Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

# BERMIT

Permit Number: 081273

This is to certify thatPEDDLE ANITA M	& JAME: JTS/Ha	
has permission toRepair and Replace 2	0 Feet of Indation der the	rch Sect of the House
AT 8 OCEAN ST, PEAKS ISLAND		C) 090 C001001
of the provisions of the Statutes	s of Mage and of the	n age, pting this permit shall comply with all spaces of the City of Portland regulating a structures, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Not ation of ispection give and written permission before this building or policy lather or oth the NOTICE IS REQUIRED.	hereof i: A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept		
Health Dept		$\mathcal{O}$ .
Appeal Board		M h M /// 11/2-1-
Other Department Name	-	Mrs h. Malley 10/23/08 Director · Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Ma	ine - Buil	ding or Use	Permi	t Application	n Per	rmit No:	Issue Date	;	CBL:	
389 Congress Street, 04		_				08-1273			090 C0	01001
Location of Construction:		Owner Name:		· · ·	Owner	r Address:	•		Phone:	
8 OCEAN ST, PEAKS IS	SLAND	PEDDLE AN	ITA M	& JAMES A J	168	LOCKSLEY	RD		781-334-	5362
Business Name:		Contractor Name	:		Contractor Address:				Phone	
		Hand Digs			PO Box 22 Peaks Island				2077665795	
Lessee/Buyer's Name		Phone:			Permit Type:					Zone:
					Alte	erations - Dw	ellings			JR-2
Past Use:		Proposed Use:			Permi	it Fee:	Cost of Wor	·k:	CEO District:	<del>'</del>
Single Family Home		Single Family	Home -	Repair and		\$40.00		00.00	1	
Single Laminy France		Replace 20 Fe			FIRE	DEPT:			CTION:	
		Under the Por	ch Secti	on of the		L_	Approved	Use Gr	oup: R3	Type: 57
		House				L	Denied	_		-6.3
									RC 20	DS
Proposed Project Description:					1				RC 20	
Repair and Replace 20 Fe		ation Under the	Porch S	Section of the	Signat	hire.		Signatu	re: 2m 1	0/23/2
House	or I cana		. 0.0			STRIAN ACT	IVITIES DIS		<u> </u>	C/DS/CC
								· ·	ŕ	
					Action	n: Appro	ved Ap	proved w/	/Conditions	Denied
					Signat	ture:			Date:	
Permit Taken By:	Date Aı	pplied For:					Annway	.1		
lmd		3/2008				Zomng	Approva	11		
	l l		Special Zone or Reviews		ws	S Zoning Appeal			Historic Pres	ervation
1. This permit application Applicant(s) from me									Not in District or Landma	
Federal Rules.	eting applic	Lable State and	Shoreland just repairing part of existing		15. 1 (			Not in District or Landma		
					snip	") I <u> </u>			Dona Not Beauing Baying	
2. Building permits do r		plumbing,	Wetland foundation Win		- مداليد	Miscellaneous			Does Not Require Review	
septic or electrical we			Flood Zone Last print			Confidential Confidence				
3. Building permits are					Conditional Use			Requires Review		
within six (6) months False information ma					Interpretation			Annroyed		
permit and stop all w		a building	🗀 Su	bdivision		interpre	tation		Approved	
permit and stop an w	0111.1			. N		l				a v
			□ Sı	te Plan			ed		Approved w/	Conditions
					_					
DEDMIT	ICCUED		Maj	Minor MM		Denied			☐ Denied	
PERMIT	1990FD	_		K	_				J/60/	
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CITY OF PO	DRTI ANI	)								
				ERTIFICATI						
I hereby certify that I am the										
I have been authorized by										
jurisdiction. In addition, it shall have the authority to										
such permit.	cinci an arc	as covered by se	ion pen	init at any reason	idole ii	iour to cirror	oc the provi		tile code(s) up	pilouoio to
1										
								-		
SIGNATURE OF APPLICANT				ADDRES:	S		DATE		РНО	NE
RESPONSIBLE PERSON IN C	HARGE OF W	ORK TITLE					DATE	-	סעמ	NE
RESPONSIBLE PERSON IN C	THE THE OF OL M	om, iiil					DAIE		PHO	ITL

#### City of Portland, Maine - Building or Use Permit 08-1273 10/08/2008 090 C001001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Phone: Owner Address: 8 OCEAN ST, PEAKS ISLAND 168 LOCKSLEY RD 781-334-5362 PEDDLE ANITA M & JAMES A J Contractor Name: Contractor Address: Phone **Business Name:** Hand Digs PO Box 22 Peaks Island (207) 766-5795 Permit Type: Lessee/Buyer's Name Phone: Alterations - Dwellings Proposed Project Description: Proposed Use: Single Family Home - Repair and Replace 20 Feet of Foundation Repair and Replace 20 Feet of Foundation Under the Porch Section Under the Porch Section of the House of the House Dept: Zoning Status: Approved Reviewer: Ann Machado **Approval Date:** 10/21/2008

Dept: Building Note:

Note:

Status: Approved with Conditions

Reviewer: Tom Markley

Permit No:

**Approval Date:** 

Date Applied For:

CBL:

10/23/2008

Ok to Issue:

Ok to Issue:

1) This permit DOES NOT certify the use of the property or building. It only authorizes the construction activities.

2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approrval prior to work.

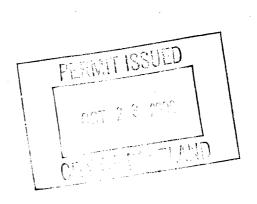
#### Comments:

10/9/2008-lmd: Contacted Anita requesting further construction information as well as 11x17 copies.

10/20/2008-amachado: Need more information. Don't know where this is on the building. Don't know what the existing conditions were. Need to talk to Suzanne.

10/21/2008-amachado: Left vcm for Anita Peddle. Need to know where on the building the work is taking place. Need confirmation that the work is replacing what was there and not changing the elevation of the building at all. A picture of the existing condition would be great.

10/21/2008-amachado: Spoke to Anita. The work that was done was to replace 20' of the foundation under the porch which was crumbling. It is in the same footprint and the elevation did not change.



#### **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-c	construction Meeting will take place up	on receipt of your building permit.
X	_ Footing/Building Location Inspection precast piers	on: Prior to pouring concrete or setting
X	_ Foundation Inspection: Prior to pla occupiable space	cing ANY backfill for below grade
X	_ Final inspection required at comple	tion of work.
	* · ·	in projects. Your inspector can advise you if All projects <u>DO</u> require a final inspection.
_	of the inspections do not occur, the pro RDLESS OF THE NOTICE OR CIRC	•
	TICATE OF OCCUPANICES MUST B PACE MAY BE OCCUPIED.	E ISSUED AND PAID FOR, BEFORE
Signatur	re of Applicant/Designee	Date
The	ms h. Mally	10/23/08
Signatu	re of Inspections Official	Date

**CBL:** 090 C001001 **Building Permit #:** 08-1273

# General Building Permit Application

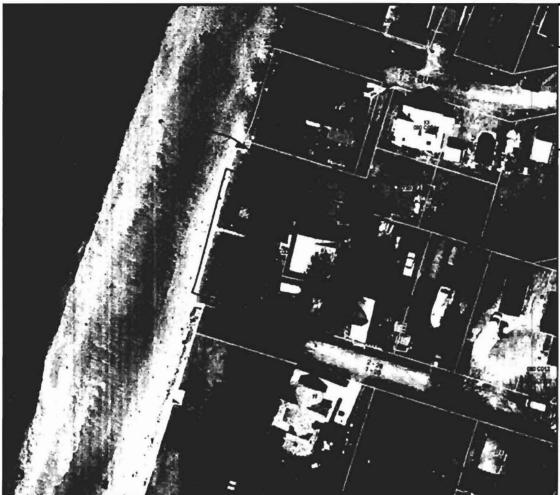
If you or the property owner owes real estate or personal property taxes or user charges on any roperty within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction:	ean St Peak	s Is						
Total Square Footage of Proposed Structure/A		Number of Stories						
Tax Assessor's Chart, Block & Lot	Applicant *must be owner Lessee or Buye							
Chart# Block# Lot#	Name ANITA 1.1. PEDOLE	731-334-						
070 0001001	D 5362							
	Address /L. & Locks LEY Re City, State & Zip Lynn, 3/ELD, 114							
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$ & OOO						
	Name 54ME	work: \$_{\infty}						
OCT 8 2003	Address	C of O Fee: \$						
VIA POSTALMAIL	City, State & Zip	Total Fee: \$ 40,00						
	·							
Current legal use (i.e. single family) SINGLE FAMILYNumber of Residential Units								
If vacant, what was the previous use?  Proposed Specific use: SING L-F FAM	ILY- SUMMER							
Proposed Specific use: 5/NGLE FAM. Is property part of a subdivision?	If yes, please name	ti lead						
Project description: repair/replace  Rench persient of Asure	breken soft of foundale	ian jinain						
freeze peculian of poune	· De Mand.							
Contractor's name: My son, much	rel Gedale and stand	Dego						
Address:		V						
City, State & Zip Sinks Soland	Te	lephone:						
Who should we contact when the permit is read	YENTA M. PEDOLE TE	lephone: 1-19:334-						
Mailing address: 168 LOCKSLEY 1	<u> </u>							
Please submit all of the information of	outlined on the applicable Checklis	st. Failure to						

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 www.portlandmaine.gov, 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.

7 . 1	() (1)		
Signature: / / 7	M 1/2 1/1/	Date: / C/	
Signature.	111. 12/11/11	Dail. 1766/60	Į.
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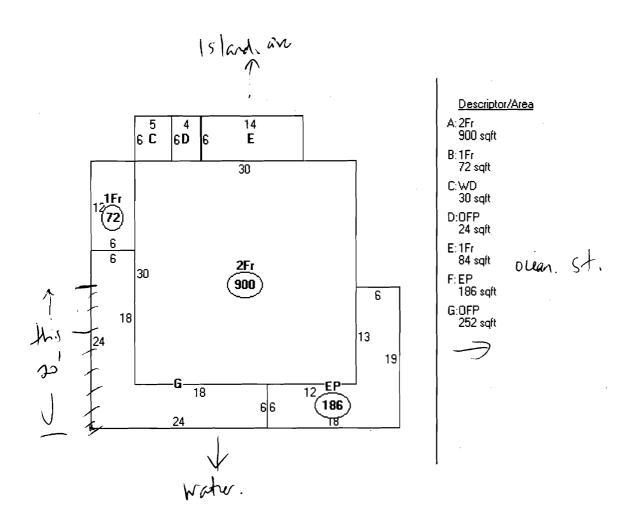


City of Portland GIS



DISCLAIMER: This is a product of the City of Portland MIS
Department. The data depicted here have been developed with cooperation from other federal, state and local agencies. The City of Portland expressly disclaims responsibility for damages or liability that may arise from the use of this map.

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new cerent. -replace what cracked.
not charging Estpoint; not Charging elevation
under ports.

Date	08/14/2008 <b>Time</b>	Inspector		Total Oustanding	Electrical	
Аррі. Туре	Complaint	Suzanne Hunt	<u>*</u>	\$0.00	Inspector Required?	No
Туре	Inspection			Census Tract	Fire	
Appl ID	12279			<u> </u>	inspection Required?	No
Parcel Id: 0	90 C001001 Address: 8	OCEAN ST	District Nbr:	1		
Building a fo	oundation without a permit. Work is being h	done at the back of the hou	se. Foundation a	and posts installed, no p	ermit, took	

		•		•			•	•
CreatedBy	lmd	CreateDate	08/13/2008	ModBy	smh	ModDate	08/14/2008	
	•	CreateTime	8:42 am		-	ModTime	3:10 pm	

Director of Planning and Urban Developmen Penny St. Louis Littel

> Inspection Services, Directo Jeanie Bourke

August 15, 2008

PEDDLE ANITA M & 168 LOCKSLEY RD LYNNFIELD, MA 01940

CBL: 090 C001001 Located at 8 OCEAN ST Certified Mail 7003 3110 002 6063 6448

Dear PEDDLE ANITA M &,

#### STOP WORK ORDER

An evaluation of the above-referenced property on 08/14/2008 revealed that building construction was being conducted without benefit of a valid building permit as required by Section 105.1 of the 2003 International Building Code and the 2003 International Residential Code of the City of Portland.

Appropriate permitting has not been issued for the property listed above, therefore all construction activity at that property must STOP immediately. This is a STOP WORK ORDER pursuant to Section 114. of 2003 International Building Code and the 2003 International Residential Code of the City of Portland.

You may resume construction activity only after issuance of the appropriate building permit and the subsequent lifting of this order. Building Permit Applications are available in this office, Room 315 at Portland City Hall, from 8:00 a.m. to 4:00 p.m. weekdays except holidays.

Failure to comply will result in this office referring the matter to the City of Portland Corporation Counsel for legal action and possible civil penalties, as provided for in Section 1-15 of the Code and in Title 30-A of M.R.S.A. Section 4452. This constitutes an appealable decision pursuant to Section 112 of the City of Portland Building Code.

If you wish to discuss this matter, or you have any questions, please feel free to contact me.

Sincerely,

Suzanne Hunt @ (207) 874-8707 Building Inspector

# CITY OF PORTLAND DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

389 Congress Street Portland, Maine 04101

## Inspection Violations

Owner/Manager		Inspector	Inspection Date
PEDDLE ANITA M &		Suzanne Hunt	8/14/2008
Locatation	CBL	Status	Inspection Type
8 OCEAN ST	090 C001001	Stop Work Order	Complaint-Inspection

	Code	Int/Ext	Floor	Unit No.	Area	Compliance Date
1)	105.1 Violation:	Exterior Building w/o Permit			Basement	
	Notes:					

Comments: permit for structural work required.