

901853



FILL IN AND SIGN WITH INK.
APPLICATION FOR PERMIT FOR
HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED
SEP 3 1990
City Of Portland

Portland, Maine, 9/4/90

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Lot #19; Bramblewood Dr Kasprzak, Inc; Rt 202 Waterboro, ME
Name and address of owner of appliance
Installer's name * Eastern Mechanical, Inc. Telephone Alfred Rd; Business Pk; - Biddeford, ME 04005
General Description of Work

To install new 2-zone hot water heating system

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to burnable material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

Name and type of burner Bucket 3450 Labelled by underwriters' laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom
Type of floor beneath burner concrete Size of vent pipe 1 1/4 inch
Location of oil storage basement Number and capacity of tanks one 275-gal tank
Low water shut off yes Make Safeguard No. OEM
Will all tanks be more than five feet from any flame? yes How many tanks enclosed? 0
Total capacity of any existing storage tanks for furnace burners 275-gal

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Slirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced c. gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

- 1. 1 1/2" FIP & THRU
- 2. 1 1/4" VENT PIPE
- 3. Name & Label
- 4. Burner rigidity & support
- 5. Name & Label
- 6. Remote control
- 7. High limit control
- 8. Main cut-off switch
- 9. Low water cutoff
- 10. High water contact
- 11. Flange on top of water column
- 12. Valve on supply line
- 13. Capacity of tanks
- 14. Tank rigidity & support
- 15. Oil grade
- 16. Instruction card
- 17. Oil logs
- 18. Adequate ventilation
- 19. Smoke pipe to combustibles
- 20. Thermal control switch

APPROVED:
[Signature Box]

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

CS 307 Signature of Installer Donald Dube Pres. W.C.D. William C. Dube
INSPECTION FILE APPLICANT'S ASSESSOR'S COPY
MA, Learn

NOTES

10-30-90 Tank is all completed

Permit No. _____
Location _____
Owner _____
Date of permit _____
Approved _____ *

1. 1 1/2" FILL PIPE
2. 1 1/4" VENT PIPE
3. Kind of heat
4. Burner rigidity & support
5. Name & Label
6. Remote control
7. High limit control
8. Main on-off switch
9. Low water cutoff
10. High limit control
11. Piping support & protection
12. Valves in supply line
13. Capacity tanks
14. Tank rigidity & support
15. Oil gauge
16. Instructions
17. Oil leaks
18. Adequate ventilation
19. Smoke pipe to combustibles
20. Thermal control switch

ET M.A. For



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION Lot #19 Bramblewood

Issued to KASPRAK

Date of Issue 10-29-70

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. 90/0904, 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

Limiting Conditions:

Unfurnished portion of house on the 2nd floor will require a permit when completed.

This certificate supersedes certificate issued

Approved:

10/29/70 *Michael Seay*
(Date) Inspector

Mary Schmidt
Asst. 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.

000904

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 2520 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form. n-a s-a review - \$50.

Owner: <u>Kasprzak, Inc.</u> Phone # <u>247-5432</u>	For Official Use Only PERMIT ISSUED Date <u>7/1/90</u> Subdivision: _____ Name <u>JUL 25 1990</u> Lot _____ Bldg Code _____ Time Limit _____ Estimated Cost <u>\$100,000</u> Ownership: <u>City of Portland</u>
Address: <u>1015 North Waterboro, SE 74051</u>	
LOCATION OF CONSTRUCTION <u>Lot 19, Bramblewood</u>	
Contractor: <u>OWNER</u> Sub: _____	
Address: _____ Phone # _____	
Est. Construction Cost: <u>100,000</u> Proposed Use: <u>1-family dwlg w/ 2-car garage</u>	
Past Use: <u>vacant lot</u>	
# of Existing Res. Units _____ # of New Res. Units _____	
Building Dimensions L <u>60'</u> W <u>30'</u> Total Sq. Ft. _____	
# Stories: _____ # Bedrooms <u>4</u> Lot Size: _____	
Is Proposed Use: <input checked="" type="checkbox"/> Seasonal _____ <input type="checkbox"/> Condominium _____ <input type="checkbox"/> Conversion _____	
Explain Conversion <u>Construct one-family dwelling with attached 2-car garage</u>	

Foundation:

- Type of Soil: _____
- Set Backs - Front _____ Rear _____ Side(s) _____
- Footings Size: _____
- Foundation Size: _____
- Other: _____

Floor:

- Sills Size: _____ Sills must be anchored.
- Girder Size: _____
- Lally Column Spacing: _____ Size: _____ Spacing 16" O.C.
- Joists Size: _____
- Bridging Type: _____ Size: _____
- Floor Sheathing Type: _____ Size: _____
- Other Material: _____

Exterior Walls:

- Studding Size _____ Spacing _____
- No. windows _____
- No. Doors _____
- Header Sizes _____ Span(s) _____
- Bracing: Yes _____ No _____
- Corner Posts Size _____
- Insulation Type _____ Size _____
- Sheathing Type _____ Size _____
- Siding Type _____ Weather Exposure _____
- Masonry Materials _____
- Metal Materials _____

Interior Walls:

- Studding Size _____ Spacing _____
- Header Sizes _____ Span(s) _____
- Wall Covering Type _____
- Fire Wall if required _____
- Other Materials _____

Roof:

- Ceiling Joists Size: _____
- Ceiling Strapping Size _____ Spacing _____
- Type Ceilings: _____
- Insulation Type _____ Size _____
- Ceiling Height: _____

Chimneys:

Type: _____ Num _____ Fire Places _____

Heating:

Type of Heat: _____

Electrical:

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

Plumbing:

- Approval of soil test if required Yes _____ No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- No. of Other Fixtures _____

Swimming Pools:

- Type: _____
- Pool Size: _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Joy Roberts

Signature of CEO _____

Inspection Dates _____

PERMIT ISSUED WITH LETTER

White-Tax Assessor Yellow-GPCQG White Tag -CEO

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PLOT PLAN



FEES (Breakdown From Front)
 Base Fee \$ 520
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ 50
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Inspection Record

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

7-27-90 Checked out lot lines OK 7-30-90 Foundation checked
 OK 9-11-90 framing all completed. Check top design and framing details
 10-24-90 OK for C/O Conditional needs to be signed when finished off top
 There are some trees to be planted. Add for City's final approval

Signature of Applicant

John R. [Signature] (as agent for [Company Name])

Date 7/11/90



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

July 24, 1990

RE: Lot #19 Bramblewood

Kasprzak, Inc.
Rt. 5
North Waterboro, Maine 04061

Dear Sir:

Your application to construct a single family dwelling with attached 2 car garage has been reviewed and a permit is herewith issued subject to the following requirements:

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

Site Plan Review Requirements

Inspection Services Approved William Giroux
Portland Public Works Department All damage to curb, sidewalk, and street must be repaired and two city approved trees must be planted on the street frontage prior to the issuance of a certificate of occupancy.

Building Code Requirements

1. Please read and implement items 1, 6, 7, 8, and 9 on the attached building permit report.
2. 10" foundation walls are required for full foundation; 8" on frost wall.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

/el

cc: Steve Harris, Portland Public Works
Paul Niehofi, Portland Public Works

**CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form**

Applicant Kasprzak, Inc. Date 7/11/90
 Mailing Address Rte 5, North Waterboro, ME 04061 Address of Proposed Site Lot 19, Bramblewood
 Proposed Use of Site 1-family dwelling w 2-car attached garage 371-F-2
 Acreage of Site / Ground Floor Coverage 16,761 sq ft / 1448 sq ft 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

	DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS
COMPLIES																		
COMPLIES CONDITIONALLY																		
DOES NOT COMPLY																		

CONDITIONS SPECIFIED BELOW

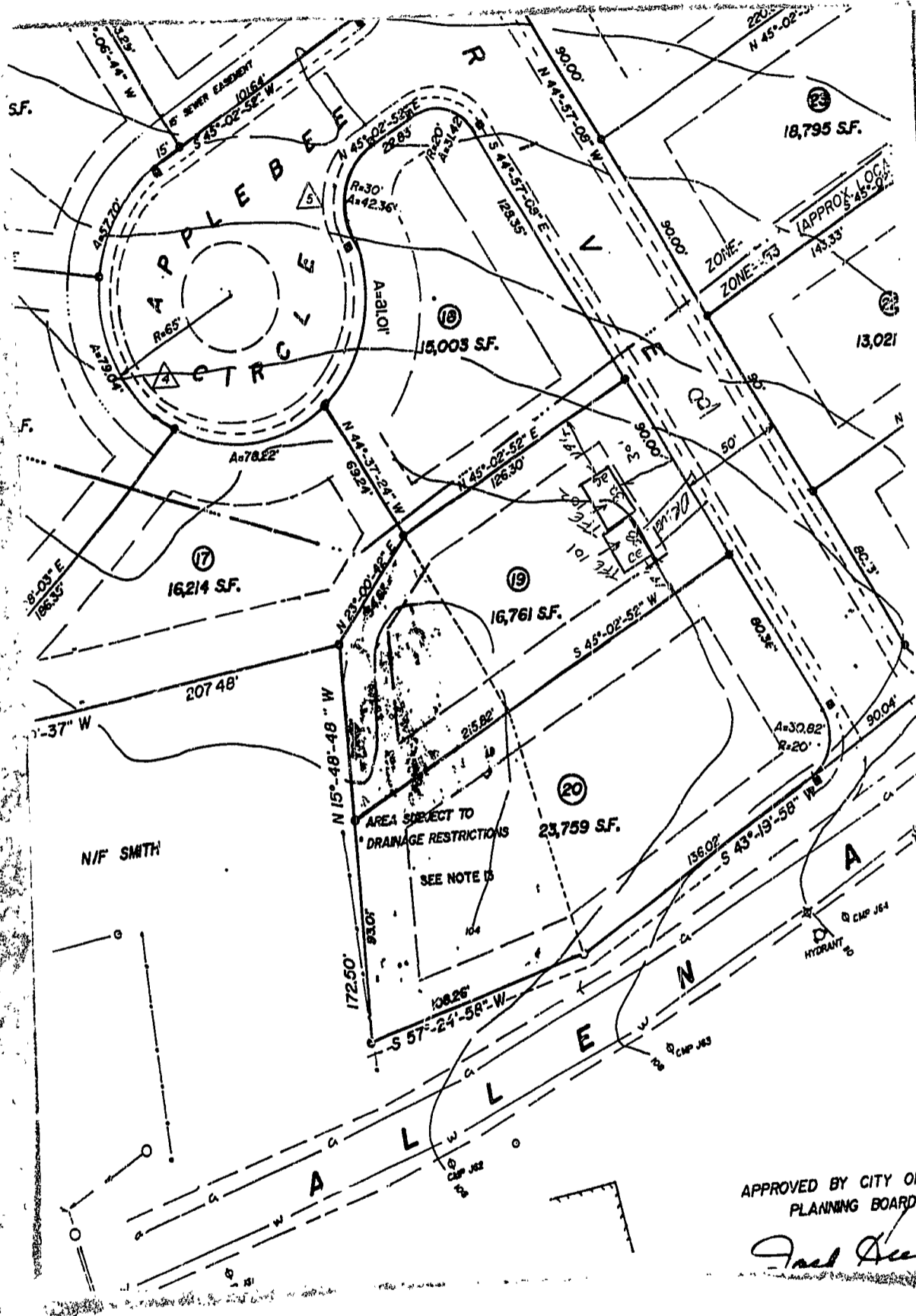
REASONS SPECIFIED BELOW

REASONS:

OK w/DP 7-24-90

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL



APPROVED BY CITY OF
PLANNING BOARD

Paul Allen

Applicant: *Kazprzak*

Date: *7-24-90*

Address:

Assessors No.:

CHECK LIST AGAINST ZONING ORDINANCE

Date -

Zone Location - *R-2*

Interior or corner lot -

Use - *single*

Sewage Disposal - *city*

Rear Yards - *30' OK*

Side Yards - *14' + each OK*

Front Yards - *30' OK*

Projections - *front steps*

Height - *1 1/2*

Lot Area - *OK*

Building Area - *OK*

Area per Family - *entire*

Width of Lot - *90' OK*

Lot Frontage - *same*

Off-street Parking - *2 cars*

Loading Bays - *NA*

Site Plan -

Shoreland Zoning -

Flood Plains -

**CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form**

Applicant Kasprzak, Inc. Date 7/11/90
 Mailing Address Rte 5, North Waterboro, ME 04061 Address of Proposed Site Lot 19, Bramblewood
 Proposed Use of Site 1-family dwelling & 2-car attached garage Site Identifier(s) from Assessors Maps 377-F-2
 Acreage of Site 16,761 sq ft / Ground Floor Coverage 1448 sq ft Zoning of Proposed Site R-2

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	CURBING	SIDEWALKS	OTHER	
APPROVED																CONDITIONS SPECIFIED BELOW
APPROVED CONDITIONALLY																
DISAPPROVED															REASONS SPECIFIED BELOW	

REASONS: All damage to curb, sidewalk, street, and must be repaired
two city approved trees must be planted
on the street frontage prior to the
issuance of a certificate of occupancy
 (Attach Separate Sheet if Necessary)

Stephen K. Hann 7/20/90
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

901853

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 9/4/90

PERMIT ISSUED

SEP 5 1990

City Of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Lot #19, Bramblewood Use of Building 1-family No. Stories New Building Existing "
Name and address of owner of appliance Dr Kasprzak, Inc; Rt. 202, Waterboro, ME
Installer's name and address Eastern Mechanical Inc., Alfred Rd; Business Pk; - Biddeford, ME 04005 Telephone
General Description of Work

To install new 2-zone hot water heating system

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to burnable material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

Name and type of burner Beckett 3450. Labelled by underwriters' laboratories? yes
Will operator be always in attendance? No Does oil supply line feed from top or bottom of tank? bottom
Type of floor beneath burner concrete Size of vent pipe 1 1/2 inch
Location of oil storage basement Number and capacity of tanks one 275-gal tank
Low water shut off yes Make Safeguard No. QEM
Will all tanks be more than five feet from any flame? yes How many tanks enclosed? 0
Total capacity of any existing storage tanks for furnace burners 275-gal

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Donald Dube #00883 oil burner license
Amount of fee enclosed? 45.

APPROVED:

Signature lines for approval

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

CS 306

Signature of Installer

Donald Dube, Pres W.C.D.
William C. Dineen

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY

47 Mr. Lear

000904

Permit # _____ 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 sp review - \$50.

Owner: Kasprzak, Inc. Phone # 5482
 Address: Rte 5, North Waterboro, ME 04061
 LOCATION OF CONSTRUCTION lot 19, Bramblewood
 Contractor: OWNER Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: 100,000 Proposed Use: 1-family dwlg w/
 Past Use: vacant lot att. 2-cr grge
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L 60' W 30' Total Sq. Ft. _____
 # Stories: 2 # Bedrooms 3 4 Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion Construct one-family dwelling with attached
2-car garage

For Official Use Only PERMIT ISSUED
 Date 7/11/90 Subdivision: _____ Name: _____
 Inside Fire Limits _____ Lot: _____
 Bldg Code _____ Ownership: _____
 Time Limit _____
 Estimated Cost: \$100,000
 Zoning: R-2
 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 W/H 7-24-90

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 _____ Spacing _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulatic Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weathe. 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 _____
 Height: _____

Roof:
 1. Truss 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.

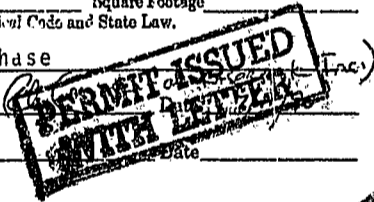
Permit Received By Louise E. Chase

Signature of Applicant John Roberts

Signature of CEO _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO



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APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 8/3/90
 Receipt and Permit no. 3196

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
 LOCATION OF WORK: Lot 19, Bramblewood Dr.
 OWNER'S NAME: Kasprzak Inc. ADDRESS: 50 Waterboro

OUTLETS:		FEE\$
Receptacles _____	Switches _____	Plugmold _____
ft. TOTAL <u>31-60</u>		<u>5.00</u>
FIXTURES: (number of)		
Incandescent _____	Flourescent _____	(not strip) TOTAL <u>1-10</u>
Strip Flourescent _____ ft.		<u>0.00</u>
SERVICES:		
Overhead _____	Underground <input checked="" type="checkbox"/>	Temporary _____
TOTAL amperes <u>100</u> ..		<u>3.00</u>
METERS: (number of) _____		
MOTORS: (number of)		
Fractional _____		
1 HP or over _____		
RESIDENTIAL HEATING:		
Oil or Gas (number of units) <u>1</u>		<u>3.00</u>
Electric (number of rooms) _____		
COMMERCIAL OR INDUSTRIAL HEATING:		
Oil or Gas (by a main boiler) _____		
Oil or Gas (by separate unit) _____		
Electric Under 20 kws _____	Over 20 kws _____	
APPLIANCES: (number of)		
Ranges _____	Water Heaters _____	
Cook Tops _____	Disposals _____	<u>1</u>
Wall Ovens _____	Dishwashers _____	
Dryers _____	Compactors _____	
Fans _____	Others (denote) _____	
TOTAL <u>4</u>		<u>6.00</u>
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: 20.00

INSPECTION:
 Will be ready on _____, 19__; or Will Call
 CONTRACTOR'S NAME: Bill Cudworth
 ADDRESS: Box 40 - Springdale, ME
 TEL: 490-1604
 MASTER LICENSE NO.: #03685 SIGNATURE OF CONTRACTOR: John William Cudworth
 LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

