

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION PERMIT

Permit Number: 040375

Please Read  
Application And  
Notes, If Any,  
Attached

This is to certify that Cassidy Christine /John Kiely  
has permission to Repair/ Replace Roof & add Room  
AT 683 Island Ave CBL 092 F014001

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 lathed or otherwise closed-in. 24 HOUR 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

**PERMIT  
DENIED**

**PERMIT  
DENIED**

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 No: 04-0375	Issue Date: <b>PERMIT DENIED</b>	CBL: 092 F014001
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Location of Construction: 683 Island Ave	Owner Name: Cassidy Christine	Owner Address: 1347 State St <i>766-5174</i>	Phone:
Business Name:	Contractor Name: John Kiely	Contractor Address: 591 Island Ave Peaks Island	Phone: 2077662026
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	Zone: <i>IR-2</i>

Past Use: Single Family Home	Proposed Use: Single Family/ Repair/ Replace Roof & add Room	Permit Fee: \$111.00	Cost of Work: \$9,700.00	CEO District: 1	<i>SH-P</i>
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:		

Proposed Project Description: Repair/ Replace Roof & add Room	Signature:	Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:	Date:	

Permit Taken By: Idobson	Date Applied For: 04/08/2004	<b>Zoning Approval</b>		
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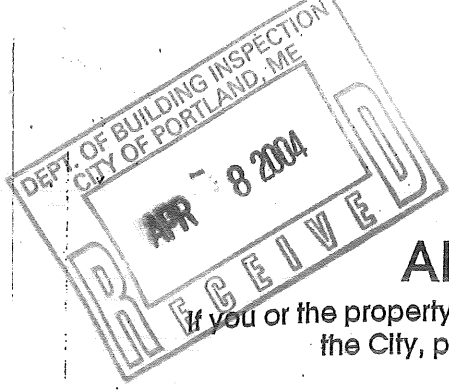
<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <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:	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <input 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:
	<b>PERMIT DENIED</b>		

**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 \_\_\_\_\_



# 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>623 Island Ave - Peaks Island -</u>		
Total Square Footage of Proposed Structure <u>1,000 existing Add 208 +/-</u>		Square Footage of Lot <u>8977</u>
Tax Assessor's Chart, Block & Lot Chart# <u>92</u> Block# <u>F</u> Lot# <u>14</u>		Owner: <u>Christine Cassidy</u>
Lessee/Buyer's Name (If Applicable)		Telephone: <u>207-262-5876</u>
Applicant name, address & telephone: <u>Christine Cassidy</u> <u>1347 State St</u> <u>Veazie, ME 04401</u>		Cost Of Work: \$ <u>3,000 labor</u> <u>6,700 materials</u> Fee: \$ <u>111.00</u>
Current use: <u>Single Family</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Same</u>		
Project description: <u>raise front roof - Add room</u>		
Contractor's name, address & telephone: <u>John Kiely - 591 Island Ave, Peaks Island</u> <u>766-2026</u>		
Who should we contact when the permit is ready: <u>Christine Cassidy</u>		
Mailing address: <u>1347 State St</u> <u>Veazie, ME 04401</u>		
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. <b>PHONE:</b> <u>207-262-5876 or</u> <u>207-990-4775</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>Christine Cassidy</u>	Date: <u>April 8, 2004</u>
--------------------------------------------------	----------------------------

**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**

1347 State Street  
Veazie, ME 04401  
April 7, 2004

Ms. Jeanie Bourke  
Ms. Tammy Munson  
City of Portland  
389 Congress Street  
Portland, ME 04101

RE: Building Permit for Property Located at 683 Island Avenue, Peaks Island

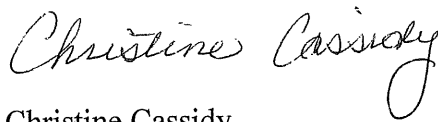
Dear Jeanie and Tammy:

I am requesting a building permit to raise the roof on the front roof-line of the above-mentioned property. We had to replace shingles last year due to severe leaking. This year the new shingles have been lifted due to severe wind and ice damage and need replacing yet one more time. The wood also needs to be replaced because of rotting. As you can see by the picture, the roof-line on the front is too flat and snow and ice build up and sit. We would like to correct this problem as soon as possible.

I have attached all of the necessary information for your review in order to obtain a permit to raise the roof line and add a small room above the front of the cottage. Please call me or my husband, Peter Leong during the day at 990-4775 or cell phone 852-2580 with any questions.

Thanking you in advance for your assistance in this matter.

Sincerely,



Christine Cassidy

Attachments



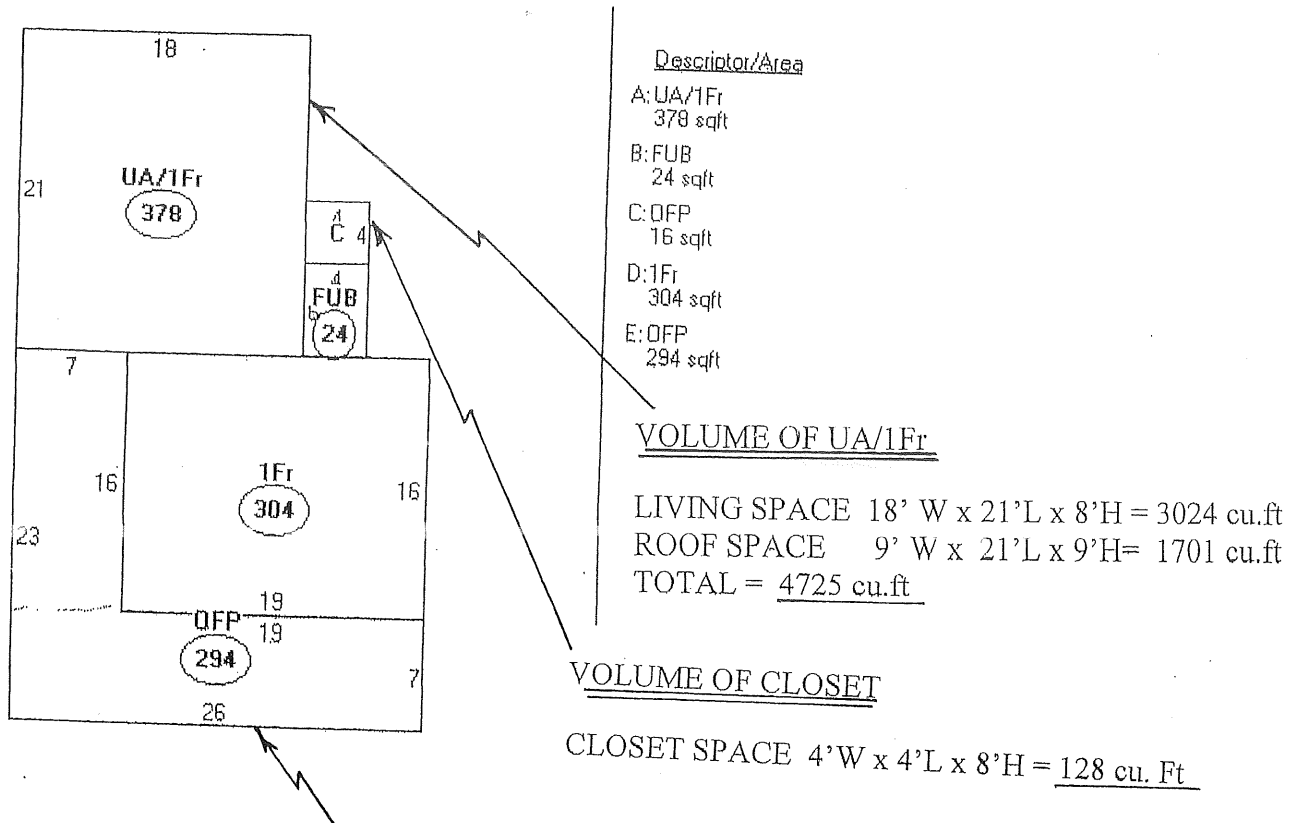


Christine Cassidy  
Peter Keong  
1347 State St  
Veazie, ME 04401

262-5876 - H  
852-2580 - C  
990-4775 - W



683 ISLAND AVE  
PEAKS ISLAND



**VOLUME OF 1Fr and OFF**

LIVING ROOM 26' W x 23' L x 8' H = 4784 cu.ft  
 ROOF SPACE 6' W x 16' L x 5' H = 480 cu.ft  
 TOTAL = 5264 cu.ft

**TOTAL VOLUME OF COTTAGE = 4725 + 5264 + 128 = 10117 cu.ft**  
**30 % of Total Volume = 3035 cu.ft**

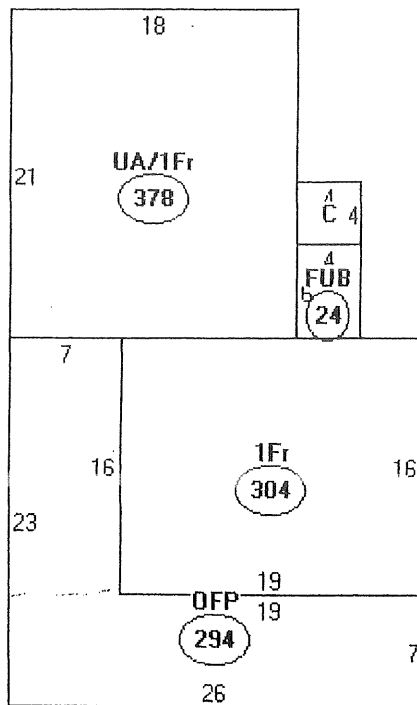
VOLUME OF NEW 10/12 GABLE ROOF = 13' W x 16' L x 10.8' H = 2246 cu.ft

VOLUME OF NEW 10/12 HIP ROOF OVER FRONT PORCH  
 1/2 x 26' W x 7' L x 5.8' H = 528 cu.ft

VOLUME OF DORMER 1/2 x 10' W x 12' L x 5' H = 300 cu.ft

**TOTAL PROPOSED VOLUME INCREASE**  
**2246 + 528 + 300 = 3074 cu.ft**

# VOLUME CALCULATION



Descriptor/Area

A: UA/1Fr  
378 sqft

B: FUB  
24 sqft

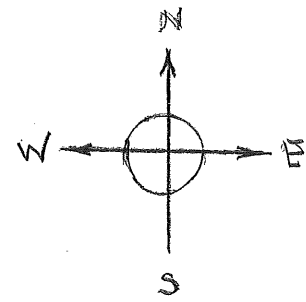
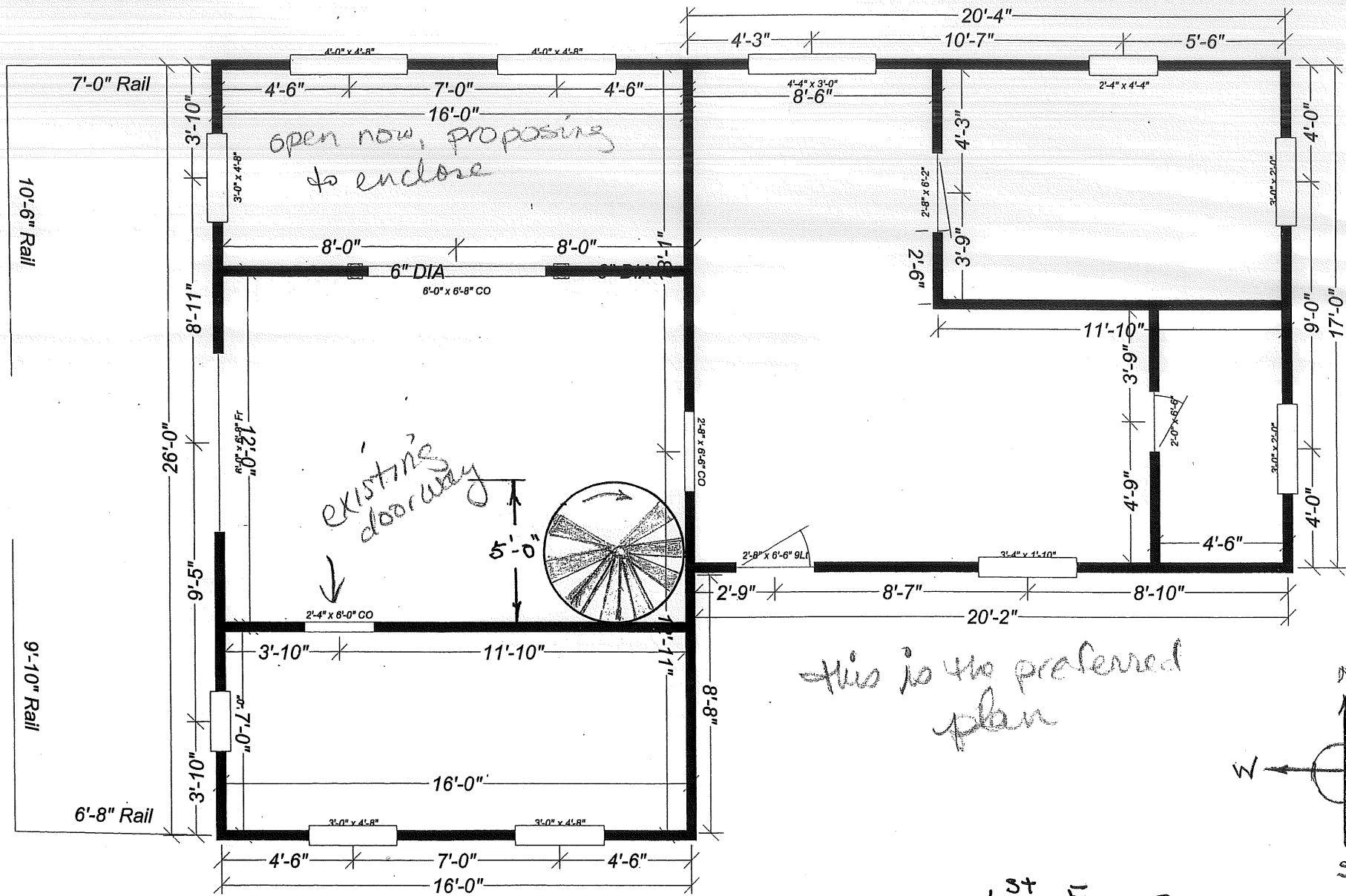
C: OFF  
16 sqft

D: 1Fr  
304 sqft

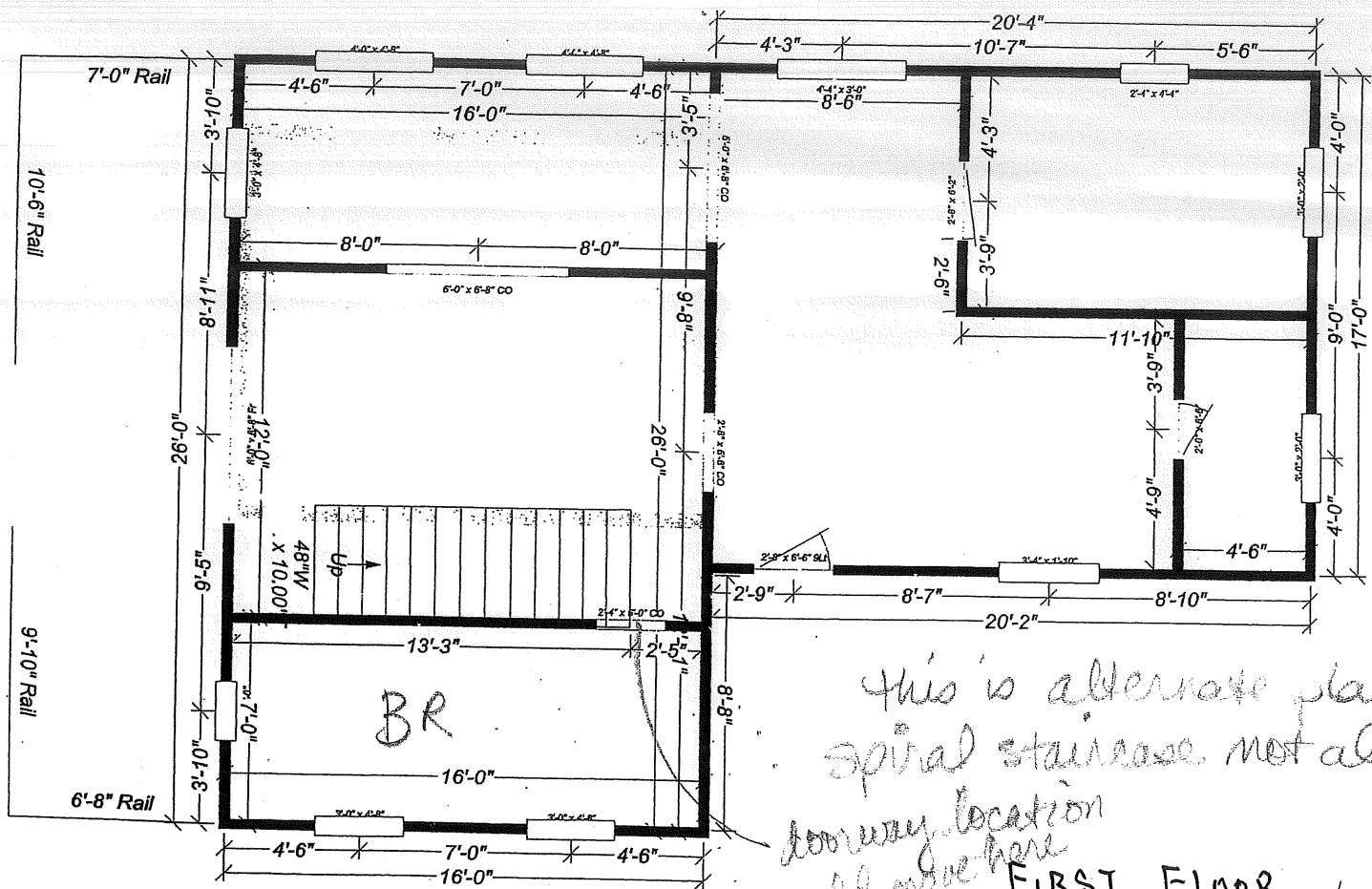
E: OFF  
294 sqft

$$304 + 378 + 4 = 686 \times 30\% \\ = 206 \text{ square feet}$$

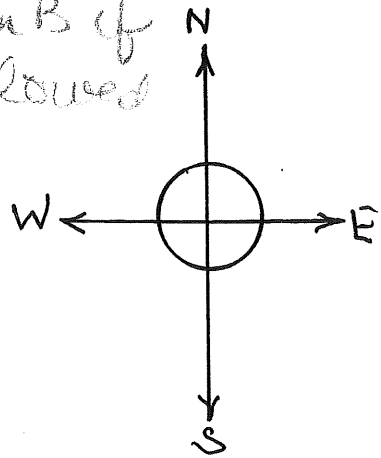
**SQUARE FOOTAGE CALCULATION**



1<sup>st</sup> FLOOR

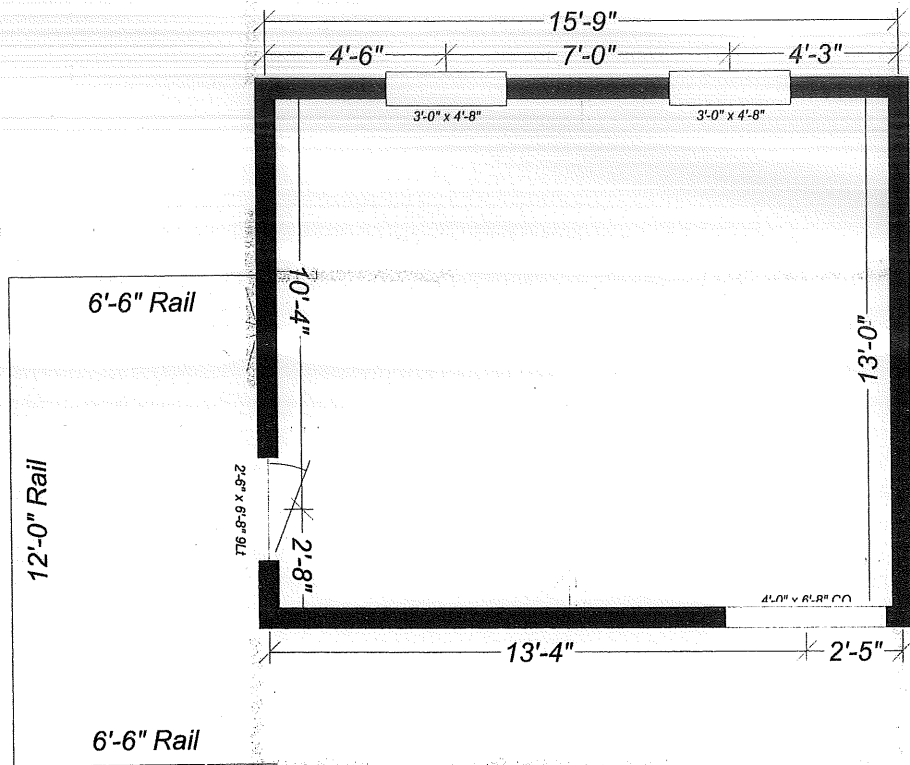


This is alternate plan B if  
 spiral staircase not allowed  
 doorway location  
 would move here  
**FIRST FLOOR**



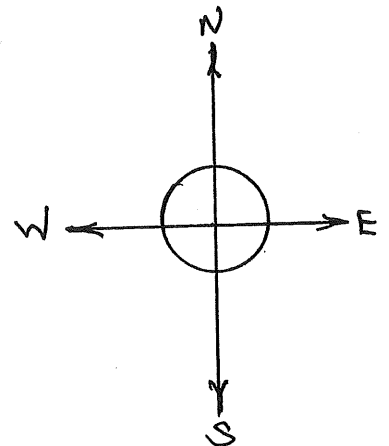
dark blue = 2nd floor  
light blue = 1st floor

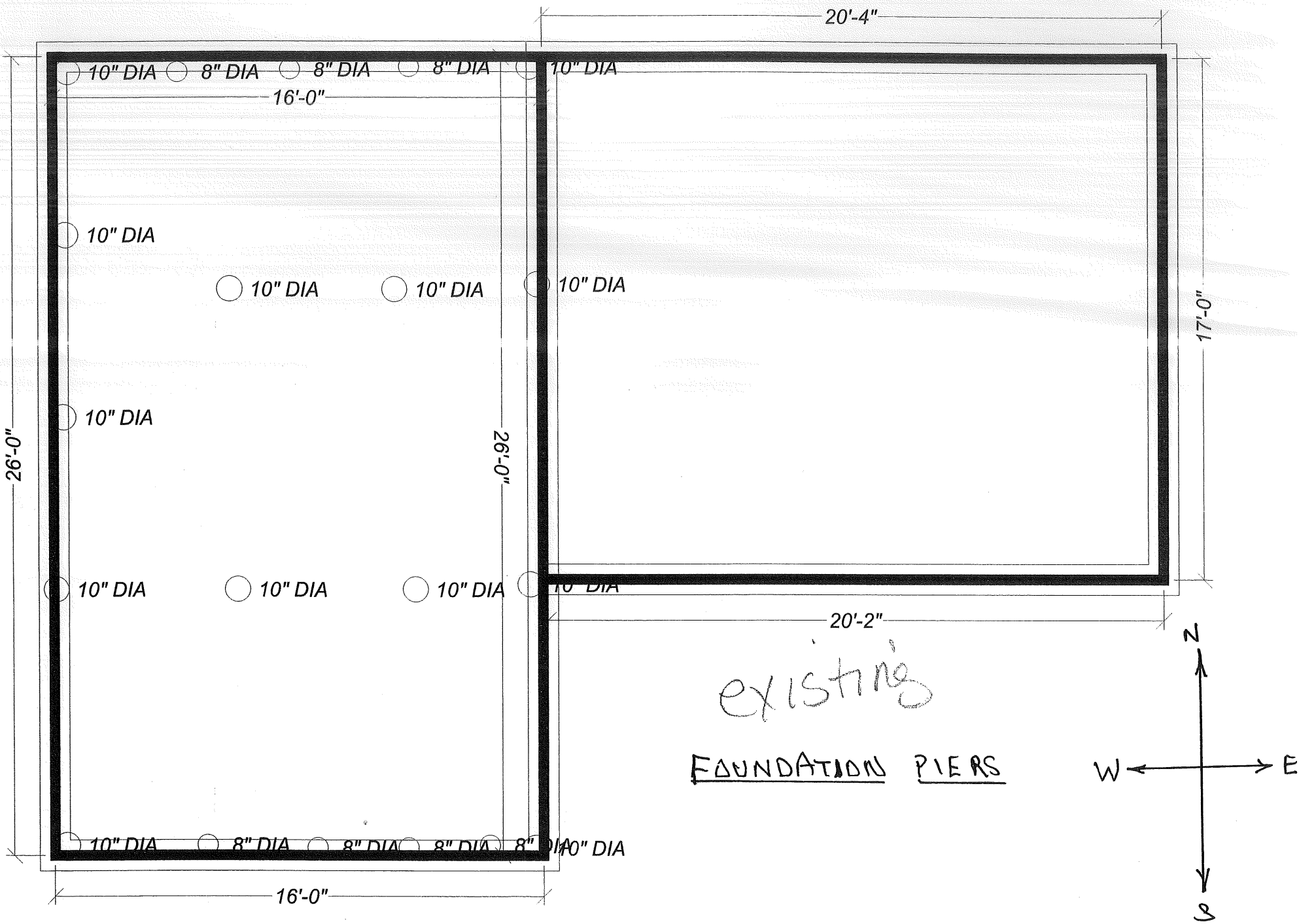
new walls 2x6 16 o.c.



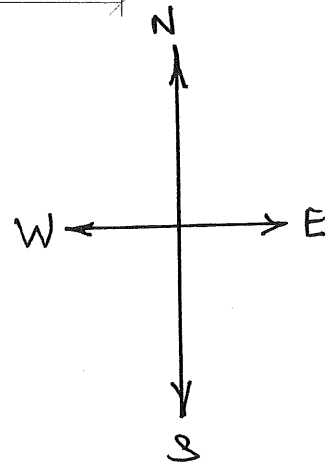
Proposed is dark blue

SECOND FLOOR

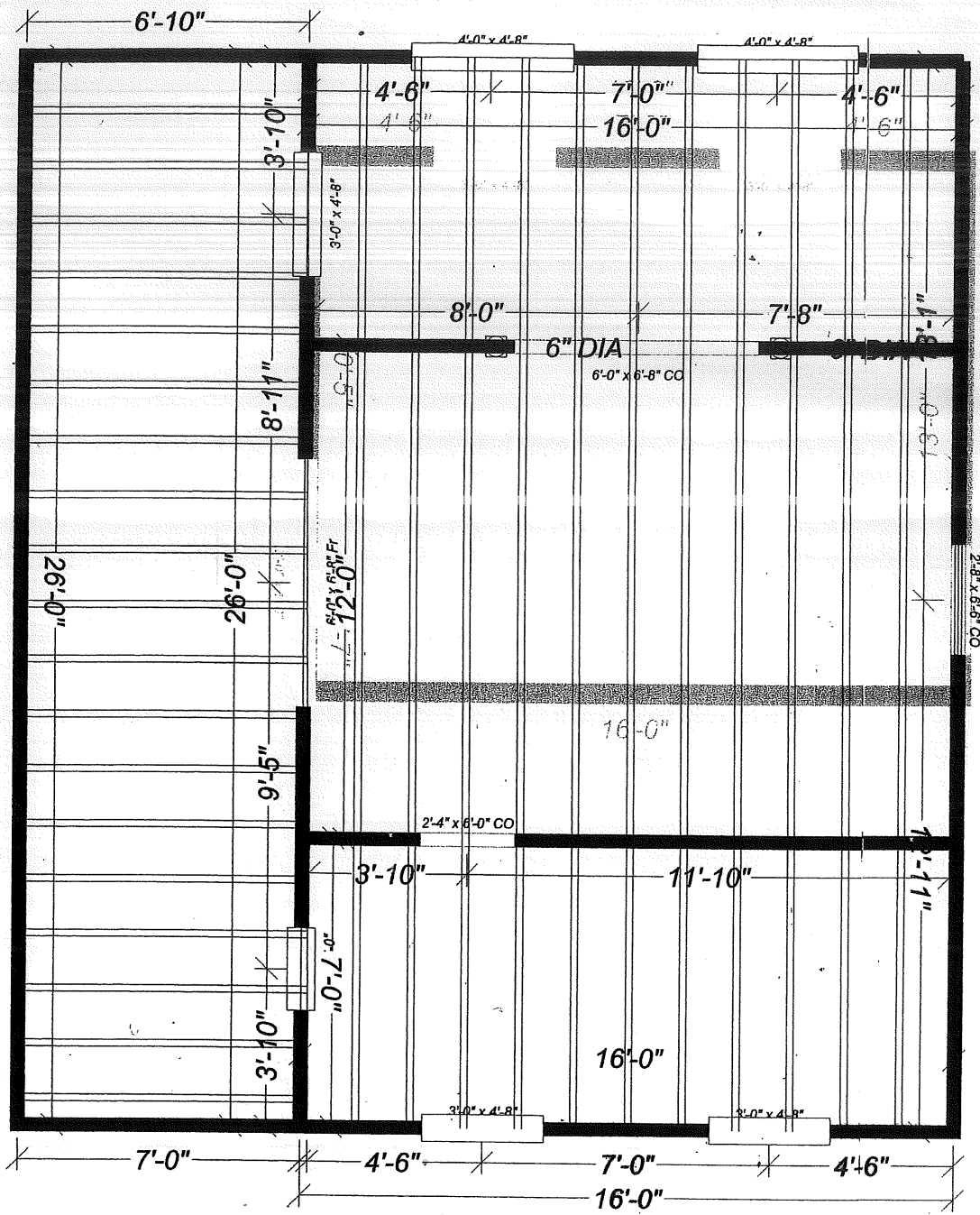




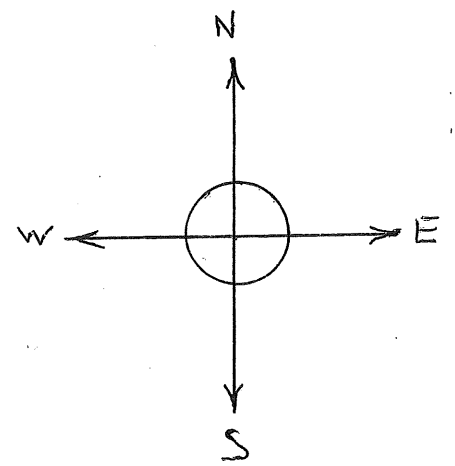
*existing*  
FOUNDATION PIERS







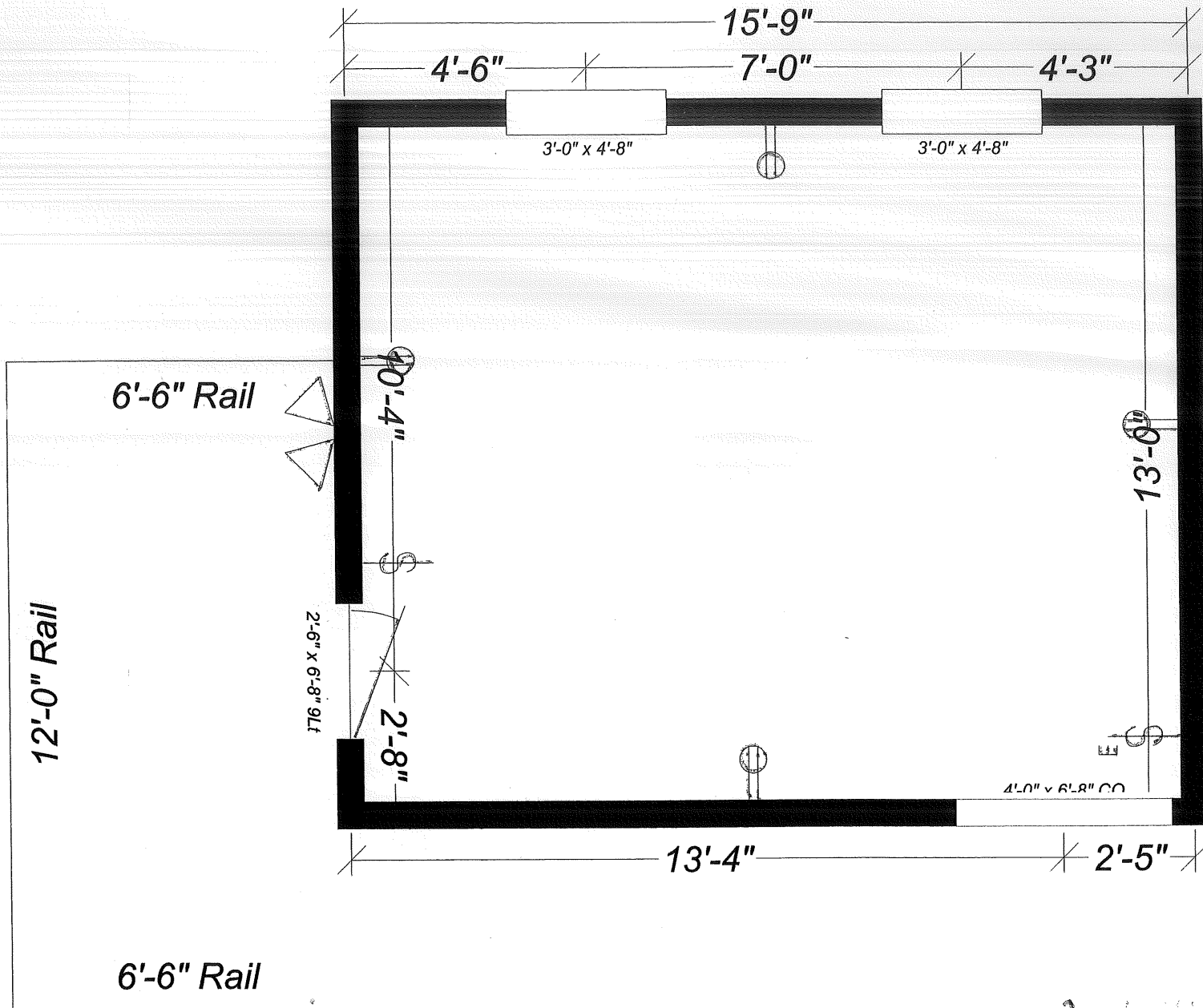
existing



1<sup>st</sup> FLOOR POINTS





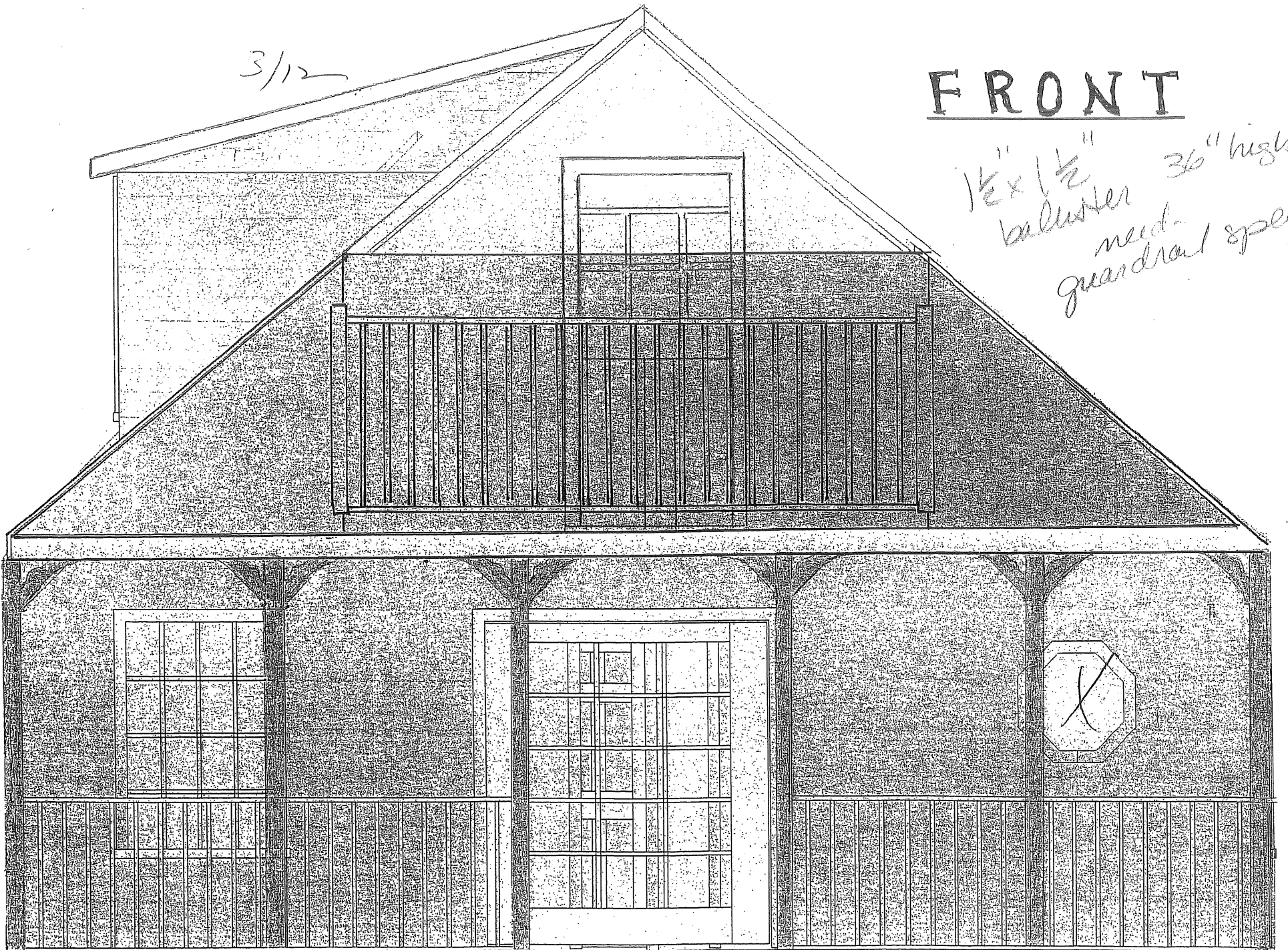


2nd Floor ELECTRICAL  
 proposed

3/12

# FRONT

$1\frac{1}{2}$ "  
baluster 36" high  
need  
guardrail specs





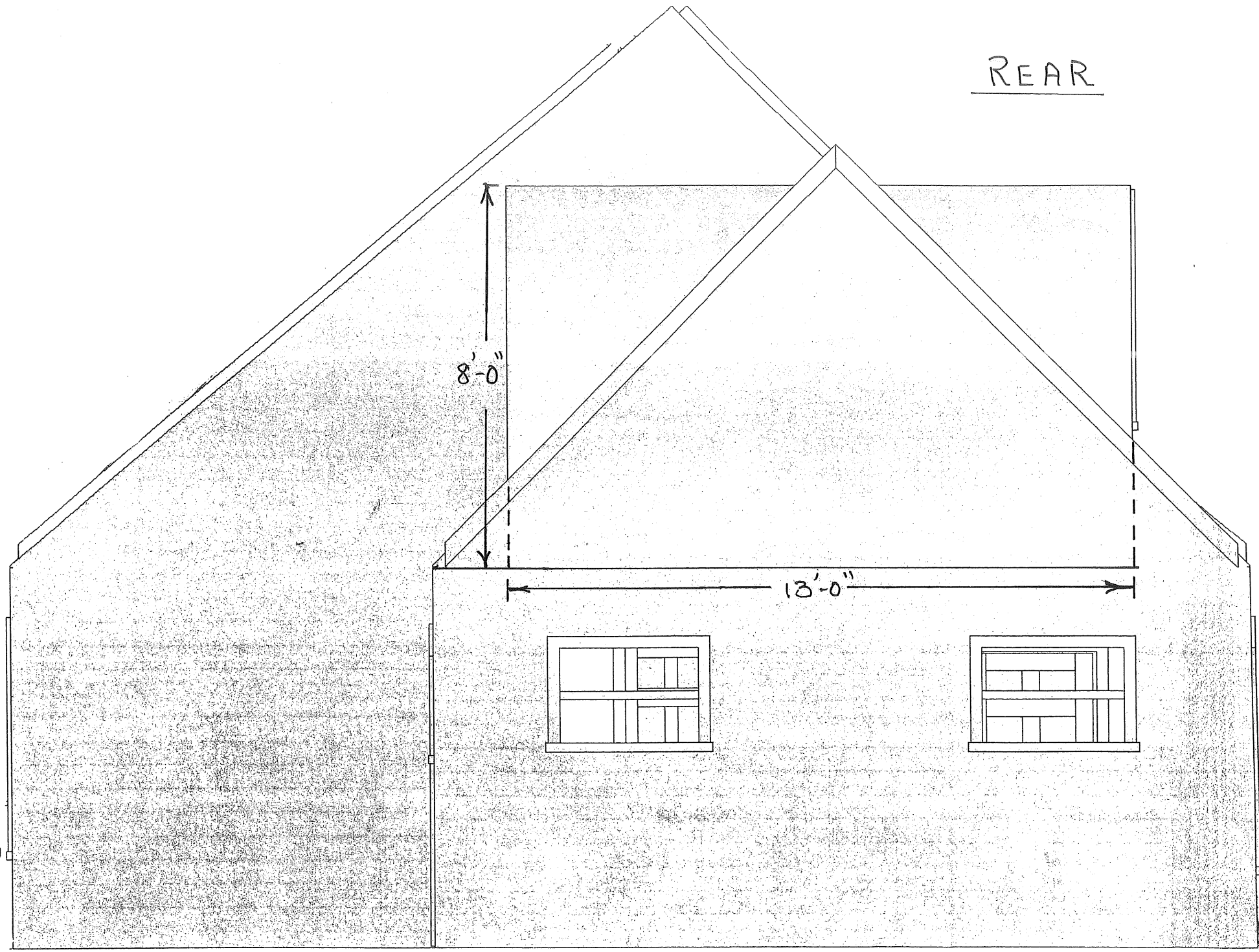
LEFT



RIGHT



REAR





# THIS IS NOT A BOUNDARY SURVEY

## INSPECTION OF PREMISES

I HEREBY CERTIFY TO Douglas Title Co.

683 Island Avenue  
Peaks Island  
Portland, Maine

Job Number: 356-04

Inspection Date: 04-30-02

Scale: 1" = 30'

Bangor Savings Bank and its Title Insurer

The monumentation is ~~not~~ in harmony with current deed description.

The building setbacks are ~~not~~ in conformity with town zoning requirements. "Grandfathered"

The dwelling does not appear to fall within the special flood hazard zone as delineated by the Federal Emergency Management Agency.

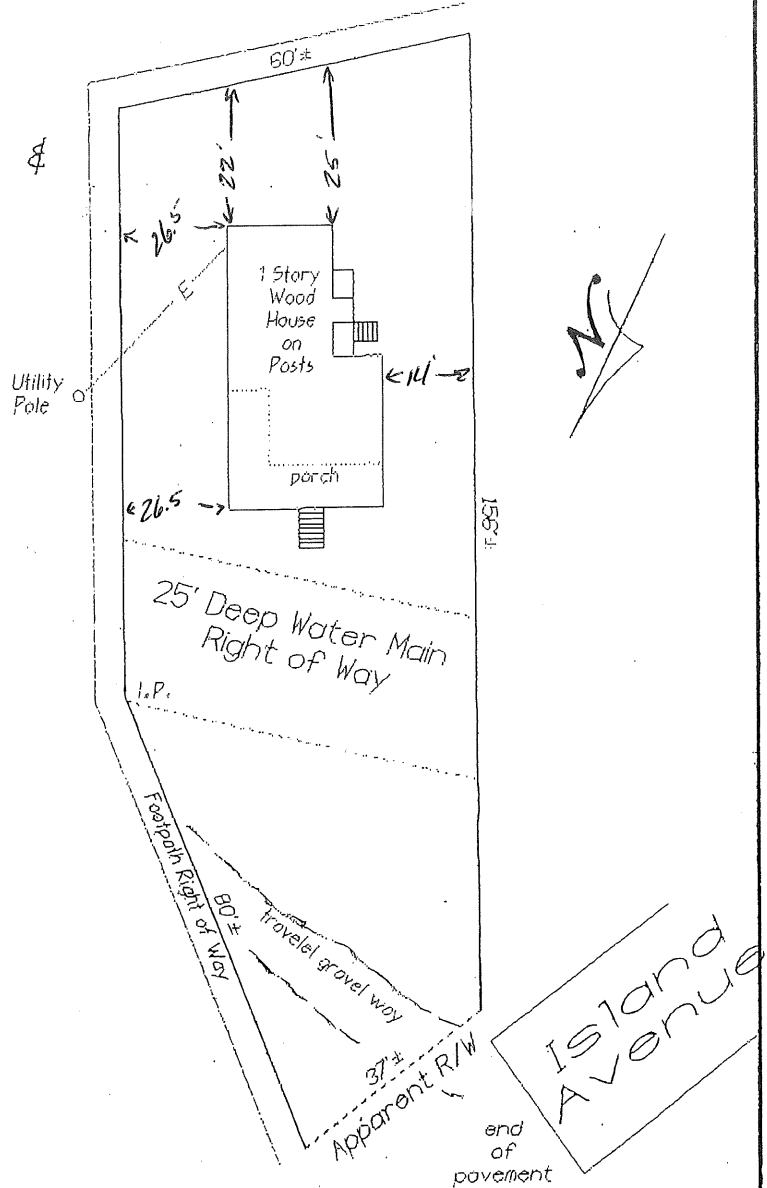
The land does not appear to fall within the special flood hazard zone as indicated on community-panel # 2300510009.B.

*8977 SF*

BUYER: Chrstine Cassidy &  
Peter Y. Leong  
SELLER: Patricia & Sam  
Wainwright

*IR-2  
Front + rear - 25'  
Sides - 20'*

*14-4136 &  
50%*



*[Handwritten signature]*

THIS PROPERTY IS SUBJECT TO ALL RIGHTS AND EASEMENTS OF RECORD. THOSE THAT ARE EVIDENT ARE SHOWN.

THIS PLAN MIGHT NOT REVEAL CONFLICTS WITH ADJUTING DEEDS.

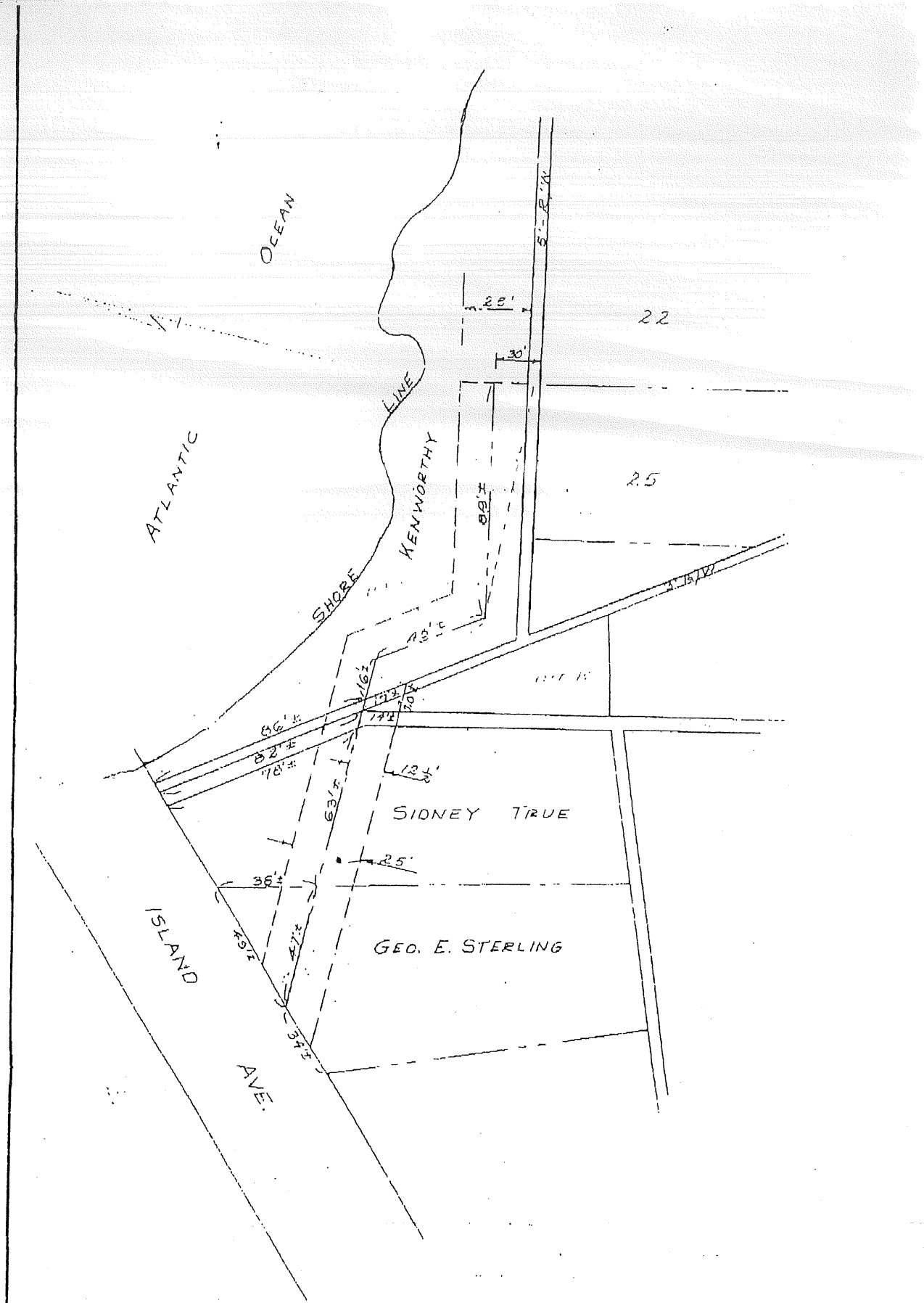
**BRUCE R. BOWMAN, INC.**  
P.O. Box 12 A  
Cumberland, Maine 04021  
Phone: (207) 829-3959  
Fax: (207) 829-3522



PLAN BOOK 14 PAGE 89 LOT 2  
DEED BOOK 13431 PAGE 129 COUNTY Cumberland

THIS PLAN IS NOT FOR RECORDING Drawn by: *[Signature]*





PEAKS ISLAND

LOCATION IN R/W FOR DEEP WATER MAIN - EVERGREEN LANDING  
 W. O. NO. F. C. \_\_\_\_\_ ACCT. NO. \_\_\_\_\_ SCALE \_\_\_\_\_ NO SCALE \_\_\_\_\_

PORTLAND WATER DISTRICT | PLAN NO. \_\_\_\_\_  
 16 CASCO ST. | PORTLAND, ME

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering  
6071 287-6072 FAX 6071 287-6172

Town, City, Plantation

PORTLAND (PEAKS ISLAND)

Street, Road Subdivision

683 ISLAND AVENUE

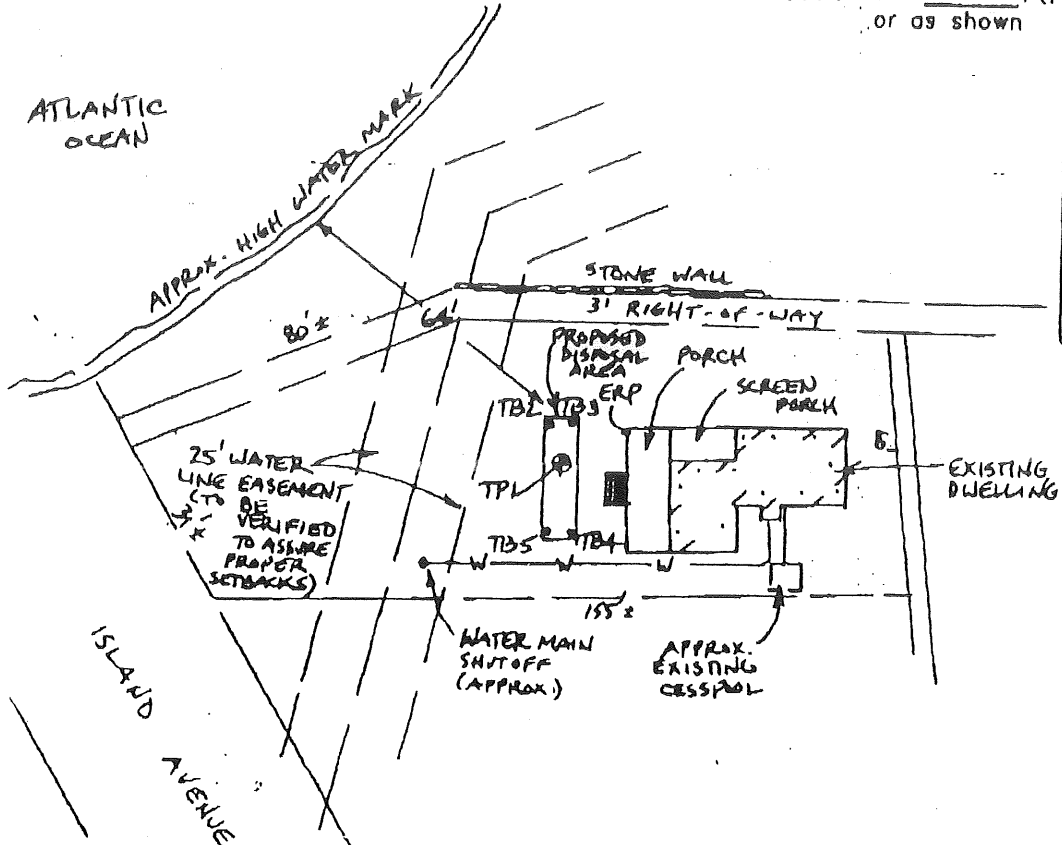
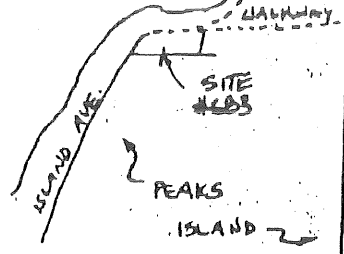
Owner's Name

MC HOWARD (PATRICIA WAINRIGHT)

**SITE PLAN**

Scale 1" = \_\_\_\_\_ Ft.  
or as shown

**SITE LOCATION PLAN**  
(Map from Maine Atlas recommended)



**SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)**

Observation Hole TPI  Test Pit  Boring  
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (feet)	Texture	Consistency	Color	Mottling
0	SANDY LOAM		DARK BROWN	
10	LOAMY SAND	FRIABLE	DARK YELLOWISH BROWN	
20	FINE MEDIUM		YELLOWISH BROWN	
30	SAND		MIXED LIGHT YELLOWISH BROWN	FELLY FAINT
40				
50	LIMIT OF EXCAVATION (REFUSAL)			

Soil Classification: 5 A/C Slope: \_\_\_\_\_ %  
Limiting Factor: 32"  
Profile: \_\_\_\_\_ Condition: \_\_\_\_\_  
 Ground Water  
 Restrictive Layer  
 Bedrock  
 Pit Depth

Observation Hole TB 2-5  Test Pit  Boring  
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (feet)	Texture	Consistency	Color	Mottling
0	TB 2 = 38" TO REFUSAL			
10	TB 3 = 34" TO REFUSAL			
20	TB 4 = 34" TO REFUSAL			
30	TB 5 = 38" TO REFUSAL			
40				
50				
60				

Soil Classification: \_\_\_\_\_ Slope: \_\_\_\_\_ %  
Limiting Factor: 34"  
Profile: \_\_\_\_\_ Condition: \_\_\_\_\_  
 Ground Water  
 Restrictive Layer  
 Bedrock  
 Pit Depth

Albert Feick  
Site Evaluator Signature

163

SE

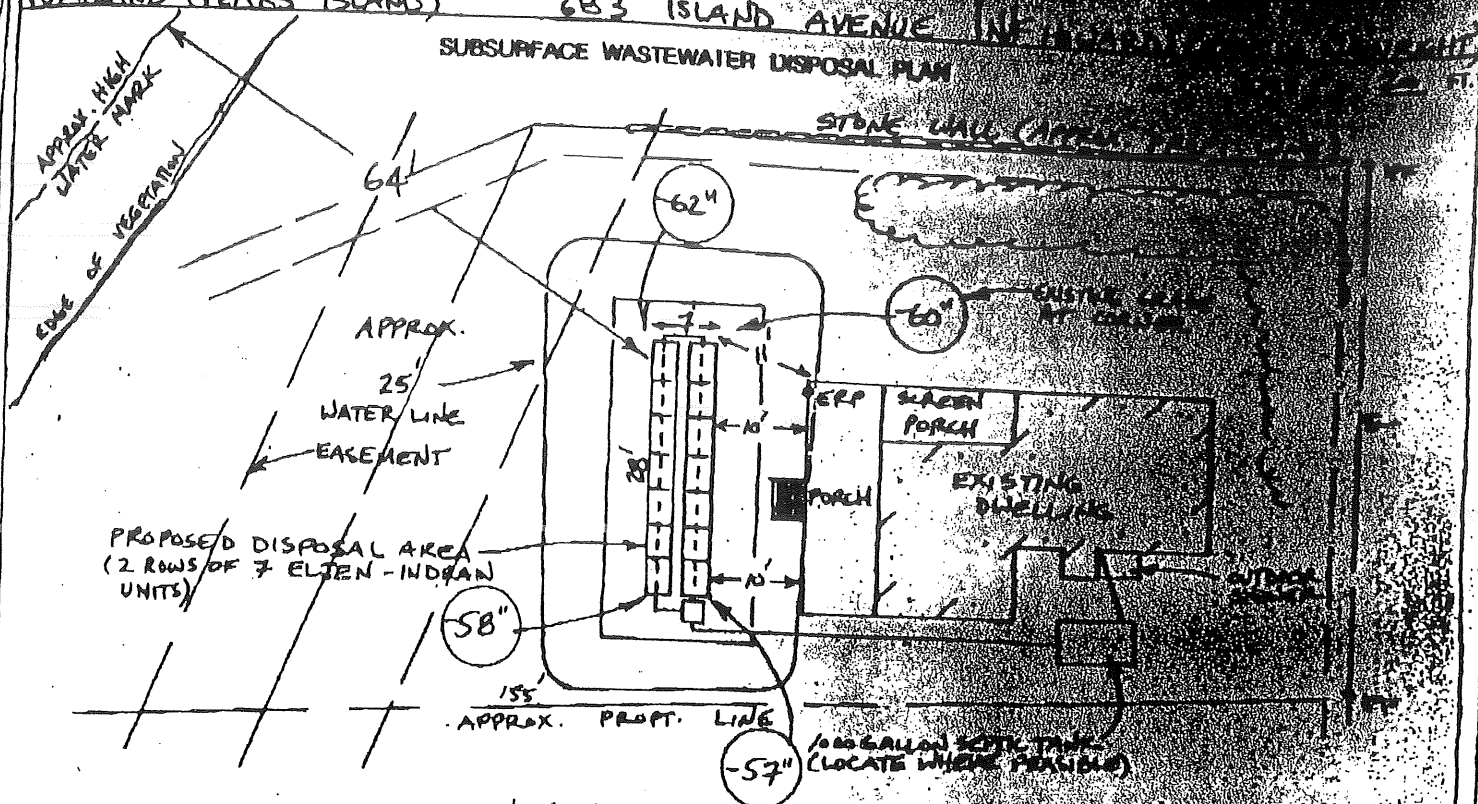
10/9/97  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation  
**PORTLAND (PEAKS ISLAND)**

Street, Road, Subdivision  
**683 ISLAND AVENUE NE PEAKS ISLAND**

## SUBSURFACE WASTEWATER DISPOSAL PLAN



NOTE: VERIFY WATER LINE EASEMENT LOCATION AND PROPERTY LINES TO ASSURE PROPER SETBACKS. RELOCATE WATER MAIN 10' MIN. FROM DISPOSAL AREA.

### FILL REQUIREMENTS

Depth of Fill (Upslope) \_\_\_\_\_  
 Depth of Fill (Downslope) \_\_\_\_\_

16" - 19"  
17" - 21"

### CONSTRUCTION ELEVATIONS

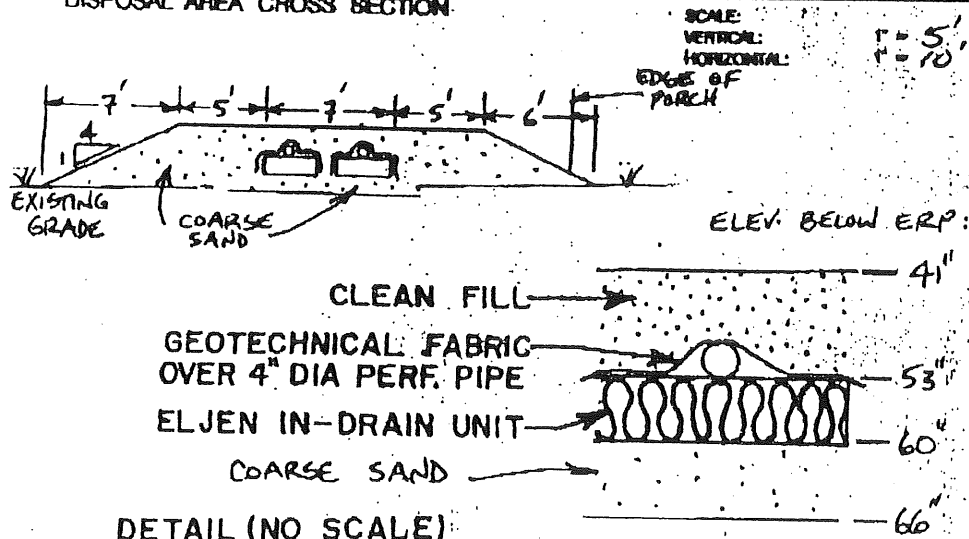
Finished Grade Elevation \_\_\_\_\_  
 Top of Distribution Pipe or Proprietary Device \_\_\_\_\_  
 Bottom of Disposal Area \_\_\_\_\_

-41"  
-53"  
-66"

### ELEVATION REFERENCE POINT

Location & Description NAIL IN CORNER POST OF PORCH ABOVE CONCRETE FOOTING  
 Reference Elevation 00"

### DISPOSAL AREA CROSS SECTION



DETAIL (NO SCALE)

*Alfred Frick*

Site Evaluator Signature

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SE

10/9/97

Date

DATE 2-20-04

SALESMAN Carl Farris

**LAKEVIEW LUMBER CO.**  
 Route 202 & 9 P.O. Box 344  
 China, Maine 04926  
 Tel: (207) 968-2498

Total with tax

~~6726.78~~  
 6726.78

LUMBER & BUILDING SUPPLIES - DOORS - WINDOWS - STORM SASH  
 PAINTS - HARDWARE - INSULATION - MASON SUPPLIES  
 Hours: Mon - Sat 7 - 5 Sun 9 - 3

**QUOTATION**

FAX 990-4409  
 call 552-2775  
 PHONE 262-5876

CUSTOMER'S NAME Petek Leving

ADDRESS \_\_\_\_\_ JOB LOCATION \_\_\_\_\_

QUANTITY	ITEM	DESCRIPTION	UNIT PRICE	TOTAL
6		4/4 x 8 ft post	665	3990
70		2x6x8 KD studs	330	23100
7		2x6x16 plate	713	4991
4		2x6x12 plate	540	2160
4		2x6x16 plates	713	2853
50		2x4x8 studs	220	11000
8		2x4x16 jelds	713	5704
30		2x8x8 Box Joist	450	13500
15		2x8x16 Floor Joist	899	13485
16	per	3/4 x 8 Advanta Floor Mat	1999	31984
14	per	2x8x8 10 Rafter 1686	1250	18060
14	per	2x10x12 Rafter 1686	98	13272
1		2x10x16 rafter post	1290	1290
200	LF	2x6 hip rafter	450	9000
3	per	12 ft Plywood	3430	10360
10	per	5x8x8 B#2 Roof Tr	1799	35980
3	per	3' x 75' gable 10x10 studs	8200	24600
10	per	8" x 10' dry edge	350	3500
22	per	25 year shingles	1150	25300
1	per	step flashing	1495	1495
22	per	7/16 OSB Wall	1920	42240
1	per	9x100 Dow 10x10x10	8200	8200
1		32x57x4 milled cement	2800	2800
48		36x48 Hung Window	1180	47200
1		6/6 6/8 Double door	4000	4000
2		9x4x10 PT RAIL	695	1390
2		4x4x4 PT Post	665	1330
4		9x4x10 RAIL PT	3.17	1268
50		1 1/2 x 1 1/2 x 36 ft Bar grates	85	4250
2		4x4x8 angle on post	1050	2100

Quote is good according to stock on hand.  
 Otherwise dated \_\_\_\_\_

A finance charge of 1.5% per month (annual rate of 18%) will be computed monthly on all monies owed in excess of 30 days.

Extension errors are subject to correction.

Sub Total	450814
Tax	225.41
<b>TOTAL</b>	<b>47335.60</b>

DATE 3-20-04  
 SALESMAN Carl Lewis

**LAKEVIEW LUMBER CO.**  
 Route 202 & 9 P.O. Box 344  
 China, Maine 04926  
 Tel: (207) 968-2498

LUMBER & BUILDING SUPPLIES - DOORS - WINDOWS - STORM SASH  
 PAINTS - HARDWARE - INSULATION - MASON SUPPLIES  
 Hours: Mon - Sat 7 - 5 Sun 9 - 3

**QUOTATION**

CUSTOMER'S NAME Peter Leung PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ JOB LOCATION \_\_\_\_\_

QUANTITY	ITEM	DESCRIPTION	UNIT PRICE	TOTAL
<del>2</del>		1x6x16 <del>boards</del> 2nd	949	75.52
2		1x6x12 <del>boards</del> 2nd	288	14.16
4		1x6x10 <del>boards</del> porch	591	23.60
3		1x2x16 <del>boards</del>	1120	56.00
30	AD	Cedar KLP / Shingle 2' x 2' clear	1530	465.00
25	lbs	1/2" cedar gable stud nail	99	24.75
15	PI	6x15 <del>boards</del> KRAFT face	1788	268.20
8	Boys	9x15 " " ceiling	2789	223.12
		Material & misc allowance		1500.00
50		2x6x8 studs 2' x 14' floor	330	165.00
4		2x6x19 plates or trim	713	28.52
12	ea	2x6x16 ceiling post	713	85.56
100	LF	1x4 brace ceiling line	14	14.00
4		48" CORA Ridge vent	950	38.00
14	ps	3/4" x 4 1/2" OSB end plate	189	265.80
				1897.31
				94.87
				1992.18

Quote is good according to stock on hand.  
 Otherwise dated \_\_\_\_\_  
 A finance charge of 1.5% per month (annual rate of 18%) will be computed monthly on all monies owed in excess of 30 days.  
 Extension errors are subject to correction.

Sub Total	1897.31
Tax	94.87
TOTAL	1992.18



Delete Schedule Add End Print Permit Print C of O Print Insp Invoicing Taxes

Prmt Tex193 14996 Constr Type New Num1 2

Permit Nbr 04-0375 Location of Construction 683 Island Ave Appl. Date  
Status Hold Permit Type Single Family Issue Date  
CBL 092 F014001 District Nbr 1 Estimated Cost \$9,700.00 Date Closed

Comment Date	Comment	Add	Delete	Save
04/22/2004	Spoke w/property owner - allowed to do a 50% vertical expansion. Need to submit new plans			
	Name imm Follow Up Date Completed			
04/15/2004	Spoke w/Lionel Plante, they will look for septic design capacity, may not get to it until next we			
	Name kwd Follow Up Date Completed			
04/14/2004	4/14/2004: called for additional information re # of BRs existing, # of BRs septic is approved for, differentiation of submitted floorplans as to what is existing, what is proposed. Kwd			
	Name kwd Follow Up Date Completed			

CreatedBy idobson CreateDate 04/08/2004 ModBy kwd ModDate 04/15

PERMIT DENIED



current BRs 2  
use of new room BR  
optic design # BRs  
(Lionel P. Lante & Assoc - call them)  
766-2508 - they'll look for it  
existing / proposed -  
which is which

4/14/04 - LM

~~need site plan~~

does anyone  
add to # of BRs  
space # limit  
in TR 2?