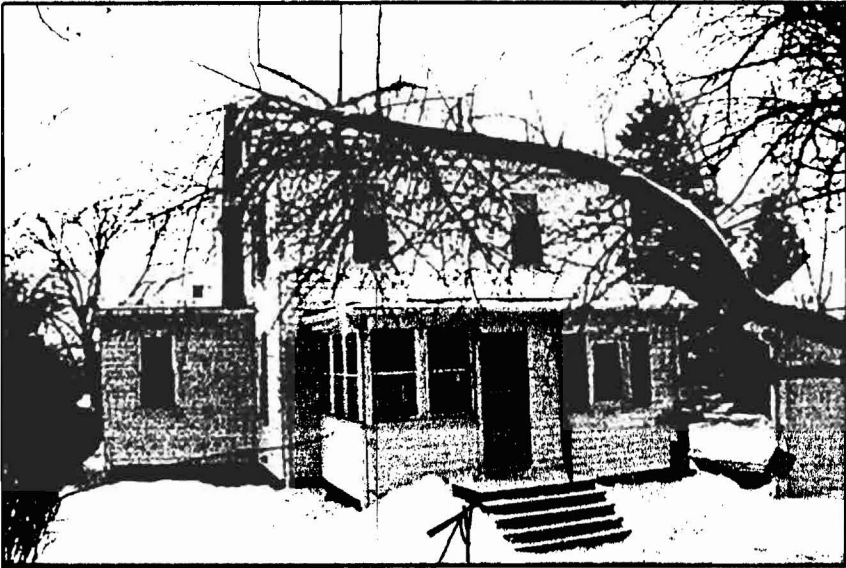
This is not a permit; you may not commence ANY work until the permit is issue



Location
View
Site
Quality
Age

Suburb/Avg.
Neighborhood
11 acres
Avg-Good
74 years

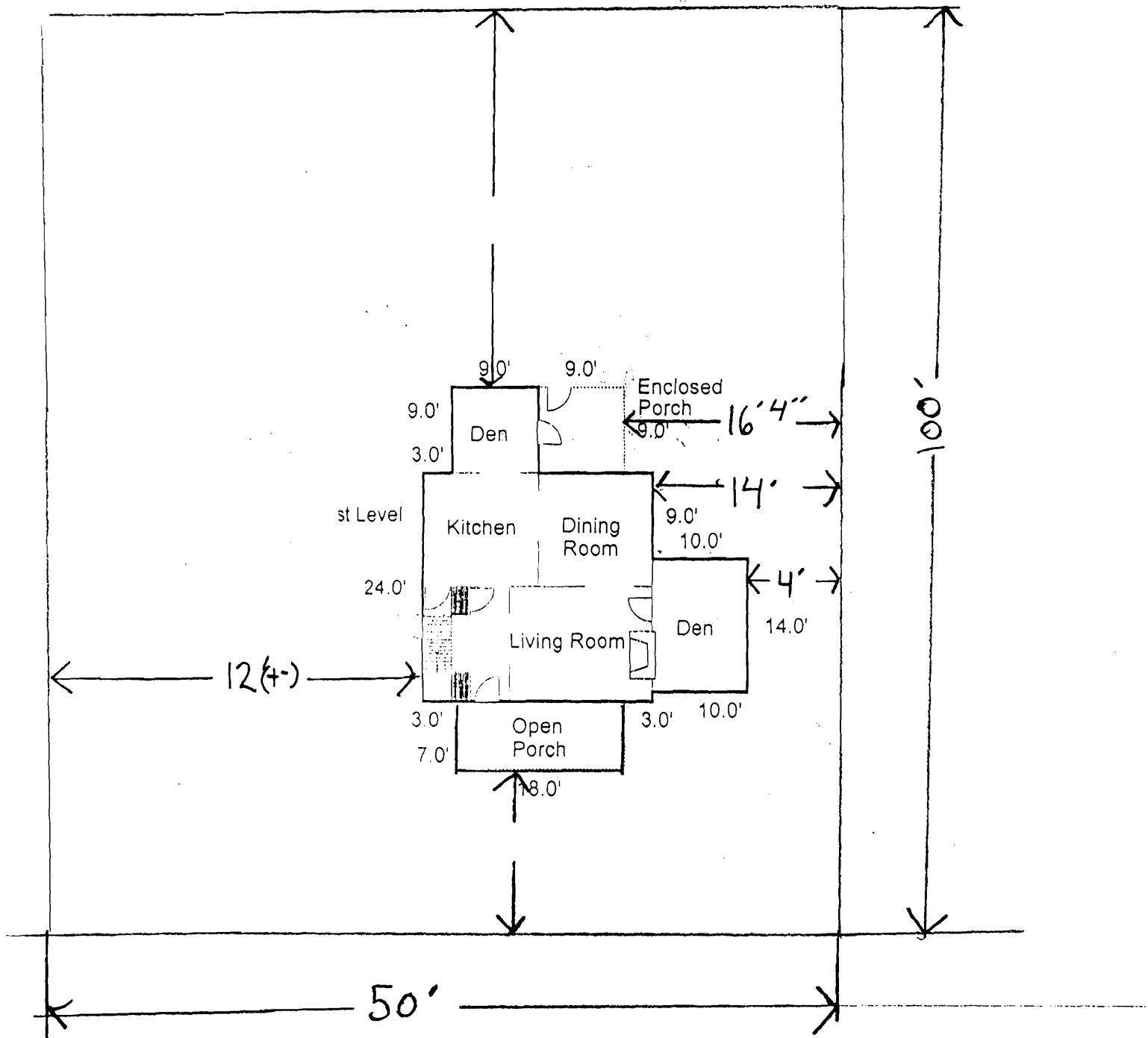
Subject Rear



Existing sun
Room 9x9

Subject Street

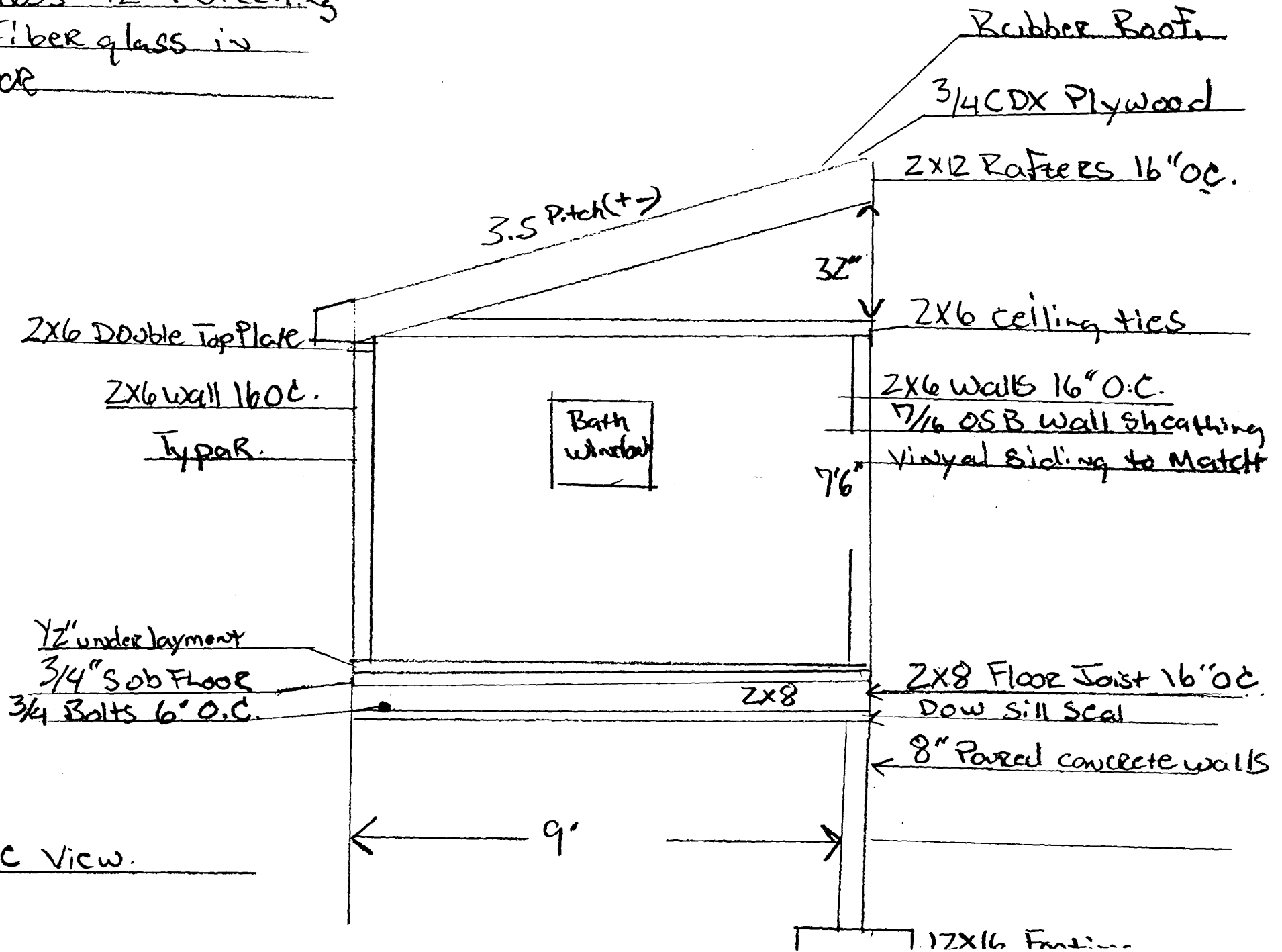




16 Richmond St
 Convert Existing 9x9 Sun
 Room to Full Bath-Laundry

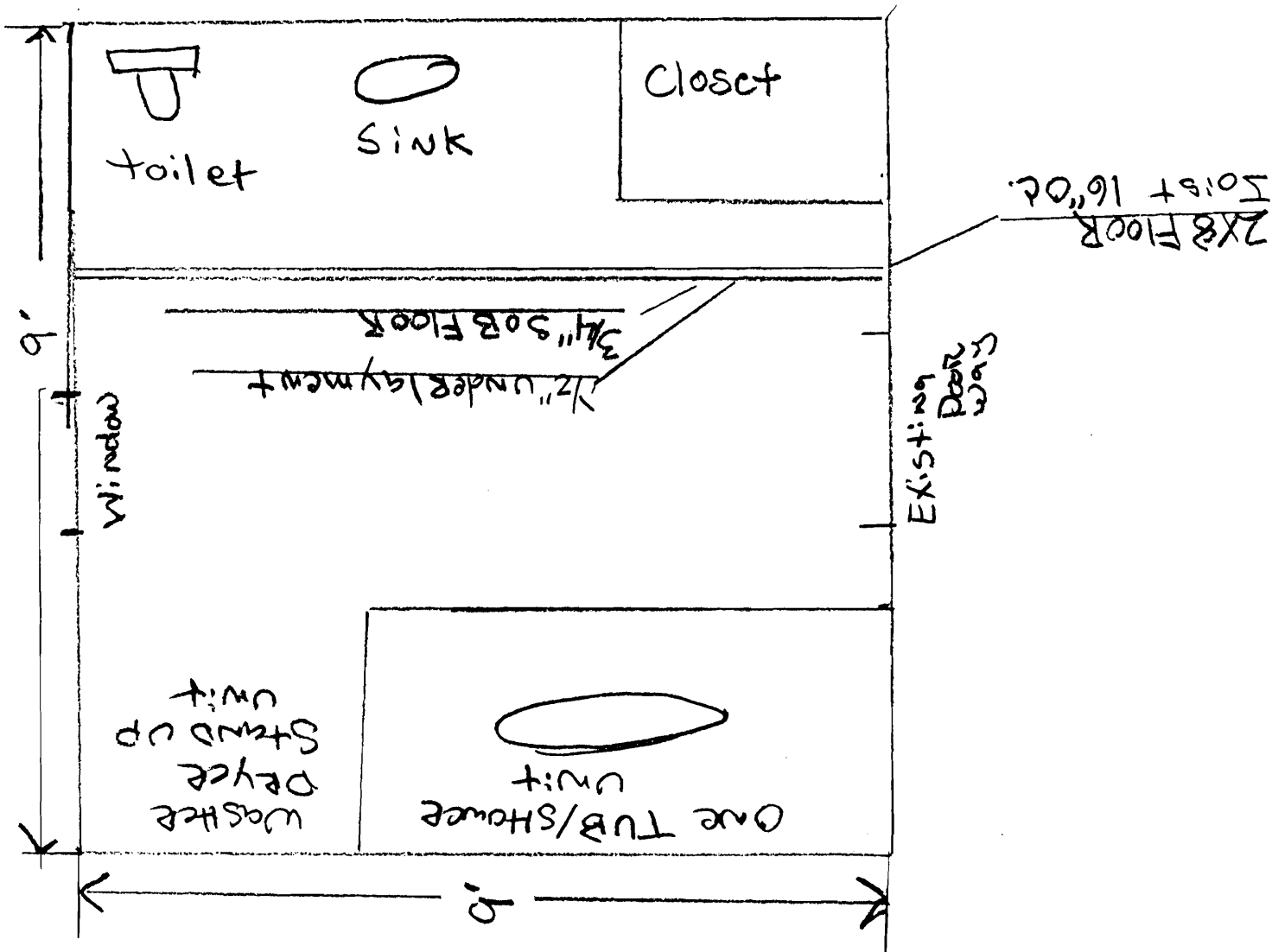
Owner- Bruce King
 Builder- Tim Higgins
 Phone - 838 5870

Insulation - 6" Fibreglass
in walls - 12" F.G. ceiling
6" Fiber glass in
FLOOR



SIDE View.

Existing House



Floor Plan

ELECTRICAL PERMIT

City of Portland, Me.



SIF

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 10/27/09
 Permit # 2009-4631
 CBL# 431 C028

LOCATION: 16 Richmond St. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Bruce King
 TENANT _____ PHONE # _____

					TOTAL EACH FEE	
OUTLETS	2	Receptacles	3	Switches	Smoke Detector	.20
FIXTURES	2	Incandescent		Fluorescent	Strips	.20
SERVICES		Overhead		Underground	TTL AMPS <800	15.00
		Overhead		Underground	>800	25.00
Temporary Service		Overhead		Underground	TTL AMPS	25.00
						25.00
METERS		(number of)				1.00
MOTORS		(number of)				2.00
RESID/COM		Electric units				1.00
HEATING		oil/gas units		Interior	Exterior	5.00
APPLIANCES		Ranges		Cook Tops	Wall Ovens	2.00
		Insta-Hot		Water heaters	Fans	2.00
	/	Dryers		Disposals	Dishwasher	2.00
		Compactors		Spa	Washing Machine	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 55.00	
					MINIMUM FEE	45.00

431 C028

RECEIVED

OCT 27 2009

Dept. of Building Inspections
 City of Portland Maine

45.00

CONTRACTORS NAME Breggin Electric MASTER LIC. # 03931
 ADDRESS Box 9739-1272 Port Me LIMITED LIC. # _____
 TELEPHONE 776-1884

SIGNATURE OF CONTRACTOR [Signature]

