

DISPLAY THIS CARD ON PRINCIPAL FRONT FACE PERMITTED  
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

JUN 8 2005  
Permit Number: 050717  
CITY OF PORTLAND

This is to certify that O'brien James C Kw Vet &/s

has permission to Install a 9' x 7' shed

AT 6 Maple St P. I.

085 F027001

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 altered or proposed-in-  
HOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

*Dennis Bank* 6/8/05  
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: 05-0717  
 JUN 8 2005  
 05 FO 7001

**PERMIT ISSUED**  
 JUN 8 2005  
**CITY OF PORTLAND**

Location of Construction: 6 Maple St P. 1.		Owner Name: O'Brien James C Kw Vet &	Owner Address: 6 Maple St	Phone: 764-2001
Business Name:		Contractor Name: self	Contractor Address: Portland	
Lessee/Buyer's Name:		Phone:	Permit Type: Sheds	Zone: IR-2
Past Use: Single Family	Proposed Use: Single Family w/9' x 7' shed	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 2
Proposed Project Description: Install a 9' x 7' shed		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: U Type: Shed	
		Signature:	Signature: JMB 6/8/05	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

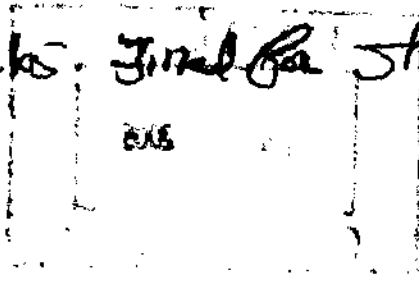
Permit Taken By: jmb	Date Applied For: 06/08/2005	<b>Zoning Approval</b>		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..		Special Zone or Reviews <input type="checkbox"/> Shoreland N/A <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan JK Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: JMB 6/8/05	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:	Historic Preservation <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 Date: JMB

**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

12265. Final Pa shed. Work complete. Close permit 92



# 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>6 MAPLE ST, PEAKS ISL, ME</u>		
Total Square Footage of Proposed Structure <u>63</u>	Square Footage of Lot <u>13000</u>	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>85 - F27 - 41</u>	Owner: <u>JAMES + KATHERINE O'BRIEN</u>	Telephone: <u>766-2001</u>
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: <u>JAME</u>	Cost Of Work: \$ <u>2835</u> Fee: \$ <u>46.00</u>
Current use: <u>SINGLE FAMILY</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>BUILD 9 X 7 SHED</u>		
Project description:		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>GEORGE BLOOD</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:		

**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>Katherine J. O'Brien</u>	Date: <u>6-8-05</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 4<sup>th</sup> floor of City Hall**

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 085 F027003  
 Location 6 MAPLE ST  
 Land Use SINGLE FAMILY  
 Owner Address O'BRIEN JAMES C EW VET & KATHERINE J JTS  
 6 MAPLE ST  
 PEAKS ISLAND ME 04208  
 Book/Page 11895/137  
 Legal 85-P-27-43  
 MAPLE ST  
 PEAKS ISLAND  
 13021 SF

*6/8*  
*100*  
*shed 9x7*  
*IR-2 Zone*  
*Rear 10'*  
*Side 25'*

**Current Valuation Information**

Land	Building	Total
\$63,130	\$64,360	\$127,890

**New Estimated Valuation Information**

Land	Building	Total	Phase-In Value
\$244,800	\$118,200	\$363,000	\$245,445

*# 717*

**Property Information**

<b>Year Built</b> 1880	<b>Style</b> Old Style	<b>Story Height</b> 2	<b>Sq. Ft.</b> 1408	<b>Total Acres</b> 0.279		
<b>Bedrooms</b> 4	<b>Full Baths</b> 1	<b>Half Baths</b>	<b>Total Rooms</b> 7	<b>Attic</b> None	<b>Basement</b> Full	

**Outbuildings**

<b>Type</b>	<b>Quantity</b>	<b>Year Built</b>	<b>Size</b>	<b>Grade</b>	<b>Condition</b>
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**Sales Information**

<b>Date</b>	<b>Type</b>	<b>Price</b>	<b>Book/Page</b>
04/01/1995	LAND + BLDING		11895-137
02/11/1974	LAND + BLDING		11290-176

**Picture and Sketch**

[Picture](#)      [Sketch](#)      [Tax Map](#)

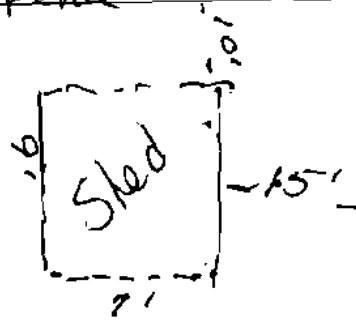
[Click here](#) to view Tax Roll Information.

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

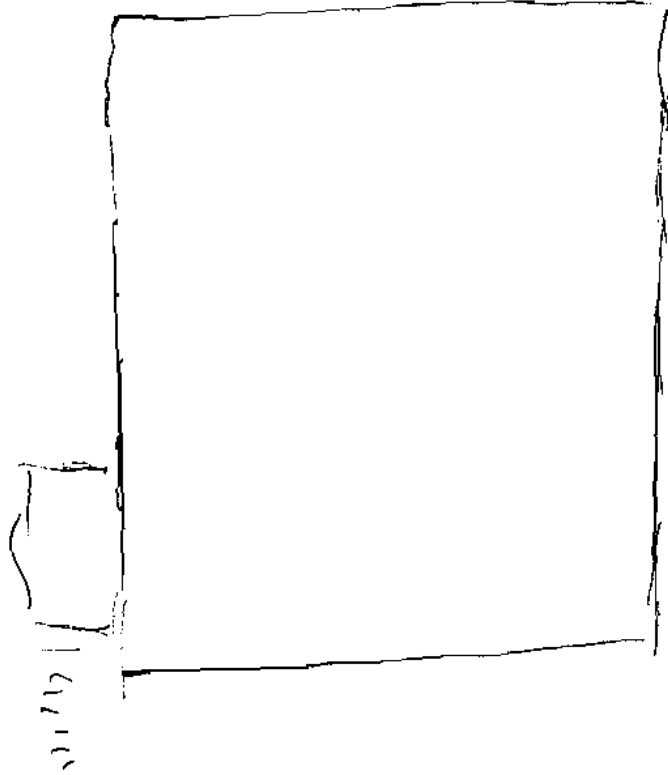
[Click here](#) to view comparable sales or below to view by:



100 FT BACK FENCE



125'



IR-2  
 < 100' Shed  
 Rear 10' Req  
 Side 15' Req

\*Marker

111

Maple St.

FRONT

# BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

- Footing/Building Location Inspection: Prior to pouring concrete
- Re-Bar Schedule Inspection: Prior to pouring concrete
- Foundation Inspection: Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: ~~There is a \$75.00 fee per~~ inspection at this point.

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.

NA CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED

Katherine J. Oberin  
Signature of Applicant/Designee

6-8-05  
Date

James Bourke  
Signature of Inspections Official

6/8/05  
Date

CBL: 85-F-27

Building Permit #: 05-0717