

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

Please Read  
 Application And  
 Notes, If Any,  
 Attached

**BUILDING INSPECTION  
 PERMIT**

Permit Number: 041355

This is to certify that Leslie Joyce E/Ownerhas permission to Build 6'x10' storage shedAT 591 Island Ave

CBL 092 E001001

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

Director - Building &amp; 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: 04-1355	Issue Date:	CBL: 092 E001001
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Location of Construction: 591 Island Ave	Owner Name: Leslie Joyce E	Owner Address: 591 Island Ave	Phone: 766-2026
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone: 0000000000
Lessee/Buyer's Name	Phone:	Permit Type: Sheds	Zone: IR-2

Past Use: Single Family Residence	Proposed Use: Single Family Residence w/ 6'x10' unattached storage shed	Permit Fee: \$30.00	Cost of Work: \$680.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: accessory	

Proposed Project Description: Build 6'x10' storage shed	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: dmn	Date Applied For: 09/10/2004	<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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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# 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>591 ISLAND AVE. PEAKS ISLAND</u>		
Total Square Footage of Proposed Structure <u>60 SQ FT</u>	Square Footage of Lot <u>3312 SQ FT</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>090</u> Block# <u>E</u> Lot# <u>001</u>	Owner: <u>Joyce E. Leslie</u>	Telephone: <u>766-2026</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Joyce E. Leslie</u> <u>591 ISLAND AVE</u> <u>PEAKS ISLAND ME</u> <u>766-2026</u>	Cost Of Work: \$ <u>680.</u> % Fee: \$
Current use: <u>Residence</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>STORAGE SHED</u>		
Contractor's name, address & telephone: <u>owner built</u>		
Who should we contact when the permit is ready: <u>Joyce E. Leslie</u>		
Mailing address: _____		
<p>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></p>		

BUILDING INSPECTION  
 DEPARTMENT  
 SEP 10 2004  
 J E I W L

PERMIT  
 DENIED

**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>Joyce Leslie</u>	Date: <u>8-22-04</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



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	092 E001001
Location	591 ISLAND AVE
Land Use	SINGLE FAMILY
Owner Address	LESLIE JOYCE E 591 ISLAND AVE PEAKS ISLAND NE 04108
Book/Page	10356/204
Legal	92-E-1 ISLAND AVE GARDEN RD PEAKS ISLAND 2312 SF

*IR-2*

*3,328.55*

### Valuation Information

Land	Building	Total
\$55,910	\$27,200	\$84,110

### Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	
1928	Old Style	2	1008	0.076	
Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
3	1		5	None	Full

### Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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### Sales Information

Date	Type	Price	Book/Page
10/23/1992	LAND + BLDING	\$68,000	10356-204

### Picture and Sketch

[Picture](#)

[Sketch](#)

[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!**