

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 020920

PERMIT ISSUED

This is to certify that Bevilacqua Michael A &/Sev Associ
has permission to Relocate Carriage House to S Yard/N Found on
AT 185 Ashmont St 124 B001001

SEP - 3 2002

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.

CITY OF PORTLAND

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 altered or closed-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

PERMIT ISSUED
SEP - 3 2002

[Signature]
Director - Building & Inspection Services

CITY OF PORTLAND
PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 02-0920	Issue Date: SEP - 3 2002	GBL: 124 B001001
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Location of Construction: 185 Ashmont St	Owner Name: Bevilacqua Michael A &	Owner Address: 185 Ashmont St CITY OF PORTLAND	Phone: 47**
Business Name:	Contractor Name: Sewall Associates	Contractor Address: P.O. Box 6610 Portland	Phone: 2077744755
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-3

Past Use: Single Family w/Carriage House	Proposed Use: Single Family w/Carriage House	Permit Fee: \$198.00	Cost of Work: \$25,000.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>SB</i> <i>BOCA 99</i>	

Proposed Project Description:
Relocate Carriage House to Side Yard/New Foundation

Signature: *[Handwritten Signature]*

Signature: *[Handwritten Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gad	Date Applied For: 08/13/2002	Zoning Approval	
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<ol style="list-style-type: none"> 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 <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: <i>8/30/02</i>	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: <i>8/30/02</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

02-0920

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>185 ASHMONT STREET, PORTLAND, ME.</u>		
Total Square Footage of Proposed Structure <u>446 SF CARriage HOUSE.</u>	Square Footage of Lot <u>15,370 + SF.</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>124</u> Block# <u>B</u> Lot# <u>001</u>	Owner: <u>MICHAEL + TAMARA BEVILACQUA</u>	Telephone: <u>775.4147</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>MICHAEL + TAMARA BEVILACQUA 775.4147</u>	Cost Of Work: \$ <u>25,000.</u> Fee: \$ <u>198.00</u>
Current use: <u>CARRIAGE HOUSE (GARAGE)</u>		
If the location is currently vacant, what was prior use: <u>OPEN SIDE YARD</u>		
Approximately how long has it been vacant: <u>?</u>		
Proposed use: <u>RELOCATE EXISTING CARriage HOUSE TO SIDE YARD.</u>		
Project description: <u>NEW FOUNDATION (W/FROST WALLS) + PERM. SLAB. 18'-4" x 24'-4" CARriage HOUSE.</u>		
Contractor's name, address & telephone: <u>SEWALL ASSOCIATES. STEVE SEWALL PORTLAND, ME (774) 200-3341</u>		
Who should we contact when the permit is ready: <u>MICHAEL BEVILACQUA. (OWNER)</u>		
Mailing address: <u>185 ASHMONT STREET PORTLAND, ME 04103</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>775.4147</u>		

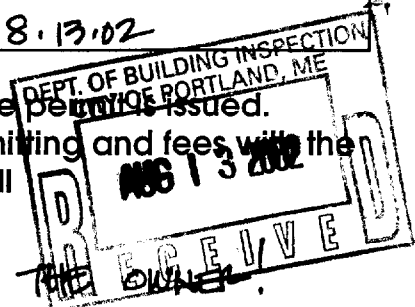
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

(ARCHITECT)

Signature of applicant: <u>Maiky E. Civi</u>	Date: <u>8.13.02</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



★ PLEASE PUT BUILDING PERMIT IN THE NAME OF THE OWNER.

Application ID Number: 2-0920

Department: Zoning

Status: Approved with Conditions

Reviewer: Tammy Munson

Comments:

Approval Date: 08/30/2002

Given On Date: 08/14/2002

OK to Issue Permit Name: Tammy Munson Date: 08/30/2002 Date 2:

Conditions Section

Create Date: 08/14/2002 By: gad Update Date: 08/30/2002 By: tmm



Prmt 17572 Constr Type Num1

Permit Nbr Location of Construction Appl. Date
 Status Permit Type Issue Date
 CBL Territory Nbr Estimated Cost Date Closed

Comment Date	Comment	Name	Follow Up Date	Completed
<input type="text" value="08/14/2002"/>	<input type="text" value="Need foundation detail of garage. Left message w/contractor."/>	<input type="text" value="tmm"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text" value="08/23/2002"/>	<input type="text" value="Returned message from Steve Sewall - left message regarding the details needed."/>	<input type="text" value="tmm"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text" value="08/29/2002"/>	<input type="text" value="Rec'd detail on frost wall - need to talk to Steve regarding how the structure will be moved and if there will be any potential structural work needed. Left message w/Steve that we would issue permit after we discussed that."/>	<input type="text" value="tmm"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text" value="08/30/2002"/>	<input type="text" value="Spoke w/Steve Sewall - carriage house is being moved in tact. No structural work is planned at this point. Steve stated he would ammend permit if necessary. - ok to Issue."/>	<input type="text" value="tmm"/>	<input type="text"/>	<input type="checkbox"/>

CreatedBy CreateDate ModBy ModDate

Application ID Number: 2-0920

Department: Building

Status: Approved with Conditions

Reviewer: Tammy Munson

Comments:

[Redacted Comments]

Approval Date: 08/30/2002

Given On Date: 08/14/2002

OK to Issue Permit

Name: Tammy Munson

Date: 08/30/2002

Date 2: [Redacted]

Conditions Section:

[Redacted Conditions Section]

Create Date: 08/14/2002

by: gad

Update Date: 08/30/2002

by: tmm

SEWALL ASSOCIATES, INC.
P.O. BOX 6610
PORTLAND, ME 04103

TELEPHONE: 207-774-4755
FAX: 207-774-5448

DATE 8-27-02

FACSIMILE TRANSMITTAL

NAME OF RECIPIENT: TAMMY MUNSON

COMPANY NAME: CITY OF PORTLAND BUILDING DEPT.

RECIPIENT'S FAX NUMBER: 874-8716

REGARDING PROJECT (NAME): BEVILACQUA - 185 ASHMONTH ST.
FROM: Stephen Sewall

TOTAL NUMBER OF PAGES (INCLUDING COVER SHEET) 2

TAMMY,

PLEASE LET ME KNOW IF THE ATTACHED
DRAWING GIVES THE ANSWERS TO THE QUESTIONS
YOU HAVE ABOUT THE 185 ASHMONTH STREET
APPLICATION FOR BUILDING PERMIT. MY CELL
PHONE IS 838-7981.

Thanks

STEPHEN SEWALL

SEWALL ASSOCIATES, INC.

P.O. Box 6610
PORTLAND, MAINE 04103
(207) 774-4755
FAX (207) 774-5448

JOB BEVILACQUA

SHEET NO _____ OF _____

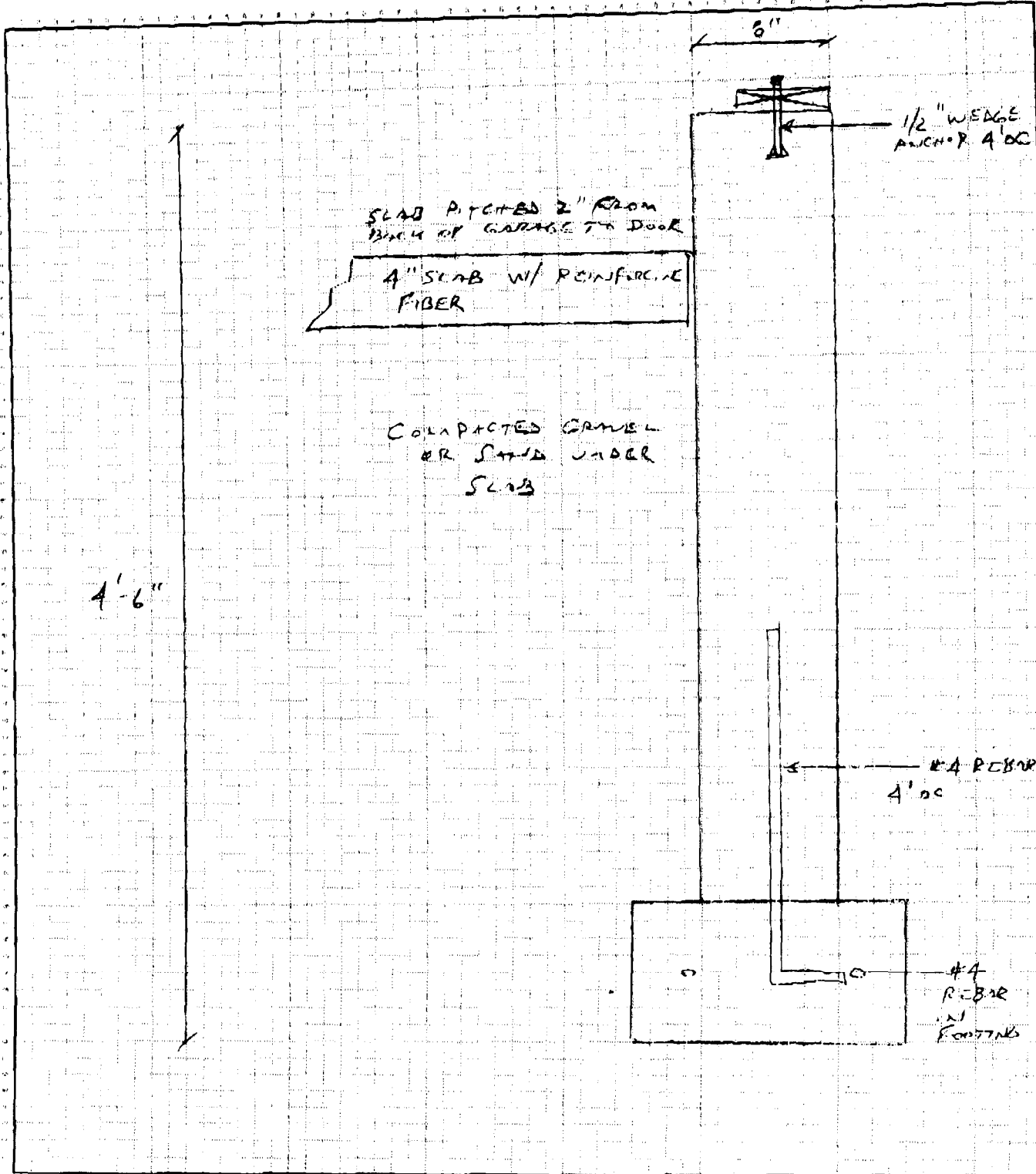
CALCULATED BY _____

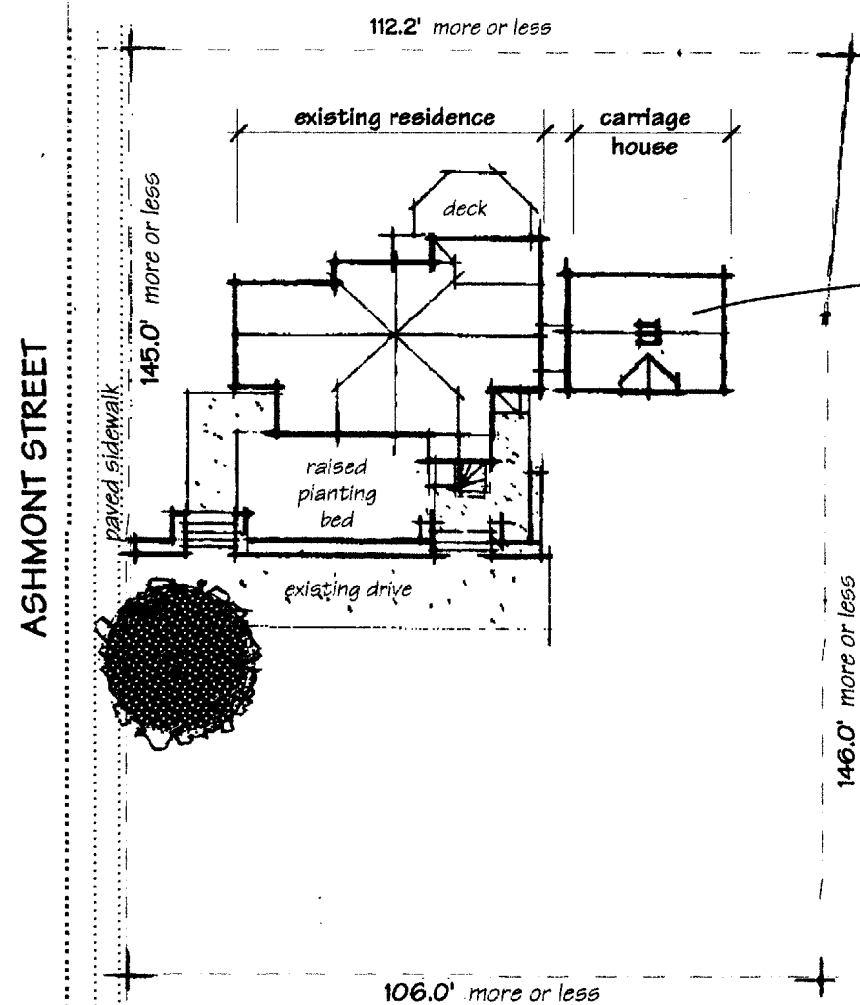
DATE 8-27-02

CHECKED BY _____

DATE _____

SCALE 1 1/2" = 1'



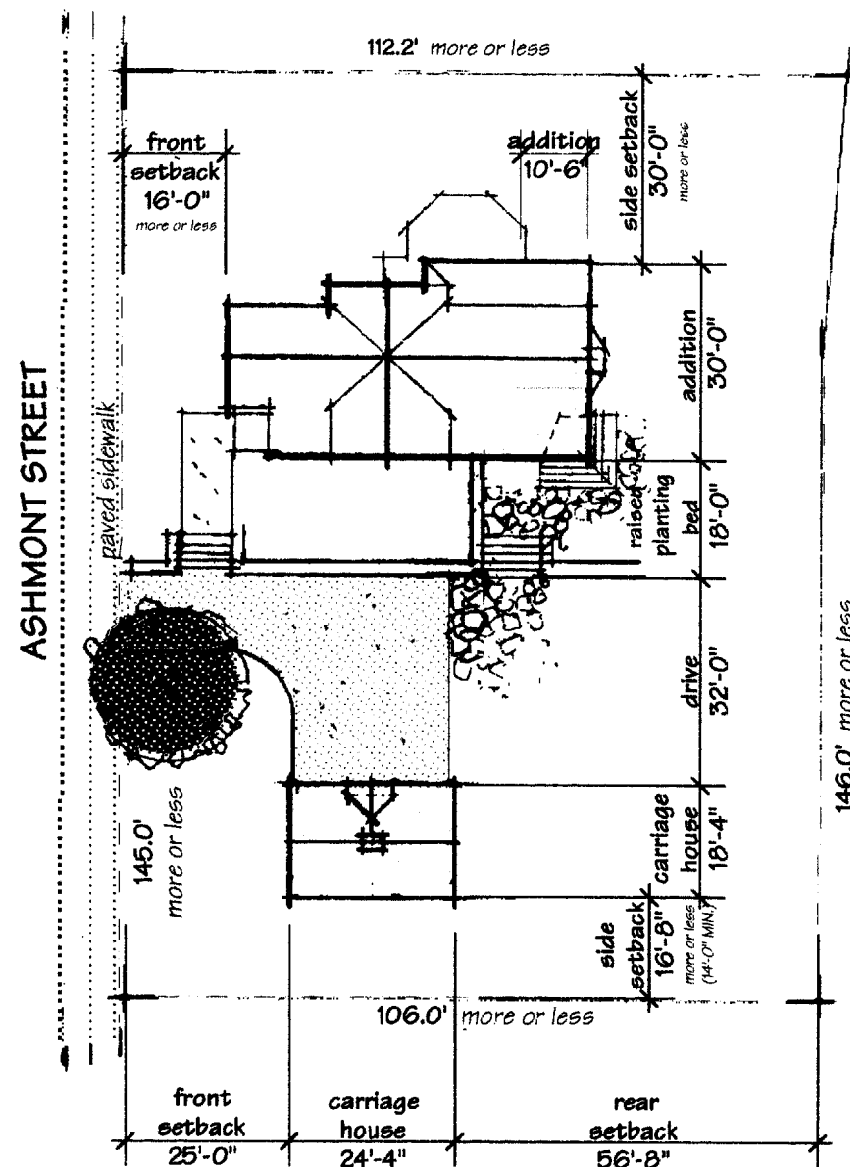


Schematic Site Plan • Existing Conditions

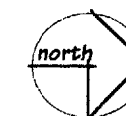
RELOCATING (E)
 CARRIAGE HOUSE
 TO NEW
 FOUNDATION ...
 SEE PROPOSED
 SITE PLAN →

FOUNDATION:
 CONCR. FOOT
 WALLS W/
 REINFORCED
 CONCRETE SLAB.

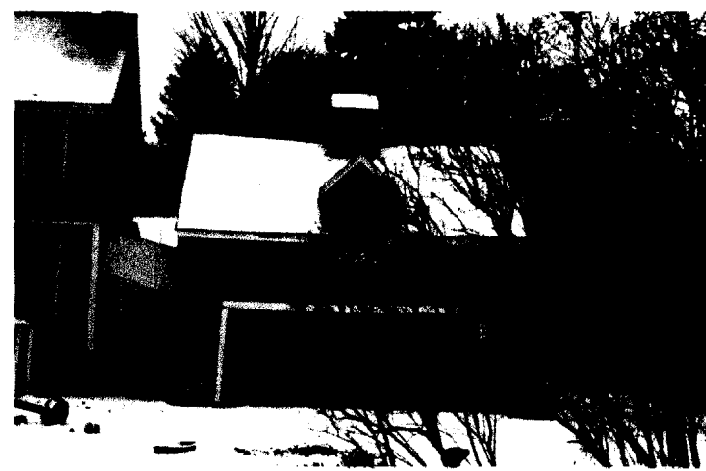
CONTRACTOR:
 STEVE SEWALL
 (STEVE SEWALL)



Schematic Site Plan • Proposed



residence • view from Ashmont Street
 carriage house to the rear



carriage house • existing conditions

R-3
 Front 25' Reg
 Rear 25' Reg
 2 story 12' Reg
 25'0" Lot Max - OK
 Cov. OK

The BEVILACQUA RESIDENCE

Portland • Maine

185 Ashmont Street

Schematic Design • Site Plan
 1" = 30'-0"

August 12, 2002

These drawings are schematic in nature and are for layout information. All existing conditions shall be verified by the contractor. The drawings are the exclusive property of the Architect.