

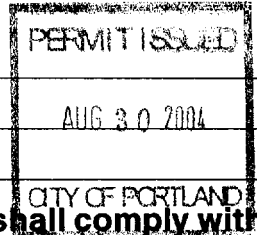
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

BUILDING DEPARTMENT

Please Read Application And Notes, If Any, Attached

Permit Number: 041146



This is to certify that Childs Frank L &/Boucher, J

has permission to build 20' x 20' addition

AT 845 Seashore Ave

091 M009001

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.

Notification of inspection must be given and work in progress must be reported before this building or part thereof is occupied or closed-in. 24 HOUR NOTICE IS REQUIRED.

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

Apply to Public Works for street line and grade if nature of work requires such information.

OTHER REQUIRED APPROVALS

- Fire Dept. \_\_\_\_\_
- Health Dept. \_\_\_\_\_
- Appeal Board \_\_\_\_\_
- Other \_\_\_\_\_

DepartmentName

*[Signature]*  
8/11/04  
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



# Residential 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: <b>845 SEASHORE AVE.</b>		
Total Square Footage of Proposed Structure	Square Footage of Lot <b>13,042 SF</b>	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <b>M                      9</b>	Owner: <b>FRANK + ELIZABETH CHINDS</b>	Telephone: <b>766-2431</b>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <b>WILL WINKELMAN WHITTEN ARCHITECTS 37 SILVER ST.</b>	Cost Of Work: \$ <b>115 K</b>  Fee: \$ <b>1056.</b>
Current Specific use: <b>SINGLE FAMILY</b>		
Proposed Specific use: <b>SINGLE FAMILY</b>		
Project description: <b>TWO STORY 19' X 20' ADDITION W/ ONE STORY 8' X 16' 3-SEASON PORCH.</b>		
Contractor's name, address & telephone: <b>GENE BOUCHER</b>		
Who should we contact when the permit is ready: <b>WILL WHITTEN ARCHITECTS</b>		
Mailing address:		
Phone: <b>774.0111 x 102</b>		

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information stop by the Building Inspections 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 of applicant: 	Date: <b>8.11.04</b>
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Permit Fee: \$30.00 for the first \$1000.00 Construction Cost, \$9.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.

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

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

Permit No: 04-1146	Issue Date: AUG 24 2004	CBL: 091 M009001
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Location of Construction: 845 Seashore Ave	Owner Name: Childs Frank L &	Owner Address: 100 Tiffany Ln	Phone:
Business Name:	Contractor Name: Boucher, Jean	Contractor Address: 488 Walker Road Lyman	Phone 2073249069
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: TR-1

Permit Fee:	Cost of Work: \$0.00	CEO District: 2
FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>RZ</i> Type: <i>SB</i> <i>BOCA 1999</i>	Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

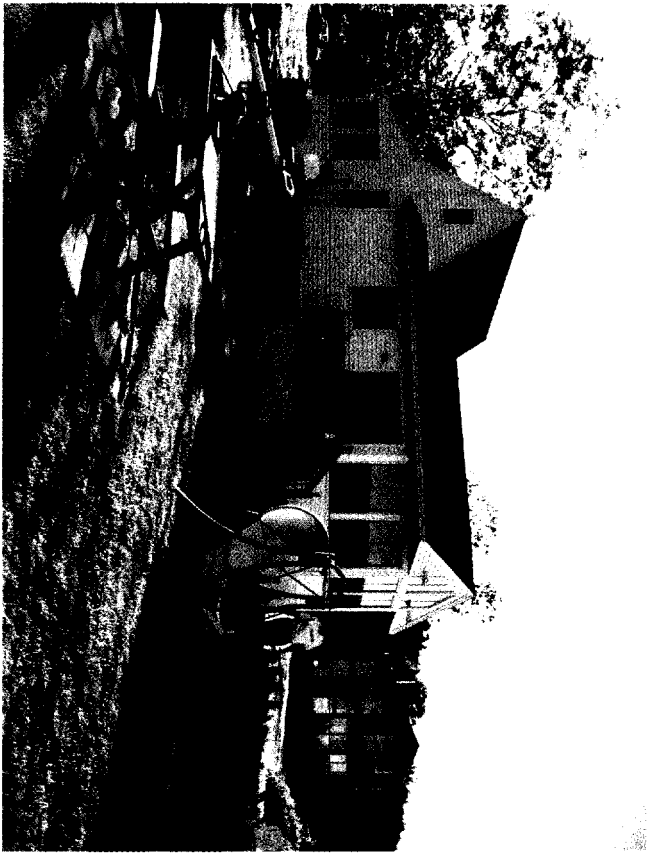
Permit Taken By: tmm	Date Applied For: 08/11/2004	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or 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> <p><input checked="" type="checkbox"/> Shoreland <i>Beyond 75' from</i></p> <p><input type="checkbox"/> Wetland</p> <p><input checked="" type="checkbox"/> Flood Zone <i>Panel 15 V2 Base</i></p> <p><input type="checkbox"/> Subdivision <i>flood Ekv 14'</i></p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>8/21/04</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>8/21/04</i></p>
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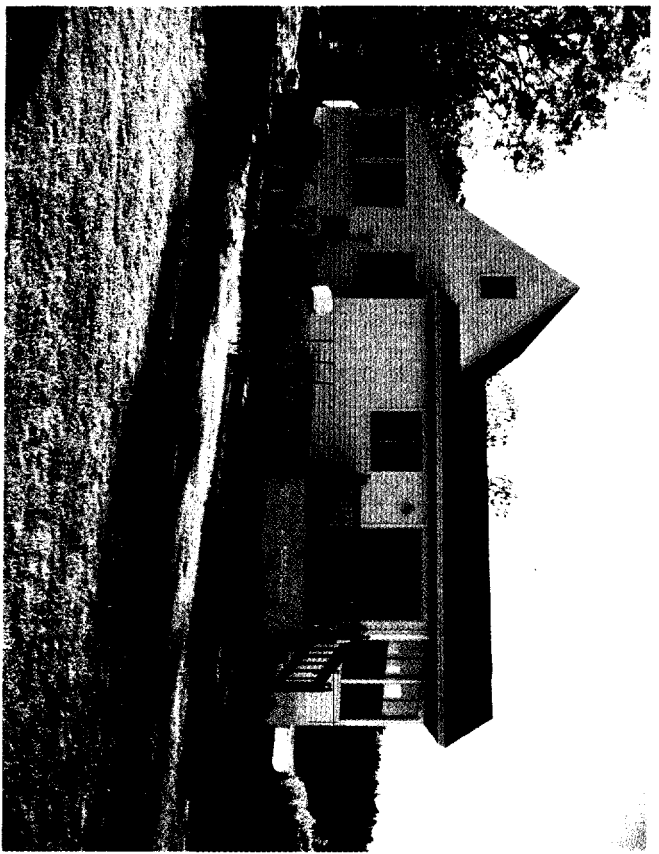
**CERTIFICATION**

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.

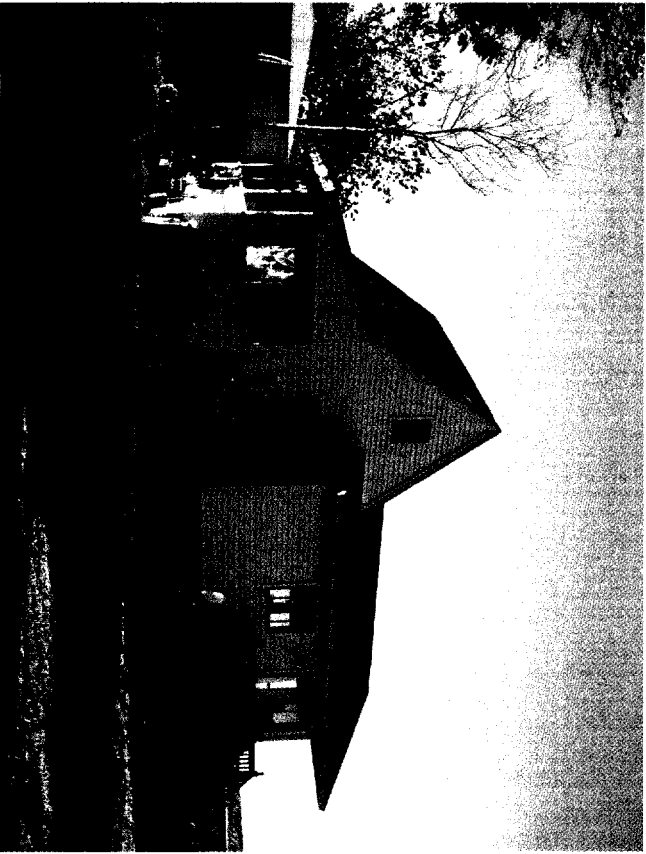
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



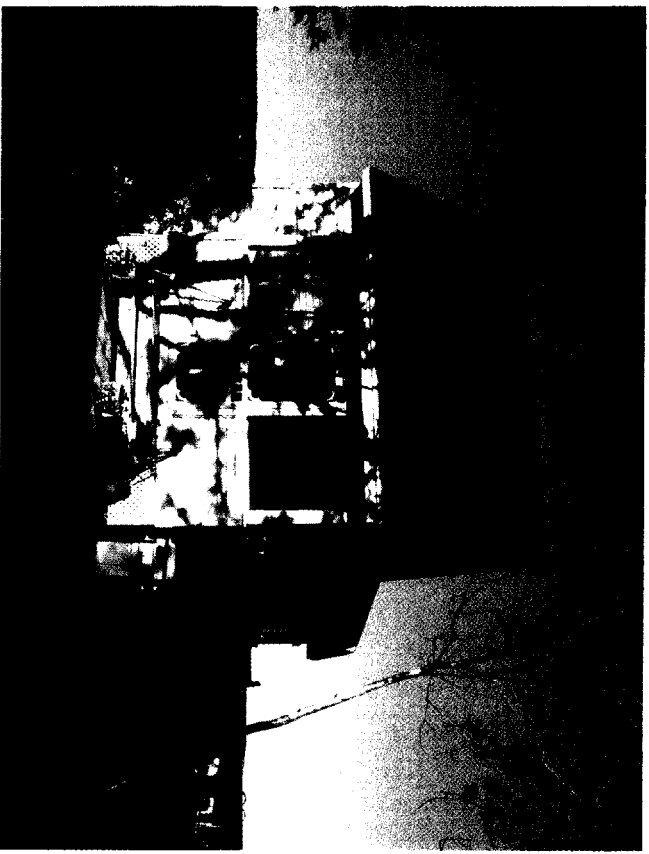
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**City of Portland, Maine - Building or Use Permit**

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

Permit No: 04-1146	Date Applied For: 08/11/2004	CBL: 091 M009001
--------------------	------------------------------	------------------

Location of Construction: 845 Seashore Ave	Owner Name: Childs Frank L &	Owner Address: 100 Tiffany Ln	Phone:
Business Name:	Contractor Name: Boucher, Jean	Contractor Address: 488 Walker Road Lyman	Phone (207) 324-9069
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: single family - build 20' x 20' addition	Proposed Project Description: build 20' x 20' addition
---	---

**Dept: Zoning**      **Status: Approved**      **Reviewer: Tammy Munson**      **Approval Date: 08/27/2004**      **Note:  Ok to Issue:**

**Dept: Building**      **Status: Approved**      **Reviewer: Tammy Munson**      **Approval Date: 08/27/2004**      **Note:  Ok to Issue:**

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

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

Permit No: 04-1146	Date Applied For: 08/11/2004	CBL: 091 M009001
--------------------	------------------------------	------------------

Location of Construction: 845 Seashore Ave	Owner Name: Childs Frank L &	Owner Address: 100 Tiffany Ln Phone:
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Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings

Proposed Use: single family - build 20' x 20' addition	Proposed Project Description: build 20' x 20' addition
---	---

Dept: Zoning Status: Approved Reviewer: Tammy Munson Approval Date: 08/27/2004 Note:  Ok to Issue:

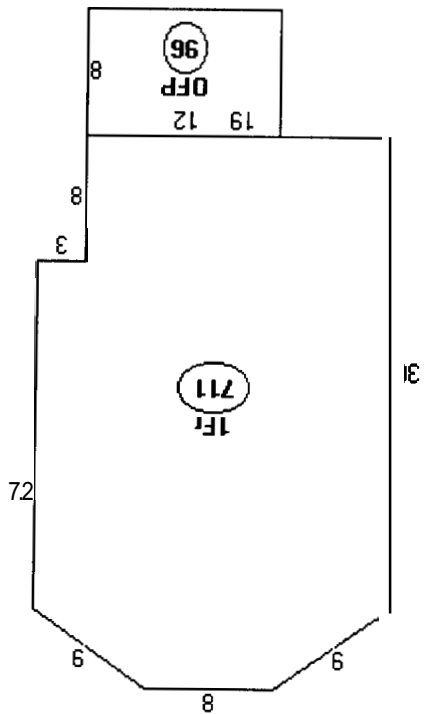
Dept: Building Status: Approved Reviewer: Tammy Munson Approval Date: 08/27/2004 Note:  Ok to Issue:

711 current  
 + 528 proposed  
 -----  
 1239 SF  
 OK

2600  
 Allowed

711 sqft  
 B: 0FP  
 96 sqft  
 A: 1Ft

Descriptor/Area





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 091 M009001  
 Location 845 SEASHORE AVE  
 Land Use SEASONAL  
 Owner XXXXXXXXXX  
 CHILDS FRANK L & ELIZABETH P JTS  
 100 TIFFANY LN  
 MANCHESTER NH 03104  
 Book/Page 14688/319  
 Legal 91-M-9-10 SEASHORE AVE  
 PEAKS ISLAND  
 16240 SF  
 Land \$117,600  
 Building \$43,680  
 Total \$161,280

Property Information

Year Built	2001	Style	Cottage	Story Height	1	Sq. Ft.	711	Total Rooms	3	Attic	None	Basement	Pier/Slab
Bedrooms	1	Full Baths	1	Half Baths	1	Total Rooms	3	Attic	None	Basement	Pier/Slab	Condition	A
Quantity	1	Year Built	1950	Size	8X10	Grade	C	Condition	A				
Type	SHED-FRAME												

Sales Information

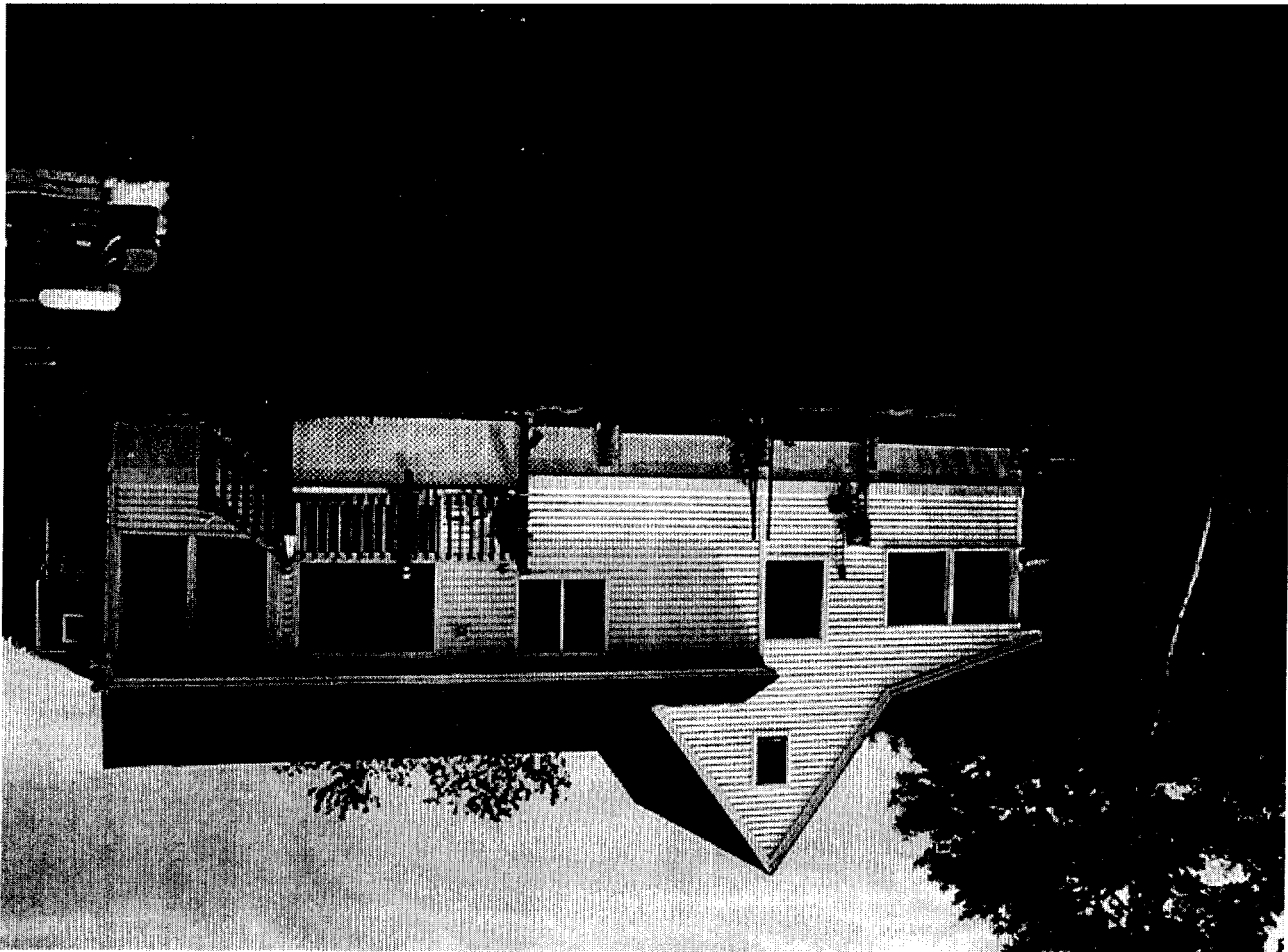
Date	04/01/1999	Type	LAND + BLDING	Price	14688-317
Book/Page	14688-317				

Picture and Sketch

Picture [View](#) Sketch [View](#)

Click here to view Tax Roll Information. Any information concerning tax payments should be directed to the Treasury office at 874-8490 or emailed.

[New Search!](#)



# FLOOD HAZARD DEVELOPMENT PERMIT APPLICATION

— PORTLAND —, Maine

(All applicants must complete entire application)  
[60.3(e)]

Application is hereby made for a Flood Hazard Development Permit as required under Article II of the Floodplain Management Ordinance of PORTLAND, Maine, for development as defined in said ordinance. This permit application does not preclude the need for other municipal permit applications.

Owner: FRANK + ELIZABETH CHILDS Address: 75 LOG ST. UNIT 1C  
MANCHESTER NH  
Ph. No: 603-647-1738 03102

Applicant: WILL WINKELMAN Address: WHITTEN ARCHITECTS,  
37 SILVER ST, PORTLAND ME  
Ph. No: 207-774-0111 x102 04101

Contractor: JEAN BOUCH Address: 488 LYMAN WALKER RD  
Ph. No: \_\_\_\_\_ LYMAN, ME 04002

## LEGAL DESCRIPTION

Is this lot a part of a subdivision? O Yes  No If yes, give the name of the subdivision and lot number:

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Tax Map: 091-M Lot #: 009+10

Address: 845 SEASHORE AVE PEAKS ISLAND  
Street/Road Name

Zip Code: PORTLAND 04108

General explanation of proposed development: ADDITION TO EXISTING DWELLING, CONFORMING  
+ FURTHER AWAY FROM MHWS

Estimated value of improvements: \$115,000

## OTHER PERMITS

Are other permits required from State or Federal Jurisdictions? O Yes  No  
If yes, are copies of these permits attached? O Yes  No  Not Applicable

Federal and State Permits may include but not limited to: ME/DEP/Natural Resource Protection Act, Site Location of Development Act, Metallic Mineral Exploration, Advanced Exploration and Mining; USACE/Section 9 & 10 of the Rivers and Harbors Act/ Section 404 of the Clean Water Act; Federal Energy Regulation Commission.

(This Section to be completed by Municipal Official)

Date Submitted \_\_\_\_\_; Fee Paid \_\_\_\_\_; Reviewed by CEO \_\_\_\_\_; Reviewed by Planning Board \_\_\_\_\_

Permit # \_\_\_\_\_ Issued by \_\_\_\_\_ Date \_\_\_\_\_

# FLOOD HAZARD DEVELOPMENT PERMIT

## For Minor Development

### PORTLAND, Maine

(Development **not** considered a Substantial Improvement)

**This Flood Hazard Development Permit allows minor development as provided in Article V.F,3. of the Floodplain Management Ordinance of PORTLAND, Maine, for development in a Special Flood Hazard Area as defined in said ordinance.** Development authorized by this permit must be adequately anchored to prevent flotation, collapse, or lateral movement resulting from hydrodynamic and hydrostatic loads, including the effects of buoyancy, be constructed with materials resistant to flood damage and be constructed by methods and practices that minimize flood damage. **This permit is issued based on documentation that the information provided in the Flood Hazard Development Permit Application is in compliance with the Floodplain Management Ordinance.**

Tax Map: 091-01 - Lot #: 009 & 10  
[Recommended but not required by FPMO]

Project Description: ADDITION TO EXISTING DWELLING, CONFORMING + FURTHER AWAY FROM MHW.  
[Recommended but not required by FPMO]

#### The permittee understands and agrees that:

- The permit is **issued** on the representations made herein and on the application for permit;
- The permit may be revoked because of any breach of representation;
- Once a permit is revoked all work shall cease until the permit is reissued or a new permit is issued;
- The permit will not grant any right or privilege to erect any structure or use any premises described for any purposes or in any manner prohibited by the ordinances, codes, or regulations of the municipality;
- The permittee hereby gives consent to the **Code Enforcement Officer** to enter and inspect activity covered under the provisions of the Floodplain Management Ordinance;
- The permit form will be posted in a conspicuous place on **the** premises in plain view and;
- The permit **will** expire if no work is commenced within 180 days of issuance.

I hereby **certify** that all the statements in, and the attachments to **this** permit are a true description of the existing property and the proposed development project.

Owner: Recommended but not required by FPMO  
signature

Date: Recommended but not required by FPMO

or

Authorized Agent: Recommended but not required by FPMO  
signature

Date: 8.12.04  
Recommended but not required by FPMO

WILL WINKELMAN WHITTEN ARCHITECTS. 7740111 R/02

Issued by: Recommended but not required by FPMO

Date: Recommended but not required by FPMO

Permit #: Recommended but not required by FPMO

(This section to be completed by Municipal Official)

**LOCATION**

Flooding source (name of river, pond, ocean, etc): \_\_\_\_\_

- VI-30 Zone  VE Zone  AE Zone  A1-30 Zone  A Zone
- FRINGE  FLOODWAY (1/2 width of floodplain in A Zone)

If proposed development is in an "AE" or "A1-A30" Zone and cross section data is available in the Flood Insurance Study please note the Nearest Cross Section References and Elevation of Base Flood at Nearest Cross Section.

Cross Section	Base Flood Elevation
Above Site _____	Above Site _____
Below Site _____	Below Site _____

Base Flood Elevation (bfe) at the site \_\_\_\_\_ NGVD [Required for New Construction or Substantial Improvements]

**Basis of A Zone bfe determination:**

- From a Federal Agency:  USGS  USDA/NRCS  USACE  Other \_\_\_\_\_
- From a State Agency:  MDOT  Other \_\_\_\_\_
- Established by Professional Land Surveyor
- Established by Professional Engineer  HEC II  HY 7  Quick-2  Other \_\_\_\_\_
- Highest Known Water level
- Other (Explain) \_\_\_\_\_

**VALUE**

If the development involves improvements to an existing structure, the **Market Value** of existing structure: \$ \_\_\_\_\_

- New development or Substantial Improvement:  Minor improvement or addition to existing development:

**TYPE OF DEVELOPMENT**

Check the appropriate box to the left for the type(s) of development requested; and complete information for each applicable line:

<input checked="" type="checkbox"/> 1. Residential Structure	Dimensions		Cubic Yards
<input type="checkbox"/> 1a. New Structure	_____	<input type="checkbox"/> 5. Filling'	_____
<input checked="" type="checkbox"/> 1b. Add to Structure	19x20 ADDITION	<input type="checkbox"/> 6. Dredging	_____
<input type="checkbox"/> 1c. Renovations/other changes	6x10 ADDITION	<input type="checkbox"/> 7. Excavation	_____
<input type="checkbox"/> 2. Non-Residential Structure		<input type="checkbox"/> 8. Levee	_____
<input type="checkbox"/> 2a. New structure	EXISTING	<input type="checkbox"/> 9. Drilling	_____
<input type="checkbox"/> 2b. Add to Structure	_____		Number of Acres
<input type="checkbox"/> 2c. Renovations/other changes	_____	<input type="checkbox"/> 10. Mining:	_____
<input type="checkbox"/> 2d. Floodproofing	_____	<input type="checkbox"/> 11. Dam: Water surface to be created	_____
<input type="checkbox"/> 3. Water Dependent use:		<input type="checkbox"/> 12. Water Course Alteration	_____
<input type="checkbox"/> 3a. Dock	_____	Detailed description must be attached with copies of all applicable state and federal permits.	
<input type="checkbox"/> 3b. Pier	_____	<input type="checkbox"/> 13. Other: Explain	_____
<input type="checkbox"/> 3c. Boat Ramp	_____	_____	_____
<input type="checkbox"/> 3d. Other	_____	_____	_____
<input type="checkbox"/> 4. Paving	_____	_____	_____

**Attachment and Site Plan** - drawn to scale with north arrow

- Show **property boundaries**, floodway and floodplain lines.
- Show dimensions of the lot.
- Show dimensions and location of existing and/or proposed development on the site.
- Show areas to be cut and filled.
- For New Construction or Substantial Improvement, also include existing grade elevations done by a Professional Land Surveyor, Architect or Engineer.
- For New Construction or Substantial Improvement, attach statement describing in detail how each applicable development standard in Article VI will be met.

**Special Note:** Substantial Improvement is defined as any reconstruction, rehabilitation, addition or other improvement of a structure, the cost of which equals or exceeds 50 percent of the market value of the structure before the start of construction of the improvement. Please refer to the floodplain management ordinance, Article XIII, for more complete definitions of New Construction and Substantial Improvement.

Structures in Velocity Zones are not permitted on fill or excavations. Structures must be built on open foundation systems, i.e., columns, piles, posts. ( Article VI §L)

**The Applicant Understands and agrees that:**

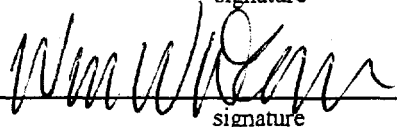
- The permit applied for, if granted, is issued on the representations made herein;
- Any permit issued may be revoked because of any breach of representation;
- Once a permit is revoked all work shall cease until the permit is reissued or a new permit is issued;
- Any permit issued on this application will not grant any right or privilege to erect any structure or use any premises described for any purposes or in any manner prohibited by the ordinances, codes, or regulations of the municipality;
- The applicant hereby gives consent to the Code Enforcement Officer to enter and inspect activity covered under the provisions of the Floodplain Management Ordinance;
  - If issued, the permit form will be posted in a conspicuous place on the premises in plain view and;
- If issued, the permit will expire if no work is commenced within 180 days of issuance.

I hereby certify that all the statements in, and the attachments to this application are a true description of the existing property and the proposed development project.

Owner \_\_\_\_\_ Date \_\_\_\_\_

or  
signature

Authorized Agent

  
signature

Date 8.12.04

Will WINKELMAN.

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use
BUILDING OWNER'S NAME <u>FRANK &amp; ELIZABETH Childs</u>	Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>100 Tiffany Lane, Manchester, N.H. 03104</u>	Company NAIC Number	
CITY	STATE	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>845 Seashore Ave, P.I. 04108 091-M-009:10</u>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <u>New rebuild of existing single family</u>		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.##" or ##.#####°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other

81. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>PORTLAND 230051</u>		82. COUNTY NAME <u>CUMBERLAND</u>		83. STATE <u>MAINE</u>	
84. MAP AND PANEL NUMBER <u>0015</u>	85. SUFFIX <u>B</u>	86. FIRM INDEX DATE	87. FIRM PANEL EFFECTIVE/REVISED DATE <u>July 17 1986</u>	88. FLOOD ZONE(S) <u>V2</u>	89. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>4'</u>

Conversion/Comments  
e requ

provided or the Com. ....

Conversion/Comments

Elevation reference mark used 17'0" Does the elevation reference mark used appear on the FIELD  No

a) Top of bottom floor (including basement or enclosure) 17.5 ft.(m)

b) Top of next higher floor - ft.(m)

c) Bottom of lowest horizontal structural member (V zones only) 16.3 ft.(m)

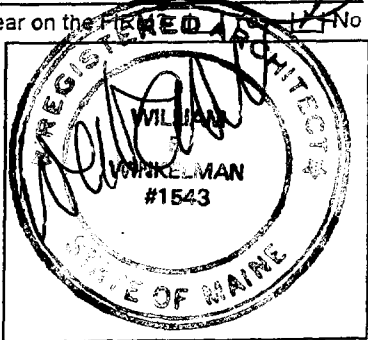
f) Lowest adjacent grade (LAG) 17.5 ft.(m)

g) Highest adjacent grade (HAG) 14.0 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA

i) Total area of all permanent openings (flood vents) in C3h NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME <u>WILLIAM WINKELMAN</u>	LICENSE NUMBER <u>MAINE 1543</u>
TITLE <u>REGISTERED ARCHITECT</u>	COMPANY NAME <u>WHITEN ARCHITECTS</u>
ADDRESS <u>37 SILVER ST</u>	CITY <u>PORTLAND</u> STATE <u>ME</u> ZIP CODE <u>04101</u>
SIGNATURE <u>William Winkelman</u>	DATE <u>12.13.01</u> TELEPHONE <u>207 774 0111</u>

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>For Insurance Company Use:</b>
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 845 SEASHORE AVE			Policy Number
CITY PEAKS ISLAND	STATE ME	ZIP CODE 04108	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

| | Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E3. If the *Elevation Certificate is intended for use as supporting information for a LOMA or LOMRF, Section C must be completed.*

- E1. Building Diagram Number \_\_\_\_\_ (Select **the** building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is  ft.(m)  in.(cm)  above or  below (check one) the highest adjacent grade.
- E3. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes |  No |  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNERS REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

COMMENTS

| | Check here if attachments



FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3087-0077  
 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME: FRANK & ELIZABETH CHILDS

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 100 TIFFANY LANE

CITY: MANCHESTER STATE: N.H. ZIP CODE: 03104

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): 845 SEASHORE AVE PEAKS ISLAND 04108 TAX MAP 91 BLOCK M LOT 9 & 10

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.): RE-BUILD OF EXISTING STRUCTURE WITH ADDITION - RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL): \_\_\_\_\_ HORIZONTAL DATUM: SOURCE:  GPS (Type): \_\_\_\_\_  
 NAD 1927  NAD 1983  USGS Quad Map  Other: \_\_\_\_\_

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: PORTLAND 23001 AND 15017 B2. COUNTY NAME: CUMBERLAND B3. STATE: MAINE

B4. MAP AND PANEL NUMBER: <u>0015 PANEL 15017</u>	B5. SUFFIX: <u>B</u>	B6. FIRM INDEX DATE: _____	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>7-17-86</u>	B8. FLOOD ZONE(S): <u>V2</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>14'</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9:  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date: \_\_\_\_\_

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on!  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE (V1-V30) V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AWAO  
 Complete items C3.a-i below according to the building diagram specified in Item CZ. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
 Datum N/A Conversion/Comments N/A

Elevation reference mark used NGS PEAKS 10163 Does the elevation reference mark used appear on the FIRM?  Yes  No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>17</u>	<u>450</u> (m)
<input type="checkbox"/> b) Top of next higher floor	<u>-</u>	<u>-</u> ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>16</u>	<u>50</u> (m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>-</u>	<u>-</u> ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	<u>17</u>	<u>450</u> (m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAO)	<u>14</u>	<u>400</u> (m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>14</u>	<u>50</u> ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	<u>N/A</u>	sq. in. (sq. cm)



**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME: TIMOTHY A. PATCH LICENSE NUMBER: MAINE 2294

TITLE: PRESIDENT COMPANY NAME: SURVEY & GEODETIC CONSULTANTS, INC.

ADDRESS: 12 WESTBROOK COMMON 2ND FLOOR CITY: WESTBROOK STATE: ME ZIP CODE: 04092

SIGNATURE: Timothy A. Patch DATE: 1-15-02 TELEPHONE: 207-856-0006

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 845 SEASHORE AVE			Policy Number
CITY PEAKS ISLAND	STATE ME	ZIP CODE 04108	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

N/A

| | Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR LONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1. through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number \_\_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) N/A
- E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_\_ ft.(m) \_\_\_\_ in.(cm) \_\_\_\_ above or \_\_\_\_ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams B-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_\_\_ ft.(m) \_\_\_\_ in.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? | Yes | No | Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge. N/A

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

| | Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. | | The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. | | A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. | | The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: | | New Construction | | Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

| | Check here if attachments