Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BERNIT

Permit Number: 091451

This is to certify that <u>LEAVITT BETHANY</u>	M /Corn one Co. Tanner Ar
has permission to Repair and replace portion	ons of e ling fire lape
AT 511 CUMBERLAND AVE	CB 048 F016001
provided that the person or perso of the provisions of the Statutes of the construction, maintenance and this department.	of Mage and of the Paragrees of the City of Portland regulating
Apply to Public Works for street line and grade if nature of work requires such information. PERMITISSUED	Notication of spectio must be given ad writte ermissid rocured before his built group bereof is lather or other section. 24 In 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. CART. Health Dept. Appeal Board Other Dept.	Director - Building & Inspection Servings
PE	NACTY FOR REMOVING THIS CARD

City of Portland, Main	ie - Buil	lding or Use	Permi	t Application	Per	mit No:	Issue Date:	CB	L:	
389 Congress Street, 0410)	207) 874-8703	, Fax:	(207) 874-871	6	09-1451	1	0	48 F016001	
Location of Construction:		Owner Name:		1-332-	Owner	Address:		Pho	ne:	
511 CUMBERLAND AVE		LEAVITT BE	THAN'	YM 2348	133 E	ENDICOTT S	ST # 1			
Business Name:				Contractor Address:			Pho	ne		
Cornerstone Construction/ Tanner		tion/ Tanner A	6 George town Court Yarmouth			20'	74153458			
Lessee/Buyer's Name		Phone:			Permit	Туре:		<u>.</u>	Zone	
		<u> </u>		}	Alter	rations - Mult	i Family		R-	6
Past Use:		Proposed Use:			Permi	t Fee:	Cost of Work:	CEO Dis	strict:	
3 Unit Residential		3 Unit Resider				\$50.00	\$2,450.00) 2	2	
		replace portion	is of ex	isting fire	FIRE	DEPT:	ADDIOVEG	PECTION:		~77
		escape					Denied Use	Group: 🔏	2 Type:	515
lua	lva-	3 d.v.			رعدا	_ ^			A	_
					7	See Co	nd 1710n	IB	C 2003	>
Proposed Project Description: Repair and replace portions	af aviatin	a fina accomo				ST)]		A (/	_
Repair and replace portions	OI CXISUII	g me escape			Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			7	<u> </u>	
					F.D.E.S		WITTES DISTRICT (P.A.D.)			
					Action	: Approve	ed Approved	d w/Condition	ns Denied	d
				i	Signat	ure:		Date:		
Permit Taken By:	Date A	oplied For:			Zoning Approval					
Ldobson	12/30	0/2009				23011119	- pp. o.u.			
This permit application	does not	preclude the	Spe	cial Zone or Revie	ws	Zonin	g Appeal		ric Preservatio	n
Applicant(s) from meet			Shoreland		Variance		Y25	in District or La	ındmarl	
Federal Rules.					İ					
2. Building permits do not	include i	olumbing,	□ w	☐ Wetland		Miscellar	Miscellaneous		s Not Require Re	eview
septic or electrical work			Flood Zone WIN				\	2H-		
3. Building permits are vo	id if work	c is not started			Conditional Use		☐ Requ	uires Review		
within six (6) months of				OXINA	5.					
False information may in permit and stop all work		a building	🗌 Sı	به مهاوی abdivision	<i>^</i> ∤.	Interpreta	tion	Appr	roved	
permit and stop an wor	к			•		·				_
			∐ Si	te Plan		Approve	i	App	roved w/Conditi	ions
		PER"	MaD		 	Danied			ind	
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	L_0	! : ! - '		+ 1						
			(CERTIFICATION	ON					
I hereby certify that I am the	owner of	record of the na	med pr	operty, or that th	ne prop	osed work is	authorized by 1	the owner	of record and	i that
I have been authorized by the										
jurisdiction. In addition, if a										
shall have the authority to en	iter all are	eas covered by s	uch per	mit at any reasoi	nable h	our to enforc	e the provision	or the cod	ie(s) applicat	oie to
such permit.										
SIGNATURE OF APPLICANT				ADDRES	SS		DATE		PHONE	

•	- Building or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703, Fax: (207)	7) 874-8716	09-1451	12/30/2009	048 F016001
Location of Construction:	Owner Name:	[0	wner Address:		Phone:
511 CUMBERLAND AVE	LEAVITT BETHANY M		33 ENDICOTT ST	1#7	
Business Name:	Contractor Name:	,	ontractor Address:		Phone
	Cornerstone Construction		George town Cou	rt Yarmouth	(207) 415-3458
Lessee/Buyer's Name	Phone:	I .	ermit Type:		
			Alterations - Multi	Family	
Proposed Use: 3 Unit Residential - Repair and escape	replace portions of existing fire	, -	Project Description: and replace portion	s of existing fire esc	eape
=	tus: Not Applicable	Reviewer:	Scott Hanson	Approval Da	
Note: Does not requyire revi	ew.				Ok to Issue:
Dept: Zoning Sta Note:	tus: Approved with Conditions	Reviewer:	Ann Machado	Approval Da	ate: 12/31/2009 Ok to Issue:
	with the condition that all the weat	مامة الثبيرة	aa saidhim tha assistic	footsint	OR to issue.
•	with the conditon that all the work	-		-	
ANY exterior work require District.	s a separate review and approval t	hru Historic P	reservation. This p	roperty is located w	ithin an Historic
This property shall remain approval.	a three family dwelling. Any chang	ge of use shall	require a separate	permit application f	or review and
4) This permit is being approved work.	ved on the basis of plans submitted	. Any deviati	ons shall require a	separate approval be	efore starting that
Dept: Building Sta Note:	tus: Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	ate: 02/08/2010 Ok to Issue: ✓
1) All open risers must be clo	sed to leass than a 4" opening.				
2) All open guardrails must be	e closed to less than a 4" opening.				
3) This is an after teh fact per					
Dept: Fire Sta	tus: Approved with Conditions	Reviewer:	Capt Keith Gautre	au Approval D	ate: 01/08/2010 Ok to Issue: ✓
1) All construction shall com	oly with NFPA 101				

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.
X Framing inspection required.	
X Final inspection required at com	pletion of work.
· · ·	ertain projects. Your inspector can advise you if cy. All projects <u>DO require</u> a final inspection.
If any of the inspections do not occur, the p REGARDLESS OF THE NOTICE OR CI	•
CERIFICATE OF OCCUPANICES MUST THE SPACE MAY BE OCCUPIED.	T BE ISSUED AND PAID FOR, BEFORE
Signature of Applicant/Designee	Date
Signature of Inspections Official	 Date

CBL: 048 F016001 Building Permit #: 09-1451

General Building Permit Application

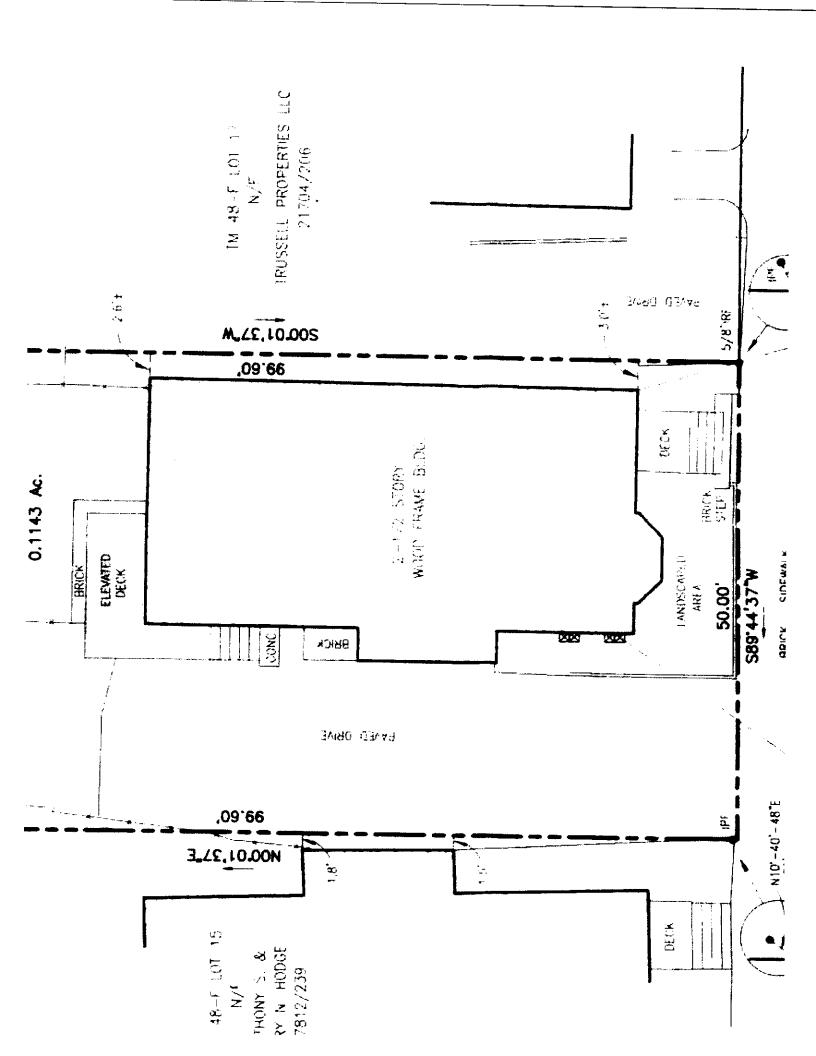
property within the City, payment arrangements must be made before permits of any kind are accepted.

Total Square Footage of Proposed Structure/Area Square Footage of Lot Cost Of Work: \$2750 Cost Of W	Location/Address of Construction: 511	Cumberland Ave. Portla	ind, ME 04101
Tax Assessor's Chart, Block & Lot Chart# 48 Block# F Lot# 16 Block# F Lot# 16 Applicant *must be owner, Lessee or Buyer* Name Betharry Leavitt Address 33 Endicott st. Apt#I-Rear City, State & Zip Boston, MA 02113 Cost Of Work: \$2\pu 50 Cot Of O Fee: \$ City, State & Zip Current legal use (i.e. single family) If vacant, what was the previous use? Outerent legal use (i.e. single family) If vacant, what was the previous use? Outerent legal use (i.e. single family) If vacant, what was the previous use? Outerent legal use (i.e. single family) If vacant, what was the previous use? Outerent legal use (i.e. single family) If yes, please name Project description: Repair exterior egress to Apartment on 3rd Floor. Specific portions to be repaired and material list are identified hincin. Contractor's name: Constructor's name: Construction Address: Construction Policy # MPK140N City, State & Zip Yarmouth, MA 04096 Telephone: 201-415-3458 Who should we contact when the permit is ready. Bethany Leavith Mailing address: 511 Cumber land Avenue. Portland ME 04/01 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 y request additional information prior to the issuance of a permit. For further informations, or stop by the flispections sisten of the; room 315 City Itall or call 874-8703. Reply certify that I am the Owner of record of the named property, or that the owner of stuff authorized by the owner to make this application as his/her authorized agent, if agree, Deconfices is a la applicable of this jurisdiction. In addition, if a permit for work described in this application is it and authorized by the owner of make this applicable to this permit.	····	e/Area Square Footage of Lot	Number of Stories
Owner (if different from Applicant) Name Address City, State & Zip Current legal use (i.e. single family) Multifamily Number of Residential Units If vacant, what was the previous use? No Proposed Specific use: No If yes, please name Project description: Repair exterior egress to Apartment on 3rd Floor. Specific portions to be Proposed and material list are identified hurein. Contractor's name: No If yes, please name Project description: Repair exterior egress to Apartment on 3rd Floor. Specific portions to be Proposed and material list are identified hurein. No City, State & Zip Yarmouth, MA O4096 Telephone: 201-415-3458 Who should we contact when the permit is ready: Bethany Leavith Telephone: 201-432-2341 Mailing address: Sil Cumberland Avenue, Pothand ME O4101 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 y request additional information prior to the issuance of a permit. For further information or to download copies of soft of mand other applications visit the Inspections Division on-line at www.portlandmails.get, or stop by the suspections sisten office, room 315 City Hall or call 874.8703. reby certify that I am the Owner of record of the named property, or that the owner of that authorizes the facility of the inspections of the purished work and to have been authorized by the owner to make this application as his/her authorized applicable to this permit. If yes, please name Total Fee: \$ Total Fee:	Tax Assessor's Chart, Block & Lot Chart# 48 Block# F Lot# 16	Applicant *must be owner, Lessee or Name Bethany Leavitt Address 133 Endicott St. Ap	Buyer* Telephone: 207-632-2348
Name Address City, State & Zip Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: NA-pot changing use Is property part of a subdivision? In yes, please name Project description: Repow exterior egress to Apartment on 3rd Floor. Specific portions to be repoired and material list are idmified havein. Insurance-N6M lns. Contractor's name: Insurance-N6M lns. Insurance-N6M lns. Contractor's name: Insurance-N6M lns. Insuranc	T /TND A (TC A 1: - 1.1.)		
Current legal use (i.e. single family) Multifamily Number of Residential Units Proposed Specific use: NA - por Changing Use Is property part of a subdivision? Repair exterior egress to Apartment on 3rd Floor. Specific portions to be repaired and material list are identical function. Insurance - N6M Ins. Contractor's name: Contractor's	Lessee/DBA (II Applicable)		
Current legal use (i.e. single family) Multifamily Number of Residential Units Proposed Specific use: M/A - pot changing Use Is property part of a subdivision? No If yes, please name Project description: Repair exterior egress to Apartment on 3rd Floor. Specific portions to be Repaired and material list are identified hardin. Contractor's name: Thousance - No Mins. Telephone: 207-415-3458 Who should we contact when the permit is ready: Bethany Leavith Telephone: 207-415-3458 Who should we contact when the permit is ready: Bethany Leavith Telephone: 207-415-3458 Who should we contact when the permit is ready: Bethany Leavith Telephone: 207-432-2346 Mailing address: 51 Cumber land Avenue Portland ME O'Ho! Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit. Correct to be sure the City fully understands the full scope of the project, the Planning and Development Department y request additional information prior to the issuance of a permit. For further information or to download copies of some and other applications visit the Inspections Division on-line at www.portlandmain. 200, or stop by the shapections rision office, room 315 City Hall or call 874-8703. Sector of the codes applications visit the Inspections Division on-line at www.portlandmain. 200, or stop by the shapections rision office, room 31		Address	C of O Fee: \$
If year, what was the previous use: NA - not changing USE. It property part of a subdivision? No If yes, please name Project description: Repair exterior egress to Apartment on 3rd Floor. Specific portions to be required and material list are identified huncin. Insurance - N6M Ins. Contractor's name: Venerative Construction (Venerative Construction) (Ve		City, State & Zip	Total Fee: \$
Who should we contact when the permit is ready: Bethany Leavit Telephone: 207-632-234. Mailing address: 511 Cumber and Avenue Portland ME 04101 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 y request additional information prior to the issuance of a permit. For further information or to download copies of so form and other applications visit the Inspections Division on-line at www.portlandmaint.gov , or stop by the inspections vision office, room 315 City Hall or call 874-8703. Exercise certify that I am the Owner of record of the named property, or that the owner of record authorizes the portions of the law been authorized by the owner to make this application as his/her authorized agent. If agree Octofora is all applicable so of this jurisdiction. In addition, if a permit for work described in this application is is used. I certify that the Gie Official's horized representative shall have the authority to enter all areas covered by this permit as my reasonable having enforce the revisions of the codes applicable to this permit.	Contractor's name: The Address: 6 George town Court	· construction	Policy # MPK9140N
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horized representative shall have the authority to enter all areas covered by this permit at my reasonable hear of enforce the visions of the codes applicable to this permit.			
gnature: Ball M Kentho Date: 10/2/2009 50	ay request additional information prior to the is form and other applications visit the Inspevision office, room 315 City Hall or call 874-870 tereby certify that I am the Owner of record of the II have been authorized by the owner to make the content of the owner to make the owner the owner to make the owner to make the owner the owner the owner to make the owner to make the owner to make the owner the owner to make the owner the own	e issuance of a permit. For further informa actions Division on-line at <u>www.portlandmain.</u> 3. he named property, or that the owner of respu- his application as his/her authorized agont. If a	tion or to download copies of the provided spections authorizes the provided work and agree to conform to all applicable
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and the state of t 511 CMBERLAND ANDINE, PORTLAND, MANE BETHANY LEAVIT 511 CMBERLAND ARBUE, PORTLAND, MANE BOUNDARY SURVEY LOCATION MAP 901/6 THE LAND METERS CUMBERLAND AVENUE PLAN RETERBACES.

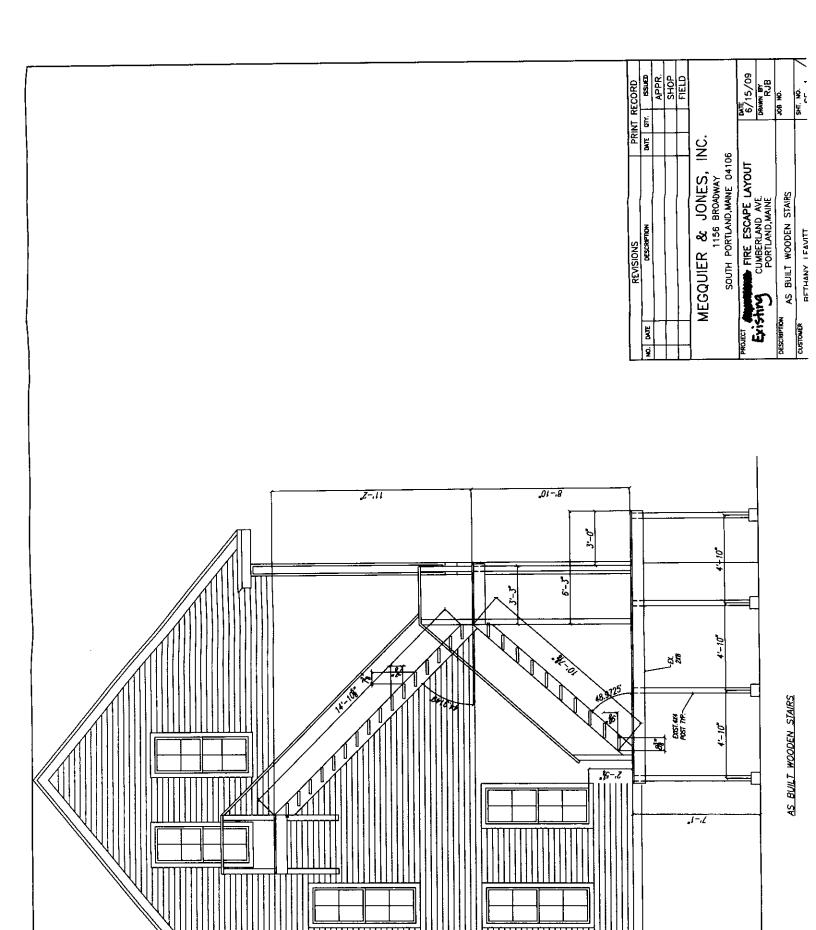
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511 Cumberland Ave.
Rear Egress (Existing)

Dimensional Drawings of Existing Stairs

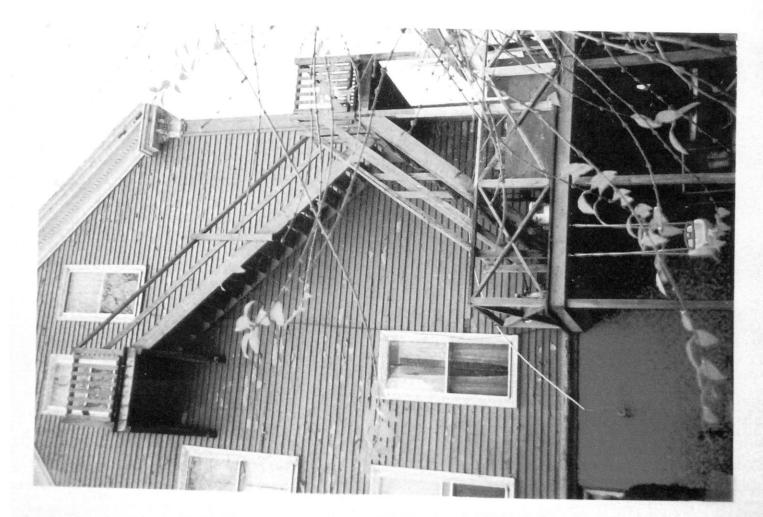


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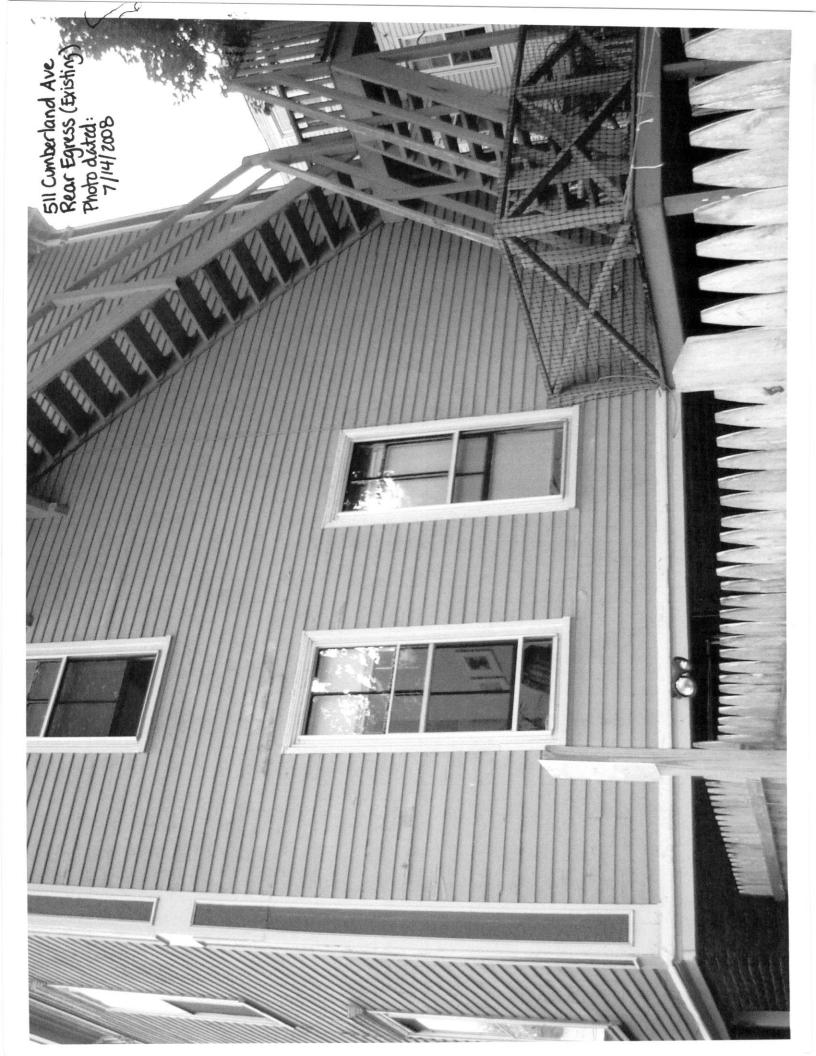
511 Cumberland Ave Rear Egress (Existing)

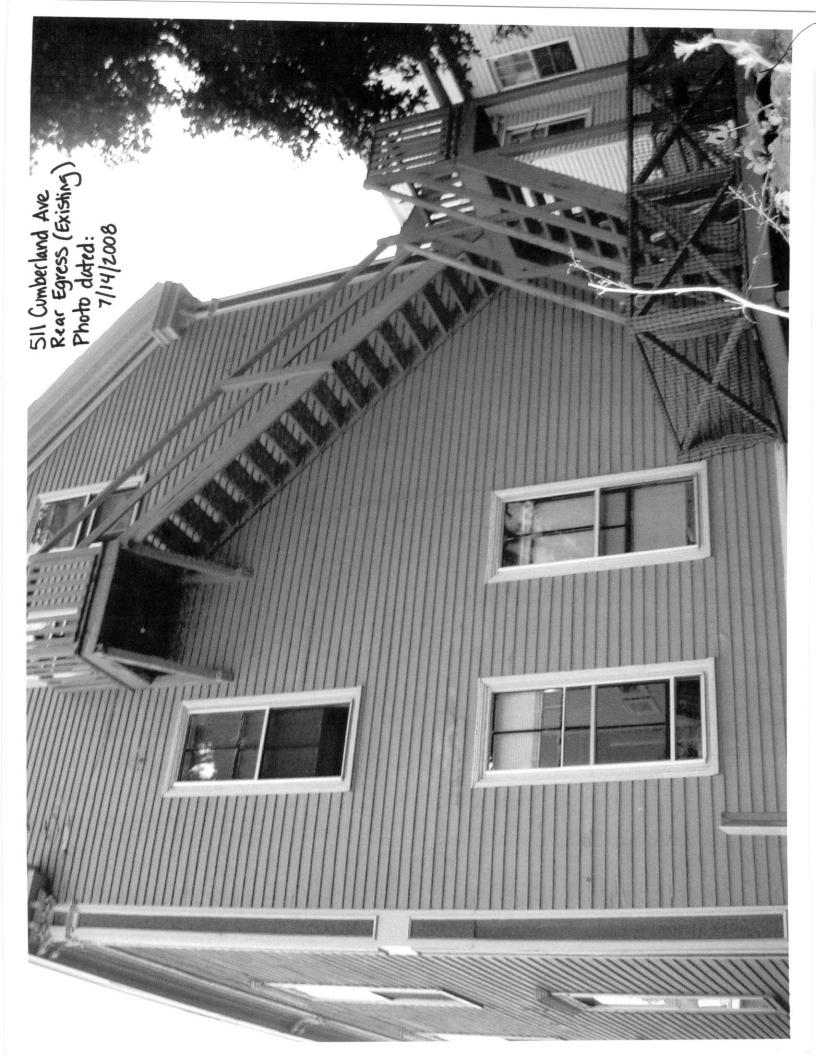
Photos of Existing Stairs/ Framing details/ Condition



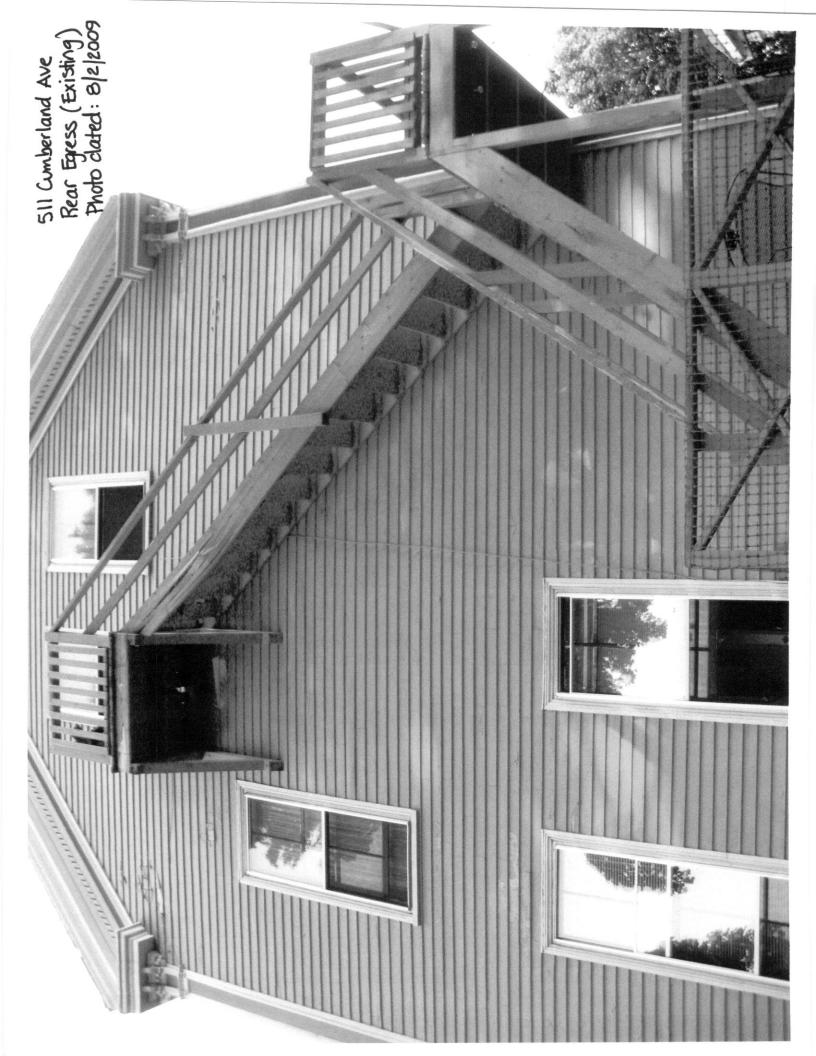


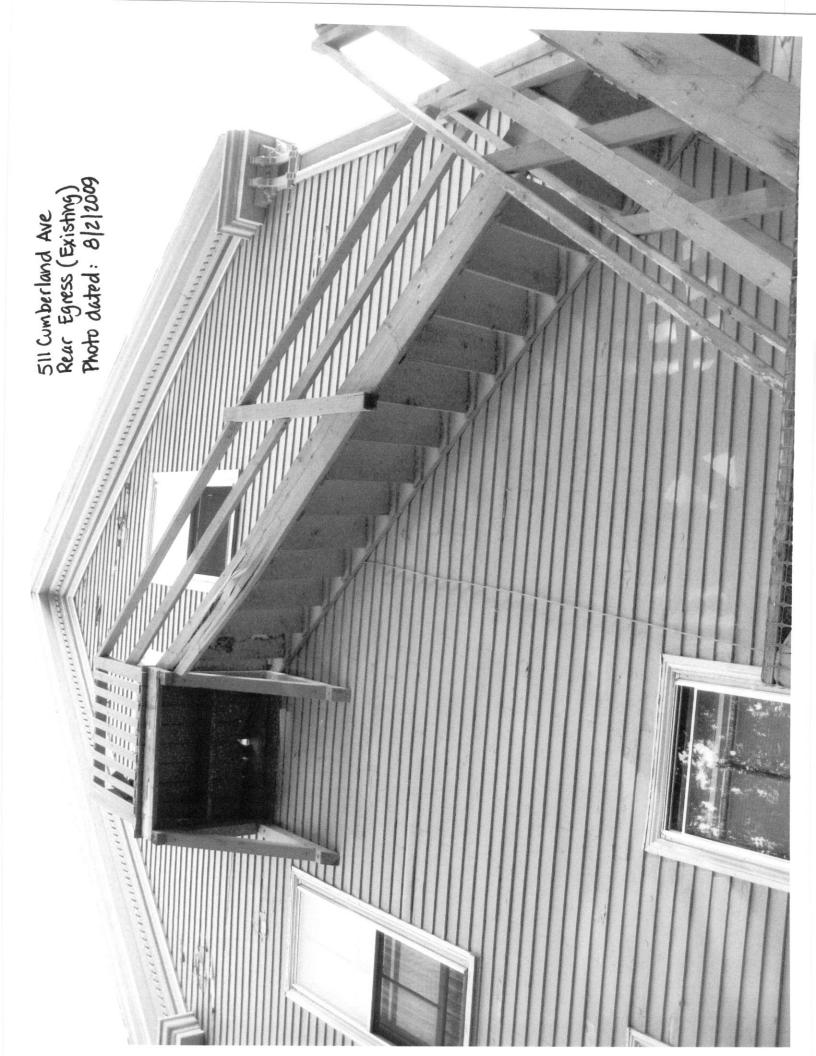














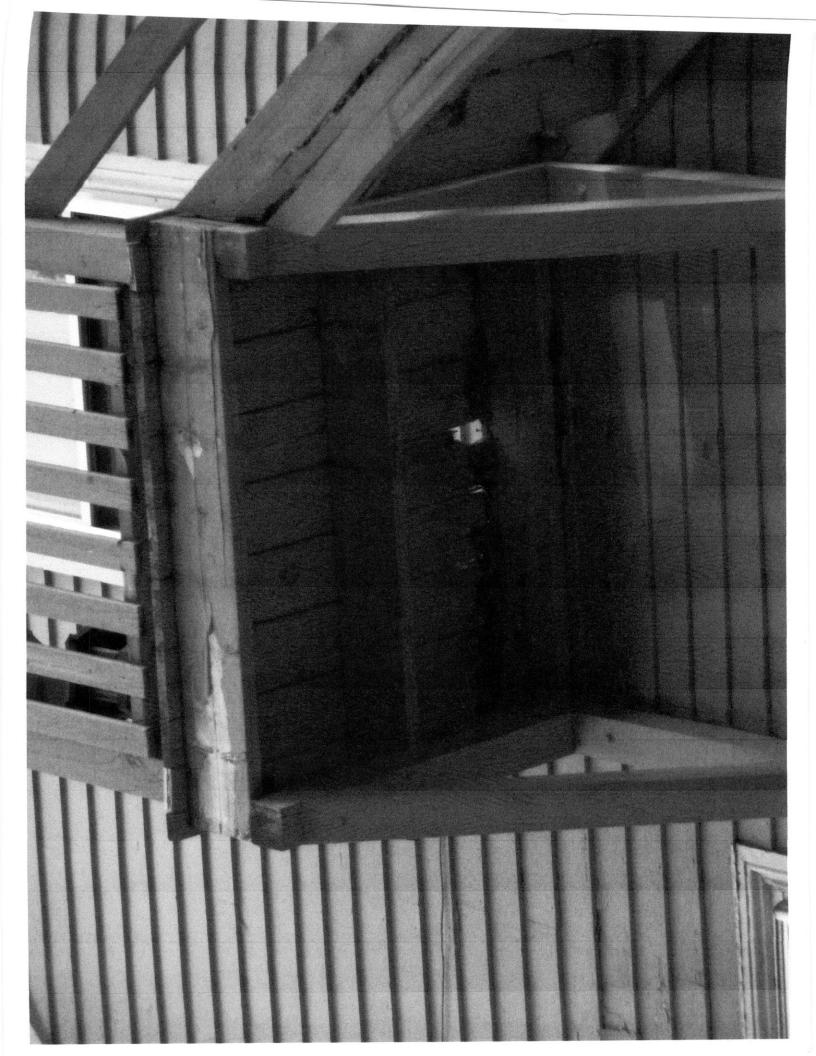








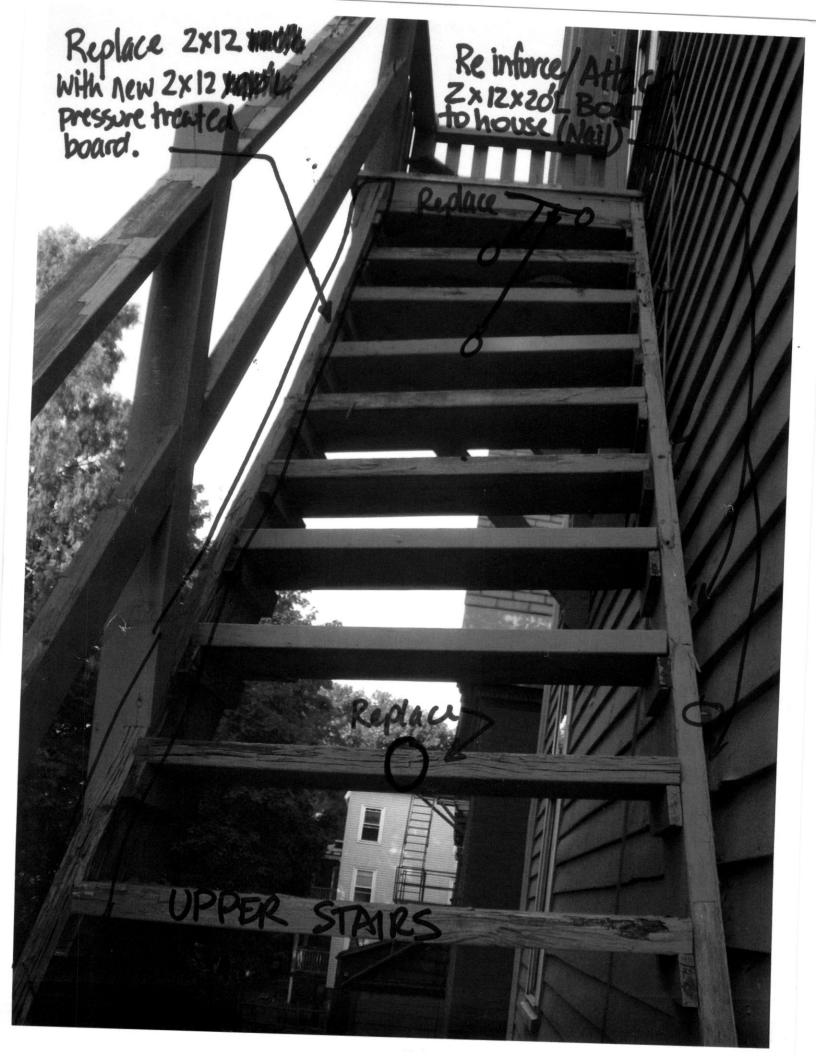




511 Cumberland Ave
Rear Egress (Existing)
Proposed Repairs/Replacements/
Scope of Work



Redace 4x4 post with nes pressure treated 4x4 post MID
PLATFORM LOWER Pethed P.t. 2x4) MID PLATFORM



Replace this stair ties of

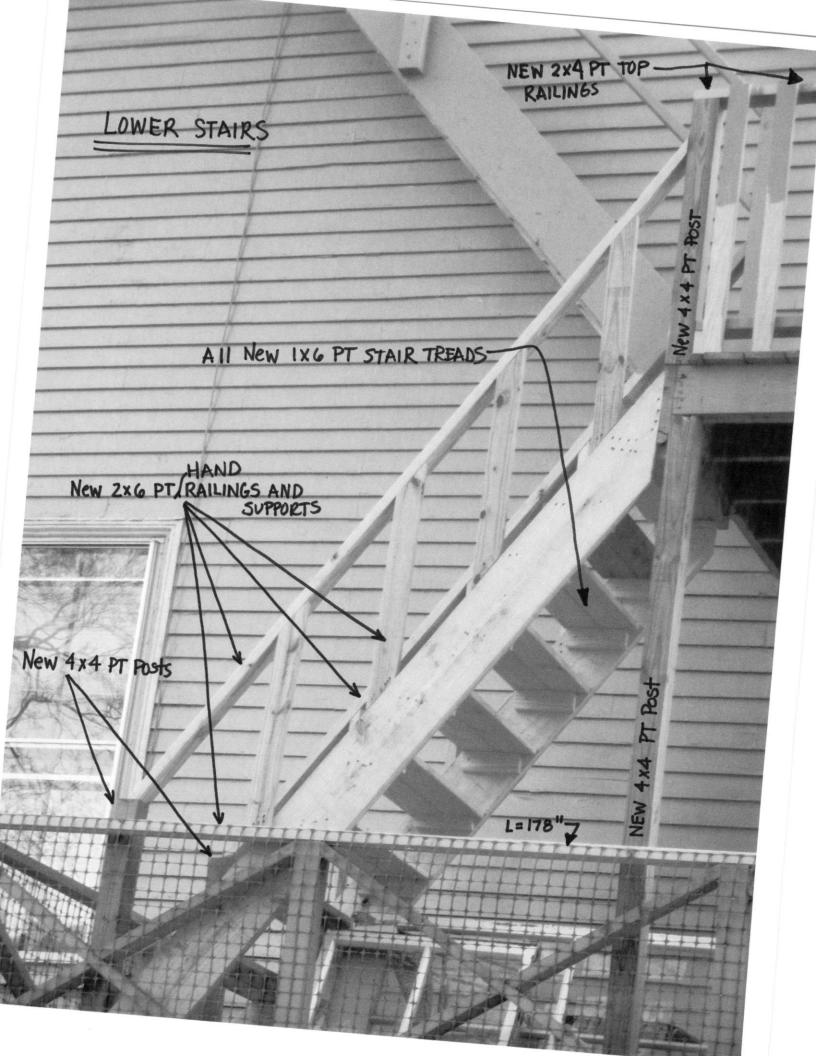
UPPER STAIRS

UPPER PLATFORM as needed

511 Cumberland Ave
Rear Egress (Repaired/Replaced)
Photos of Repairs/Replacements
Made/Framing Details

Note: Rise and Run of Upper and Lower Stairs match existing (see "As Built Wooden Stairs" Detail Drawing) since the Lower, Mid and Upper Platforms were not modified.





MID PLATFORM

NEW 2x4 PT TOP RAILINGS

NEW 4x4 PT POST

NEW 1X6 (Ripped) PT BOARD (TYPOF4)

NEW 2X4 PT BOTTOM RAILINGS NEW TXG (Ripped) PT BOARD

Post

NEW 4x4 PT

MID PLATFORM

STAIR STAIR

* DOWN

UPPER PLATFORM



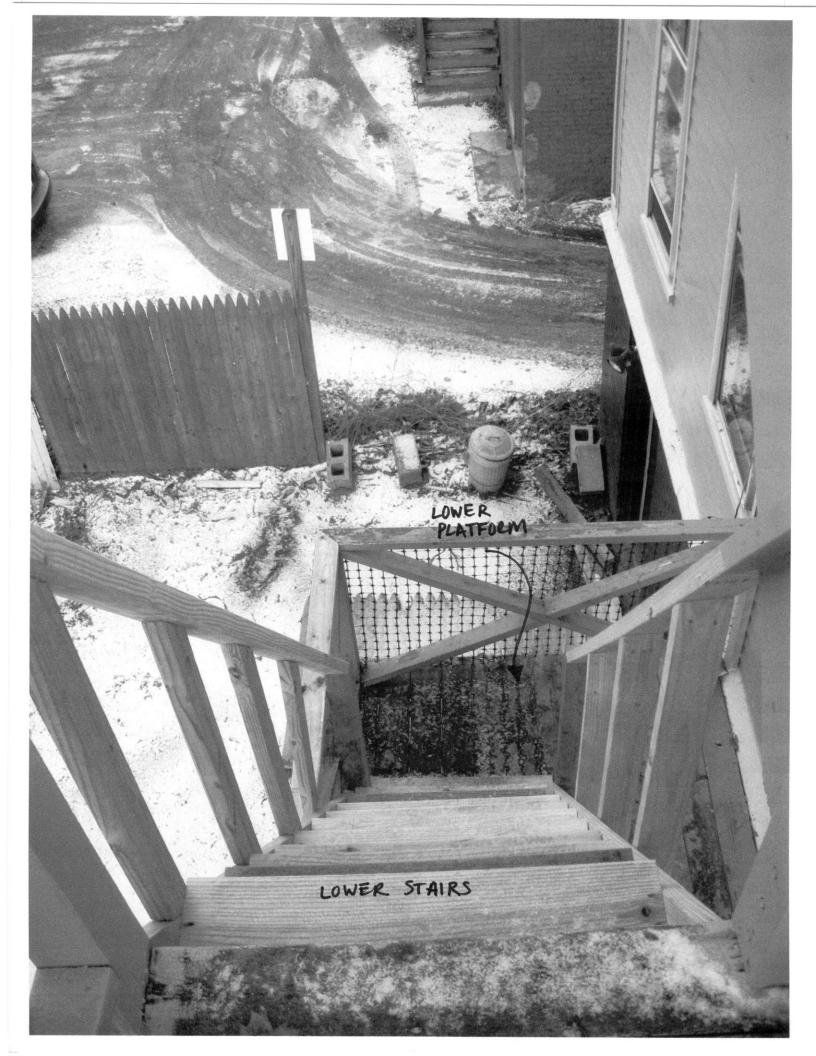




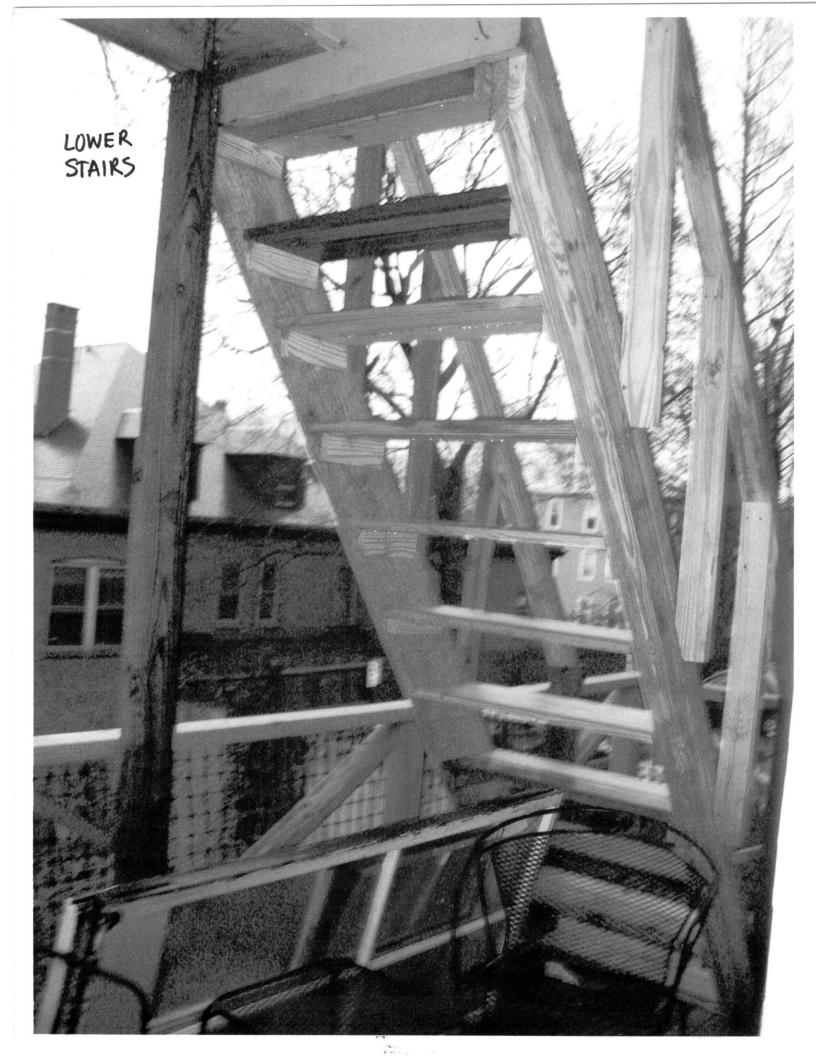
LOWER

STAIRS (10 treads)

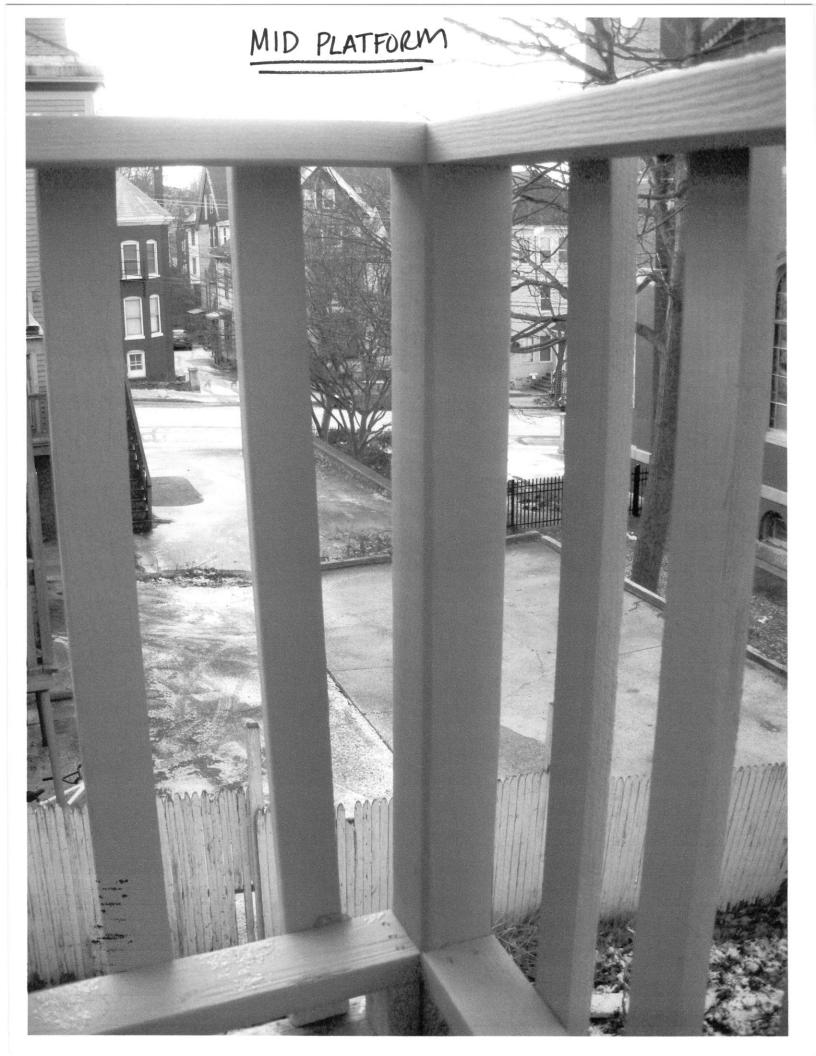
UPPER PLATFORM

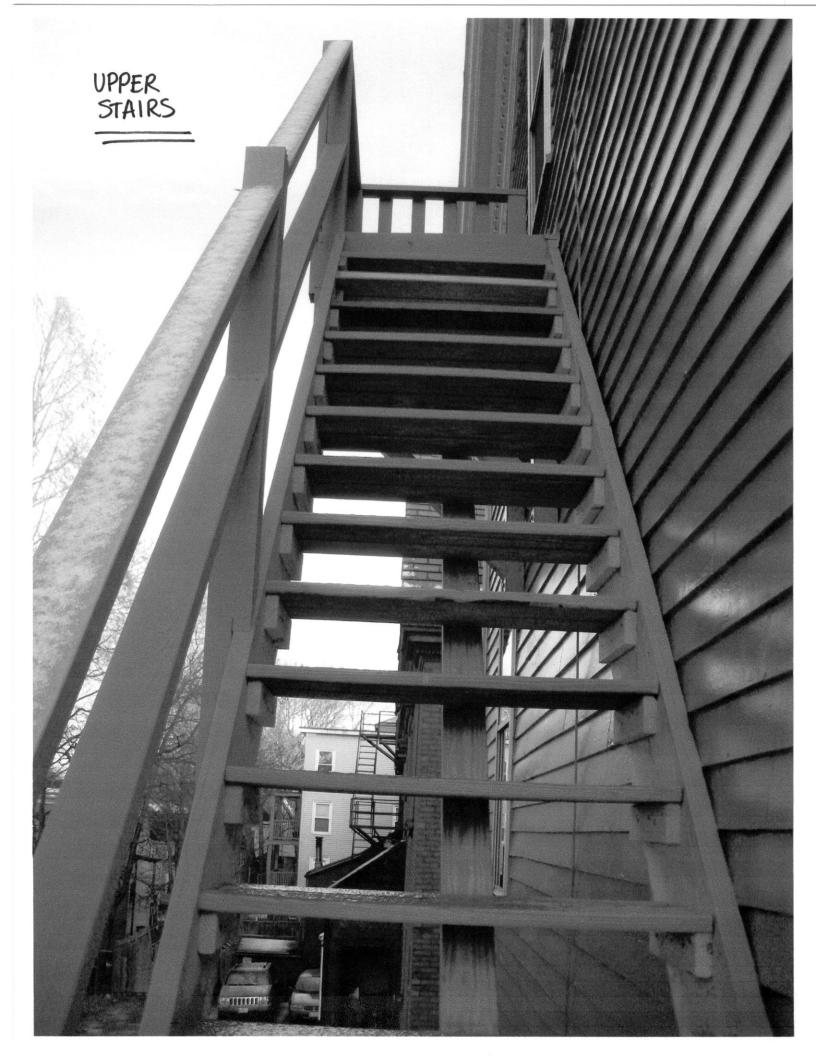












Taoglos 19 AXX WEN Walk Children NEW 2X4 PT HAND RAILING (LOWER STAIRS) NEW IXE HT STRIK TRENDS WEW ZAIZ A ZAIZ BOTTOM Existing the sold of the sold West of Stanley.

NEW IXE A DECING WEN ZHIP SONE UPPER PLATFORM

UPPER PLATFORM NEW 2X4 PT HAND RAILING EXISTING 4x4 PT PO New Est A St. Mark.

UPPER PLATFORM New ZX4 PT TOP RAILINGS PT BOALOS (TYP OF 4 EXISTING 4x+ POST (PT) EXISTING 4x4 PT POST NEW 2X4 PT PORTON NEW 2X4 PT BOTTOM RAILING

ALL NEW 1x6 PT DECKING

NEW 2x4 PT BLOCKS UPPER PLATFURM THAT IM IN

