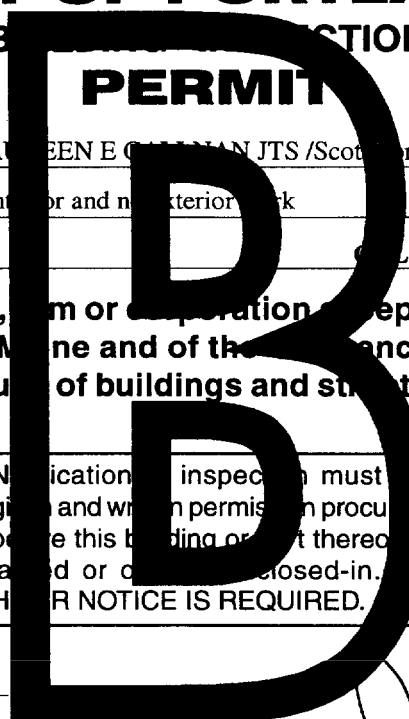


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT



PERMIT ISSUED
Permit Number: 050675
JUN 22 2005
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that TACKA JOSEPH A & MAUREEN E CATTANIAN JTS /Scott
has permission to Office and Residence - no interior and no exterior work
AT 49 DEERING ST 047 B014001

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. **HEAR 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. Jay Kelley P.F.D. 06/07/05
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

Jaime Bourke 6/20/05
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: 05-0675	Issue Date: PERMIT ISSUED JUN 22 2005	BLI: 047 B014001
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Location of Construction: 49 DEERING ST	Owner Name: TACKA JOSEPH A & MAUREEN	Owner Address: 322 SPRING ST	Phone:
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Business Name:	Contractor Name: Scott Forbes	Contractor Address: Portland	Phone: 2077723380
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Tenant/Buyer's Name:	Phone:	Permit Type: Change of Use - Commercial	Zone: R-6
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Past Use: Basement: storage - 1st & 2nd floor: Dr. offices - 3rd floor: 2 dwelling units	Proposed Use: Basement: storage and professional offices - 1st & 2nd floor: one dwelling unit - 3rd floor: 2 dwelling units - no interior and no exterior work	Permit Fee: \$105.00	Cost of Work: \$30.00	CEO District: 1	83367
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Proposed Project Description: Office and Residence - no interior and no exterior work	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>Jan Kelly PFD 06/07/05</i>	INSPECTION: Use Group: R2/B Type: 5B
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Signature: <i>Jan Kelly PFD 06/07/05</i>	Signature: <i>AMB 6/20/05</i>
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 05/25/2005	Zoning Approval
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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 checked="" type="checkbox"/> Date: <i>6/6/05</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: <i>6/6/05</i>	Historic Preservation <input 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>Requires a separate review and approval</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

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>49 DETERING ST</u>		
Total Square Footage of Proposed Structure <u>N/A</u>	Square Footage of Lot <u>8184 + -</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>47</u> Block# <u>3</u> Lot# <u>14</u>	Owner: <u>JOE TALLA</u>	Telephone: <u>773-9606</u> <u>disconnected</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>SCOTT FORBES</u> <u>772-3380</u>	cost Of Work: \$ _____ Fee: \$ _____
<u>STORAGE</u> <u>RD</u> <u>OFFICE</u> <u>1ST'S 2ND RESIDANCE 3RD APARTMENT</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>SCOTT H FORBES</u>		
Mailing address:		
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: <u>7723380</u>		

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: <u>5-24-5</u>
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 05-0675	Date Applied For: 0512512005	CBL: 047 B014001
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Location of Construction: 49 DEERING ST	Owner Name: TACKA JOSEPH A & MAUREEN	Owner Address: 322 SPRING ST	Phone:
Business Name:	Contractor Name: Scott Forbes	Contractor Address: Portland	Phone (207) 772-3380
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	
Proposed Use: Basement: storage and professional offices - 1st & 2nd floor: one dwelling unit - 3rd floor: 2 dwelling units - no interior and no		Proposed Project Description: Office and Residence - no interior and no exterior work	

**Dept:** Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 0612012005

Note: 6/16/05 Tried both #'s on the application and can't get thru. Checked w/Marge, this is an after the fact permit, **Ok to Issue:**
the work is done. Need verification from MJN on separation of units.
6/20 left vm w/Scott F. To call for details. Scott called back and verified that the owner purchased the building as is, and is living in the unit on the 1st & 2nd floors. There is a complete fire alarm system throughout and 1 hr dropped ceiling rating in the basement This will be a Use Only approval.

- 1) This is a Change of Use ONLY permit. It does NOT authorize any construction activities. The CO will state this condition specifically when issued.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Dept: Fire **Status:** Approved **Reviewer:** Jay Kelley **Approval Date:** 06/07/2005**Note:** **Ok to Issue:** **Dept:** Fire **Status:** **Reviewer:** **Approval Date:****Note:** **Ok to Issue:** **Comments:**

05/27/2005-ldobson: Left message for Scott forbes plans unclear

06/02/2005-ldobson: Contacted Scott Forbes he is going to set up date because he doesn't understand what is unclear.

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 047 8014001
 Location 49 DEERING ST
 Land Use OFFICE & BUSINESS SERVICE

Owner Address TACKA JOSEPH A & NAUREEN E CALLNAN JTS
 322 SPRING ST
 PORTLAND NE 94102

Book/Page 22421/314
 Legal 47-8-14
 DEERING ST 49
 8336 SF

Current Valuation Information

Land	Building	Total
\$39,480	\$172,100	\$211,580

New Estimated Valuation Information

Land	Building	Total	Phase-In Value
\$173,400	\$263,900	\$437,300	\$324,440

Building Information

Bldg #	Year Built	# Units	Bldg Sq. Ft.	Identical Units
1	1900	1	6891	1

Total Acres	Total Buildings	Sq. Ft.	Structure Type	Building Name
0.191	6891		MIXED RES/COMM	GP SAVIDGE MD

Exterior/Interior Information

Section	Levels	Size	use
1	01/01	1773	CONVERTED OFFICE
1	01/01	1773	CONVERTED OFFICE
1	02/02	1745	CONVERTED OFFICE
1	03/03	1600	APARTMENT

Height	Walls	Heating	A/C
7		HW/STEAM	NONE
9	BRICK/STONE	HW/STEAM	NONE
9	BRICK/STONE	HW/STEAM	NONE
0	BRICK/STONE	HW/STEAM	NONE
		NONE	NONE
		NONE	NONE
		NONE	NONE
		NONE	NONE

Building Other Features

Line	Structure Type	Identical Units
2	OPEN AREA - BANK/OFFICE	1



LAND USE - ZONING REPORT

ADDRESS: 49 Deering St DATE: 4/20/19

REASON FOR PERMIT: remove non-bearing walls, remodel kitchen

BUILDING OWNER: David Dix C-B-L: 47-B-14

PERMIT APPLICANT: David Dix

APPROVED: with conditions DENIED: _____

#1, #7, #10

CONDITION(S) OF APPROVAL

1. This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
2. During its existence, all aspects of the Home Occupation criteria, Section 14-410, shall be maintained.
3. The footprint of the existing _____ shall not be increased during maintenance reconstruction.
4. All the conditions placed on the original, previously approved, permit issued on _____ are still in effect for this amendment.
5. Your present structure is legally nonconforming as to rear and side setbacks. If you were to demolish the building on your own volition, you will **not** be able to maintain these same setbacks. Instead you would need to meet the zoning setbacks set forth in today's ordinances. In order to preserve these legally non-conforming setbacks, you may only rebuild the _____ in place and in phases.
6. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
7. Our records indicate that this property has a legal use of 2 Apts on 3rd floor and 1 on 1st floor Dr. offices - 1st floor Basement - storage. Any change in this approved use shall require a separate permit application for review and approval.
8. Separate permits shall be required for any signage.
9. Separate permits shall be required for future decks, sheds, pool(s), and/or garage.
10. This is **not** an approval for an additional dwelling unit. You **shall not** add any additional kitchen equipment, such as stoves, microwaves, refrigerators, or kitchen sinks, etc. without special approvals.
11. Other requirements of condition _____

Marge Schmuckal, Zoning Administrator

Permit No: **990358**

PERMIT ISSUED

APR 21 1999

CITY OF PORTLAND

Zone: **CBL047-5-014**

Zoning Approval: *[Signature]*

Special Zone or Reviews:

Shoreland

Wetland

Flood Zone

Subdivision

Site Plan maj Minor mm

Owner: **David H. Dix** Phone: **775-0101**

Business Name:

Address:

Proposed Use: **Same**

PERMIT FEE: \$ 120.00

COST OF WORK: \$ 19,000

FIRE DEPT. Approved Denied

INSPECTION: *[Signature]*

Use Group: *[Signature]*

Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved with Conditions Denied

Signature: *[Signature]* Date: **4-14-99**

Contractor Name: **Professional Office/Apts.**

Past Use: **Professional Office/Apts.**

Proposed Project Description: **Remove non-bearing walls, remodel kitchen.**

Permit Taken By: **SP** Date Applied For: **4-14-99**

Zoning Apt. -

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Action: *[Signature]*

Approved

Approved with Conditions

Denied

Date: *[Signature]*

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.

2. Building permits do not include plumbing, septic or electrical work.

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.

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

2