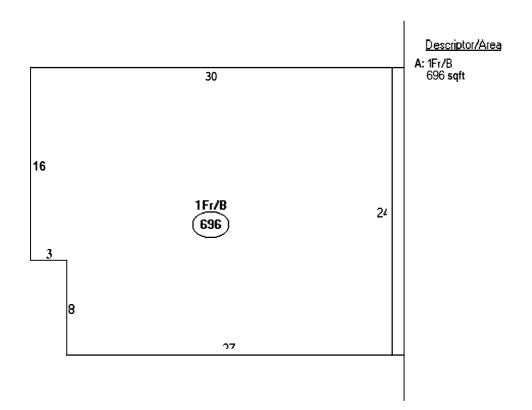
						PERMI	TISSUEL) 1	
City of Portland, Main	o Puilding on Ugo	Downi	it Annliastion	Peri	nit No:	Issue Date		CBL:	
389 Congress Street, 0410	O				04-0907	JUL (0 1 2004	137 A01	11001
Location of Construction:	Owner Name:		<u> </u>		Address:			hone:	
53 Mayland St	Hester Margar	Hester Margaret M			53 Mayland St CTY OF P			871-9959	
Business Name: Contractor Name			(Contra	ctor Address:			Phone	
	self			Portl	and				
Lessee/Buyer's Name	Phone:	Phone:			Type:			•	Zone:
] [Alter	ations - Dwel	llings			K2
Past Use:	Proposed Use:]	Permit	Fee:	Cost of Wor	rk: CE	O District:	<u> </u>
Single Family		Single Family w/new window in			\$30.00	\$3	00.00	4]
	bathroom			FIRE I	DEPT:	Approved	INSPECT		
						Denied	Use Group	:	Type:
							1 /2		25 P
							1 60	CA 199	9
Proposed Project Description:							1 1	will.	11.100
Replace small window w/23"	x 36" slider in shower v	vall	I.	Signatu	ire: TRIANACTIV	TTIES INS	Signature	77/1	71/04
				LEDES	TMANACIIV	THES DIS.		D •)	, ,
				Action:	Approve	d App	proved w/Co	nditions [Denied
				Signatu	ıre:		Da	ite:	
Permit Taken By:	Date Applied For:	1		- Signate		Annmor			
imb	07/01/2004				Zoning A	Approva	aı		
•		Spe	ecial Zone or Review	vs	Zoning	g Appeal		Historic Prese	ervation
1. This permit application of Applicant(s) from meeting		_ _			Variance			Not in District	t or Landmai
Federal Rules.	ing appricable state and	🗀 🌣	a adadie	9	variance			Not ili Districi	. Of Landinai
2. Building permits do not include plumbing,		Shoreland Wetland Flood Zone The state of			Miscellaneous		Does Not Req	uire Review	
 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 		☐ Fle	Flood Zone Conditio			nal Use Requires Review		ew	
		Subdivision			Interpretation			Approved	
		Si	te Plan		Approved			Approved w/C	Conditions
		Maj [Minor MM		Denied		17	Denied)
		L[11/201/1	4 y)ata:		704	Lu 1	>
		Jaid.	Willey 110	<u> </u>	Date:		— 1 //\\	Jour	
		IJ	•					\	
		C	CERTIFICATIO	N					
I hereby certify that I am the o	owner of record of the na				osed work is a	authorized	by the ow	ner of record	d and that
I have been authorized by the									
jurisdiction. In addition, if a p									
shall have the authority to ente	er all areas covered by su	ich pern	nıt at any reasona	ble ho	our to enforce	the provi	sion of the	code(s) app	licable to
such permit.									
GIGNATURE OF A PRINCE A NOT			A D D D E C C			P. 1		DITES	
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHON	1E
RESPONSIBLE PERSON IN CHAR	RGE OF WORK, TITLE					DATE		PHON	1E

•		ilding or Use Permit (207) 874-8703,Fax: (2	207) 874-8716	Permit No: 04-0907	Date Applied For: 07/01/2004	CBL: 137 A011001				
Location of Construction:		Owner Name:		Owner Address:	<u> </u>	Phone:				
53 Mayland St		Hester Margaret M		53 Mayland St	() 871-9959					
3usiness Name:		Contractor Name:		Contractor Address:	Phone					
		self		Portland						
Lessee/Buyer's Name	essee/Buyer's Name Phone:			Permit Type:						
			Alterations - Dwellings							
Proposed Use: Proposed Project Description:										
Single Family w/new wi	ndow in batl	hroom	Replac	ce small window w/	'23" x 36" slider in sh	ower wall				
Dept: Zoning	Status:	Approved	Reviewer:	Jeanine Bourke	Approval Da	ite: 07/01/2004				
Note:						Ok to Issue: 🗹				
Dept: Building Note:	Status:	Approved with Conditions	Reviewer:	Jeanine Bourke	Approval Da	te: 07/01/2004 Ok to Issue: ✓				
1) If new window is be	low 60" fron	n the floor of the tub it mus	st be tempered	glass						

Total Square Footage of Proposed Structu	ure	Square Foot	age of Lot	
NA		4.1	9.2	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	RGARET	HESTER	Telephone: 207 - 87/ 9959
Lessee/Buyer's Name (If Applicable) MARGARET HESTER.	telephone:	name, addres MARGARE YIAND 57.	T HESTER PORTLAND	Cost Of 3 00.00 Fee: \$ 30.00
If the location is currently vacant, what wa	oc prior uso:	N/A		
• •	•	Nyp		
Approximately how long has it been vaca	nt:	1 RATE	100000	
Proposed use: NEW WINDO Project description:	W IN	36 J	/2 X	23 1/2
Contractor's name, address & telephone:				
Who should we contact when the permit i Mailing address:	s ready: M	ARGARE	T HESTER	<u>-</u>
We will contact you by phone when the pose- seview the requirements before starting an and a \$100.00 fee If any work starts before	y work, with	a Plan Reviev	ome In and p ver. A stop wo PHONE:	ick up the permit and ork order will be issued
IF THE REQUIRED INFORMATION IS NOT INCLU DENIED AT THE DISCRETION OF THE BUILDING, INFORMATION IN ORDER TO APROVE THIS PEI	/PLANNING [
IN CHARACTERING CADELLIO AL NOVE IND FLI	I XIVII I .			
o this permit.				
Umanit	Herces		6	
t, you may no	t co			





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

Parcel ID

Location

Land Use

Location

SINGLE FAMILY

Owner Address HESTER MARGARET M
53 MAYLAND ST
PORTLAND ME 04103

Book/Page 14491/35

Legal 137-A-11

HAYLAND ST 55-57

4192 SF

Valuation Information

Land Building Total \$29,610 \$50,720 \$80,330

Property Information

Year Built Story Height Sq. Ft Style Total Acres 0.096 696 1952 Ranch Half Baths Total Rooms Attic Basement Bedrooms Full Baths None Full 2 ٦.

Outbuildings

Type Quantity Year Built Size Grade Condition
SHED-FRAME 1 1960 12X20 C A

Sales Information

Date Type Price Book/Page 01/01/1999 LAND + BLDING 14491-035 09/25/1995 LAND + BLDING \$72.000 12130-339

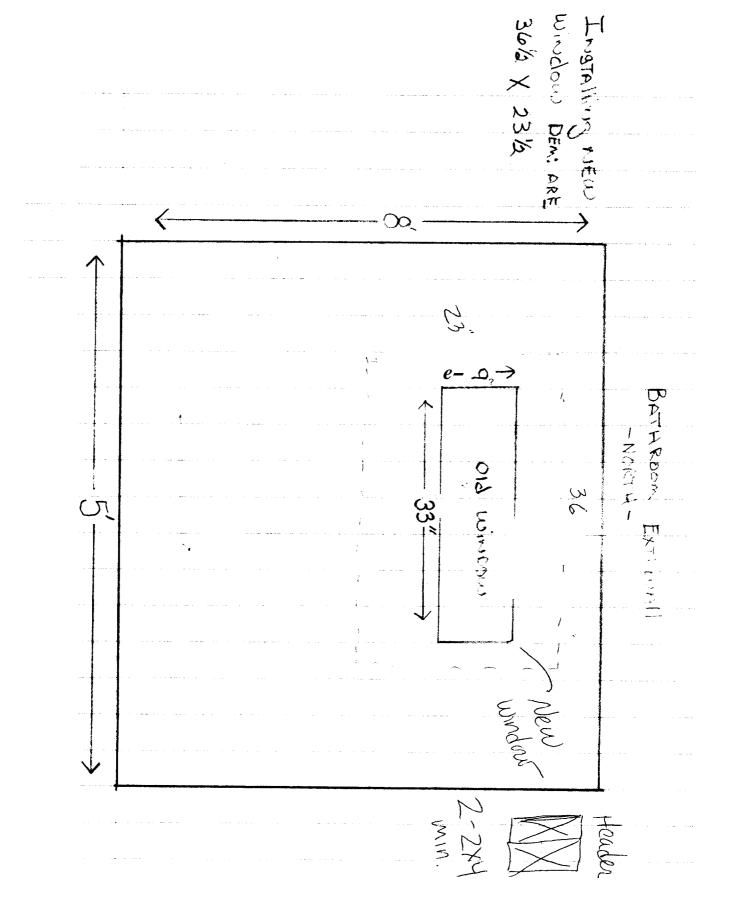
Picture and Sketch

<u>Picture</u> <u>Sketch</u>

<u>Click here</u> to view Tax Roll Information.

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

New Search!



Must be Tempered from Tub bottom Bathroom 9' lub shower Kean ~ windows replacement 8

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-870 or 874-8693 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:

in order to schedule an inspection:	~
By initializing at each inspection time, you are inspection procedure and additional fees from Work Order Release" will be incurred if the p below.	a "Stop Work Order" and "Stop
Pre-construction Meeting: Must be sch	
receipt of this permit. <u>Jay Reynolds, Developme</u> also be contacted at this time, before any site wo single family additions or alterations.	
Footing/Building Location Inspection;	Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical	Prior to any insulating or drywalling
use.	r to any occupancy of the structure or NOTE: There is a \$75.00 fee per ection at this point.
Certificate of Occupancy is not required for certa you if your project requires a Certificate of Occupinspection If any of the inspections do not occur, t	pancy. All projects DO require a final the project cannot go on to the next
phase, REGARDLESS OF THE NOTICE OR CERIFICATE OF OCCUPANICES M	
Signature of Applicant/Designee	
Signature of Inspections Official	Date /
CBL: <u>/ 3 7 - A - / /</u> Building Permit #:	4-7'7

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

m or

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

ECTION

JUL 0 1 2004 Permit Number: 040907 CITY OF PORTLAND

epting this permit shall comply with all

ances of the City of Portland regulating

of buildings and statures, and of the application on file in

This is to certify that	Hester Margaret M/self				
has permission to	Replace small window w/23"	6" slide	showe	all	
AT 53 Mayland St					137 A011001

ine and of the

ation 2

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

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

ication insped n must g and w n permis n procu b e this ding or t thered ed or d la osed-in. R 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. **Admeral** Board-

Department Name

PENALTY FOR REMOVING THIS CARD