Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

CTION

Permit Number: 070817

ances of the City b DF or Dand

This is to certify that_	MEDLEN MAC L & M KAY	EDLEN	Or Or	me		_	PERMIT	ISSUED		
has permission to	Repair and replace front & rea	airs, ad	of ove	ont entry						-
AT 32 STERLING ST	Γ PEAKS ISLAND			Ç	087 E01	8001	JUL 3	0 2007		
provided that t	he person or persons,	m or		ion	epting th	s pe	rmit shal	Leemply	J with	l la

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provided that the person or persons, of the provisions of the Statutes of Nature the construction, maintenance and uthis department.

Apply to Public Works for street line and grade if nature of work requires such information.

ication insped n must g and w n permis n procu b e this ding or t thereo la d or d osed-in. R NOTICE IS REQUIRED. Н

of buildings and st

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

tures, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept	
Health Dept	
Appeal Board	
Other	
	Department Name

Director - Building & Inspection Servi

PENALTY FOR REMOVING THIS CARD

City of Portland, M	1aine - Bui l	lding or Use	Permi	t Application	ı Per	rmit No:	Issue Date:	ř	CRT:	
389 Congress Street,	04101 Tel: (207) 874-8703	B, Fax:	(207) 874-871	6	07-0817			087 E)18001
Location of Construction: Owner Name:			Owner Address:			Phone:				
32 STERLING ST PEA	AKS ISLAN	MEDLEN MAC L & M KAY MED			3712 ALBANS RD					
		Contractor Name			Contractor Address:				Phone	
		Marcey Orme				Box 143 Peal	ks Island		2074087	
Lessee/Buyer's Name Phon		Phone:				t Type:	111			Zone: TR-2
						rations - Dwe				1100
Past Use: Proposed Us					Permit Fee: Cost of Work:				EO District:	
Single Family Home		Single Family Home - Repair and replace front & rear stairs, add roof			\$50.00 \$3,000.00 FIRE DEPT: Approved INSI				2	
					FIRE	اد ا	Approved	INSPECT Use Group	\sim	Type: 5 B
		over front enti	stair	s			Denied	030 0104	» I(3	TypeSD
								1	RC 2	an) 3
Proposed Project Description	on:								RCZ	
Repair and replace from	it & rear stairs	, add roof over t	front ent	try replace	Signature: Sign PEDESTRIAN ACTIVITIES DISTRICT			Signature:	2	7/26/0
rearstain will land	line and sto	n. 13		7 1						
)				Action: [7] Approved [7] Approved w				v/Conditions	
						1.5	. , ••			
			1		Signa	ture:		D	ate:	
Permit Taken By:		pplied For:		Zoning Approval						
ldobson		5/2007	Sne	cial Zone or Revie	W.C	Zonine	g Appeal		Historic Pre	servation
1. This permit application does not preclude			1				1.0			
Applicant(s) from meeting applic Federal Rules.		able State and Shoreland 1/A			Variance			Not in Distr	ict or Landma	
			Wetland		Miscellaneous			Does Not Require Review		
2. Building permits do not include plumbing, septic or electrical work.			Wetland (we city)		cha	tha			The second secon	
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			FI	Flood Zone		Condition	nal Use	4-	Requires Re	eview
			Subdivision							
					Interpretation		e :	Approved		
permit and stop all	work									
			Si	te Plan		Approved	i		Approved w	/Conditions
DEDM	IT ISSUED									
I LIVING	11 1000120	7		Minor MM			-	Denied		
			OK	alcoditions 7/13/07 ARA	/ 1					
JUL 3 0 2007			Date:	7/13/07 AM	Date:		Date	Date:		
	and the second of the second of the second of									
CLEACE										
	· · · · · · · · · · · ·	, sales								
			C	CERTIFICATION	ON					
I hereby certify that I an										
I have been authorized b										
jurisdiction. In addition shall have the authority										
such permit.	cinci un uic	00 , 01 0 u 0 y 31	pen	at any 1043011		10 01110100	and provi	2.011 01 01	- 2000(b) up	
SIGNATURE OF APPLICA	JT.	_		ADDRESS	<u> </u>		DATE		PU	ONE
SIGNATURE OF APPLICAL	1 1			ADDRESS	•		DATE		1 110	J1 ₹L
						_				
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		PHO	ONE

City of Portland, Maine - Buil	ding or Use Permit	t		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 07-0817 07/06/2007							3001	
ocation of Construction: Owner Name: O			wner Address:		Phone:			
32 STERLING ST PEAKS ISLAND MEDLEN MAC L & M KAY MED 3			3712 ALBANS RD					
Business Name:	Contractor Name: Co			ontractor Address:	Phone			
	Marcey Orme P.		O. Box 143 Peaks	(207) 408-7100				
Lessee/Buyer's Name	Phone:		Pe	Permit Type:				
				Alterations - Dwell	lings			
Proposed Use:			Proposed	Project Description:	<u> </u>			
Single Family Home - Replace front stairs, replace rear stairs with landing & stairs, add small roof over front entry Replace front stairs, replace rear stairs with landing & stairs, add small roof over front entry								
Note: new rear entry OK per section				Ann Machado		Ok to Issue:		
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.								
2) The front stairs must be replaced within the existing footprint.								
3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.								
Dept: Building Status: A	pproved with Condition	s Rev	iewer:	Tom Markley	Approval Da	te: 07/26	5/2007	
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.								

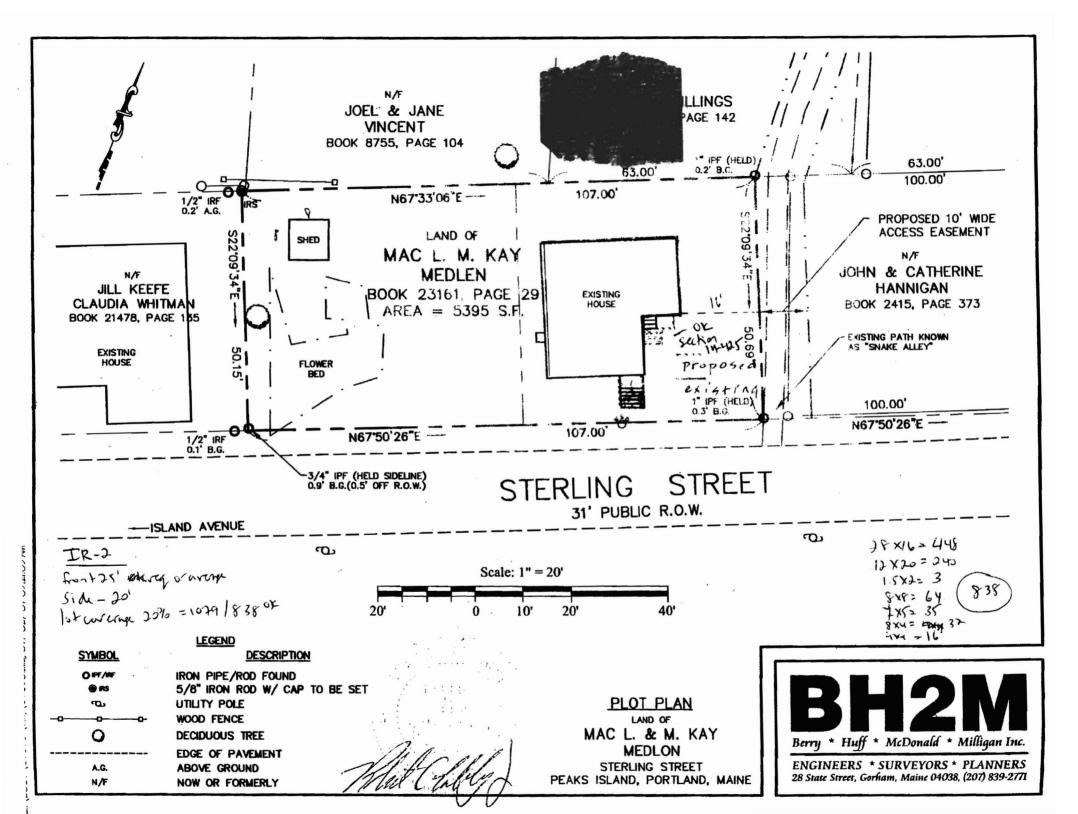
Comments:

7/26/2007-tm: Called and left message for Macey Orme requesting more info.

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:	Sterlin -							
Total Square Footage of Proposed Structure	Square Footage	of Lot						
30	539	50						
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 87 87 87	Owner: Mac Me 3712 Alban Houston TX	s Ra.	Telephone: 74 3.					
Lessee/Buyer's Name (If Applicable)	Applicant name address &		Lost Of					
Desset, Buyer's Ivalite (II Applicable)	Mac Meden 34 sterhng s	Work: \$ 3000						
·	Peaks Island of		C of O Fee: \$					
Current legal use (i.e. single family)	ale family							
If vacant, what was the previous use?								
Proposed Specific use: 56 m Is property part of a subdivision? no								
Project description:	II yes, please name	a franc	+ c+a 10c					
Project description: Add small a	irs. Add landi	na and	ceplace					
back stairs,		. 9	. 67.006					
Dack States,								
Contractor's name, address & telephone: Macey Orme 766-5909 (P-408-7100) PO Box 143, PI ME 041'08								
Who should we contact when the permit is ready: Wacey Orne								
Mailing address: Phone: 766-5909, 408-7189								
Po Box 143								
Peaks Island ME 04108								
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: 07/	06/07					



4 x 4 7057 2 x 4 72 411 2 x 2 8410 57 840E 5 4 x 6 DECKINA 1 x 8 5 K (R T T F I M

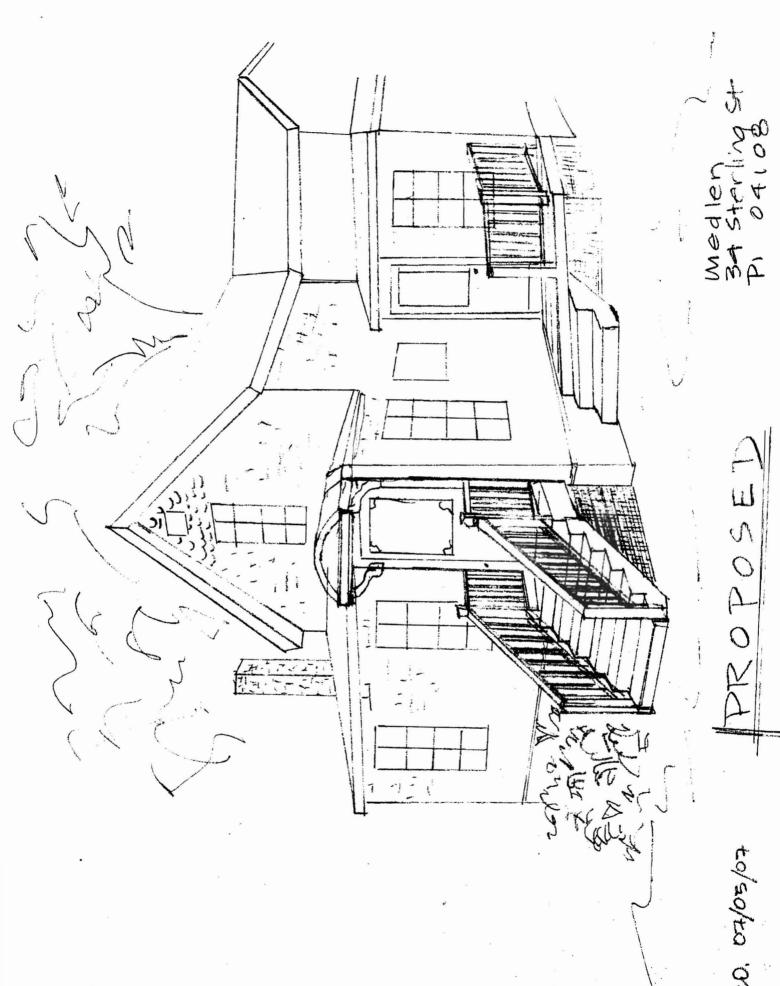
MEDLEN BACK PORCH, STAIR

ELEVATION 07/05/07 WC0/

4-0-4

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ウァーハ・アル



40/20/to 102m



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 Location 119 C001001 182 LONGFELLOW ST

Land Use

SINGLE FAMILY

Owner Address

HARRIS MICHAEL A & EILEEN R JTS

184 LONGFELLOW ST PORTLAND ME 04103

Book/Page

Legal

119-C-1 LONGFELLOW ST

WEST 182-186 DEBLOIS ST 29-33

8339 SF

Current Assessed Valuation

Land \$135,800 **Building** \$129,200

Total \$265,000

Property Information

Year Built 1926 Style Cape

Story Height

Sq. Ft. 1400 Total Acres

0.191

Bedrooms

Full Baths

Half Baths

Total Rooms

Attic Unfin Basement Full

Outbuildings

Туре

Quantity

Year Built

Size

Grade

Condition

Sales Information

Date

Type

Price

Book/Page

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 emailed.

New Search!