Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes. If Any, Attached

BUREPMIT

Permit Number: 090035

This is to certify thatINTOWN PROPERT	TY HOLD GS-LLC Suilders, St	
has permission toinstall handi-cap ramp	o for unit	
AT _65-GRANT ST		48 B016001
provided that the person or person		g this permit shall comply with all
of the provisions of the Statutes		of the City of Portland regulating
the construction, maintenance a this department.	nd use if buildings and structure	es, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Noti ution of spection hust be given and written ermission procured before this builting or parameters is lather or other sections. 24 HQL 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. Comes Comes Kind	Impaly	,
Health Dept.		5 /5
Appeal Board	+1	Carra Brake 1/14/19
Other Department Name		Director - Building & Inspection Services
Pi	ENALTY FOR REMOVING THIS CAI	RD ' '

City of Portland, M. 389 Congress Street, (-				135 Issue Date	e:	048 B0	16001
Location of Construction:		Owner Name:	, I ax.	(207) 874-871	Owner Address		====	Phone:	
65 GRANT ST		INTOWN PROPERTY HOLDING		PO BOX 641			rnone:		
Business Name:		Contractor Name:		Contractor Add			Phone		
		Sterling Builders, Steve Morrow		P O Box 43 V			2078319595		
Lessee/Buyer's Name		Phone:			Permit Type:				Zone:
				}	Additions - 1	Multi Family			R-6
Past Use:		Proposed Use:	1	<u> </u>	Permit Fee:	Cost of Wo	rk: CI	EO District:	<u> </u>
Residential - 18 day Un	its	Residential - 1	dvellir 8 d.u . t] Init⊱ install	\$40.0	00 \$1,7	60.00	2	
		handi-cap ram	p for ur	iit 28 in 47 v 3.	FIRE DEPT:	Approved	INSPECT	ION:	
		i				Denied	Use Group	: K-Z	Type:
100.40	a 102 l	1. Win 3h	، کالمک د]	Demed	1		
1 63000	rc - 18 A.	1. MIW 28	1,1011.72	•			110	C-200	う
Proposed Project Description	IND] ,	a i		R-2 C-200	1,10
install handi-cap ramp f	or unit'63					ea Curs	Signature:	AMD.	119/09
	*				PEDESTRIAN A	ACTIVITIES DIS	TRICT (P.A	. 	ı
					Action: 🗍 A	pproved A	proved w/Co	nditions [Denied
					Signature:		D	ate:	
Permit Taken By:	Date An	oplied For:	Τ		└ `───	••			
ldobson		3/2009			Zon	ing Approv	aı		
L			Spe	cial Zone or Revie	ws	Zoning Appeal	1	Historic Pres	ervation
1. This permit applica			`				Not in District or Landma		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland Va		variance		NOU III DISUT	ct of Landmar		
	nat inaluda n	Jumbina		etland	—	iscellaneous	-	Does Not Re	anire Review
2. Building permits do not include plumbing, septic or electrical work.		"	Citalu	Miscenaicous			Does Not Require Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		Conditional Use		-	Requires Review		
False information n		a building	Subdivision		Interpretation			Approved	
permit and stop all	work				Ì				
			☐ Si	te Plan	☐ Ap	proved		Approved w/	'Conditions
Liv	haddi)	I CILK			Į				
9002 ↑ 1 NAU		Maj Minor MM		1 Denied			Denied		
		/n	Or wlandshary					AGM	
		Date: 1/13/09 /64		Date:	Date: Dat		: <u></u> _		
(E)	1881 HW.	Ma I							
oper stations and the state of									
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I hamala and discount and		1 64		CERTIFICATION			11 4	c	1 1.1 .
I hereby certify that I am I have been authorized b									
jurisdiction. In addition,									
shall have the authority t									
such permit.									
SIGNATURE OF APPLICAN	 T			ADDRESS	 _	DATI		РНО	NE
						2		0	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, Main	e - Building or Use Permit		Permit No:	Date Applied For:	CBL:	
389 Congress Street, 0410	1 Tel: (207) 874-8703, Fax: (2	07) 874-8716	09-0035	01/13/2009	048 B016001	
Location of Construction:	Owner Name:		Owner Address:		Phone:	
65 GRANT ST	INTOWN PROPERTY	HOLDINGS	PO BOX 641			
Business Name:	Contractor Name:	(Contractor Address:	Phone		
	Sterling Builders, Steve	Morrow	P O Box 43 Westbrook		(207) 831-9595	
Lessee/Buyer's Name	Phone:	I	Permit Type:			
			Additions - Multi	Family		
Proposed Use:		Proposed	l Project Description:			
Residential - 18 dwelling uni	ts - install handi-cap ramp for unit	in install	handi-cap ramp for	r unit in #63		
#63		Ì				
Dept: Zoning S	tatus: Approved with Conditions	Reviewer:	Ann Machado	Approval D	Date: 01/13/2009	
Note:	Tippie vou vius comunicies	11011011011			Ok to Issue:	
	ad with the condition that the anni	aant will ammle	for a disability you	ionaa vyithin thinty d		
1) This permit is being issue being issued.	ed with the condition that the appli	cant will apply	tor a disability var	nance within thirty of	ays of the permit	
This property shall remain application for review an	n as eighteen dwelling units in thre d approval.	ee buildings. Ai	ny change of use sh	nall require a separa	te permit	
 This permit is being appropriate work. 	roved on the basis of plans submitt	ed. Any deviat	ions shall require a	separate approval b	pefore starting that	
Dept: Building S	tatus: Approved with Conditions	Reviewer:	Jeanine Bourke	Approval D	Date: 01/14/2009	
Note:					Ok to Issue:	
Permit approved based o noted on plans.	n the plans submitted and reviewed	d w/owner/cont	ractor, with addition	onal information as a	greed on and as	
Dept: Fire S	tatus: Approved with Conditions	Reviewer:	Capt Greg Cass	Approval D	Date: 01/13/2009	
Note:				• •	Ok to Issue:	

Comments:

1) All construction shall comply with NFPA 101

1/13/2009-amachado: Spoke to Stevan Morrow from Sterling Builders, Inc. Told him that the existing structures were already over allowable lot coverage and the ramp is adding 35 sf of structure. I told him that somebody needed to apply for the disability variance. He said to send it to him and he would pass it on to Alpha One. Sent letter & disability variance application for the Zoning Board of Appeals.

1/14/2009-jmb: Spoke to Steve M. About total rise (12"), graspable handrails both sides and edge protection, ok to issue

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. 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 of Applicant/Designee Date Signature of Inspections Official

CBL: 048 B016001 Building Permit #: 09-0035



Strengthening a Remarkable City, Building a Community for Life - www.portlandmaine.gov

Penny St. Louis Littell - Director of Planning and Development Marge Schmuckal, Zoning Administrator

January 14, 2009

Stevan Morrow Sterling Builders, Inc. P.O. Box 43 Westbrook, ME 04098

Re: 65 Grant Street – 048 B016 – R-6 – Handicap ramp – permit #09-0035

Dear Mr. Morrow,

This letter is a follow up to the telephone conversation that we had yesterday. In reviewing your application to install a handicap ramp at 63 Grant Street, I found that the existing structures on the property already covered more than the maximum allowable lot coverage. The property is located in the R-6 residential zone. Section 14-139(1)(e) of the ordinance gives the maximum allowable lot coverage for a property with less than twenty dwelling units as fifty percent. The lot is 9,500 square feet, so the maximum allowable lot coverage is 4,750 square feet. With the fire escapes that were built in 2005 (#05-1768), the footprints of the buildings were over what is allowed, and this ramp is adding thirty-five more square feet of coverage. Since the handicap ramp has to be installed ASAP, we will move the permit forward, but you need to apply for a disability variance within thirty days of the permit being issued, since the ramp does not meet lot coverage.

I have enclosed the disability variance application and the information about the appeal process. Please feel free to contact me at 874-8709 if you have any questions.

Yours truly,

Ann B. Machado Zoning Specialist (207) 874-8709

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any operty within the City, payment arrangements must be made before permits of any kind are accepted.

CLAS Property warms the only, payment that				ay isna are nesegment	
Location/Address of Construction: (0.2)	Grant	St.			
Total Square Footage of Proposed Structure/A		Square Footage of Lot			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Name Eli Address 65	nust be owner, Lessee or B zabeth Wheeler sGrant St. zipPortland ME O	_	Telephone: 307 773 3054	
Lessee/DBA (If Applicable)	Name Wi	fferent from Applicant) Nicom Simpson UBOX 10350 Zip Portland OH10H	C	ost Of ork: \$ 1760.00 of O Fee: \$ 40.00 otal Fee: \$ 40.50	
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Temporary Har Is property part of a subdivision? Project description: \ \(\chi \) \	rdicap f	yes, please name	cap (access ramp	
Contractor's name: Sterling Builder Address: P.O. BOX 43 City, State & Zip Westbrook 1		098	_Teleph	ооле:3078541389	
Who should we contact when the permit is read Mailing address:	h:Stevar	Morrow	Teleph	ione: <u>30783 [9595</u>	
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit. order to be sure the City fully understands the full scope of the project, the Planning and Development Department					
ay request additional information prior to the issuits form and other applications visit the Inspection ivision office, room 315 City Hall or call 874-8703.	uance of a per ns Division on	mit. For further information in at www.portlandmaine.g	on or to ov, or sto	download copies of op by the Inspections	
hereby certify that I am the Owner of record of the na lat I have been authorized by the owner to make this a ws of this jurisdiction. In addition, if a permit for work thorized representative shall have the authority to ente	pplication as hi k described in t	s/her authorized agent. I agr nis application is issued, I cert	ee to con ify that the	form to all applicable he Code Official's	

1-13-09 Date: This is not a permit; you may not commence ANY work until the permit is issue

Signature:

provisions of the codes applicable to this permit.







LAWRENCE T. VOSE LTV BUILDERS

15 Hearn Rd Scarborough ME. 04074 207.883.2986

DAJ INC PO BOX 6577 SCARBOROUGH June 27, 2005 Service address 61465 Grant St. Parking Lot this billy Sor all 3 Duildings Proposed & Deck DRIVE WAY SIPEWALK

GRANT STREET



SCALE 1 = 8'







Percering Independent Living

Independent Living Services Program **Landlord's Acknowledgement of Property Modification**

Property Address: 63 Grand St Portigued The 04104	•
Portland Me 04104	
Tenent Name (Consumer): ElizaSeff Wheely Property Owner Name: Bill Sampson	
Property Owner Name: Bill Sampson	

As an accommodation for my tenant, I have agreed to the modifications to my property located at address listed above as described in the work description attached.

The landlord and tenant also agree to the following:

The tenant is responsible for ensuring that all modifications are done in accordance with manufacturer's instructions and recommendations as well as all applicable building, zoning and safety codes.

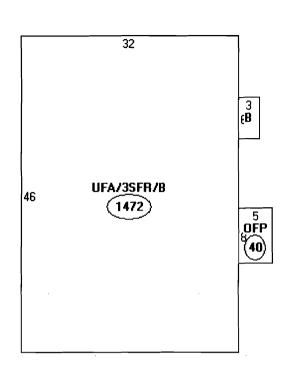
The tenant may remove access equipment or devices that are considered their personal property upon their departure. If the item has caused any damage to the property the tenent will be responsible for the cost to restore premises to original condition.

Landlord's Signature: William Sinysson V- 874-0700

Title 7 3

DOCUMENT4

REV. 04/12/04



Descripte A: UFA/3SI 1472 sqf B: 2SFRBA 18 sqft C: OFP 40 sqft	1530
1472 18 184 = 23 ×8	= 1674
1472 18 184	1 () 4

4878

adding 350

Incress

3.5×10= 35\$

