Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

Department Name

PERMIT

Permit Number: 090390

Director - Building & Inspection Services

This is to certify that	with 10's Shed	2 H001001
provided that the person or person of the provisions of the Statutes		this permit shall comply with all of the City of Portland regulating
Apply to Public Works for street line and grade if nature of work requires such information.	Not ation of ispection must be give and writte permissic procured before this but and or procured in lath or oth sed-in. 2 HOL 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.		Mr. Oak
Appeal Board		Cut III y/solar

PENALTY FOR REMOVING THIS CARD



Original Receipt

		·	20
	_	, , , , , , , , , , , , , , , , , , ,	
Received from /	· · · · · · · · · · · · · · · · · · ·		
Location of Work			
Cost of Construction	\$	Buildi	ng Fee:
Permit Fee	\$	Sit	e Fee:
	Certi	ficate of Occupancy	y Fee:
			Total:
Building (IL) Plur	nbing (I5)	_ Electrical (I2)	Site Plan (U2)
Other			
CBL:			
Check #:		Total Colle	ected \$
If permit is Withdra \$20.00 or 20% of the	wn or Den ne fee, (wh a refund, y	nied, amount of t nichever is great ou <u>MUST</u> preser	nt the Original Receipt.
·			
WHITE - Applicant's C	vao		

YELLOW - Office Copy PINK - Permit Copy

Cit	y of Portland, Maine	- Building or Use	Permi	t Application	ı P	ermit No:	Issue Date	:	CBL:	
	Congress Street, 04101	•			- 1	09-0390	04	/30/200	9 132 HO	001001
Loca	ation of Construction:	Owner Name:			Owner Address:				Phone:	
199 CONCORD ST JORDAN MA		ARK C		199	CONCORD	ST		207-761-6657		
Business Name: Contractor Nam					tractor Address:			Phone		
Cape Construc		tion &	Renovation /Je	777	7 Cape Road L	imington		2078072	070	
Lessee/Buyer's Name Phone:						nit Type:		-		Zone:
				Ac	dditions - Dwe	llings				
Past	Use:	Proposed Use:		<u> </u>	<u> </u>		Cost of Wor	·k:	CEO District:	†
	gle Family Home	I	gle Family Home - Replace				\$7,20		5	
5111	igic rainity frome	existing shed			FIRE DEPT: IN		INSPE	CTION:		
							Use Gr	oup:	Type: CA	
							Denied		16-8	7F 30
								Ì	Use Group: R-3 Type: 50	
Pror	oosed Project Description:				ł				-	
	place existing shed with 10	1\v11! Shad			Cian			Ciamatu	(° /	il in
I KC	prace existing siled with 10	7X14 Siled				estrian acti	VITIES DIST	FRICT	PAD)	7/39 ⁶ 7
					1 60	ESTRIAN ACT		`	•	. ,
					Acti	ion: Appro	ved Ap	proved w/	/Conditions	Denied
					Sign	nature:			Date:	
Pern	nit Taken By:	Date Applied For:				Zoning	Approva			
lm	d	04/30/2009				2011116	, pp. o	**		
1.	This permit application d	loes not preclude the	Special Zone or Reviews		s Zoning Appeal			Historic Preservation		
1.	Applicant(s) from meetin		☐ SI	noreland		☐ Variance		,	Not in District or Landma	
	Federal Rules.									
2.	Building permits do not i septic or electrical work.	nclude plumbing,	Wetland Miscelland		aneous		Ooes Not Require Revi			
3.	Building permits are voice within six (6) months of the		Flood Zone			Conditional Use			Requires Re	view
	False information may in permit and stop all work.	validate a building	☐ Subdivision ☐ Site Plan ☐ Maj ☐ Minor ☐ MM ☐					Approved		
	Promo and sook an week	•						☐ Approved w/Conditions ☐ Denied		
			Date:	120103		Date:		D.	ate: 4/2/63	cs#
			Dute.	1 3 0 0	-	Date.			aic. y scrol	
I ha juris shal	reby certify that I am the ove been authorized by the ediction. In addition, if a playe the authority to entend permit.	owner to make this applermit for work describe	med proication a	as his authorized application is is	ne pro d age ssued	nt and I agree I, I certify that	to conform the code of	to all ap ficial's a	oplicable laws outhorized rep	of this resentative
SIG	NATURE OF APPLICANT			ADDRESS	<u> </u>		DATE		PHO	DNE
									- ***	_

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any

Location/Address of Construction: 199	CONCOR	DST, PORTI	DUL	, ME	
Total Square Footage of Proposed Structure/A	Area	Square Footage of Lot	7800) +72	
Tax Assessor's Chart, Block & Lot	Applicant *	must be owner, Lessee or	Buyer*	Telephone:	
Chart# Block# Lot#	Name M	ARK JORDAN		761-6657	
	Address \	19 CONCORD ST			
	City, State	& Zip PORTLAND ME	04103		
Lessee/DBA (If Applicable)	Owner (if o	lifferent from Applicant)	Co	ost Of	
	Name		W	ork: \$ 7200	
	Address		C	of O Fee: \$	
	City, State	& Zip	To	Total Fee: \$	
Proposed Specific use: SHEO Is property part of a subdivision? No Project description: REPLACE EXIST		If yes, please name			
Contractor's name: CAPE CONSTRUCTION	HO RES	TORATION			
Address: 777 CAPE ROAD, LIA	INGTON,	-	_		
City, State & Zip LIMINGTON, ME	0404	19	Telepl	hone: <u>807-2070</u>	
Who should we contact when the permit is real	dy: MARK	JORDAN	_ Telepł	none: 761-6657	
Mailing address: 199 CONCORD ST		_		,	
Please submit all of the information do so will result in the				Failure to	
n order to be sure the City fully understands the nay request additional information prior to the is his form and other applications visit the Inspecti	suance of a p	ermit. For further informa	tion or to	download copies of	

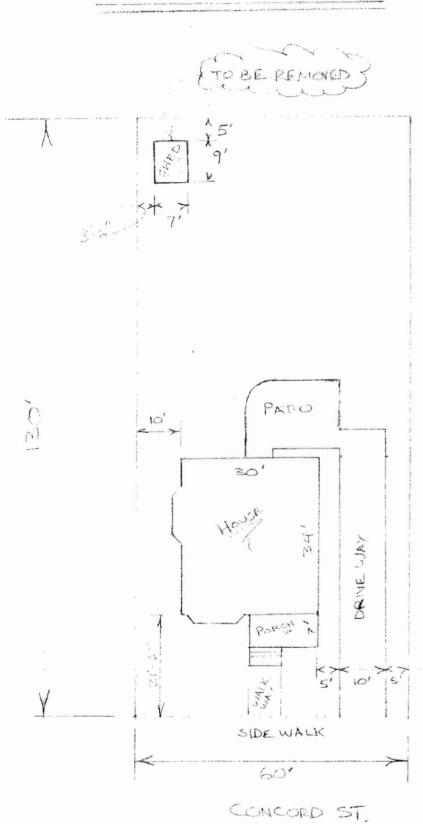
I Division office, room 315 City Hall or call 874-8703.

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: Mark	Jorda	Date: 4/30/09

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

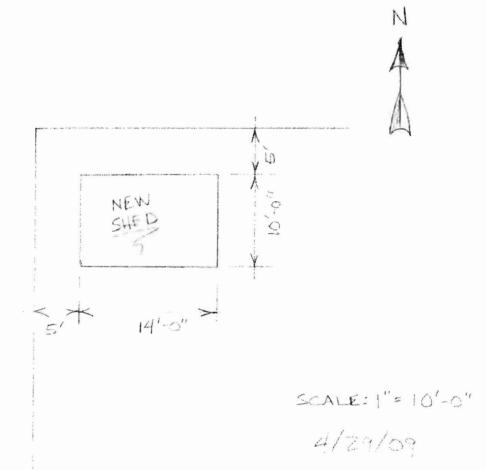
199 CONCORD ST. EXISTENG PLOT PLAN

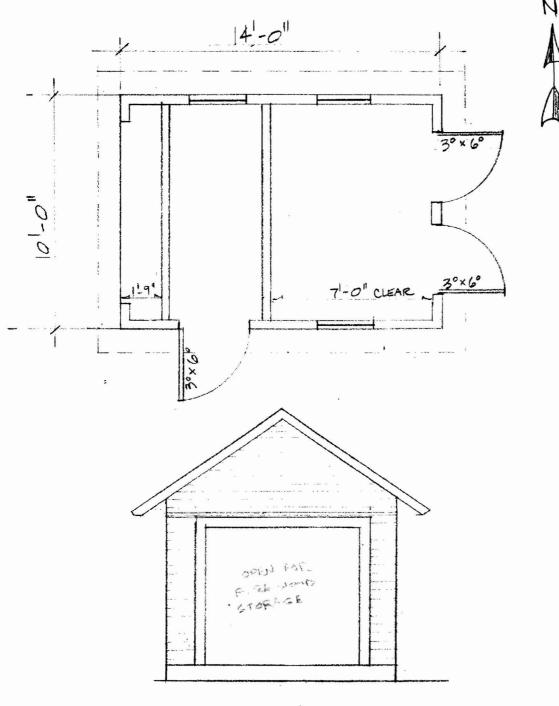




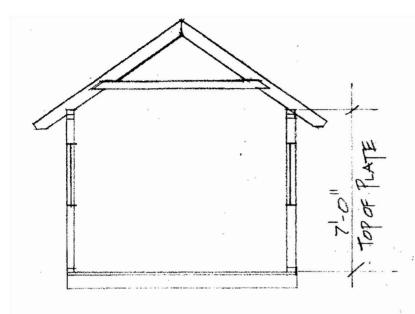
SCALE: |"=20"

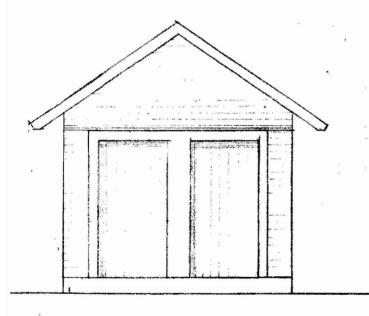
199 CONCORD ST. PROPOSED MODIFICATION





WEST SIDE





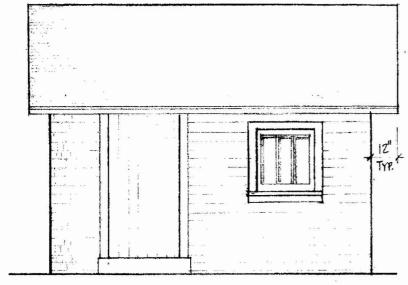
EVST SIDE

199 CONCORD ST.

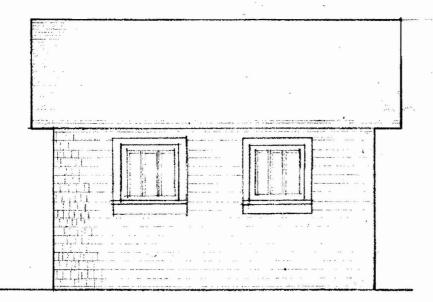
FORTLAND, MAINE
761-6657

STORAGE SHED

1/4" = 1'-0"



SOUTH SILE



Notes SIDE

CAPE CONSTRUCTION AND RESTORATION

ESTIMATE

777 Cape Rd Limington, ME 04049

Date	
4/16/2009	

For:	_		-
Mark Jordan 199 Concord st. Portland,Me 04103			

Work to be Performed

Construction of 10' x 14' shed. To include:

Installing and leveling four concrete footers, to be on soil that drains.

Floor framing to be 2"x8" Pressure treated 16" o.c.Fasteners will be galvanized.

Floor decking will be 3/4" Advantec T&G.

Wall framing,2"x4" 16" o.c. Conventinally framed door and window openings.

Wall sheathing to be 1/2" c.d.x plywood, including one side of interior walls to separate rooms and wood storage.

Will use tyvek house wrap on walls.

Roof framing,(rafters)2"x6" 16" o.c.

Collar ties,2"x4" placed at desired ceiling height.

Roof sheathing to be 1/2" c.d.x plywood.

Presumed that roofing shingle will be used to match house. Will use galvanized drip edge around perimeter of roof and lay roofing underlayment before shingling.

Will install ridge vent to allow heat to escape and ventilation.

Exterior trim to include:(will use primed stock) desired detail for rakes and soffits(should discuss).

Triming three doorways and the construction of doors(again will have to go over in detail).

Note: Triming and installing windows will be extra, time and material.

Triming firewood storage area.

Total 7,200.00

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

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. 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 Signature of Inspections Official

Date

CBL: 132 H001001 Building Permit #: 09-0390

City of Portland, Maine - Buil	ding or Use Permi	t		Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04101 Tel: (•		-8716	09-0390	04/30/2009	132 H001001	
Location of Construction:	Owner Name:			Owner Address:		Phone:	
199 CONCORD ST	JORDAN MARK C	JORDAN MARK C			199 CONCORD ST		
Business Name:	Contractor Name:	Contractor Name:			Contractor Address:		
	Cape Construction &	Renovation	n /Je	777 Cape Road Lii	nington	(207) 807-2070	
Lessee/Buyer's Name	Phone:		I	Permit Type:			
_				Additions - Dwell	ings	_	
Proposed Use:	<u></u>		ropose	l Project Description:			
Single Family Home - Replace existing	ng shed with 9'x7' Shed]	Replac	e existing shed wit	h 9'x7' Shed		
Dept: Zoning Status: A	approved with Condition	ıs Rev i	iewer:	Chris Hanson	Approval Da	nte: 04/30/2009	
Note:						Ok to Issue: 🗹	
This is NOT an approval for an an not limited to items such as stove.	· ·			•		t including, but	
This permit is being approved on work.	the basis of plans submi	itted. Any	deviat	ions shall require a	separate approval be	efore starting that	
Dept: Building Status: A	approved with Condition	ıs Rev i	iewer:	Chris Hanson	Approval Da	ite: 04/30/2009	
Note:						Ok to Issue:	
1) Fastener schedule per the IRC 20	03						
Application approval based upon and approrval prior to work.	information provided by	y applicant	. Any o	deviation from app	roved plans requires	separate review	