

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

PERMIT ISSUED

Permit No: 02-1116	Issue Date: OCT 3 2002	CBLF 351 B014001
City of Portland		
Owner Address: 115 Shepherd Ln	Phone: 2073295484	
Contractor Address: 69 Milliton St. Portland	Zone: R-2	
Permit Type: Additions - Dwellings	CEO District: 2	

Owner Name: Roy Karen E	Proposed Use: Single Family
Contractor Name: Jim Lombardo/Builder	Proposed Project Description: Construct 24' X 24' one story garage with 12' X 15' mudroom and 12' X 18' deck
Phone:	Permit Fee: \$219.00
	Cost of Work: \$28,000.00

FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 BOCA 1999	Type: 57B
Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	Signature: DME 10/21	Date: 10/22/02

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Zoning Approval

Special Zone or Reviews <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"/>	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	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: 10/22/02	Date: 10/22/02	Date: 10/22/02

Permit Taken By: jmb Date Applied For: 10/02/2002

- 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.

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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

1/1 **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

1/1 **Footing/Building Location Inspection:** Prior to pouring concrete

1/1 **Re-Bar Schedule Inspection:** Prior to pouring concrete

1/1 **Foundation Inspection:** Prior to placing ANY backfill

1/1 **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

1/1 **Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

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

1/1 If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

1/1 **CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

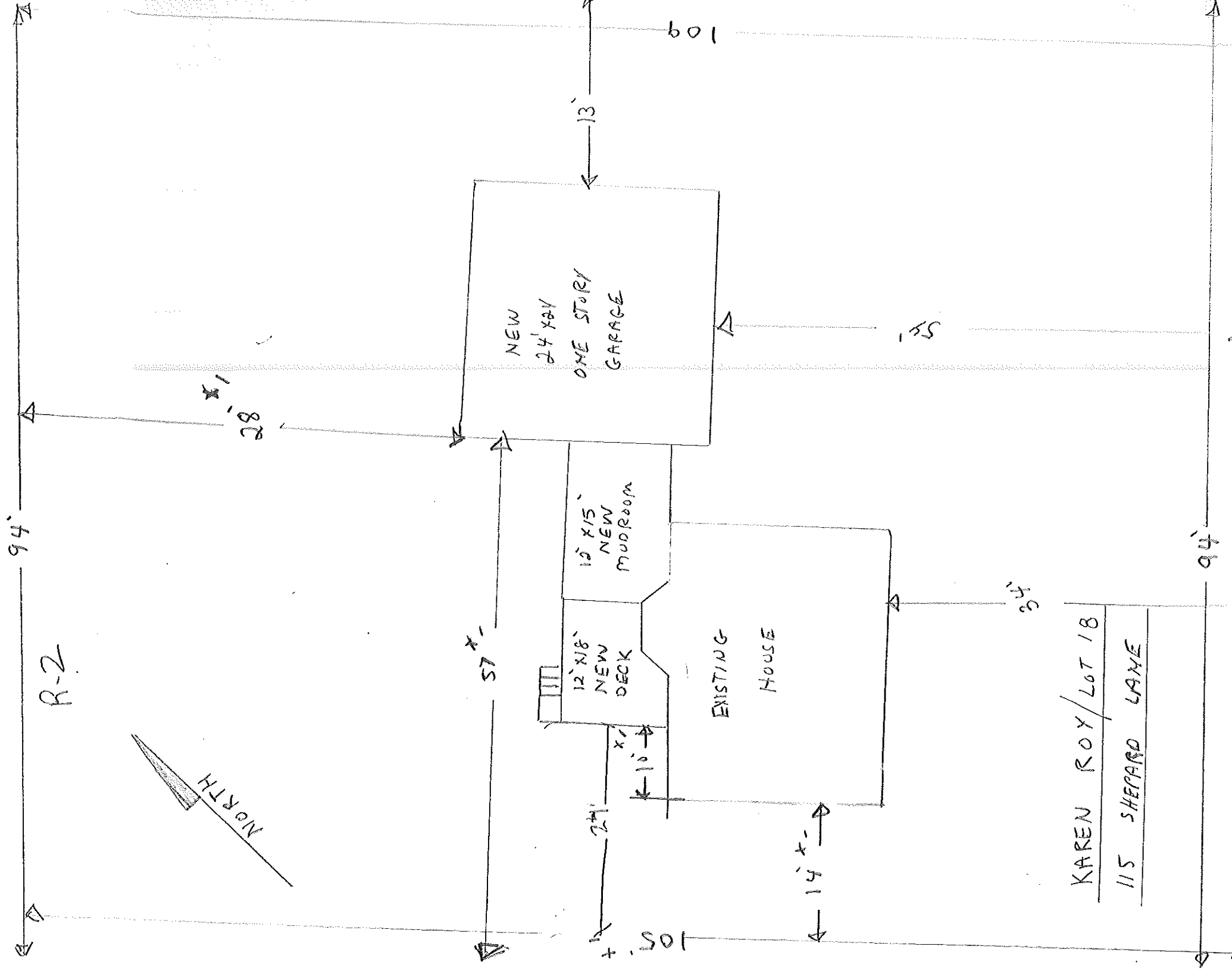
Amelia
Signature of applicant/designee

10-7-02
Date

Paula
Signature of Inspections Official

Date

CBL: 351-B-14 Building Permit #: 02-116





All Purpose 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.

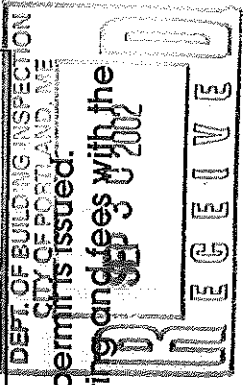
Location/Address of Construction: <u>115 SHEPARD LANE</u>	
Total Square Footage of Proposed Structure <u>756 Addition 216 DECK</u>	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>351</u>	Owner: <u>KAREN ROY</u>
Telephone: <u>69 MILTON ST. PORT 329-5484</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>JIM LOMBARDO</u> <u>69 MILTON ST. PORT 329-5484</u>
Cost Of Work: \$ <u>28,000</u>	Fee: \$ <u>219.00</u>
Current use: <u>SIF</u>	
If the location is currently vacant, what was prior use: _____	
Approximately how long has it been vacant: <u>7 years</u>	
Proposed use: <u>CONSTRUCT ONE STORY GARAGE (2 CAR) w/ 12' x 15' MUD-Room</u>	
Project description: <u>w/ 12' x 15' DECK</u>	
Contractor's name, address & telephone: <u>JIM LOMBARDO/BUILDER 69 MILTON ST PORT. 0403</u>	
Who should we contact when the permit is ready: <u>JIM LOMBARDO</u>	
Mailing address: <u>329-5484</u> <u>XX</u>	

We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 329-5484 XX

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

Signature of applicant: [Signature] Date: 9-30-02



This is NOT a permit, you may not commence ANY work until the permit is issued and fees with the Planning Department on the 4th floor of City Hall

Applicant: Jim Lombardo

Date: 11/2/02

Address: 115 Shepherd Lane

C-B-L: 351-B-014

CHECK-LIST AGAINST ZONING ORDINANCE

Date - Existing 1996

Zone Location - R-2

Interior or corner lot - INT

Proposed Use/Work - 24' X 24' Garage 12' X 15' mudroom 12' X 18 Deck Rear

Sevage Disposal - N/A

Lot Street Frontage - 94' Shown 50' Req

Front Yard - 25' Req 54' Shown

Rear Yard - 25' Req 28' Shown

Side Yard - 12' Req - 13' & 24' Shown

Projections - N/A

Width of Lot - N/A

Height - one story

Lot Area - 10,022 sq ft x 20% = 2,004.4

Lot Coverage/Impervious Surface - 830 sq existing

Area per Family - N/A

Off-street Parking - N/A

Loading Bays - N/A

Site Plan - N/A

Shoreland Zoning/Stream Protection - N/A

Flood Plains - N/A

OK

216
180
516
972

New

1802

=== COVER PAGE ===

TO:

Jeannie

FROM:

JIM LOMBARDO

FAX:

797-2929

TEL:

329-5484

②

PAGE[S] TO FOLLOW

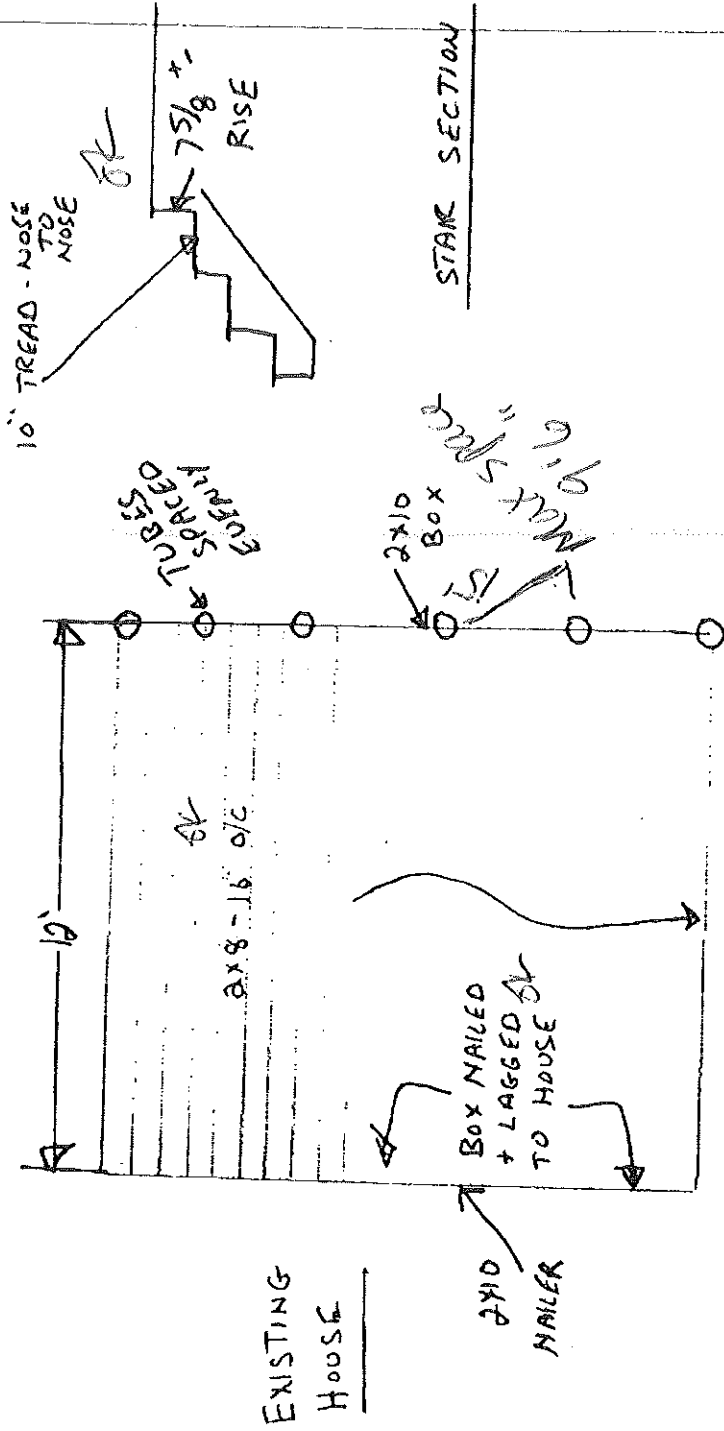
COMMENT:

DECK FRAMING / 115
SMEPARD
LAME
LUL SPECS

KAREN ROY/OWNER

JIM LOMBARDO/BUILDER

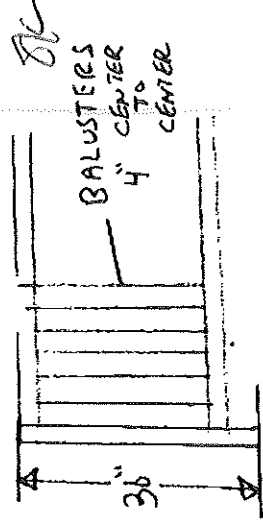
115 SHEPARD LANE
DECK SECTION



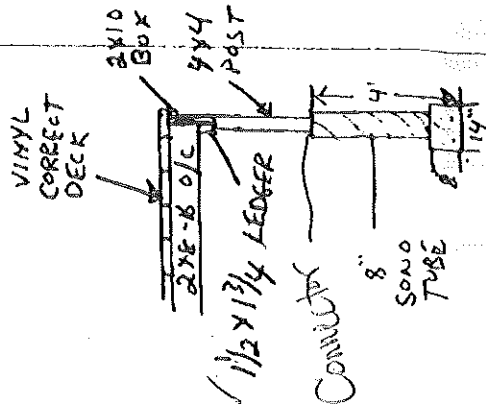
FRAMING SECTION

STAIR SECTION

CROSS SECTION



RAIL SECTION



Stackable FRZ
 on STAIRS
 (referred ends)



Triple - 1 3/4" x 11 7/8" V-L SP 2000

File Name: 874-6617
- JIM LOMBARDO
- WARREN
- DAN
- Wood Structures Inc.

Job Name: BOISE CASCADE
Address: PORTLAND, ME
City, State, Zip: PORTLAND, ME
Code Reports: ICBO 5612, BOCA 98-52, SBCCI 9052
Misc: Customer Specifier Designer Company Misc

13

Warren To

30	3620 lbs LL	3-12	3000 lbs LL
1755 lbs DL	1755 lbs DL	01	1755 lbs DL
Standard Load - 40 PSF (15 PSF Tributary 11-00-00)		Total Horizontal Length - 16-00-00	

General Data

Version: US Imperial
Member Type: - Roof Beam
Number of Spans: 1
Left Cantilever: - No
Right Cantilever: - No
Slope: 8:12 F
Tributary: 11-00-00
Repetitive: n/a
Construction Type: n/a
Live Load: 40 PSF
Dead Load: 15 PSF
Part Load: 0 PSF
Duration: 1.15

Load Summary

ID	Description	Ref.	Start	End	Live	Dead	THB.	Dur.
5	Standard	Unf/Area Load	00-00-00	16-00-00	40 PSF	15 PSF	11-00-00	115
Controls Summary								
Central Type	Value	% Allowable	Duration	Loadcase	Span Location			
Moment	21100 ft-lbs	81.5%	@ 115%	2	1 - Internal			
End Shear	4623 lbs	33.3%	@ 115%	2	1 - Left			
Total Deflection	L/241 (0.958")	74.7%		2				
Live Deflection	L/361 (0.64")	66.4%		2				
Max. Defl.	0.858" (Limit 1")	95.8%		2				
Span/Depth	16.2			2				

Bearing Supports

Name	Type	Dim. (L x W)	Value	% Allowed	Case	Material
B0	Wall/Plate	3-1/2" x 5-1/4"	\$275 lbs	67.5%	2	Spruce-Pine-Fir
B1	Wall/Plate	3-1/2" x 5-1/4"	\$275 lbs	67.5%	2	Spruce-Pine-Fir

NOTES:

Design meets Code minimum (L/160) Total load deflection criteria.
Design meets Code minimum (L/240) Live load deflection criteria.
Design meets arbitrary (1") Maximum load deflection criteria.

Disclosure

The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output above is based upon building code-specified design properties and standard methods. Installation of Boise Cascade engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0786 before beginning product installation.

Application ID Number:

Delete

Save

Close

Department:

Status:

Reviewer:

Comments:

Approval Date:

Given On Date:

OK to Issue Permit

Name:

Date:

Date 2:

Conditions Section:

Add New Condition From

Add New Condition

Delete Condition

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



Beam supports on deck not to exceed 9'-6", provide fastener at sona tube, provide graspable handrail or guard combo



Create Date: By:

Update Date: By:

Application ID Number:

Delete

Save

Close

Department:

Status:

Reviewer:

Comments:

Approval Date:

Given On Date:

OK to Issue Permit

Name:

Date:

Date 2:

Conditions Section:

Add New Condition From

Add New Condition

Delete Condition

This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.



This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.



Create Date: By:

Update Date: By:

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORKED
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

OCT 3 2002

Permit Number: 021116

CITY OF PORTLAND

This is to certify that Roy Karen E/Jim Lombardo
has permission to Construct 24' X 24' one story
AT 115 Shepherd Ln

12' X 12' bedroom
12' X 18' deck
351 B014001

provided that the person or persons,
of the provisions of the Statutes of the
the construction, maintenance and use
this department.

Apply to Public Works for street line
and grade if nature of work requires
such information.

inspection must
in permit procure
this information at therec
closed-in.
NOTICE IS REQUIRED.

A certificate of occupancy must be
procured by owner before this build-
ing or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____

Department Name

Jeanne Bouke 10/3/02
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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 1/22/13
 Permit # 2003-4060
 CBL# 351 3014

LOCATION: 115 SHEPARD LN METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER KAREN ROY
 TENANT _____ PHONE # _____

OUTLETS	12	Receptacles	12	Switches	Smoke Detector	TOTAL EACH FEE
FIXTURES	5	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
METERS		(number of)				25.00
MOTORS		(number of)				1.00
RESID/COM		Electric units				2.00
HEATING		oil/gas units		Interior	Exterior	1.00
APPLIANCES		Ranges		Cook Tops	Wall Ovens	5.00
		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	35.00
					MINIMUM FEE	35.00

CONTRACTORS NAME PLANE ELECTRIC INC MASTER LIC. # 10626
 ADDRESS 173 SUMMIT ST PORTLAND LIMITED LIC. # _____
 TELEPHONE 797-9959

SIGNATURE OF CONTRACTOR [Signature]