Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUTION

Permit Number: 081485

This is to certify thatFriedman Marian T & Etals Jts	in Kiely	
has permission toRot repair and remodel of exist	porch p	
AT 549 Island Ave, Peaks Island	— е	092 B002001
provided that the person or persons fi	or co	ting this permit shall comply with a

provided that the person or persons, file or companies of the provisions of the Statutes of Mare and of the provisions of the Statutes of Mare and of the provision, 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. OTHER REQUIRED APPROVALS	Not ation of ispectid must be give and writte permissi procured before this but ag or par hereof is lath or oth sed-in. 2. HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
Fire Dept.		
Health Dept.		
Appeal Board		
Other		
Department Name		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permit	t Application	ı P	ermit No:	Issue Date:		CBL:	
389 Congress Street, 04101	•				08-1485			092 B0	02001
Location of Construction:	Owner Name:			Owner Address: Phone:		Phone:			
549 Island Ave, Peaks Island	Friedman Mar	ian T &	Etals Jts	401	01 Cumberland Ave # 1406				
Business Name:	Contractor Name	::		Cont	ractor Address:			Phone	
	John Kiely			591	Island Ave Pe	aks Island		20776620	26
Lessee/Buyer's Name	Phone:			Pern	nit Type:				Zone:
_				Al	terations - Dwe	llings			IR-2
Past Use:	Proposed Use:			Peri	nit Fee:	Cost of Work	: CE	O District:	7
Single Family Single Family /		/ Rot re	Rot repair and		\$170.00	\$15,000	0.00	1	ł
	remodel of exi	sting po	rch phase one.	FIR	E DEPT:		INSPECTION		
						Denied	Use Group:	03	Type \ \
	Ì				LJ	Demed	7	77	m 2
							ال	KC U	002
Proposed Project Description:							_		
Rot repair and remodel of exis	ting porch phase one.			Signature: Signature:		m 12/	o (
	,			Signature: Signature: Signature: Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
			Action: Approved Approved w/Cor			oved w/Con	ditions	Denied	
		Signature: Da		Da	te:				
Permit Taken By:	Date Applied For:			Zoning Approval					
gg	11/24/2008								
1. This permit application do	es not preclude the	Spec	cial Zone or Review	ws	Zonin	g Appeal	1	Historic Pres	ervation
Applicant(s) from meeting Federal Rules.	olicant(s) from meeting applicable State and eral Rules.		oreland property State 1901 fan	_	☐ Variance		☐ ☐	Not in Distric	et or Landma
2. Building permits do not include plumbing, septic or electrical work.		Shart-sono etland in 751(c)	thick	Miscellaneous			Does Not Require Review		
3. 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		☐ Flo	ood Zone parel 15-zan	C	C Conditional Use			Requires Review	
		☐ Su	bdivision	Interpretation			Approved		
[UED	☐ Sit	e Plan		Approved	i		Approved w/	Conditions
PERMIT ISS	JUED	Maj [Minor MM		Denied			Denied Jour	
pFC.			ul condutail		Date:		Date:	1100-	
CITY OF POF	RTLAND -	— <u></u>	1-31 / 7-7		<u> </u>				-
		C	ERTIFICATION	NC					
I hereby certify that I am the ow I have been authorized by the o jurisdiction. In addition, if a pe	wner to make this appli	ication a	s his authorized	lage	nt and I agree to	o conform to	o all appli	cable 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

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: 549	ISLAND AVE PEAKS !	SLAND 09108			
	rea Square Footage of Lot				
Total Square Footage of Proposed Structure/Area Square Footage of Lot 16,447					
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	r* Telephone:			
Chart# Block# Lot#	Name BETSY STOUT	_			
92 B 2-3-6	Address 549 ISLAND AVE				
	City, State & Zip PEALS IS LAND, M	₹			
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of			
	Name	Work: \$ \5,000			
	Address	C of O Fee: \$			
	City, State & Zip	Total Fee: \$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			
Current legal use (i.e. single family)	THUE FAMILY				
If vacant, what was the previous use?					
Proposed Specific use: SINGUE	FAMICY				
Is property part of a subdivision?	If yes, please name				
KOT REPAIR THE PERSONAL PORCH					
PHASE ONE		•			
· ,					
Contractor's name: OHN KILE	<u> </u>				
Address: SLAND AVE	\				
City, State & Zip PEALS ISLAM	2,ME09/08	elephone: 766 - 2026			
Who should we contact when the permit is read	IV: PACHEL CONUL TO	elephone: 766 5625			
Mailing address: 26 STEKLING	ST PEAKS ISLAND, ME	09108 7000			
Please submit all of the information outlined on the applicable Checklist. Failure to					
do so will result in the automatic denial of your permit.					

In order to be sure the City fully understands the full scope of the project, the Planning and Developmen ND partner CO8 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.

Signature: Date: 25.00	
The state of the s	

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

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 08-1485 11/24/2008 092 B002001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Owner Address: Phone: 549 Island Ave, Peaks Island Friedman Marian T & Etals Jts 401 Cumberland Ave # 1406 Business Name: Contractor Name: Contractor Address: Phone John Kiely 591 Island Ave Peaks Island (207) 766-2026 Lessee/Buyer's Name Phone: Permit Type: Alterations - Dwellings Proposed Use: **Proposed Project Description:** Single Family / Rot repair and remodel of existing porch phase one. Rot repair and remodel of existing porch phase one. 11/24/2008 Dept: Zoning Status: Approved with Conditions Reviewer: Ann Machado **Approval Date:** Note: Removing two existing sets of stairs which are non-conforming. Squaring off the deck & the new set of stairs Ok to Issue: are still non-conforming but the total sf is less and the new stairs are set back further from the front yard. Footprint confirmed on permit #001265 issued in Oct., 1988. 1) This permit is being issued only for the work that is labeled as phase one on the plans. Any work associated with phase two must be applied for on a separate permit. 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that Dept: Building 12/01/2008 **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:**

1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review

Note:

and approrval prior to work.

Ok to Issue:

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-construction Meeting will take place upon receipt of your building permit.

X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designer

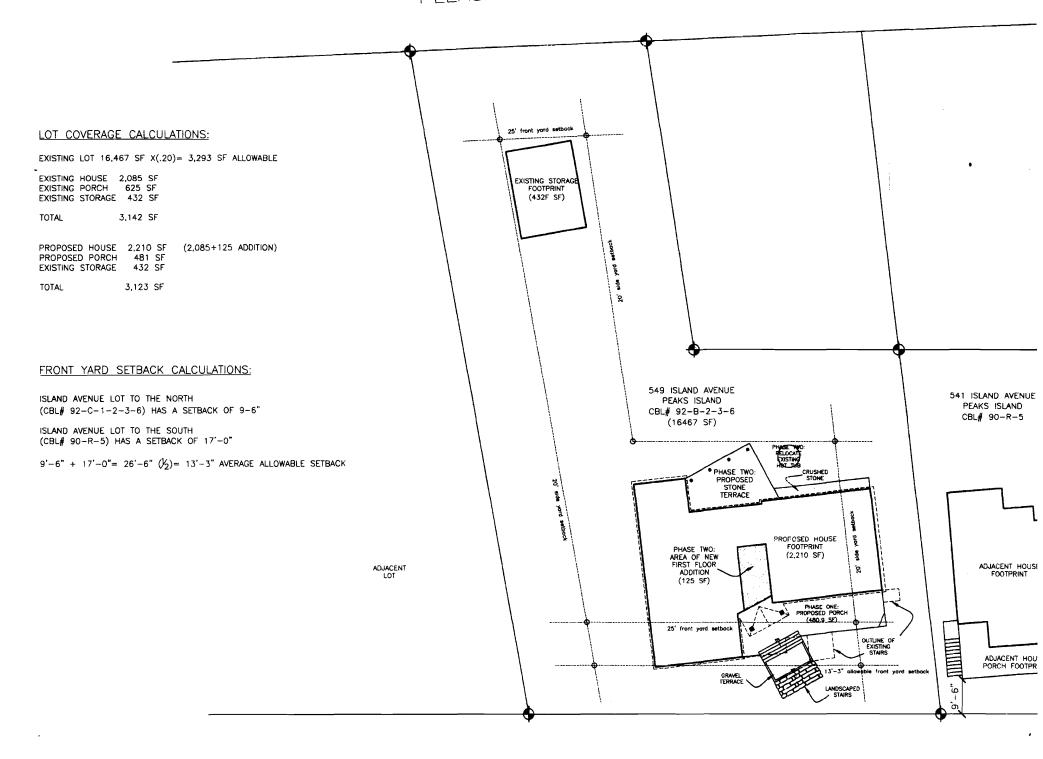
Signature of Inspections Official

Date

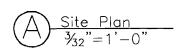
Date

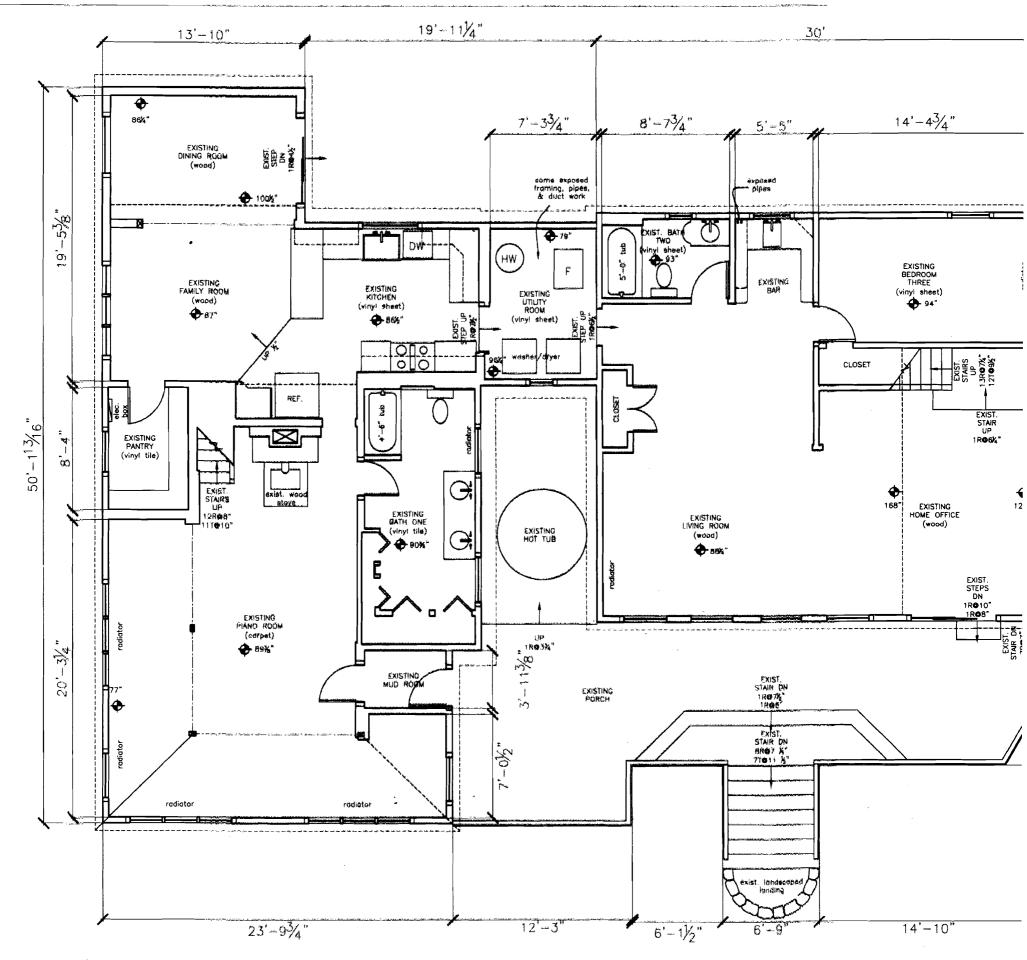


PLEASANT AVENUE

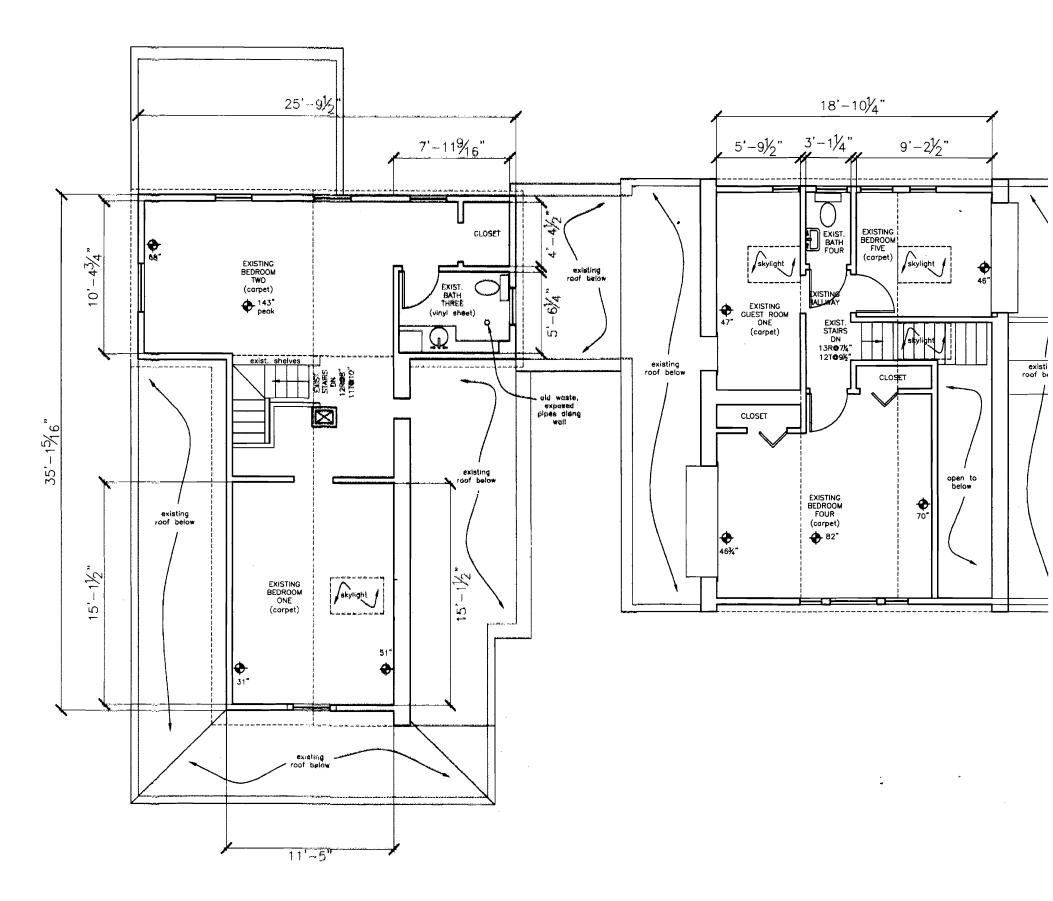


ISLAND AVENUE



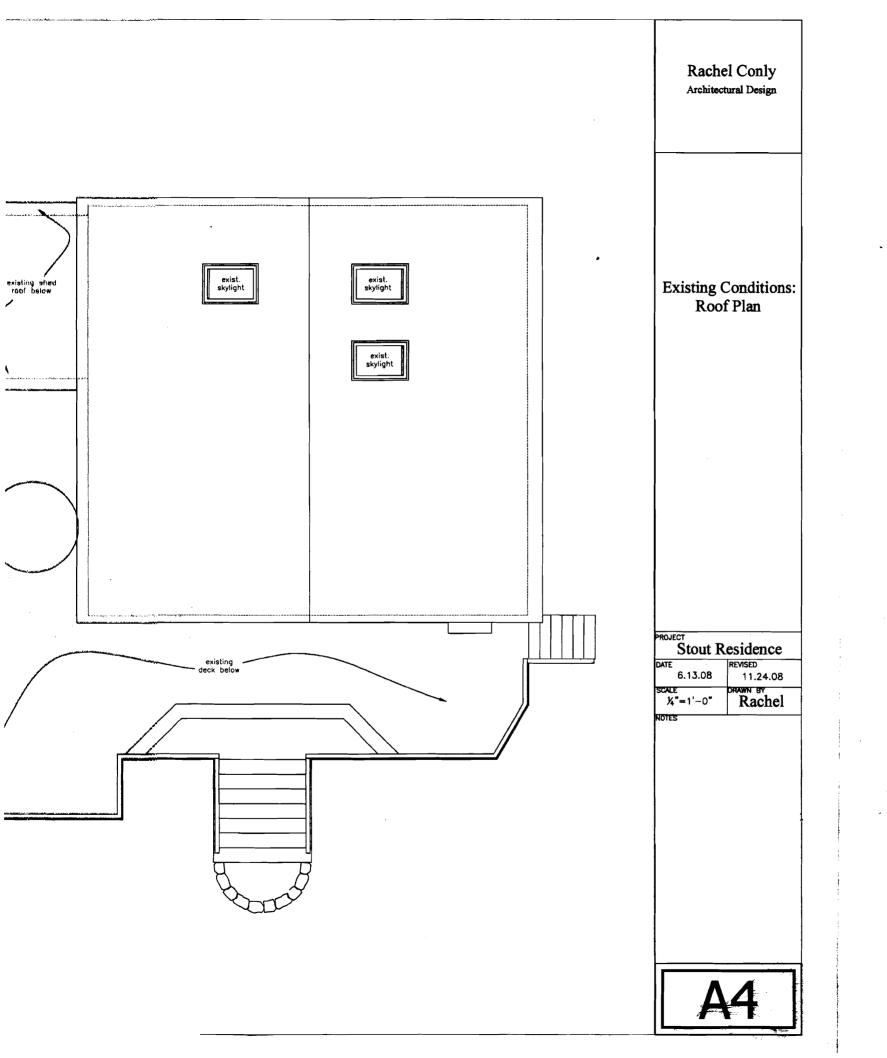


 $\underbrace{ \begin{array}{c} \text{Existing First Floor Plan} \\ \mathcal{V}_4"=1'-0" \end{array}}$



Existing Second Floor Plan

1/2"=1'-0"

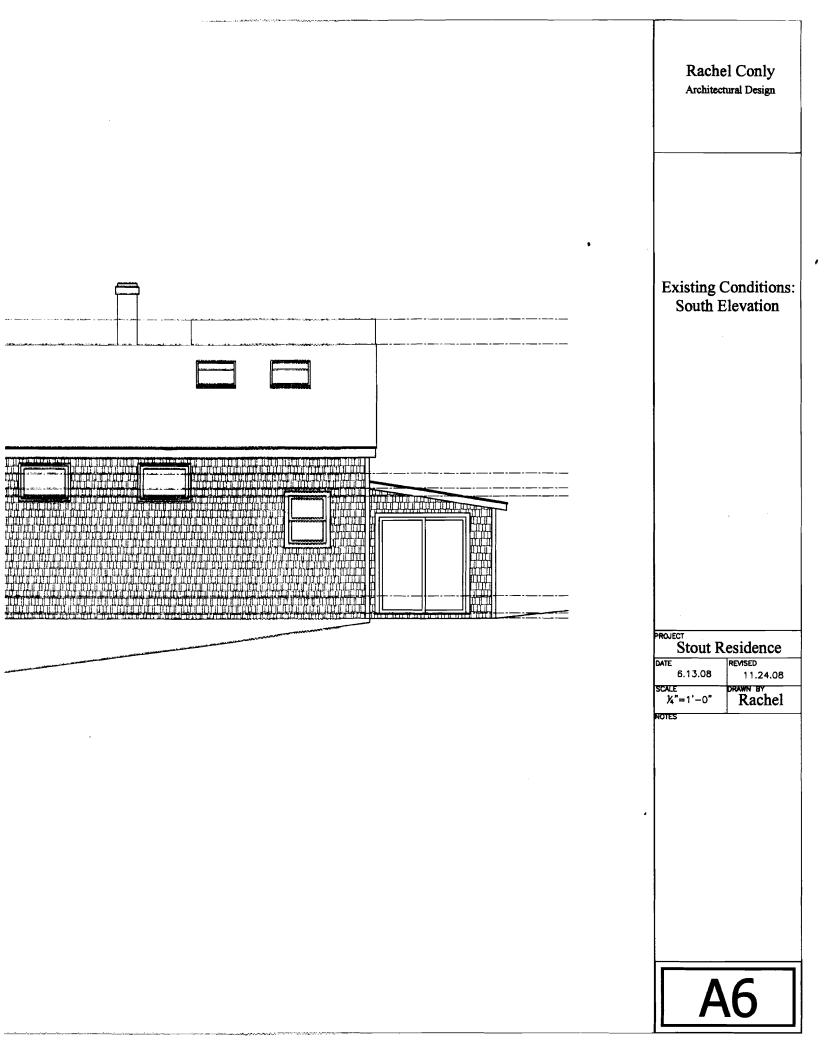


Existing Conditions: West Elevation Stout Residence

Stout Residence

oute
6.13.08
11.24.08
soue

k"=1'-0"
Rachel Rachel Conly Architectural Design



Rachel Conly Architectural Design

Existing Conditions: East Elevation

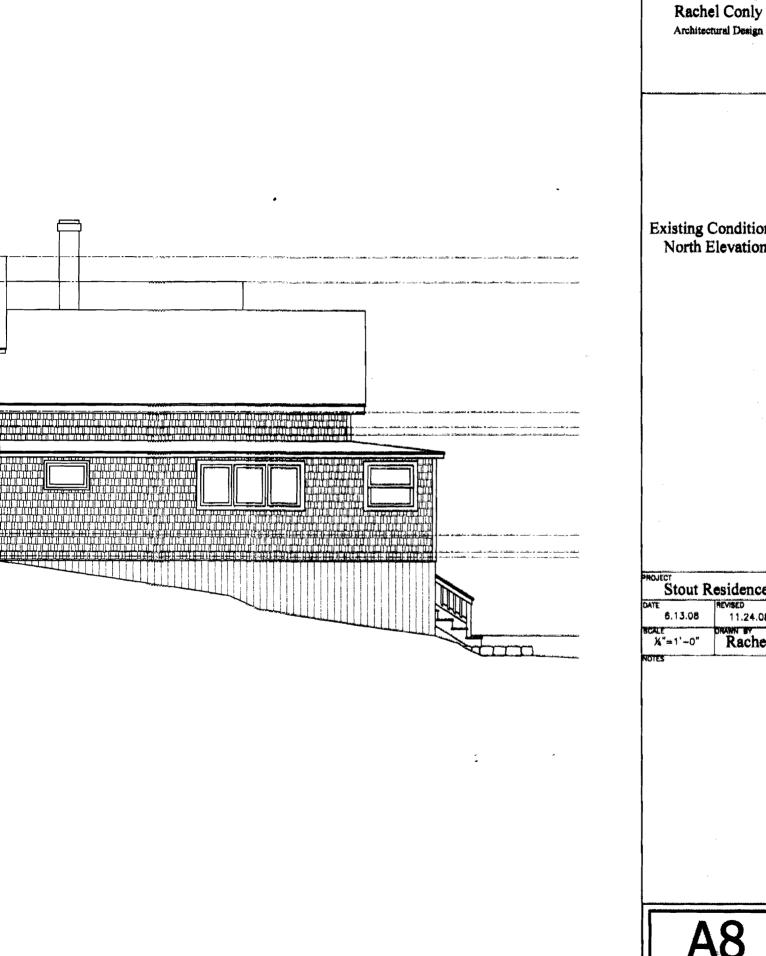
Stout Residence

DATE 6.13.08 REVISED 11.24.08

SCALE DRAWN BY Rachel

NOTES

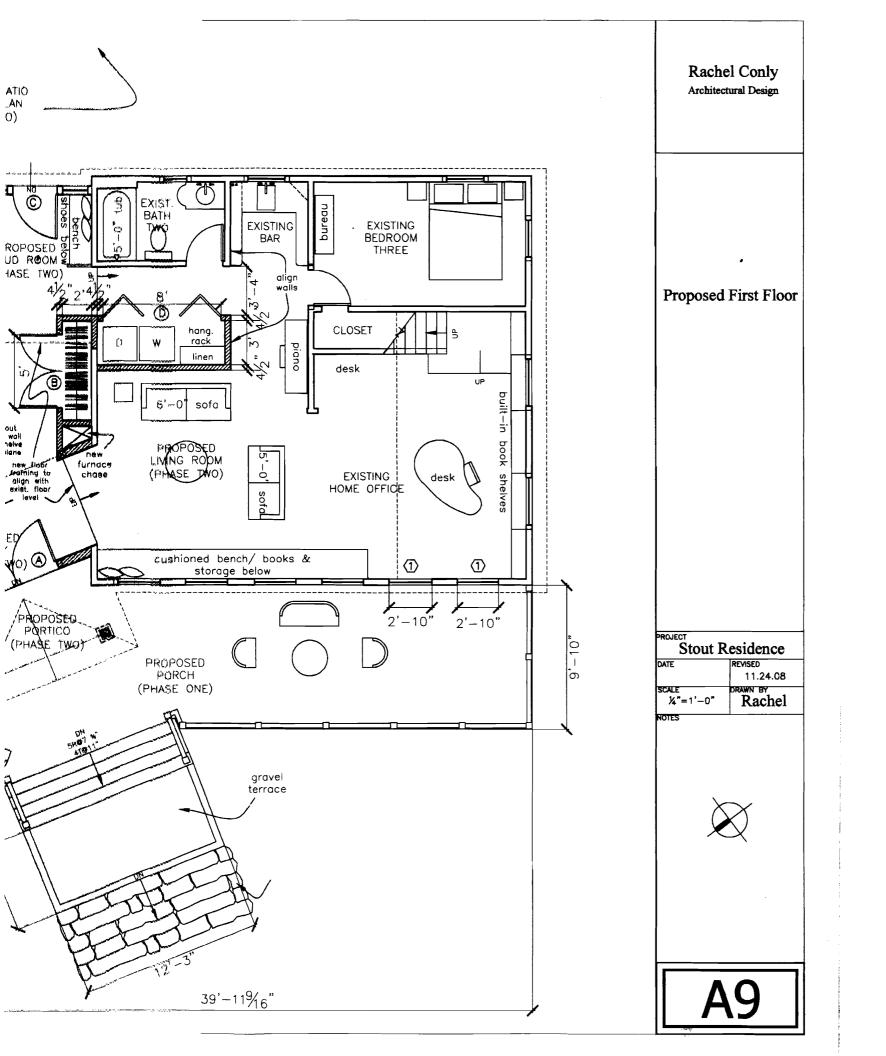
A7



Architectural Design

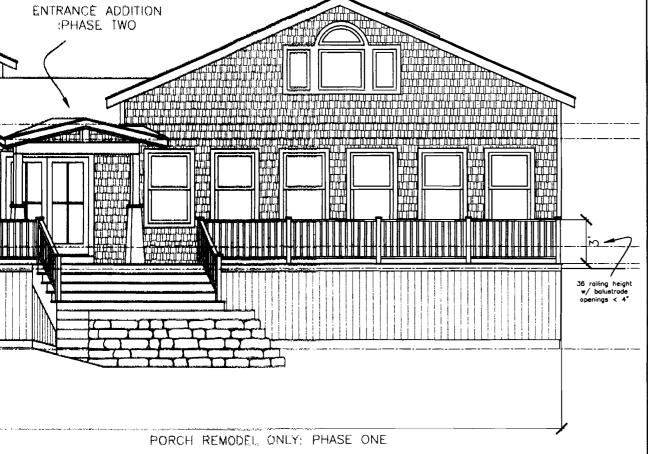
Existing Conditions: North Elevation

Stout Residence
DATE REVISED
6.13.08 11.24.08 Rachel



Rachel Conly Architectural Design

Proposed West Elevation

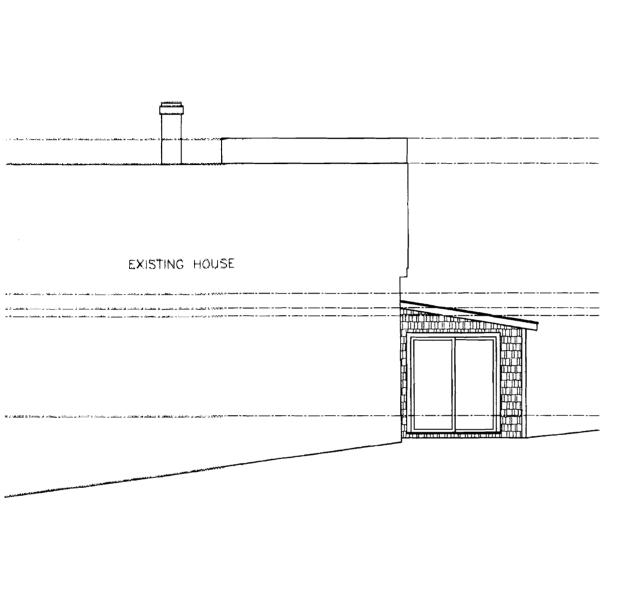


PROJECT
Stout Residence

DATE
REVISED
11.24.08

SCALE
X"=1'-0"
Rachel

A10



Rachel Conly Architectural Design

Proposed Porch Framing

Stout Residence

DATE

DATE

REVISED

11.24.08

SCALE

X"=1'-0"

Rachel

NOTES

A11

Rachel Conly NOTE: Architectural Design 1. ALL POSTS ARE 6X6 ON 10" SONOTUBE FOOTINGS 4'-0" BELOW GRADE OR PINNED TO LEDGE. 2. ALL FOUNDATION FRAMING TO BE OF ROT RESISTANT WOOD IF LOCATED WITHIN 18" OF **Proposed Porch** Framing · replace any existing rotten joist framing as necessary 9'-3\\\16" (3)2×10 girder (3)2x10 girder Stout Residence DATE 11.24.08 (3)2x12 girder EAWN BY SCALE 1'-0" Rachel 9'-39/16" 6'-17/8" 9'-39/16" $\frac{-1/8}{10 \text{ girder}} \frac{6 - 1/8}{(2)2 \times 10} \frac{5)2 \times 10}{(3)2 \times 10} \frac{3}{9}$ (3)2x12 girder (3)2x12 girder (3)2x12 stringer beam concrete footing for stone stairs & rot resistant 8x8 landscape retaining wall

5×19

<u>17∕8"</u>