

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
 Application And
 Notes, If Any,
 Attached

BU **PERMIT** ICTION

Permit Number: 090204

This is to certify that O'BRIEN CHARLES BRENDA & REGINA O'BRIEN JTS

has permission to 14' x 6' Storage Replace existing structure same footprint

AT 20 WINDING WAY

CP 085 J037001

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 lathed or otherwise red-in. 24 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

Thomas Malley 3/17/08
 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

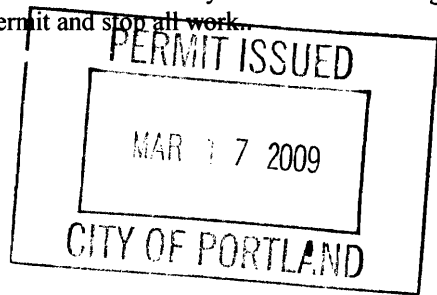
Permit No: 09-0204	Issue Date:	CBL: 085 J037001
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Location of Construction: 20 WINDING WAY	Owner Name: O'BRIEN CHARLES BRENDAN &	Owner Address: 91 BRADLEY ST	Phone:
Business Name:	Contractor Name: Letarte Bros	Contractor Address: 44 Hearn Rd Saco	Phone 2077717947
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: IR2

Past Use: Single Family (Cottage)	Proposed Use: Single Family (Cottage) - 14' x 6' Storage Replace existing structure w/ same footprint	Permit Fee: \$40.00	Cost of Work: \$1,500.00	CEO District: 1
Proposed Project Description: 14' x 6' Storage Replace existing structure w/ same footprint		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB IRC 2003	
		Signature: _____ Signature: <i>Jm 3/17/09</i>		
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: Ldobson	Date Applied For: 03/17/2009	Zoning Approval
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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 <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>OK</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	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	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input checked="" 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: <i>Jm 3/17/08</i>	Date: _____	Date: <i>Jm</i>



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

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.

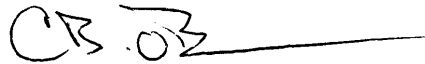
Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

Final inspection required at completion of work.

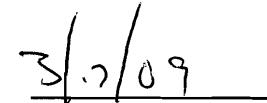
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

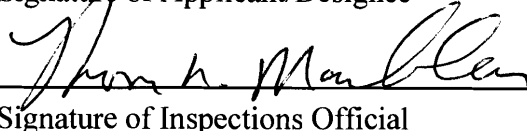
CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.



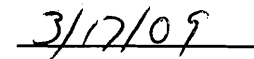
Signature of Applicant/Designee



Date



Signature of Inspections Official



Date

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0204	Date Applied For: 03/17/2009	CBL: 085 J037001
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Location of Construction: 20 WINDING WAY PEAKS ISLA	Owner Name: O'BRIEN CHARLES BRENDAN &	Owner Address: 91 BRADLEY ST	Phone:
Business Name:	Contractor Name: Letarte Bros	Contractor Address: 44 Hearn Rd Saco	Phone (207) 771-7947
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family (Cottage) - 14' x 6' Storage Replace existing structure w/ same footprint	Proposed Project Description: 14' x 6' Storage Replace existing structure w/ same footprint
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 03/17/2009
Note: **Ok to Issue:**

- 2) Your present structure is legally nonconforming as to setbacks. If you are to demolish this structure on your own volition, you will only have one (1) year to replace it in the same footprint (no expansions), with the same height, and same use. Any changes to any of the above shall require that this structure meet the current zoning standards. The one (1) year starts at the time of removal. It shall be the owner's responsibility to contact the Code Enforcement Officer and notify them of that specific date.
- 3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 03/17/2009
Note: **Ok to Issue:**

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.



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>20 Winding Way Peaks Island, Me</u>		
Total Square Footage of Proposed Structure <u>84 sqft</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>025 J 037 001</u>	Owner: <u>Charles B. O'Brien</u>	Telephone: <u>207-771-7947</u>
Lessee/Buyer's Name (If Applicable) <u>X</u>	Applicant name, address & telephone: <u>Charles B. O'Brien 91 Bradley St Portland Me 04102</u>	Cost Of Work: \$ <u>1500⁰⁰</u> Fee: \$ <u>40</u> C of O Fee: \$ _____
Current legal use (i.e. single family) <u>Single Family (College)</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>Storage</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>14x6 Storage. Replace existing structure w/ same Same footprint</u>		
Contractor's name, address & telephone: <u>Herb Bros, 44 Heern Rd, Saco Me 282-6505</u>		
Who should we contact when the permit is ready: <u>Owner</u> Mailing address: _____ Phone: <u>831-1516, 771-7947</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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division 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: <u>Charles B. O'Brien</u>	Date: <u>3/16/09</u>
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This is not a permit; you may not commence ANY work until the permit is issued.





9' 00 APPT.

This data is provided by the Assessor's Office and is current as of

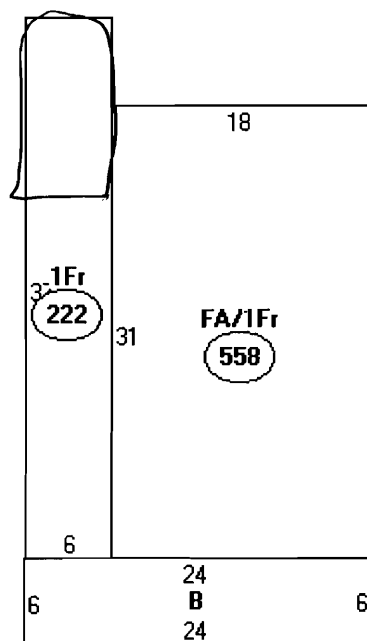
Mar. 6, 2009

Fees

CBL	085 J037001	Acct No	13090	Property Address	IR2 20 WINDING WAY	LCI:	R	
Owner Name 1	O'BRIEN CHARLES BRENDAN &			Property Type	RESIDENTIAL	Dist#:	1	Vie
Name 2	REGINA A O'BRIEN JTS			Description	85-J-37			Vie
Mailing Address	91 BRADLEY ST			Census Tract	WINDING WAY PEAKS ISLAND 6877 SF			Vie
City, State, Zip	PORTLAND	ME	04102					
Prop Info	Inspections	Site Plans	Permits	Complaints	Food/Water/Odor	Documents	Letters	Property Mgmt

Land Use	SEASONAL	Nbr of Units	1	Click Here to View: Picture Sketch
Zone	IR2	Neighborhood		
District	PEAKS ISLAND	Historic District	No	
Yr Built	1922	House Style	COTTAGE	NOTES
Total Rms	5	Baths	0	
		1/2 Baths	1	
		Bedrms	3	
Heat Type	NONE	Basement	NONE	
Fuel Type	NONE	Attic	FULL FIN.WH	
System Type	NONE			



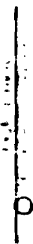
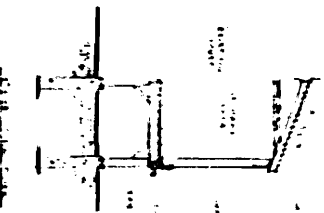
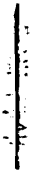
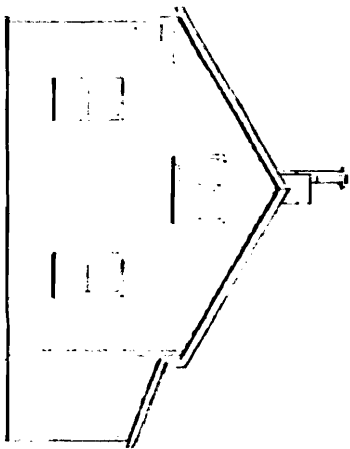
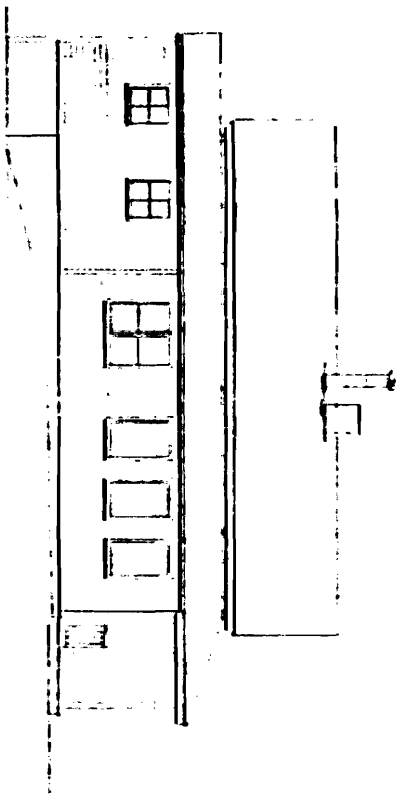


Descriptor/Area

A: FA/1Fr
558 sqft

B: EP
144 sqft

C: 1Fr
222 sqft



Part Appshel studs
 on 5/8 Shaker 2
 over 2 7/8 studs 16" oc
 2x6 16" oc
 over 1/2 plywood
 w/ 2-19 insulation
 2x6 3/4 5x6 plywood
 2x10 Plan Joists
 4x4 or 6x6 w/ 2x4 plywood studs