

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

Permit No: 05-0190	Issue Date: PERMIT ISSUED	City: 353 A01#001
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Location of Construction: 11 Allison Ave	Owner Name: Taylor Ruth S	Owner Address: 11 Allison Ave	Phone: FEB 25 2005
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone: CITY OF PORTLAND
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-2

Past Use: Single Family Home	Proposed Use: SFH/ install bathroom in existing space	Permit Fee: \$156.00	Cost of Work: \$15,000.00	CEO District: 5
Proposed Project Description: install bathroom in existing space		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: R-3 Type SB <i>IRC 2003</i>	
		Signature: _____		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 02/18/2005	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	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"/> Date: <i>2/23/05</i>	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: <i>2/23/05</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.

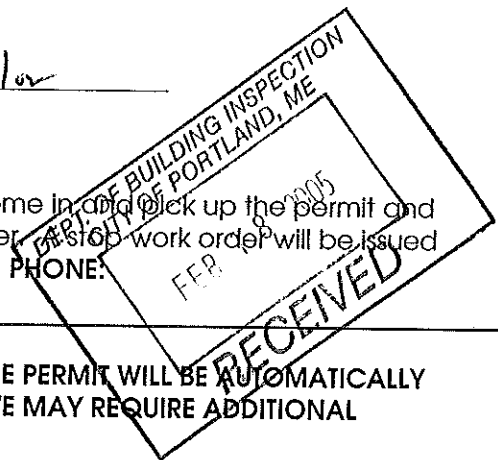
 SIGNATURE OF APPLICANT ADDRESS DATE PHONE

 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

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>11 Allison Ave</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>353</u> Block# <u>A</u> Lot# <u>14</u>	Owner: <u>Paul S. Taylor</u>	Telephone: <u>207 797-7563</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Kent G. Taylor</u> <u>11 Allison Ave</u> <u>207-797-2403</u>	Cost Of Work: <u>\$15 K</u> Fee: \$
Current use: <u>single family</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>install bathroom in existing apartment</u> Project description: _____		
Contractor's name, address & telephone: <u>?</u>		
Who should we contact when the permit is ready: <u>Kent Taylor</u>		
Mailing address: _____		
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. <u>stop</u> work order will be issued and a \$100.00 fee if any work starts before the permit is picked up.		



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.

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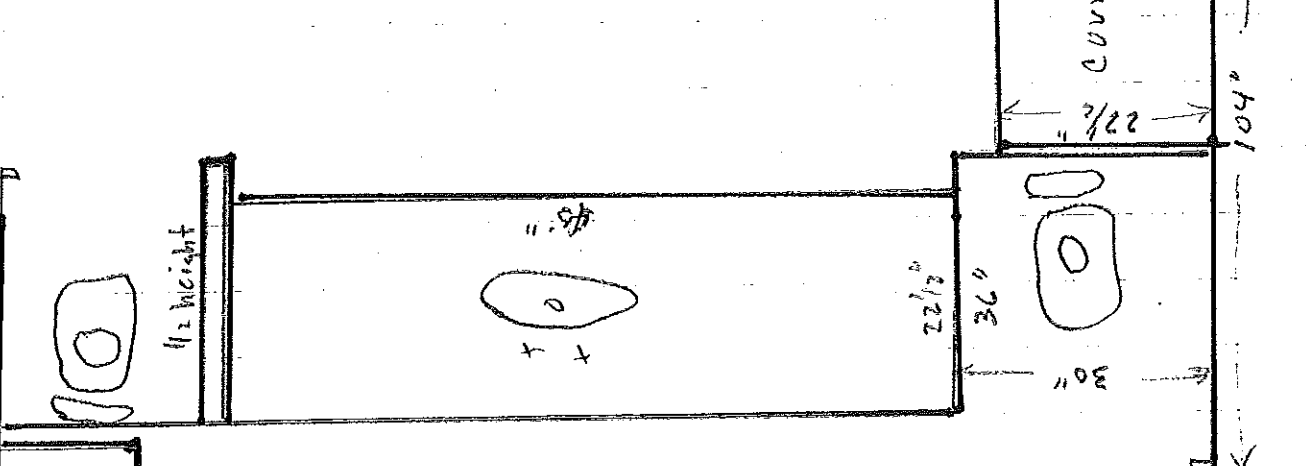
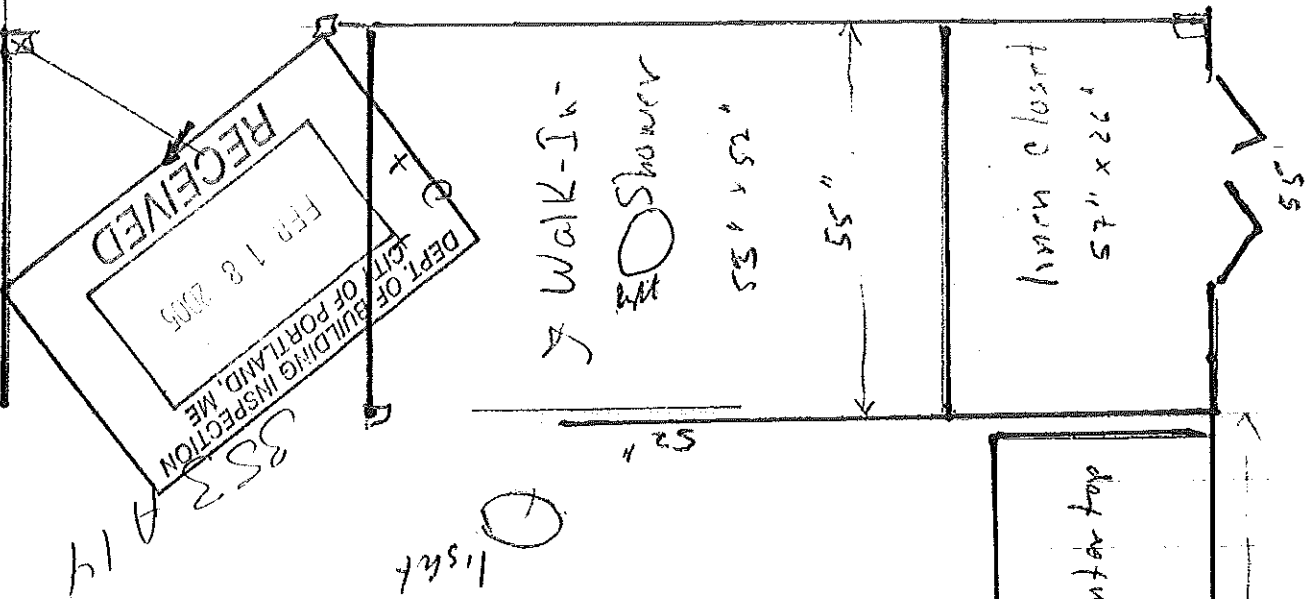
Signature of applicant: <u>[Signature]</u>	Date: <u>2/18/05</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

JKH

MASTER BED

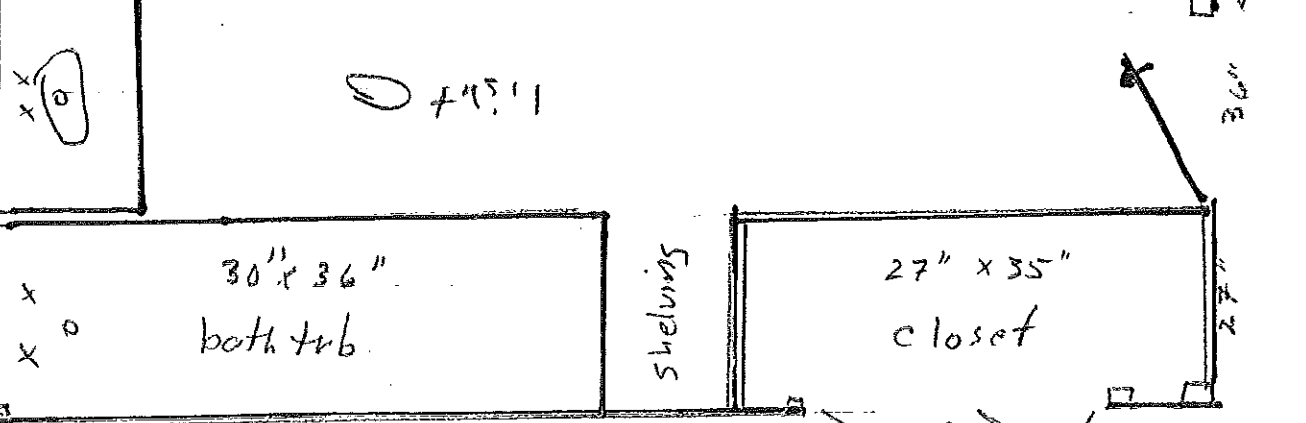
115"



Guest Room

Spoke
 All non-bearing
 walls w/ batty
 openings. Shims.

non-bearing walls



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Permit No: 05-0190	Date Applied For: 02/18/2005	CBL: 353 A014001
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Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: SFH/ install bathroom in existing space	Proposed Project Description: install bathroom in existing space
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Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 02/23/2005
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 02/23/2005
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) All glass shower/tub doors must be tempered. 2) If any windows are located within a tub or shower unit the galzing must be tempered.			

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

PERMIT ISSUED

Permit Number: 050190

FEB 25 2005

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that Taylor Ruth S/Owner has permission to install bathroom in existing space AT 11 Allison Ave

353 A014001

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 given and written permission procured before this building or part thereof altered or occupied closed-in. HEAVY 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

Handwritten signature and date 2/23/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



CITY OF PORTLAND, MAINE
Department of Building Inspections

475 18 20 25

Received from

Bank Transfer

Location of Work

11 Misses

Cost of Construction

\$ 15,000.00

Permit Fee

\$ 150.00

Building (1L) Plumbing (1S) Electrical (1Z) Site Plan (U2)

Other

CBL: 253 1104

Check #: 475

Total Collected \$ 156.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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