

ISLAND AVE., PEAKS ISLAND 94-D-9

②

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION 00472

ZONING LOCATION PORTLAND, MAINE June 25, 1982

JUN 25 1982

CITY of PORTLAND

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 84-D-9 Island Avenue, Peaks Island Fire District #1 , #2

- Owner's name and address: Richard Godot - same Telephone 766-2828
- Lessee's name and address: Telephone
- Contractor's name and address: Roger Emerton - Torrington Pt., P.I. Telephone

Proposed use of building To add porch to sin. fam. dwell No. of sheets

Last use No. families

Material No stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 1,000

FIELD INSPECTOR—Mr. @ 775-5451

To construct porch, 10'x24', to set on 8" sona tubes.

Appeal Fees \$

Base Fee

Late Fee

TOTAL \$ 15.00

(SEN) PERMIT TO #1

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

Height average grade to top of plate Height average grade to highest point of roof

Size, front depth No. stories sold or filled land? earth or rock?

Material of foundation Thickness, top bottom cellar

Kind of roof Rise foot Roof covering

No. chimneys Material of chimneys of lining Kind of heat fuel

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor 2nd 3rd roof

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 2nd 3rd roof

If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE

BUILDING INSPECTION—PLAN EXAMINER

ZONING:

BUILDING CODE:

Fire Dept.:

Health Dept.:

Others:

MISCELLANEOUS

Will work require disturbing of any tree on a public street? ^{no}

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? ^{yes}

⑦

Signature of Applicant Richard Godot Phone #

Type Name of above Richard Godot 1 2 3 4

Other and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

**CERTIFICATE OF APPROVAL
FOR INTERNAL PLUMBING**

THE TOWN/CITY OF Portland

49985 IC

TOWN/CITY CODE

05730

LPI NUMBER

00723

DATE ISSUED

09 28 80

Month Day Year

Certificate of App. Number

Installer's Name

ERIC O'NEILL

Last Name

F. I. M. I.

Owner

John Fleming

Address

JEV-D-9

Street, Road Name

Subdivision

St/Lot Number

(Location where plumbing was done and inspected)

Installer

Code

- 1. Owner
- 2. Licensed Master Plumber
- 3. Licensed Oil Burnerman
- 4. Employee of Public Utility
- 5. Manufactured Housing Dealer
- 6. Manufactured Housing Mechanic
- 7. Limited License

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING RULES.

Paul W. Gouvis

Signature of LPI

OCT 9 - 1980

Date Inspected

OWNER'S COPY

CERTIFICATE OF APPROVAL FOR INTERNAL PLUMBING

TOWN/CITY CODE: 05/170 LPI NUMBER: 00/123 DATE ISSUED: 9-18-80 THE TOWN/CITY OF: Portland 49985 IC

Installer's Name: ERIC W. P. F.I.M.I. Certificate of App. Number: 49985 IC

Owner: [Signature] Address: 84-D-9 [Street/Road Name] Subdivision: [Subdivision]

1. Owner
2. Licensed Master Plumber
3. Licensed Oil Burnerman
4. Employee of Public Utility
5. Manufactured Housing Dealer
6. Manufactured Housing Mechanic
7. Limited License

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING RULES.

[Signature of LPI]

Date Inspected: OCT 9 1980

TOWN'S COPY

INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF

Town/City Code: 05/170 LPI Number: 00/123 Date Issued: 9-9-80 INSTALLER'S: 2567 49985 IP

Address of Where Plumbing Is Done: 84-D-9 [Street/Road Name] Subdivision: [Subdivision] License No. [License No.]

Name of Owner: FEEWEYS [Last Name] F.I.M.I. Mailing Address: [Mailing Address] Zip Code: 49985

1. Owner
2. Licensed Master Plumber
3. Licensed Oil Burnerman
4. Employee of Public Utility
5. Manufactured Housing Dealer
6. Manufactured Housing Mechanic
7. Limited License

Type of Construction	1. New 2. Remodeling 3. Addition 4. Remodeling & Addition	5. Replacement of Hot Water Heater 6. Hook up of Mobile Home	7. Hook up of Modular Home 8. Other (Specify)
Plumbing To Serve	1. Single (Res) 2. Multi-Fam/Res	3. Mobile Home 4. Modular Home	5. Commercial 6. School Other (Specify)
Number of Fixtures or Hook Ups	Sink(s) [] Toilet(s) [] Clothes Washer(s) [] Dish Washer(s) []	Bathtub(s) [] Lavator(ies) [] Hot Water Heater(s) []	Shower(s) [] Urinal(s) [] Floor Drain(s) [] Hook Up(s) []

TOWN'S COPY

IMPORTANT: Note the following conditions
1. This Permit is non-transferable to another person or party
2. If construction has not started within 6 months from the Date of Issue, this Permit becomes invalid.

Fixture Fee: \$16.00
Hook Up Fee: \$0.00
Total Fee: \$16.00
If Double Fee Check Box []

Dept of Human Services
Div of Health Engineering

Signature of LPI



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

03375
DEC 10 1947

Portland, Maine, December 9, 1947

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Peaks Island Use of Building Dwelling No. Stories 1 1/2 NEW BUILDING
Name and address of owner of appliance Capt. Paul Mahoney, Island Avenue, Peaks Island Existing " "
Installer's name and address Marshall Engineering Co., 350 Commercial St. Telephone 5-1524

General Description of Work

To install Oil burning equipment in connection with existing forced hot water heat.

INSPECTION NOT COMPLETE

IF HEATER, OR POWER BOILER

Location of appliance or source of heat _____ Type of floor beneath appliance _____
If wood, how protected? _____ Kind of fuel _____
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace _____
From top of smoke pipe _____ From front of appliance _____ From sides or back of appliance _____
Size of chimney flue _____ Other connections to same flue _____
If gas fired, how vented? _____ Rated maximum demand per hour _____

IF OIL BURNER

Name and type of burner Williams-oil-o-matic Labeled by underwriter's laboratories? Yes
Will operator be always in attendance? _____ Does oil supply line feed from top or bottom of tank? Bottom
Type of floor beneath burner Concrete
Location of oil storage Cellar Number and capacity of tanks 1-220 Gal.
If two 275-gallon tanks, will three-way valve be provided? _____
Will all tanks be more than five feet from any flame? Yes How many tanks fire proofed? _____
Total capacity of any existing storage tanks for furnace burners Non

IF COOKING APPLIANCE

Location of appliance _____ Kind of fuel _____ Type of floor beneath appliance _____
If wood, how protected? _____
Minimum distance to wood or combustible material from top of appliance _____
From front of appliance _____ From sides and back _____ From top of smokepipe _____
Size of chimney flue _____ Other connections to same flue _____
Is hood to be provided? _____ If so, how vented? _____
If gas fired, how vented? _____ Rated maximum demand per hour _____

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Permit Issued with Letter (extra 7902-stad)

Amount of fee enclosed? 1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater etc., in same building at same time.)

APPROVED

OK 12-9-47 P.M.

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

Marshall Engineering Co.

Signature of Installer By: P. Marshall

INSPECTION COPY

Permit No. 47/3315
Location New Island Ave, Seabrook
Owner Capt. Paul Mahoney
Date of permit 12/10/47
Approved _____

NOTES 24.D-9

INSPECTION NOT COMPLETE

1. Fill Pipe _____
2. Vent Pipe _____
3. Rise of Heat _____
4. Boiler Rating & supports _____
5. Name & label _____
6. Safety valve _____
7. Drain & overflow _____
8. Water control _____
9. Pressure relief & protection _____
10. Valves in supply line _____
11. Capacity of Tanks _____
12. Tank Rating & supports _____
13. Tank Distance _____
14. Oil Gauge _____
15. Protection Valve _____
16. _____



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, October 20, 1947

RECORDED 15845 02845 OCT 21 1947

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Island Avenue, Peaks Island of Building Dwelling No. Stories New Building Existing Paul Mahoney, Island Ave., Peaks Island Installer's name and address William A. McMair, 21 Dow Street Telephone 3-2425

General Description of Work

To install forced hot water heating system in place of stove heat and install oil burning equipment INSPECTION NOT COMPLETED

IF HEATER, OR POWER BOILER

Location of appliance or source of heat basement Type of floor beneath appliance concrete If wood, how protected? Kind of fuel oil Minimum distance to wood or combustible material, from top of appliance or casing top of furnace 3' From top of smoke pipe 2' From front of appliance Over 4' From sides or back of appliance Over 3' Size of chimney flue 8x12 Other connections to same flue stove If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Permit Issued with Letter

Name and type of burner Oil-burnable Labeled by underwriter's laboratories? yes Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom Type of floor beneath burner concrete Location of oil storage basement Number and capacity of tanks 1-275 gal. If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? yes How many tanks fire proofed? Total capacity of any existing storage tanks for furnace burners none

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance If wood, how protected? Minimum distance to wood or combustible material from top of appliance From front of appliance From sides and back From top of smoke pipe Size of chimney flue Other connections to same flue Is hood to be provided? If so, how vented? If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Permit Issued with Letter (extra against it)

Amount of fee enclosed? 1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED: Oct. 10-20 47. P.M.M.

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

INSPECTION COPY

Signature of Installer William A. McMair

Permit No. 47-2845

Location Island on Pikes Is.

Owner Paul Mahoney

Date of permit 10/21/47

Approved

NOTES 84-D-9

INSPECTION NOT COMPLETE

1. Fill Pipe

2. Vent Pipe

3. Kind of Heat

4. Ducter Rigidity & Supports

5. Name & Label

6. Stack Control

7. High Limit Control

8. Return Control

9. Piping Support & Protection

10. Valves in supply line

11. Capacity of Tanks

12. Tank Rest by a Supports

13. Tank Distance

14. Floor

15. Inlet

16.



FILL IN AND SIGN WITH INK
**APPLICATION FOR PERMIT FOR
 HEATING, COOKING OR POWER EQUIPMENT**

PERMIT ISSUED
02388
DEC 4 1946

Portland, Maine, December 2, 1946

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location New Island Avenue Use of Building Dwelling No. Stories 3 Building Existing "Y"
 Name and address of owner of appliance Capt. Paul Mahoney, Island Avenue, Peaks Island
 Installer's name and address .. Paine Company, 441-443 Fore Street Telephone 3-6671

General Description of Work

To install forced warm air heating system in place of existing warm air heat
and install oilburning equipment. **INSPECTION NOT COMPLETE**
12-3-46 O.K. O.S.

IF HEATER, OR POWER BOILER

Location of appliance or source of heat .. basement Type of floor beneath appliance concrete
 If wood, how protected? Kind of fuel oil
 Minimum distance to wood or combustible material, from top of appliance or casing top of furnace 3'
 From top of smoke pipe .. 15" From front of appliance Over 4' .. From sides or back of appliance Over 3'
 Size of chimney flue 10x12 Other connections to same flue none
 If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner .. Quiet Heat Labeled by underwriters' laboratories? yes
 Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom
 Type of floor beneath burner .. concrete
 Location of oil storage basement Number and capacity of tanks 1-275 gal,
 If two 275-gallon tanks, will three-way valve be provided?
 Will all tanks be more than five feet from any flame? yes How many tanks fire proofed?

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance
 If wood, how protected?
 Minimum distance to wood or combustible material from top of appliance
 From front of appliance From sides and back From top of smoke pipe
 Size of chimney flue Other connections to same flue
 Is hood to be provided? If so, how vented?
 If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? ... 1.00 ... (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? ... yes ...

The Paine Company

Signature of Installer By: [Signature]

INSPECTION COPY

Permit No. 44/2388

Location New Island Isl. Beaks

Owner Capt. Paul Mahoney

Date of permit 12/4/46

Approved _____

NOTES 84-D-9

~~INSPECTION NOT COMPLETE!~~

1 Bill Type _____

2 Vot. Date _____

3 Location _____

4 Bill Type _____

5 _____

6 Stock Control _____

7 _____

8 _____

9 _____

10 _____

11 _____

12 _____

13 _____

14 _____

15 _____

16 _____



PERMIT ISSUED
Permit No. _____

APPLICATION FOR PERMIT TO REPAIR BUILDING

Third Class Building

Portland, Maine September 27, 1927

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.
The undersigned hereby applies for a permit to repair the following described building in accordance with the laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Off Pleasant Avenue, Peaks Island Ward 1st Within fire limits? B2 Dist. No. _____
Owner's name and address Averygreen Landing
Miss M. Kimball, Peaks Island Telephone _____
Contractor's name and address P. P. Knight, Peaks Island Telephone _____
Use of building Cottage
No. stories 1 Height _____ ft., Gross area _____ sq. ft., Style of roof pitch
Type of present roof covering SHALE

General Description of New Work

To cover portion of roof

If Roof Covering is to be Repaired or Renewed

When last repaired? _____, Area then repaired _____ sq. ft.
Are repairs or renewal due to damage by fire? _____ If so, what area damaged? _____ sq. ft.
Area of roof to be repaired now? portion (shed) _____ sq. ft.
Type of roofing to be used Asphalt roofing No. plies _____
Trade name and grade of roof covering to be used Glass G Ond. Lab.
Estimated cost \$ _____

Miss M. Kimball

Fee \$.60

Signature of owner P. P. Knight

INSPECTION COPY

3-212

Ward 2 Permit No. 37/1541

Location off. on Dr. Poole

Owner Elise M. Kimball

Date of permit 9/27/37

Notif. closing-in T-4

Ir spn. closing-in D

Final Notif. 9

Final Insur.

Cert. of Occupancy issued None

NOTES

Large section of the form with horizontal lines, mostly blank, and a large 'X' drawn across it.



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date March 1, 19 88
 Receipt # and Permit number 22797

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: New Island Avenue, Peaks Island 84-D-9
 OWNER'S NAME: Jeanette Jacobs ADDRESS: same

	FEE'S
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft TOTAL <u>1-30</u>	<u>3.00</u>
FIXTURES: (number of)	
Incandescent <u>x</u> Fluorescent _____ (not strip) TOTAL <u>1-10</u>	<u>3.00</u>
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ ..	
METERS: (number of)	
MOTORS: (number of)	
Fractional	
1 HP or over	
RESIDENTIAL HEATING:	
Oil or Gas (number of units)	
Electric (number of rooms)	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler)	
Oil or Gas (by separate units)	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES. (number of)	
Ranges <u>1</u>	
Cook Tops _____	
Wall Ovens _____	
Dryers <u>1</u>	
Fans _____	
Water Heaters _____	
Disposals _____	
Dishwashers _____	
Compactors _____	
Others (denote) _____	
TOTAL <u>2</u>	<u>3.00</u>
MISCELLANEOUS: (number of)	
Branch Panels	
Transformers	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
INSTALLATION FEE DUE:	
DOUBLE FEE DUE:	
TOTAL AMOUNT DUE:	<u>9.00</u>

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT
 FOR REMOVAL OF A "STOP ORDER" (304-10.b)

INSPECTION:
 Will be ready on 3/1, 1988; or Will Call _____
CONTRACTOR'S NAME: Joe Hayes
ADDRESS: RR 5 Box 302 Gorham
TEL.: 727-3939
MASTER LICENSE NO.: 8268 **SIGNATURE OF CONTRACTOR:** Joe Hayes
LIMITED LICENSE NO.: _____

912893

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$95.00 Zone _____ Map # _____ Lot # _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Kaiper Wilson-J. Jacobs Phone # 766-3311

Address: 125 Barrow St. N.Y., N.Y. 10014

LOCATION OF CONSTRUCTION Island Ave. P.I. 84-D-9 - Peaks Dal

Contractor: J. White Associates Sub: _____

Address: 385 West St. Biddeford 04005 Phone # 283-1876

Est. Construction Cost: 15,000 Proposed Use: single family

_____ Past Use: single family

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 replacing existing patio and six stairs, door and bulkhead as per plans

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floors:

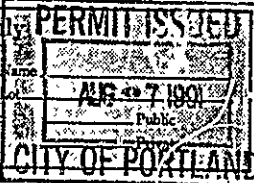
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lolly Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only		PERMIT ISSUED 
Date: <u>August 2, 1991</u>	Subdivision _____	
Inside Fire Limits _____	Name _____	
Bid Code _____	Ownership _____	
Time Limit _____	Estimated Cost: <u>15,000</u>	
Zoning: _____	Street Frontage Provided: _____	
Review Required: _____	Provided Setbacks: Front _____ Back _____ Side _____	
Zoning Board Approval: Yes _____ No _____ Date: _____	Planning Board Approval: Yes _____ No _____ Date: _____	
Conditional Use: _____ Variance _____ Site Plan _____ Sub/Division _____	Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____	
Special Exception _____	Other (Explain) <u>WDA 85-9</u>	

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____ Not in Part 1 per Landmark
3. Type Ceilings: _____ Does not require review
4. Insulation Type _____ Size _____
5. Ceiling Height: _____ Requires Review

Roof:

1. Truss or Rafter Size _____ Span Action _____ Approved
2. Sheathing Type _____ Size _____ Approved with Conditions
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____ Date: 8/2/91

Heating:

Type of Heat: _____

Electrical:

Service _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

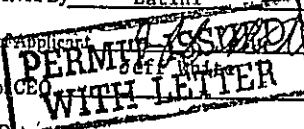
1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Latini

Signature of Applicant _____ Date 8/2/91

Signature of CEO _____ Date _____

Inspection Date _____



912898

Permit # 912898 City of Portland BUILDING PERMIT APPLICATION Fee \$95.00 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Kaiper Wilson-J. Jacobs Phone # 766-3311
Address: 125 Barrow St. N.Y., N.Y. 10014
LOCATION OF CONSTRUCTION Island Ave. Sp. 84-D-92 *Peaks*
Contractor: J. White Associates Sub. 04005 *Del*
Address: 385 West St. Biddeford Phone # 283-1876
Est. Construction Cost: 15,000 Proposed Use: single family
Past Use: single family
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 replacing existing patio and six stairs, door and
bulkhead as per plans

Foundation:
1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:
1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:
1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only
Date: AUGUST 2, 1991
Inside Fire Limits _____
Blgd Code _____
Time Limit _____
Estimated Cost: 15,000
Subdivision: _____
Name: AUG 7 1991
City of Portland
Ownership: _____

Zoning: Street Frontage Provided: _____ Back _____ Side _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) WOT 8-5-91

Ceiling:
1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:
1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
Action: _____ Approved _____
Date: 8/2/91

Chimneys:
Type: _____ Number of Fire Places _____
Heating: Type of Heat: _____

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

Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:
1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By: _____
Signature of Applicant: W. J. White Date: 8/2/91
Signature: W. J. White Date: _____
Inspection Dates: _____

White-Tax Assessor _____ Yellow-GPCOG _____ White Tag -CEO 12 1988

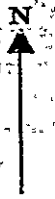
PERMIT ISSUED
AUG 7 1991
CITY OF PORTLAND

PERMIT ISSUED
W. J. White

PROJECT

PLOT PLAN

1001 - 01A



NO. 1001 - 01A

FEES (Breakdown From Front)

Base Fee \$ 95.00
 Subdivision Fee \$
 Site-Plan Review Fee \$
 Other Fees \$
 (Explain)
 Late Fee \$

Type	Inspection Record	Date
Done		6/18/91

COMMENTS 2 sheets of plans submitted

Signature of Applicant *J.H. White*

Date August 2, 1991



CITY OF PORTLAND, MAINE

389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

August 6, 1991

J. White Associates
385 West Street
Biddeford, ME 04005

Re: 84-D-9 Island Avenue, Peaks Island


Dear Sirs:

Your application to replace a patio, six stairs, door and bulkhead has been reviewed and a permit is herewith issued subject to the following requirements:

1. The proposed deck shall have a guard along open-sided areas, at least 36 inches in height.
2. Ballusters or other construction shall be constructed so that a sphere with a diameter of 4 inches cannot pass through any opening.
3. All handrails shall not be less than 34 inches or more than 38 inches in height.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

/kby

Proposal

FROM	J WHITE ASSOCIATES 385 West St. Biddeford, Me. 04005	283-1875	Proposal No.
			Sheet No.
			Date

Proposal Submitted	Work To Be Performed At
Name <u>Kalper Wilson</u>	Street <u>Same</u>
Street <u>Jeannette Jacobs</u>	City _____ State _____
City <u>Island Ave.</u>	Date of Plans _____
State <u>Peaks Island, Me.</u>	Architect _____
Telephone Number <u>766-3311</u>	

We hereby propose to furnish all the materials and perform all the labor necessary for the completion of

450 sq. ft. deck incl. pressure treated 2x8 framing,
5/4x6 TK red cedar decking, stairs to deck, steps from
deck to house, 20 ft. deck seat and railings on high sides
20 ft. privacy fence incl. pressure treated posts, 2 self-
closing gates and 1x4 or 1x6 A or better red cedar pickets.
1 HI Bulkhead incl. block foundation w/ footing and sealer,
with 2'8"x6'8" steel door below.
replace existing stairs at LH entrance pressure treated
stringers with red cedar treads incl. railings.

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of Not to exceed Dollars (\$15,000.00).
with payments to be made as follows:
\$5,000.00 down, remainder as job progresses

Any alteration or deviation from above specifications involving extra costs, will be excused only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance upon above work. Workmen's Compensation and Public Liability Insurance on above work to be taken out by J White Associates

Respectfully submitted Jeff White

Per _____

Note: This proposal may be withdrawn by us if not accepted within _____ days

ACCEPTANCE OF PROPOSAL

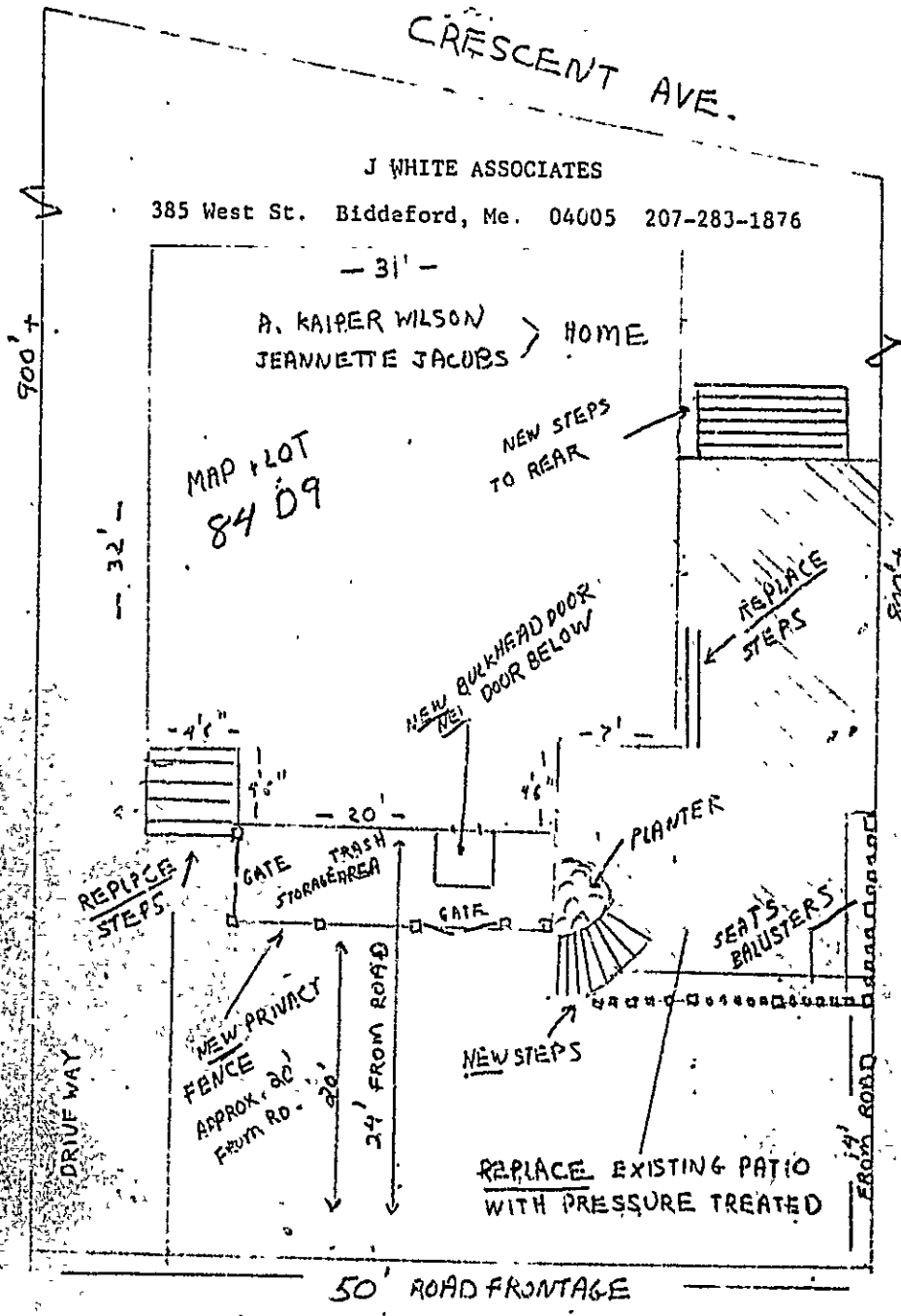
The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Accepted _____	Signature _____
_____	Signature _____

CRESCENT AVE.

J WHITE ASSOCIATES

385 West St. Biddeford, Me. 04005 207-283-1876



MAP LOT 84 09

A. KAIPER WILSON HOME
JEANNETTE JACOBS

DRIVE WAY

50' ROAD FRONTAGE

ISLAND AVE., Peaks Island

15,000.