

OCEAN STREET
91-G-16-17-35

PEAKS ISLAND

Fed

PERMIT TO INSTALL PLUMBING Ocean Ave

Date Issued June 24, 1974
Portland Plumbing Inspector
By ERNOLO R GOODWIN

Address: 91-G-17-16-35 8000 PERMIT NUMBER 3717
Installation No. 1 fam.
Owner of Bldg: Charles James Wright
Owner's Address: same

Plumber: owner Date: 6-24-74

App. First Insp.

Date By 2/1/75

App. Final Insp.

Date

By

- Type of Bldg.
- Commercial
 - Residential
 - Single
 - Multi Family
 - New Construction
 - Remodeling

NEW	REPL		NO	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
<u>1</u>		SEPTIC TANKS <u>1 Gal.</u>	<u>1</u>	<u>2.00</u>
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		Base Fee		<u>3.00</u>
			TOTAL	<u>1 5.00</u>

Building and Inspection Services Dept. Plumbing Inspection

901986

Permit # City of Portland BUILDING PERMIT APPLICATION Fee 395 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

395
550

For Official Use Only
Subdivision Name _____
Lot _____
Public _____

PERMIT ISSUED
Date OCT 2 1990

Owner: Steven Brooks Phone (503) 753-9277
Address: 22 Old S b Rd; Ridgefield, CT 06877

Issue Date: 8/14/90
Type Code: _____
Time Limit: _____
Estimated Cost: 75,000

Ownership: City of Portland

LOCATION OF CONSTRUCTION: Peaks Is - Ocean Ave - 91-G-35, 10, 11, 12
Contractor: owner Sub: _____ Phone # _____

Street Frontage Provided _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required: _____
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) _____

Address: _____
Est. Construction Cost: 75,000 Proposed Use: 1-family dwelling
Past Use: vacant lot

of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions: L 36' W 42' Total Sq. Ft. _____

Stories: 2 # Bedrooms: 2 Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion: CONSTRUCT ONE-FAMILY DWELLING

Other (Explain) _____
Ceiling: 1. Ceiling Joist Size _____ Spacing _____
2. Ceiling Strapping Size _____
3. Type Ceilings: _____
4. Insulation Type _____
5. Ceiling Height: _____

Roof: 1. Truss or Rafter Size _____
2. Sheathing Type _____
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 _____
2. No. of Tubs or Showers _____
3. # of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

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

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

Floor: 1. Sills Size: _____
2. Girder Size: _____ Size: _____ Spacing 16" O.C.
3. Lvl. Spacing: _____
4. Joist Size: _____ Size: _____
5. Bridging Type: _____
6. Floor Sheathing Type: _____
7. Other Material: _____

Septic tank & bed installed 12/1/78 (#3717)
Sills must be anchored.

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

Interior Walls: 1. Studding Size _____ Spacing _____
2. Header Sizes _____ No. _____
3. Siding _____ Yes _____ No _____
4. Corner Posts Size _____ Size _____
5. Insulation Type _____ Size _____
6. Sheathing Type _____ Weather Exposure _____
7. Siding Type _____
8. Masonry Materials _____
9. Metal Materials _____

Other Material: _____
White-Tax Assessor _____ Yellow-GPCOG _____

Permit Received By: Louise
Signature of Applicant: Steven Brooks
Signature of CEO: _____
Inspection Dates: _____
White Tag - CEO: _____

PERMIT ISSUED
DATE
SEAL
OFFICER

Copyright GPCOG 1988