

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1059	Issue Date: AUG 29	CBL: 122 D012001
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Location of Construction: 82 Rackleff St	Owner Name: Bird Donna C &	Owner Address: 82 Rackleff St	Phone: 761-1658
Business Name:	Contractor Name: David E. Jellison	Contractor Address: 6 Many Oaks Lane Portland	Phone: 2078929823
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: RTS

Past Use: Single Family	Proposed Use: Single Family w/ 10'X10' Deck	Permit Fee:	Cost of Work: \$0.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied MA	INSPECTION: Use Group: R3 Type: SB BOCA '99	

Proposed Project Description:
Build 10' X 10' Deck and add 3' X 6' Bay Window

Signature: _____

Signature: _____

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: ☐ Approved ☒ Approved w/Conditions ☐ Denied

Signature: _____ Date: _____

Permit Taken By: dgc	Date Applied For: 08/29/2001	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

Special Zone or Reviews <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: 8/29	Zoning Appeal <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:	Historic Preservation <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: 8/29
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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.



8-29-01

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.

R5

Location/Address of Construction: 82 Rackliff St. Portland ME.

Total Square Footage of Proposed Structure <u>100 -</u>	Square Footage of Lot <u>5050</u>
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Tax Assessor's Chart, Block & Lot Chart# <u>122</u> Block# <u>D</u> Lot# <u>12</u>	Owner: <u>Panna C Bird</u> <u>Tracy Eldridge</u>	Telephone: <u>761-1658</u>
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Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>SPA</u>	Cost Of Work: \$ <u>5500</u> Fee: \$
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Current use: SF

If the location is currently vacant, what was prior use: _____

Approximately how long has it been vacant: _____

Proposed use: SF w/ 10' x 10' Deck & 3' x 6' x 12' deep Bay Window

Project description: Build 10' x 10' Deck, Replace (2) existing Kitchen Windows w/ 3' x 6' Bay Window

Contractor's name, address & telephone:	<u>David E. Tollison (Tollison Const.)</u> <u>6 Many Oaks Ln Windham</u> <u>9870-9392</u>
Who should we contact when the permit is ready:	_____
Mailing address:	_____

Office Phone: 842-9823

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>[Signature]</u>	Date: <u>8-29-01</u>
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This is not a permit, you may not commence ANY work until the permit is issued

FOR MORTGAGE LENDER USE ONLY

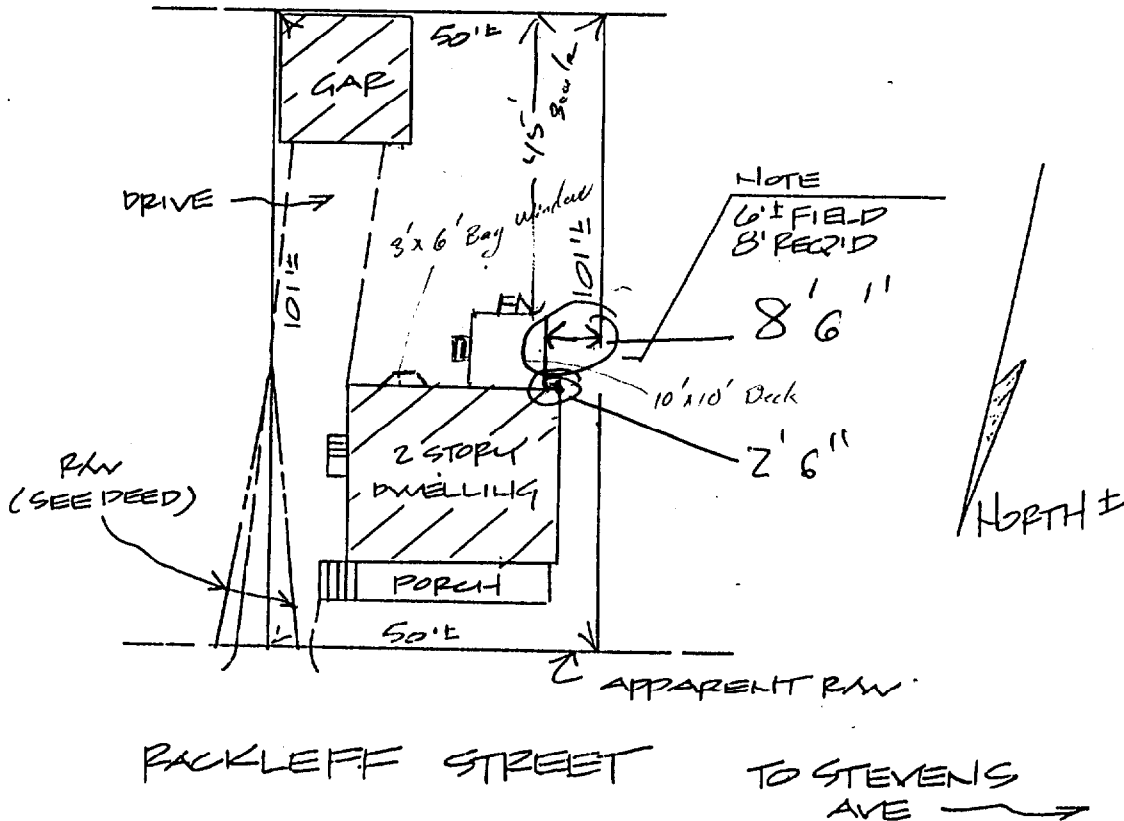
GENERAL NOTES: (1)DISTANCES SHOWN ARE TAKEN FROM PROVIDED TITLE REFERENCES SHOWN BELOW. (2)THIS INSPECTION EXAMINES DWELLING AND ASSESSORY STRUCTURE COMPLIANCE WITH RESPECT TO MUNICIPAL ZONING SETBACK REQUIREMENTS ONLY AT THE TIME OF CONSTRUCTION. (3)A STANDARD BOUNDARY SURVEY SHOULD BE PERFORMED TO RENDER A PROFESSIONAL OPINION AS TO PROPERTY LINE LOCATIONS WITH RESPECT TO DWELLINGS. (4)THIS INSPECTION DEPICTS ALL VISIBLE STRUCTURAL ENCROACHMENTS WITH RESPECT TO APPARENT PROPERTY LINES AND RECOGNIZES ONLY THOSE EASEMENTS & RIGHT OF WAYS STATED OR SHOWN IN THE PROVIDED TITLE REFERENCES SHOWN BELOW. THIS INSPECTION MAY NOT REVEAL ANY CONFLICTS WITH ABUTTING DEEDS. (5)FLOOD HAZARD DETERMINATION IS MADE BY SCALING DISTANCES ON BELOW REFERENCED FEMA MAP. (6)THIS INSPECTION IS TO BE USED ONLY BY THE BELOW LISTED,LENDER, TITLE COMPANY &/OR ATTORNEY AND ITS TITLE INSURER.

ADDRESS: 82 RACKLEFF ST
PORTLAND, ME

INSPECTION DATE: 4-6-95

SCALE: 1" = 30'

NO MONUMENTATION FOUND
RECOMMEND BOUNDARY SURVEY
FOR ACCURATE LOCATION
OF BOUNDARY LINES.



APPLICANT: TRACY ELDRIDGE DONNA C. BIRD

REQUESTING PARTY: FIRST TITLE OF MAINE

OWNER: FREDERICK V. MUCCINO

ATTORNEY: THOMAS W. GOUTIER

LENDER: FIRST HH MORTGAGE CORP. FILE No. 9624510

TITLE REFERENCES:

DEED BOOK: 6170 PAGE: 142

PLAN BOOK: _____ PAGE: _____ LOT: _____

COUNTY: CUMBERLAND

NADEAU & LODGE
PROFESSIONAL LAND SURVEYORS

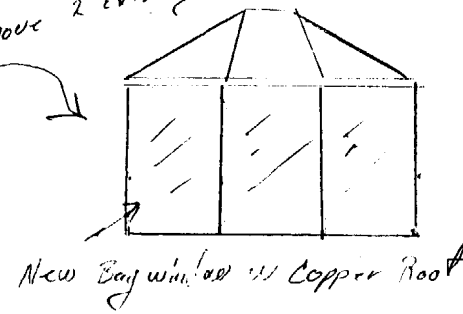
**844 STEVENS AVENUE
PORTLAND, ME 04103
TEL. 878-7870
FAX. 878-7871**

RFD 2, BOX 219A
ALFRED, ME 04002
TEL 282-0331

4x4 Cedar
Post w/ 2x2-4' deck
1" OC 2x8
pressure treated
w/ 5/8" x 6
Decking

Precast 4'
Post

Remove 2 existing windows + install a 2x8" Header
(2) 2x12 or LVL



New Bay window w Copper Roof

\$5,500

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Inspections DATE 8/29/12
RECEIVED FROM 120 Leason Construction
ADDRESS 82 Rockledge St

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	10'x10 deck		6000
	& bay window		
	Check #413		
	CBL 122 D012		

☒ CASH ☐ CHECK ☐ OTHER

TOTAL

60.00

RECEIVED BY [Signature]

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