

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-0297	Issue Date: MAR 24 2005	CBI: 090 00 0001
Owner Name: Thomas Dromgoole	Owner Address: 7 Wave Ave	Phone: 617-686-5584
Business Name:	Contractor Name: Thomas Dromgoole	Contractor Address: 417 Island Ave Portland CITY OF PORTLAND
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings
		Zone: IR-2

Past Use: Single Family Home	Proposed Use: Single Family Home / Enclose Deck and repair renovate rooms
Enclose Deck and repair renovate rooms	

Permit Fee: \$75.00	Cost of Work: \$6,000.00	CEO District: 2
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group R3 Type 5B IR-2003 Signature: JMB 3/24/05	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 0312212005	Zoning Approval	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone SF home <input type="checkbox"/> Subdivision OK <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: JMB 3/24/05	Zoning Appeal <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: _____	Historic Preservation <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 Date: JMB
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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

Permit No: 05-0297	Date Applied For: 03/22/2005	CBL: 090 0010001
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Location of Construction: 417 ISLAND AVE	Owner Name: Thomas Dromgoole	Owner Address: 7 Wave Ave	Phone: 617-686-9584
Business Name:	Contractor Name: Thomas Dromgoole	Contractor Address: 417 Island Ave Portland	Phone: (207) 617-6869
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Single Family Home / Enclose Deck and repair renovate rooms	Enclose Deck and repair renovate rooms
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Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 03/24/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) 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 Conditions	Reviewer: Jeanine Bourke	Approval Date: 03/24/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.			
2) Separate permits are required for any electrical, plumbing, or heating.			

All Purpose 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>417 Island Ave</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot <u>22,000</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>90</u> Block# <u>0</u> Lot# <u>10</u>	Owner: <u>Thomas Dromycole</u>	Telephone: <u>617 686 9584</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Thomas Dromycole</u> <u>417 Island Ave</u> <u>617 686 9584</u>	cost Of Work: \$ <u>6,000</u> Fee: \$ <u>75.00</u>

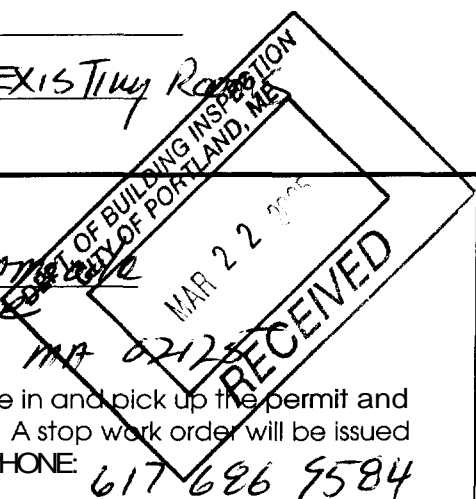
Approximately how long has it been vacant: _____

Proposed use: Enclose Deck and Repair Existing
Project description: _____

Contractor's name, address & telephone: _____

Who should we contact when the permit is ready: Thomas Dromycole
Wailing address: 7 WAVER AVE
SAVIN HILL MA 02127

We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 617 686 9584

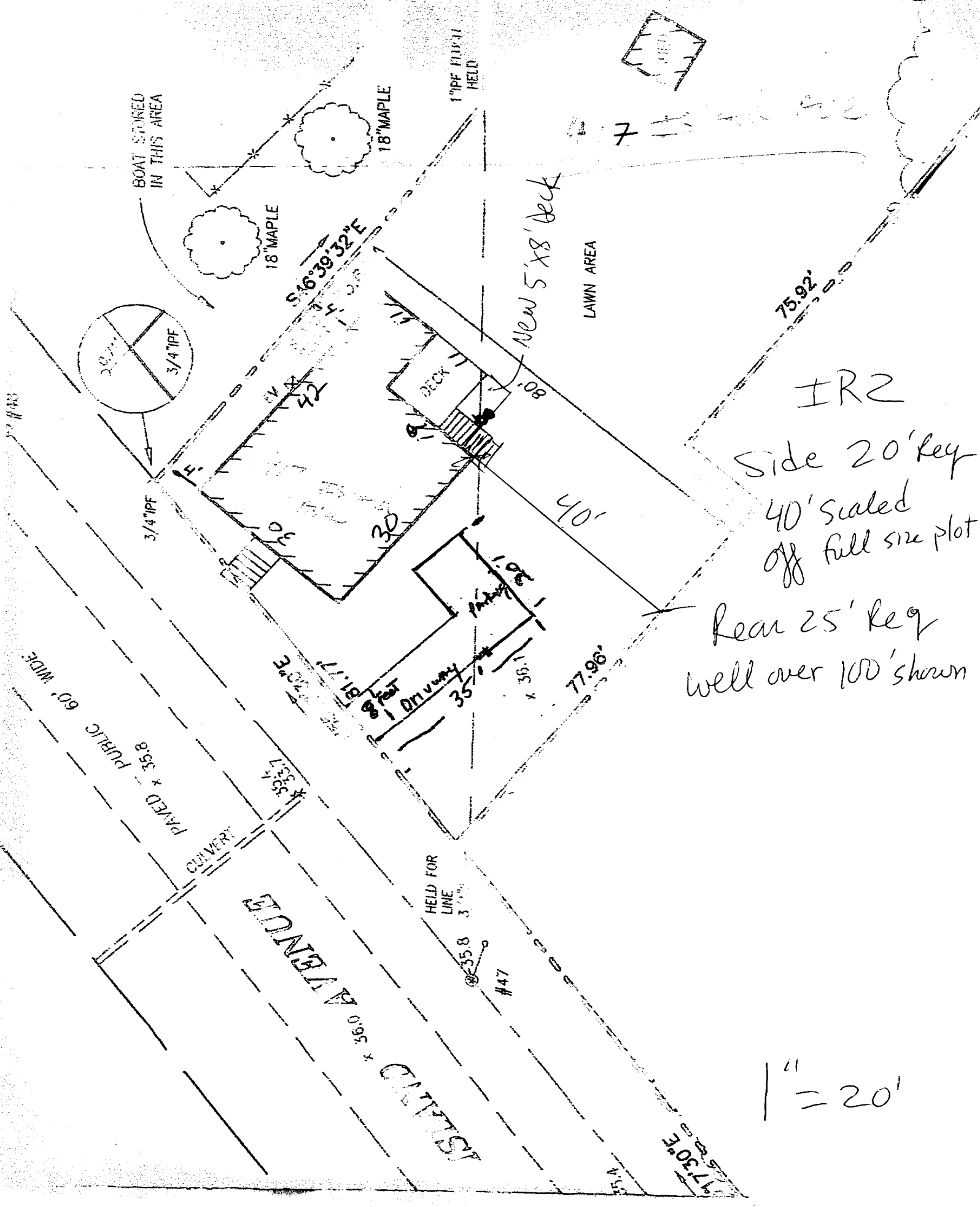


IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: <u>[Signature]</u>	Date: <u>3-18-05</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



BOAT STORED
IN THIS AREA

18" MAPLE

18" MAPLE

1" IPE TRUNK
HELD

LAWN AREA

New 5' x 8' Deck

IRZ

Side 20' Key
40' Scaled
off full size plot

Rear 25' Key
well over 100' shown

1" = 20'

PAVED PUBLIC 60' WIDE

PAVED 35.8

CONCRETE

AVENUE

HELD FOR
LINE

3' 1/2"

#47

#48

#49

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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 0010001
 Location 417 ISLAND AVE
 Land Use ZEASONAL

IR-2

Owner Address HARILTON M ELIZABETH HEIRS
 149 FRANCES ST
 PORTLAND NE 04102

Book/Page
 Legal 90-0-10-11
 PLEASANT AVE ISLAND AVE
 PEAKS ISLAND
 45265 SF

Valuation Information

Land	Building	Total
\$56,490	\$33,710	\$90,200

Property Information

Year Built 1920	Style Cottage	Story Height 1.5	Sq. Ft. 75b	Total Acres 1.039
Bedrooms 3	Full Baths 1	Half Baths	Total Rooms 4	Attic None
				Basement Pier/slab

Outbuildings

Type SHED-METAL	Quantity 1	Year Built 1970	Size 10X10	Grade D	Condition A
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Sales Information

Date	Type	Price	Book/Page
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Picture and Sketch

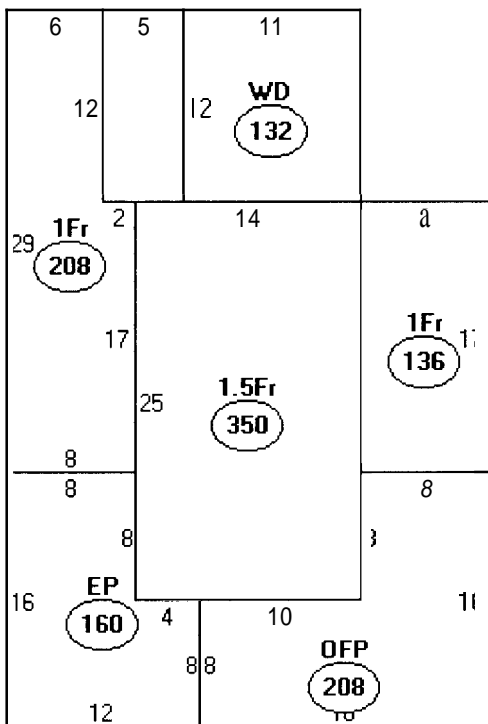
Picture	Sketch	Tax Map
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[Click here to view Tax Roll Information.](#)

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.

New Search!





Descriptor/Area

- A: 1.5Fr
350 sqft
- B: 1Fr
208 sqft
- C: FUB
60 sqft
- D: WD
132 sqft
- E: 1Fr
136 sqft
- F: OFF
208 sqft
- G: EP
160 sqft

1,254
40 Deck

1,294

24,398
x 20%

4,879.6