

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

BUILDING INSPECTION PERMIT DB

Permit Number: 070163

This is to certify that MI DEVELOPMENT CO INC /MI Development

has permission to Build a 24' x 36' Single Family Home with 8.6' x garage

AT ¹⁶⁰166 YALE ST

438 A024001

PERMIT ISSUED

APR - 9 2007

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or closed-in. 4 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. Mackley 3/12/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

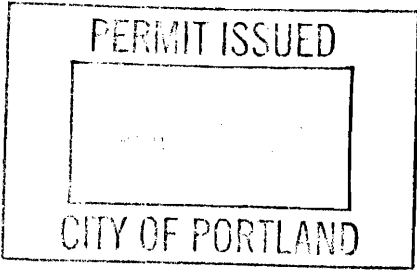
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0163	Issue Date:	CBL: 438 A024001
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Location of Construction: 160 166 YALE ST	Owner Name: MJ DEVELOPMENT CO LLC	Owner Address: 50 THORNHURST RD	Phone:
Business Name:	Contractor Name: MJ Development	Contractor Address: 31 Old Campus Rd Portland	Phone: 2077761762
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	Zone: R3

Past Use: Vacant Land	Proposed Use: Single Family Home - Build a 24' x 36' Single Family Home w/ 18'.6" x 24' garage	Permit Fee: \$1,195 00	Cost of Work: \$110,000.00	CEO District: 4
Proposed Project Description: Build a 24' x 36' Single Family Home w/ 18'.6" x 24' garage		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: R3 Type: SB IRC 2003
		Signature:		Signature:
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: Idobson	Date Applied For: 02/13/2007	Zoning Approval
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<ol style="list-style-type: none"> 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 <input type="checkbox"/> Shoreland N/A <input type="checkbox"/> Wetland N/A <input type="checkbox"/> Flood Zone parcel 7-200X <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan 2007-0028 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/> OK w/ conditions Date: 2/15/07 ABM	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 Date:	Historic Preservation <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:
			

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
Department of Building Inspection

Certificate of Occupancy

LOCATION 166 YALE ST (160 actual #) CBL 438 A024001

Issued to MJ DEVELOPMENT CO LLC /MJ Development Date of Issue 06/19/2008

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. 07-0163, 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
IRC 2003

Limiting Conditions: none

This certificate supersedes
certificate issued

Approved:

6/20/08 *Jeane Bonke*
(Date) Inspector *per m. ke m.*

Jeane Bonke 6/20/08
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.

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 8-15-07
 Permit # 07-4598
 CBL# N38 A 24

LOCATION: Lot 14100 Yale St. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER W Scott
 TENANT _____ PHONE # _____

TOTAL EACH FEE

OUTLETS	<u>50</u> Receptacles	<u>30</u> Switches	<u>7</u> Smoke Detector	.20
FIXTURES	<u>20</u> Incandescent	<u>2</u> Fluorescent	Strips	.20
SERVICES	Overhead	<u>1</u> Underground	TTL AMPS <800	15.00
	Overhead	Underground	>800	25.00
Temporary Service	Overhead	Underground	TTL AMPS	25.00
				25.00
METERS	<u>1</u> (number of)			1.00
MOTORS	(number of)			2.00
RESID/COM	Electric units			1.00
HEATING	oil/gas units	Interior	Exterior	5.00
APPLIANCES	<u>1</u> Ranges	Cook Tops	Wall Ovens	2.00
	Insta-Hot	Water heaters <u>2</u>	Fans	2.00
	<u>1</u> Dryers	<u>1</u> Disposals	<u>1</u> Dishwasher	2.00
	Compactors	Spa <u>1</u>	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	<u>1</u> 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	<u>51.80</u>

CONTRACTORS NAME Kevin Grant MASTER LIC. # _____
 ADDRESS 34 HARTS WAY BOSTON LIMITED LIC. # 50016780
 TELEPHONE 839-8626

SIGNATURE OF CONTRACTOR [Signature] 2476

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation	107
Street Subdivision Lot #	107th St 1st Lot 14

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

438 H 024

PORTLAND PERMIT # 10394 TOWN COPY

Date Permit Issued: 9.17.07 \$ 1100.00 If Double Fee Charged

Jeanie Bourke L.P.I. # 0732
Local Plumbing Inspector Signature

07-8239

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

Date

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

Date Approved

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 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 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>2731</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.		Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	13	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Roof Drain		Garbage Disposal
OR TRANSFER FEE [\$6.00]		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	17	Fixtures (Subtotal) Column 1
			17	Fixtures (Subtotal) Column 2
			14	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

8/13/67 -

O.K. to Backfill

Cal

3-4-08 Notes

1. Plate over window by front door

2. Vent pipe support attic above bathroom

Phil - outside

3-4-08

OK rough-in electrical, plumbing + Frowns, by Ely

6-12-08 OK Final / waiting on Phil - outside

by Ely