Form # P 04 DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND Please Read BU Application And Notes, If Any, Permit Number: 090727 Attached This is to certify that _ Kinney Carol A &/Michael Lar has permission to Replacing existing staircase to chen AT 26 Whitehead St 084 N002001 provided that the person or persons, fi or cd arón ge pting this permit shall comply with all ces of the City of Portland regulating of the provisions of the Statutes of Ma e and of the the construction, maintenance and use f buildings and stru res, and of the application on file in this department. Not ation o spectio must b Apply to Public Works for street line nd writte permissi brocure give A certificate of occupancy must be and grade if nature of work requires this bui befo procured by owner before this building or p nereof i such information. lath or oth sed-in. 2 ing or part thereof is occupied. NOTICE IS REQUIRED. HO PERMIT ISSUED

OTHER REQUIRED APPROVALS

JUL 1 4 2009

CITALOFURORTLAND

Fire Dept.

Health Dept. _ Appeal Board

Other

PENALTY FOR REMOVING THIS CARD

Location of Construction:	Owner Name:		<u>` </u>	Owner	· Address:			Phone:	
26 Whitehead St \mathcal{P} \mathcal{I}	Kinney Carol A	4 &		26 W	hitehead St			207-766-5	5950
Business Name:	Contractor Name	:		Contra	ector Address:			Phone	
	Michael Lange	lla		382 I	Pleasant Ave	Peaks Islan	d	<u>.</u>	
Lessee/Buyer's Name	Phone:			1	t Type: rations - Dw	ellings			Zone: IRZ
Past Use:	Proposed Use:			Permi	t Fee:	Cost of Wor	k: C	EO District:	7
Single Family	Single Family		cing existing		\$40.00	\$1,90		1	<u> </u>
	staircase to kit	chen		FIRE	DEPT:	Approved	INSPECT		Tumort
						Denied	Ose Giot	p: R3	Type:5B
							_	TRC 2	2003
Proposed Project Description:	han			Ciamat			Signatura	.2	1. Jec
Replacing existing staircase to kitch	iicii			Signat PEDE:	ure: STRIAN ACT	IVITIES DIST	3.g.natur	0/1	114109_
				Action			proved w/C		Denied
	····			Signat	ture:		I	Date:	
l l	Applied For: 14/2009				Zoning	Approva	d 		
This permit application does not applicate the second	ot preclude the	Spe	ecial Zone or Revie	ws	Zoni	ng Appeal		Historic Pres	ervation
Applicant(s) from meeting app Federal Rules.	_	☐ SI	horeland		☐ Variano	ee		Not in Distric	ct or Landmark
2. Building permits do not include septic or electrical work.	e plumbing,		Vetland		Miscell	aneous		Does Not Re	quire Review
3. Building permits are void if we within six (6) months of the da		☐ F	lood Zone Wire		Conditi	onal Use		Requires Rev	view
False information may invalidate permit and stop all work	ite a building	☐ s	ubdivision 4-4	and a	Interpre	tation		Approved	
		s	ite Plan Will	nch	Approv	ed		Approved w/	Conditions (
PERMIT ISSUE)	Мај	Minor MM		☐ Denied			Denied	
JUL 1 4 2009		Date:	2 7/14	05	Date:		Da	e:	
CITY OF PORTLA	ND								
CITOFFORILA	ND]								
			CERTIFICATI						
I hereby certify that I am the owner I have been authorized by the owner jurisdiction. In addition, if a permit shall have the authority to enter all a such permit.	r to make this appl for work describe	ication d in the	as his authorize application is i	d agen ssued,	t and I agree I certify that	to conform the code of	to all ap ficial's at	plicable laws ithorized rep	of this resentative
SIGNATURE OF APPLICANT			ADDRES	S		DATI	Ξ	PHO	ONE

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

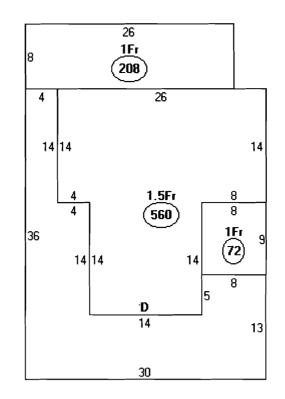
to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

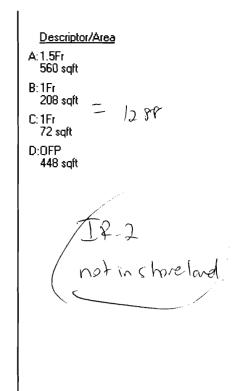
The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

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-co	nstruction Meeting will take place	upon receipt of your building permit.
X	Footing/Building Location Inspec precast piers	ction: Prior to pouring concrete or setting
<u>X</u>	Final inspection required at comp	pletion of work.
		ertain projects. Your inspector can advise you if cy. All projects <u>DO require</u> a final inspection.
•	the inspections do not occur, the produced of the NOTICE OR CIR	project cannot go on to the next phase, RCUMSTANCES.
	CATE OF OCCUPANICES MUST ACE MAY BE OCCUPIED.	Γ BE ISSUED AND PAID FOR, BEFORE
*(and A Kenny	7-14-09
Signature	of Applicant/Designee	Date
Signature	of Inspections Official	

CBL: 084 N002001 **Building Permit #:** 09-0727





Schbacks

Front 25' or average - N/A

Side 20' onch

rear 21' ma

Using section 14-425 -not extend morether 6' - 504 Gotprint mex

lot covere 20% of 7623=1824.6 - building 1288 / shed?

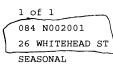
**Replacing old shirs that were torn down

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 Parcel ID

> Location Land Use



Owner Address

KINNEY CAROL A & RICHARD R JTS 26 WHITEHEAD ST PEAKS ISLAND ME 04108

Book/Page

Legal

14485/177 84-N-2-3 WHITEHEAD ST PEAKS ISLAND

Current Assessed Valuation

Land \$220,800 **Building** \$103,000

Total \$323,800

Property Information

Year Built 1900

Style Old Style Story Height 1.5

Sq. Ft. 1260

Total Acres 0.175

Bedrooms 3

Full Baths 1

Half Baths 1

Total Rooms 6

Attic None

Basement Crawl

Outbuildings

Type

Quantity

Year Built

Size

Grade

Condition

Sales Information

Date 01/01/1999 05/01/1994

Type LAND + BLDING LAND + BLDING

Price \$76,100 Book/Page 14485-177 11451-214

Picture and Sketch

<u>Picture</u>

Sketch

Tax Map

<u>Click here</u> to view Tax Roll Information. Any information concerning tax payments should be directed to the Treasury office at 874-8490 or emailed.

New Search!

http://www.portlandassessors.com/searchdetail.asp?Acct=084 N002001&Card=1

7/14/2009

General Building Permit Application

Livol of the property owner ower real estate of personal property taker of asci charger of any Property which the they meeting artification than be take before particle of any line are according

Location/Address of Construction: 26	whitehead St.	
Total Square Footage of Proposed Structure/ 50 59 47 Tax Assessor's Chart, Block & Lot	Area Square Footage of Lot 7513 se 4	Number of Stories: 4 2 / s skiet Buyer Telephone:
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#		
	Name CAROL Kinney	2077465950 home
84 N 002001	Address 26 Whitehead 'St	207 846 5586 work
	City, State & Zip Poaks Islan	d
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
	Name	Work \$ 1900
\checkmark	Address	C of O Fec: \$
	City, State & Zip	Total Fee: \$ 40,00
	·	1 Otal Fee: \$
Proposed Specific use:	If yes, please name ase, entrance to king strong strong	then (second egress) viture, 3 sonatures, 5059
Contractor's name: Michael La	engella	call hichael for
Address: Pleasant Av	A	
		Telephone: <u>032 8229</u> all
Who should we contact when the permit is ready:		Telephone: 746 5950
Mailing address: 26 whitehead	5 74.	
Please submit all of the information or do so will result in the au	tlined on the applicable Checkl stomatic denial of your permit.	ist. Failure to
rder to be sure the City fully understands the full request additional information prior to the issuar form and other applications visit the Inspections ion office, room 315 City Hall or call 874-8703.	nce of a permit. For further information o	or to download copies of

hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and hat I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable aws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's uthorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the rovisions of the codes applicable to this permit.

ignature:	(and I Kenney	Date:	7-14-09	
	This is not a permit; you may n	ot commence AND	york until the permit is issue	6)

Revised 09-26-08

•	ne - Building or Use Permit 01 Tel: (207) 874-8703, Fax: (20	07) 874-8716	Permit No: 09-0727	Date Applied For: 07/14/2009	CBL: 084 N002001	
ocation of Construction: Owner Name: O			wner Address:	Phone:		
26 Whitehead St., Peaks Is	hitehead St., Peaks Island Kinney Carol A &		26 Whitehead St		207-766-5950	
siness Name: Contractor Name:		C	ontractor Address:	Phone		
	Michael Langella	Michael Langella		382 Pleasant Ave Peaks Island		
essee/Buyer's Name	Phone:	Phone: Pe				
			Alterations - Dwe	llings		
roposed Use:		Proposed	Project Description	<u> </u>		
•			placing existing staircase to kitchen.			
Dept: Zoning Note:	Status: Approved with Conditions	Reviewer:	Tom Markley	Approval D	ate: 07/14/2009 Ok to Issue: ✓	
	nain a single family dwelling. Any cha	ange of use shal	I require a separa	te permit application		
This permit is being ap work.	proved on the basis of plans submitte	d. Any deviati	ons shall require a	a separate approval b	efore starting that	
Dept: Building	Status: Approved with Conditions	Reviewer:	Tom Markley	Approval D	ate: 07/14/2009	
Note:					Ok to Issue:	
Permit approved based noted on plans.	on the plans submitted and reviewed	w/owner/contr	actor, with addition	onal information as a	greed on and as	

