

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

## PERMIT

Permit Number: 071015

Please Read Application And Notes, If Any, Attached

This is to certify that Clarke Gloria Aponte & /no contractor /

has permission to interior renovations

AT 29 Munjoy St 003 008001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is altered or closed-in. NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

**PERMIT ISSUED**  
OTHER REQUIRED APPROVALS  
**AUG 21 2007**  
**CITY OF PORTLAND**  
Deputy Director

Fire Dept. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_

*[Signature]* 8/21/07  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1015	Issue Date: <b>AUG 21 2007</b>	CBL: 003 0008001
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Location of Construction: 29 Munjoy St	Owner Name: Clarke Gloria Aponte &	Owner Address: 29 Munjoy St	Phone: 207-232-9996
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: <b>R-6</b>

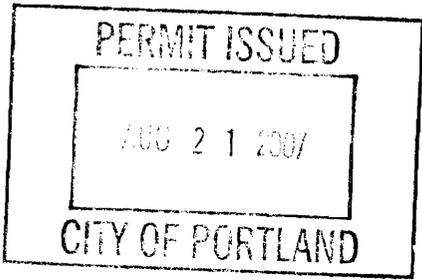
Past Use: single family	Proposed Use: single family - interior renovations	Permit Fee: \$200.00	Cost of Work: \$18,000.00	CEO District: 1
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Proposed Project Description: interior renovations	<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>	<b>INSPECTION:</b> Use Group: <b>R-3</b> Type: <b>SB</b> <b>IRC 2003</b> Signature: <i>[Signature]</i>
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Permit Taken By: tmm	Date Applied For: 08/21/2007	<b>Zoning Approval</b>	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Flood Zone <input checked="" type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <b>8/21/07</b>	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <b>8/21/07</b>
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**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 the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

\_\_\_\_\_  
SIGNATURE OF APPLICANT ADDRESS DATE PHONE

\_\_\_\_\_  
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1015	Issue Date: 08/21/2007	CBL: 003 0008001
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Location of Construction: 29 Munjoy St	Owner Name: Clarke Gloria Aponte &	Owner Address: 29 Munjoy St	Phone: 207-232-9996
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-6

Past Use: single family	Proposed Use: single family - interior renovations	Permit Fee: \$200.00	Cost of Work: \$18,000.00	CEO District: 1
<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>PERMIT ISSUED</p> <div style="border: 1px solid black; width: 100px; height: 50px; margin: 0 auto;"></div> <p>CITY OF PORTLAND</p> </div>		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Proposed Project Description: interior renovations				

Permit Taken By: tmm	Date Applied For: 08/21/2007	<b>Zoning Approval</b>
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.  3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Flood Zone <input checked="" type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan  Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>8/21/07</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied  Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied  Date: <i>8/21/07</i>
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SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

**City of Portland, Maine - Building or Use Permit**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 07-1015	<b>Date Applied For:</b> 08/21/2007	<b>CBL:</b> 003 O008001
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<b>Location of Construction:</b> 29 Munjoy St	<b>Owner Name:</b> Clarke Gloria Aponte &	<b>Owner Address:</b> 29 Munjoy St	<b>Phone:</b> 207-232-9996
<b>Business Name:</b>	<b>Contractor Name:</b> no contractor / self	<b>Contractor Address:</b> Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> single family - interior renovations	<b>Proposed Project Description:</b> interior renovations
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 08/21/2007**Note:** **Ok to Issue:** 

- 1) Separate permits shall be required for future decks, sheds, pools, and/or garages.
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 08/21/2007**Note:** **Ok to Issue:** 

- 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING DEPARTMENT

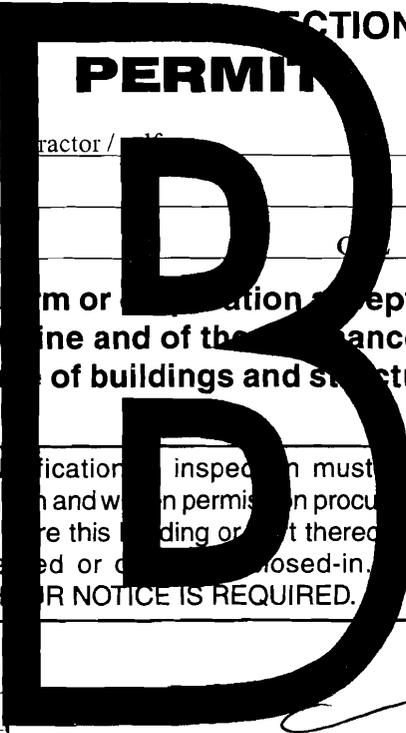
### PERMIT

Permit Number: 071015

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Notification inspection must given and when permission procured before this building or part thereof is occupied or closed-in. HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

PERMIT ISSUED

#### OTHER REQUIRED APPROVALS

Fire Dept. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_

CITY OF PORTLAND

Department Name

*[Signature]* 8/21/07  
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

### Current Owner Information

**Card Number** 1 of 1  
**Parcel ID** 003 0008001  
**Location** 29 MUNJOY ST  
**Land Use** SINGLE FAMILY

**Owner Address** CLARKE GLORIA APONTE & GEORGE APONTE CLARKE JTS  
 29 MUNJOY ST  
 PORTLAND ME 04101

**Book/Page** 16891/042  
**Legal** 3-0-8  
 MUNJOY ST 29-31  
 HANSON LANE 20-24  
 3208 SF

### Current Assessed Valuation

Land	Building	Total
\$156,300	\$117,200	\$273,500

### Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
1850	Old Style	1.5	1781	0.074	3	1	1	6	None	Full

### Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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### Sales Information

Date	Type	Price	Book/Page
10/29/2001	LAND + BLDING	\$176,000	16891-042
11/01/1994	LAND + BLDING	\$76,700	11716-134

### Picture and Sketch

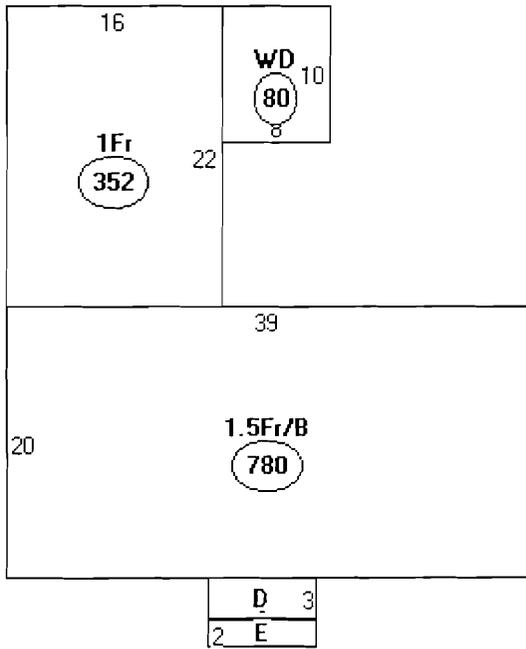
[Picture](#)      [Sketch](#)      [Tax Map](#)

[Click here to view Tax Roll Information.](#)

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.

**New Search!**





Descriptor/Area

A: 1.5Fr/B  
780 sqft

B: 1Fr  
352 sqft

C: WD  
80 sqft

D: N/A  
24 sqft

E: FOH  
16 sqft

SHEET 4-D

PROMENADE

SHEET 1-C

SHEET 5-C

MORNING STREET

CONGRESS

SHEET 14-C

HOWARD

MUNJOY

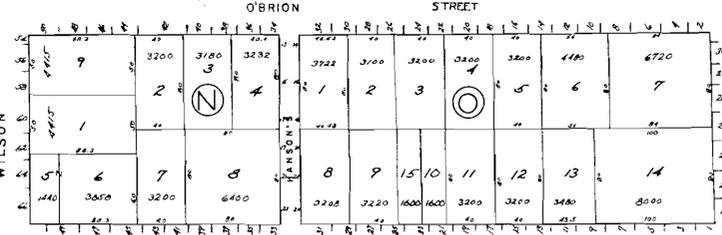
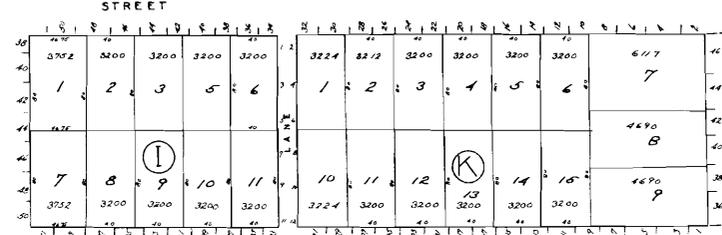
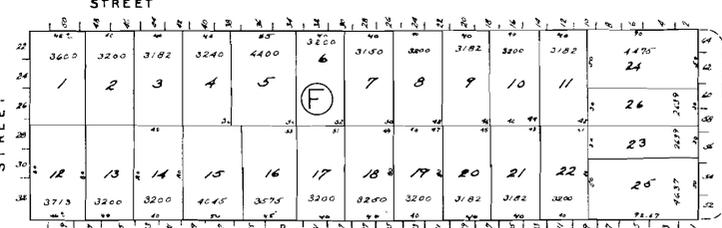
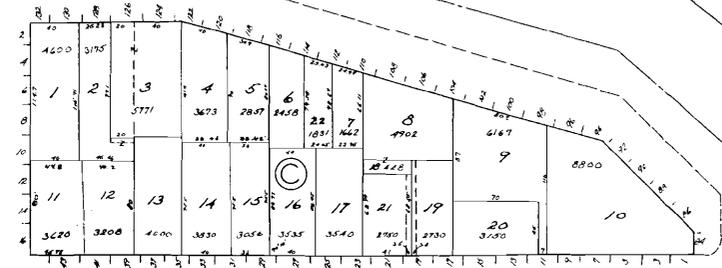
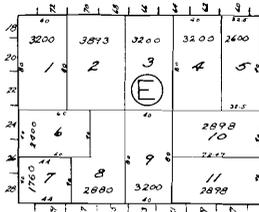
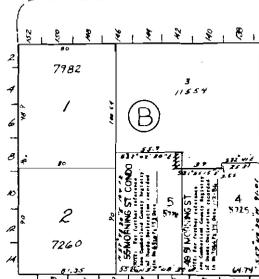
EASTERN

MORNING

VESPER

BECKETT

MUNJOY



MORNING

EMERSON

HOWARD

PROMENADE

EASTERN

SHEET 2-A

SHEET 16-A

CITY OF PORTLAND ASSESSORS PLAN SCALE 1" = 50'

RETRACED 9-30-65

# PLUMBING APPLICATION

Department of Health and Human Services  
Division of Environmental Health

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	

## PROPERTY OWNERS NAME

Last: _____	First: _____
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

PORTLAND PERMIT # 10374 TOWN COPY

Date Permit Issued: 18/21/07 \$ 340.00  If Double Fee Charged

Jeanie Bourke L.P.I. # 07321  
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 Inspectors to deny a Permit.

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.

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

## 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 type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input 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 # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	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.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<b>OR</b>  TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
			Hook-Up & Relocation Fee	
			<b>Permit Fee (Total)</b>	

**SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE**

# BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- N/A Footing/Building Location Inspection: Prior to pouring concrete
- N/A Re-Bar Schedule Inspection: Prior to pouring concrete
- N/A Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: ~~There is a \$75.00 fee per~~ inspection at this point.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects **DO** require a final inspection

       If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

       CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

X GP McCall 8/21/07  
Signature of Applicant/Designee Date

[Signature] 8/21/07  
Signature of Inspections Official Date

CBL: 003-0-008 Building Permit #: 07-1015