

923505

Permit # 923505 Portland **BUILDING PERMIT APPLICATION** Fee \$35 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Casco Northern Bank Phone # 774-5221

Address: One Monument Sq- Ptlid, ME

LOCATION OF CONSTRUCTION 145 Commercial St.

County: Ralph Pitt Sub: 282-1169

Address: 23 Lindale Ave- Biddeford Phone # ME 04005

Est. Construction Cost: \$3000 Proposed Use: bank bldg w renov

of Existing Res. Units _____ # of New Res Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion: Interior renovations- vestibule

Foundation: (for ATM)

- Type of Soil: _____
- Set Backs - Front _____ Rear _____ Side(s) _____
- Footings Size: _____
- Foundation Size: _____
- Other: _____

Floor:

- Sills Size: _____ Sills must be anchored.
- Girders Size: _____
- Lally Column Spacing: _____ Size: _____
- Joists Size: _____ Size: _____ Spacing 16" O.C.
- Bracing Type: _____ Size: _____
- Floor Sheathing Type: _____ Size: _____
- Other Material: _____

Exterior Walls:

- Studding Size _____ Spacing _____
- No windows _____
- No. Doors _____
- Header Sizes _____ Spant(s) _____
- Bracing: Yes _____ No _____
- Corner Posts Size _____
- Insulation Type _____ Size _____
- Sheathing Type _____ Size _____ Weather Exposure _____
- Masonry Materials _____
- Metal Materials _____

Interior Walls:

- Studding Size _____ Spacing _____
- Header Sizes _____ Spant(s) _____
- Wall Covering Type _____
- Fire Wall if required _____
- Other Materials _____

Whitic - Tax Assessor

Date: 3/24/92 For Official Use Only
 Inside Fire Limits: _____ Name: _____
 Blgd Code: _____ Lot: _____
 Time Limit: _____ Ownership: _____
 Estimated Cost: 3000 Public Land _____ Private _____

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Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____

Review Required: _____

Zoning: _____

Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: Variance _____ Site Plan _____
 Shoreland Zoning: Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain): DDP 3-25-92

Ceiling: HISTORIC PRESERVATION

- Ceiling Joists Size: _____
- Ceiling Strapping Size _____ Spacing _____
- Type Ceilings: _____ Does not require review.
- Insulation Type _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____ Span _____ Action _____ Approved _____
- Sheathing Type _____ Size _____
- Roof Covering Type _____

Chimneys: _____ Number of Fire Places _____

Heating: _____ Type of Hca _____

Electrical: _____ Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

- Approval of soil test if required _____ Yes _____ No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- No. of Other Fixtures _____

Swimming Pools:

- Type _____
- Pool Size: _____ x _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By: Louise E. Chase Date: 3/24/92

Signature of Applicant: Ralph Pitt

CEO's District: Ralph H. Pitt

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]