

901986

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 395 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

91-6-2816 (17:35)

PERMIT ISSUED

Owner: Steven Brooks Phone # (203) 753-9200

Address: 22 Old Sib Rd; Ridgefield, CT 06377

LOCATION OF CONSTRUCTION Peaks Is - Ocean Ave - 91-6-35, 16.

Contractor: owner Sub.: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Est. Construction Cost: 75,000. Proposed Use: 1-family dwelling

Past Use: vacant lot

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L 36' W 42' Total Sq. Ft. \_\_\_\_\_

# Stories: 2 # Bedrooms 2 Lot Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion CONSTRUCT ONE-FAMILY DWELLING

**For Official Use Only**

Date: \_\_\_\_\_ Subdivision: OCT 2 1990

Inside Fire Limits: \_\_\_\_\_ Name: \_\_\_\_\_

Bldg Code: \_\_\_\_\_ Ownership: City Of Portland

Time Limit: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_

Estimated Cost: 75,000.

Zoning: T.R.1  
Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other (Explain) \_\_\_\_\_

HISTORIC PRESERVATION

& minor, minor site plan review

**Foundation:**

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other \_\_\_\_\_

**Floor:**

- \* Septic tank & bed installed 12/1/73 ---
1. Sills Size: (#3717) Sills must be anchored.
  2. Girder Size: \_\_\_\_\_
  3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
  4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.
  5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
  6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
  7. Other Material: \_\_\_\_\_

**Exterior Walls:**

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. Doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Materials \_\_\_\_\_

**Interior Walls:**

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
5. Other Materials \_\_\_\_\_

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor Landmark.
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.
3. Type Ceilings: \_\_\_\_\_ Requires Review.
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_

**Roof:**

1. Truss or Rafter Size \_\_\_\_\_ Span .386 \_\_\_\_\_ Approved with Conditions.
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Denied.
3. Roof Covering Type \_\_\_\_\_ Date 9/14/90

**Chimneys:**

Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Signature: [Signature]

**Heating:**

Type of Heat: \_\_\_\_\_

**Electrical:**

Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**

1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_
2. No. of Tubs or Showers \_\_\_\_\_
3. No. of Flushes \_\_\_\_\_
4. No. of Lavatories \_\_\_\_\_
5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**

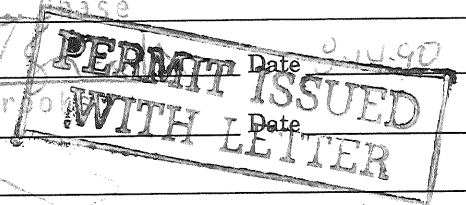
1. Type: \_\_\_\_\_
2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant \_\_\_\_\_ Date 9/14/90

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_



**PLOT PLAN**



**FEES (Breakdown From Front)**

Base Fee \$ 395.  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ 50  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

**Inspection Record**

**Type**

**Date**

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

**COMMENTS**

*10-2-96 Permit expired*

**Signature of Applicant**

**Date**

*8-14-90*

CITY OF PORTLAND, MAINE

389 CONGRESS STREET  
PORTLAND, MAINE 04101  
(207) 874-8300



DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

October 2, 1990

**P. SAMUEL HOFFSES, CHIEF**  
INSPECTION SERVICES DIVISION

Mr. Steven Brooks  
22 Old Sib Road  
Ridgefield, CT 06877

RE: 91-G-35-16-17 Ocean Avenue - Peaks Island, Me.

Dear Sir:

Your application to construct a single family dwelling has been reviewed and a permit is herewith issued subject to the following requirement(s).

**No certificate of occupancy can be issued until all requirements of this letter are met.**

Site Plan Review Requirements

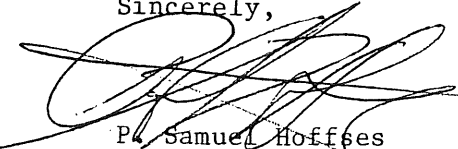
Inspection Services - Approved - W. Giroux  
Public Works - Approved - S. Harris

Building Code Requirements

1. Please read and implement items 1,2,6,7 and 9 of the attached building permit report.

If you have any questions regarding these requirement(s), please do not hesitate to contact this office.

Sincerely,

  
P. Samuel Hoffses  
Chief of Inspection Services

cc: S. Harris - Public Works Dept.  
P. Niehoff - Public Works Dept.

PSH/lj

**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

**Processing Form**

Applicant Steven Brooks  
 Mailing Address 22 Old Sib Rd ; Ridgefield, Ct 06877  
 Proposed Use of Site 1-family dwelling  
 Acreage of Site / Ground Floor Coverage 15,000 sq ft / 1000 sq ft

Date 8/14/90  
 Address of Proposed Site Ocean Ave - ~~XXXXXXXXXX~~ - Peaks Isl.  
 Site Identifier(s) from Assessors Maps 91-G-35, 16, 17  
 Zoning of Proposed Site I R -1

Site Location Review (DEP) Required: ( ) Yes ( ) No Proposed Number of Floors \_\_\_\_\_  
 Board of Appeals Action Required: ( ) Yes ( ) No Total Floor Area \_\_\_\_\_  
 Planning Board Action Required: ( ) Yes ( ) No

Other Comments: Septic tank & bed installed 12/1/78 (#3717)

Date Dept. Review Due: \_\_\_\_\_

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 MINOR MINOR SITE PLAN REVIEW  
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**BUILDING DEPARTMENT SITE PLAN REVIEW**

(Does not include review of construction plans)

- Use does NOT comply with Zoning Ordinance
  - Requires Board of Appeals Action
  - Requires Planning Board/City Council Action

Explanation \_\_\_\_\_

Use complies with Zoning Ordinance — Staff Review Below

Zoning:  
 SPACE & BULK,  
 as applicable

	DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS	
COMPLIES																			
COMPLIES CONDITIONALLY																			CONDITIONS SPECIFIED BELOW
DOES NOT COMPLY																			REASONS SPECIFIED BELOW

REASONS:

OK WDJ 9-27-90

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE OF REVIEWING STAFF/DATE

RECEIVED

CITY OF PORTLAND, MAINE

SEP 12 1990

SITE PLAN REVIEW

PORTLAND PLANNING OFFICE

Processing Form

Applicant Steven Brooks

Date 9/14/90

Mailing Address 22 Old Sib Rd ; Ridgefield, Ct 06877

Address of Proposed Site Ocean Ave - Scarborough - Peaks Is.

Proposed Use of Site 1-family dwelling

Site Identifier(s) from Assessors Maps 91-9-395.16, 17

Acreage of Site / Ground Floor Coverage 19,000 sq ft / 1000 sq ft

Zoning of Proposed Site I R - 1

Site Location Review (DEP) Required: ( ) Yes ( ) No  
Board of Appeals Action Required: ( ) Yes ( ) No  
Planning Board Action Required: ( ) Yes ( ) No

Proposed Number of Floors \_\_\_\_\_  
Total Floor Area \_\_\_\_\_

Other Comments: Septic tank & bed installed 12/1/77 (#3717)

Date Dept. Review Due: \_\_\_\_\_

MINOR MINOR SITE PLAN REVIEW

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) \_\_\_\_\_

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER
APPROVED															
APPROVED CONDITIONALLY															
DISAPPROVED															

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach Separate Sheet if Necessary)

[Signature] 9/14/90  
SIGNATURE OF REVIEWING STAFF/DATE