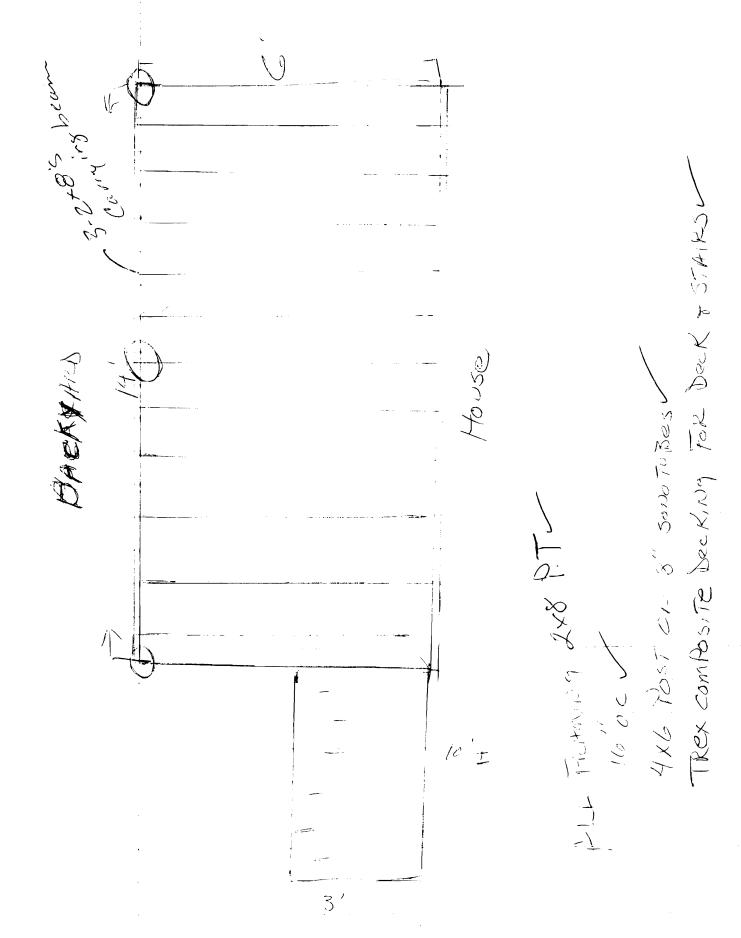
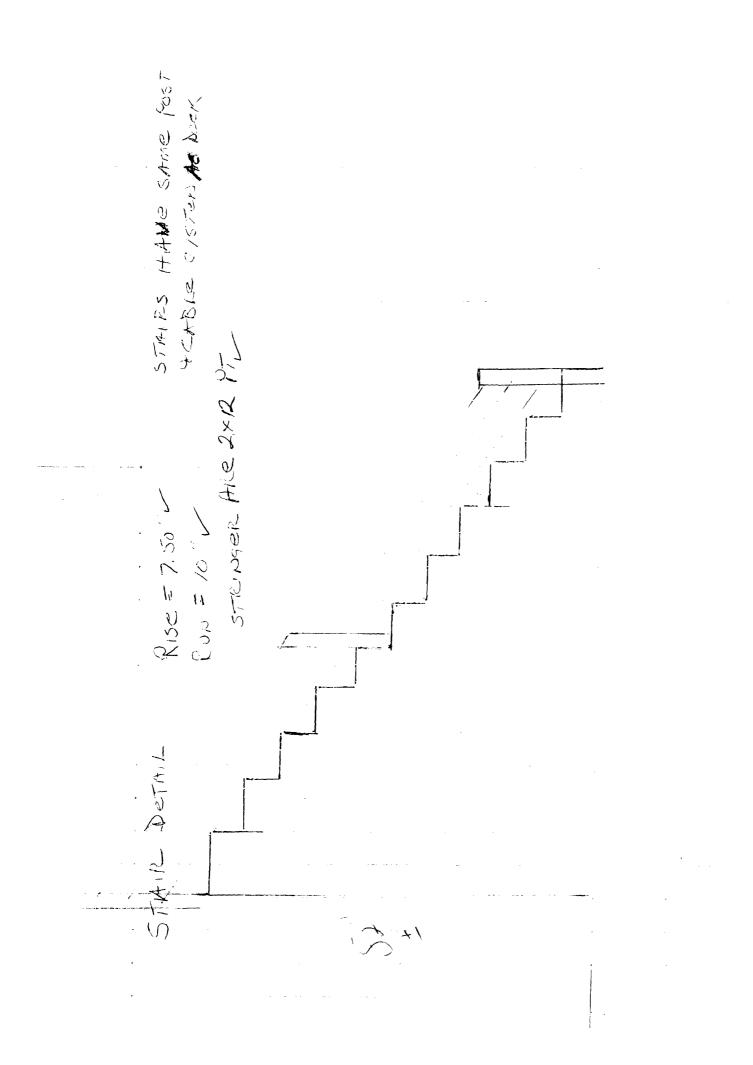
					PERMIT	ISSUED				
	y of Portland, Maine Congress Street, 04101	Tel: (207) 874-8703				CBL: 2 2008 087 LL006001				
Loca	tion of Construction:	Cowner Name:		Owner Addre	ss:	Phone:				
105	BRACKETT AVE 161	and BRAGDON J	ENNIFER S & JENN	II 14 ROCKV	VELL STITY OF P					
Busi	iess Name:	Contractor Name	:	Contractor Address: UILY UI TUNIL Phone						
		John Kiely		591 Island	Ave Peaks Island	2077662026				
Less	ee/Buyer's Name	Phone:		Permit Type:		Zone:				
					- Dwellings					
Past	Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:				
Sin	gle Family Home		Home - Attach 6'x14	me - Attach 6'x14' \$50.00 \$2,300.00						
deck				FIRE DEPT: Approved Use Group: // Denied Tr						
Prop	osed Project Description:				' /	- Al				
Atta	ach 6'x14 deck on rear of b	ouilding.		Signature:	Si	gnature:				
				PEDESTRIAN	N ACTIVITIES DISTRI	CT (P.A.D.)				
				Action:	Approved Approv	ed w/Conditions Denied				
				Signature:		Date:				
Pern	it Taken By:	Date Applied For:			oning Approval					
lm	d	04/11/2008			8 F F					
1.	This permit application d	oes not preclude the	Special Zone or Re	views	Zoning Appeal	Historic Preservation				
1.	Applicant(s) from meetin Federal Rules.		Shoreland N/A		Variance	Vot in District or Landmark				
2.	Building permits do not in septic or electrical work.	nclude plumbing,	Wetland	<u> </u>	Miscellaneous	Does Not Require Review				
3.	Building permits are void within six (6) months of t		Flood Zone		Conditional Use	Requires Review				
	False information may inv permit and stop all work	validate a building	Subdivision	[]]	Interpretation	Approved				
			Site Plan		Approved	Approved w/Conditions				
					Denied	Denied Aren				
			DE wi Condition Date: 4/17/07 AB			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 roperty within the City, payment arrangements must be made before permits of any kind are accepted.

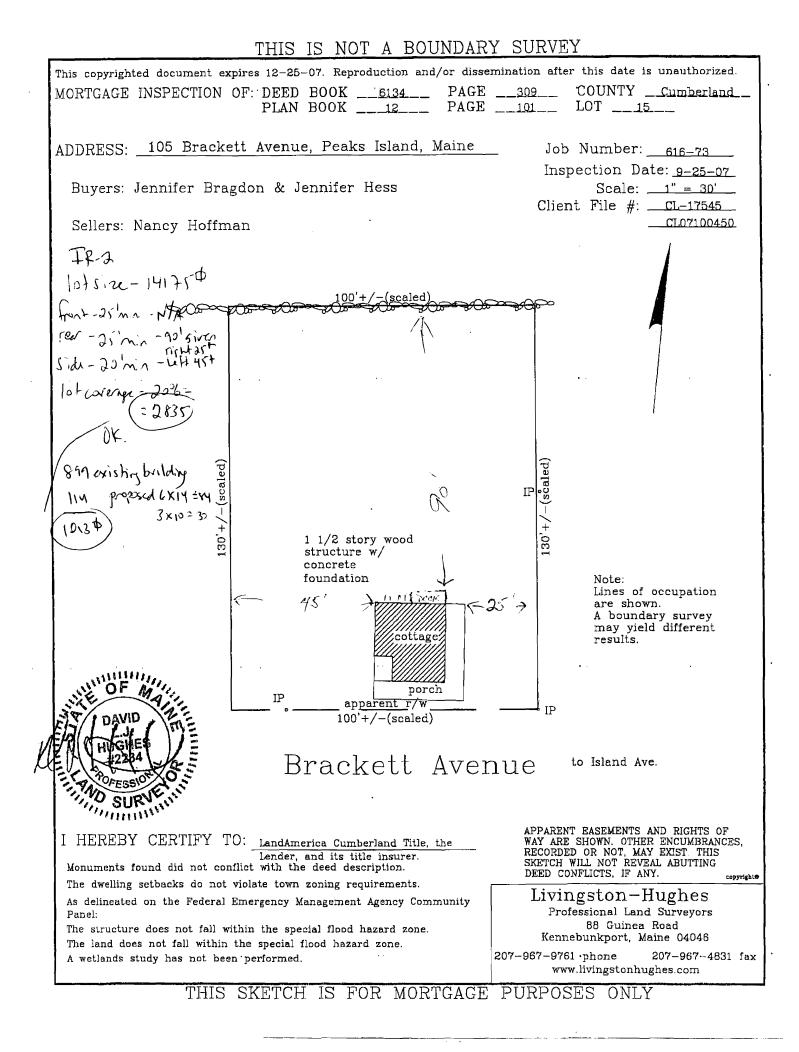
Location/Address of Construction: 105	BRACKETT AVE. PEAKS	ISLAND Meditor
Total Square Footage of Proposed Structure/A	Area Square Footage of Lot	
	f 59 f T 13,000 50 Applicant *must be owner, Lessee or Buyer	FT
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	* Telephone:
Chart# 12 Block# 101 Lot# 15	Name JENN FER BRAGDON SIENN FER HESS	
\hat{s} 11 ∞	Address	
01 == 0= 0	Address	
	City, State & Zip	
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
	Name	Work: \$
	Address	C of O Fee: \$
11 2008	City, State & Zip	Total Fee: \$
Current legal use (i.e. single family)	SINGLE FAMILY SCASONAL	<u> </u>
If vacant, what was the previous use?		
Proposed Specific use: $5 + m \in 1$ Is property part of a subdivision? 120	AROVE	
Is property part of a subdivision? $\underline{100}$	If yes, please name	
Project description: BUILD GX14'	Deck ON MEAL OF isu	(LDING WITH
ALCOSS ETAIRS	TO BACKYARN	
Contractor's name: JUNN K	1017	
Address: <u>591 ESLIAND</u>	tre	
City, State & Zip <u>Periks Islan</u>	DINC OHLOR 1	elephone: 766 2026
Who should we contact when the permit is rea	dy: JONN KICH T	elephone:
Mailing address: Siting Asi	H301C	

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.

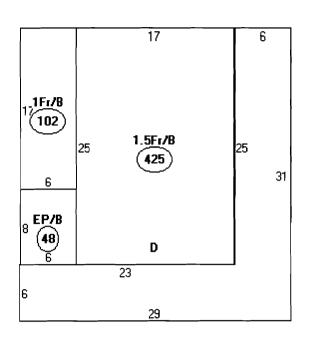
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: Date: L This is not a permit; you may not commence ANY work until the permit is issue



RECORD OF BUILDINGS GRADE DENOTES QUALITY OF CONSTRUCTION: A-EXCELLENT: B-GOOD: C-AVERAGE: D-CHEAP: E-VERY CHEAP

	GRADE DENOTES QUALITY	OF CONSTRUCTION	: A	-EXCELLENT	Г; В-	-GOC	DD; C-AVI	ERAGE; D	C	HEAP; E-V	ERY CHEA	P		
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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.

- X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers
- X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling X 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 <u>DO</u> 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

Signature of Inspections Official

Date

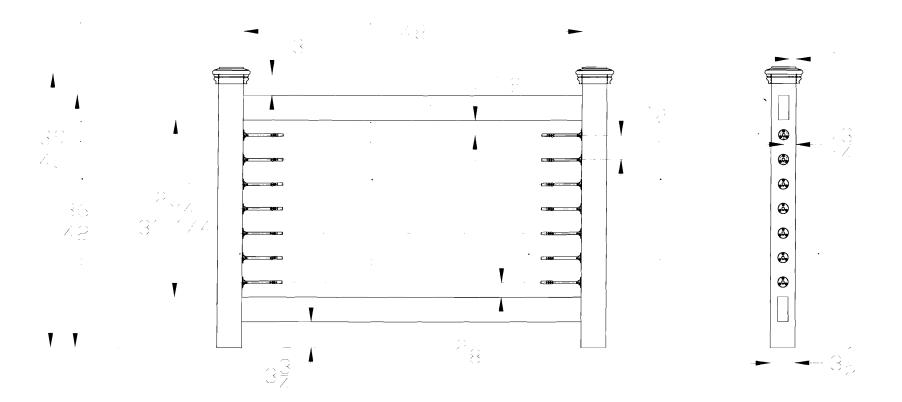
Date



CBL: 087 LL006001

Building Permit #: 08-0360

VANGUARD RAIL SYSTEM DESIGN PARAMETERS



SPECIFICATIONS:

1 2 20

RECOMMENDED SPAN: 48" BETWEEN POSTS WIRES MAY PASS THRU POSTS ON LONGER SPANS.

HANDRAIL: 2 X 4 TOP AND BOTTOM

INFILL: RAIL EASY TURNBUCKLES WITH 7 X 7 316 S/S WIRE ROPE

POSTS: 4X4 POSTS WITH ORNAMENTAL WOODEN CAP

SECURED TO POSTS WITH MOUNTING BASES AND #10 S/S SCREWS



Home

Railing Systems >>
Nautilus
Mariner
Vanguard
Explorer
Triton
SunRail Nautilus
SunRail Triton
SunRail Mariner
SunRail Glass
ADA Handicap

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Video

Rail Builder

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5

2

WAY

"We are particularly pleased with the way the railing came out. We enjoy the wooded view from our deck and the Atlantis Rail system provides security without interfering with our scenery." Gary Hallen, Homeowner

Rail Systems - Vanguard By Atlantis Rail



Height of rail: Customer choice.

Post spacing: Atlantis Rail recommends a maximum post spacing of 6 feet and cable may be run through mid post at a total length of up to 50 feet. Materials: Infill consist of 5/32" diameter 1x19 Cable, 316 grade stainless steel. RailEasy Turnbuckles (one pair per cable run)

Mounting hardware are all 316 Stainless Steel Screws

Click for Architectural 3 part specification

Click for Installations Instructions

Parts required: Only 2 parts required for full assembly

Part # Polished	Part # Brushed
S0978-4100	Not Available
S0981-0004	Not Available
	S0978-4100

The Vanguard is our Cable Railing system which uses our patented RailEasy turnbuckles for easy installation and adjustment. Enjoy the low maintenance quality of Stainless Steel Cable Railings with no special assembly skills or tools. Vanguard is ideal for an infill option on interior or exterior applications where you have existing or new wood post. You will enjoy years of unobstructed views with this low maintenance system.

Complete specifications, design guidelines and sample drawings are available on this page..

Add Microstar lights for a unique accent. Complete specifications, design guidelines and sample drawings are available on this page.



Form # P 04	DISPLAY	THIS	CARD	ON	PRINCIPAL	FRONT	AGE	OF	WORK
Please Read Application And Notes, If Any, Attached			CITY					Numbe	er: 080360
This is to certify f	that <u>BRAG</u>	DON JENN	VIFER S &	NNIFE	JTS/John	y			
has permission to	7100011			lding.		-			
AT -105 BRACH	KETT AVE 1	Calis Isl	and			L 087 L	L00600 1		
provided th	•	•	-	m or			•		hall comply with all
of the provi					-			-	Portland regulating pplication on file in
the constru this depart		nenanc	e and u			clures,		the a	pprication on me m
	r		b la	fication h and w re this ed or JR NO ⁻	n permition pro ding or the	rec	procur	ed by	of occupancy must be owner before this build- ereof is occupied.
OTHER	REQUIRED APP							A	
Fire Dept		2 2 200						/	5/22/08
Health Dept Appeal Board		2 2 201		_				X	5/00/
Other	0.771.0					\leq	7∇	Δ	
	Department Nane	F_PORTL	AND					- Building 8	Thepection Services
			FCINALI						

City of Portland, Maine - Bull	ding or Use Permit		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (2	207) 874-8716	6 08-0360	04/11/2008	087 LL006001		
Location of Construction:	Owner Name:		Owner Address:		Phone:		
105 BRACKETT AVE, Peaks Islan	BRAGDON JENNIFE	R S & JENNI	14 ROCKWELL S	ST			
Business Name:	Contractor Name:		Contractor Address: Phone				
	John Kiely		591 Island Ave Pe	aks Island	(207) 766-2026		
Lessee/Buyer's Name	Phone:		Permit Type:				
			Additions - Dwel	lings			
Proposed Use:	<u></u>	Propose	ed Project Description:				
Single Family Home - Attach 6'x14' of	leck	Attac	h 6'x14 deck on rea	r of building.			
Dept: Zoning Status: A	approved with Condition	s Reviewer	: Ann Machado	Approval I	Date: 04/17/2008		
Note: Existing footprint on plot pla	n is the same as the foot	print on the pre	-1957 assessr's card	l.	Ok to Issue: 🖌		
	a family dwalling Any	change of use s	hall require a separ	ate permit applicatio	. C		
 This property shall remain a sing approval. 	le family dwelling. Any o	change of use s	nun require a separe	are permit approach	on for review and		
		-					
approval.2) This permit is being approved on work.		tted. Any devia		a separate approval	before starting that		
approval.2) This permit is being approved on work.	the basis of plans submi	tted. Any devia	ations shall require	a separate approval	before starting that		
 approval. 2) This permit is being approved on work. Dept: Building Status: A 	the basis of plans submi	tted. Any devia	ations shall require : Tammy Munson	a separate approval Approval I	before starting that Date: 05/22/2008		
approval. 2) This permit is being approved on work. Dept: Building Status: A Note:	the basis of plans submi approved with Condition rocess, ballusters must be	tted. Any devis s Reviewer e spaced with le	ations shall require : Tammy Munson ess than a 4" openin	a separate approval Approval I g between each.	before starting that Date: 05/22/2008 Ok to Issue: V		

