

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 071071

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME

This is to certify that GREY ALISON W & OLIVIERE MURPHY/Derek Gav

has permission to addition of half bath / kitchen remodel

AT 55 MONTREAL ST

015 E018001

SEP - 4 2007

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 procured before this building or part thereof is laid or closed-in. 24 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 _____

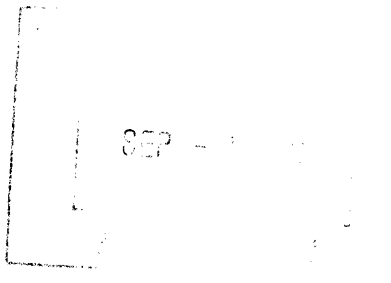
Department Name

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: 07-1071		Issue Date:		CBL: 015 E018001	
Location of Construction: 55 MONTREAL ST		Owner Name: GREY ALISON W & OLIVER F M		Owner Address: 55 MONTREAL ST	
Business Name:		Contractor Name: Derek Gavin		Contractor Address: 23 Woodspell Road Scarborough	
Lessee/Buyer's Name		Phone:		Phone: 2074328844	
Past Use: Single Family Home		Proposed Use: Single Family Home - addition of half bath / kitchen remodel		Permit Type: Alterations - Dwellings	
Proposed Project Description: addition of half bath / kitchen remodel		Permit Fee: \$80.00		Cost of Work: \$5,500.00	
		CEO District: 1		Zone:	
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>		INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i> Signature: <i>[Signature]</i>	
		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: 08/31/2007		Zoning Approval	
<ol style="list-style-type: none">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 checked="" type="checkbox"/> Wetland <input checked="" 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: <i>9/4/07</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>9/4/07</i>			

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

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

Permit No: 07-1071	Date Applied For: 08/31/2007	CBL: 015 E018001
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Location of Construction: 55 MONTREAL ST	Owner Name: GREY ALISON W & OLIVER F M	Owner Address: 55 MONTREAL ST	Phone:
Business Name:	Contractor Name: Derek Gavin	Contractor Address: 23 Woodspell Road Scarborough	Phone (207) 432-8844
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home - addition of half bath / kitchen remodel	Proposed Project Description: addition of half bath / kitchen remodel
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 09/04/2007**Note:** **Ok to Issue:** ☒

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 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:** 09/04/2007**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.



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: 55 MONTREAL STREET, PORTLAND, ME 04101			
Total Square Footage of Proposed Structure 18 sq ft		Square Footage of Lot 6880 sq ft	
Tax Assessor's Chart, Block & Lot Chart# 15 Block# E Lot# 18		Owner: ALISON W GREY OLIVER FC MURRAY	
Lessee/Buyer's Name (If Applicable)		Telephone: 761-1955	
Applicant name, address & telephone: ALISON W GREY & OLIVER FC MURRAY 55 MONTREAL ST PORTLAND, ME 04101		Cost Of Work: \$ 5500.00 Fee: \$ 80 C of O Fee: \$ _____	
Current legal use (i.e. single family) SINGLE FAMILY If vacant, what was the previous use? _____ Proposed Specific use: SAME - ADDITION OF HALF BATH Is property part of a subdivision? NO If yes, please name _____ Project description: ADDITION OF HALF BATH AS PART OF KITCHEN REMODEL			
Contractor's name, address & telephone: Who should we contact when the permit is ready: DEREK GAVIN Mailing address: 23 WOODSPELL RD Phone: 432-8844 SCARBOROUGH, ME 04074			

Please submit all of the information outlined in the Commercial Application 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 visit us on-line at www.portlandmaine.gov, stop by the Building Inspections 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 of applicant:

Date: **8/31/07**

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

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	015 E018001
Location	55 MONTREAL ST
Land Use	SINGLE FAMILY
Owner Address	GREY ALISON W & OLIVER F MURRAY JTS 55 MONTREAL ST PORTLAND ME 04101
Book/Page	21661/150
Legal	15-E-18-22 MONTREAL ST 51-57 6880 SF

Current Assessed Valuation

Land	Building	Total
\$111,800	\$131,500	\$243,300

Property Information

Year Built 1926	Style Old Style	Story Height 2	Sq. Ft. 1800	Total Acres 0.158	
Bedrooms 3	Full Baths 1	Half Baths	Total Rooms 7	Attic None	Basement Full

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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Sales Information

Date 08/11/2004	Type LAND + BLDING	Price \$275,000	Book/Page 21661-150
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Picture and Sketch

Picture	Sketch	Tax Map
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[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!

P.O. # 55 MONTREAL ST. PORTLAND
MAINE

CUSTOMER NAME
OLIVER MURRAY

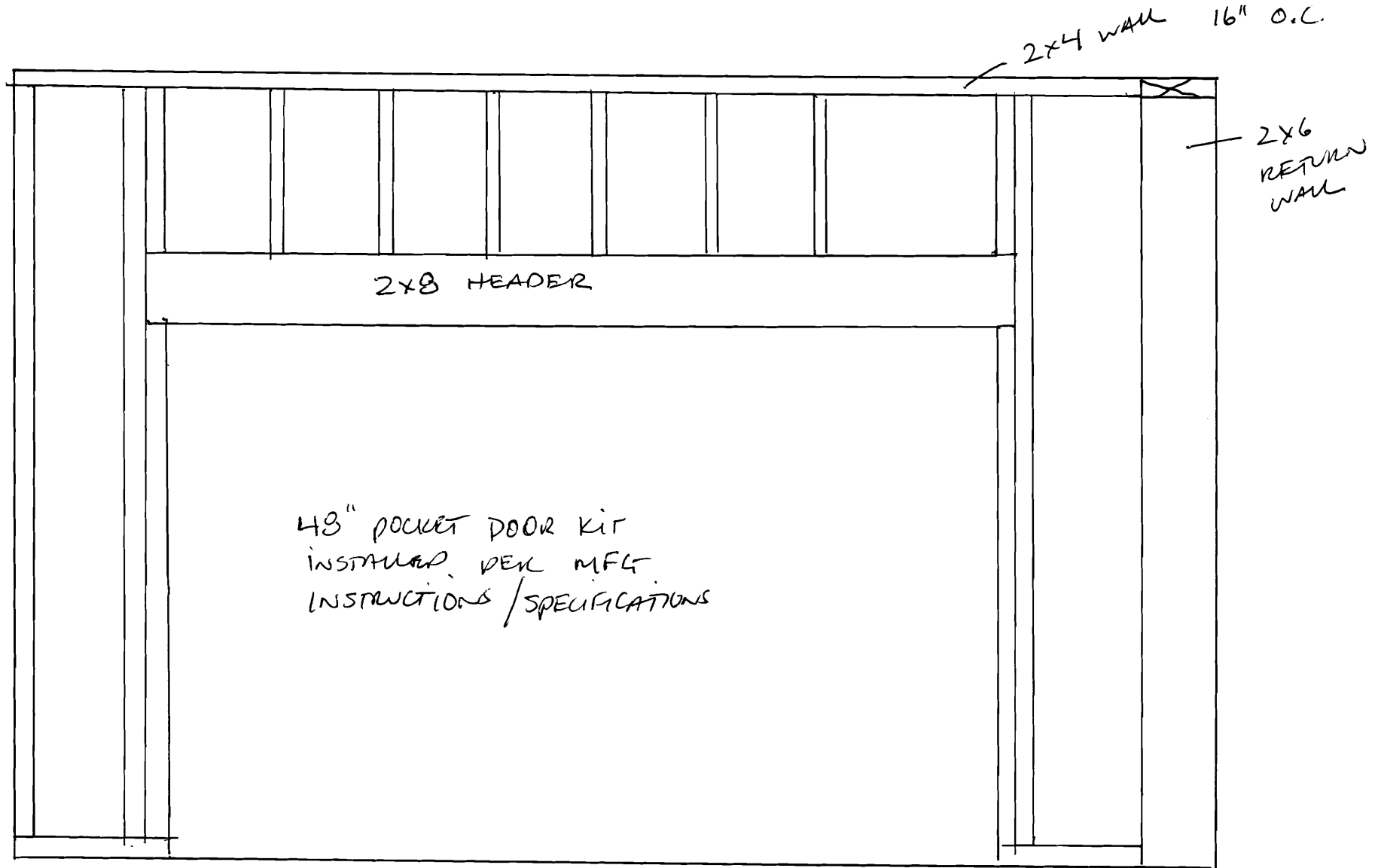
Value Quality & Service

GAVIN
CONSTRUCTION

- Kitchen Installations
- Counter Top Installations
- Remodeling
- Custom Woodwork
- Cabinetry • Closet Systems



432-8844
Scarborough, ME



NOT TO SCALE

Bathroom Door

P.O. # 55 MONTREAL ST PORTLAND
MAINE

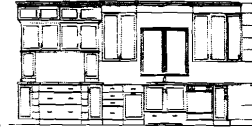
CUSTOMER NAME

OLIVER MURRAY

Value Quality & Service

GAVIN
CONSTRUCTION

- Kitchen Installations
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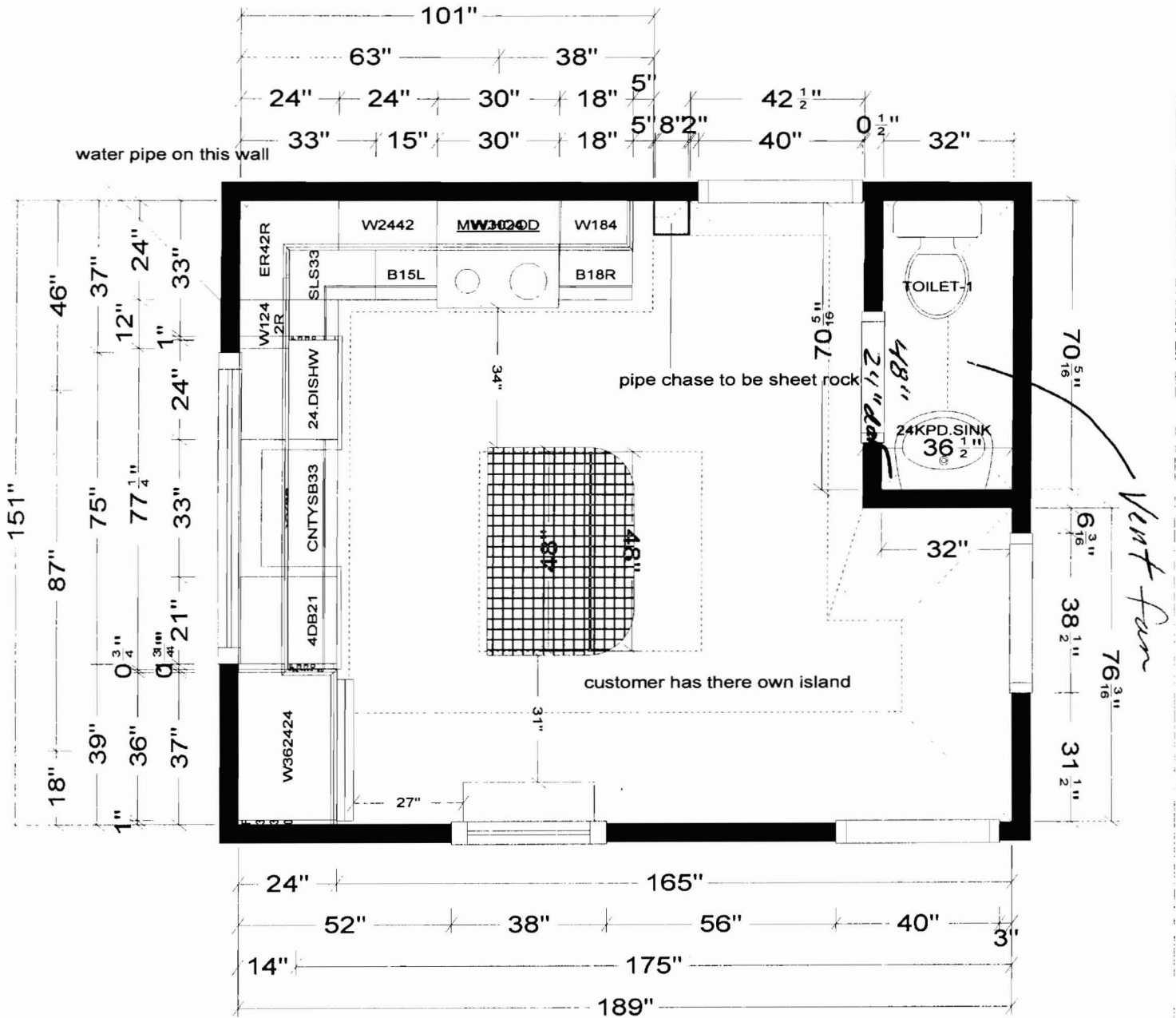


432-8844
Scarborough, ME

2x4 RETURN
WALL

2x6 CONSTRUCTION
16" O.C.

NOT TO SCALE

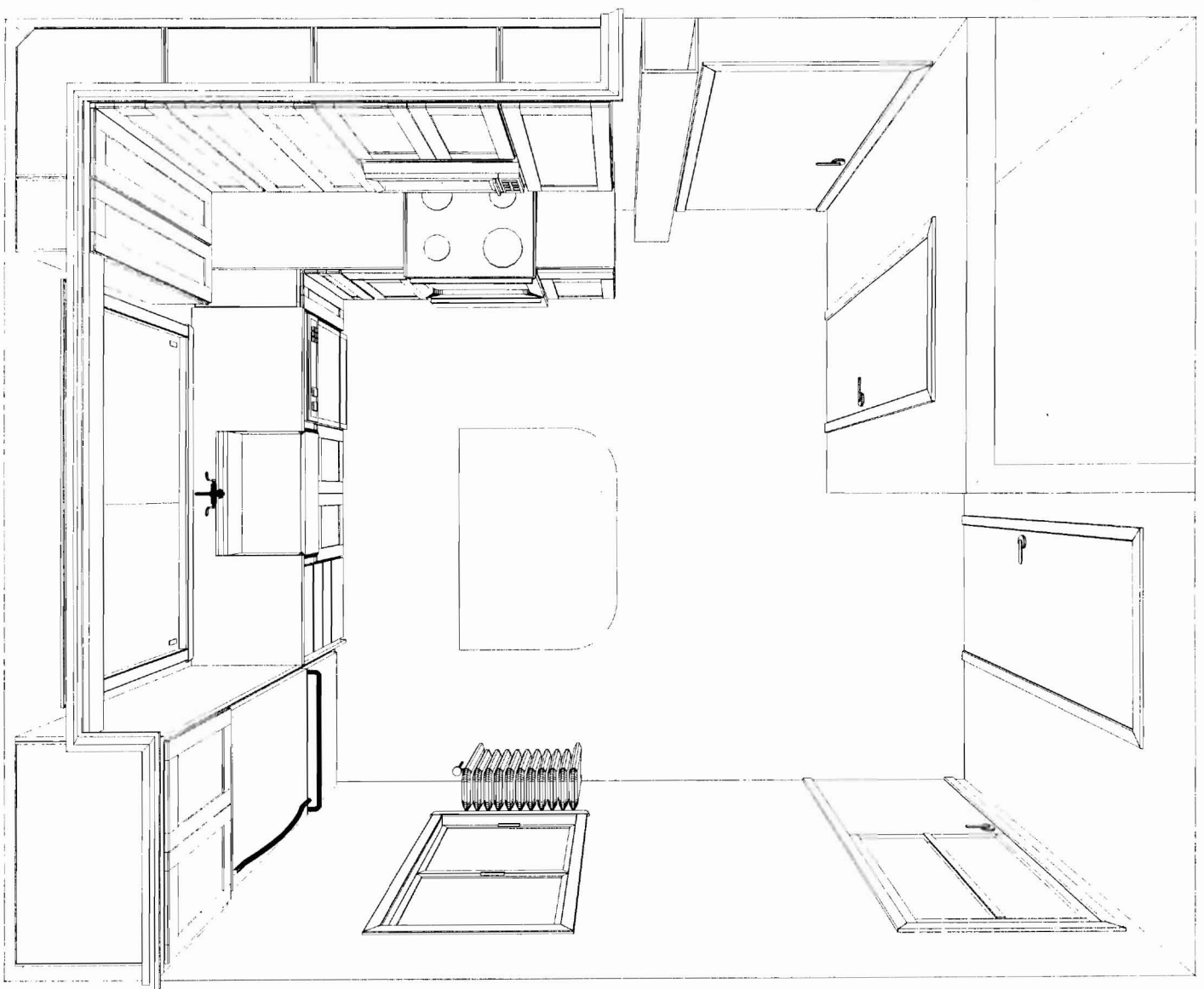


All dimensions, size designations given are subject to verification on job site and adjustment to fit job conditions.



This is an original design and must not be released or copied unless applicable fee has been paid or job order placed.

Designed: 7/24/2007
Printed: 8/13/2007



Note: This drawing is an artistic interpretation of the general appearance of the design. It is not meant to be an exact rendition.



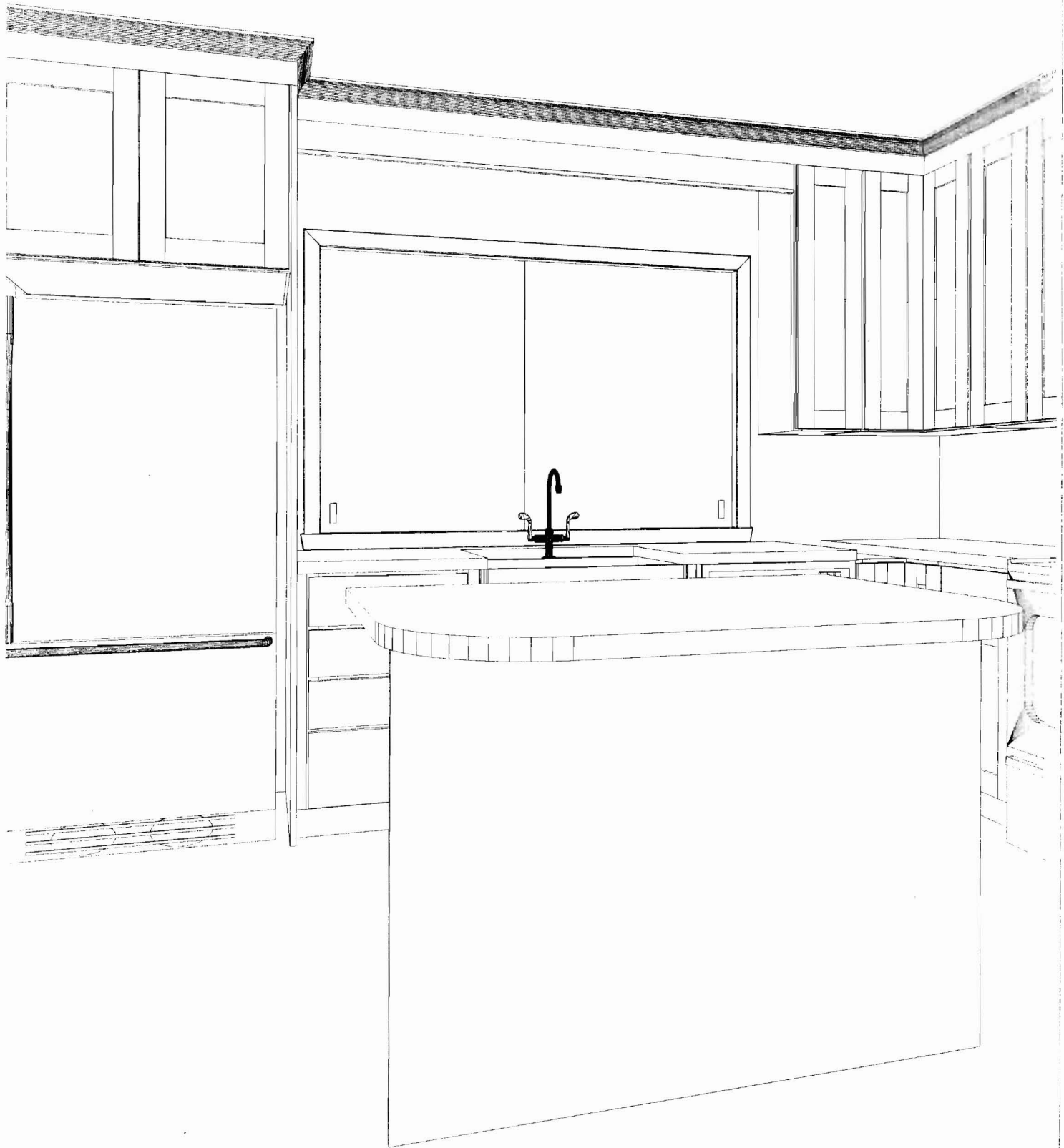
Designed: 7/24/2007
Printed: 8/13/2007



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Designed: 7/24/2007
Printed: 8/13/2007



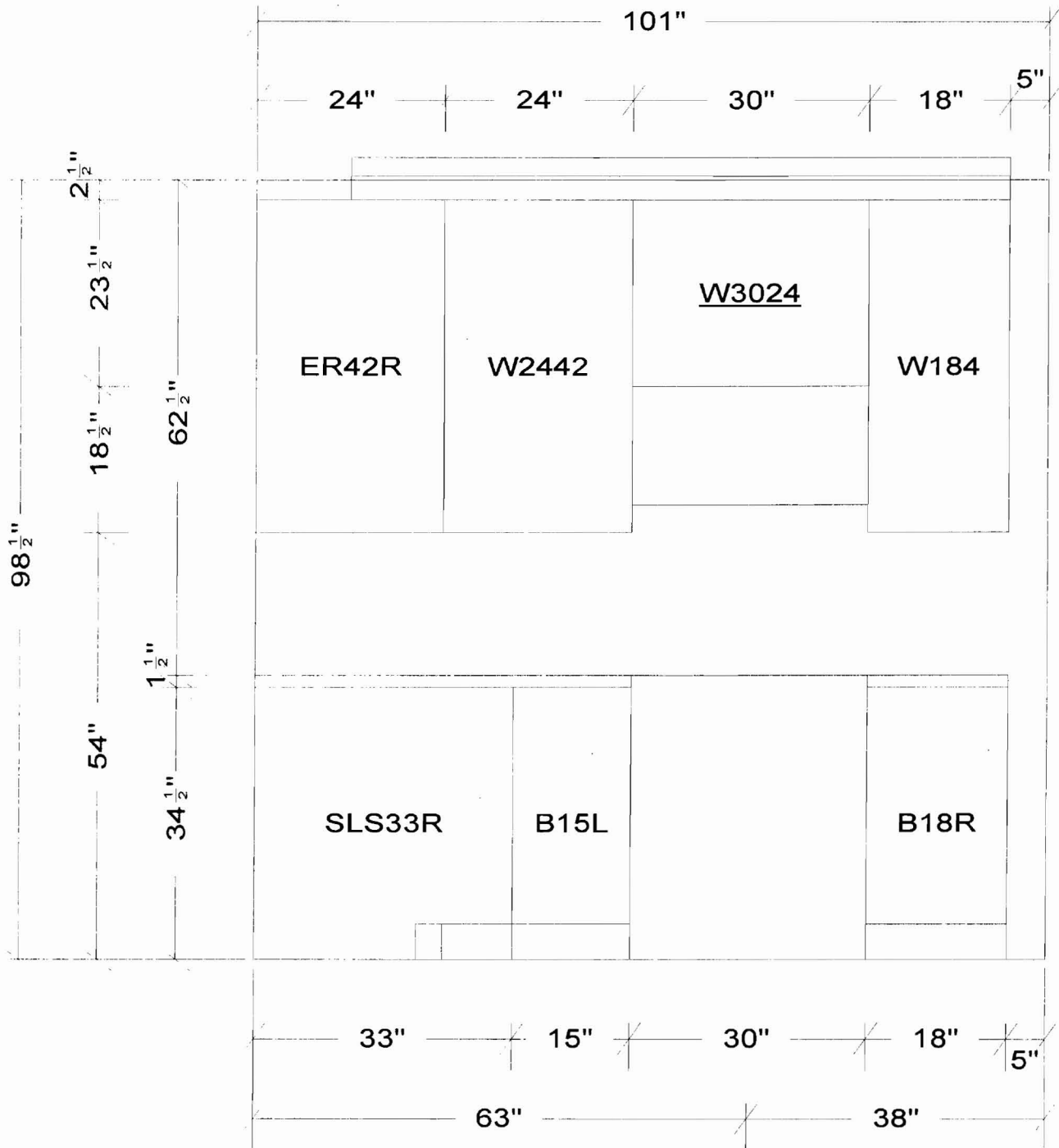
Note: This drawing is an artistic interpretation of the general appearance of the design. It is not meant to be an exact rendition.



Designed: 7/24/2007
Printed: 8/13/2007

6230da61.kit

Drawing #: 1

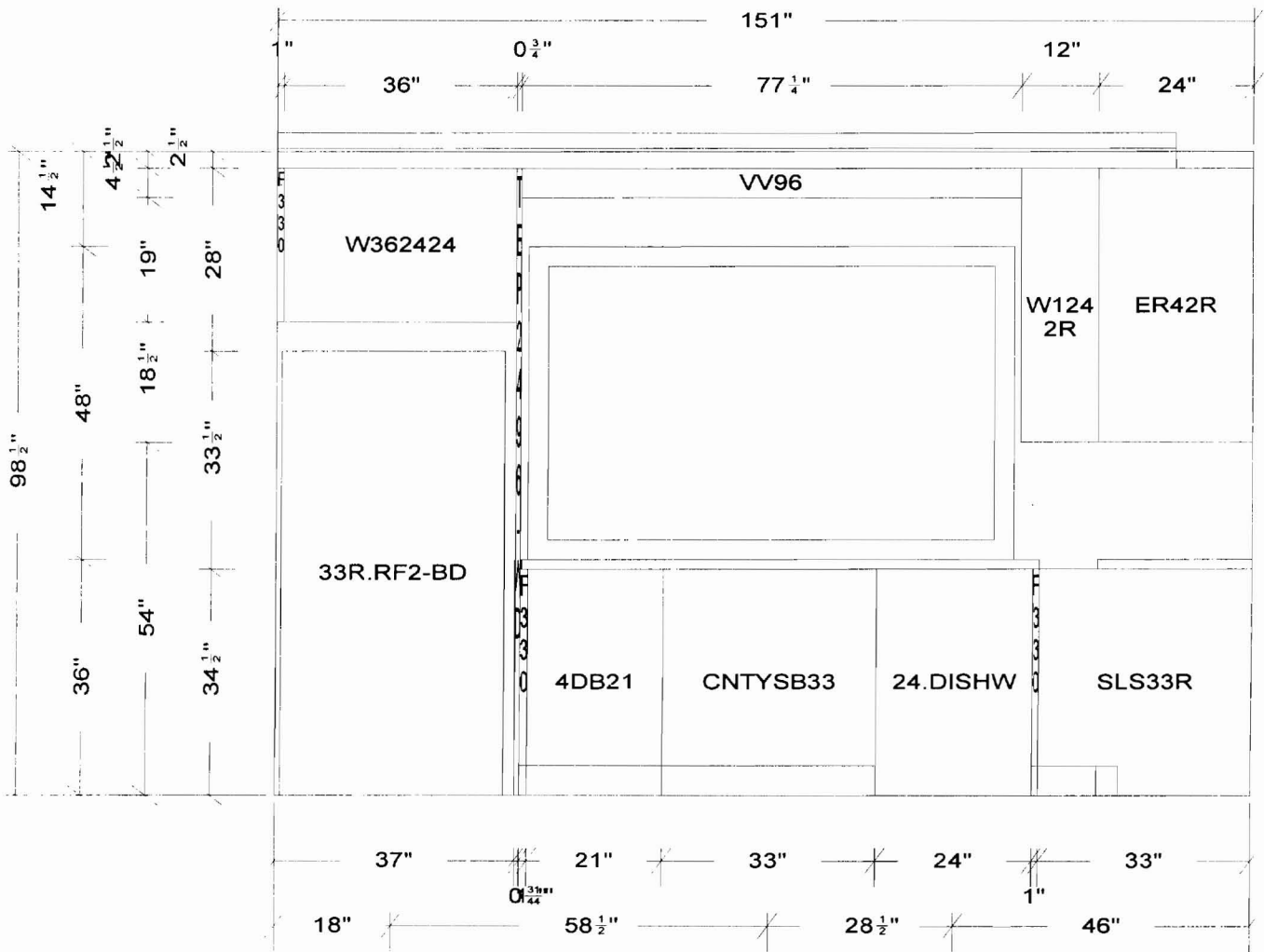


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Same-Day Permitting

As part of Portland's city-wide effort to improve customer service and help streamline doing business within the City, the Inspections Division has developed a new permitting system for qualified properties and for specific construction projects.

This permitting program applies only to existing single family homes not located within a historic district or shoreland zone.

Eligible Projects

Please submit a complete application with the required plans

- ☒ Interior non structural projects (i.e. Adding closets, bathrooms, changing floor plans, kitchen remodels)
- ☐ Repairs to existing decks, porches and stairs that meet current zoning setbacks
- ☐ Adding or replacing windows and doors (not to include bay windows)
- ☐ Sheds less than 100 sq. ft.
- ☐ One story open entry/porch, 50 sq. ft. or less with maximum 6 ft. projection from the principal structure
- ☐ Chimney installation (NFPA 211 disclosure statement required)
- ☐ Propane tanks
- ☐ Heating Appliances (i.e. HVAC systems, gas inserts/monitors, wood/pellet stoves)
- ☐ Bulkheads 50 sq. ft. or less with maximum of 2 ft. in height (low profile)

Inspections are still required per City Code of Ordinance.

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 visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that this project meets the above criteria and that the work performed will not go beyond these parameters.

Signature of applicant:

Date: 8/31/07

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