

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 030008

Please Read Application And Notes, If Any, Attached

Midcoast Mortgage
~~Baker John L. W. Jr. Vet &...~~

This is to certify that _____

has permission to _____ Change of use to legalize two unit to three units

AT 23 Roberts St _____ 066A D003001

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 written permission procured before this building or part thereof is altered or otherwise used-in. HOUR NOTIFICATION REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. *[Signature]*
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature]
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: 03-0008	Issue Date:	CBL: 066A D003001
-----------------------	-------------	----------------------

Location of Construction: 23 Roberts St	Owner Name: Baker John L Wwi Vet &	Owner Address: 23 Roberts St	Phone:
Business Name: n/a	Contractor Name: n/a <i>McCona Mortgage</i>	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name n/a <i>Shawn Lyden</i>	Phone: n/a	Permit Type: Change of Use - Commercial	Zone: <i>R-5</i>

Past Use: Residential / Two Unit	Proposed Use: Change of Use / To legalize two unit to three unit	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R2</i> Type: <i>SB</i> <i>11/10/03</i>	

Proposed Project Description:
Change of use to legalize two unit to three unit.

Signature: *[Signature]* Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 01/06/2003	Zoning Approval
------------------------	---------------------------------	------------------------

- 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..

<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <i>Pre-1957 records</i> <i>(Assessors & City Director)</i> <input type="checkbox"/> Wetland <i>Shows A continued family use - NEVER removed</i> <i>Any Kitchens</i> <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"/> <input type="checkbox"/> Denied <i>ok with conditions</i> Date: <i>1/7/03</i>	<p>Zoning Appeal</p> <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	<p>Historic Preservation</p> <input checked="" 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 <i>[Signature]</i> Date: _____
--	---	---

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: 03-0008	Date Applied For: 01/06/2003	CBL: 066A D003001
------------------------------	--	-----------------------------

Location of Construction: 23 Roberts St	Owner Name: Mid Coast Mortgage	Owner Address: 23 Roberts St	Phone:
Business Name: n/a	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Change of Use - Commercial	

Proposed Use: Change of Use / To legalize two unit to three unit	Proposed Project Description: Change of use to legalize two unit to three unit.
--	---

Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 01/07/2003
Note: 1/7/03 - pre-1957 assessors records and city directory shows this to be a continued 3 families - no kitchen units have ever been removed Ok to Issue: <input checked="" type="checkbox"/>			
1) This property shall remain a three (3) family dwelling. Any change of use shall require a separate permit application for review and approval.			
Dept: Building	Status: Pending	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Fire	Status: Pending	Reviewer: Lt. McDougall	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>

066A D003001 1 of 1
 Owner Name 1: BAKER JOHN L WWI VET &
 Name 2: ALICE M GRANT JTS
 Mailing Address: 23 ROBERTS ST
 City, State, Zip: PORTLAND ME 04102

Property Address: 23 ROBERTS ST
 Property Type: RESIDENTIAL
 Description: 66A-D-3
 ROBERTS ST 23-25
 GRANITE ST 92-98
 5391 SF

TWO FAMILY 2 LIGHT
 R5 011
 OAKDALE 3315
 PUBLIC WATER PUBLIC SEWER NONE
 23 ROBERTS ST
 12/28/2000 vjm

No parking plan shown
 No plot plan submitted
 This is considered
 a continued 3 family
 use - They never
 removed any kitchen
 1/7/03

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.

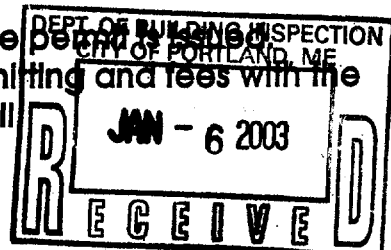
Location/Address of Construction: <u>2325 Roberts St. Portland, ME 04103</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>066 AD 003</u>	Owner: <u>MID Coast Mortgage</u>	Telephone: (207) <u>775-3330 x 102</u>
Lessee/Buyer's Name (if Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>MID Coast Mortgage P.O. Box 6703 Portland, ME 04101-6703</u>	Cost Of Work: \$ <u>0</u> Fee: \$ <u>30</u>
Current use: <u>3 Unit Residential Building</u>		<u>COYO 75.00</u>
If the location is currently vacant, what was prior use: <u>- SAME -</u>		<u>TOTAL 10500</u>
Approximately how long has it been vacant: <u>N/A</u>		
Proposed use: <u>Upgrade from 2 units to 3 units</u> Project description:		
Contractor's name, address & telephone: <u>NONE call</u>		
Who should we contact when the permit is ready: <u>SHAWN P. LYDEN / MID Coast Mortgage</u>		
Mailing address: <u>P.O. Box 6703 Portland, ME 04101-6703</u>		<u>415-1695 call</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: <u>775 3330 x 102</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: <u>[Signature]</u>	Date: <u>12/31/02</u>
--	-----------------------

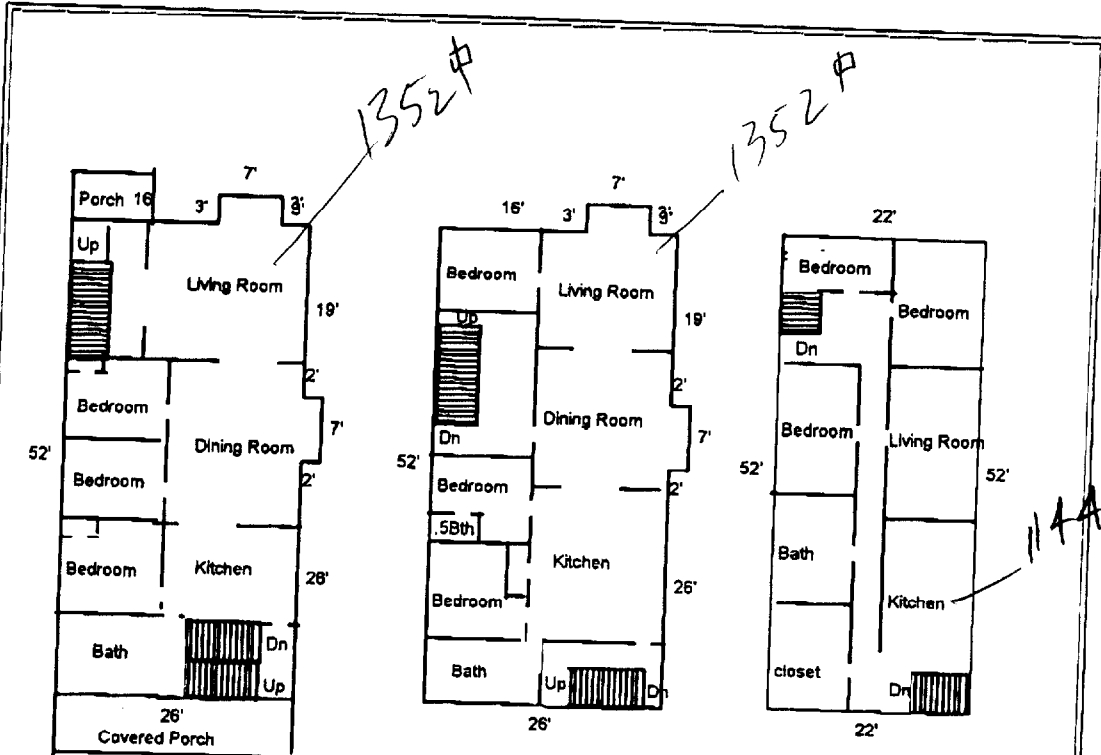
This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



SKETCH ADDENDUM

File No. 16566000

Borrower Shawn Lydon & Andre Bellucci
 Property Address 23-25 Roberts St.
 City Portland County Cumberland State ME
 Lender/Client Kingfield Bank Address Main St. Kingfield ME 04947 Zip Code 04102



Unit 1

Unit 2

Unit 3

SKETCH CALCULATIONS

	<p>A1 : 7.0 x 3.0 = 21.0 A2 : 26.0 x 19.0 = 494.0 A3 : 28.0 x 7.0 = 196.0 A4 : 26.0 x 26.0 = 676.0</p>
First Floor	
1387.0	
	<p>A5 : 7.0 x 3.0 = 21.0 A6 : 26.0 x 19.0 = 494.0 A7 : 28.0 x 7.0 = 196.0 A8 : 26.0 x 26.0 = 676.0</p>
Second Floor	
1387.0	
	<p>A9 : 22.0 x 52.0 = 1144.0</p>
Third Floor	
1144.0	
Total Living Area	
3918.0	

WinSketch by Jammin Software

PORTLAND FIRE DEPARTMENT

Portland, Me. 7-23 1996

NOTICE OF HAZARDOUS OR DANGEROUS CONDITIONS

Mr. John Baker
25 Roberts St.
Portland, ME.

as owner, occupant, agent of premises at 25 Roberts
you are hereby notified to remedy the following hazardous or dangerous condition now existing, namely:

- ① Provide smoke detectors in front and rear hallways.
- ② Install a sprinkler head above each furnace in basement.

Inspection of building and premises by the authority of Section 1.4 of the Fire Prevention Code.

By order of,

Chief of Department

Recommended time of compliance: 30 days

By F.F. Zibuna Inspector Badge # 265

Station Bramhall Company No. E-4

7/23/96

~~1~~

- ① CLEAN CHIMNEY
- ② REPAIR OPENING IN CHIMNEY PARTIALLY COVERED BY A METAL PLATE.
- ③ INSTALL 110 VOLT SMOKE DETECTORS IN EACH APARTMENT.

STREET NO. 25

LOCATION Roberts St

OCCUPANT Ther Park

assembly
educational
health care
detention & corrections
residential
mercantile
business
industrial
storage
mixed occupancy
other

OWNER John Baker

ADDRESS Same

DATE 7-28-96 INSPECTOR Ed Zibura

CONSTRUCTION TYPE

Wood frame
heavy timber
steel
concrete
other

ROOF TYPE

pitched
flat

VERTICAL OPENINGS

	B	B-1	1-2	2-3	3-4	4-5
stairways	0	1	2	2		
elevators	1					
chutes						
climb ways						
air ducts						
light shafts						

ARE VERTICAL OPENINGS SEPARATED FROM OCCUPIED AREAS WITH RATED CONSTRUCTION INCLUDING FIRE DOORS WITH SELF CLOSERS? No

NUMBER OF FIRE ESCAPES 0

NUMBER OF STORES SERVED 1/1

GENERAL CONDITION 1/1

NUMBER OF SOLID FUEL APPLIANCES 0

LOCATION OF SOLID FUEL APPLIANCES ///

TYPE OF CENTRAL HEAT OIL GAS ELECTRIC

IS BOILER ROOM SEPARATED FROM AREAS WITH RATED CONSTRUCTION INCLUDING FIRE DOORS AND CHIMNEY? No

NUMBER OF ABOVE GROUND TANKS

INSIDE 2 TYPE OF FUEL oil
OUTSIDE 0 TYPE OF FUEL

NUMBER OF UNDERGROUND TANKS 1 TYPE OF FUEL

FROM A FIRE SAFETY POINT OF VIEW, HOW DO YOU RATE THIS STRUCTURE? GOOD TYP POOR

INSPECTOR'S COMMENTS AND OBSERVATIONS

This floor Apartment is Vacant

NUMBER OF PROPANE TANKS 0
ARE FIRE EXTINGUISHERS PROVIDED? NO

ARE EXHAUST HOODS PROTECTED WITH AN EXTINGUISHING SYSTEM? NO
IS THIS STRUCTURE PROTECTED WITH A FIRE ALARM SYSTEM? NO COMPLETE PARTIAL

MANUAL NA
AUTOMATIC NA
BOTH
CITY CONNECTION

IS THIS STRUCTURE PROTECTED WITH A SPRINKLER SYSTEM? NO COMPLETE PARTIAL

WET SYSTEM NA
DRY SYSTEM NA
BOTH

DOES THE ACTIVATION OF THE SPRINKLER SYSTEM SOUND THE FIRE ALARM SYSTEM? NA

IS THIS STRUCTURE PROVIDED WITH A SWANDIPEE SYSTEM? NO

2 1/2 INCH CONNECTIONS NA
1 1/2 INCH CONNECTIONS NA
BOTH

OTHER TYPES OF EXTINGUISHING SYSTEMS PROVIDED

HALON NA CO2 NA DRY CHEMICAL
OTHER

IS THERE EMERGENCY LIGHTING? NO
ARE EXIT SIGNS PROVIDED? NO