Form # P 04 DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
Please Read Application And Notes, If Any, Attached PERMIT Permit Number: 080377
This is to certify thatOLSEN_SCOTT_D & TANY MARK@UVCZ_ITS/property ner
has permission to Move stairs & bulkhead to come additional space staire transformer and the staire additional space staire additin additionaddi
AT _51 ROMASCO LN
provided that the person or persons, if m or persons to be be an expering this permit shall comply with all of the provisions of the Statutes of I aine and of the Statutes 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. PERMIT ISSUED F IR NOTICE IS REQUIRED.
OTHER REQUIRED APPROVALS
Fire Dept.MAY - 5 2008 $5/9/08$ Health Dept. $5/9/08$
Appeal Board Other
PepartmeriNate UF PURILAND PENALTY FOR REMOVING THIS CARD

				PERMIT ISS	
City of Portland, Main	-		) 1	Issue Date:	CBL:
389 Congress Street, 0410	1 Tel: (207) 874-8703	, Fax: (207) 874-871		MAY - 5 2	
Location of Construction:	Owner Name:		Owner Address:		Phone:
51 ROMASCO LN	OLSEN SCO	IT D & TANYA MA	10 MOON RD	TOT DOD	TIAND
Business Name:	Contractor Name	:	<b>Contractor Address</b>	TULIN	TL/ Phone
	property owne	er			
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:
			Alterations - Dv	vellings	R-6
Past Use:	Proposed Use:	front	Permit Fee:	Cost of Work:	CEO District:
Single Family Home		Home - Move stairs	\$60.00	\$3,500.00	1
	& bulkhead to space outside	create additional	FIRE DEPT:	Approved INSP	ECTION: Group: 12-3 Type: 3B IRC: 2003
Proposed Project Description:			1 N/		
Move stairs & bulkhead to c	reate additional space ou	tside	Signature:	Sign	ature:
			PEDESTRIAN ACT Action: Appro	<b>IVITIES DISTRICT</b>	(P.A.D.) w/Conditions Denied
			Signature:		Date:
Permit Taken By:	Date Applied For:	T	Zoning	g Approval	
ldobson	04/18/2008			5PP- 0	
1. This permit application	does not preclude the	Special Zone or Revie		ing Appeal	Historic Preservation
Applicant(s) from meeti Federal Rules.		Shoreland Shoreland	ん 🗌 Varian	ce	Not in District or Landmark
2. Building permits do not septic or electrical work	• •	Wetland Cresh		aneous	Does Not Require Review
<ol> <li>Building permits are vo within six (6) months of</li> </ol>	id if work is not started	Flood Zone	Condit	ional Use	Requires Review
False information may i permit and stop all work	nvalidate a building	Subdivision	🗌 Interpro	etation	Approved
		Site Plan	🗌 Арргол	red	Approved w/Conditions
		Maj [] Minor [] MM OK witcurd, hiss	Denied		Denied
		Date: 5/2/28 APA	Date:		Date:
		10. 5121-3 /100	· Daic.		A-410.

#### 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

#### 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.

X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers

X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> 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.

Signature of Applicant/Designee

Date

Signature	of Inc	nections	Official
Signature	OF HIS	pections	VIIIcia

P	ERMIT ISSUED	
	.54¥ − 5 <b>2008</b>	
	Y OF PORTLAND	)

City of Portland, Maine - Build	ding or Use Permi	t	Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (2	207) 874-8703, Fax: (	(207) 874-8	716 08-0377	04/18/2008	013 J006001
Location of Construction:	Owner Name:		Owner Address:		Phone:
51 ROMASCO LN	OLSEN SCOTT D &	TANYA M	A 10 MOON RD		
Business Name:	Contractor Name:		Contractor Address:		Phone
	property owner				
Lessee/Buyer's Name	Phone:		Permit Type:		
			Alterations - Dw	ellings	
Proposed Use:		Pro	posed Project Description	1:	
Single Family Home - Move stairs & space outside	bulkhead to create addi	itional M	ove stairs & bulkhead	to create additional s	pace outside
<ul> <li>Dept: Zoning Status: A</li> <li>Note: Relocation of bulkhead is OK footprint is 23.08 sf</li> <li>1) This permit is being issued with th</li> <li>2) This permit is being issued with th and that the size of the footprint w</li> </ul>	ne condition that the rel ne condition that the sta	It only exte ocated bulhe	ad will be no higher t	han 24" from grade at oved from the right side	Ok to Issue: 🔽
<ol> <li>This property shall remain a single approval.</li> </ol>	•	-			n for review and
<ol> <li>This permit is being approved on work.</li> </ol>	the basis of plans subm	itted. Any d	eviations shall require	e a separate approval b	efore starting that
Dept: Building Status: A Note:	pproved with Condition	ns <b>Revie</b> v	ver: Tammy Munson	n Approval Da	ate: 05/09/2008 Ok to Issue: 🖌
<ol> <li>Separate permits are required for a Separate plans may need to be sub</li> </ol>					
2) Application approval based upon and approval prior to work.	information provided b	y applicant.	Any deviation from a	pproved plans requires	s separate review



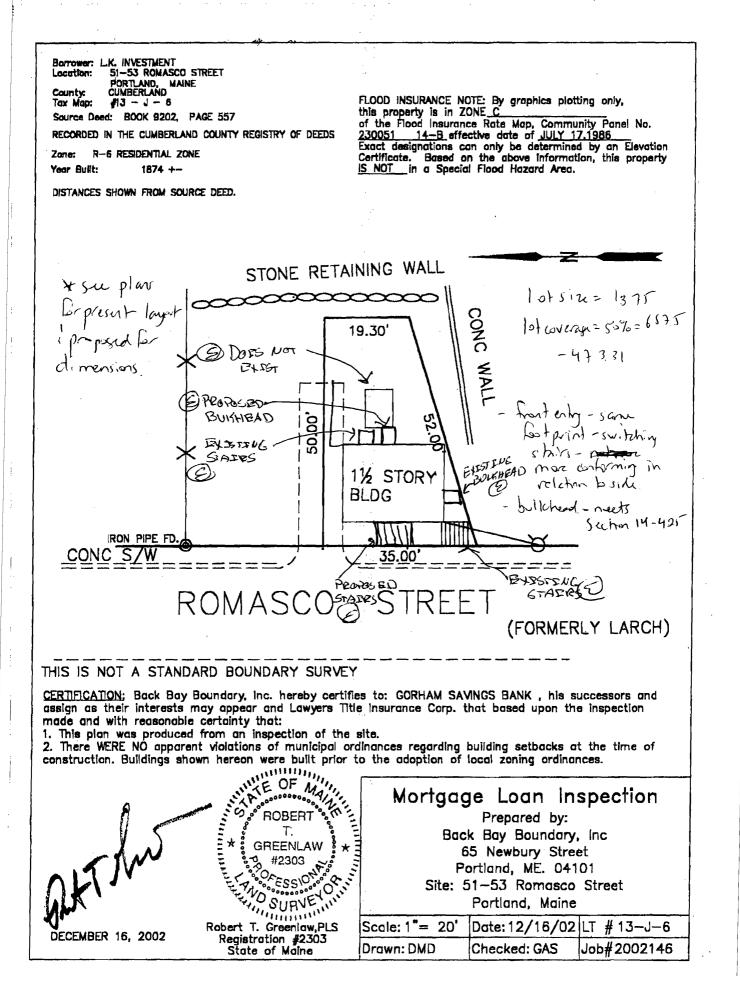
## All Purpose Building Permit Application

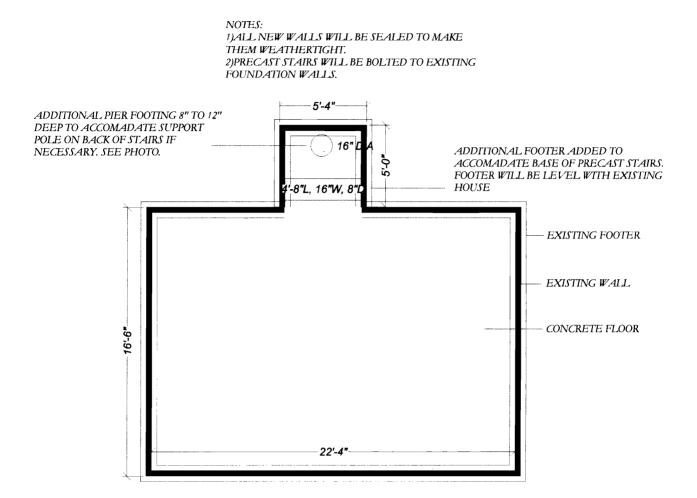
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

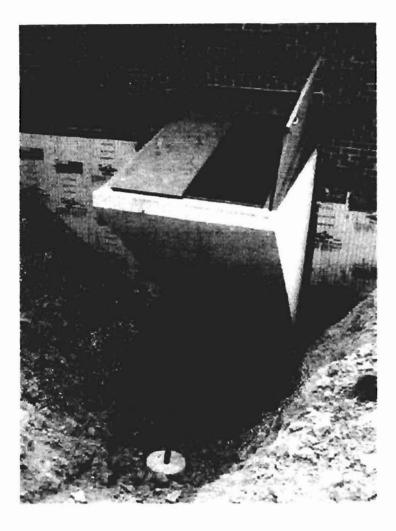
Location/Address of Construction: 5/	' ROMASCO LA BET	LAND ME
Total Square Footage of Proposed Struc	square Footage of L	ot
AN ADDITIONAL 8 SUIFT FOR ]	THE BULKHEND 1393,	<u>42</u>
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:
Chart# Book Block# Pg. Lot# 21239 027 3-5-6	SCOT OLSEN ! TAN	207 1 МАККАШК 2. 329-8747
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: <b>\$_3,</b> 500
DENISE OWENS	13 MOON DD . GRAY ME O	4039 Fee:/\$
Current use: <u>SINGLE FAMELY</u>	/	APR 1 & 2003
If the location is currently vacant, what v	was prior use:	
Approximately how long has it been vac	cant:	
Single family		EAA MAARE CRAFE
Proposed use: To MOVE STATOS A Project description: ON SENE OF		
Project description: ON SEDE OF	HOUSE	
Contractor's name, address & telephone	e:	POR MORE SINCE
Project description: ON SENE OF	e: hit is ready: Scot olser	
Project description: ON SEDE OF Contractor's name, address & telephone Who should we contact when the perm Mailing address: SAME AS ABOVE We will contact you by phone when the review the requirements before starting	e: hit is ready: <u>Scot orsev</u> permit is ready. You must come in any work, with a Plan Reviewer. A s	and pick up the permit and top work order will be issued
Project description: ON SEDE OF Contractor's name, address & telephone Who should we contact when the perm	HOUSE e: nit is ready: SCOT OLSEN permit is ready. You must come in any work, with a Plan Reviewer. A s ore the permit is picked up. PHON CLUDED IN THE SUBMISSIONS THE PERM NG/PLANNING DEPARTMENT, WE MAY PERMIT.	and pick up the permit and top work order will be issued IE: 207-329-8747 WIT WILL BE AUTOMATICALLY REQUIRE ADDITIONAL

Planning Department on the 4th floor of City Hall

7105







Pre fab Q-bulkhead-bulkhead-stairs w/ Bilco

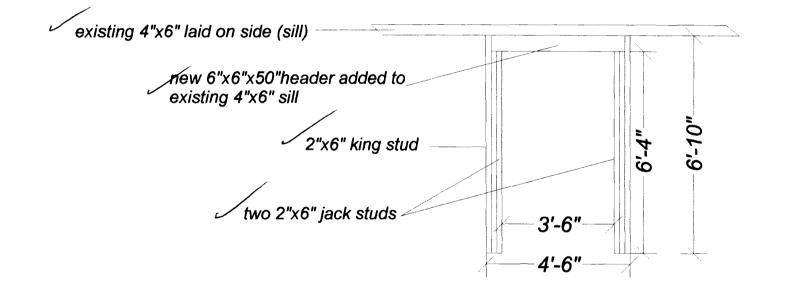
http://www.hamptonconcrete.com/files/img\_2264%20(small)paint.jpg

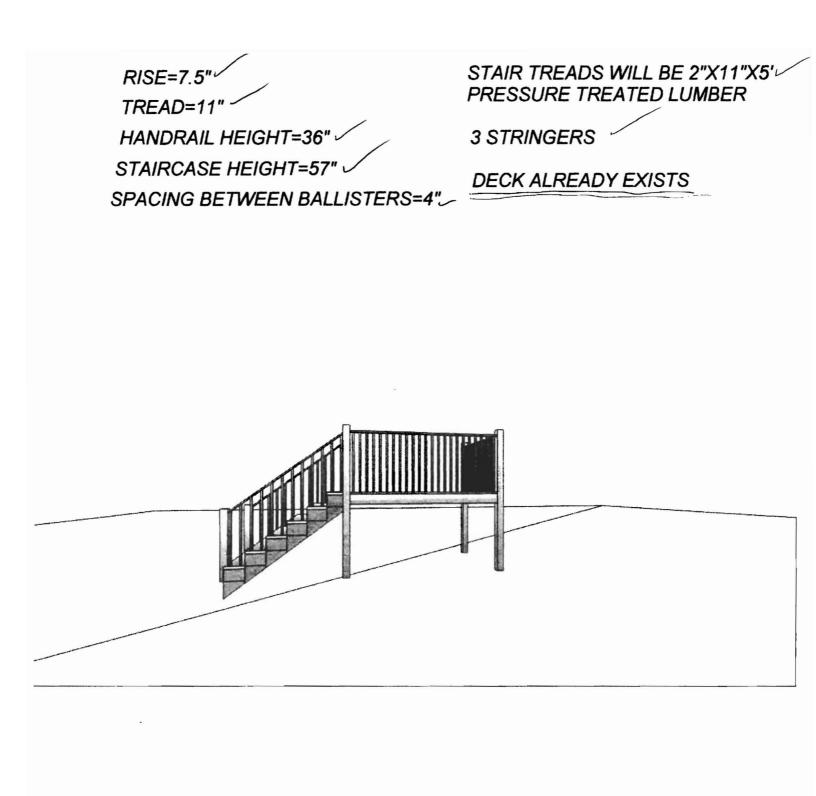
5/9/2008

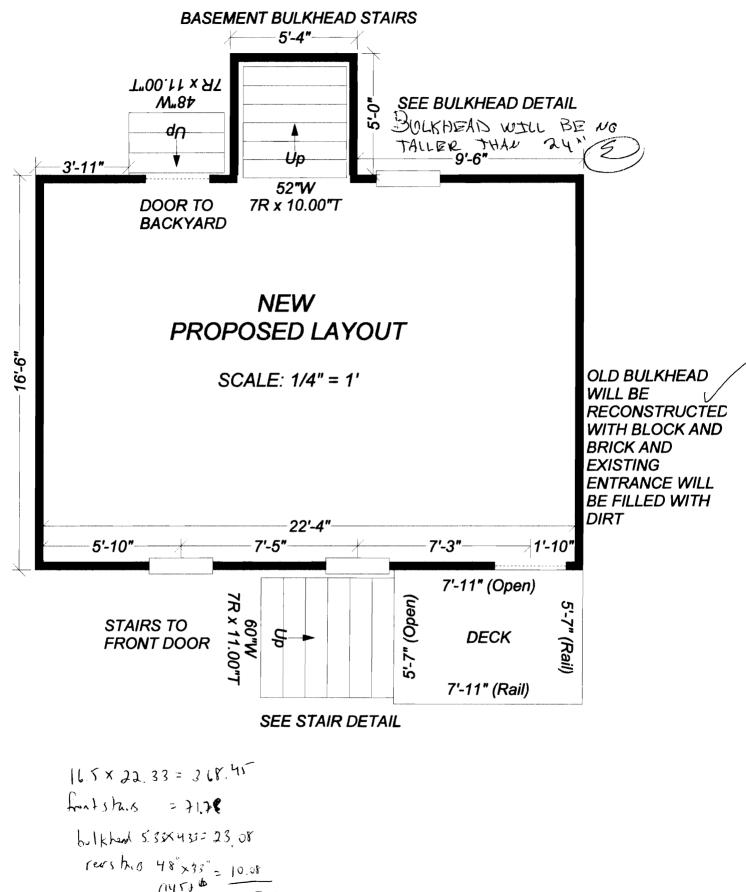
• • <del>30</del>• • • • • •

## FRAMING FOR

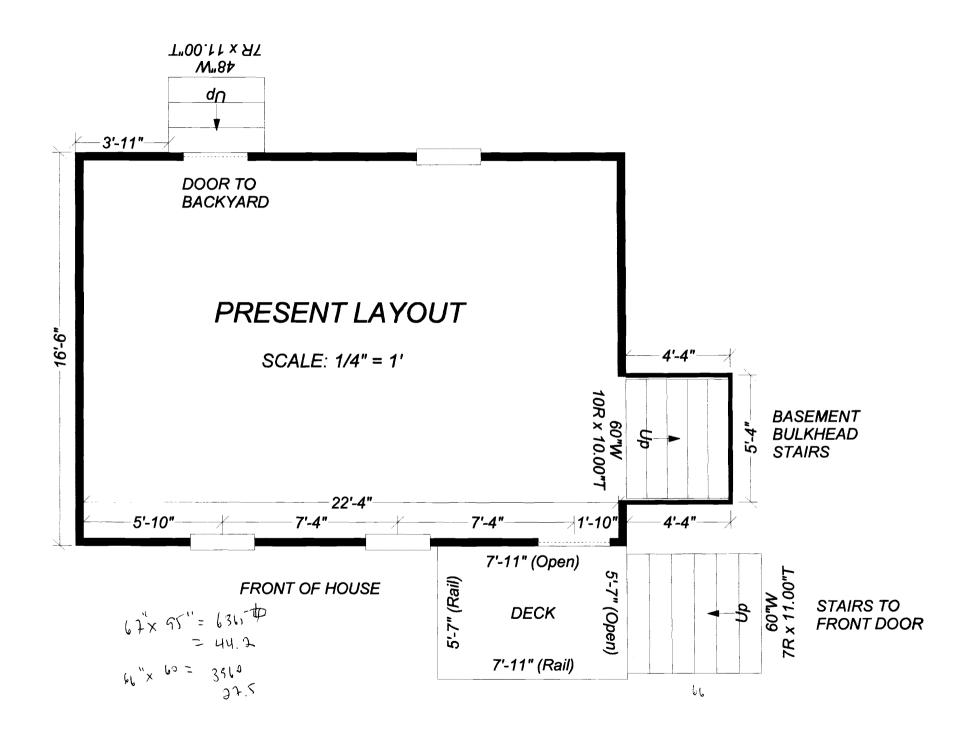
### NEW OPENING IN BASEMENT FOR BULKHEAD







. . . . . .



STAIR TREADS WILL BE 2"X1()"X52" PRESSURE TREATED LUMBER

RISE=9.5" TREAD=10" STAIRCASE HEIGHT=67"

## STAIRS FOR NEW BASEMENT BULKHEAD

