

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED

Permit Number: 071139

SEP 17 2007

CITY OF PORTLAND

This is to certify that EATON ERIC K & HOLLY MURD-FOR-SW/TLITS/Home Inc

has permission to window replacement / reframe in rear building

AT 59 NEW ISLAND AVE

084 G005001

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 inspection must be given and work in progress before this building or part thereof is occupied or closed-in. 48 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____
Department Name

Thomas M. Marley 9/20/07
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

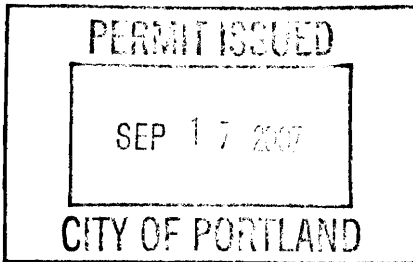
Permit No: 07-1139	Issue Date:	CBL: 084 G005001
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Location of Construction: 59 NEW ISLAND AVE	Owner Name: EATON ERIC K & HOLLY L HUR	Owner Address: 59 NEW ISLAND AVE	Phone:
Business Name:	Contractor Name: Home Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: IR2

Past Use: Single Family Home	Proposed Use: Single Family Home - window replacement / reframing in rear of building	Permit Fee: \$70.00	Cost of Work: \$5,000.00	CEO District: 2
Proposed Project Description: window replacement / reframing in rear of building		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type 5B IRC 2003	
		Signature:	Signature: <i>Jm</i> 9/20/07	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 09/17/2007	Zoning Approval		
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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..



Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input checked="" type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision <i>NA</i>	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>Jm</i> 9/20/07	Date: _____	Date: <i>Jm</i> 9/20/07

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



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>59 New Island Ave</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot <u>2300</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>84</u> <u>6</u> <u>5</u>	Applicant * must be owner, Lessee or Buyer * Name <u>Eric Eaton</u> Address <u>59 New Is. Ave</u> City, State & Zip <u>Peaks Is. ME 04108</u>	Telephone: <u>766-2243</u> <u>w. 838-0142</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>5,000</u> C of O Fee: \$ _____ Total Fee: \$ <u>7000</u>
Current legal use (i.e. single family) <u>Single Fam.</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>3 window replacements in Rear of Building.</u>		
Contractor's name: <u>Macy Oeme</u> Address: _____ City, State & Zip <u>Peaks Is. ME</u> Telephone: _____ Who should we contact when the permit is ready: <u>Eric Eaton</u> Telephone: <u>766-2243</u> <u>w. 838-0142</u> Mailing address: <u>59 New Is. Ave. Peaks Is. 04108</u>		

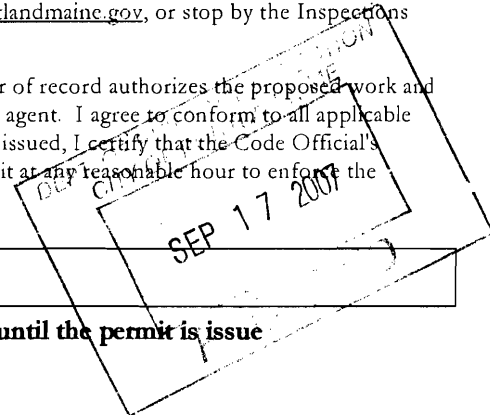
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. 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's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: [Signature] Date: _____

This is not a permit; you may not commence ANY work until the permit is issued



City of Portland, Maine - Building or Use Permit

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

Permit No: 07-1139	Date Applied For: 09/17/2007	CBL: 084 G005001
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Business Name:	Contractor Name: Home Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home - window replacement / reframing in rear of building	Proposed Project Description: window replacement / reframing in rear of building
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Dept: Zoning	Status: Not Applicable	Reviewer: Tom Markley	Approval Date: 09/20/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Tom Markley	Approval Date: 09/20/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) This is replacement of current windows only and requires no new framing. 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

Comments: 9/18/2007-tm: called Erik Eaton to request more framing info for new windows 9/19/2007-tm: called Erik Eaton again requesting framing info.
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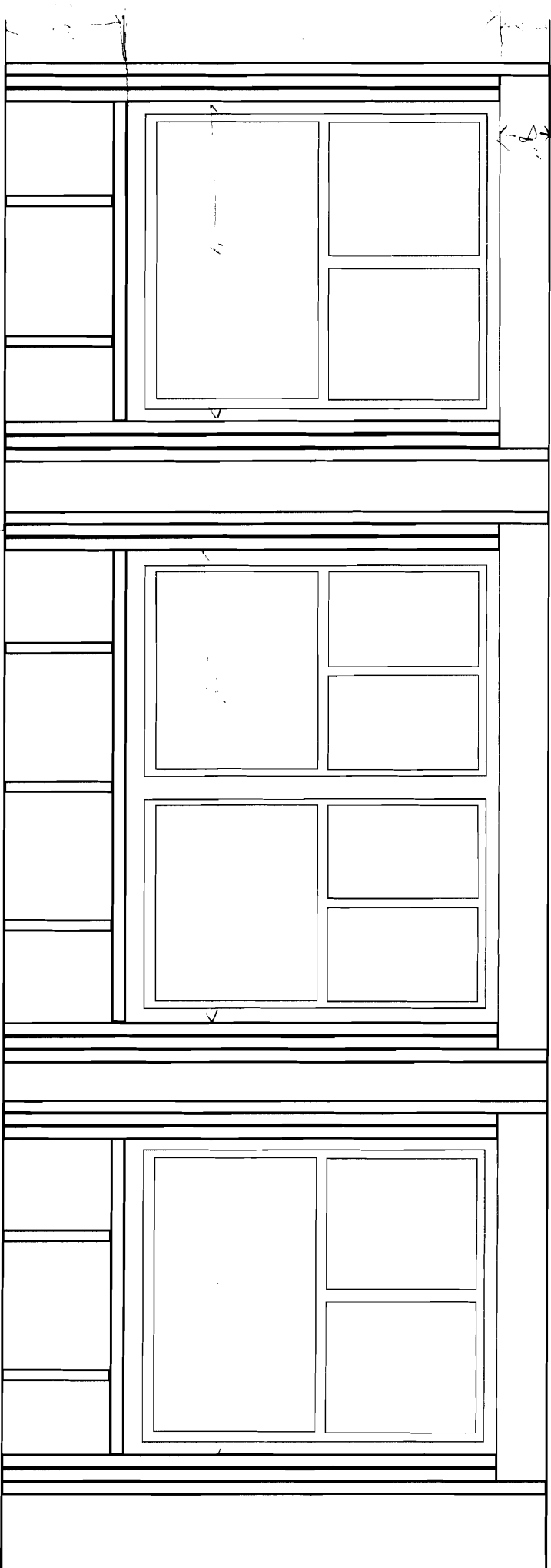
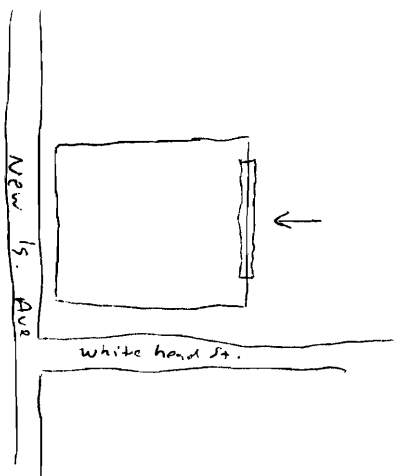
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Eric Eaton
 59 New Island Ave
 Peaks 15. ME



Existing Framing
 Replacement only

If new Elevation
 need to do 2'2" (2x2) peak
 will be used
 2x4 on 6" req from
 (if needed)

THIS IS NOT A BOUNDARY SURVEY

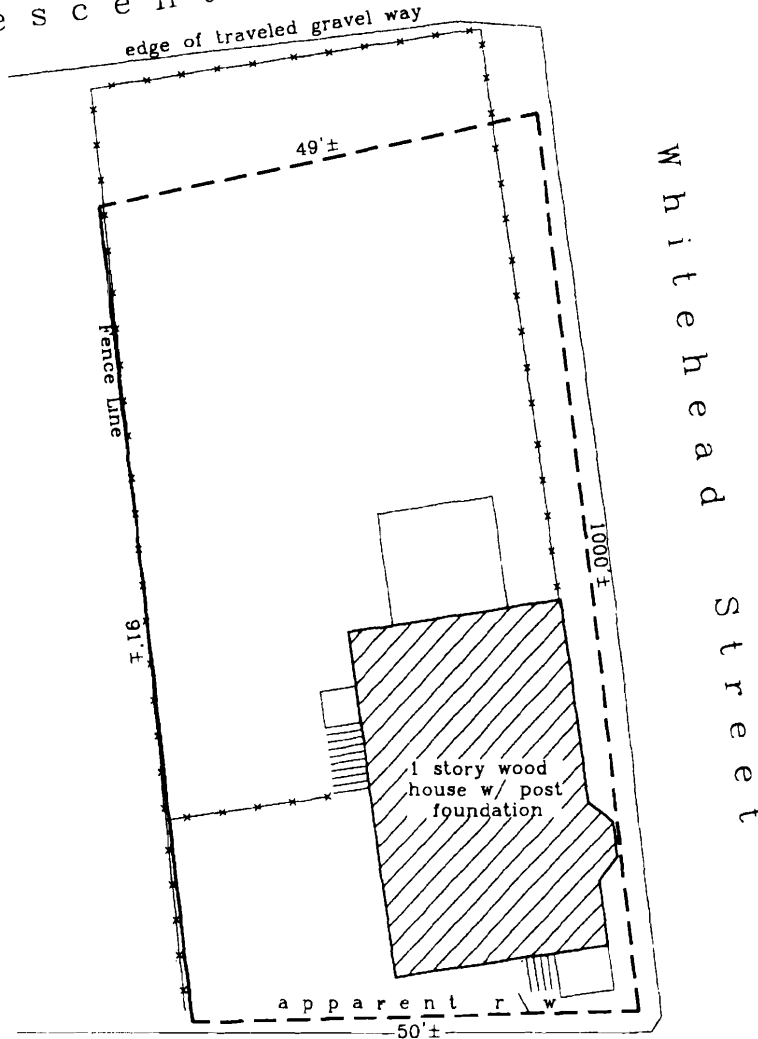
MORTGAGE INSPECTION OF: DEED BOOK 10679 PAGE 80 COUNTY Cumberland
 PLAN BOOK --- PAGE --- LOT ---

ADDRESS: 59 New Island Avenue, Peaks Island, Portland, ME Job Number: 273-67

Inspection Date: 3-16-00
 Scale: 1" = 20'

Buyers: Eric K. Eaton & Holly L. Hurd-Forsyth

Seller: Viateur J. Beaudreau
Crescent Avenue



New Island Avenue

I HEREBY CERTIFY TO: Guaranty Title Corp., Mane Bank & Trust,
 and its title insurer.

Monuments found did not conflict with the deed description.
 The dwelling setbacks do not violate town zoning requirements.

As delineated on the Federal Emergency Management Agency Community
 Panel 230051-0015B:

The structure does not fall within the special flood hazard zone.
 The land does not fall within the special flood hazard zone.
 A wetlands study has not been performed.

APPARENT EASEMENTS AND RIGHTS OF
 WAY ARE SHOWN. OTHER ENCUMBRANCES,
 RECORDED OR NOT, MAY EXIST. THIS
 SKETCH WILL NOT REVEAL ABUTTING
 DEED CONFLICTS, IF ANY.

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Livingston - Hughes

Professional Land Surveyors & Foresters
 88 Guinea Road
 Kennebunkport - Maine 04046

207-967-9761 phone 207-967-4831 fax

THIS SKETCH IS FOR MORTGAGE PURPOSES ONLY