

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION PERMIT

Permit Number: 060401

Please Read
Application And
Notes, If Any,
Attached

This is to certify that ASHMORE RALPH W /Home owner
has permission to Interior renovations and addition
AT 8 WINDING WAY 085 J034001

provided that the person or persons in 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.

Verification of inspection must be given and when permission is procured before this building or part thereof is occupied or service closed-in. 4
OUR NOTICE 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

Expired

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: 06-0401	Issue Date:	CBL: 085 J034001
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Location of Construction: 8 WINDING WAY	Owner Name: ASHMORE RALPH W	Owner Address: 20 WELCH ST	Phone:
Business Name:	Contractor Name: Home owner	Contractor Address: Portland	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: IR2

Past Use: Single Family	Proposed Use: Single Family interior renovations and addition	Permit Fee: \$453.00	Cost of Work: \$48,000.00	CEO District: 2
Proposed Project Description: Interior renovations and addition		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB	
		Signature: _____		
		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: dmartin	Date Applied For: 03/29/2006	Zoning Approval		
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<ol style="list-style-type: none"> 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <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"/> Date: _____	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 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: _____
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EXPIRED

CERTIFICATION

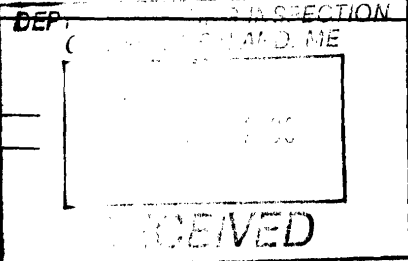
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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



General Building Permit Application

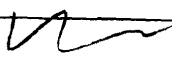
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>8 Winding Way Peaks Island</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot <u>2,394</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>85</u> Block# <u>J</u> Lot# <u>34</u>	Owner: <u>Ralph Ashmore</u>	Telephone: <u>766-2951</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Ralph Ashmore</u> <u>20 Welch St</u> <u>Peaks Island,</u> <u>ME 04108</u>	Cost Of Work: \$ <u>48,000.</u> Fee: \$ <u>453-</u> C of O Fee: \$ _____
Current Specific use: <u>Residential</u> If vacant, what was the previous user? _____ Proposed Specific use: <u>residential</u>		
Project description: <u>Renovation and addition to existing residence</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>Ralph Ashmore</u>		
Mailing address:	Phone: <u>766-2981</u>	

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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: 	Date: <u>3/23/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

No 85 PEAKS ISLAND

CITY
M-3
764.002

EE
1
887.484

SHEET 87-B

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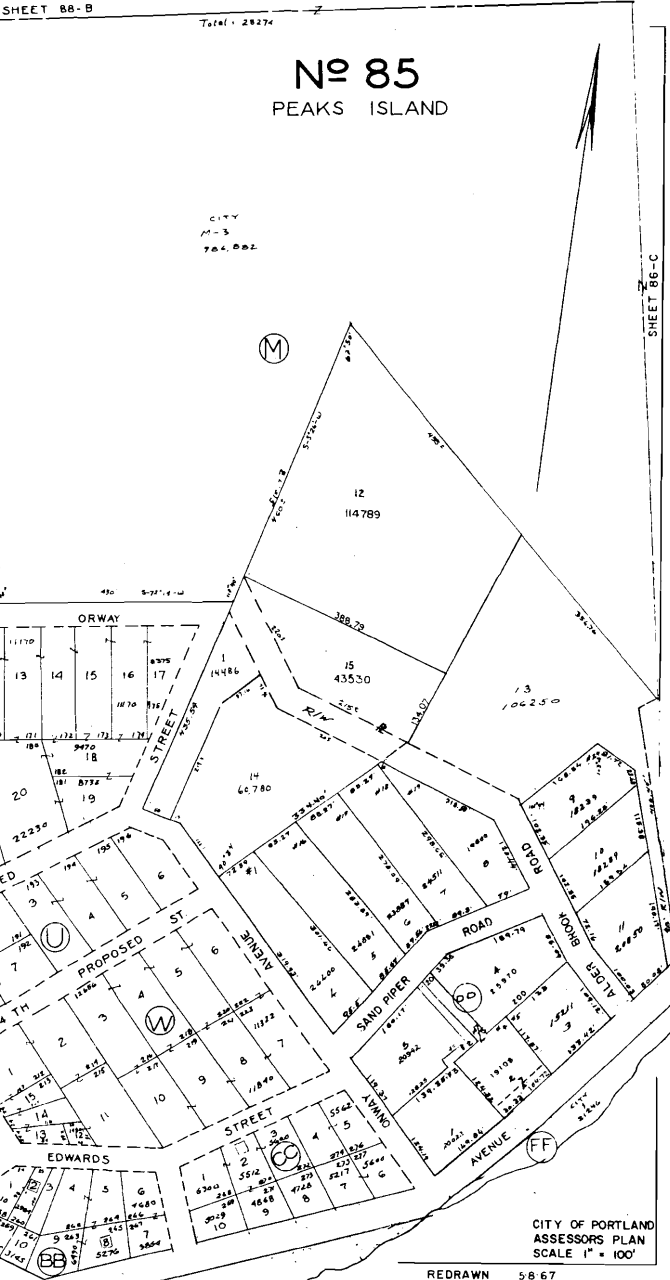
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CITY OF PORTLAND
ASSESSORS PLAN
SCALE 1" = 100'

REDRAWN 98 67

SHEET 86-C

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 J034001
Location	8 WINDING WAY
Land Use	SEASONAL
Owner Address	ASHMORE RALPH W 20 WELCH ST PEAKS ISLAND ME 04108
Book/Page	16626/172
Legal	85-J-34 WINDING WAY PEAKS ISLAND 2336 SF

Current Assessed Valuation For Fiscal Year 2006

Land	Building	Total
\$77,530	\$19,770	\$97,300

Estimated Assessed Valuation For Fiscal Year 2007*

Land	Building	Total
\$118,300	\$19,800	\$138,100

* Value subject to change based upon review of property status as of 4/1/06.
The tax rate will be determined by City Council in May 2006.

Property Information

Year Built 1940	Style Cottage	Story Height 1	Sq. Ft. 568	Total Acres 0.054		
Bedrooms 1	Full Baths 1	Half Baths	Total Rooms 2	Attic None	Basement Pier/slab	

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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Sales Information

Date 08/01/2001	Type LAND + BLDING	Price \$25,000	Book/Page 16625-172
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Picture and Sketch

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

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

