

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

INSPECTION

PERMIT

Permit Number 18878
PERMIT ISSUED
JUL 2 2008
CITY OF PORTLAND

This is to certify that ANDERSON MATTHEW A

has permission to Dormer Addition - Lower Ceiling Joists Make Attic Livable Space

AT 45 MONUMENT ST

provided that the person or persons performing or supervising this work shall comply with all of the provisions of the Statutes of the State 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 leased or closed-in. 4 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 W. MacCallister 7/1/08
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: 08-0778	Issue Date:	CBL: 016 G005001
-----------------------	-------------	---------------------

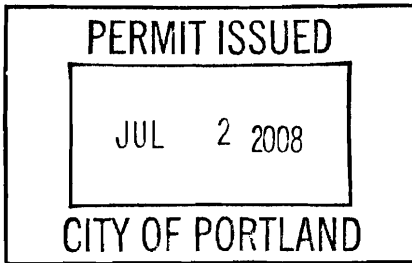
Location of Construction: 45 MONUMENT ST	Owner Name: ANDERSON MATTHEW A	Owner Address: 45 MONUMENT ST	Phone: 207-939-1607
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Duplex	Zone: R6

Past Use: Two Family Residential	Proposed Use: Two Family Residential - Dormer Addition - Lower Ceiling Joists, make Attic a livable Space	Permit Fee: \$290.00	Cost of Work: \$27,000.00	CEO District: 1
Proposed Project Description: Dormer Addition - Lower Ceiling Joists, make Attic a livable Space		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB IRC 2003	
		Signature:	Signature:	

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: lmd	Date Applied For: 06/27/2008	Zoning Approval		
-------------------------	---------------------------------	------------------------	--	--

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>Jim 6/30/08</i></p>	<p>Zoning Appeal</p> <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 <p>Date: _____</p>	<p>Historic Preservation</p> <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 <p>Date: <i>Jim 6/30/08</i></p>
	<p><i>OK per 14433 per 14-4369 OK</i></p>		



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 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 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.

[Signature]
Signature of Applicant/Designee

7/2/08
Date

[Signature]
Signature of Inspections Official

7/1/08
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>41-45 Monument St.</u>		
Total Square Footage of Proposed Structure/Area <u>Addition dormer 255</u>	Square Footage of Lot <u>± 1400</u>	Number of Stories <u>3</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant * must be owner, Lessee or Buyer* Name <u>Matthew Anderson</u> Address <u>45 Monument St.</u> City, State & Zip <u>Portland, ME 04101</u>	Telephone: <u>939-1607</u>
Lessee/DBA (If Applicable) <u>JUN 27 2008</u>	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>27,000</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>2 family</u> Number of Residential Units <u>2</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>Living Space</u> Is property part of a subdivision? <u>N</u> If yes, please name _____ Project description: <u>✓ Dormer addition - Lower ceiling joists to make attic livable space. (2nd + 3rd Floor one living space)</u>		
Contractor's name: <u>SELF</u> Address: _____ City, State & Zip _____ Telephone: _____ Who should we contact when the permit is ready: _____ Telephone: _____ Mailing address: _____		

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: Matthew Anderson Date: 6/27/08

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

City of Portland, Maine - Building or Use Permit

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

Permit No: 08-0778	Date Applied For: 06/27/2008	CBL: 016 G005001
------------------------------	--	----------------------------

Location of Construction: 45 MONUMENT ST	Owner Name: ANDERSON MATTHEW A	Owner Address: 45 MONUMENT ST	Phone: 207-939-1607
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Duplex	

Proposed Use: Two Family Residential - Dormer Addition - Lower Ceiling Joists, make Attic a livable Space	Proposed Project Description: Dormer Addition - Lower Ceiling Joists, make Attic a livable Space
---	--

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 07/01/2008

Note: **Ok to Issue:**

- 1) 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.
- 2) 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:** 06/30/2008

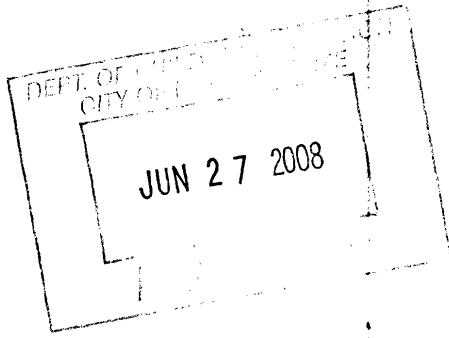
Note: **Ok to Issue:**

- 1) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating.
- 2) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 3) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 4) 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.

45 MONUMENT ST

$\frac{1}{8}'' = 1'$

MONUMENT ST.



ST. LAWRENCE

SIDEWALK

SIDEWALK

13'

1'-4"

LANDING

FRONT YARD
(10' x 4')

47 MON.

41-45
MONUMENT

PROPOSED
CORNER

LOWER
ROOF

RIDGE

VALLEY

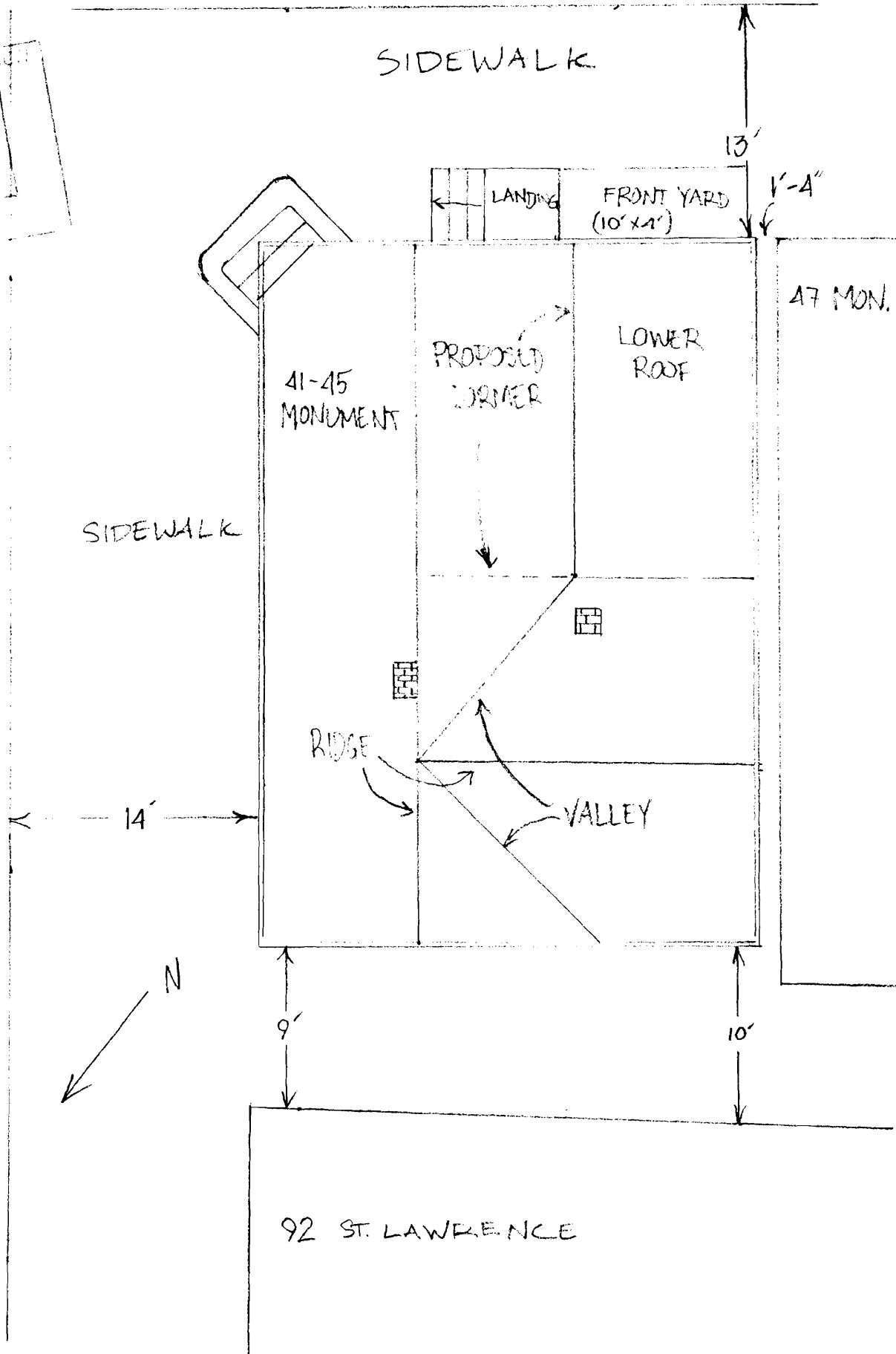
14'

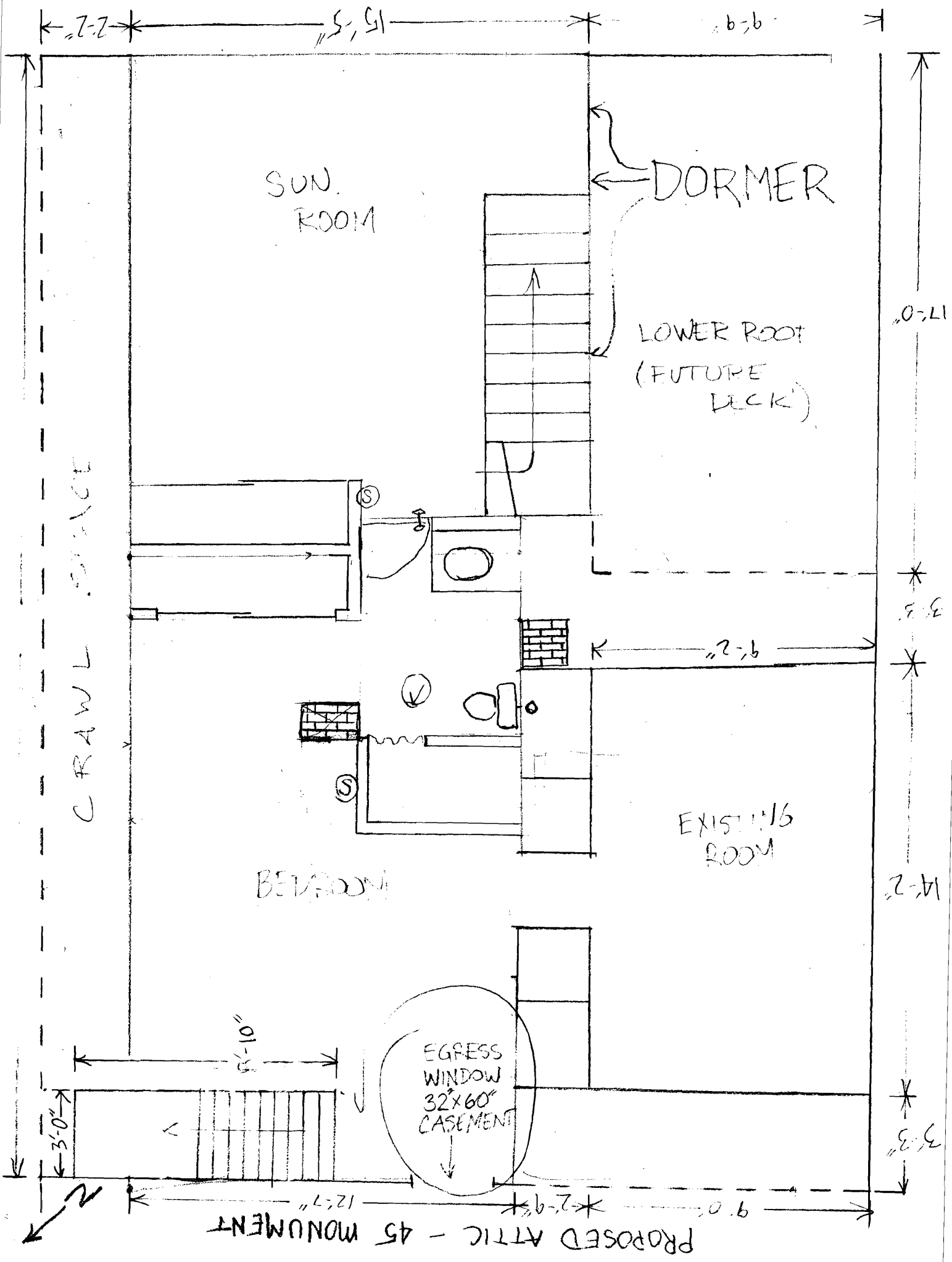
N

9'

10'

92 ST. LAWRENCE





SUN ROOM

DORMER

LOWER ROOF
(FUTURE DECK)

CRAWL SPACE

EXISTING ROOM

BEDROOM

EGRESS WINDOW
32x60 CASEMENT

PROPOSED ATTIC - 45 MONUMENT

7'-7" 15'-9" 9'-0"

10'-11"

5'-3"

7'-6"

14'-2"

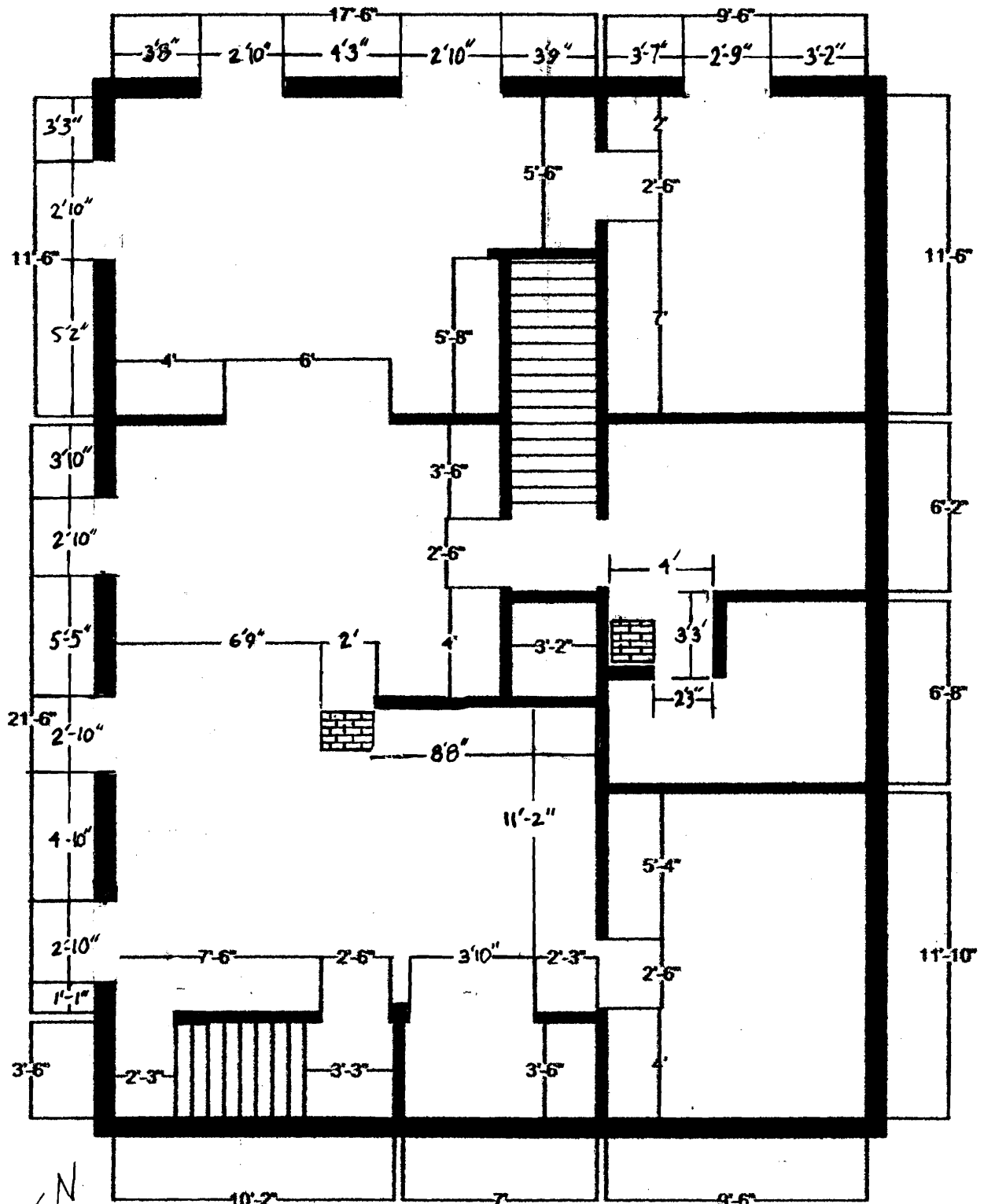
3'-3"

8'-10"

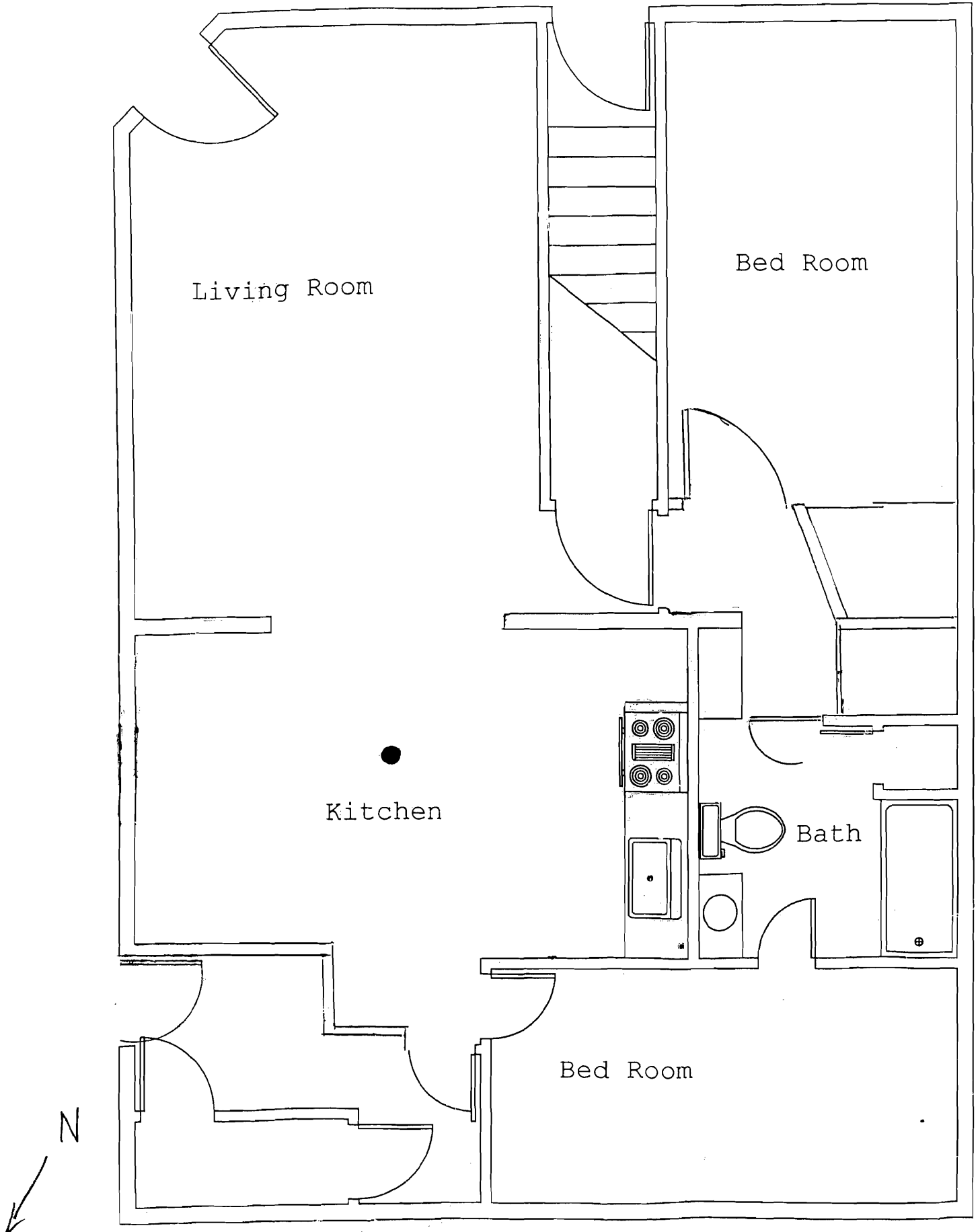
3'-0"

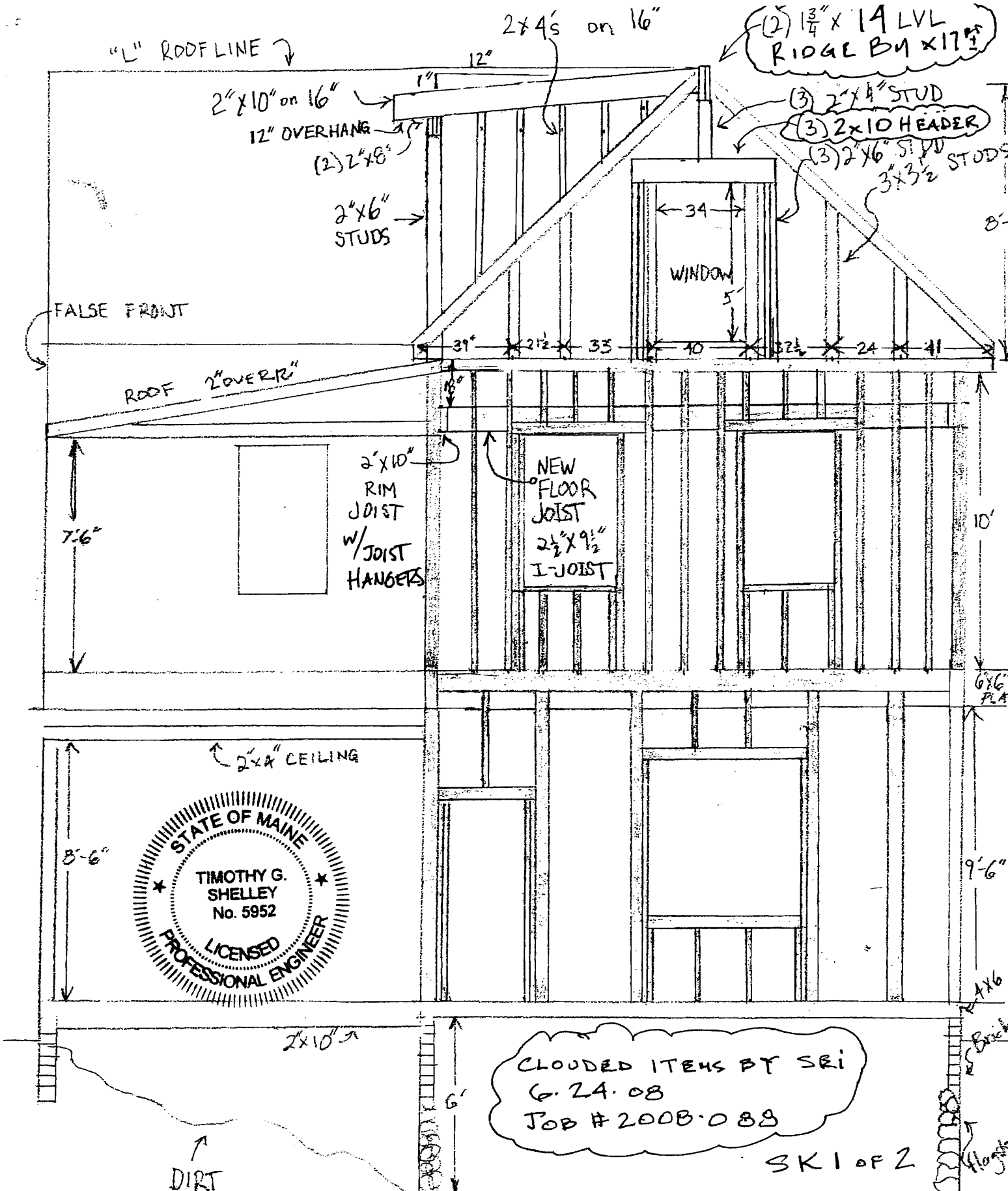
12'-7" 7'-9" 9'-0"

45 MONUMENT - 2ND FLOOR PLAN

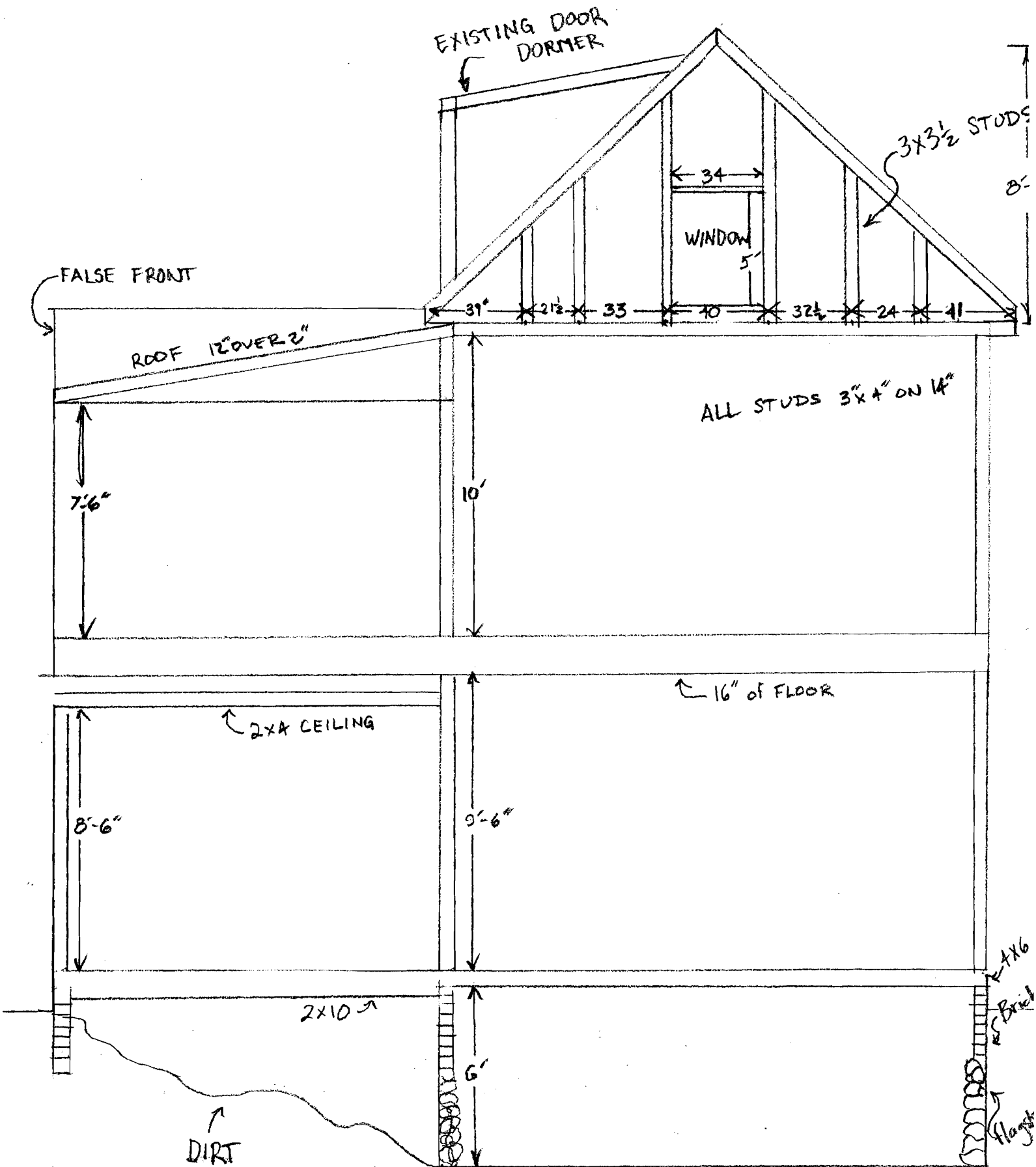


41 MONUMENT ST 1ST FLOOR



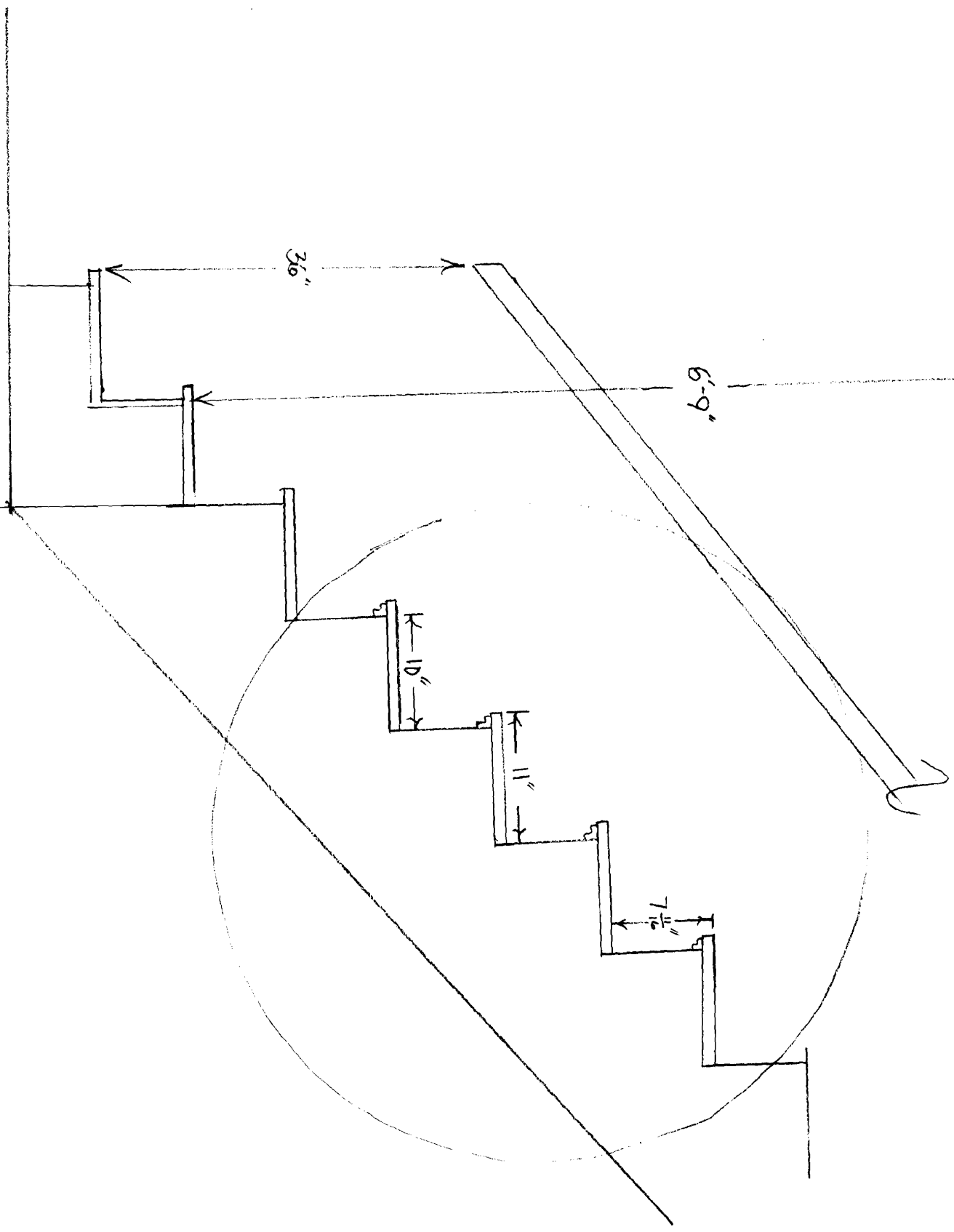


41-45 MONUMENT STREET
 VIEW OF SOUTHEAST FAÇADE - FROM MONUMENT ST

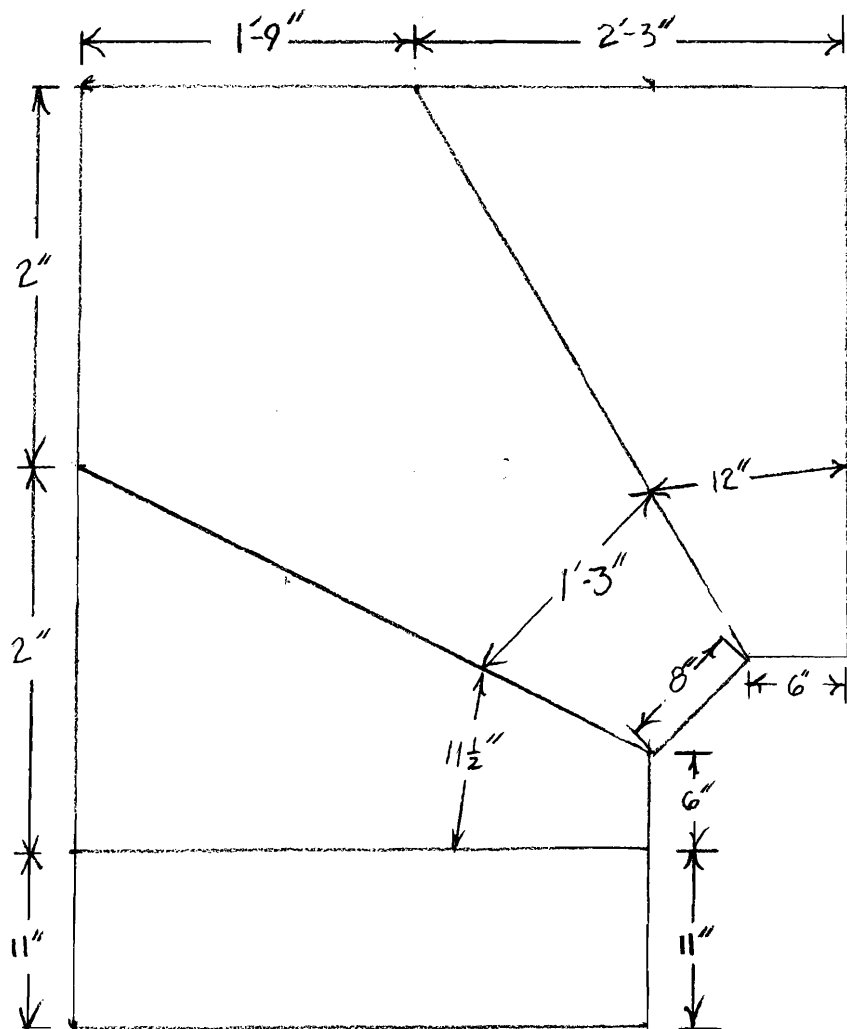


A

STAIRS DETAIL - 45 MONUMENT ST.



DETAIL OF WINDER TREADS - 45 MONUMENT ST.



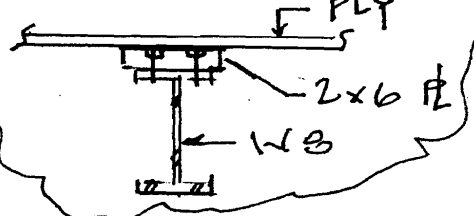
NEW FLOOR JOIST
 LAYOUT - $2\frac{1}{2}'' \times 9\frac{1}{2}''$ I-JOISTS
 ON 16"
 ATTACHED TO $1\frac{1}{2}'' \times 9\frac{1}{2}''$
 RIM JOIST

RIDGE BM (ABOVE)

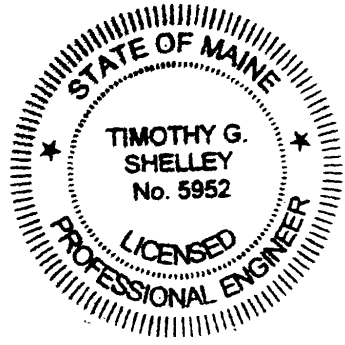
Lower
 Roof
 (Future
 Deck)

POST FROM RIDGE
 BM. ABOVE

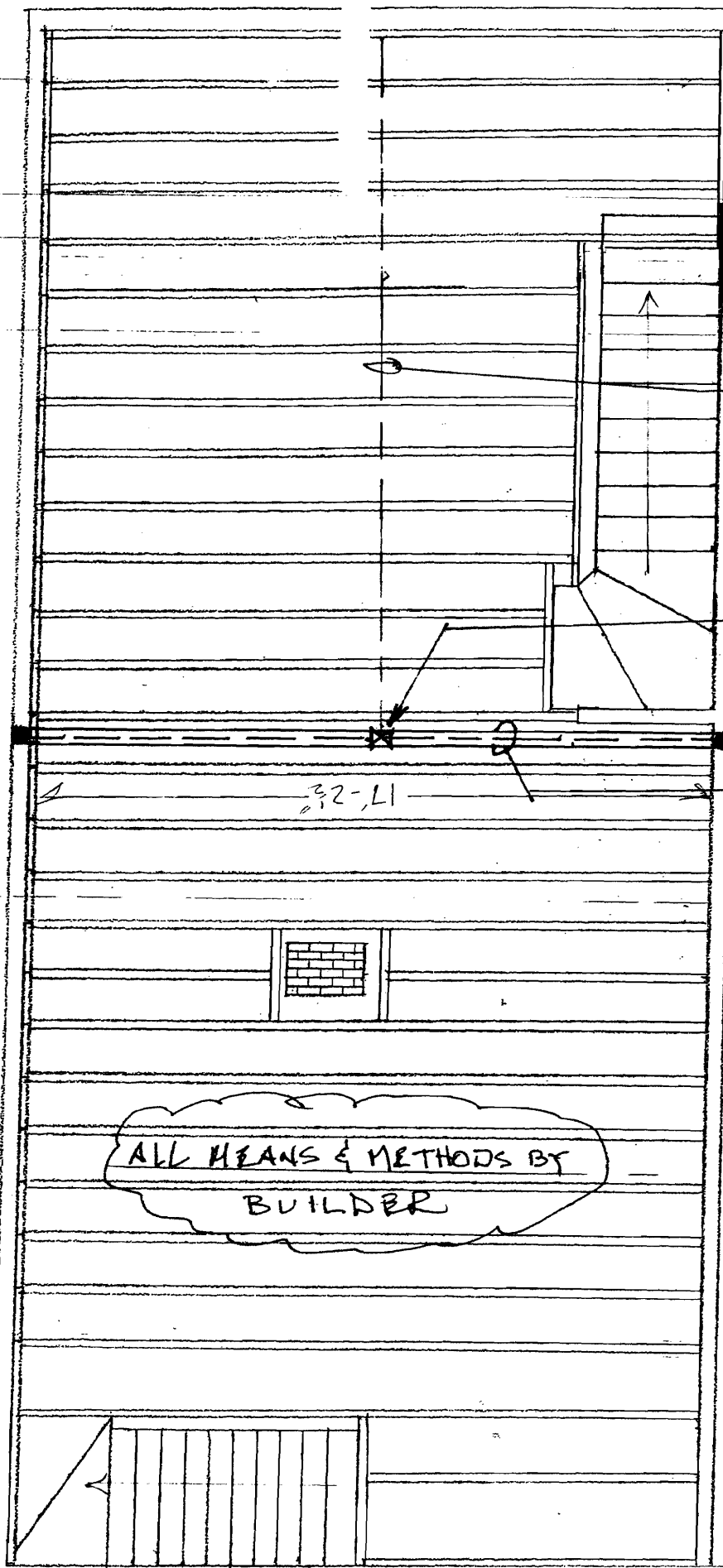
W8x15 STEEL
 BEAM (90x15)
 WITH 2x6 PL
 BOLTED TO TOP
 FLANGE WITH $\frac{3}{8}''$
 BOLTS @ 32" OC
 (2) ROWS



ALL MEANS & METHODS BY
 BUILDER



SK 2 of 2

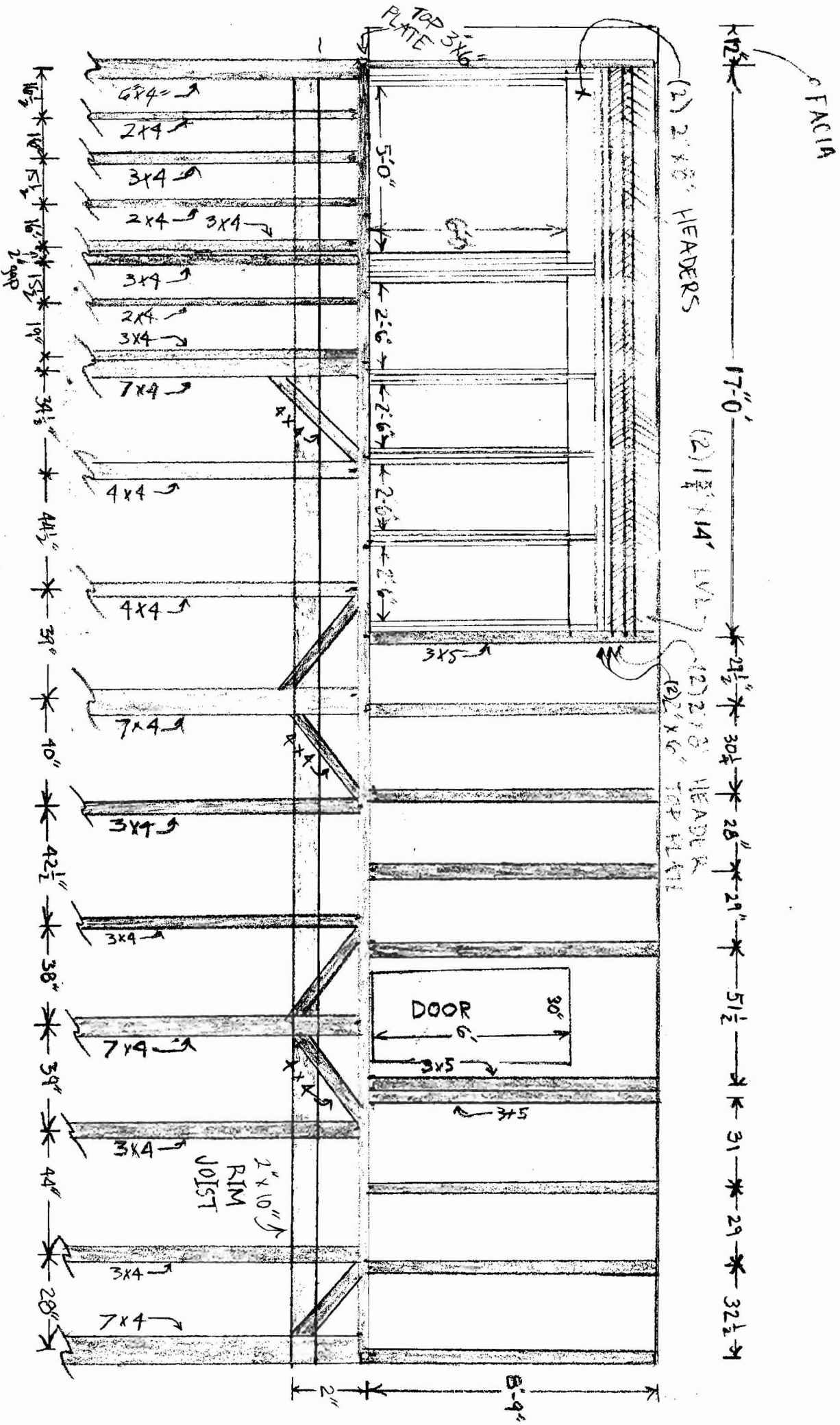


DETAIL OF JOISTS/PLATE/RAFTERS

1/4" = 1'

ALL LUMBER DIMENSIONS TRUE - NOT MILLED

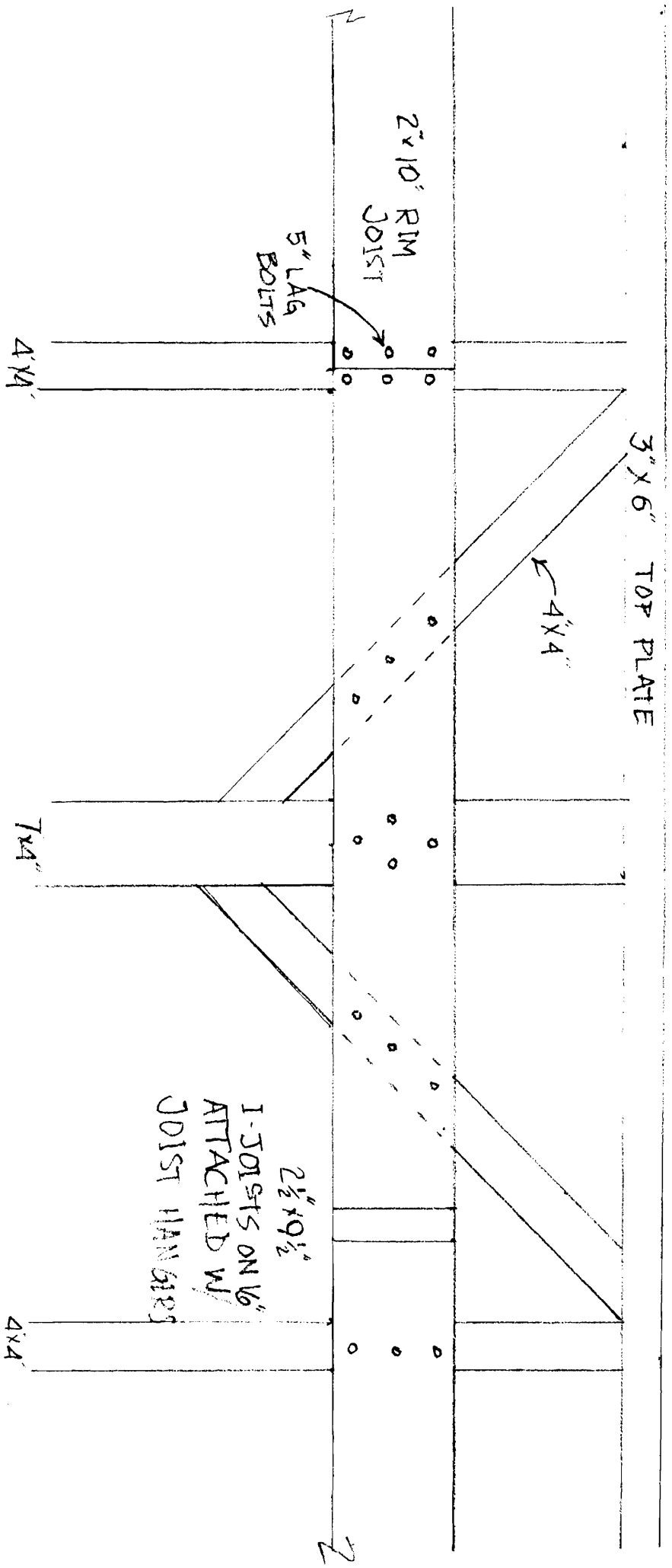
VIEW FROM INTERIOR TOWARD SOUTHWEST

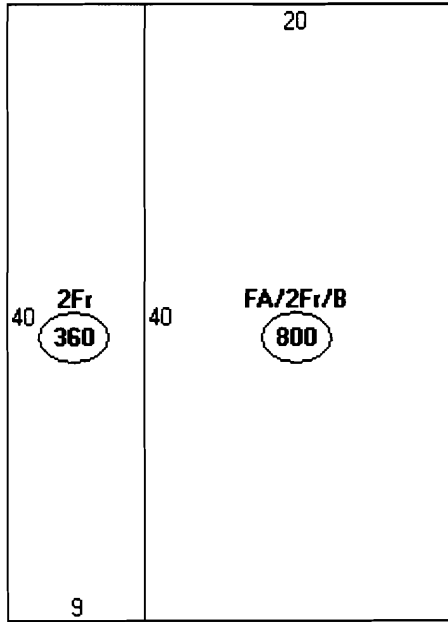


45 MONUMENT ST.

1" = 1'

DETAIL OF STUDS
AND ATTACHMENT OF RIM JOIST





Descriptor/Area

A: FA/2Fr/B
800 sqft

B: 2Fr
360 sqft

1160

580 sq ft 50^{sq}
putting in less than 100 sq ft
about 106 - 402 left

OK

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

*30% max lot coverage
OK*

Card Number 1 of 1
 Parcel ID 016 G005001
 Location 45 MONUMENT ST
 Land Use TWO FAMILY
 Owner Address ANDERSON MATTHEW A
 45 MONUMENT ST
 PORTLAND ME 04101
 Book/Page 18971/156
 Legal 16-G-5
 MONUMENT ST 41-45
 ST LAWRENCE ST 86-88
 1465 SF

Current Assessed Valuation

Land	Building	Total
\$105,100	\$172,400	\$277,500

2640

Property Information

Year Built 1880	Style Old Style	Story Height 2	Sq. Ft. 2640	Total Acres 0.034
Bedrooms 4	Full Baths 2	Half Baths	Total Rooms 10	Attic Full Finsh
				Basement Full

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
-------------	-----------------	-------------------	-------------	--------------	------------------

Sales Information

Date 03/01/2003	Type LAND + BLDING	Price \$122,000	Book/Page 18981-156
---------------------------	------------------------------	---------------------------	-------------------------------

Picture and Sketch

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

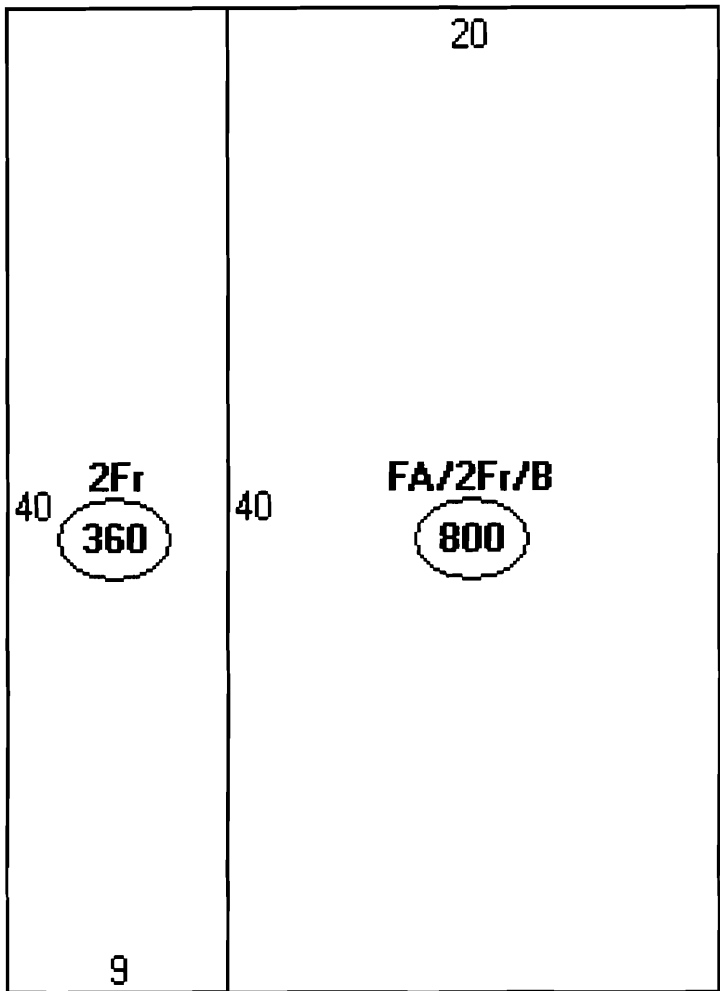
[Click here](#) to view Tax Roll Information.

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

New Search!

Matt Andersen
45 monument st.
2 unit.





Descriptor/Area

A: FA/2Fr/B
800 sqft

B: 2Fr
360 sqft

	Parcel 016 G005001	Acct No 2650	Property Address 45 MONUMENT ST		R6	LCI:	R
Owner Name 1	ANDERSON MATTHEW A		Property Type	RESIDENTIAL	Dist:	1	View
Owner Name 2			Description	16-G-5 MONUMENT ST 41-45 ST LAWRENCE ST 86-88 1465 SF			View
Street Address	45 MONUMENT ST		Census Tract	2.00			View
City, State, Zip	PORTLAND	ME	04101				

- Prop Info
- Inspections
- Site Plans
- Permits
- Complaints
- Food/Water/Odor
- Documents
- Letters
- Property Mgmt

Land Use	TWO FAMILY		Nbr of Units	2		Click Here to View: Picture Sketch	
Zone	R6		Neighborhood				
District	EAST END		Historic District	No			
Yr Built	1880		House Style	OLD STYLE			
Total Area	10	Baths	2	1/2 Baths	0	Bedrms	4
Heat Type	BASIC		Basement	FULL			
Fuel Type	OIL		Attic	FULL FINSH			
System Type	HOT WATER						
NOTES							