

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BU **PERMIT** ION

Please Read Application And Notes, If Any, Attached

Permit Number: 090963

This is to certify that WHITE MARK A / Stephen M has permission to remove and replace failed bulkhead unit

AT 45 NORTH ST

014 A009001

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 written permission procured before this building or part thereof is lath or other work is used-in. 2 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 N. Manly 9/18/09
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

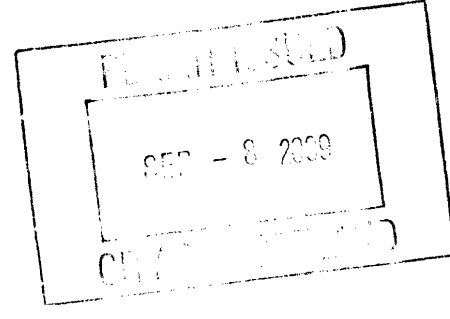
Permit No: 09-0963	Issue Date:	CBL: 014 A009001
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Location of Construction: 45 NORTH ST	Owner Name: WHITE MARK A	Owner Address: 45 NORTH ST	Phone:
Business Name:	Contractor Name: Stephen Murphy	Contractor Address: 133 Lexington Ave Portland	Phone: 2076716291
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	Zone: R5

Past Use: 2 Family Home	Proposed Use: 2 Family Home - remove and replace failed bulkhead unit	Permit Fee: \$30.00	Cost of Work: \$800.00	CEO District: 1
Proposed Project Description: remove and replace failed bulkhead unit		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB JRC 2003	
		Signature: _____		Signature: Jm 9/18/09
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: Ldobson	Date Applied For: 09/03/2009	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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: Jm 9/18/09	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 checked="" 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: Jm 9/18/09
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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

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 **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 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.

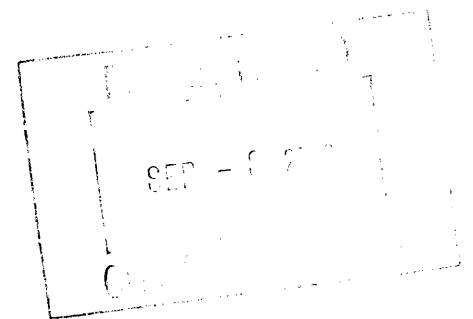
CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Stephen Murphy
Signature of Applicant/Designee

9/8/09
Date

Thomas M. Mackey
Signature of Inspections Official

9/8/09
Date





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>45 North St.</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot <u>5289 sq ft</u>	Number of Stories <u>3</u>
Tax Assessor's Chart, Block & Lot Chart# <u>14</u> Block# <u>A</u> Lot# <u>9</u>	Applicant * must be owner, Lessee or Buyer * Name <u>Mark White</u> Address <u>254 Commercial St</u> City, State & Zip <u>Portland, ME 04101</u>	Telephone: <u>207-329-1655</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Same</u> Address City, State & Zip	Cost Of Work: \$ <u>800-</u> C of O Fee: \$ Total Fee: \$ <u>30</u>
Current legal use (i.e. single family) <u>Two Family</u> Number of Residential Units <u>2</u> If vacant, what was the previous use? Proposed Specific use: <u>New Basement Bulkhead</u> Is property part of a subdivision? <u>NO</u> If yes, please name Project description: <u>Remove Failed bulkhead wall and replace with new concrete unit tied to foundation</u>		
Contractor's name: <u>Stephen Murphy</u> Address: <u>133 Lexington Ave</u> City, State & Zip <u>Portland ME 04103</u> Telephone: <u>671-6291</u> Who should we contact when the permit is ready: <u>Stephen</u> Telephone: <u>671-6291</u> Mailing address: <u>133 Lexington Ave</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: Stephen Murphy Date: Sept 3, 2009

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

existing Foundation

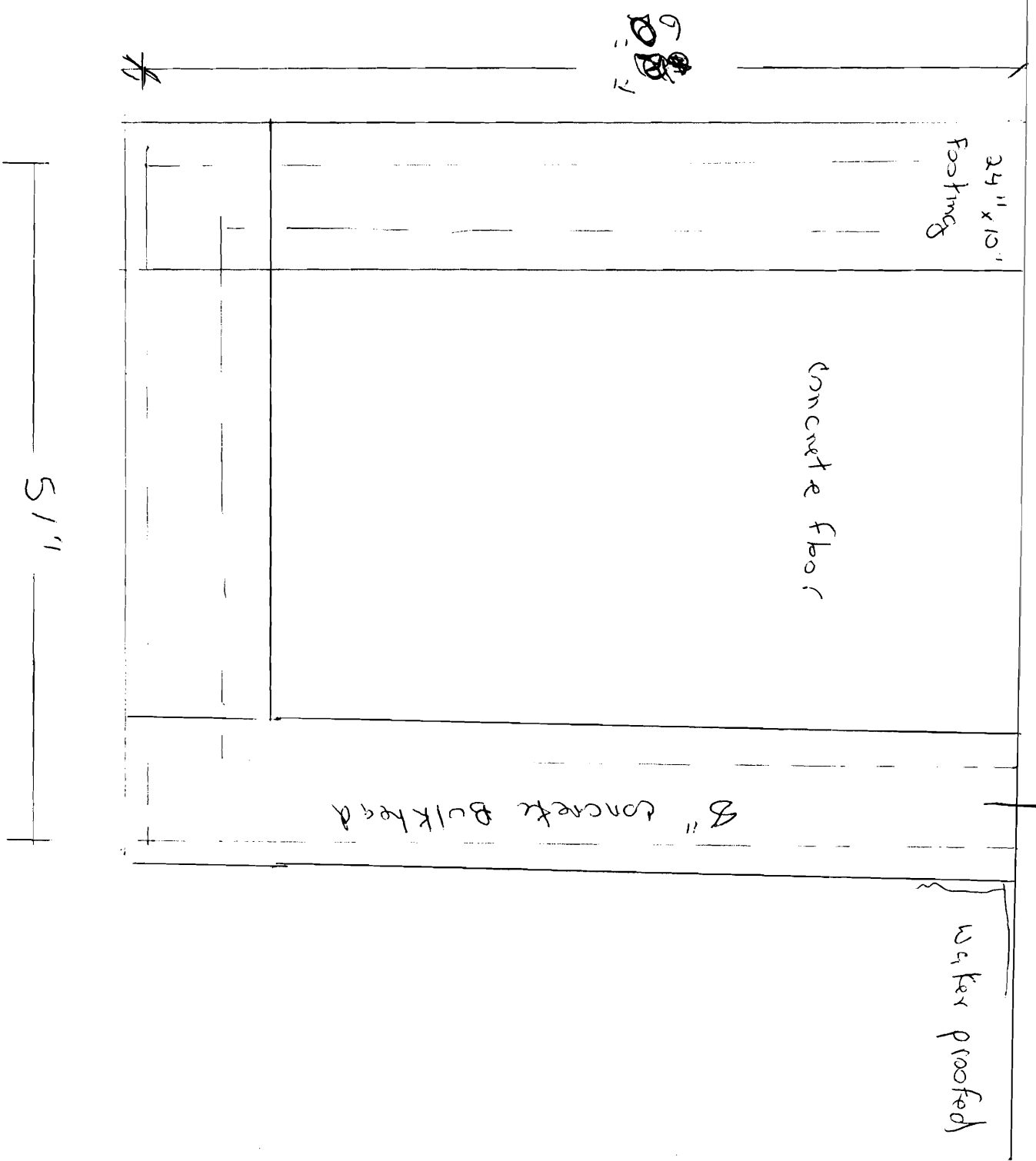
pinch to existing

24" x 10"
Footings

concrete floor

8" concrete Bulkhead

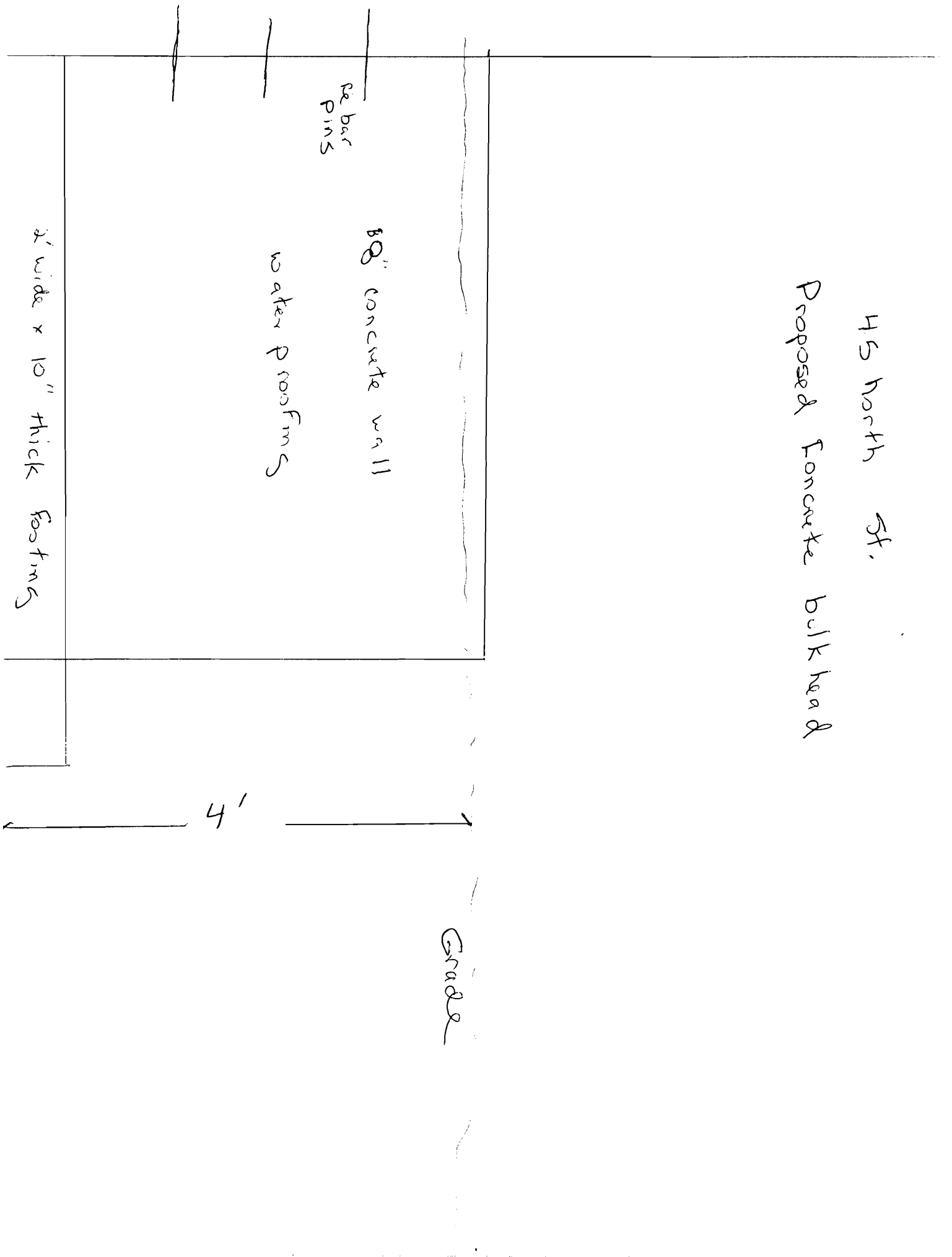
water proofed



51"

existing building

45 North St.
Proposed Concrete Bulkhead



50

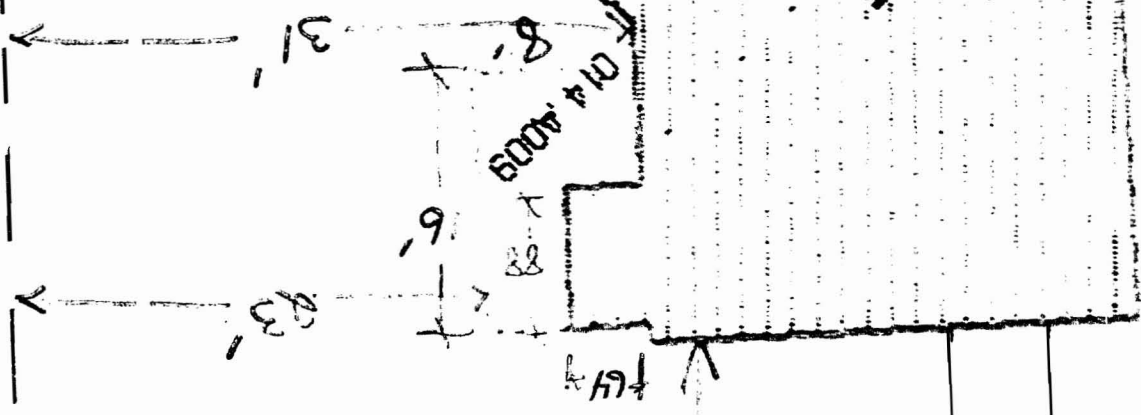
191

Proposed
new
Stair 6'x6'
Improvements
Rise to main
level

45 North St

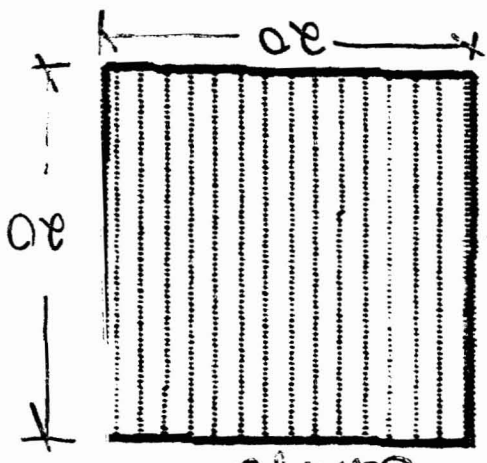
5289

Boundary



existing bulkhead
proposed and improved bulkhead

existing porch 6'x6'
proposed porch 8'x6'



Existing
Garage

30'

014

303

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Business Name:	Contractor Name: Stephen Murphy	Contractor Address: 133 Lexington Ave Portland	Phone (207) 671-6291
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Duplex	

Proposed Use: 2 Family Home - remove and replace failed bulkhead unit	Proposed Project Description: remove and replace failed bulkhead unit
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Dept: Zoning	Status: Approved	Reviewer: Tom Markley	Approval Date: 09/08/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Tom Markley	Approval Date: 09/08/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			