

923524

Permit # 923524 City of Portland BUILDING PERMIT APPLICATION Fee \$20.00 Zone _____ Map # _____ Lot# _____

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

Owner: Maine Building Spec. Co. Phone # 767-6734
 Address: 533 Riverside Industrial Parkway Portland 04103
 LOCATION OF CONSTRUCTION 533 Riverside Ind. Parkway
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: _____
 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 Temporary sign 4/3 to 6/3/92 5 X 8

For Official Use Only

Date: April 1, 1992 Subdivision: _____
 Inside Fire Limits _____ Name: APR 3 1992
 Bldg Code _____ Lot: _____
 Time Limit _____ Ownership: _____
 Estimated Cost: _____

Zoning: _____
 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)

Ceiling: _____ **HISTORIC PRESERVATION**
 1. Ceiling Joist Size: _____
 2. Ceiling Strapping Size _____ Spacing _____ Not in district nor landmark.
 3. Type Ceiling: _____ Does not require review.
 4. Insulation Type _____ Size _____ Requires Review.
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____ Span _____ Action Approved
 2. Sheathing Type _____ Size _____ Approved with Condition
 3. # of Covering Type _____

Chimneys:
 Type: _____ Number of Fire Places _____
 Date: 4/1/92
 Signature: [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 [Signature]
 Signature of Applicant Michael True Date 4/1/92
 CEO's District _____

CONTINUED TO REVERSE SIDE [Signature]
 Ivory Tag - CEO

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

Floors:
 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 _____

White - Tax Assessor

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LOCATION OF CONSTRUCTION 533 Riverside Ind. Parkway

Contractor: _____ Sub: _____

Address: _____ Phone # _____

Est. Construction Cost: _____ Proposed Use: _____

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

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Explain Conversion Temporary sign 4/3 to 6/3/92 5 X 8

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Date: April 1, 1992

Subdivision: _____

Inside Fire Limits: _____

Bldg Code: _____

Time Limit: _____

Estimated Cost: _____

Ownership: _____

CITY OF PORTLAND

APR 3 1992

Zoning: _____

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: UNSAT (Explain)

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2. Ceiling Strapping Size _____ Spacing _____

3. Type Ceilings: _____

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Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

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Swimming Pools:

1. Type: _____

2. Pool Size: _____ x _____ Square Footage _____

3. Must conform to National Electrical Code and State Law.

HISTORIC PRESERVATION

Permit Received By Iatini

Signature of Applicant Michael True Date 4/1/92

CEO's District 7

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO [Signature]

White - Tax Assessor

PLOT PLAN

N



FEES (Breakdown From Front)
 Base Fee \$ 20.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Type	Inspection Record	Date
<i>Permitted on Time OK</i>		<u>7/2/92</u>
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

Plot plan submitted

OK

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.

Michael J. Ture
 SIGNATURE OF APPLICANT

Same
 ADDRESS

797-6234
 PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.