rm # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

HEAL

or cd

e and of the

Please Read Application And Notes, If Any,

as permission to

T - 23 SPRING ST-PL

Attached

his is to certify that **HEALEY MEREDITH & MA**

amendment to permit# 080093

rovided that the person or persons, fi of the provisions of the Statutes of Ma he construction, maintenance and use his department.

Apply to Public Works for street line and grade if nature of work requires such information.

ation o Not spection must b nd writt ermissi procured give befo this bui nereof is ig or p lath or oth sed-in. 2 HOI NOTICE IS REQUIRED.

f buildings and stru

aon ag

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

Permit Number: 081449

ting this permit shall comply with all

res, and of the application on file in

aces of the City of Portland regulating

-039 A015001 b

OTHER REQUIRED APPROVALS

ire Dept. ealth Dept. ppeal Board

ther Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, M 389 Congress Street, 0		_				08-1449	Issue Date:	039	A015001	
Location of Construction:	7101 101. (2	Owner Name:				ner Address:		Phone:		
23 SPRING ST PL				25 SPRING ST PL			l nonc.			
Business Name: Contractor Nam			_		Contractor Address:		Phone			
G & L Contra		cting		PC	Box 503 Belgra	ade Lakes	2077	989898		
Lessee/Buyer's Name Phone:		Phone:			Permit Type:			Zone:		
_					Α	mendment to Sir	igle Family		13-3	
Past Use:		Proposed Use:			Per	mit Fee:	Cost of Work:	CEO Distri	ct:	
Single Family Home Single Family			Home - amendment			\$60.00	\$4,000.00	2		
Two to perm		to permit# 080	t# 080093		FIRE DEPT: Approved INSPE			PECTION:	 2 - 112	
12	enluir - 2	Smily (por	ne/mil	61-1434			Denied Use	Group: // - =	Type: 52	
15	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-xairy (po	μ,	· · · · · · · · · · · · · · · · · · ·		1//	[TPC.	3 Type: 5B	
Proposed Project Description							1		1	
amendment to permit# 0	20093 – ماراد	. enclosed st	wage	uren an	Signature: Sign		nature:			
difference to permit o	n.f	next bodes	k.			DESTRIAN ACTIV				
,	.,,,	,		•	Acı	tion: Approve	d Approved	l w/Conditions	Denied)	
					Ci-	nature:		Date:		
Permit Taken By:	Date An	plied For:			Sig		A navoval			
Idobson	11/13	_				Zoning A	Approval			
This permit applicat	tion does not r	reclude the	Spe	cial Zone or Revie	ws	Zoning	Appeal	Historic	Preservation	
Applicant(s) from meeting applicable State and Federal Rules.			Shoreland		☐ Variance		Not in I	District or Landman		
 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. 			☐ Wetland ☐ Flood Zone			Miscellaneous		Does No	ot Require Review	
						Conditional Use		Require	s Review	
False information material permit and stop all v		a building	Subdivision		[Interpretation		Approv	ed		
		1	Si	te Plan		Approved		Approve	ed w/Conditions	
THE RESIDENCE			Maj Minor MM		Denied		_ Denied			
			Date:			Date:		Date:		
nec 1		, ,					_			
		\								
CITY										
1			c	ERTIFICATI	ON					
I hereby certify that I am	the owner of	record of the na				oposed work is a	authorized by t	he owner of r	ecord and that	
I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to if a permit for	make this appl work describe	ication a	as his authorized application is is	d age	ent and I agree to d, I certify that th	conform to all e code official	l applicable l 's authorized	aws of this representative	
					_					
SIGNATURE OF APPLICAN	Т			ADDRES	8		DATE		PHONE	
										
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, 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.

order it	will be incurred it the procedure is not lone	Wou as stated perovi				
A Pre-co	onstruction Meeting will take place upon receipt of y	your building permit.				
X	Framing/Rough Plumbing/Electrical: Prior to An	y Insulating or drywalling				
X	Final inspection required at completion of work.					
	te of Occupancy is not required for certain projects. Ye ject requires a Certificate of Occupancy. All projects <u>I</u>	- · · · · · · · · · · · · · · · · · · ·				
If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.						
	CATE OF OCCUPANICES MUST BE ISSUED AN MAY BE OCCUPIED.	ND PAID FOR, BEFORE THE				
Signature	e of Applicant/Designee	12-10-8 Date				
Signature	e of Inspections Official	12/10/08 Date				
4		12/10/08				

CBL: 039 A015001 **Building Permit #**: 08-1449

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:		*					
Total Square Footage of Proposed Structure/A	rea 104	Square Footage of Lot					
Tax Assessor's Chart, Block & Lot	Applicant *1	nust be owner, Lessee or Buye	Telephone:				
Chart# Block# Lot#	Name M	arkHealey		207			
039 A 015	Address 2	5 Spring St. Place	_	798 9898			
001 A 013	City, State &	City, State & Zip Portland CH(0)					
Lessee/DBA (If Applicable)	Owner (if d	fferent from Applicant)	st Of				
	Name		W	Work: \$ 4,000			
	Address		C	of O Fee: \$			
	City, State &	z Zip	То	tal Fee: \$ 60			
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Storage Area next to rest deck (sisting) Is property part of a subdivision? Project description: A ward 8 6093							
Contractor's name: G & L C	2	ting		•			
Address: PO. Box 503 City, State & Zip Belg roade, Lakes ME 04918 Telephone: 207 215 7957							
,							
Who should we contact when the permit is ready: Mark Healey Telephone: 207 798 9878							
Mailing address: 25 Spring St. Place, Portland, me ortion							
Please submit all of the information outlined on the applicable Checklist. Failure to							

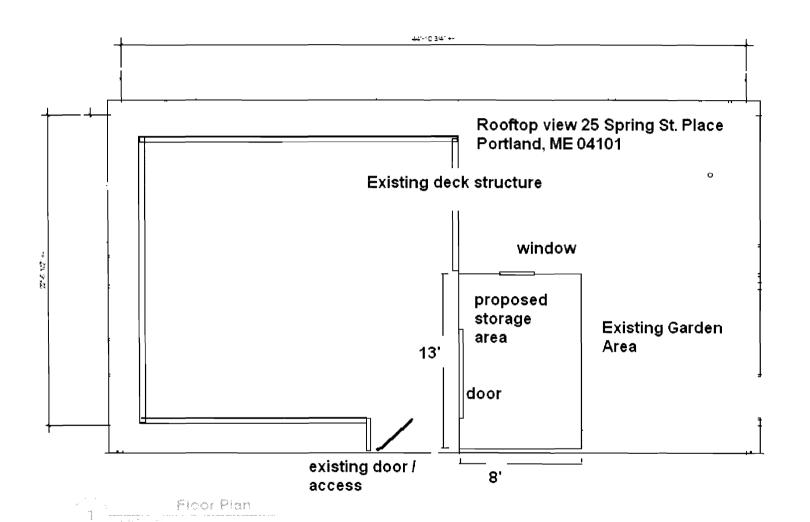
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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:	nocaso	Date: 10/30/8	

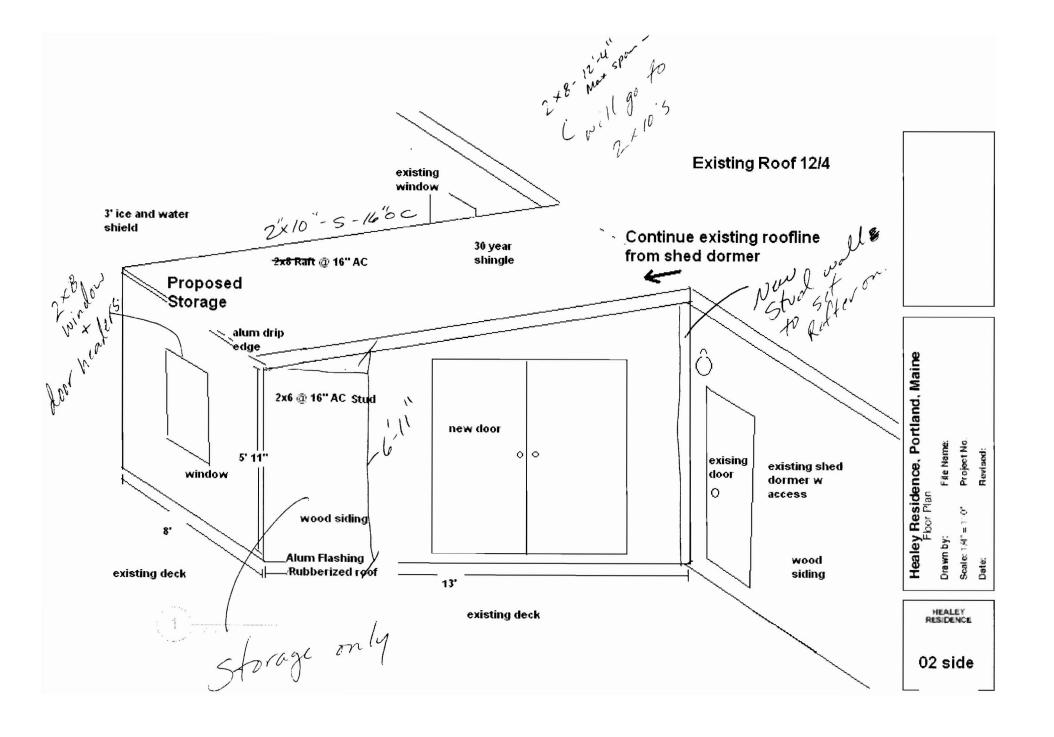
This is not a permit; you may not commence ANY work until the permit is issue

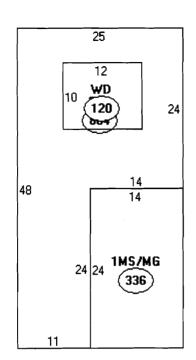


Healey Residence, Portland, Maine Floor Plan

HEALEY RESIDENCE

SK01



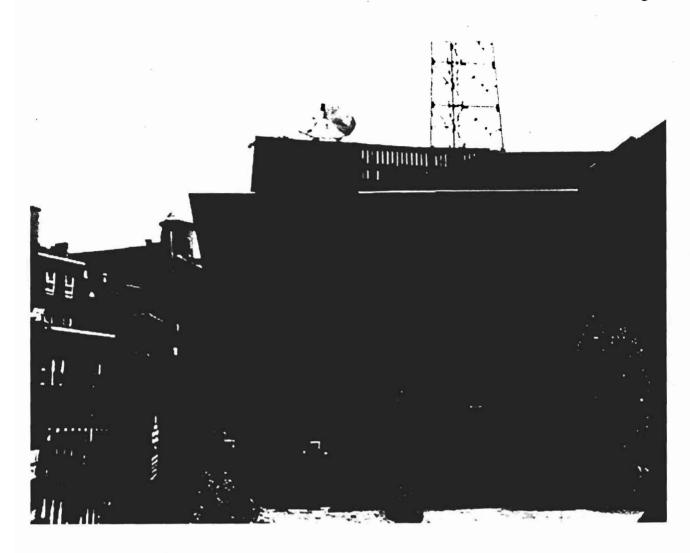


<u>Descriptor/Area</u> A: 2Ms 864 sqft B: 1MS/MG 336 sqft

C:WD 120 sqft

City o	f Portland, N	Iaine - Buil	lding or Use Permit	t		Permit No:	Date Applied For:	CRT:
389 Co	ongress Street,	04101 Tel: (207) 874-8703, Fax: ((207) 874-	8716	01-1436	11/20/2001	039 A015001
Location of Construction: Owner Name:					C	wner Address:		Phone:
23 Spri	pring St Pl Rollins Mary Ellen		4	23 Spring St Pl	_	207-773-3039		
Business Name: Contractor Name:			Contractor Ad			Phone		
			Sewall Associates			P.O. Box 6610 Por	(207) 774-4755	
Lessee/B	uyer's Name		Phone:		Permit Type:			
			<u></u>			Alterations - Mult	i Family	
Proposed	l Use:			Pı	oposed	Project Description:		
same				a	dding	egress, enclosing s	tairway to second fl	oor
	•							
				ł		*		
			<u> </u>					
Dept:	Historic	Status: A	approved	Revie	wer:	Deborah Andrew	s Approval D	ate: 12/03/2001
Note:			•				••	Ok to Issue:
110001	•							
1								
Dept:	Zoning	Status: A	pproved with Condition	s Revie	wer:	Marge Schmucka	l Approval D	ate: 11/30/2001
Note:	23 Spring St. P	lace = 2 legal	units					Ok to Issue:
	25 Spring St. P	_						
1) Thi	is is NOT an app	roval for an a	dditional dwelling unit.	You SHAL	L NO	T add any addition	al kitchen equipmer	nt including, but
not	limited to items	such as stoves	s, microwaves, refrigerat	tors, or kitc	hen si	nks, etc. Without s	pecial approvals.	
	is property shall proval.	remain a two ((2) family dwelling. Any	change of	use sh	all require a separa	ate permit applicatio	n for review and
3) Thi	•	approved on	the basis of plans submi	tted. Any o	leviati	ons shall require a	separate approval b	efore starting that
Dept:	Building	Status: A	nnroved	Revie	wer	Tammy Munson	Approval D	ate: 12/28/2001
Note:	Dunung	Status. 1	.pp10104	ICO VIC	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	running ividison	Approvarb	Ok to Issue:
14016:								OK to issue:
Dept:	Fire	Status: N	ot Applicable	Revie	wer:	Lt. McDougall	Approval D	ate:
•	•		to building on 12/21	140 / 10		2 mil ouguii	rippi oval D	Ok to Issue:
11016:	iviac oii vacatio	ii, ioi walucu i	o building on 12/21				•	OK to issue:

'astose was 2 family.



389 Congress Street, 04101 Tel: (2	207) 874-8703, Fax: ((207) 874-8716	6 08-1449	11/13/2008	039 A015001
Location of Construction:	Owner Name: Owner Address:		Phone:		
23 SPRING ST PL	HEALEY MEREDIT	H & MARK H	25 SPRING ST PL		
Business Name:	Contractor Name:		Contractor Address:		Phone
	G & L Contracting		PO Box 503 Belgrade Lakes		(207) 798-9898
Lessee/Buyer's Name	Phone:		Permit Type:		
			Amendment to Sir	igle Family	

Proposed Use:

Single Family Home - amendment to permit# 080093 - add enclosed storage area on roof next to deck

City of Portland, Maine - Building or Use Permit

Proposed Project Description:

Permit No:

amendment to permit# 080093 - add enclosed storage area on roof next to deck

Date Applied For:

11/12/2000

Dept: Zoning

Status: Approved with Conditions

Reviewer: Ann Machado

Approval Date:

CBL:

12/05/2008

Ok to Issue:

Note: 23 Spring St. Place - 2 legal units

25 Spring St. Place - 1 legal unit

1) This property shall remain a two (2) family dwelling. Any change of use shall require a separate application for review & approval.

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: Tammy Munson

Approval Date:

12/10/2008

Ok to Issue:

Note: 1) The existing roof is currently used as a roof deck and is protected with guards.

- 2) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 3) Separate permits are required for any electrical, plumbing, HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.