

Permit # 900521 City of Portland BUILDING PERMIT APPLICATION Fee \$520. Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form. M-M site Plan - \$50.

Contractor: John K. Sorensen Phone # 846-9075
 Address: 3 Penny Royal Ct; Yarmouth, ME 04096
 LOCATION OF CONSTRUCTION: Lot #24; Birchwood Dr
 Contractor: Builders Foundatio Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: 1-family dwlg
 Past Use: _____
 # 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 new construction - 1-family dwlg

For Official Use Only PERMIT ISSUED
 Date: 5/9/90 Subdivision: _____ Name: _____
 Inside Fire Limits: _____ Lot: BM 15-1900
 Bldg Code: _____ Ownership: _____ Public _____
 Time Limit: _____
 Estimated Cost: 100,000 City of Portland
 Zoning: R-3 Residence
 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 _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain): OK WPA 6-17-90

Foundation: 27' x 54'
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other: _____

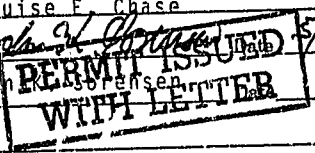
Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

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 _____
 3. Wall Covering Type _____
 4. Fire Walls, if required _____
 5. Other Details _____

Ceilings:
 1. Ceiling Joists Size: _____ Spacing _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____ Size _____
 4. Insulation Type _____
 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 Footag _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise F. Chase
 Signature of Applicant John K. Sorensen Date 5/9/90
 Signature of CEO _____
 Inspection Dates _____
 White-Tax Assesor _____ Yellow-GPCOG _____ White Tag -CEO _____
 Copyright GPCOG 1988



PLUMBING APPLICATION

PROPERTY ADDRESS
Town Or Plantation: PORTLAND, ME
Street Subdivision Lot #: LOT 24 BIRCHWOOD DR
PROPERTY OWNER'S NAME
Last: Sorenson First: JOHN
Applicant Name: PAUL D. RUBIER
Mailing Address of Owner/Applicant (if Different): BOX 815 RAYMOND, ME 04071

PORTLAND 3956 TOWN COPY
Date Permit Issued: 10/27/90 \$ 111.50 FEE Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 1123

Owner/Applicant Statement
I certify that the information submitted is true 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: [Signature] Date: 10/27/90

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: _____ Date Approved: 10 26 1990

PERMIT INFORMATION

This Application is for
1. NEW PLUMBING
2. RELOCATED PLUMBING (1991)
AUG 29 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 # 1704

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	2	Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
OR HOOK-UP: to an existing subsurface wastewater disposal system.		Urinal		Sink
		Drinking Fountain	1	Wash Basin
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filler, etc.		Clothes Washer
Number of Hook-Ups & Relocations		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Hot Hook-Up & Relocation Fee		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			5	Total Fixtures
			\$ 15.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 15.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PLUMBING APPLICATION

PROPERTY ADDRESS:
Town Or Plantation: Portland, Me
Street Subdivision Lot #: LOT 24 BIRCHWOOD DR
PROPERTY OWNERS NAME:
Last: Sorenson First: John
Applicant Name: Paul D Bubiak
Mailing Address of Owner/Applicant (If Different): Box 915 RAYMOND, ME 04071

PORTLAND 3962 TOWN COPY
Date Permit Issued: 8/29/90 \$ 11.23 FEE Charged Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 1123

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.
Paul D. Sorenson 8/29/90
Signature of Owner/Applicant Date

Caution: Inspection Required
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.
[Signature]
Local Plumbing Inspector Signature **AUG 30 1990**

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input checked="" type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>1704</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bath'ub (and Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
Number of Hook-Ups & Relocations		Grease/Oil Separator		Dish Washer
\$ <u>4</u> Hook-Up & Relocation Fee		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (\$ subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)
				\$ <u>6</u>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION

Birchwood Drive

Issued to John Sorensen

Date of issue February 5, 1991

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 90-9521, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

entire

single family dwelling

Limiting Conditions:

This certificate supersedes
certificate issued November 16, 1990

Approved:

1/27/91
(Date) Inspector

Samuel Hoff
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.