

928633

Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone _____ Map # _____ Lot# _____

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

Owner: Michael & Rosa Iovino Phone # 766-2484
 Address: Pleasant Ave; Peaks Island, ME 04108
 LOCATION OF CONSTRUCTION Pleasant Ave; Peaks Island
 Center for _____ Sub. 88-1-24
 Address _____ Phone # _____
 Est. Construct Cost 1000 Proposed Use 1-fam w shed
 Past Use 1-fam
 # of Existing Res Units _____ # of New Res Units _____
 Building Dimensions L _____ W _____ Total Sq Ft _____
 # Store _____ # Bedrooms _____ Lot Size _____
 is Proposed Use Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion construct shed - 10'x19' 15'

For Official Use Only
 Subdivision _____
 Date 5/5/92 Name MAY 11 1992
 Inside Fire Limits _____ Lot _____
 Bldg Code _____ Ownership CITY OF PORTLAND
 Time frame _____
 Estimated Cost 1000

Zoning: IR-2
 Street Frontage Provided _____
 Provided Setbacks Front _____ Each _____ Side _____
 Review Required: for setback 30'
 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 _____
 (the _____) (Explain) 5-8-92 HISTORIC PRESERVATION

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

Floors:
 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 Material _____
 11 Other Materials _____

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

Ceilings:
 1 Ceiling Joists Size _____
 2 Ceiling Strapping Size _____ Spacing _____
 Type Ceilings _____
 Insulation Type _____ Size _____
 Ceiling Height _____
 Action Approved

Roof:
 1 Truss or Rafter Size _____ Span _____
 2 Sheathing Type _____ Size _____
 3 Roof Covering Type _____
 Date: _____
 Signature: _____

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 Fixtures _____
 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 Code

Permit Received By Louise F. Chase WITH REQUIREMENTS

Signature of Applicant Rosa Iovino Date 5-5-92

CFO's District Rosa Iovino

CONTINUED TO REVERSE SIDE J.G. MA, Rowe
 Ivory Tag - CEO

White - Tax Assessor

PERMIT ISSUED
 WITH REQUIREMENTS

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