Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU

		PERMIT ISSNED
This is to certify thatSTANKOWICZ ALEXANDE	& DEI ORDAN. /T	1 100020
has permission toDormer install a 13' x 16' for s	y use	MAR 3 0 2009
AT 33 LYNDON AVE Peaks Island	C 088	B014001
provided that the person or persons, fi	or common acting	this permit shall comp y with a

of the provisions of the Statutes of Mane and of 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.

Not ation o ispectio must b give nd writt bermissi brocure befo this bui hereof i or oth sed-in. 2 lath NOTICE IS REQUIRED. HO

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

Permit Number: 090251

OTHER REQUIRED APPROVALS

Department Name

Fire Dept.
Health Dept.
Appeal Board
Other

PENALTY FOR REMOVING THIS CARD

City of Portland, M	Iaine - Buil	ding or Use	Permi	t Application	Per	mit No:	Issue Date	:	CBL:		
389 Congress Street,		~			1	09-0251			088 B0	14001	
Location of Construction: Owner Name:				Owner Address:				Phone:			
33 LYNDON AVE Peaks Island STANKOWIG				XANDER D	33 L	YNDON AV	/E				
Business Name:	Contractor Name	Contractor Name:			actor Address:		Phone				
Travis		Travis Berube	:		67 Bootby Ave So Portland				20793965	2079396572	
Lessee/Buyer's Name Phone:					Permit Type:					Zone:	
				Additions - Dwellings					IR (
Past Use: Proposed Use:				<u></u>	Permi	t Fee:	Cost of Wor	<u></u>	CEO District:	1	
Single Family Home Single I			ingle Family Home - Dormer			\$100.00 \$8,000			1		
									TION:		
			·		Арріочец			oup: 173	Type:		
						L	Denied			. 2	
									JEC V	W 3	
Proposed Project Description	on:							-			
Dormer install a 13' x 1		se			Signature: Signatu				JEC 2003 ture: Im 3/30/89		
	,				+	STRIAN ACT	IVITIES DIST		ICT (P.A.D.)		
					Action	i: Appro	vea App	orovea w/C	Conditions	Denied	
					Signat	ture:			Date:		
Permit Taken By:	Date A	pplied For:				Zoning	Approva				
Ldobson	03/30	0/2009					9 PP				
This permit application	ation does not	preclude the	Spe	cial Zone or Revie	ws	zs Zoning Appeal			Historic Preservation		
Applicant(s) from			Shoreland			Variance		-	Not in District or Landma		
Federal Rules.	•				7						
2. Building permits d		plumbing,	□ w	etland	☐ Miscellaneous				Does Not Require Review		
septic or electrical work.											
3. Building permits a			Flood Zone		Conditional Use] '	Requires Review			
within six (6) mont False information r											
permit and stop all	•	a building	Si	ıbdivision	Interpretation			☐ Approved ☐ Approved w/Conditions ☐ Denied			
				. 101	l						
	NIT ISSUE	l a		te Plan	Approved						
PERM	111000	7) A		Denied						
i	. ~ 00	. 1 1	Maj [Minor MM							
AM / MA	B 30 2006	·		2 2/- 1-	c						
1 1 """			Date:	m 7340	7_1	Date:		Da	nte:		
	TE FINOTI	CINA									
CITY	(It Promis										
- Land and the same of the sam											
			(CERTIFICATION)N						
I hereby certify that I am	the oumer of	record of the no				sacad wark i	a authorizad	bu tha	numar of rocas	ed and that	
I have been authorized b											
jurisdiction. In addition											
shall have the authority											
such permit.											
SIGNATURE OF APPLICAN				ADDRESS			DATE			NF	
SIGNATURE OF AFFEICAL	**			ADDRESS	•		DATE		1110	1417	
					_						
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		РНО	NE	

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.

Older Release will be medited it the procedure is it	or followed as stated below.
A Pre-construction Meeting will take place upon rece	eipt of your building permit.
X Framing/Rough Plumbing/Electrical: Prior	r to Any Insulating or drywalling
X Final inspection required at completion of	work.
Certificate of Occupancy is not required for certain project your project requires a Certificate of Occupancy. All pro	•
If any of the inspections do not occur, the project can REGARDLESS OF THE NOTICE OR CIRCUMST.	•
CERIFICATE OF OCCUPANICES MUST BE ISSU THE SPACE MAY BE OCCUPIED.	JED AND PAID FOR, BEFORE
	3/30/09
Signature of Applicant/Designer	Date /
Thomph Malely	3/38/89
Signature of Inspections Official	Date

if

CBL: 088 B014001 **Building Permit #:** 09-0251

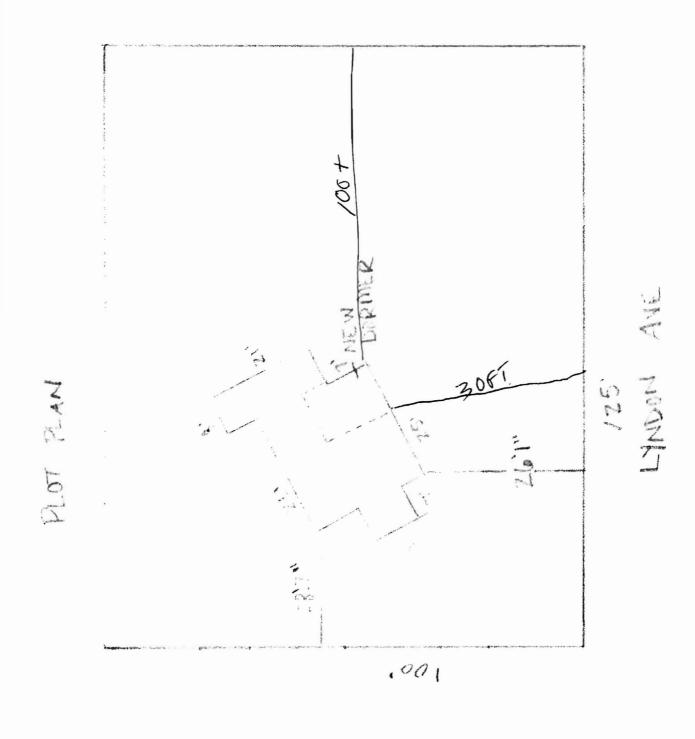
General Building Permit Application

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.

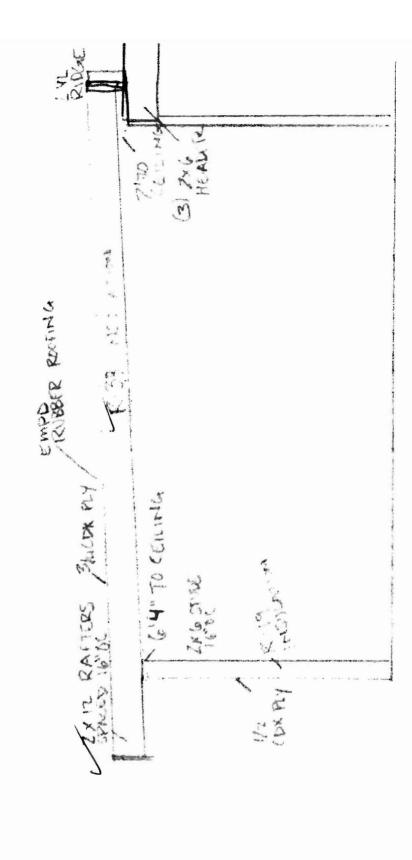
	Lyndon Ave Peaks Isia	nd		
Total Square Footage of Proposed Structure/	12500			
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buye	r* Telephone:		
Chart# Block# Lot#	Name Travis Berube	207.939.6572		
	Address 67 Boothby Ave			
	City, State & ZipSouth Portland, mE 04	tio		
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$ 8,000		
	Name Debbie Jordan	Work: \$ 0/000		
	Address 33 Lyndon Ave	C of O Fee: \$		
	City, State & Zip			
	Peaks Island, ME 04108	Total Fee: \$		
Current legal use (i.e. single family)	ingle family	# 803		
If vacant, what was the previous use?	· /			
Proposed Specific use:	If yes, please name			
Project description:	II yes, picase name	•		
Project description: Dormer 13' x 16' Hullway fi	or study use			
,	-1			
C. LOUIS BOX				
Contractor's name: TYANS BEY Address: 67 BOOTHOY AVE	,			
City, State & Zip South Portland,	ME 04106 1	Telephone: 207-939-6572		
	<i></i>			
Who should we contact when the permit is re	eady: Travis Bembe T	elephone:		
who should we contact when the permit is re	the South Portland, ME OH	elephone:		
Mailing address: 67 BOOMY	eady: 110013 101000 1	elephone:		
Mailing address: 67 Boolby A Please submit all of the informatio	the South Portland, me of	elephone:		
Mailing address: 67 Boolby A Please submit all of the informatio	The South Portland, ME OH on outlined on the applicable Checkle	elephone:		
Mailing address: 67 BOOLDY A Please submit all of the informatio do so will result in the permit is reconstruct when the permit is reconstructed when the permit is reconstru	n outlined on the applicable Checkle automatic denial of your permit.	ist. Failure to Development Department		
Mailing address: 67 BOOMY Please submit all of the informatio do so will result in the permit is reconstructed and the information and the information order to be sure the City fully understands the property additional information prior to the	n outlined on the applicable Checkle he automatic denial of your permit. The full scope of the project, the Planning and I issuance of a permit. For further information	ist. Failure to Development Department or to download copies of		
Mailing address: Mailing address:	n outlined on the applicable Checkle automatic denial of your permit. The full scope of the project, the Planning and Dissuance of a permit. For further information ections Division on-line at www.portlandmaine.gov	ist. Failure to Development Department or to download copies of		
Mailing address: Please submit all of the informatio do so will result in the norder to be sure the City fully understands the nay request additional information prior to the his form and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703.	on outlined on the applicable Checkle he automatic denial of your permit. The full scope of the project, the Planning and I issuance of a permit. For further information citions Division on-line at www.portlandmaine.gov .	ist. Failure to Development Department or to download copies of , or stop by the Inspections		
Mailing address: Please submit all of the informatio do so will result in the nay request additional information prior to the his form and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703. hereby certify that I am the Owner of record of the nat I have been authorized by the owner to make the	on outlined on the applicable Checkle the automatic denial of your permit. The full scope of the project, the Planning and It issuance of a permit. For further information citions Division on-line at www.portlandmaine.gov . The named property, or that the owner of record authorise application as his/her authorized agent. I agree	ist. Failure to Development Department or to download copies of , or stop by the Inspections norizes the proposed work and to conform to all applicable		
Mailing address: BOOMY Please submit all of the informatio do so will result in the nay request additional information prior to the his form and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703. hereby certify that I am the Owner of record of the hat I have been authorized by the owner to make the this of this jurisdiction. In addition, if a permit for well as the content of the prior of the service of this jurisdiction. In addition, if a permit for well as the content of the prior of the service of this jurisdiction. In addition, if a permit for well as the content of the c	en outlined on the applicable Checkle the automatic denial of your permit. The full scope of the project, the Planning and It issuance of a permit. For further information citions Division on-line at www.portlandmaine.gov . The named property, or that the owner of record authorises application as his/her authorized agent. I agree work described in this application is issued, I certify	ist. Failure to Development Department or to download copies of or stop by the Inspections norizes the proposed work and to conform to all applicable of that the Code Official's		
Mailing address: Please submit all of the informatio do so will result in the nay request additional information prior to the his form and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703. hereby certify that I am the Owner of record of the nat I have been authorized by the owner to make the	en outlined on the applicable Checkle the automatic denial of your permit. The full scope of the project, the Planning and It issuance of a permit. For further information citions Division on-line at www.portlandmaine.gov . The named property, or that the owner of record authorises application as his/her authorized agent. I agree work described in this application is issued, I certify	ist. Failure to Development Department or to download copies of or stop by the Inspections norizes the proposed work and to conform to all applicable of that the Code Official's		
Mailing address: Mailing address: Please submit all of the informatio do so will result in the norder to be sure the City fully understands the nay request additional information prior to the his form and other applications visit the Inspectivision office, room 315 City Hall or call 874-8703. Thereby certify that I am the Owner of record of the last I have been authorized by the owner to make the way of this jurisdiction. In addition, if a permit for wathorized representative shall have the authority to	en outlined on the applicable Checkle the automatic denial of your permit. The full scope of the project, the Planning and It issuance of a permit. For further information citions Division on-line at www.portlandmaine.gov . The named property, or that the owner of record authorises application as his/her authorized agent. I agree work described in this application is issued, I certify	ist. Failure to Development Department or to download copies of corstop by the Inspections acrizes the proposed work and to conform to all applicable that the Code Official's		

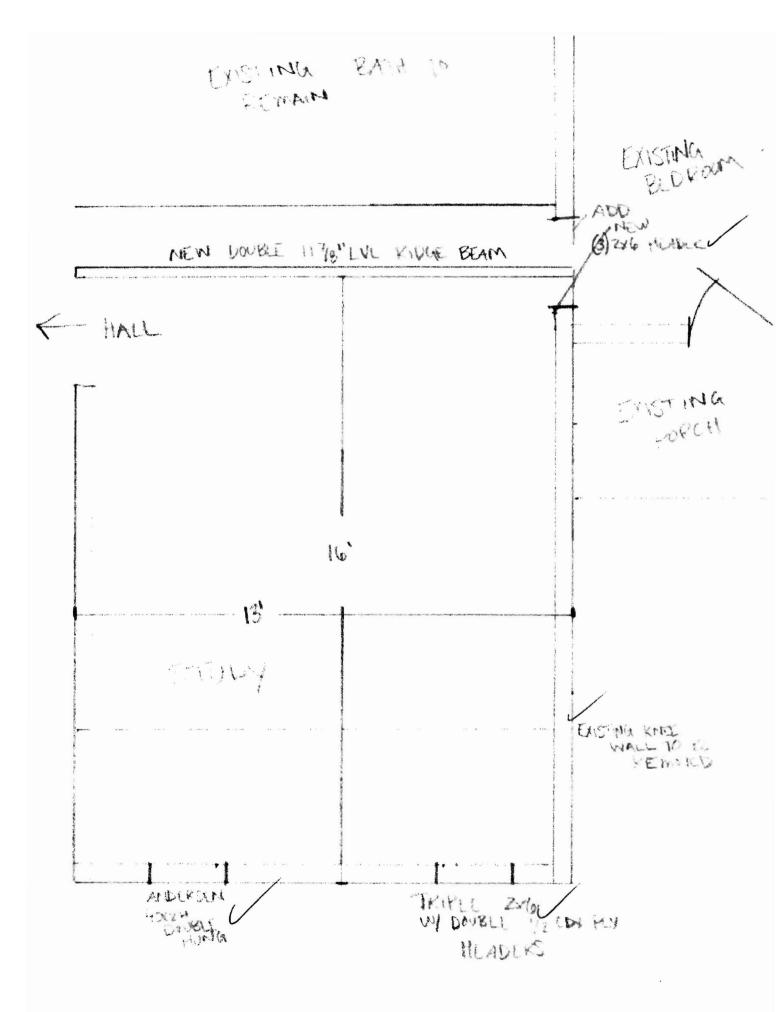
This is not a permit; you may not commence ANY work until the permit is issue

City of Portland, Maine - Bu	uilding or Use Permi	Permit No:	Date Applied For:	CBL:				
389 Congress Street, 04101 Tel	O	1609-0251	03/30/2009	088 B014001				
Location of Construction:	Owner Address:	Owner Address:						
33 LYNDON AVE Peaks Island	STANKOWICZ ALE	XANDER D	33 LYNDON AV	33 LYNDON AVE				
Business Name:	Contractor Name:			Contractor Address:				
	Travis Berube		67 Bootby Ave So Portland (207) 939-657					
Lessee/Buyer's Name	Phone:		Permit Type:					
			llings					
Proposed Use:		Prop	osed Project Description	1:				
Single Family Home - Dormer inst	all a 13' x 16' for study us	e Dor	mer install a 13' x 16	6' for study use				
Dept: Zoning Status:	Approved with Condition	ns Review e	er: Tom Markley	Approval I	Date: 03/30/2009			
Note:			-		Ok to Issue:			
1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.								
2) 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:	Approved with Condition	ns Reviewe	er: Tom Markley	Approval I	Date: 03/30/2009			
Note:					Ok to Issue:			
Separate permits are required for need to be submitted for approve			e alarm or HVAC or	exhaust systems. Se	parate plans may			
2) Permit approved based on the proted on plans.	plans submitted and review	ed w/owner/co	ontractor, with addit	ional information as	agreed on and as			



STATE IN 35





This data is provided by the Assessor's Office and is curr					ent as of	Mar. 6,	2009					
							IR1	LCI:		R		
	СВ	L 088	B014001	Acct No	14146	Property	Address	33 LYNDON A	VE	<u>'</u>	- Vi€	
Owner N	Owner Name 1 STANKOW		NKOWICZ AL	ALEXANDER D &		Property Type		RESIDENTIAL	L Dist	-		
Name 2 DEBORAH P JOR Mailing Address 33 LYNDON AVE		RDAN JTS		Description		88-B-14-22			Vie			
		YNDON AVE	E .		Census		LYNDON AVE PEAKS ISLAND		\			
City, Sta	te, Zip	PEA	KS ISLAND	ME 04108		Tract		12500 SF		Vi		
Prop Info	Inspec	tions	Site Plans	Permits	Complaints	Food/M	/ater/Odor	Documents	Letters	Propert	ty Mgmt	
	Zone	IR1	SLE FAMILY		_	of Units orhood District	1 No	CII	ck Here to <u>Picture</u>		ketch	
Yr E Total F Heat Ty Fuel T System T	tms No	5 BOOKE	aths 1	House Style 1/2 Baths Basemei Att	1 E	Bedrms	1	NOTES				

