DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



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CITY OF PORTLAND BUILDING PERMI



This is to certify that

ASHMORE RALPH W /Owner

PERMIT ID: 2013-00507

Located at

68 WINDING WAY, Peaks Island

CBL: 085 T001001

has permission to Renovate existing storage/studio yurt - add a half bath & install woodstove to create guest space

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

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| Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise clsoed-in. 48 HOUR NOTICE IS REQUIRED. | A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be procured prior to occupancy. |
|---|---|
| | Code Enforcement Officer / Plan Reviewer THE STREET SIDE OF THE PROPERTY FOR REMOVING THIS CARD |

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 (ONLY) or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

REQUIRED INSPECTIONS:

Close-in Plumbing/Framing Electrical Close-in Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

| City of Portland, Maine - Bui | ilding or Use Permit | | Permit No: | Date Applied For: | CBL: | |
|--|---|----------------|------------------------|----------------------|--------------------|--|
| 389 Congress Street, 04101 Tel: | (207) 874-8703, Fax: (207) 87 | 74-8716 | 2013-00507 | 03/15/2013 | 085 T001001 | |
| Location of Construction: | Owner Name: | Owner Address: | Phone: | | | |
| 68 WINDING WAY, Peaks Island | ASHMORE RALPH W | | 20 WELCH ST | | (207) 766-2981 | |
| Business Name: | Contractor Name: Owner | | Contractor Address: | Phone | | |
| Lessee/Buyer's Name | Phone: | | Permit Type: | | | |
| | | | Alterations - Dwel | lings | | |
| Proposed Use: | | Propose | d Project Description: | | | |
| Single Family (adding guest area to a | Renovate existing storage/studio yurt - add a half bath & install woodstove to create guest space | | | | | |
| Dept: Zoning Status: A Note: 1) This is NOT an approval for an a | | | Ann Machado | Approval D | Ok to Issue: | |
| | is such as stoves, microwaves, ref | | | | | |
| This property shall remain a sing approval. | le family dwelling. Any change o | of use sha | all require a separat | e permit application | for review and | |
| Dept: Building Status: | Approved w/Conditions Re | eviewer: | Tammy Munson | Approval D | ate: 03/21/2013 | |
| Note: | | | | | Ok to Issue: 🗹 | |
| Separate permits are required f pellet/wood stoves, commercial l part of this process. | for any electrical, plumbing, sprin hood exhaust systems and fuel tan | | | | | |
| A copy of the enclosed chimne for the Certificate of Occupancy. | | submitte | ed to this office upo | n completion of the | permitted work or | |
| Permit approved based on the p noted on plans. | plans submitted and reviewed w/c | owner/ c | ontractor, with addi | tional information a | s agreed on and as | |

| City of Portland, Maine | - Building or Use] | Permit Applicat | ion | Pern | mit No: | Issue Date: | | CBL: | |
|--|---------------------|------------------------------------|---------------------------|----------------------------------|-----------------------|-----------------|-------------------------|-----------------------------|--|
| 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8 | | | | | 13-00507 | | | 085 T001001 | |
| ÷ · · · · | | | | | dress: | | | Phone: | |
| 68 WINDING WAY | ASHMORE R | ASHMORE RALPH W | | | CH ST PEA | | | | |
| Business Name: | Contractor Name | : | Contractor Address: | | | | | Phone | |
| | Owner | | ME | | | | | | |
| Lessee/Buyer's Name | Phone: | | Perm | Permit Type: | | | | Zone: | |
| | | Alterations - Dwellings | | | | IR-1 | | | |
| Past Use: | Proposed Use: | | Permit Fee: Cost of Work: | | | | CEO District: | | |
| Single Family | Single Family | | | | | \$50.00 \$3,000 | | | |
| | | | FIR | E DEF | PT: | Approved | INSPECTI Use Group | | |
| | | | | | | Denied | Ose Gloup | . Type. | |
| | | | | 🗌 N/A | | N/A | | | |
| Proposed Project Description: | | | 1 | | | | | | |
| Renovate existing storage/studio & add water closet & | | k install | nstall Signature: | | | Signature: | | | |
| woodstove. No structural change. | | | PED | PEDESTRIAN ACTIVITIES DISTRICT (| | CT (P.A.D.) | P.A.D.) | | |
| | | | | Action: Approved Approved w/Co | | roved w/Coi | nditions 📄 Denied | | |
| | Signature: | | Da | Date: | | | | | |
| Permit Taken By: | Date Applied For: | | | | Zoning | Approva | l | | |
| bjs | 03/15/2013 | | | | | | | | |
| 1. This permit application do | es not preclude the | Special Zone or Reviews | | s | Zoning Appeal | | | Historic Preservation | |
| Applicant(s) from meeting applicable State and Federal Rules. | | Shoretand | | | Variance | | | Not in District or Landmark | |
| 2. Building permits do not in septic or electrical work. | U Wetland | | | Miscellaneous | | | Does Not Require Review | | |
| Building permits are void within six (6) months of the | Flood Zone | | | Conditio | nal Use | | Requires Review | | |
| False information may invalidate a building permit and stop all work | | Subdivision Site Plan Maj Minor MM | | | Interpretation | | | Approved | |
| | Approved | | | | Approved w/Conditions | | | | |
| | | | | | Denied | | | | |
| | | Date: | | | Date: | | 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 |

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: | WINDING WAY | | | | | |
|---|---|--|--|--|--|--|
| Total Square Footage of Proposed Structure/A NO CHANGE | rea Square Footage of Lot 29,263 | Number of Stories | | | | |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# | Applicant: (must be owner, lessee or buy Name RALPH ASHWORF Address 68 WINDIM WAY | $\begin{array}{c} \text{er} \\ 207.706.298 \end{array}$ | | | | |
| 85. + 1-2-34 | Address 68 WINDIM WAY City, State & Zip PEAKS 18LAND, N | λ ε . | | | | |
| Lessee/DBA RECEIVED | Owner: (if different from applicant) Name | Cost of Work: \$ <u>3,000</u> C of O Fee: \$ Historic Review: \$ | | | | |
| MAR 1 5 2013 | Address | Planning Amin.: \$ | | | | |
| Dept. of Building Inspections City of Portland Maine | City, State & Zip | Total Fee: \$ <u>50</u> | | | | |
| Current legal use (i.e. single family) SF Number of Residential Units If vacant, what was the previous use? SF Number of Residential Units Proposed Specific use: SF SF | | | | | | |
| Is property part of a subdivision? | | | | | | |
| Project description: RENOVATE EXIST | INV STORAGE/STUDIO YURT | ADD WATER | | | | |
| CLOSET & INST | The WOOD STOVE. NO S | TEVETURA CHANGE. | | | | |
| Contractor's name: OWNER | E | mail: | | | | |
| Address: 68 WINDING | NM | RALPH @ ASHMORE REACT. COH | | | | |
| City, State & Zip PEAKS SLAT | יקט ד | elephone: 207.766.2981 | | | | |
| Who should we contact when the permit is read | | elephone: 217.766.5625 | | | | |
| Mailing address: 26 STERLINY | | | | | | |

Please submit all of the information outlined on the applicable 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 <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

and 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: | Y | w | \int | Į. | U | M | Λ | Date: 3.12.13 | |
|------------|-----------|--------|--------|-------|------|---|---|---|--|
| | <u>لہ</u> | hin in | | * ~ * | ~~~~ | | | have not commance ANV most until the normit is isourd | |

This is not a permit; you may not commence ANY work until the permit is issued