

902027

Building Permit \$305.

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Form # 555 x Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.  
Minor-Minor Site Plan - \$50.

Owner: E & L Builders Phone # 797-9970  
Address: 68 Euclid Ave; Ptd 4E 04103  
LOCATION OF CONSTRUCTION Lot #63; Palmer Ave. (Deering St) Subd.  
Contractor: OWNER #347 Sub:  
Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
Est. Construction Cost: 57,000. Proposed Use: 1-fa. dwelling  
Past Use: vacant lot  
# of Existing Res. Units: \_\_\_\_\_ # of New Res. Units: \_\_\_\_\_  
Building Dimensions L: 36' W: 24' Total Sq Ft: \_\_\_\_\_  
# Storerooms: \_\_\_\_\_ # Bedrooms: 2 Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion Construct a one-family dwelling w garage  
(attached)

**For Official Use Only PERMIT ISSUED**  
Date: 9/26/90 Subdivision: \_\_\_\_\_ Name: OCT 17 1990  
Inside Fire Limits: \_\_\_\_\_ Lot: \_\_\_\_\_  
Blg Code: \_\_\_\_\_ Ownership: Public  
Time Limit: \_\_\_\_\_ City Of Portland  
Estimated Cost: 57,000.

Zoning: R-2  
Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
Review Required: see condition Date: \_\_\_\_\_  
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 with 11-12-90

**HISTORIC PRESERVATION**  
Ceiling: \_\_\_\_\_  
1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor landmark.  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.  
3. Type Ceilings: \_\_\_\_\_ Requires Review.  
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
5. Ceiling Height: \_\_\_\_\_

Roof: \_\_\_\_\_ Action: \_\_\_\_\_  
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Approved with Conditions.  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
3. Roof Covering Type \_\_\_\_\_ Date: \_\_\_\_\_  
Chimneys: \_\_\_\_\_ Signature: \_\_\_\_\_  
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 E. C...  
Signature of Applicant Stan Eaton Date: \_\_\_\_\_  
Signature of CEO \_\_\_\_\_ Date: \_\_\_\_\_  
Inspection Dates \_\_\_\_\_

**PERMIT ISSUED WITH LETTER**

Foundation:  
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. Joist/Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_ Spacing 16" O.C.  
4. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
5. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
6. Other Material: \_\_\_\_\_  
Exterior Walls:  
1. Stud Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
2. No. windows: \_\_\_\_\_  
3. No. Doors: \_\_\_\_\_  
4. Header Size: \_\_\_\_\_ Span(s) \_\_\_\_\_  
5. Sill Size: \_\_\_\_\_ No. \_\_\_\_\_  
6. Corner Posts Size: \_\_\_\_\_ Size \_\_\_\_\_  
7. Insulation Type: \_\_\_\_\_ Size \_\_\_\_\_  
8. Sheathing Type: \_\_\_\_\_ Size \_\_\_\_\_  
9. Siding Type: \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
10. Exterior Materials: \_\_\_\_\_  
11. Metal Materials: \_\_\_\_\_  
12. Wall: \_\_\_\_\_  
13. Siding Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
14. Header Size: \_\_\_\_\_ Span(s) \_\_\_\_\_  
15. Wall Covering Type: \_\_\_\_\_  
16. Wall if required: \_\_\_\_\_  
17. Other: \_\_\_\_\_

White-TRA Assessor Yellow-GPCOG White Tag -CEO [H] Copyright GPCOG 1988 [MR. LEARY]

923522

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 40.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Dale & Mary Heselton Phone # 797-8214  
Address: 345 Palmer Ave  
LOCATION OF CONSTRUCTION 345 Palmer Ave  
Contractor: Stan Eaton Sub: \_\_\_\_\_  
Address: 49 Euclid Ave Ptd 04103 Phone # 878-2019  
Est. Construction Cost: 3,800.00 Proposed Use: 1-fam w/dormer  
Past Use: 1-fam  
# of Existing Res Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq Ft. \_\_\_\_\_  
# Storerooms \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion Erect full dormer to 1-fam dwelling

For Official Use Only  
Date March 31, 1992 Subdivision Name APR - 8 1000  
Inside Fire Limits \_\_\_\_\_ Lot \_\_\_\_\_  
Bldg Code \_\_\_\_\_ Ownership: CITY OF PORTLAND  
Time Limit \_\_\_\_\_  
Estimated Cost \_\_\_\_\_

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) WPA 4-2-92

Foundation:  
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(s) \_\_\_\_\_  
3. Wall Covering Type \_\_\_\_\_  
4. Fire Wall if required \_\_\_\_\_  
5. Other Materials \_\_\_\_\_

Ceiling:  
1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District nor Landmark.  
2. Ceiling Strapping Size \_\_\_\_\_ Does not require review.  
3. Type Ceilings: \_\_\_\_\_  
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Requires Review.  
5. Ceiling Height: \_\_\_\_\_

Roof:  
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action APPROVED  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with Conditions  
3. Roof Covering Type \_\_\_\_\_

Chimneys:  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date 4/2/92  
Signature: \_\_\_\_\_

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 Mary Gresik Date March 31, 1992  
Signature of Applicant [Signature] CEO's District 2

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

[Signature] M.A. M. [Signature]



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 345 Palmer Ave.

Issued to E & L Builders

Date of Issue 2/20/91

This is to certify that the building, premises, or part thereof, at the above location, built or changed as to use under Building Permit No. 90/2027, 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

First floor only

Single-family

Limiting Conditions: Repair of site damage must be completed by June 1, 1991.

Two trees to be planted by May 1, 1991.

The unfinished second floor will have to have permits when work starts.

This certificate supersedes certificate issued:

Approved:

*[Signature]*  
Inspector

*[Signature]*  
Inspector of Buildings

(Date)

SB

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 year.

902027

Building Permit 305.

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot # \_\_\_\_\_  
Minor-Minor Site Plan - \$50.

Owner: W&L Builders Phone # 797-9970  
 Address: 68 Euclid Ave; Prld, ME 04103  
 LOCATION OF CONSTRUCTION Lot #63; Palmer Ave. (Deering Subd.)  
 Contractor: owner # 342 Sub # \_\_\_\_\_  
 Address: # 345 Palmer Phone # \_\_\_\_\_  
 Est. Construction Cost: 57,000. Proposed Use: 1-fam dwelling  
 Past Use: vacant lot  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L 36' W 24' Total Sq. Ft. \_\_\_\_\_  
 # Stories: 1 & 1/2 # Bedrooms 2 Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Expired Conversion Construct a one-family dwelling w garage (attached)

For Official Use **PERMIT ISSUED**  
 Subdivision: \_\_\_\_\_ Name: \_\_\_\_\_  
 Date: 9/25/90 Lot: OCT 15 1990  
 Inside Fire Limits: \_\_\_\_\_  
 Risk Code: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_  
 Estimated Cost: 57,000.  
 Zoning: R-2  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required: see condition  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (explain): OK W&L 10-12-90

Foundations: 2-12-91  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_  
 3. Footings Size: address is: 345 Palmer  
 4. Foundation Size: \_\_\_\_\_  
 5. Other: Date + Mary Herelton (per PW)  
 Floor: \_\_\_\_\_  
 1. Sills Size: \_\_\_\_\_  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_ Sp diag 16" O.C.  
 4. Joists Size: \_\_\_\_\_ Size: \_\_\_\_\_  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. 1 floor Sheathing Type: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Ceiling: \_\_\_\_\_  
 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 \_\_\_\_\_ Action: \_\_\_\_\_ Approved \_\_\_\_\_  
 2. Sheathing Type: \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type: \_\_\_\_\_  
 Chimneys: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Type: \_\_\_\_\_

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: Stan E  
 Signature of CEO: \_\_\_\_\_  
 Inspection Date: \_\_\_\_\_

**PERMIT ISSUED**  
**WITH LETTER**  
 26-90

Exterior Walls: \_\_\_\_\_  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_ Span(s) \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_ Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_  
 Interior Walls: \_\_\_\_\_  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

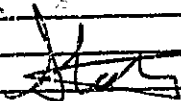
OP-05-P White-Tax Assesor Yellow-GPCOG White Tag-CEO 44 Copyright GPCOG 1988

PLOT PLAN



FEES (Breakdown From Front)	Type	Inspection Record	Date
Base Fee \$ 305			
Subdivision Fee \$			
Site Plan Review Fee \$ 50			
Other Fees \$			
(Explain)			
Late Fee \$			

COMMENTS 10-30-90 No work yet 12-5-90 Foundation & 2nd floor OK  
12-27-90 Grading & all completed, 2-19-91 OK for City of Cincinnati  
for trees & fencing of site

Signature of Applicant 

Date 9-26-90

Applicant: *E+L Builders - Stan Eaton* Date:  
Address: *345 Palmer Ave*  
Assessors No.: *353-C-8*

CHECK LIST AGAINST ZONING ORDINANCE

Date - *10-12-90*  
Zone Location - *R-2*  
Interior or corner lot -  
Use - *single*  
Sewage Disposal - *city*  
Rear Yards - *25' +* *25' req.*  
Side Yards -  
Front Yards - *25'* *25' req.*  
Projections - ~~*25'*~~ ~~*25'*~~ *bulkhead*  
Height - *1 1/2 stories*  
Lot Area - *13,734 sq ft*  
Building Area - *OK*  
Area per Family - *entire*  
Width of Lot - *80'*  
Lot Frontage - *80'*  
Off-street Parking - *2 cars*  
Loading Bays - *N/A*

Site Plan -

Shoreland Zoning -

Flood Plains -



CITY OF PORTLAND, MAINE

389 CONGRESS STREET  
PORTLAND, MAINE 04101  
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT  
October 12, 1990

P. SAMUEL HOFFSES, CHIEF  
INSPECTION SERVICES DIVISION

E&L Builders  
68 Euclid Avenue  
Portland, ME 04103

RE: 347 Palmer Avenue - Portland

Dear Sir:

Your application to construct a single family dwelling with attached garage has been reviewed and a permit is herewith issued subject to the following requirement(s).

No certificate of occupancy can be issued until all requirements of this letter are met.

Site Plan Review Requirements

Inspection Services - Approved - W. Hroux  
Public Works - Approved with requirements

1. Any damage to sidewalk, curb, or street must be repaired prior to issuance of Certificate of Occupancy (C of O).
2. Two approved trees must be planted on street frontage and your street number 347 Palmer must be affixed prior to issuance of C of O.

Building Code Requirements

Please read and implement items 1, 2, 6, 7, 8 & 9 of the attached building permit report.

If you have any questions regarding these requirement(s), please do not hesitate to contact this office.

Sincerely,

  
P. Samuel Hoffses  
Chief of Inspection Services

cc: Paul Niehoff - Public Works Department  
Steve Harris - Public Works Department

PSH/ljh

**CITY OF PORTLAND, MAINE**

*Step Harris*

**SITE PLAN REVIEW**

**Processing Form**

Applicant E & L Builders 797-9970 (Stan Eaton) # 347 Date 9/26/90  
 Mailing Address 68 Euclid Ave; Ptld, ME 04103 Palmer Ave. (Deering Run Subd)  
 Proposed Use of Site 1-family dwelling w garage Address of Proposed Site 353-C-8  
13,734 sq ft / 24'x36' Site Identifier(s) from Assessors Maps R-2  
 Acreage of Site / Ground Floor Coverage \_\_\_\_\_ Zoning of Proposed Site \_\_\_\_\_

Site Location Review (DEP) Required: ( ) Yes ( ) No Proposed Number of Floors \_\_\_\_\_  
 Board of Appeals Action Required: ( ) Yes ( ) No Total Floor Area \_\_\_\_\_  
 Planning Board Action Required: ( ) Yes ( ) No

Other Comments: \_\_\_\_\_  
 Date Dept. Review Due: \_\_\_\_\_

MINOR-MINOR SITE PLAN REVIEW

**PUBLIC WORKS DEPARTMENT REVIEW**

(Date Received) \_\_\_\_\_

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBS	SIDEWALKS	OTHER	
APPROVED																
APPROVED CONDITIONALLY																CONDITIONS SPECIFIED BELOW
DISAPPROVED																REASONS SPECIFIED BELOW

REASONS: Any damage to sidewalk, curb, or street must be repaired prior to issuance of CofO. Two approved trees must be planted on St. frontage and your St. number 347 Palmer must be affixed prior to issuance of CofO.

(Attach Separate Sheet if Necessary)

*Step K Harris*  
 SIGNATURE OF REVIEWING STAFF/DATE 10/8/90



**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

**Processing Form**

Applicant E & L Builders 797-9970 (Stan Eaton) 347 Date 9/26/90  
 Mailing Address 68 Euclid Ave; Ptld, ME 04103 Address of Proposed Site Lot #63, Palmer Ave. (Deering Run Subd)  
 Proposed Use of Site 1-family dwelling w garage 353-C-8  
 Acreage of Site / Ground Floor Coverage 13,734 sq ft/ 24'x36' Site Identifier(s) from Assessors Maps R-2  
 Zoning of Proposed Site \_\_\_\_\_

Site Location Review (DEP) Required: ( ) Yes ( ) No Proposed Number of Floors \_\_\_\_\_  
 Board of Appeals Action Required: ( ) Yes ( ) No Total Floor Area \_\_\_\_\_  
 Planning Board Action Required: ( ) Yes ( ) No

Other Comments: \_\_\_\_\_

Date Dept. Review Due: \_\_\_\_\_

**MINOR-MINOR SITE PLAN REVIEW**

**BUILDING DEPARTMENT SITE PLAN REVIEW**

(Does not include review of construction plans)

- Use does NOT comply with Zoning Ordinance
  - Requires Board of Appeals Action
  - Requires Planning Board/City Council Action

Explanation \_\_\_\_\_

- Use complies with Zoning Ordinance — Staff Review Below

Zoning: **SPACE & BULK, as applicable**

COMPLIES

COMPLIES CONDITIONALLY

DOES NOT COMPLY

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARD'S	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: OK WDH 10-12-90

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date 12/13/90, 19  
 Receipt and Permit number 01904

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: 347 Palmer Ave  
 OWNER'S NAME: Dale HXXXXXXXXX Haselton ADDRESS: same

	FEES
<b>OUTLETS:</b>	
Receptacles <u>30</u> Switches <u>20</u> Plugmold _____ ft. TOTAL <u>50</u> .....	<u>10.00</u>
<b>FIXTURES:</b> (number of)	
Incandescent <u>10</u> Fluorescent _____ (not strip) TOTAL <u>10</u> .....	<u>2.00</u>
Strip Fluorescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead <u>C.C.C.C.</u> Underground <u>X</u> Temporary _____ TOTAL amperes <u>100</u> ..	<u>15.00</u>
METERS: (number of) <u>1</u> .....	<u>1.00</u>
<b>MOTORS:</b> (number of)	
Fractional _____ .....	
1-HP or over _____ .....	
<b>RESIDENTIAL HEATING:</b>	
Oil or Gas (number of units) <u>1</u> .....	<u>5.00</u>
Electric (number of rooms) _____ .....	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) _____ .....	
Oil or Gas (by separate units) _____ .....	
Electric Under 20 kws _____ Over 20 kws _____ .....	
<b>APPLIANCES:</b> (number of)	
Ranges <u>1</u> .....	
Cook Tops _____ .....	
Wall Ovens _____ .....	
Dryers <u>1</u> .....	
Fans <u>1</u> .....	
Water Heaters _____ .....	
Disposals <u>1</u> .....	
Dishwashers <u>1</u> .....	
Compactors _____ .....	
Others (denote) _____ .....	
<b>TOTAL</b> <u>5</u> .....	<u>10.00</u>
<b>MISCELLANEOUS:</b> (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 _____ .....	
INSTALLATION FEE DUE: _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: _____	
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	
<b>TOTAL AMOUNT DUE:</b> _____	<u>43.00</u>

INSPECTION: service is ready now  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: Place Electric  
 ADDRESS: Ptld  
 TEL: 797-9954  
 MASTER LICENSE NO.: #10626 SIGNATURE OF CONTRACTOR: Charles P. Place  
 LIMITED LICENSE NO.: \_\_\_\_\_



# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-3828

**PROPERTY ADDRESS**

Town Or Plantation: PORTLAND

Street Subdivision Lot #: 317 Palmer Hill

**PROPERTY OWNER'S NAME**

Last: E + L Builders, Inc.

Applicant Name: MARK O'BRIEN P.H.

Mailing Address of Owner/Applicant (If Different): 9 Broadmoor Dr. Cumberland Cr, Me 04021

PORTLAND 4993 TOWN COPY

PERM 12, 28, 901 \$1,270.00

Mark O'Brien L.P.L. # 01211

Local Plumbing Inspector Signature

**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.

Mark O'Brien 12-21-90

Signature of Owner/Applicant Date

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the State's Plumbing Rules.

Mark O'Brien 12/21/90

Local Plumbing Inspector Signature Date Approved

**PROPERTY 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 checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____

LICENSE # 23111

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Number	Type of Fixture
	Number	Type of Fixture		
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b>  HOOK-UP: to an existing subsurface wastewater disposal system.  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock	1	Bathub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease/Oil Separator	1	Dish Washer
		Dental Cupridor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	1	Water Heater
Number of Hook-Ups & Relocations			7	
Hook-Up & Relocation Fee	Fixtures (Subtotal) Column 2		7	
			2	
			7	
			\$	
			\$	
			\$ 27.	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date 5/11/99, 19  
 Receipt and Permit number 0060

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: 345 Palmer Ave.  
 OWNER'S NAME: Dale Haselton ADDRESS: \_\_\_\_\_

\_\_\_\_\_ FEES

OUTLETS: Receptacles 35 Switches 8 Plugmold \_\_\_\_\_ ft. TOTAL 43 ..... 8.60

FIXTURES: (number of) Incandescent 2 & Fluorescent \_\_\_\_\_ (not strip) TOTAL XX 5 ..... 1.00  
 Strip Fluorescent \_\_\_\_\_ ft. .... .48

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 (bv 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) jacuzzi - 1 .. \_\_\_\_\_

TOTAL 1 ..... 2.00

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 \_\_\_\_\_ .. \_\_\_\_\_

INSTALLATION FEE DUE: \_\_\_\_\_

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_

FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... \_\_\_\_\_

TOTAL AMOUNT DUE: 15.00

minimum fee.

INSPECTION: Will be ready on \_\_\_\_\_, 19\_\_; or Will Call X

CONTRACTOR'S NAME: Dale Haselton

ADDRESS: 345 Palmer - owner/resident of 1-fam dwlg

TEL.: 797-8214

MASTER LICENSE NO.: \_\_\_\_\_ SIGNATURE OF CONTRACTOR: \_\_\_\_\_

LIMITED LICENSE NO.: \_\_\_\_\_ Dale Haselton May 5/1999

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRIC L INSTALLATIONS

Permit Number 0000  
Location 345 Palm St.  
Owner DALE HASSELL FORD  
Date of Permit 5-5-92  
Final Inspection 5-5-92  
By Inspector [Signature] R. [Signature]  
Permit Application Register Page No. 125

INSPECTIONS: Service \_\_\_\_\_ by \_\_\_\_\_  
Service called in \_\_\_\_\_  
Closing-in \_\_\_\_\_ by \_\_\_\_\_

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE:	REMARKS:

FOR A COMPLETE WORK LIST OR OTHER DOCUMENTS  
CONTACT THE PERMITTING DEPARTMENT  
CITY OF PALM BEACH

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-8226

**PROPERTY ADDRESS**

Town Or Plantation: Portland

Street Subdivision Lot #: 345 Palmer Ave

**PROPERTY OWNERS NAME**

Last: Heselton First: Dale + Mary

Applicant Name: Dale Heselton

Mailing Address of Owner/Applicant (If Different):

PORTLAND 4470 TOWN COPY

Date: 12-5-92 \$ 21.00 FEE  or Double Fee Charged

Dale Heselton C.P.T. # 01124

Local Plumbing Inspector Signature

**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.

Dale Heselton 5-5-92  
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.

BURT MacIsaac 6-5-92  
Local Plumbing Inspector Signature Date Approved

**PERMIT INFORMATION** Logged 7-23-93

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

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<b>HOOK-UP:</b> to put in sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system.		Hosebibb / Silcock	1	Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
		Urinal	2	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
<b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook Ups & Relocations		Other: _____		Water Heater
\$ _____ Hook-Up & Relocation Fee		<b>Fixtures (Subtotal) Column 2</b>	1	<b>Fixtures (Subtotal) Column 1</b>
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				<b>Fixtures (Subtotal) Column 2</b>
				<b>Fixtures (Subtotal) Column 1</b>
				<b>Hook-Up &amp; Relocation Fee</b>
				<b>Permit Fee (Total)</b>
			\$ 21.00	