

**DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK****CITY OF PORTLAND****BUILDING INSPECTION**

Permit Number: 070227

Please Read  
Application And  
Notes, If Any,  
AttachedThis is to certify that EISENBERG AVNER /proprietor/ownerhas permission to Repair existing Rip Rap according to DEAT 29 CITY POINT RD

087 T004001

PERMIT ISSUED

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or service is resumed in it. 4 HOUR 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

*James R. Winkler* 3/12/07  
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

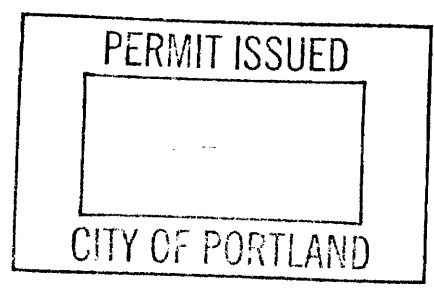
Permit No: 07-0227	Issue Date:	CBL: 087 T004001
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Location of Construction: 29 CITY POINT RD, Peats Island	Owner Name: EISENBERG AVNER	Owner Address: 29 CITY POINT RD	Phone:
Business Name:	Contractor Name: property owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: IR2

Past Use: Single Family	Proposed Use: Single Family Repair existing Rip Rap according to DEP guidelines	Permit Fee: \$120.00	Cost of Work: \$10,000.00	CEO District: 2
Proposed Project Description: Repair existing Rip Rap according to DEP guidelines		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: 23 Type: SB  IR2 2003	
		Signature: <i>Jm 3/12/07</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: dmartin	Date Applied For: 03/05/2007	<b>Zoning Approval</b>		
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input checked="" type="checkbox"/> Shoreland <i>replacing existing riprap DEP permit by note</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i>exemption 2007-0045</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/ conditions</i> Date: <i>3/19/07 ABM</i>	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <input checked="" 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 <i>ABM</i> Date: _____
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**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

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 07-0227	<b>Date Applied For:</b> 03/05/2007	<b>CBL:</b> 087 T004001
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<b>Location of Construction:</b> 29 CITY POINT RD, Peaks Island	<b>Owner Name:</b> EISENBERG AVNER	<b>Owner Address:</b> 29 CITY POINT RD	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> property owner	<b>Contractor Address:</b> Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> Single Family Repair existing Rip Rap according to DEP guidelines	<b>Proposed Project Description:</b> Repair existing Rip Rap according to DEP guidelines
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**Dept:** Zoning      **Status:**      **Reviewer:** Ann Machado      **Approval Date:** 03/09/2007

**Note:** Rip rap repair is across City Point Road from the property where the house is located. The address is 30 City Point Road, CBL 087 S006. **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.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tom Markley      **Approval Date:** 03/12/2007

**Note:** **Ok to Issue:**

- 1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 2) This permit DOES NOT certify the use of the property or building. It only authorizes the construction activities.

**Comments:**

3/6/2007-amachado: Waiting for site plan exemption.

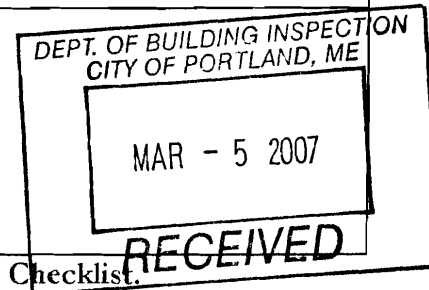
3/9/2007-gg: received site exemption as of 3/09/07, put with permit on Ann's desk. /gg



# 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>29 City Point Rd. P.T</u>		
Total Square Footage of Proposed Structure /		Square Footage of Lot /
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# / 87      T      4	Owner: <u>Auner Eisenberg</u> <u>29 City Point Rd.</u> <u>PEAKS Island, ME 04108</u>	Telephone: <u>207-766-2945</u>
Lessee/Buyer's Name (If Applicable)  <u>N/A</u>	Applicant name, address & telephone:	Cost Of Work: \$ <u>10,000</u> Fee: \$ <u>120</u> C of O Fee: \$ <u>N/A</u>
Current legal use (i.e. single family) <u>SF</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Repair existing riprap according to DEP guidelines.</u>		
Contractor's name, address & telephone:  Who should we contact when the permit is ready: <u>Auner Eisenberg</u> Mailing address: _____ Phone: <u>207-766-2945</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](http://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: [Signature] Date: 3/5/07

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

**Avner the Eccentric**

Avner Eisenberg  
29 City Point Road  
Peaks Island, Maine 04108 USA  
(207) 766-2945 tel.  
(207) 766-2946 fax  
avnere@~~avner.com~~ *avnertheeccentric.com*

31 January 2007

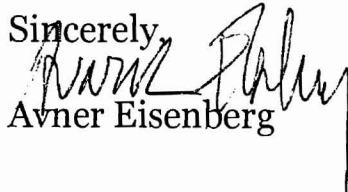
To whom it may concern:

I reside at 29 City Point Road, Peaks Island, Maine, 04108. The relevant tax maps are 87 T 4-5-6 and 87 S 6-7. My property abuts property owned by Central Mine Power. In 2000 CMP undertook remedial activities to remove toxic sediment from the beach in front of their property. According to CMP's interim report for VRAP approximately 39,000 tons of beach sediments were removed from the beach area, and 2700 cubic yards of clean sand was replaced on the beach.

Ever since CMP's clean-up operation we have experienced markedly increased beach erosion. The past two winters have produced big storms that have destroyed existing riprap, caved in parts of the beach, and severely undercut the bank directly in front of our small out building. At present the building is in imminent danger of collapsing into the sea.

What I propose to do is restore the existing riprap in a way that will halt the continuing erosion, saving my building, an old tree that is in danger, and preserving my property.

Please refer to the accompanying photos and survey for placement of the building and condition of the riprap.

Sincerely,  
  
Avner Eisenberg



**PERMIT BY RULE NOTIFICATION FORM**

(For use with DEP Regulation, Chapter 305)

11/3/06  
2006 SEP 21 AM 10:53

PLEASE TYPE OR PRINT IN BLACK INK ONLY

Name of Applicant: (owner)		AVNER EISENBERG		Applicant Mailing Address:		29 CITY POINT ROAD	
Town/City:		PEAKS ISLAND		State:		MAINE	
Zip Code:	04108	Daytime Telephone No: (include area code)	207-766-2945		Project Location: (town)	PEAKS ISLAND	
County:	CUMBERLAND	Map #:		Lot #:		Name of Wetland or Waterbody:	ATLANTIC OCEAN
Name of Agent:				Agents Telephone No: (include area code)			
Detailed Directions to Site:							
OCEAN FRONT AT ADDRESS ABOVE. SEE MAP ENCLOSED. FROM FERRY TO TOP OF HILL. TURN LEFT, CONTINUE TO END. TURN RIGHT AND IMMEDIATELY LEFT. CONTINUE TO BOAT RAMP. RIGHT ON CITY PT.							
Description of Project:				UTM Northing: (if known)		UTM Easting: (if known)	
RD. 4th house on Right.							
- see attached -							
Part of a larger project?						Yes	No <input checked="" type="checkbox"/>

(CHECK ONE) This project: does  does not  involve work below mean low water.

I am filing notice of my intent to carry out work which meets the requirements for Permit By Rule (PBR) under DEP Rules, Chapter 305. I and my agents, if any, have read and will comply with all of the standards in the Sections checked below.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sec. (2) Act. Adjacent to Protected Natural Res. | <input checked="" type="checkbox"/> Sec. (8) Shoreline stabilization              | <input type="checkbox"/> Sec. (14) REPEALED                   |
| <input type="checkbox"/> Sec. (3) Intake Pipes                            | <input type="checkbox"/> Sec. (9) Utility Crossing                                | <input type="checkbox"/> Sec. (15) Public Boat Ramps          |
| <input type="checkbox"/> Sec. (4) Replacement of Structures               | <input type="checkbox"/> Sec. (10) Stream Crossing                                | <input type="checkbox"/> Sec. (16) Coastal Sand Dune Projects |
| <input type="checkbox"/> Sec. (5) REPEALED                                | <input type="checkbox"/> Sec. (11) State Transportation Facilities                | <input type="checkbox"/> Sec. (17) Transfers/Permit Extension |
| <input type="checkbox"/> Sec. (6) Movement of Rocks or Vegetation         | <input type="checkbox"/> Sec. (12) Restoration of Natural Areas                   | <input type="checkbox"/> Sec. (18) Maintenance Dredging       |
| <input type="checkbox"/> Sec. (7) Outfall Pipes                           | <input type="checkbox"/> Sec. (13) F&W Creation/Enhance/Water Quality Improvement |   |

I authorize staff of the Departments of Environmental Protection, Inland Fisheries & Wildlife, and Marine Resources to access the project site for the purpose of determining compliance with the rules. I also understand that *this permit is not valid until approved by the Department or 14 days after receipt by the Department, whichever is less.*

I have attached the following required submittals. NOTIFICATION FORMS CANNOT BE ACCEPTED WITHOUT THE NECESSARY ATTACHMENTS:

- Attach a check for \$55 (non-refundable) made payable to: "Treasurer, State of Maine".
- Attach a U.S.G.S. topo map or Maine Atlas & Gazetteer map with the project site clearly marked.
- Attach all other required submissions as outlined in the PBR Sections checked above.

By signing this Notification Form, I represent that the project meets all applicability requirements and standards in the rule and that the applicant has sufficient title, right, or interest in the property where the activity takes place.

Signature of Agent or Applicant:	Avner Eisenberg	Date:	SEPTEMBER 18, 2006
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*Keep a copy as a record of permit.* Send the form with attachments via certified mail to the Maine Dept. of Environmental Protection at the appropriate regional office listed below. The DEP will send a copy to the Town Office as evidence of the DEP's receipt of notification. No further authorization by DEP will be issued after receipt of notice. Permits are valid for two years. Work carried out in violation of any standard is subject to enforcement action.

AUGUSTA DEP  
STATE HOUSE STATION 17  
AUGUSTA, ME 04333-0017  
(207)287-2111

PORTLAND DEP  
312 CANCO ROAD  
PORTLAND, ME 04103  
(207)822-6300

BANGOR DEP  
106 HOGAN ROAD  
BANGOR, ME 04401  
(207)941-4570

PRESQUE ISLE DEP  
1235 CENTRAL DRIVE  
PRESQUE ISLE, ME 04769  
(207)764-0477

OFFICE USE ONLY	Ck.# 558	Date 10/23/06	Staff KDM	Staff	
PBR # 41994	FP 55.00		Acc. Date 10/30/06	Def. Date	After Photos

DEPLW0309-12005



# APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

#2007-025

AVATE ENGINEERING  
Applicant

11/15/07  
Application Date

29 1/2 W. 10th St. Portland, OR 97209  
Applicant's Mailing Address

REPAIR OF EXISTING SIDEWALKS  
Project Name/Description

\_\_\_\_\_  
Consultant/Agent/Phone Number

29 1/2 W. 10th St. Portland, OR 97209  
Address of Proposed Site

CBL: 11/15/07

Description of Proposed Development:

REPAIR OF EXISTING SIDEWALKS APPROX 100 SQ FT. PART OF PROJECT THAT  
WAS APPROVED UNDER PERMITS AND OTHER PERMITS

Please Attach Sketch/Plan of Proposal/Development

Criteria for Exemptions:

See Section 14-523 (4) on back side of form

- a) Within Existing Structures; No New Buildings, Demolitions or Additions
- b) Footprint Increase Less Than 500 Sq. Ft.
- c) No New Curb Cuts, Driveways, Parking Areas
- d) Curbs and Sidewalks in Sound Condition/Comply with ADA
- e) No Additional Parking/ No Traffic Increase
- f) No Stormwater Problems
- g) Sufficient Property Screening
- h) Adequate Utilities

Applicant's Assessment  
(Yes, No, N/A)

Planning Office  
Use Only

Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓
Yes	✓

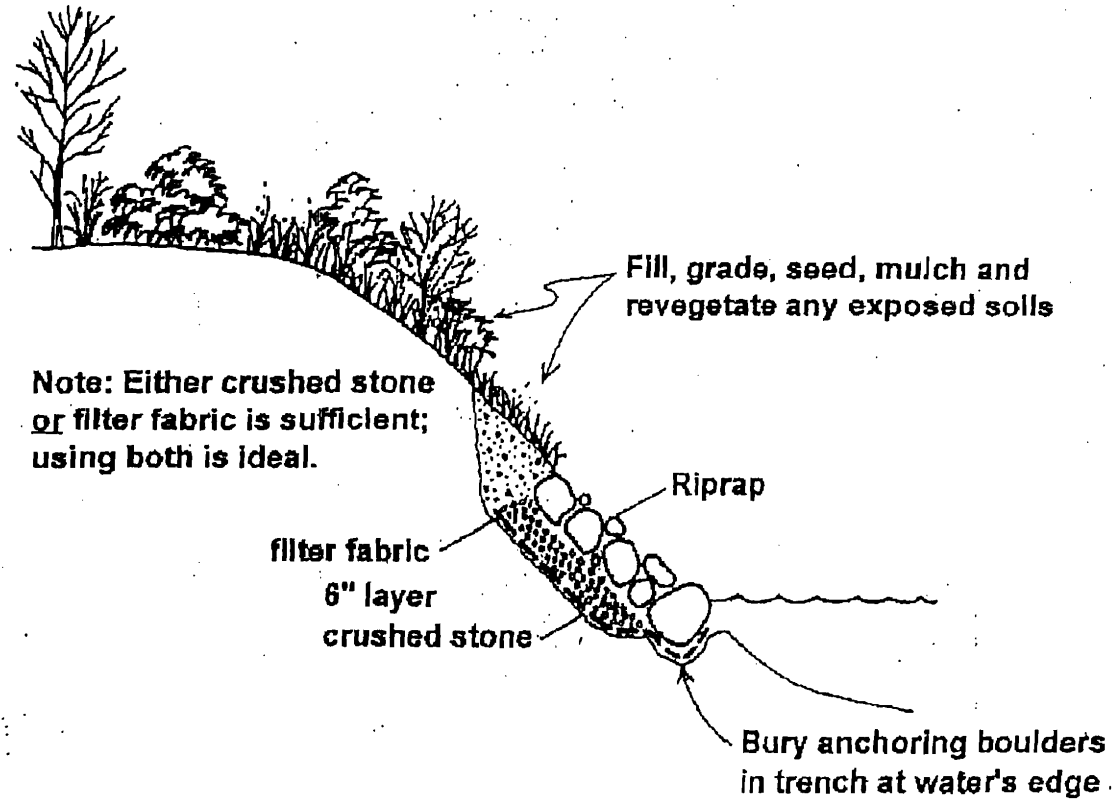




LIONEL PLANTE ASSOCIATES  
98 ISLAND AVENUE  
PEAKS ISLAND, ME 04108

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SLOPING BANK RIPRAP



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MAINE DEP PUBLICATION # DEPLW96-24

# *Lionel Plante Associates*

98 ISLAND AVENUE  
PEAKS ISLAND, MAINE 04108  
(207) 766-2508  
FAX (207) 766-2507  
e-mail: lplante@maine.rr.com

## ESTIMATE

**Lionel Plante Associates hereby submits an estimate for labor and material to repair the existing seawall as discussed. Fabric and riprap shall be added to help prevent future erosion.**

**Estimate of 75' @ \$143.00 per L.F. for an estimated cost of: \$10,725.00  
This price is based on a wall approximately three feet high, including what is below the surface.**

**Submitted by: Lionel Plante Associates**

  
**Terrence J. Mulkern**

**Date: March 2, 2007**

**Accepted by: \_\_\_\_\_  
Avner Eisenberg**

**Date Accepted: \_\_\_\_\_**

**This proposal is valid for 90 days.**

