

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289 3826

PROPERTY ADDRESS

Town Or Plantation: Peaks Island

Street Subdivision Lot #: Island Ave

PROPERTY OWNERS NAME

Last: Brookman First: Gary

Applicant Name: Erik E. Thomsen

Mailing Address of Owner/Applicant (If Different): 92 Glenham West Portland, 04102

Caution: Permit Required

PORTLAND COP

Date Permit Issued: 8/24/90 Fee: \$112.11

Local Plumbing Inspector Signature: [Signature] L.P.I. # _____

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 Inspector to deny a Permit.

Signature of Owner/Applicant: Erik E. Thomsen Date: 8/24/90

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: [Signature] Date Approved: 5-20-91

PERMIT INFORMATION

This Application is for

1. NEW PLUMBING

2. RELOCATED PLUMBING

SEP 7 - 1990

Type Of Structure To Be Served:

1. SINGLE FAMILY DWELLING

2. MODULAR OR MOBILE HOME

3. MULTIPLE FAMILY DWELLING

4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. MASTER PLUMBER

2. OIL BURNERMAN

3. MFG'D HOUSING DEALER/MECHANIC

4. PUBLIC UTILITY EMPLOYEE

5. PROPERTY OWNER

LICENSE # 10,2,6,4,71

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<p>HOOK-UP, to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District</p> <p>OR</p> <p>HOOK-UP, to an existing subsurface wastewater disposal system</p>		Hosebibb / Silcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	0.1	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	0.1	Clothes Washer
	0.1	Grease/Oil Separator	0.1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	0.1	Laundry Tub
		Other: _____		Water Heater
Number of Hook Ups & Relocations				
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				JOINTING
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

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HHE 211 Rev. 8/88

OWN COPY

\$12

900735

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$120.00 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Cary Brakman & Tatyanna Seregin Phone # 766-2661
Address: Island Ave., P. I. 04108
LOCATION OF CONSTRUCTION Island Ave., Peaks Island (84-T-4)
Contractor: Steven Nilsen - Evergreen Bldg. & Design, Inc. Sub: _____
Address: P.O. Box 7637, Port. 04112 Phone # 774-8287
Est. Construction Cost \$20,000.00 Proposed Use: sin. fam.
Last Use: same
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 Renovations to exist. dormer and kitchen, 3 sheets

For Official Use **PERMIT ISSUED**
Date July 5, 1990 Subdivision _____
Name JUL 6 1990
Inside Fire Limits _____ Lot _____
Bldg Code _____ Ownership City of Pe Public _____ Private _____
Time Limit _____
Estimated Cost 20,000.00
Zoning: TB/R-2
Street Frontage Provided _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required: No increase in footprint
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) on WDA - 7-6-90

of 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 _____

Ceiling:
1. Ceiling Joists Size: _____
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 _____

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: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Joyce M. Rinaldi

Signature of Applicant Steve Nilsen, Contr. Flowing Date 7/5/90

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag - GPCOG
NO INCREASE IN FOOTPRINT OF BLDG # [] MA 1/1/90



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date 8/27/90, 1990
 Receipt and Permit number 1053

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: 84-J-4 Island Ave: Peaks Island
 OWNER'S NAME: Mary Brodman ADDRESS: same

OUTLETS: _____ FEES

Receptacles 28 Switches 20 Amps: _____ ft. TOTAL 48 5.00

FIXTURES: (number of)
 Incandescent 5 Fluorescent _____ (not strip) TOTAL 5 3.00
 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 _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers 1
 Dryers 1 Compactors _____
 Fans _____ Others (denote) _____
 TOTAL 2 3.00

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 _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE:
 FOR REMOVAL OF A "STOP ORDER" (304-16 b) DOUBLE FEE DUE:

TOTAL AMOUNT DUE: 11.00

INSPECTION
 Will be ready on now 1990; or Will Call _____
 CONTRACTOR'S NAME: Argent Air/NEIS
 ADDRESS: Argent Air/NEIS, Peaks Island
 TEL: 66-2730
 MASSIVE LICENSE NO: Wm. J. Lynch 145 SIGNATURE OF CONTRACTOR: _____
 LIMITED LICENSE NO: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 01534

Location 84-11-A 1st level East

owner GARRA & SON/Keenad

Date of Permit 8-22-90

Final Inspection 8-22-90

By Inspector S. B. J. / J

Permit Application / order Page No. 24

INSPECTIONS: Service _____ by _____

Service called _____

Closing-in 8-28-90 by S.B.J.

PROGRESS INSPECTIONS:

8-28-90

DATE: REMARKS:

Table with 2 columns: DATE, REMARKS. Multiple rows of horizontal lines for entry.