

February 11, 1987

PERMIT # BUILDING PERMIT APPLICATION **Portland** Previous permit #
APPLICANT FILL OUT I - VIII AND DETAILS OF WORK ON REVERSE
Please insert N/A (not applicable) for any item not pertaining to your request

I. GENERAL INFORMATION
Location/address of construction 92-F-25 Evergreen Landing, Peaks Isl.
Owner or lessee's name Barbara Filipos Tel. 766-2345
Address same
Contractor's name Maine Line Renovations Tel. 766-2438
Address Isl. Ave. Ply. Tel. 04108

Subcontractors _____
FEB 12 1987
City of Portland

II. NEW SUBDIVISION OR EXISTING LOT-REFERENCE	
Name	
Lot	<u>92</u>
Block	<u>F-25</u>
Bk. & pg. Reg. / deeds	
Date recorded	

III. PROPOSED USE: 101 - single family dwelling CODE: If other, explain _____
IV. PAST USE: same
V. OWNERSHIP: PUBLIC (Federal/State/local government) ind. PRIVATE (individual/corp/nonprofit)

VI. DESCRIPTION OF WORK:
To remove 14'8" of bearing wall between living room & porch, enclosing 250 sq ft of porch as per plans. 3 sheets of plans.
send permit to # 2
VII. BUILDING DIMENSIONS: length 28 width 30 square footage 1,100 height _____ #stories 2

VIII. EST. CONSTRUCTION COST: 5,700 IX. GR. SQ. FT. OF LAND: _____ BUILDING _____

X. RESIDENTIAL BUILDINGS ONLY:			XI. RESIDENTIAL UNITS	
BEDROOMS	1 BDRMS	2 BDRMS	3 BDRMS	* NEW DWELLINGS
				* EXISTING DWELLINGS
* NEW DWELLING UNITS WITH:				* NET RESIDENTIAL UNITS
* EXISTING DWELLING UNITS WITH:				

XII. SIGNATURE OF APPLICANT: Barbara Filipos DATE: 11-87

XIII. ZONING: DISTRICT _____ STREET FRONTAGE _____
SETBACKS: front _____ back _____ side _____ side _____
ZONING BOARD APPROVAL: no yes (date) _____
PLANNING BOARD APPROVAL: no yes (date) _____
XIV. OFFICE USE: TAX MAP _____ LOT _____ VALUE/STRUCTURE _____ PERMIT EXPIRATION _____

XV. CONDITIONAL USE: variance _____ site plan _____ subdivision _____ shore and floodplain mgmt _____
special exception _____ other _____ (explain) _____

XVI. SIGNATURE OF FIELD INSPECTOR (CEO) _____ DATE _____

XVII. FEES:
base fee _____
subdivision fee _____
site plan review fee _____
other fees _____
late fee _____
TOTAL 50.00

XVIII. SPACE FOR FIGURING / ADDITIONAL COMMENTS:
12 Feb / 87 TALKED WITH CONTRACTOR
8" X 6" COLUMNS WILL TRANSFER LOAD DOWN
ONTO FOUNDATION

1. WATER SUPPLY <input checked="" type="checkbox"/> public <input type="checkbox"/> private	8. CHIMNEY * flues * fireplac material
2. SEWER <input type="checkbox"/> public <input checked="" type="checkbox"/> private, type	9. FRAMING: floor joists
3. HEAT type fuel	size max on centers
4. FOUNDATION type thickness footing	ceiling joists
5. ROOF type pitch covering load	rafters
6. PLUMBING * tubs * showers * lavatories * laundry tubs * flushes * other	studs
SPRINKLER SYSTEM? <input type="checkbox"/> yes <input type="checkbox"/> no	wall studs
7. ELECTRICAL service entrance size * smoke detectors	10. If 1-story building w/ masonry walls: wall thickness height
NUMBER OF OFF-STREET PARKING SPACES: enclosed outdoors	11. BEDROOM WINDOWS height width sill height egress window? <input type="checkbox"/> yes <input type="checkbox"/> no

PLOT PLAN/DETAILS OF WORK ON REVERSE
White - Municipal Office
Green - Applicant
Yellow - CEO
Pink - Tax Assessor
Gold - (R) JB

12 Mr. Addate

6-3-87 - all complete
 OK as per plans *leg*

PROJECT INFORMATION
 CONTRACT NO. _____
 SHEET NO. _____
 DATE _____

DESCRIPTION OF WORK

APPROVED USE

DESIGNER

XIII. ZONING
 DISTRICT _____
 SETBACK (S. Front) _____
 PLANNING BOARD APPROVAL (yes) (no)

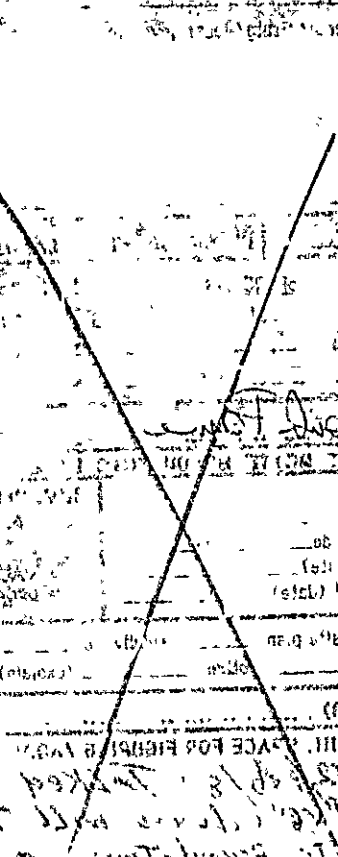
XIV. SIGNATURE OF THE INSPECTOR (S.I.)

XV. CONDITIONAL USE

XVI. FEES
 subdivision fee _____
 other fee _____
 total fee _____

XVII. SPACE FOR FIGHTER PLAN (if applicable)

1. WATER SUPPLY <input type="checkbox"/> Sample (L) _____	2. HEAT TYPE _____
3. FOUNDATION TYPE _____	4. FLOORING _____
5. ELECTRICAL SYSTEM <input type="checkbox"/> Yes <input type="checkbox"/> No	6. NUMBER OF STREET PARKING SPACES _____
7. BEDROOM WINDOWS _____	8. OTHER _____



leg

DRAWINGS FOR BUILDING PERMIT:

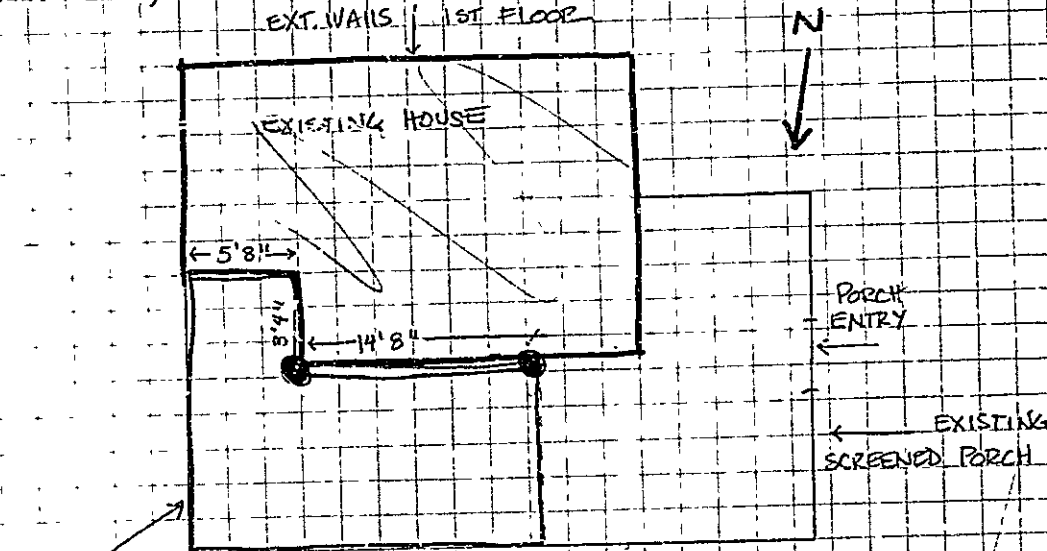
OWNER: BARBARA FILIPPO
EVERGREEN LANDING
PEAKS ISLAND, ME
LOT # (92-F-15 & 25)

PERMIT FOR:

REMOVING 14' 8" OF BEARING WALL BETWEEN LIVING ROOM & PORCH. ENCLOSING 250 SQ FT. OF PORCH W/ 2X4 TYPICAL STUD WALL CONSTRUCTION CREATING NEW EXTERIOR WALLS WITH NEW WINDOWS AS INDICATED.

Call 11/Feb./87 @ 2:30 Answering Service
Left message

CONTRACTOR: MAINE LINE RENOVATIONS 766-2438 DEBORAH PAINE
ISLAND AVE, PEAKS ISLAND



EXISTING SCREENED PORCH

* GREEN LINES INDICATED PROPOSED AREA OF FRONT PORCH TO BE REMODELED & ENCLOSED
* RED LINE IS NEW BEARING BEAM TO BE INSTALLED 6X12 ON 6X6 POSTS

RECEIVED
FEB 11 1987
DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

FILIPPOS

SECOND STORY ABOVE LIVING ROOM

7'10"

6x12 BEARING BEAM

WILL CARRY

6x6 Post

5927

9590

PORCH ROOF TOP PLATE 4x4
HEADER 2-2x4 w/ 1/2" PLYWOOD SPACER

TYPICAL STUD WALL 2x4 16" O.C. SHOWING FIXED PANEL WINDOW INSTALLATION (36" X 76")

HEADERS 2-2x4 w/ 1/2" PLYWOOD SPACER
4x4 TOP PLATE

TYPICAL DOUBLE HUNG WINDOW INSTALLATION -
WINDOW RO. IS 2'6" X 3'6"
2x4 STUDS 16" O.C.

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND
FEB 1 1987

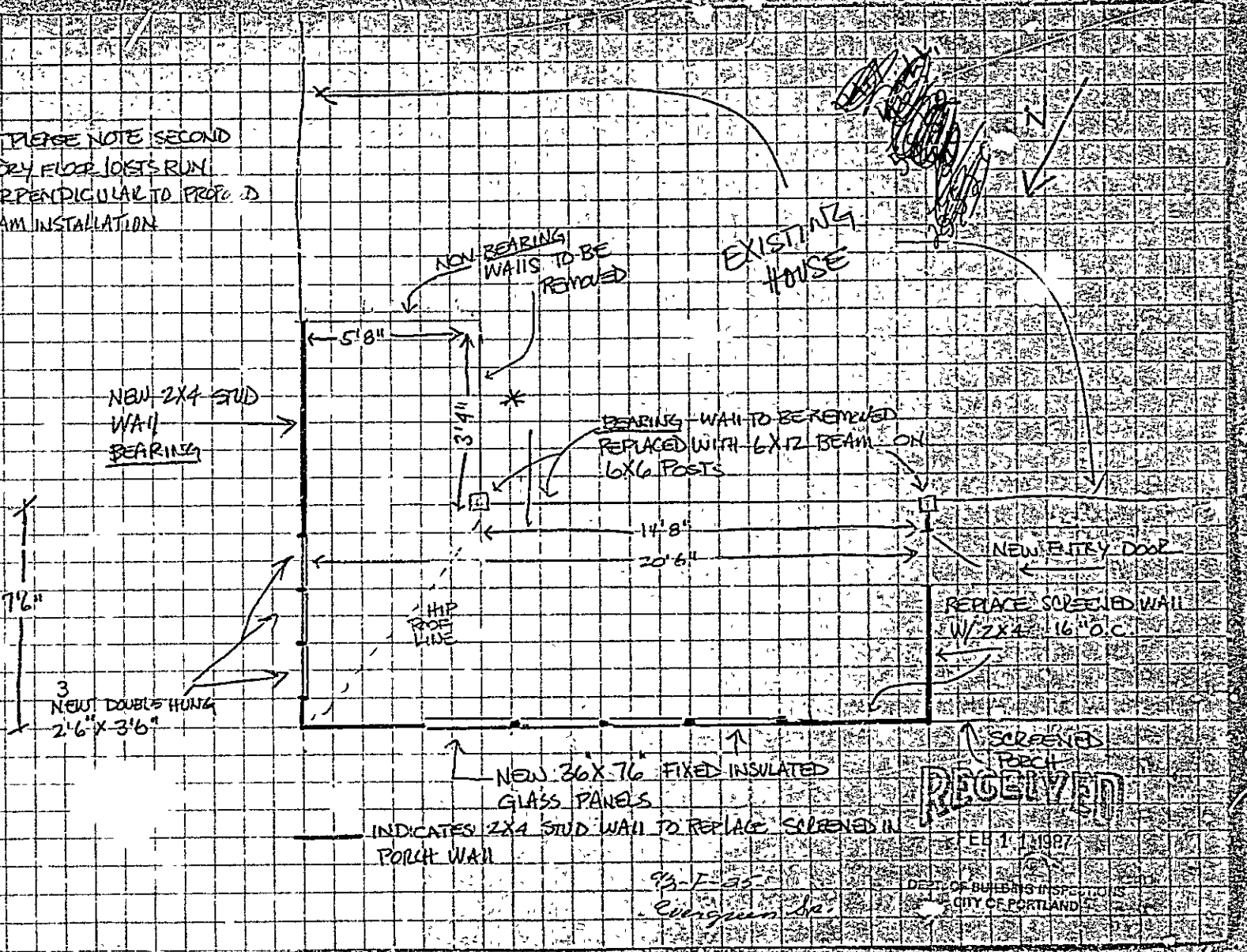
RECEIVED

* ALL CONSTRUCTION SHALL CONFORM TO CITY / BOCA CODES

76-F-25
Evanston Ave.

FILLOS

* PLEASE NOTE SECOND STORY FLOOR JOISTS RUN PERPENDICULAR TO PROP. D BEAM INSTALLATION



EXISTING HOUSE

NEW 2x4 STUD WALL BEARING

NON-BEARING WALLS TO BE REMOVED

BEARING WALL TO BE REMOVED REPLACED WITH 6x12 BEAM ON 6x6 POSTS

NEW ENTRY DOOR

REPLACE SCREENED WALL W/ 2x4 @ 16" O.C.

NEW 36x76 FIXED INSULATED GLASS PANELS

INDICATES 2x4 STUD WALL TO REPLACE SCREENED IN PORCH WALL

SCREENED PORCH RECEIVED

EB 1 1997

93-F-35
Ewing Jr.

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 30, 1987
 Receipt and Permit number 09350

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: 92-F-25 Evergreen Landing

OWNER'S NAME: Barbara Filipos ADDRESS: same

OUTLETS:		FEES
Receptacles _____	Switches _____	
Plugmold _____	ft. TOTAL <u>1-30</u>	3.00

FIXTURES: (number of)		
Incandescent _____	Flourescent _____ (not strip)	TOTAL _____
Strip Flourescent _____	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 _____		
Dryers _____	Compactors _____		
Fans _____	Others (denote) _____		
TOTAL _____			

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: <u>5.00</u>

INSPECTION: Will be ready on X 19; or Will Call _____

CONTRACTOR'S NAME: William Flynn

ADDRESS: Peaks Island

TEL: 766-2780

MASTER LICENSE NO.: 4548 SIGNATURE OF CONTRACTOR: William Flynn

LIMITED LICENCE NO.: _____

