Form # P 04

DISPLAY

INIS CAND	ON	PHINCIPAL	FNONTAGE	UF	AAC
CITY	OF	PORT	LAND		

lion a

Please Read Application And Notes, If Any, Attached

MCRECTION

Permit Num

has permission to _____ Replace two windows and cr

MERCURIO PAMELA V &

new ba

ine and or the

e of buildings and

rm or

THUR M MERCURIO/Cha

090 COOLOGI CITY OF PORTLAND

epting this permit shall comply with all

yctures, and of the application on file in

fances of the City of Portland regulating

AT 404 ISLAND AVE

This is to certify that

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

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

ificatio f inspe on mus n and w en perm on proc re this rt there lding or ed or osed-in QUIRED. JR NO

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

PENALTY FOR REMOVING THIS

City of Portland, N 389 Congress Street,		•			1	07-0211	Issue Date	: /28/2007	090 C00	09001
Location of Construction:		Owner Name:				ner Address:			Phone:	
404 ISLAND AVE		MERCURIO PAMELA V & ARTH			1313 WASHINGTON ST # 616			766-2547		
Business Name: Contractor		Contractor Name			<u> </u>	ntractor Address:			Phone	
		Chad Oliver			30	Bancroft St. Po	ortland	_	20783116	45
Lessee/Buyer's Name Pho		Phone:	Phone:		Permit Type:				Zone:	
					A	Iterations - Dwe				<u> </u>
Į -		Proposed Use:			Per	rmit Fee:	Cost of Wor		CEO District:	
		single family seasonal cottage		\$23,500.00 FIRE DEPT: Approved INS		OO.OO INSPEC	2 EVON:	<u> </u>		
		}			1 111	RE DEFT:	Approved	Use Grou	110N: 1D: O -3	TypexTR
		}					Denied		~~~ \ ~~~ \	200
		}							IRCO	(00)
Proposed Project Description	on:	_!- <u>-</u> -							1P. R-3 IRC 2 2/28/07	_
Replace two windows	and create new	bathroom on 2r	nd floor			nature:		Signature	2 28/01	<u>a</u>
					PEI	DESTRIAN ACTI	VITIES DIST	TRICT (P.	A.D.) '	
					Ac	tion: Approv	ed Ap	proved w/C	Conditions	Denied
}					Sig	gnature:		1	Date:	
Permit Taken By:	Date A	pplied For:	Γ				Approva			
csh	02/2	8/2007								
This permit applic	ation does not	preclude the	reclude the Special Zone of		ws	Zonin	g Appeal		Historic Pres	ervation
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland Wetland		Variance		Not in Distric	et or Landmai		
					Miscellaneous		Does Not Rec	quire Review		
within six (6) mon	·		Flood Zone Conditional Us		nal Use	Requires Review				
			Subdivision		Interpretation		Approved			
			Si:	te Plan		Approve	d		Approved w/	Conditions
_			Maj Minor MM		Date:		[Date: 2/38/07 ()		
		Annual Control of the					Dat			
			Date: 2	12001		Date		Dat	e: 1/100/07	
				(•	
		CRANT								
			C	ERTIFICATIO	ON					
I hereby certify that I ar I have been authorized lipurisdiction. In addition shall have the authority such permit.	by the owner to, if a permit for	o make this appli or work described	cation a	is his authorized application is is	age suec	ent and I agree t d, I certify that t	o conform he code off	to all app ficial's au	olicable laws of thorized repr	of this esentative
SIGNATURE OF APPLICA	NT			ADDRESS			DATE		PHO	NE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK. TITLE					DATE		PHO	NE NE

•		llding or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, (4101 Tel:	(207) 874-8703, Fax: (2	207) 874-8716	07-0211	02/28/2007	090 C009001
Location of Construction:		Owner Name:		Owner Address:		Phone:
404 ISLAND AVE		MERCURIO PAMELA	A V & ARTH	1313 WASHINGT	ON ST # 616	() 766-2547
Business Name:		Contractor Name:		Contractor Address:		Phone
		Chad Oliver		30 Bancroft St. Po	rtland	(207) 831-1645
Lessee/Buyer's Name		Phone:]	Permit Type:		
		<u> </u>		Alterations - Dwe	llings	
Proposed Use:			Propose	d Project Description:	<u>-</u>	
single family seasonal c	ottage		Replac	e two windows and	d create new bathroo	om on 2nd floor
Dept: Zoning	Status:	Approved with Conditions	Reviewer:	Chris Hanson	Approval D	Date: 02/28/2007
Note:						Ok to Issue:
1) This is NOT an appr	oval for an a	additional dwelling unit.	You SHALL NO	T add any addition	nal kitchen equipmen	nt including, but
not limited to items	such as stove	es, microwaves, refrigerato	ors, or kitchen si	nks, etc. Without s	special approvals.	
Dept: Building	Status:	Approved with Conditions	Reviewer:	Chris Hanson	Approval D	Date: 02/28/2007
Note:						Ok to Issue:
1) Permit approved bas noted on plans.	sed on the pla	ans submitted and reviewe	ed w/owner/cont	ractor, with addition	onal information as a	greed on and as
		any electrical, plumbing, bmitted for approval as a				



BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

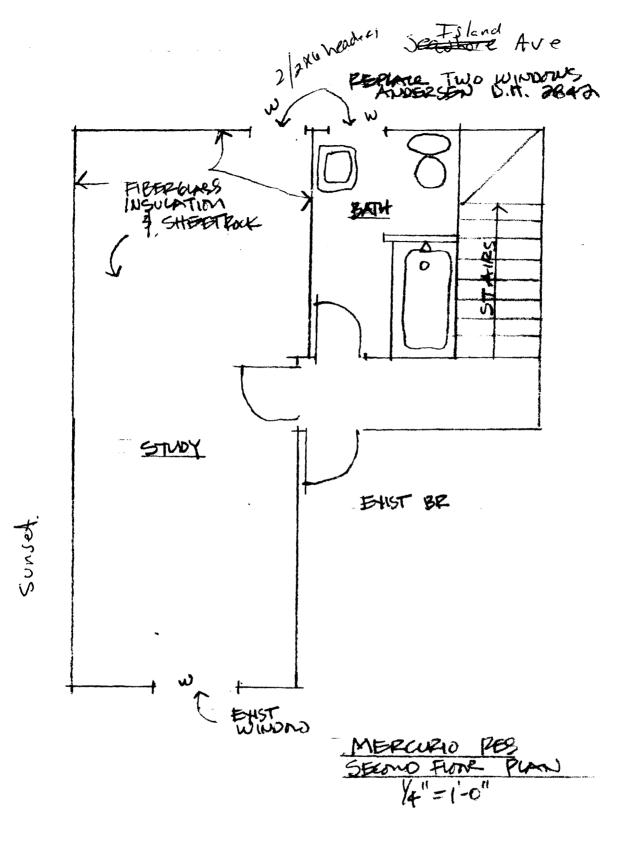
A Pre-construction Meeting will take pla	ce upon	receipt of your building permit.
Footing/Building Location Inspec	tion <u>:</u>	Prior to pouring concrete
Re-Bar Schedule Inspection:		Prior to pouring concrete
Foundation Inspection:		Prior to placing ANY backfill
Framing/Rough Plumbing/Electr	ical:	Prior to any insulating or drywalling
Final/Certificate of Occupancy:	use. N	o any occupancy of the structure or IOTE: There is a \$75.00 fee per tion at this point.
Certificate of Occupancy is not required for you if your project requires a Certificate of inspection If any of the inspections do not ocphase, REGARDLESS OF THE NOTICE	Occupar	ncy. All projects DO require a final e project cannot go on to the next
CERIFICATE OF OCCUPANIC BEFORE THE SPACE MAY BE OCCU		ST BE ISSUED AND PAID FOR,
Signature of Applicant/Designee Signature of Inspections Official CBL: 090 - C-009 Building Permit	 #:_ <i>O</i>	Date / 28/07 Date / 702//

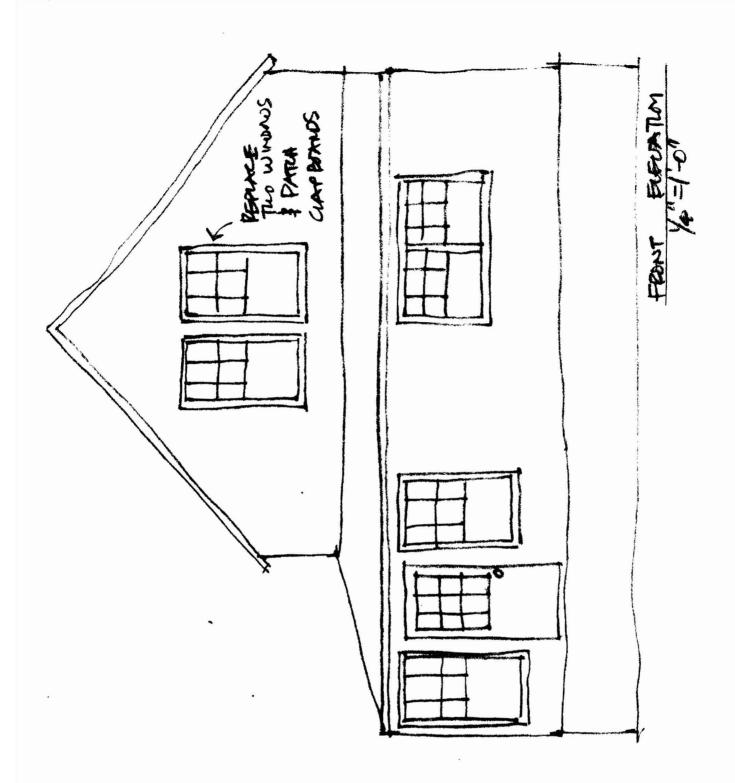
General Building Permit Application

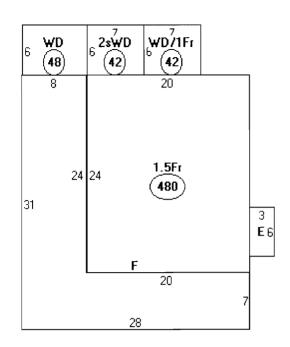
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

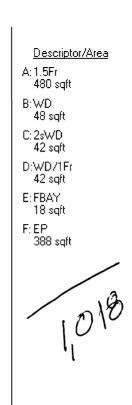
Location/Address of Construction: 404 [SLAMO ALE PER	MES ISLAND
Total Square Footage of Proposed Structure	Square Footage	e of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: ART + PAM MERC	Telephone: 766 254-7
Lessee/Buyer's Name (If Applicable)	Applicant name, address & to	Cost Of Work: \$ 23,500
	30 BANCFAT FUTLAND 761 3875 8311	645 (all) C of O Fee: \$
Current legal use (i.e. single family) If vacant, what was the previous use?	ŧ.	ASAMI SUMME COTTACE
Proposed Specific use: SAW	L If was places name	
Is property part of a subdivision? Project description: 2		
Contractor's name, address & telephone: CHP Who should we contact when the permit is read Mailing address: 30 CANCATT ST. PARTON, WP 04102	to OUVER 30 by: <u>CHAN OUVER</u> Phone: <u>761 3875</u> 831 1645	BANCROFT ST. 2027(AND) 7613875 8311645 (CO
Please submit all of the information outle Failure to do so will result in the automa		application Checklist.
In order to be sure the City fully understands the full request additional information prior to the issuance owww.portlandmaine.gov, stop by the Building Inspec	of a permit. For further information	on visit us on-line at
I hereby certify that I am the Owner of record of the name been authorized by the owner to make this application as h In addition, if a permit for work described in this application authority to enter all areas covered by this permit at any real	is/her authorized agent. I agree to c on is issued, I certify that the Code O	onform to all applicable laws of this jurisdiction. fficial's authorized representative shall have the
Signature of applicant:		Date: 2/26/07

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









Applicant: Chool Oliven Date:
Address: 40A Island Ave (Peaks) C-B-L: 90-C-009
CHECK-LIST AGAINST ZONING ORDINANCE
Date - 2/28/07
Zone Location - IR 2
Interior or corner lot-
Proposed Userwork - Interior / Bathroom + replace I avredo.
Servage Disposal =
Lot Street Frontage -
Front Yard - 74.15
Rear Yard -
Side Yard - 60.09
Projections -
Width of Lot -
Height -
Lot Area - 2231
Lot Coverage Impervious Surface -
Area per Family -
Off-street Parking -
Loading Bays -
Site Plan -
Shoreland Zoning/Stream Protection -

Flood Plains -

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

090 C009001 404 ISLAND AVE

Location

SEASONAL

Owner Address

MERCURIO PAMELA V & ARTHUR M MERCURIO

1313 WASHINGTON ST # 616

BOSTON MA 02118

Book/Page

8887/275

Lega1

90-C-9 ISLAND AVE SUNSET RD

PEAKS ISLAND 2231 SF

Current Assessed Valuation

Land \$176,800

Building \$56,200 Total \$233,000

Property Information

Year Built

Style Cottage Story Height

Sq. Ft. 900

Total Acres

Bedrooms

Full Baths

Half Baths

Total Rooms

Attic None Basement Pier/slab

Outbuildings

Туре

Quantity

Year Built

Size

Grade

Condition

Sales Information

Date

Туре

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!