

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1544	Issue Date: DEC 27 2001	CBL: 026 B018001
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Location of Construction: 197 Oxford St	Owner Name: Bayside Iii Llc	Owner Address: Po Box 266	Phone: CITY OF PORTLAND
Business Name: n/a	Contractor Name: Dipeitro, David	Contractor Address: 221 Virginia Street Portland	Phone: 2077979531
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Alterations - Multi Family	Zone: R-6

Past Use: Multi / Shelter	Proposed Use: Shelter / Build roof over handy Cap Ramp Site Plan Exemption <i>handicap</i> <i>existing use ok for shelter</i>	Permit Fee:	Cost of Work: \$3,300.00	CEO District: 1
Proposed Project Description: Build roof over Handy Cap Ramp <i>Handicap</i>		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: <i>SB</i> <i>BOA 1/27/02</i> Signature: <i>T. Minson</i>	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> <i>N/A</i> <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Signature: <i>N/A</i> Date:

Permit Taken By: gg	Date Applied For: 12/18/2001	Zoning Approval		
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<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 type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major <input checked="" type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>ol</i> Date: <i>12/20/01</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 <i>N/A</i> 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>S</i>
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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

011544

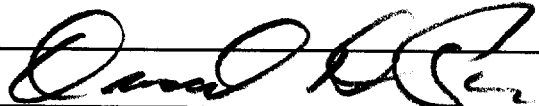
All Purpose Building Permit Application

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.

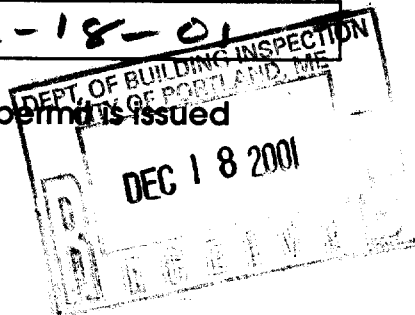
Location/Address of Construction: 197 OXFORD ST		
Total Square Footage of Proposed Structure 344 SQ FT.	Square Footage of Lot 300 X 200	
Tax Assessor's Chart, Block & Lot Chart# 26 013 Block# B Lot# 010	Owner: CITY OF PORTLAND Bayside LLC	Telephone:
Lessee/Buyer's Name (If Applicable) 26 B 018	Applicant name, address & telephone: DAVID DIPIETRO 221 VIRGINIA ST	Cost Of Work: \$ 3300 Fee: \$ 54-
Current use: SHELTER		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: BUILD ROOF OVER HANDY CAP RAMP Site plan exemption		
Contractor's name, address & telephone: DAVID DIPIETRO 221 VIRGINIA ST PORTLAND ME.		
Who should we contact when the permit is ready: ADRIE		
Mailing address: _____		
		Phone: 7979531

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: 12-18-01
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This is not a permit, you may not commence ANY work until the permit is issued



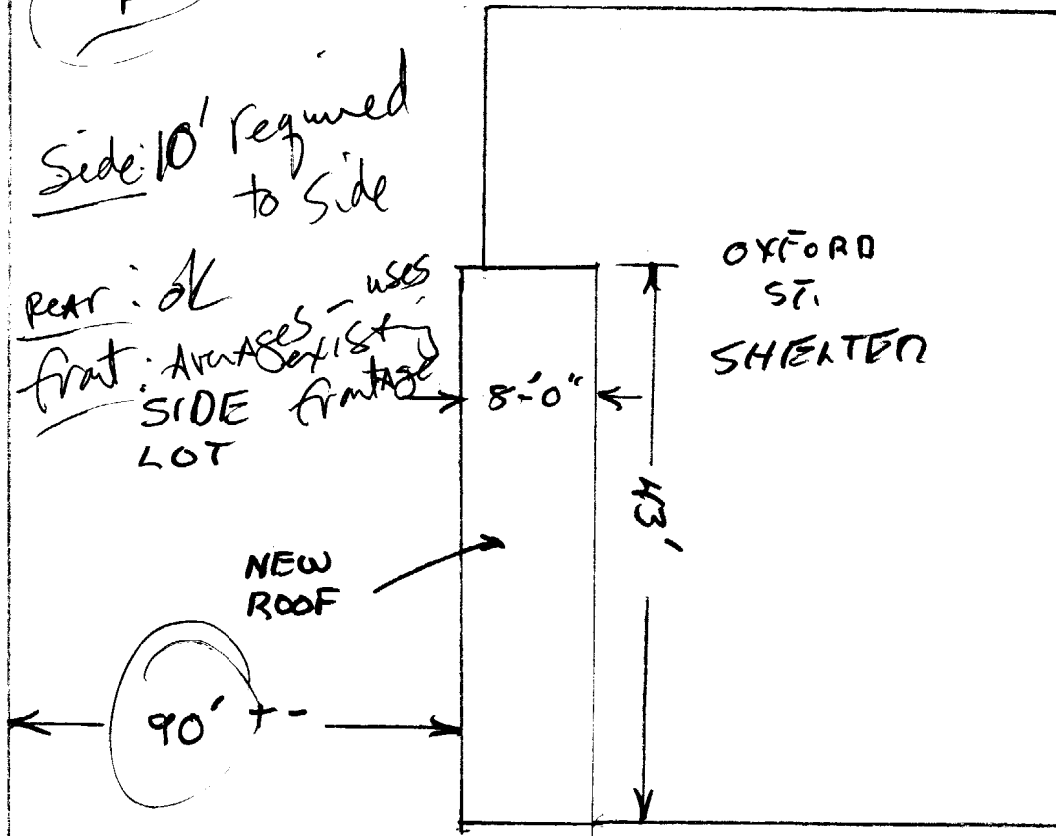
ROOF OVER HANDI CAP RAMP

R-6

Side: 10' Required
to Side

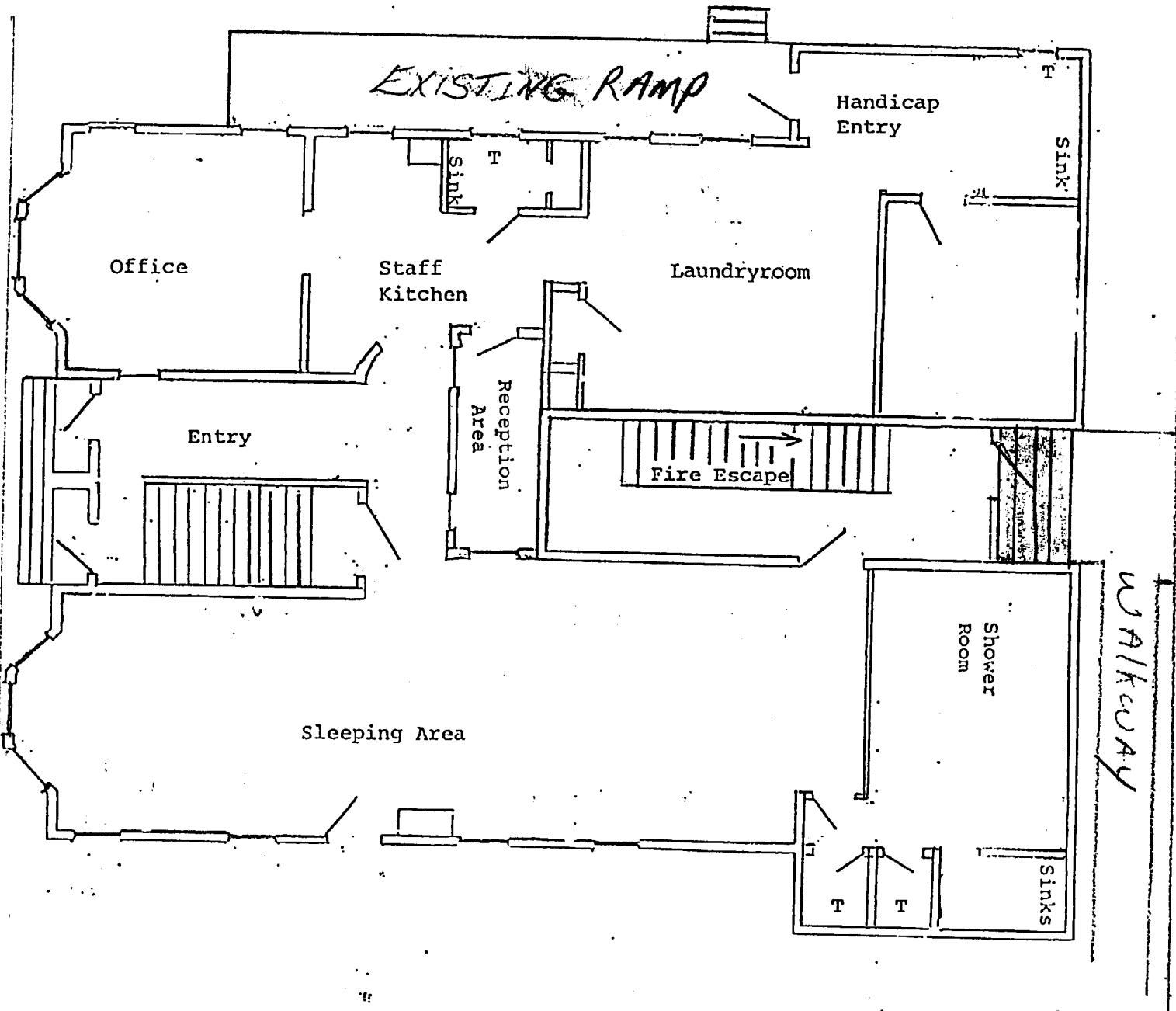
Rear: OK

Front: Averages - uses
existing
SIDE FRONTAGE
LOT



OXFORD STREET

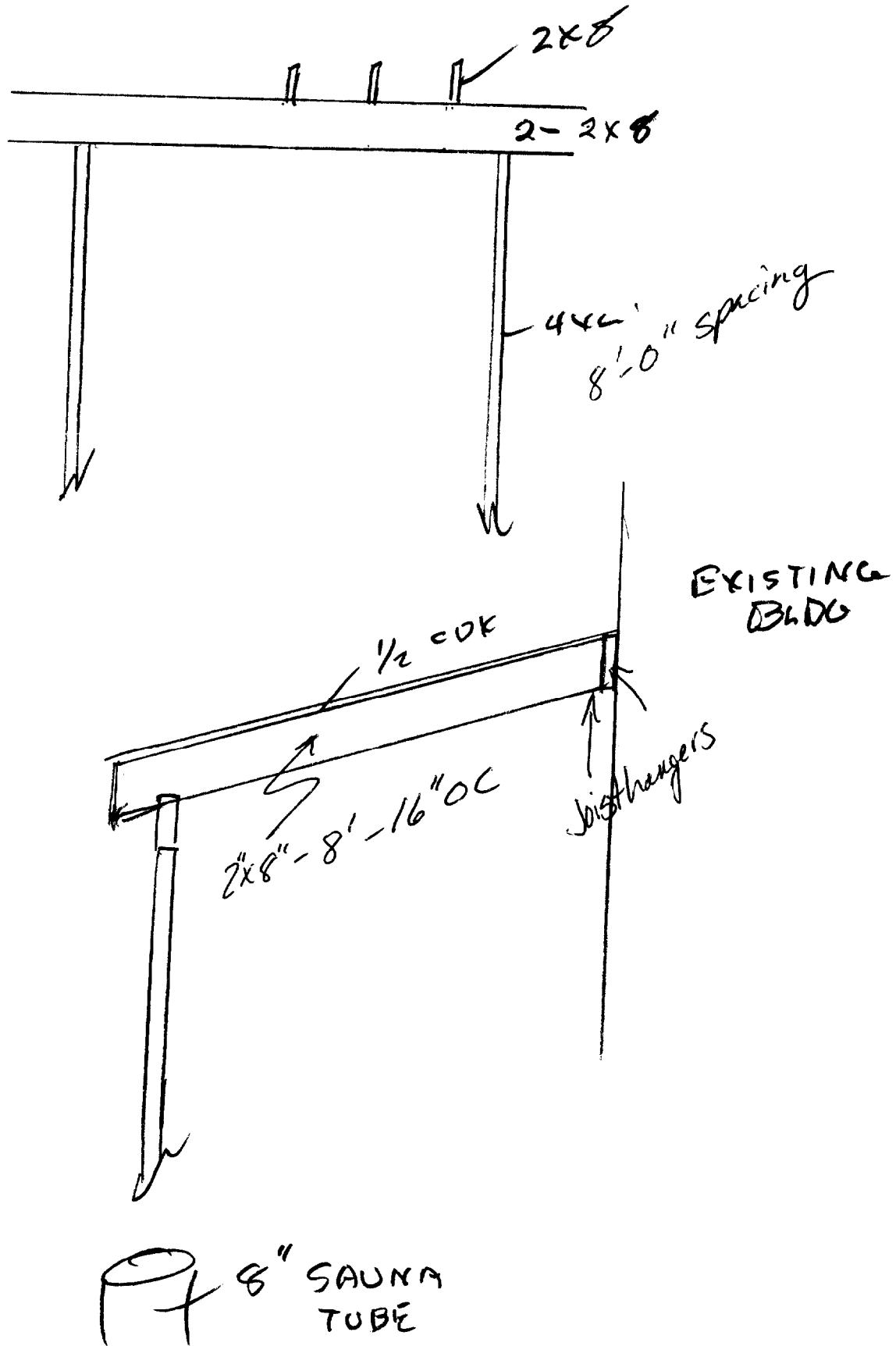
OXFORD STREET

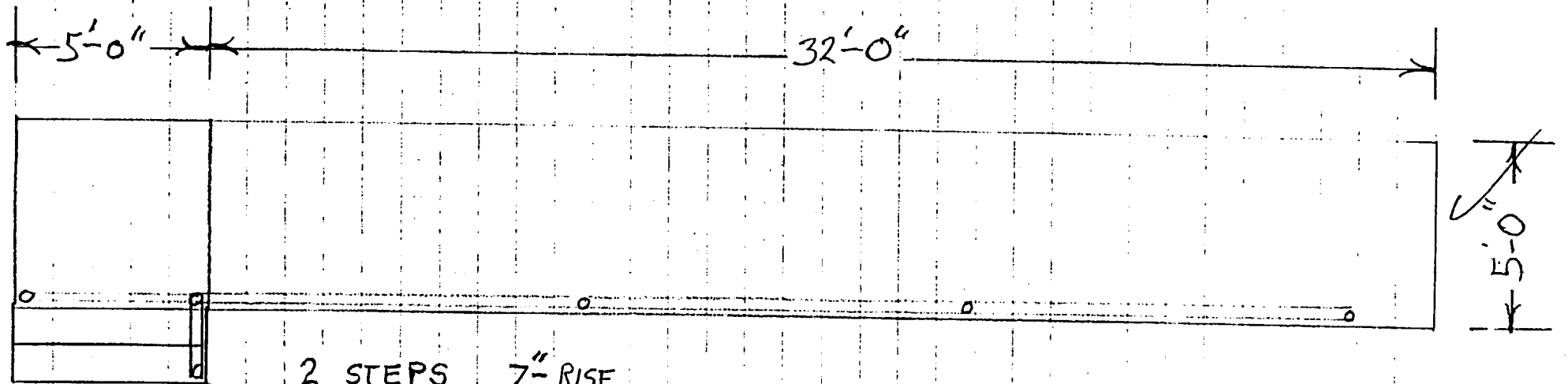


SHELTER
PARKING Lot

201-203 Oxford Street	
Revised 12/8/98	CM.
Social Services	
1st floor plan...	Pg. 1

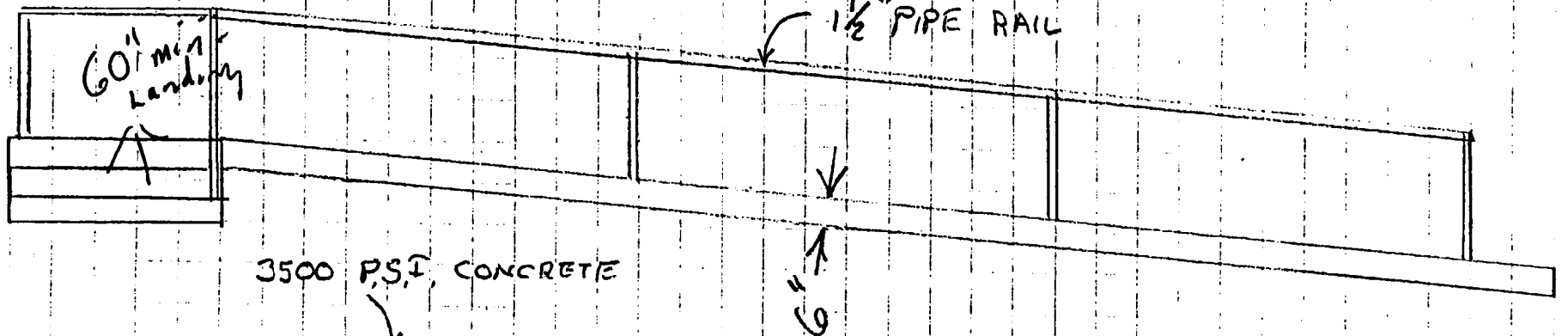
ORFORD ST SHELTER





2 STEPS
TO GARDEN

7" RISE
11' TREAD

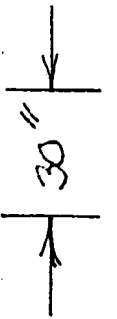


3500 P.S.I. CONCRETE

6x6x6 WIRE

HANDICAP RAMP
197 OXFORD ST

Section 30" rise max
1016.3 between Landing



APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

CITY OF PORTLAND

12-18-01

Applicant
221 VIRGINIA ST

Application Date

Applicant's Mailing Address
DAVID DIPIETRO 7979531

Project Name/Description

Consultant/Agent/Phone Number

197 OXFORD ST.

Address of Proposed Site

Description of Proposed Development:
ROOF OVER HANDY CAP RAMP

CBL: 26-B-18

ROOF OVER EXISTING HANDY CAP RAMP.

Please Attach Sketch/Plan of Proposal/Development

Criteria for Exemptions:

See Section 14-523 (4)

a) Within Existing Structures; No New Buildings, Demolitions or Additions

b) Footprint Increase Less Than 500 Sq. Ft.

c) No New Curb Cuts, Driveways, Parking Areas

d) Curbs and Sidewalks in Sound Condition/ Comply with ADA

e) No Additional Parking / No Traffic Increase

f) No Stormwater Problems

g) Sufficient Property Screening

h) Adequate Utilities

Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
YES	✓
YES	✓
NO	✓
YES	✓
NO	✓
NO	✓
YES	✓
YES	✓

Planning Office Use Only:

Exemption Granted Partial Exemption Exemption Denied