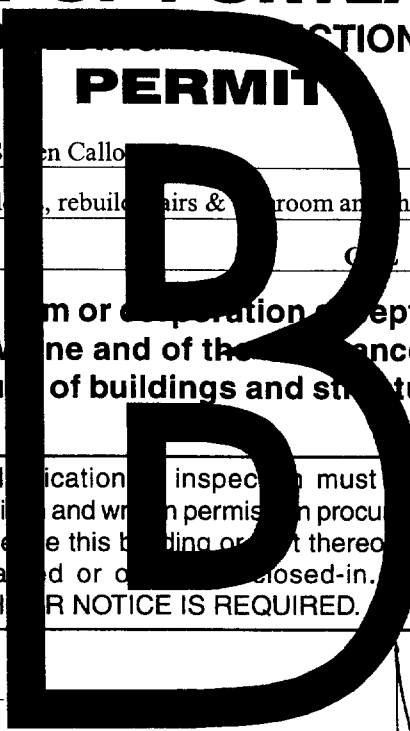


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE PERMIT ISSUED  
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED  
MAY 24 2005  
Permit Number: 050610  
CITY OF PORTLAND



This is to certify that Whaleback Associates Llc / Steven Callo  
has permission to Interior gut reno w/new windows, rebuild stairs & bathroom and change small shed roof to gable  
AT 11 Ocean Spray Rd C. 091 M006001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating 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.

Notification of inspection must be given and written permission procured before this building or part thereof is altered or occupied closed-in. HEAVY NOTICE IS REQUIRED.

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

*Deanie Louke 5/24/05*  
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

**PERMIT ISSUED**

Permit No: 05-0610	Issue Date: <b>MAY 24 2005</b>	CBL: 091 M006001
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Location of Construction: 11 Ocean Spray Rd	Owner Name: Whaleback Associates Llc	Owner Address: 822 Seashore Av	Phone: 766-2957
Business Name:	Contractor Name: Steven Callow	Contractor Address: 23 Lafayette St. Portland	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: IR-1

Past Use: Single Family	Proposed Use: Single Family w/interior renovations & rebuild of sunroom/entrance & shed roof	Permit Fee: \$471.00	Cost of Work: \$50,000.00	CEO District: 2	<i>Shoreland 10,000\$</i>
Proposed Project Description: Interior gut reno w/new windows, rebuild stairs & sunroom and change small shed roof to gable		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>R3</i> Type: <i>SB</i>	
		Signature: _____		Signature: <i>JMB 5/24/05</i> A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied					
Signature: _____ Date: _____					

Permit Taken By: jmb	Date Applied For: 05/24/2005	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<p style="text-align: center;"><b>Special Zone or Reviews</b></p> <input checked="" type="checkbox"/> Shoreland <i>NO NEW EXPANSION OF FOOTPR</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 5/24/05</i>	<p style="text-align: center;"><b>Zoning Appeal</b></p> <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: _____	<p style="text-align: center;"><b>Historic Preservation</b></p> <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: <i>JMB</i>
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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

<b>Permit No:</b> 05-0610	<b>Date Applied For:</b> 05/24/2005	<b>CBL:</b> 091 M006001
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<b>Location of Construction:</b> 11 Ocean Spray Rd	<b>Owner Name:</b> Whaleback Associates Llc	<b>Owner Address:</b> 822 Seashore Ave	<b>Phone:</b> ( ) 766-2957
<b>Business Name:</b>	<b>Contractor Name:</b> Steven Callow	<b>Contractor Address:</b> 23 Lafayette St. Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> Single Family w/interior renovations & rebuild of sunroom entrance & shed roof	<b>Proposed Project Description:</b> Interior gut reno w/new windows, rebuild stairs & sunroom and change small shed roof to gable
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Jeanine Bourke      **Approval Date:** 05/24/2005

**Note:** **Ok to Issue:**

- 1) This approves interior renovations and rebuild in existing footprint and envelope
- 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 Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 05/24/2005

**Note:** **Ok to Issue:**

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.

**Dept:** Historical      **Status:** Approved with Conditions      **Reviewer:** Deborah Andrews      **Approval Date:** 05/19/2005

**Note:** **Ok to Issue:**

- 1) Shed to be positioned to be out of view from public way.

# 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>11 Ocea Spray Rd Peaks Isr</u>		
Total Square Footage of Proposed Structure <u>1391 sq ft</u>	Square Footage of Lot <u>10,000</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>91</u> Block# <u>M</u> Lot# <u>6</u>	Owner: <u>Whaleback LLC</u> <u>Robyn P. Callow</u> <u>10,000</u>	Telephone: <u>766-2957</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Robyn P. Callow</u> <u>822 Seashore Ave</u> <u>Peaks Is. 04108</u>	Cost Of Work: \$ <u>50,000</u> Fee: \$ <u>471.00</u>
Current use: <u>vacant 5 yrs (single family)</u>		
If the location is currently vacant, what was prior use: <u>1 family home</u>		
Approximately how long has it been vacant: <u>5 yrs. <del>on</del></u>		
Proposed use: <u>1 family home</u>		
Project description: <u>Gut rehab interior - rebuild sunroom/entrance shed bump<sup>on</sup> <u>New Roof</u></u>		
Contractor's name, address & telephone: <u>Steven Callow 23 Lafayette St. Portland, ME 04103</u>		
Who should we contact when the permit is ready: <u>Robyn P. Callow</u>		
Mailing address:		
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: <u>766-2957</u>		

**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>Robyn P. Callow</u>	Date: <u>5/24/05</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 4<sup>th</sup> floor of City Hall**