| | | | | PFRMIT | ISSUED. | |
|--|-----------------------------------|---|-----------------------------------|---------------|---|--|
| City of Portland, Maine 389 Congress Street, 04101 | 0 | | - i | Issue Date: | 126 D0 0001 | |
| Location of Construction: | tion of Construction: Owner Name: | | | | 0 200 Phone: | |
| 54 COYLE ST | WELDON LI | SA A | 52 COYLE \$1 | Γ | | |
| Business Name: | Contractor Name | : | Contractor Addr | ess: | Rhone I | |
| | Cape Construc | tion & Renovation /Je | | | | |
| Lessee/Buyer's Name | Phone: | | Permit Type: Zo | | | |
| | | | Alterations - | Dwellings | R3 | |
| Past Use: | Proposed Use: | | Permit Fee: | Cost of Work: | CEO District: | |
| Single Family Home | | Home - Existing 8' x | \$100.0 | 0 \$7,600.0 | 0 3 | |
| 10' Deck Remo within existing | | - | Dlaced FIRE DEPT: Approved Denied | | Ise Group: R-3 Type: 5B IRC 2003 Signature: Dr. 6/10/09 | |
| Proposed Project Description: | | | | | | |
| Existing 8' x 10' Deck Remove | ed and replaced within o | existing footprint | Signature: Signat | | gnature m 6/10/09 | |
| | | | PEDESTRIAN ACTIVITIES DISTR | | CT (P.A.D.) | |
| | | Action: Approved Approved w/Conditions De | | | | |
| | | | Signature: | | Date: | |
| Permit Taken By: | Date Applied For: | | Zoni | ng Approval | | |
| Ldobson | 06/09/2009 | | | | | |
| 1. This permit application de | oes not preclude the | Special Zone or Revi | ews Z | oning Appeal | Historic Preservation | |
| Applicant(s) from meeting applicable State and Federal Rules. | | Shoreland | | | Vot in District or Landmark | |
| Building permits do not include plumbing, septic or electrical work. | | U Wetland | | | Does Not Require Review | |
| 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 | | 🗆 Flood Zone 🅢 🖊 | | ditional Use | Requires Review | |
| | | Subdivision | Inte | rpretation | Approved | |
| | | Site Plan | 🗌 Арр | roved | Approved w/Conditions | |
| | | Maj 🗍 Minor 🗍 MM | 1 Den | ied | Denied | |
| | | Date: In 6/10 | NG Date: | | Date: In 6/10/09 | |

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 |
| | | | |

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY) to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

Footing/Building Location Inspection: Prior to pouring concrete or setting X precast piers

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

<u>6/10/09</u> Date

Signature of Inspections Official

CBL: 126 D010001

Building Permit #: 09-0587



Permitting By Appointment

As part of Portland's city-wide effort to improve customer service and help streamline doing business within the City, the Inspections Division has developed a new permitting system for qualified properties and for specific construction projects.

This permitting program applies only to existing single family homes not located within a historic district or shoreland zone.

Eligible Projects

Please submit a complete application with the required plans

- □ Interior renovations, gut rehabs including structural changes.
- □ Attached and detached garages.
- □ Additions, decks, sheds, pools dormers.
- **Q** Rebuild of any exterior structure listed above.

Inspections are still required per City Code of Ordinance.

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 visit us on-line at <u>www.portlandmaine.gov</u>, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that this project meets the above criteria and that the work performed will not go beyond these parameters.



This is not a permit; you may not commence ANY work until the permit is issued.

Department of Planning and Development, Inspections Division ~ Portland City Hall, 389 Congress Street, Room 315 ~ Portland, Maine 04101 ~ Phone (207) 874-8703



General Building Permit Application

F If you of 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: SZ COMLE ST. | | | | | | |
|--|---|-----------------|---|--|--|--|
| Total Square Footage of Proposed Structure/A EXISTNG-80 ⁵¹ | 10 . (1) | | Number of Stories | | | |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# /J (c D / b | Applicant * <u>must</u> be owner, Lessee or Bu Name LISA GRAY WELVUN Address 52 Coyle St City, State & Zip Portland ME | | Telephone: 772 4462 | | | |
| Lessee/DBA (If Applicable) | Owner (if different from Applicant) Name Address City, State & Zip | Co Wa C a | st Of ork: \$_7,600.00_ of O Fee: \$ tal Fee: \$(0() | | | |
| Current legal use (i. single family) If vacant, what was the previous use? EXSING S'X(0' DECK BEING Removes AND Proposed Specific use: REPARED WITH NEW - SAME SIZE. Is property part of a subdivision? If yes, please name Project description: | | | | | | |
| Contractor's name: CAPE CONSTRUCTION + RESTORATION Address: TT7 CAPE RO & City, State & Zip Lin when the permit is ready: Telephone: Who should we contact when the permit is ready: Telephone: Mailing address: | | | | | | |

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 <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

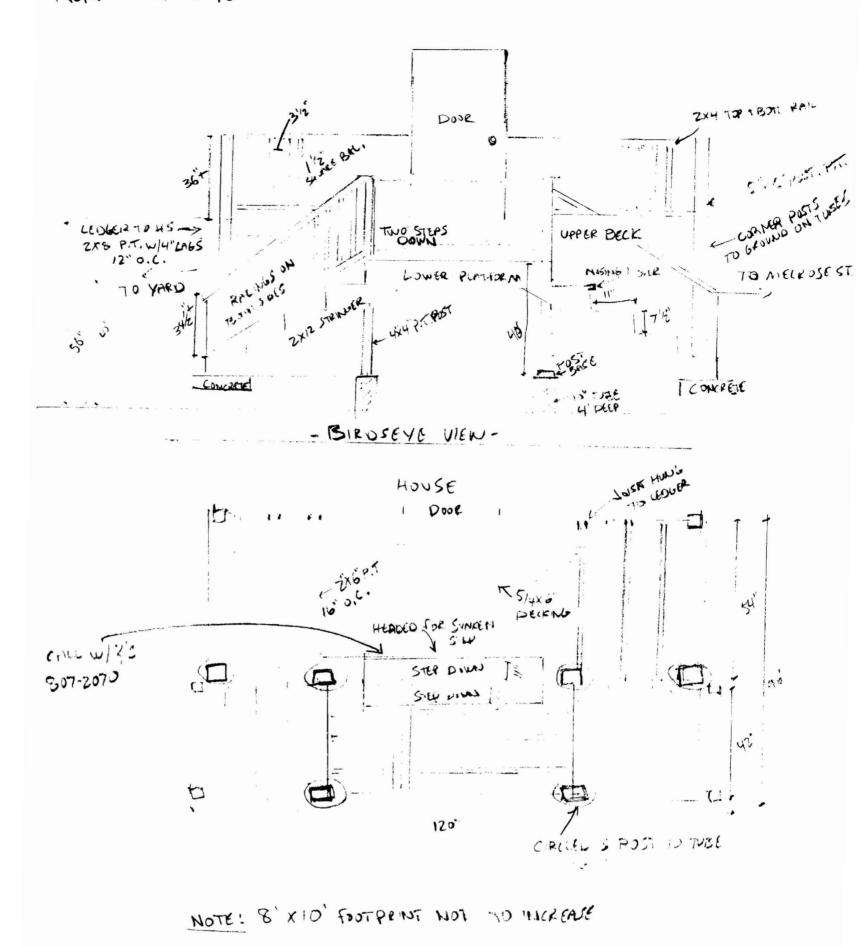
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: n

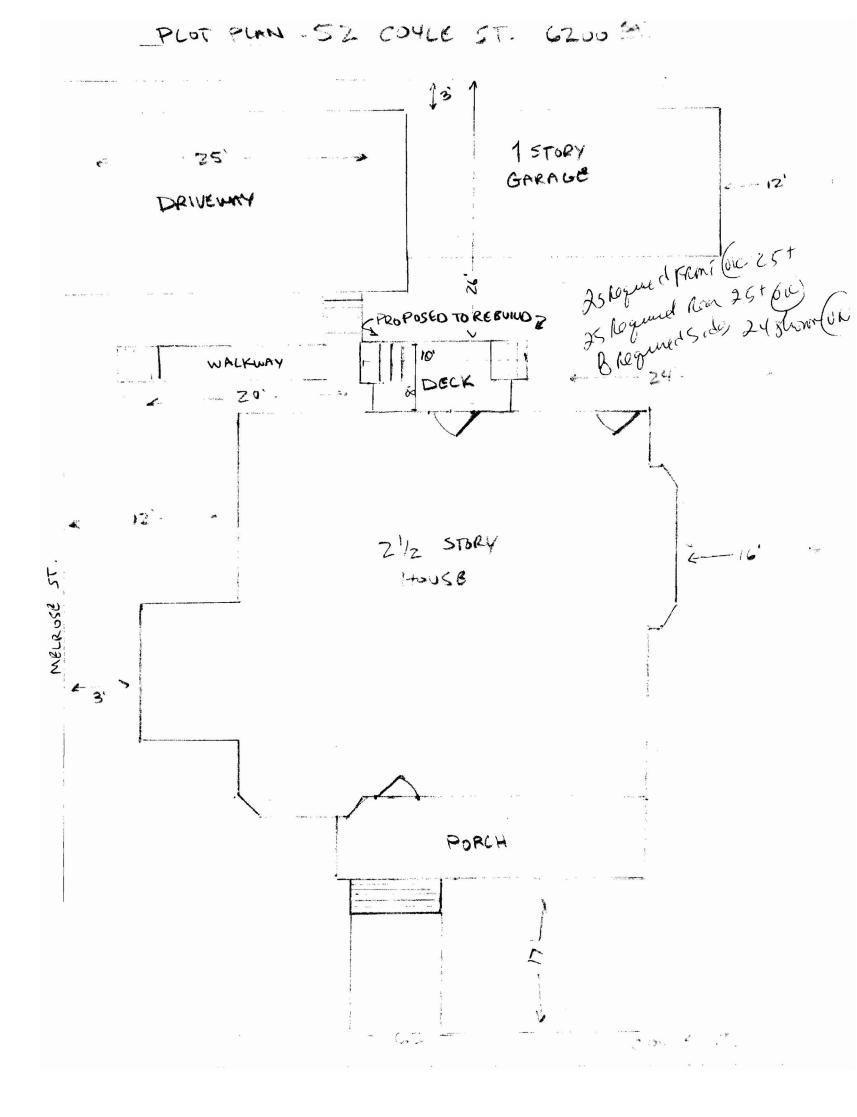
This is not a permit; you may not commence ANY work until the permit is issue

Revised 09-26-08

| City of Portland, Mai | Permit No: | Date Applied For: | CBL: | | | | |
|---|--|-------------------|-----------------|-------------------------|-----------------------|-------------------|--------------|
| 389 Congress Street, 041 | 01 Tel: (207) 874-8703, Fax: (| (207) 8 74 | 4 -8 716 | 09-0587 | 06/09/2009 | 126 D010 | 001 |
| Location of Construction: Owner Name: Ov | | | | wner Address: | | Phone: | |
| 54 COYLE ST | WELDON LISA A | WELDON LISA A 52 | | | | | |
| Business Name: | Contractor Name: | Contractor Name: | | Contractor Address: | | Phone | _ |
| | Cape Construction & I | Renovatio | on /Je | 777 Cape Road Limington | | (207) 807-2 | 070 |
| Lessee/Buyer's Name | 's Name Phone: | | P | ermit Type: | | | |
| | | | | Alterations - Dwe | llings | | |
| Proposed Use: | | | Proposed | Project Description: | | | |
| within existing footprint | sting 8' x 10' Deck Removed and re | piaced | footpri | • | moved and replaced | i witnin existing | g |
| Dept: Zoning | Status: Approved with Condition | is Rev | viewer: | Tom Markley | Approval I | Date: 06/10 | /2009 |
| Note: | | | | - | •• | Ok to Issue: | \checkmark |
| · · · · · | al for an additional dwelling unit. h as stoves, microwaves, refrigerat | | | • | | nt including, bu | ut |
| This property shall rem approval. | ain a single family dwelling. Any o | change of | f use sha | ll require a separa | te permit application | n for review and | d |
| Dept: Building | Status: Approved with Condition | is Rev | viewer: | Tom Markley | Approval I | Date: 06/10 | /2009 |
| Note: | | | | | | Ok to Issue: | \checkmark |
| 1) Application approval b and approrval prior to v | ased upon information provided by | / applicar | nt. Any o | leviation from app | roved plans require | s separate revie | w |



-REASON FOR REPLACEMENT IS, CURRENT DELK AND STEPS ARE UNSAFE-



CAPE CONSTRUCTION AND RESTORATION

777 Cape Rd Limington, ME 04049

CONTRACT

Date 6/7/2009

For:

Lisa & Michael Weldon 52 Coyle st. Portland,Me 04101

| | | Work to be Perfe | rmed | | |
|-------------------------|------------------------------|--------------------------------------|---------------|-----------------------|-------------------------------|
| Replacement of back | deck and stairs. To inclu | ıde: | | | |
| Removal and disposal | l of existing structure. | | | | |
| To install new sona tu | be footings to support. | may be able to reuse some of exist | ng,will insp | ect to determine). | |
| Will rebuild frame wi | th pressure treated lumb | per sized and spaced to code. | | | |
| Will install cedar decl | king with stainless faster | ners(like on front porch).(If compo | site is chose | n,additional \$600.00 |) PUC N& 780 |
| Will rebuild railings v | with cedar and wrap pos | ts with primed trim,(style to be dec | ded). (If con | mposite railings are | chosen,additional \$1,200.00) |
| Will install square cec | lar lattice or vertical slat | ts to enclose area under deck. | | | |
| Will wrap exposed pro | essure treated wood with | h smooth primed stock. | | | |
| Will lay slate and fill | joints as discussed unde | r deck. | | | |
| To restructure so to al | low room for grill and c | create dog bowl area. | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | T | |
| | | | | Total | 7,600.00 |
| | | | Signa | iture Brac | 7,600.00 21. Weldon |
| Phone # | Fax # | E-mail | | V · | • |

| Phone # | Fax # | E-mail |
|--------------|--------------|--------------------------------|
| 207-807-2070 | 207-637-2363 | capeconstruction@fairpoint.net |