Permit No: CBL: City of Portland, Maine - Building or Use Permit Application 03-1076 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 119 E009001 Location of Construction: Owner Name: Owner Address: Phone: 16 Beacon St Stover Patrick J 16 Beacon St Business Name: Contractor Name: Contractor Addre Phone Lessee/Buyer's Name Phone: Permit Type: Amendment to Single Family Past Use: Proposed Use: CEO District: Permit Fee: Cost of Work: Single family Single family w/vent doghouse for \$30.00 \$300.00 gas fireplace FIRE DEPT: INSPECTION: ■ Approved Use Group: ☐ Denied **Proposed Project Description:** build vent doghouse for gas fireplace Signature: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved w/Conditions Denied Signature: Date: Permit Taken By: Date Applied For: **Zoning Approval** 09/05/2003 kwd Special Zone or Reviews Zoning Appeal Historic Preservation This permit application does not preclude the Applicant(s) from meeting applicable State and Shoreland Not in District or Landmark Variance Federal Rules. Miscellaneous Does Not Require Review 2. Building permits do not include plumbing, septic or electrical work. Flood Zor Conditional Use Requires Review 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 Subdivision Interpretation Approved permit and stop all work.. Site Plan ☐ Approved Approved w/Conditions Denied Maj Minor MM Denied 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

City of Portland, Ma	Permit No:	Date Applied For:	CBL:			
389 Congress Street, 04	101 Tel: (207) 874-8703, H	Fax: (207) 874-8716	03-1076	09/05/2003	119 E009001	
Location of Construction:	Owner Name:	Owner Name:		Owner Address:		
16 Beacon St	Stover Patrick J	1	16 Beacon St			
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:		
Lessee/Buyer's Name	Phone:	Permit Type:  Amendment to Single Family			v	
Proposed Use:			osed Project Description:			
Single family w/vent dogh	nouse for gas fireplace	build ve	build vent doghouse for gas fireplace			
			+			
Dept: Zoning	Status: Pending	Reviewer:	Jeanine Bourke	Approval I	Date: 09/17/2003	
<b>Note:</b> 9/16/03 left vm w	/Patrick S. For exact location	of bump out and setbac	k to it.		Ok to Issue:	
Dept: Building	Status: Approved	Reviewer:	Jeanine Bourke	Approval I	Date: 09/17/2003	
Note:					Ok to Issue:	
1) Separate permit requir	ed for the LP tank or cylinder					

## O3-1076 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: \6	BEACO	in 57		
Total Square Footage of Proposed Struct	ure	Square Footage of Lot	3883	
Tax Assessor's Chart, Block & Lot Chart# 119 Block# & Lot# 9	Owner:	TRUK STOLER	Telephone: ファィー6シフロ フィレー1607(でんこの	
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone:		Cost Of Work: \$ 355-	
	SAW	æ	Fee: \$ 36.7	
Current use: SINGLE FAME	*			
If the location is currently vacant, what w	as prior use: _		,	
Approximately how long has it been vac	ant:		·	
Proposed use: SINGLE FAMILY		Che E. DC DIAC	€ .	
		40 00 1138		
	Where.			
Contractor's name, address & telephone:	:			
Who should we contact when the permit	ls ready:C	mer	<del></del>	
Mailing address:		•		
We will contact you by phone when the preview the requirements before starting a and a \$100.00 fee if any work starts before	ny work, with	a Plan Reviewer. A stop v	pick up the permit and vork order will be issued	
F THE REQUIRED INFORMATION IS NOT INCL DENIED AT THE DISCRETION OF THE BUILDING NFORMATION IN ORDER TO APROVE THIS PE	PLANNING I	DEPARTMENT, WE MAY REQ		
hereby certify that I am the Owner of record of the nace been authorized by the owner to make this appliantation, in addition, if a permit for work described in hall have the authority to enter all areas covered by to this permit.	Monthon on his/ha	or that the owner of econd author	orizes the proposed work and that I	
Signature of applicant:	Sw	Date: a/	563	

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

l of l ll9 E009001

Location Land Use

LA BEACON ST SINGLE FAMILY

Owner Address

STOVER PATRICK J LL BEACON ST EDIPO 3M GNALTROQ

Book/Page

14324/122 119-E-9

Legal

BEACON ST 14-18

4345 51

Valuation Information

Land #29,720 Building \$55,750

Total #85,470

Property Information

Year Built

Style Old Style Story Height

Sq. Ft.

Total Acres

0.1

Bedrooms 3 Full Baths

Half Baths

Total Rooms

Attic Unfin Basement Full

**Outbuildings** 

Type
GARAGE-WD/CB

Quantity

Year Built 2002 Sixe 13X22 Grade ( Condition

Sales Information

Date 11/23/198 09/28/1998 Type Land + Blding Land + Blding Price \$103.000 \$13.000 Book/Page 14324-122 14177-326

Picture and Sketch

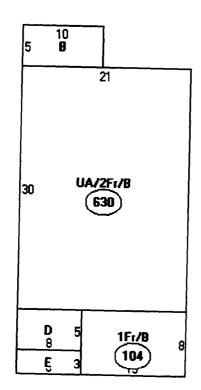
**Picture** 

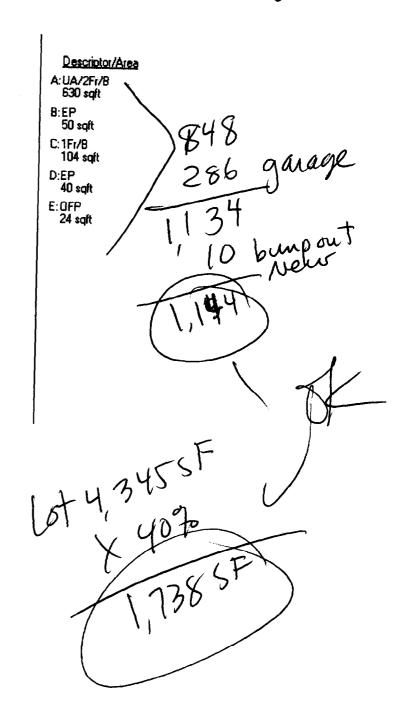
<u>Sketch</u>

Click here to view Tax Roll Information.

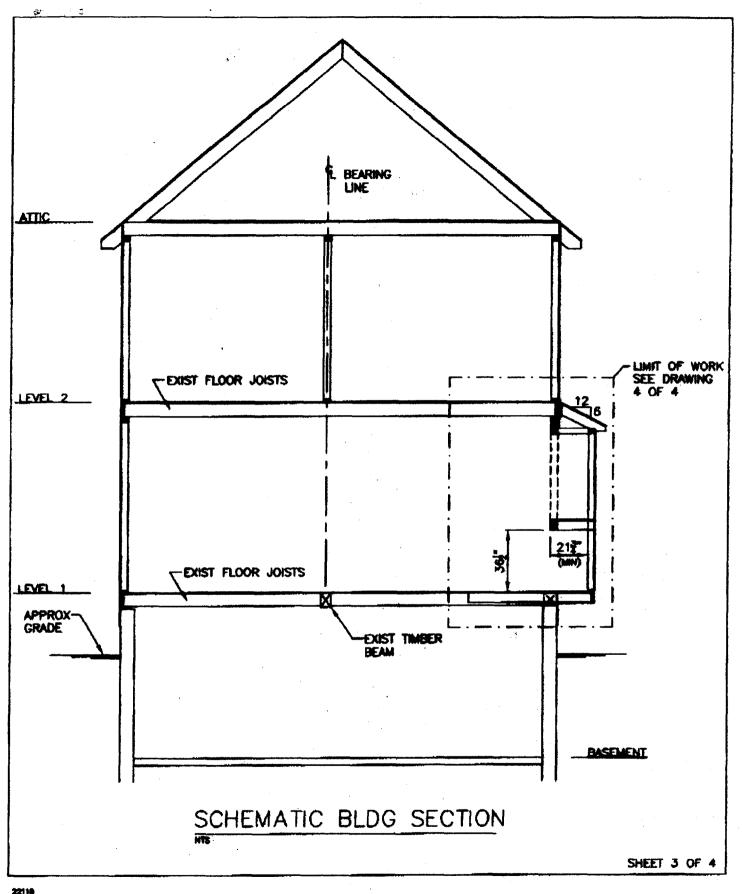
Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.



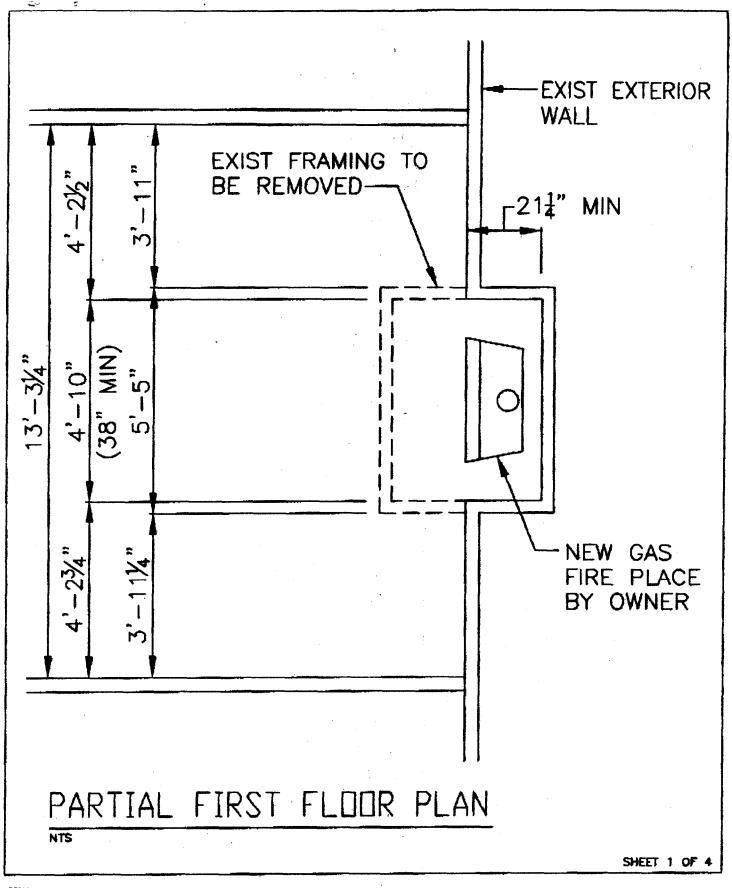




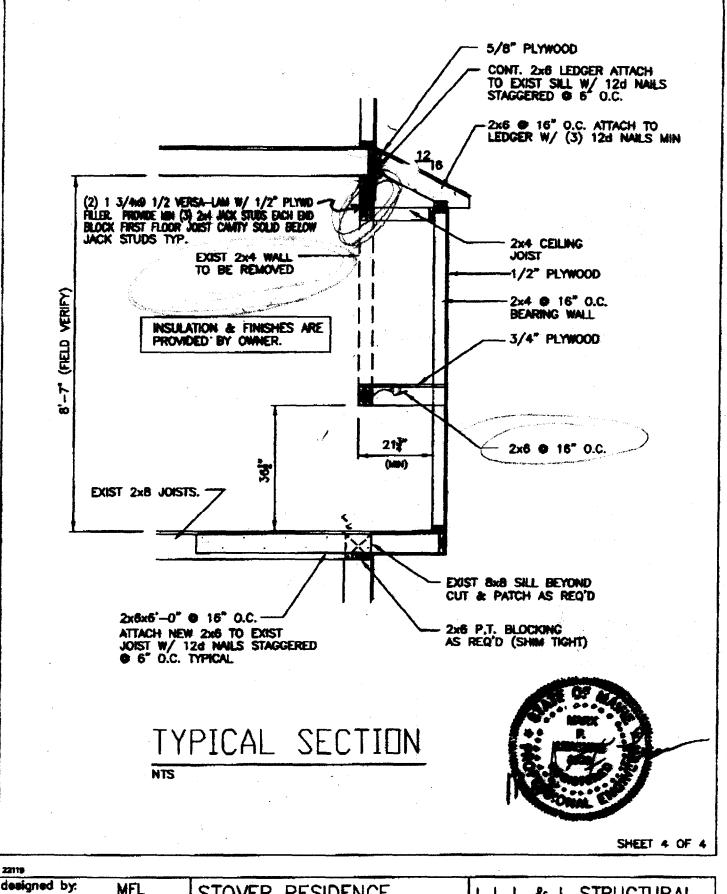




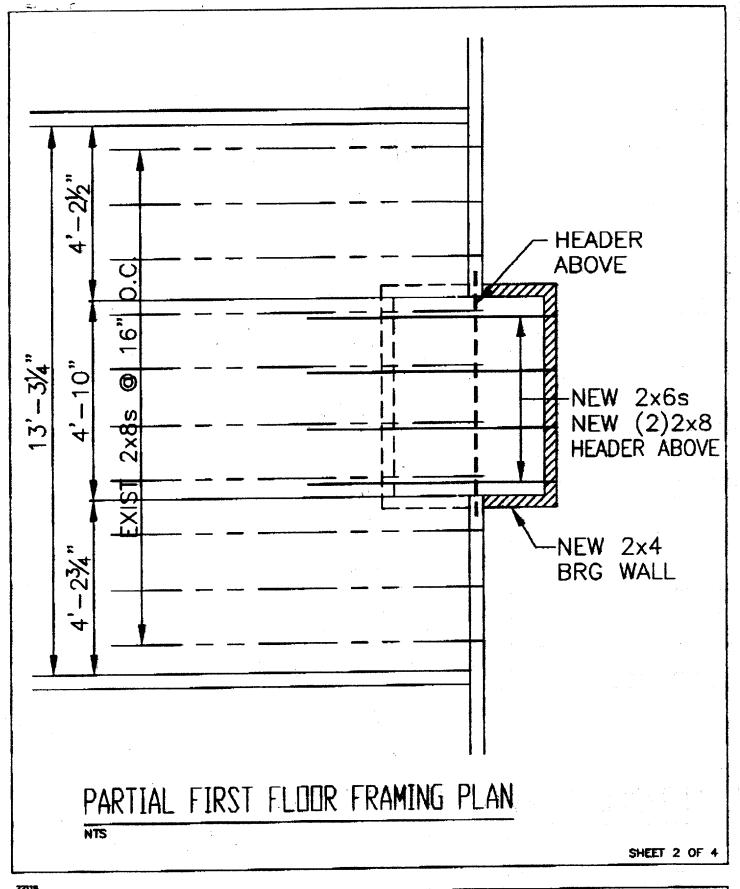
designed by:	MFL	STOVER RESIDENCE	IIL & L STRUCTURAL
drawn by:	MFL	16 BEACON STREET	ENGINEERING SERVICES, INC.
checked by:	JHL	PORTLAND, MAINE	SOUTH PORTLAND, MAINE 04106
scole:	NOTED		PHONE: (207) 797—4630 FAM: (207) 790—9432
date: APR	IL 10, 2003	NEW FIRE PLACE ENCLOSURE	SKS-1



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designed by:	MFL	STOVER RESIDENCE	II L & L STRUCTURAL
drawn by:	MFL	16 BEACON STREET	ENGINEERING SERVICES, INC.
checked by:	JHL	PORTLAND, MAINE	SOUTH PORTLAND, MAINE 04106
scole:	NOTED		PMCHE: (207) 707-4630 PAR: (207) 709-5432 BMC: muhisturotindharr.sen
date: APR	IL 10, 2003	NEW FIRE PLACE ENCLOSURE	SKS-1



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d by:	FL	STOVER RESIDENCE	11	L & L STR	UCTURAL
y: N	FL	16 BEACON STREET		ENGINEERING S	
by:	HL	PORTLAND, MAINE			VINE : 04108
NO	TED			PHONE: (207) 787-4830 FAR: (207) 789-5432	
APRIL 10	, 2003	NEW FIRE PLACE ENCLOSURE		EME: mehlessyrefinskar.	SKS-1
	Py: M I by: J NO	Py: MFL I by: JHL NOTED	STOVER RESIDENCE  16 BEACON STREET  PORTLAND, MAINE	STOVER RESIDENCE  16 BEACON STREET  PORTLAND, MAINE  NOTED	STOVER RESIDENCE  16 BEACON STREET  PORTLAND, MAINE  NOTED  STOVER RESIDENCE  ENGINEERING S SM Q STREET SOUTH PORTLAND, MA  PRINC (2017) 707-4830  FIRE (2017) 707-4830



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designed by:	MFL	STOVER RESIDENCE	L & L STRUCTURAL
drawn by:	MFL.	16 BEACON STREET	ENGINEERING SERVICES, INC.
checked by:	JHL	PORTLAND, MAINE	SOUTH PORTLAND, MAINE 04106
scole:	NOTED		PAGE (207) 787—4639 FALE (207) 789—4432 BASE (207) 789—4432
dote: APRI	L 10, 2003	NEW FIRE PLACE ENCLOSURE	SKS-1

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Y OF PORTLANDERMT ISSUED

Please Read **Application And** Notes, If Any, Attached

Permit Number: 031076 SEP 1 7 2003

pting this permit shall comply with all

ances of the City of Portland regulating

ctures, and of the application on file in

This is to certify that	Stover Patrick J				
has permission to	build vent doghouse for gas	place		CITY OF PORTLAND	
AT 16 Beacon St				119 E009001	

ne and or the Q

of buildings and

m or

provided that the person or persons, of the provisions of the Statutes of I the construction, maintenance and u this department.

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

ication inspe n must and w n permi n procu b e this I ding or thered d or d sed-in. R NOT QUIRED.

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 Department Name

PENALTY FOR REMOVING THIS CARD