

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 050154

This is to certify that Macvane Gary J/Owner
has permission to Remove existing greenhouse replace a 20x greenhouse
AT 0 Island Ave 109B D028001

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 occupied or enclosed-in. **HEAR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

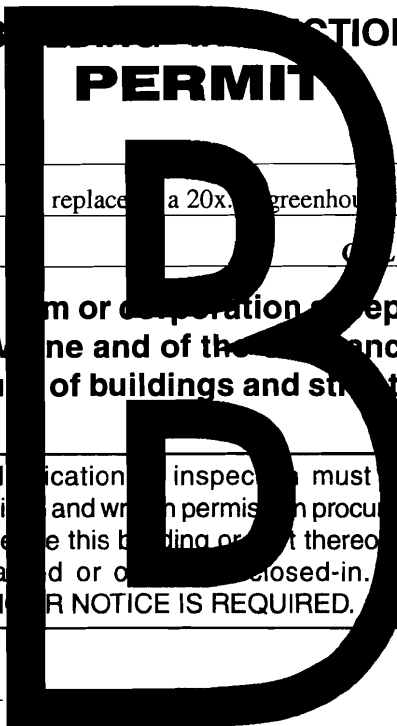
OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____

Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



Abandoned + Expired Application
1/17/08

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-0154	Issue Date:	CBL: 109B D028001
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Location of Construction: 0 Island Ave <i>C.I.</i>	Owner Name: Macvane Gary J	Owner Address: Po Box 17	Phone:
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: <i>Green house</i> Alterations Dwellings	Zone: <i>I-B</i>

Past Use: <i>single family</i>	Proposed Use: <i>single family remove existing greenhouse and replace w/ a 20x30 ft greenhouse</i>	Permit Fee: \$39.00	Cost of Work: \$1,469.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>R3</i> Type: <i>accessory</i>	

Proposed Project Description:
Remove existing greenhouse and replace w/ a 20x.30 greenhouse
Permit Application Abandoned + Applied

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: dmartin	Date Applied For: 02/10/2005	<i>1/17/08</i>	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>Paul 10 Zone C</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>OK</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>2/22/05</i>	<p>Zoning Appeal</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>Historic Preservation</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>[Signature]</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

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>Sunset Avenue Cliff Island Island Ave</u>		
Total Square Footage of Proposed Structure <u>600</u>	Square Footage of Lot 78000 <u>9900</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>109 B D 28</u>	Owner: <u>Gary MacVane</u>	Telephone: <u>766-2669</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Gary MacVane</u> <u>PO Box 17</u> <u>Cliff Island ME 04019</u>	Cost Of Work: <u>\$1,469.00</u> Fee: \$ <u>39.00</u>
Current use: <u>Single</u>	<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="margin: 0;">DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME</p> <div style="border: 1px solid black; padding: 5px; margin: 5px auto; width: 80px; text-align: center;"> <p style="margin: 0;">FEB 9 2005</p> </div> <p style="margin: 0; font-weight: bold; font-size: 1.2em;">RECEIVED</p> </div>	
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: <u>greenhouse replace Existing w/a 20x30</u>		
Contractor's name, address & telephone: <u>Gary MacVane, PO Box 17, Cliff Island 04019</u> <u>766-2669</u>		
Who should we contact when the permit is ready: <u>Gary MacVane</u>		
Mailing address: <u>same as above</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. PHONE: <u>766-2669</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><i>Gary MacVane</i></u>	Date: <u>2-6-05</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 4th 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	109B D028001
Location	ISLAND AVE
Land Use	SINGLE FAMILY
Owner Address	MACVANE GARY J PO BOX 17 CLIFF ISLAND ME 04019
Book/Page	13673/302
Legal	109B-D-28 ISLAND AVE CLIFF ISLAND 9900 SF

Valuation Information

Land	Building	Total
\$21,210	\$42,110	\$63,320

Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	
1895	Old Style	1.5	1609	0.227	
Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
4	1		7	None	Pier/slab

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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Sales Information

Date	Type	Price	Book/Page
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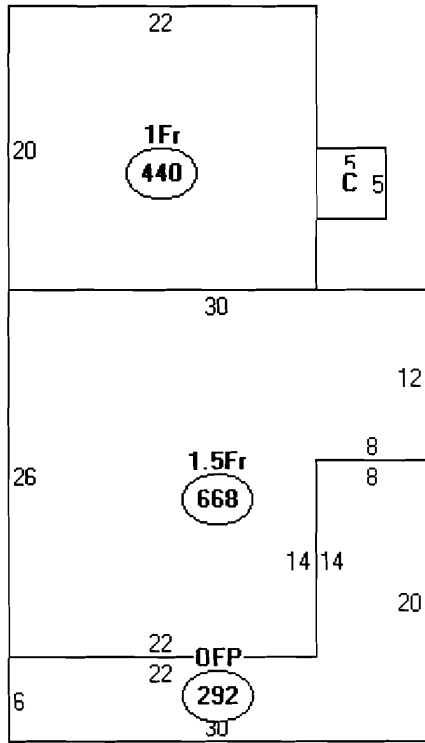
Picture and Sketch

Picture	Sketch	Tax Map
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[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!



Descriptor/Area

- A: 1.5Fr
668 sqft
- B: 1Fr
440 sqft
- C: WD
25 sqft
- D: OFP
292 sqft

$$\begin{array}{r}
 \text{Lot} = 9900 \\
 \times 50\% \\
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 4950
 \end{array}$$