

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

DEPARTMENT OF BUILDING INSPECTION

Please Read Application And Notes, If Any, Attached

Permit Number: 071046

PERMIT ISSUED  
AUG 31 2007  
CITY OF PORTLAND

This is to certify that WILEY ELIZABETH O & PETER J WILSON/ESS/Peter Noon

has permission to Sill Replacement & Corner post repair

AT 25 ORLAND ST

119 E001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission procured before this building or part thereof is placed 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.

**OTHER REQUIRED APPROVALS**

Fire Dept. \_\_\_\_\_

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

*Cheryl S. M.* 8/29/07  
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: 07-1046	Issue Date:	CBL: 119 E001001
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Location of Construction: 25 ORLAND ST	Owner Name: WILEY ELIZABETH O & PETER	Owner Address: 25 ORLAND ST	Phone:
Business Name:	Contractor Name: Peter Noone	Contractor Address: 246 Main Street Westbrook	Phone 2077490519
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-5

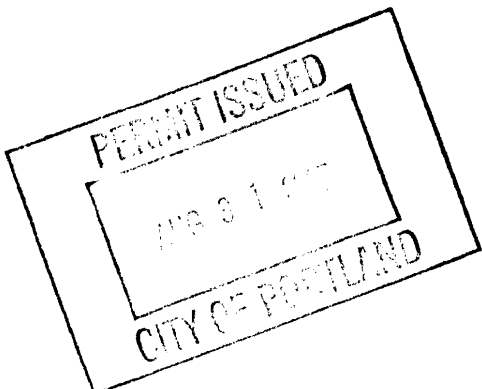
Past Use: Single Family Home	Proposed Use: Single Family Home - Sill Replacement & Corner post repair	Permit Fee: \$170.00	Cost of Work: \$15,000.00	CEO District: 3
Proposed Project Description: Sill Replacement & Corner post repair		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB IRC-2003	
		Signature:	Signature: 8/29/07 CNA	

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: 08/27/2007	<b>Zoning Approval</b>	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<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"/>	<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	<input type="checkbox"/> Not in District or Landmark <input checked="" 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
(Repair to existing) O.K. CSK Date: 8/27/07	Date: _____	Date: 8/21/07 CNA



**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

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

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

Permit No: 07-1046	Date Applied For: 08/27/2007	CBL: 119 E001001
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Location of Construction: 25 ORLAND ST	Owner Name: WILEY ELIZABETH O & PETER	Owner Address: 25 ORLAND ST	Phone:
Business Name:	Contractor Name: Peter Noone	Contractor Address: 246 Main Street Westbrook	Phone (207) 749-0519
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home - Sill Replacement & Corner post repair	Proposed Project Description: Sill Replacement & Corner post repair
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Dept: Zoning	Status: Approved	Reviewer: Chris Hanson	Approval Date: 08/29/2007	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 08/29/2007	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
1) Fastener schedule per the IRC 2003				
2) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.				

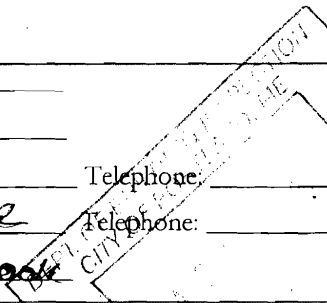
O.K. to  
Issue  
~~Need \$~~  
Paid \$170.00



# 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: <u>25 ORLAND ST/OFF BRIGHTON</u>		
Total Square Footage of Proposed Structure/Area <u>800 " " REPAIR WALL SURFACE</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>119-E001-001</u>		Applicant * <b>must be owner, Lessee or Buyer</b> * Name <u>WILLIAM MITCHELL</u> Address <u>25 ORLAND</u> City, State & Zip <u>040</u>
Telephone: <u>207 650-2057</u>		
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>\$1500</u> C of O Fee: \$ <u>170</u> Total Fee: \$ _____
Current legal use (i.e. single family) <u>SINGLE FAMILY</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Sill Replacement, Corner Post - Repair</u>		
Contractor's name: <u>Peter Noone</u> Address: <u>246 MAIN ST WESTBROOK</u> City, State & Zip <u>MAIN 04092</u> Telephone: _____ Who should we contact when the permit is ready: <u>Peter Noone</u> Telephone: _____ Mailing address: <u>246 MAIN ST WESTBROOK</u>		



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

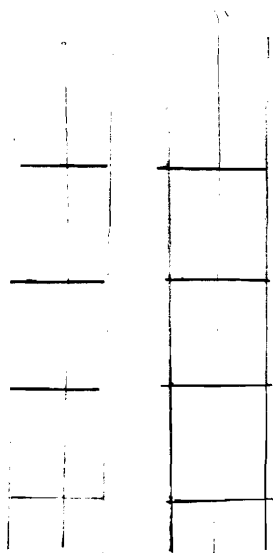
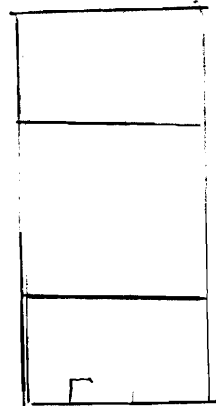
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at [www.portlandmaine.gov](http://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: _____
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**This is not a permit; you may not commence ANY work until the permit is issue**

FRONT OF  
House

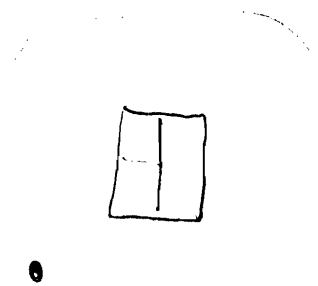


B  
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3x6

REPLACE  
WITH  
2x4s  
AND  
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S



6x10

SILL BEAM

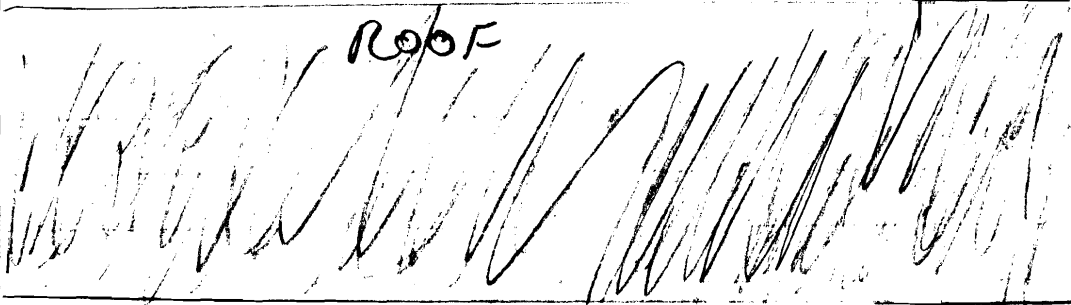
SECTION A

SECTION A TO BE FINISHED WITH  
6x10 AT TOP EDGE APPROXIMATELY

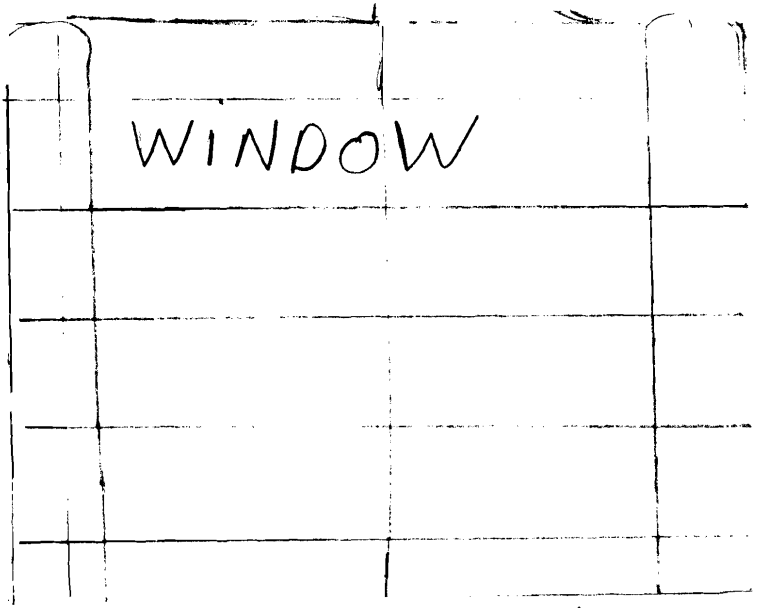
4x6" x 18' Beam To Be Replaced With (2) 2x6 2<sup>1/2</sup>" Ply  
2x4" To Be Replaced With Regular KD 2x4's



SIDE VIEW OF ADDITION



FACIA



SECTION B SILL BEAM TO BE REPLACED WITH  
3 PT 2x10' ON edge

SILL BEAM (6" x 10") | SECTION C

BEAM  
OR  
POST  
4x6  
To Be Replaced

2x4

2x4

2x4

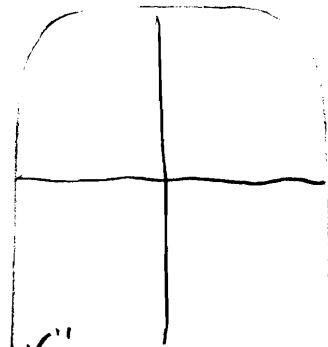
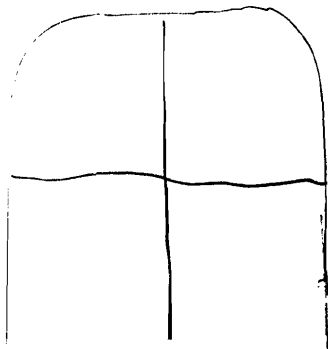
BACK OF  
HOME

FACIA

FACIA

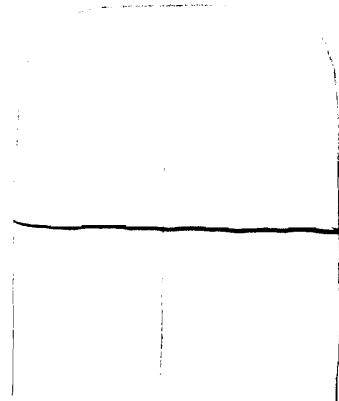
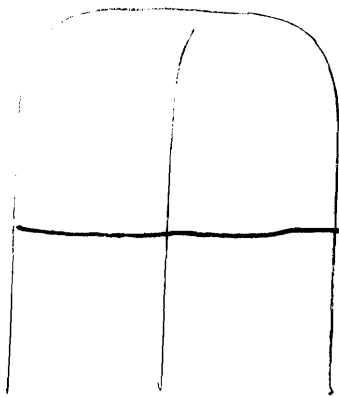
4 x 6  
BEAM

4 x 6  
BEAM



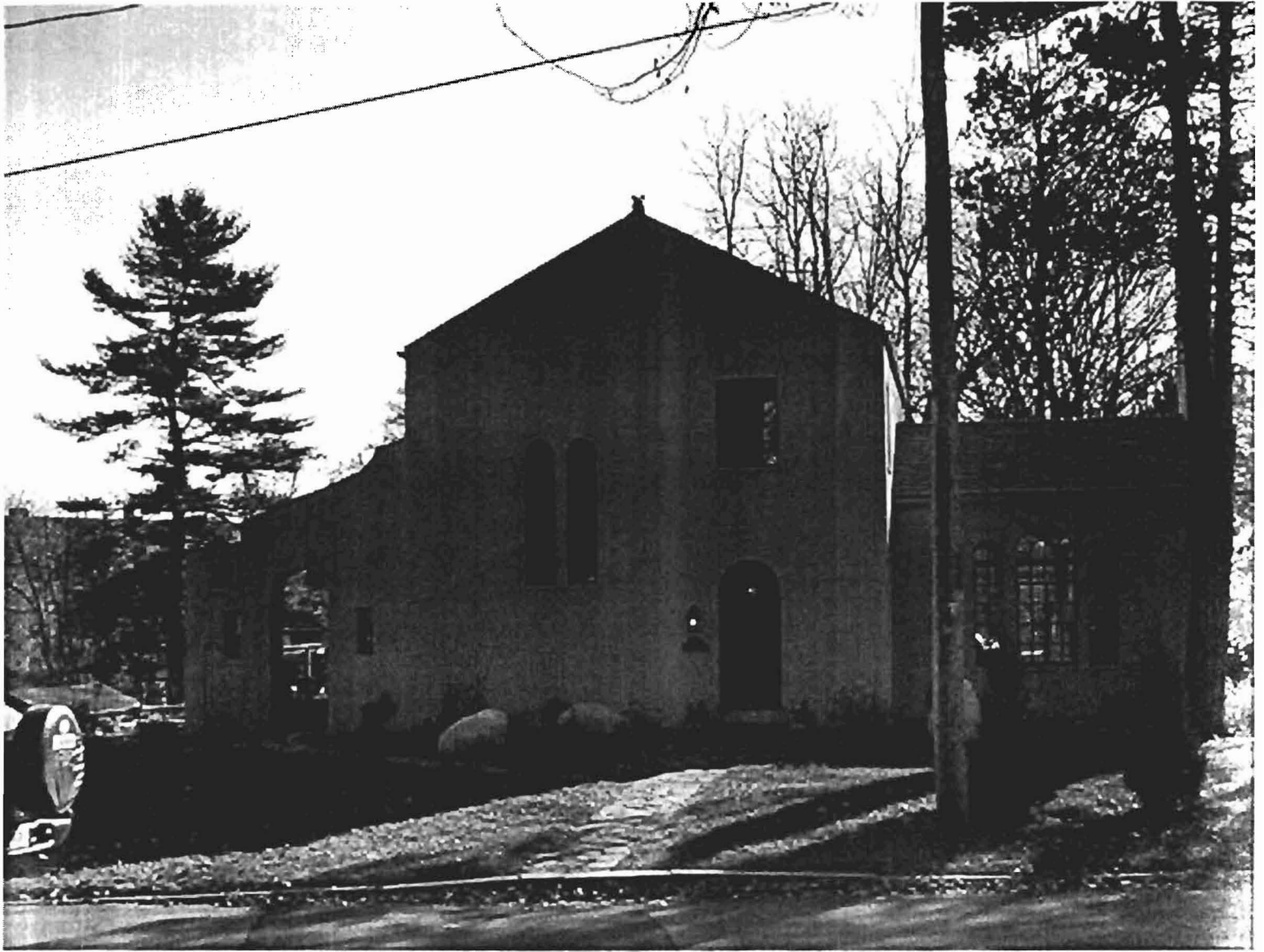
VERTICAL

BEAM REPLACE WITH 2 2x6 WITH <sup>1/2"</sup> PLY RIP BETWEEN

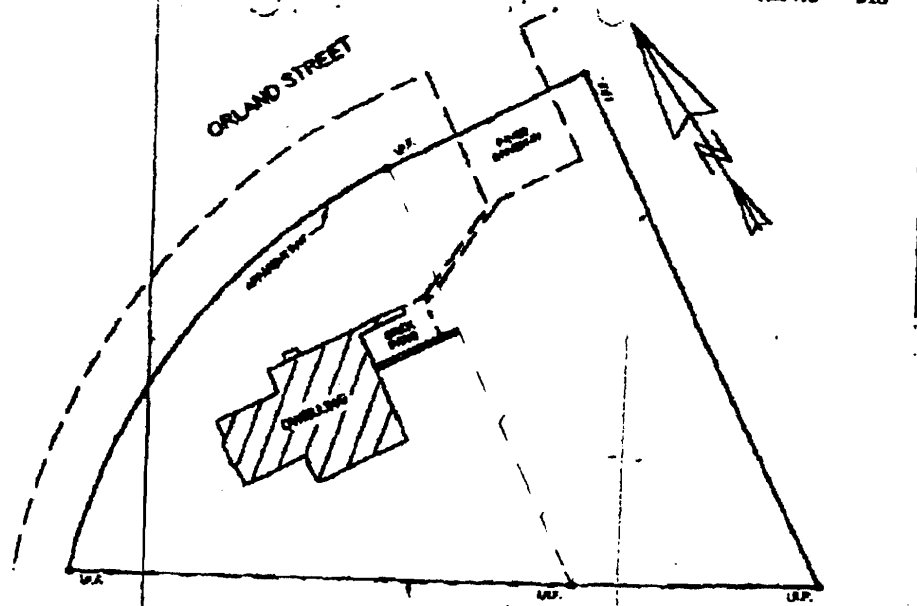


POSSIBLE SILL REPLACE WITH 3 2x10 PT

SILL or BEAM  
6 x 10







### MORTGAGE LOAN INSPECTION PLAN

The drawing shows evidence of land being building multiple of the face of construction.

The drawing is not to a standard land area as defined by land insurance now only 20001-0015 used.

**THIS IS NOT A STANDARD BOUNDARY SURVEY.** Information shown on this plan is for mortgage purposes only. Property lines shown on this plan are based on a representation of ownership, current deed information (reference below), and tax map information (reference below). **A STANDARD BOUNDARY SURVEY IS SUGGESTED TO CONFIRM ALL BOUNDARY LINES SHOWN ON THIS PLAN.** Any use other than mortgage loan purposes that is at their own risk. This plan may not be recorded of record for any land interest. The property shown on this plan may be subject to easements, encroachments, and restrictions of record, which may or may not be shown on this plan.

#### PROPERTY INFORMATION:

Block 28 ORLAND STREET City/Town: PORTLAND County: CLATSOP, Maine  
Owner: SHERRY FAMILY TRUST  
Deed Reference: book 00011 page 208  
Plan Reference: book page 14  
Tax Map: 0128 Lot 1 & 2 Block C  
Landing Information:  
Scale: 1 inch = 20 Feet Date: MARCH 12, 2002  
ATD FILE #

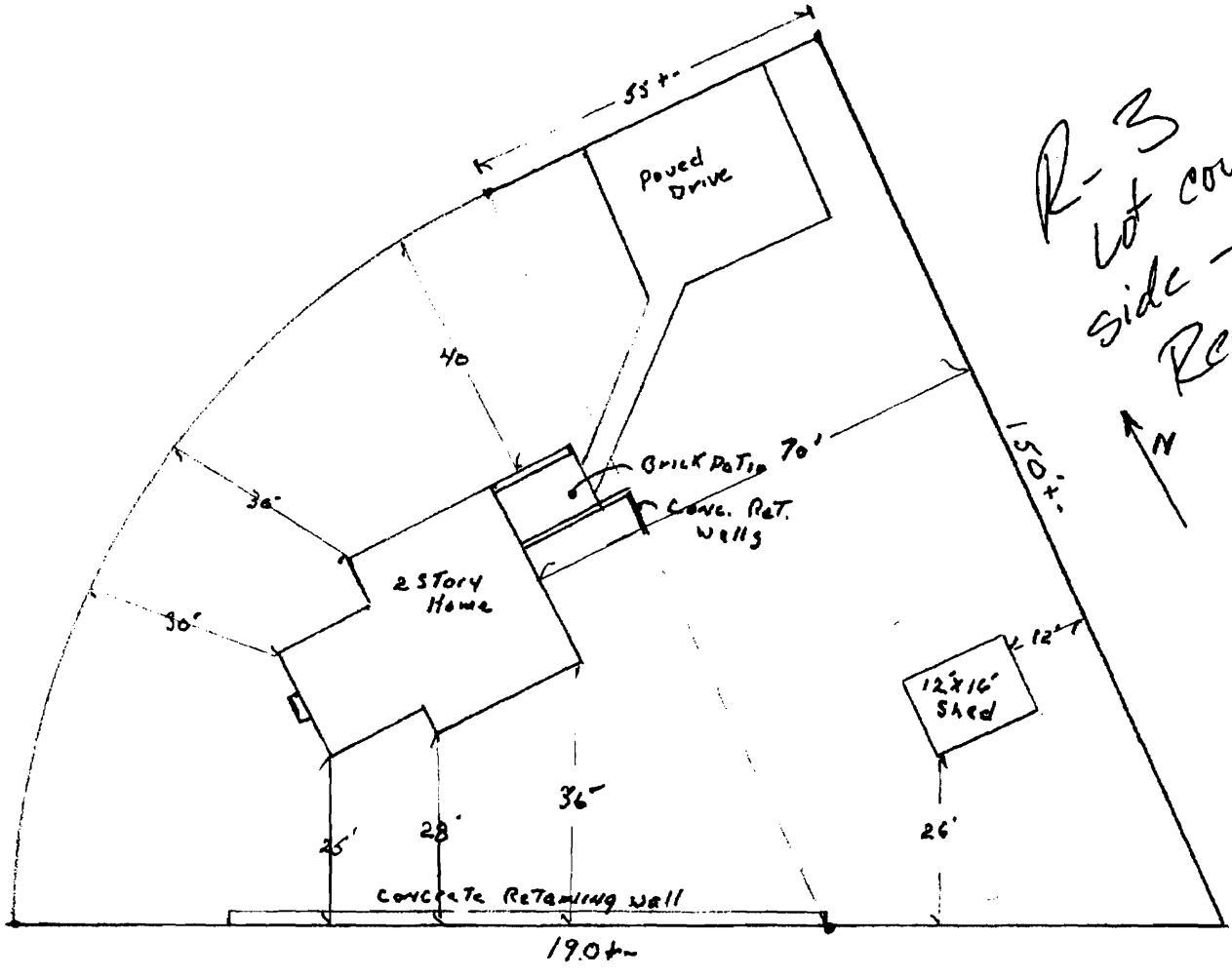
Atlantic Title Company  
76 Atlantic Plaza  
South Portland, Maine 04106

William R. Austin  
State of Maine  
Professional Land Surveyor # 2174

**Plot Plan for 25 Orland St. Portland Maine**

**Chart 119 Block E Lot 1**

Owners; George Sanders  
Tom Peterson



*R-3  
lot cov OK  
side - 8'  
Rear - 25'*

Scale; 3/8" = 10'

Submitted by; Scott Lowell  
East Shore Builders  
Gray Maine  
653-4378