940116

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $10 Zone___ ___Map #_____Lot# ___ ___

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

Owner: St. Patricks School Phone # 772-2521

Address: 2551 Congress St. - Ptld, ME 04102

LOCATION OF CONSTRUCTION 2521 Congress St.

Contractor:_____ Sub.:_____

Address:_____ Phone #_____

Est. Construction Cost:_____ Proposed Use: schl w sign

_____ Past Use: schl

# 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 erect temporary sign - 3/14/94 to 3/26/94

For Official Use Only

Date 2/28/94

Inside Fire Limits

Bldg Code

Time Limit

Estimated Cost

Subdivision

Name

Lot

Ownership: Private Public

PERMIT ISSUED

MAR - 1 1994

CITY OF PORTLAND

Zoning:

Street Frontage Provided:_____

Provided Setbacks: Front_____ Back_____ Side_____ 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)_____

3-1-94

HISTORIC PRESERVATION

Not in District or Landmark

Does not require review.

Requires Review.

Action: Approved.

Approved with Conditions.

Denied

Signature:

Date:

Foundation: (no plan, drawing - per Wm Groux)

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 Size_____ 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 Louise . Chase

Signature of Applicant Charles Lander Date 2/28/94

CEO's District_____

CONTINUED TO REVERSE SIDE

4 Kevin Carroll

White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 10 —
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT — ADDRESS — PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE — PHONE NO.