

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: 03-1411	Issue Date: NOV 24 2003	CBL: 045 E006001
-----------------------	-----------------------------------	---------------------

Location of Construction: 108 Winter St	Owner Name: Mercy Hospital	Owner Address: 144 State St	Phone:
Business Name:	Contractor Name: Horizon Builders, Inc.	Contractor Address: PO Box 802 Portland	Phone: 2078799787
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-6

Past Use: single family	Proposed Use: Single Family / Install Skylight	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 3
Proposed Project Description: Single Family / Install Skylight		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: 5B BOCA 1999 Signature: JMB 11/20/03	
		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: 11/13/2003	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 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: 11/20/03 JMB	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 type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved WBN <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 11-29-03
	<i>approved to remain as single family</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: 03-1411	Date Applied For: 11/13/2003	CBL: 045 E006001
------------------------------	--	----------------------------

Location of Construction: 108 Winter St	Owner Name: Mercy Hospital	Owner Address: 144 State St	Phone:
Business Name:	Contractor Name: Horizon Builders, Inc.	Contractor Address: PO Box 802 Portland	Phone (207) 879-9787
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family / Install Skylight	Proposed Project Description: Single Family / Install Skylight
--	--

Dept: Zoning **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 11/20/2003

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.

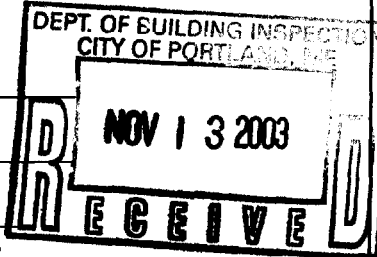
Dept: Building **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 11/20/2003

Note: **Ok to Issue:**

- 1) For this to be an egress window the max. Distance from the floor to the sill is 44"
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

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: <u>108 WINTER ST PORTLAND ME 04102</u>		
Total Square Footage of Proposed Structure <u>7.4 ft² (skylight)</u>	Square Footage of Lot <u>5,039 +/- SF</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>045</u> Block# <u>E</u> Lot# <u>006</u>	Owner: <u>Rose Marasco</u>	Telephone: <u>780-1965</u>
Lessee/Buyer's Name (If Applicable) <u>Ø</u>	Applicant name, address & telephone: <u>Horizon Builders</u> <u>PO Box 802</u> <u>Portland ME 04104</u>	Cost Of Work: <u>\$1,000-</u> Fee: \$
Current use: <u>Single Family Dwelling</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Single Family Dwelling</u>		
Project description: <u>Install Skylight</u>		
Contractor's name, address & telephone: <u>Horizon Builders P.O. Box 802</u> <u>Portland, ME 04104 (207) 879-9787</u>		
Who should we contact when the permit is ready: <u>William Childs</u>		
Mailing address: <u>PO Box 802 Portland ME 04104</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: (207) 252-3551		

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: <u><i>William Childs</i></u>	Date: <u>11/12/03</u>
--	-----------------------

This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

WARRANTY DEED

MERCY HOSPITAL, a Maine nonprofit corporation, for consideration paid, grants to **ROSE C. MARASCO**, of 5 Carroll Street, Portland, Maine 04102, with Warranty Covenants, the land in Portland, Cumberland County, Maine bounded and described as follows:

A certain lot or parcel of land, with the buildings thereon, situated in Portland, County of Cumberland and State of Maine on the southerly side of Winter Street, being about thirty-seven and one half (37 ½) feet on said street and extending back towards Brackett Street one hundred and twenty seven (127) feet, more or less.

Reference is made to deed from Rollingsford Savings Bank to Mary E. Ward dated September 10, 1889 and recorded in the Cumberland County Registry of Deeds in Book 563, Page 86. See also Warranty Deed of a five-sixths interest from Mary E. Ward, Catherine M. Ward, Martha M. Ward, Helen C. Ward, and Edward F. Ward to Joseph P. Ward dated March 20, 1953 and recorded in said Registry of Deeds in Book 2123, Page 250. See also Petitions to Restore Documents filed with the Cumberland County Probate Court, Dockets No. 16940 and 17129. Further reference is made to Probate Dockets also filed with the Cumberland County Probate Court for Martha M. Ward, Docket 83-470; Catherine M. Ward, Docket No. 90-528; Joseph P. Ward, a/k/a Joseph Patrick Ward, Docket No. 71-326, and Helen C. Ward, Docket No. 90-694. See also Affidavit of Sister Mary Denis Schwartz, dated March 26, 1997, regarding Mary Evangelista Ward, a/k/a Reverend Mother Mary Evangelist. Being the premises Described in deed from Robert C. Robinson, Personal Representative of Estate of Edward F. Ward, to Mercy Hospital dated April 23, 1997 and recorded in the Cumberland County Registry of Deeds in Book 13045, Page 177.

IN WITNESS WHEREOF, the said **MERCY HOSPITAL** has caused this instrument to be executed by _____, Its _____ and Chief Financial Officer, thereunto duly authorized, this _____ day of _____, 2003

WITNESS

MERCY HOSPITAL

By: _____

Its: _____

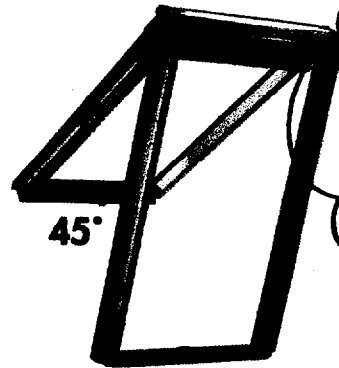
STATE OF MAINE
COUNTY OF CUMBERLAND, ss.

Then personally appeared before me the above named _____,
_____ of said Corporation, as aforesaid, and acknowledged the foregoing
instrument to be his free act and deed in his said capacity, and the free act and deed of said
Corporation.

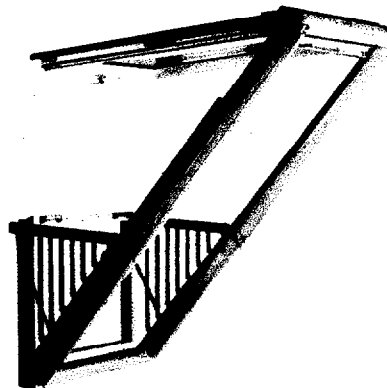
Before me,

Notary Public/Attorney at Law

Printed Name
My Commission Expires:

ROOF WINDOWS**TOP HINGED ROOF WINDOW****Model GPL****GPL AVAILABLE SIZES:***Optional insect screen available*

- Installed in within-reach applications such as attics and bonus rooms
- Opens to a full 45° angle to satisfy Egress standards for emergency escape
- Select wood frame and sash coated with a clear finish
- For easy glass cleaning from inside the room, the sash rotates completely inward
- ComfortPlus™ insulated glass
- Optional insect screen and blinds are available (see pages 18-20)

BALCONY ROOF WINDOW**Model GDL****GDL AVAILABLE SIZE:**

P19

Frame Size: 37" x 100"

- Provides abundant ventilation and outdoor views for attics, bonus rooms and loft areas
- Bottom sash expands outward to create a roof balcony with protective side railings
- Select wood frame and sash coated with a clear finish
- Top sash opens for ventilation and features a vent flap for ventilation when the sash is closed
- ComfortPlus™ insulated glass
- Optional insect screen and blinds are available (see pages 18-19)



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	045 E006001
Location	108 WINTER ST
Land Use	SINGLE FAMILY
 Owner Address	 MERCY HOSPITAL 144 STATE ST PORTLAND ME 04101
 Book/Page	 13045/177
Legal	45-E-6 WINTER ST 106-108 5039 SF

Valuation Information

Land	Building	Total
\$34,550	\$60,580	\$95,130

Property Information

Year Built 1832	Style Old Style	Story Height 2	Sq. Ft. 2401	Total Acres 0.116		
Bedrooms 5	Full Baths 1	Half Baths	Total Rooms 12	Attic Part Finsh	Basement Full	

Outbuildings

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

Sales Information

Date 04/01/1997	Type LAND + BLDING	Price \$82,500	Book/Page 13045-177
---------------------------	------------------------------	--------------------------	-------------------------------

Picture and Sketch

[Picture](#)

[Sketch](#)

[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](#).



DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

BUILDING INSPECTION

PERMIT ISSUED

Permit Number: 031411
NOV 24 2003

PERMIT

This is to certify that Mercy Hospital/Horizon Buildings, Inc.
has permission to Single Family / Install Skylight **CITY OF PORTLAND**
AT 108 Winter St 045 E006001

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 inspection must give and when permission procured before this building or part thereof is occupied or closed-in.
48 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

Janice Bourke 11/24/03
Director - Building & Inspection Services

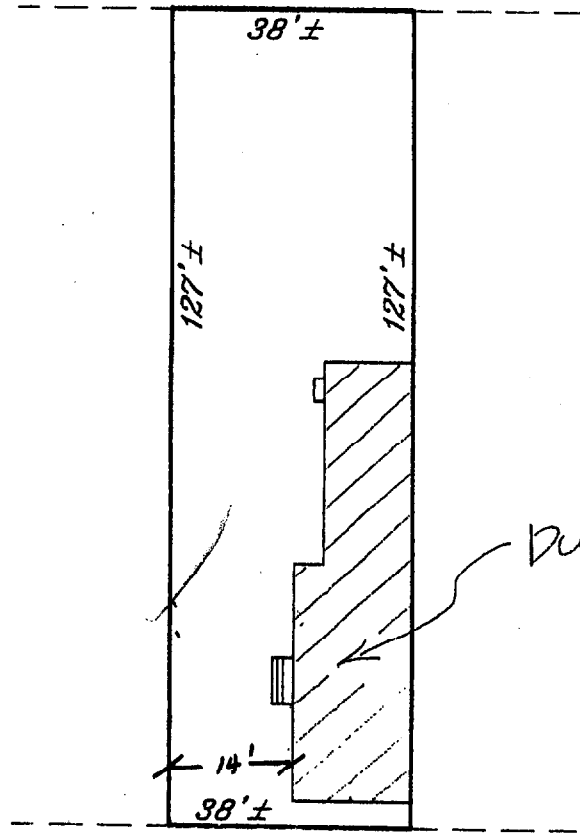
PENALTY FOR REMOVING THIS CARD

FOR MORTGAGE LENDER USE ONLY

GENERAL NOTES: (1) DISTANCES SHOWN ARE TAKEN FROM PROVIDED TITLE REFERENCES SHOWN BELOW. (2) THE PURPOSE OF THIS INSPECTION IS TO RENDER AN OPINION AS FOLLOWS: A) DWELLING AND ACCESSORY STRUCTURE'S COMPLIANCE WITH RESPECT TO MUNICIPAL ZONING SETBACKS, AND B) FLOOD ZONE DETERMINATION BY HORIZONTAL SCALING ON BELOW REFERENCED FEMA MAP. (3) THIS INSPECTION EXCEPTS OUT ALL TECHNICAL STANDARDS CURRENTLY SET FORTH BY STATE OF MAINE BOARD OF LICENSURE FOR PROFESSIONAL LAND SURVEYORS. (4) THIS INSPECTION IS TO BE USED ONLY BY THE BELOW LISTED LENDER, TITLE ATTORNEY & TITLE INSURER AND SHOULD NOT BE USED BY ANOTHER PARTY FOR BOUNDARY LINE LOCATIONS OR LAND TITLE OPINIONS. (5) A BOUNDARY SURVEY SHOULD BE PERFORMED TO RENDER A PROFESSIONAL OPINION PERTAINING TO BOUNDARY LINE LOCATIONS, BASEMENTS, RIGHTS OF WAY, ENCUMBRANCES, AND/OR ENCROACHMENTS.

ADDRESS: 108 WINTER STREET
PORTLAND, MAINE

INSPECTION DATE: SEPTEMBER 16, 2003
SCALE: 1" = 30'



WINTER STREET To Pine St. →

SEE PROVIDED TITLE REFERENCES FOR APPLICABLE APPURTENANCES, IF ANY.

APPLICANT: MARASCO REQUESTING PARTY: NEW ENGLAND TITLE
OWNER: MERCY HOSPITAL ATTORNEY: _____
LENDER: FIRST FINANCIAL MORTGAGE CORP. FILE No. 20314498 FIELD BOOK: _____

TITLE REFERENCES:
DEED BOOK: 19045 PAGE: 177
PLAN BOOK: _____ PAGE: _____ LOT: _____
COUNTY: CUMBERLAND

YOUR FILE #: A09-1789

NADEAU & LODGE, INC.
PROFESSIONAL LAND SURVEYORS
918 BRIGHTON AVENUE
PORTLAND, ME 04103
(207) 878-7870
232 CLARKS WOODS ROAD
LYMAN, ME 04003
(207) 498-2858