## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read CIT	y of f	PORTLA	ND			
	PEI	TION			MIT ISSUED	7
This is to certify thatREYNOLDS JULIE & DA	VID GE ITS	Tome Improv	e	ال	UN <sup>-</sup> 2 2010	
has permission to Raise roof on back half of h	ous	CR	139 D	CITY	OF PORTLAN	D

and of the O

on ac

provided that the person or persons, fit of the provisions of the Statutes of Ma the construction, maintenance and use this department.

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

tion of Noti spection nust be give nd writte ermissid rocured his buil g or pa iereof is or oth ed-in. 24 lathe NOTICE IS REQUIRED. HOU

or co

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

ting this permit shall comply with all

ces of the City of Portland regulating

buildings and structures, and of the application on file in

#### OTHER REQUIRED APPROVALS

Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permit Applicati	on P	ermit No:	Issue Date:	CBL:		
389 Congress Street, 04101	•			10-0479		139 D0	0 <b>7</b> 001	
Location of Construction:	Own	Owner Address: Phone						
35 MACKWORTH ST REYNOLDS JULIE & DAVID P.				MACKWORT	TH ST			
Business Name:	Contractor Name	<b>:</b>	Cont	ractor Address:		Phone		
Scotts Home Improvemen			53 1	Boynton Road	Buxton	20759050	2075905039	
Lessee/Buyer's Name		Permit Type:				Zone:		
			Ad	Additions - Dwellings				
Past Use:	Proposed Use:	<u></u>	Pern	nit Fee:	Cost of Work:	CEO District:	7,, 5,-	
Single Family Home		Home - Raise roof or				4	11,754	
	back half of he	ouse	FIR	E DEPT:		PECTION:		
				<i>1</i> -	Denien Use	PECTION: Group: P. 3  TPC P	Type: 5/5	
				. / -			ح ه	
			_		P	700 6	905	
Proposed Project Description:				////	<b>/</b>		/	
Raise roof on back half of hor	use		Sign			nature:	ightharpoonup	
			PED	ESTRIAN ACTI	Γ (P.A.D.)	P.A.D.)		
			Action: Approved Approved w/Conditions Denied					
		Sign	Signature:		Date:	Date:		
Permit Taken By:	Date Applied For:	1	- 1					
ldobson	05/06/2010		Zoning Approval					
This permit application d	oes not preclude the	Special Zone or Re	views	Zoni	ng Appeal	Historic Pres	ervation	
Applicant(s) from meetin	<u> </u>	Shoreland Variance		e	Not in District or Landmark			
Federal Rules.	•							
2. Building permits do not i	☐ Wetland ☐ Miscellaneous			ineous	Does Not Require Review			
septic or electrical work.		167 8 hel	1 Dheboard					
3. Building permits are voice	Flood Zone Conditional Use			onal Use	Requires Rev	riew		
within six (6) months of t		MILOUM	ev					
False information may in		Subdivision		☐ Interpre	tation	☐ Approved		
permit and stop all work.	•					<b>!</b> _		
		Site Plan		Approve	ed	Approved w/e	Conditions	
		M. C. M. C. M.	I				<b>1</b>	
PERMIT IS:	SUED	May Minor M	$\ell arphi^{MI}$	Denied Denied		☐ Denied		
	OWING	gryn			Data (			
JIIM - 2	2010	Date	<del>'4  11</del>	Date:		Date:	$-\!$	
· · · · · · · · · · · · · · · · · · ·	2010		· /i 🗸				J	
L.						-	_	
CITY OF LOS	1							
		CERTIFICA	TION					
I hereby certify that I am the o	wner of record of the na	uned property, or that	t the pro	posed work is	s authorized by th	he owner of recor	rd and that	
I have been authorized by the	owner to make this appl	ication as his authoriz	zed agei	nt and I agree	to conform to all	l applicable laws	of this	
jurisdiction. In addition, if a p								
shall have the authority to ente	er all areas covered by s	uch permit at any reas	sonable	hour to enfor	e the provision	of the code(s) ap	plicable to	
such permit.								
SIGNATURE OF APPLICANT		ADDR	ESS		DATE	PHO	NE	

DÁTE

PHONE

City of Portland, Maine		Permit No: 10-0479	Date Applied For: 05/06/2010	:   CBL:   139 D007001			
389 Congress Street, 04101  Location of Construction:	Owner Name:	· · · · · · · · · · · · · · · · · · ·	Owner Address:		Phone:		
35 MACKWORTH ST REYNOLDS JULIE & DAVID P			35 MACKWORT	H ST			
Business Name:	Contractor Name:		Contractor Address:		Phone		
	Scotts Home Improvement		53 Boynton Road	(207) 590-5039			
Lessee/Buyer's Name	Phone:		Permit Type:				
				Additions - Dwellings			
Proposed Use:	<u> </u>	Propose	d Project Description:		<del></del>		
Single Family Home - Raise roof on back half of house			Raise roof on back half of house				

Dept: Zoning

Status: Approved with Conditions

Reviewer: Marge Schmuckal

Approval Date:

05/11/2010

Note: using 14-436(b) - using 16% of the 80% allowed for expansion

Ok to Issue: 🗸

- 1) Separate permits shall be required for future decks, sheds, pools, and/or garages.
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building

Status: Approved with Conditions

Reviewer: Tammy Munson

Approval Date:

05/28/2010

Ok to Issue: 🔽

Note:
1) The minimum ceiling height shall be 7'-0".

- 2) There must be a 2" clearance maintained between the chimney and any combustible material, with draft stopping per code at each level
- 3) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
- 4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

#### **BUILDING PERMIT INSPECTION PROCEDURES**

#### Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.

<u>X</u>	Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling
X	Final inspection required at completion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

**CBL**: 139 D007001 Building Permit #: 10-0479



## **Original Receipt**

Certificate of Occupations (IL) Plumbing (IS) Electrical (I2)	
Cost of Construction \$ Building (H.) Plumbing (IS) Electrical (I2)	مالح
Permit Fee \$	1th St
Certificate of Occupations (IL) Plumbing (IS) Electrical (I2)	lding Fee:
Building (H.) Plumbing (I5) Electrical (I2)	Site Fee:
	ncy Fee:
	Total:
	Site Plan (U2)
Other	
CBL: 139-D-7	
Check #: O(a(a) Total Co	F : 1 (

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

### General Building Permit Application

Hyon 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 pertuits of any kind are accepted.

Location/Address of Construction: 35 Mackworth St.								
Total Square Footage of Proposed Structure/Area Square Footage of Lot								
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	* Telephone:						
Chart# Block# Lot#	Name David Page	207-650-9182						
Address 35 Mackworth st.								
City, State & Zip Portland, ME 04103								
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost (4) (777)						
}	Name	Work: \$ 000, 000						
Address C of O Fee: \$								
City, State & Zip  Total Fee: \$ 240 102								
Current legal use (i.e. single family) Single Family  If vacant, what was the previous use?								
Proposed Specific use: 5) well family								
Is property part of a subdivision? No If yes, please name								
Project description: Raise roof on back half of house								
CCL, E DID CHORS								
Contractor's name: SCOTS toma improvement								
Address: 53 Boyrton Rd MAY directed MAY								
City, State & Zip Brack ME 04093  Who should we contact when the permit is ready: David Page Mailing address: 35 Mackworth St. Portland, ME 04109  Please submit all of the information outlined on the applicable Checklist. Failure to								
Who should we contact when the permit is read	ly: David Page	Jeptone: 650-9182						
Mailing address: 35 Mackworth St.	Portland, ME 04103							
Please submit all of the information outlined on the applicable Checklist. Failure to								

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 www.portlandmaine.gov, 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 rhis 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:	N	M		Date:	5/6/	10			
	This is not	permit;	you may not co	mmence A	ANY wo	rk until th	e permit is	issue	

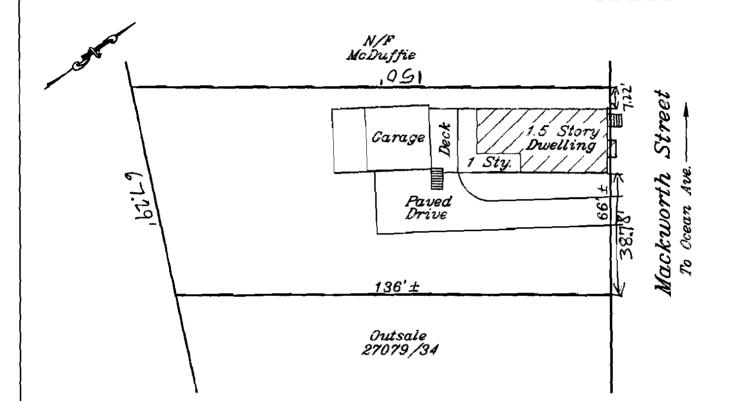
#### FOR MORTGAGE LENDER USE ONLY

GENERAL NOTES: (!) DISTANCES SHOWN ARE TAKEN FROM PROVIDED TITLE REFERENCES SHOWN BELOW. (2) THE PURPOSE OF THIS INSPECTION IS TO RENDER AN OPINION AS FOLLOWS: A) DWELLING AND ACCESSORY STRUCTURE'S COMPLIANCE WITH RESPECT TO MUNICIPAL BONING SETBACKS, AND B) FLOOD BONE DETERMINATION BY HORIZONTAL SCALING ON BELOW REFERENCED FEMA MAP. (3) THIS INSPECTION EXCEPTS OUT ALL TECHNICAL STANDARDS CURRENTLY SET FORTH BY STATE OF MAINE BOARD OF LICENSURE FOR PROFESSIONAL LAND SURVEYORS. (4) THIS INSPECTION IS TO BE USED ONLY BY THE BELOW LISTED LENDER AND IS NOT BE USED BY ANOTHER PARTY FOR BOUNDARY LINE LOCATIONS OR LAND TITLE OPINIONS. (6) TITLE OR OWNERSHIP NOT DETERMINED. (6) A BOUNDARY SURVEY SHOULD BE PERFORMED TO RENDER A PROFESSIONAL OPINION PERFAINING TO BOUNDARY LINE LOCATIONS, EASEMENTS, RIGHTS OF WAY, ENCUMBRANCES, ENCROACHMENTS, AND/OR CONFLICTS WITH ABUTTER'S DEEDS. (7) LOCATION/EXISTENCE OF WETLANDS NOT DETERMINED UNLESS SHOWN ON A RECORDED SUBDIVISION PLAN.

THIS SKETCH IS NOT TO BE USED FOR CONSTRUCTION PURPOSES, IMPROVEMENTS SHOWN ARE APPROXIMATE. ADDRESS: \_35 Mackworth Street \_\_\_ INSP. DATE: \_\_1/12/2010

SCALE: 1" = 30'

\_Portland, Maine

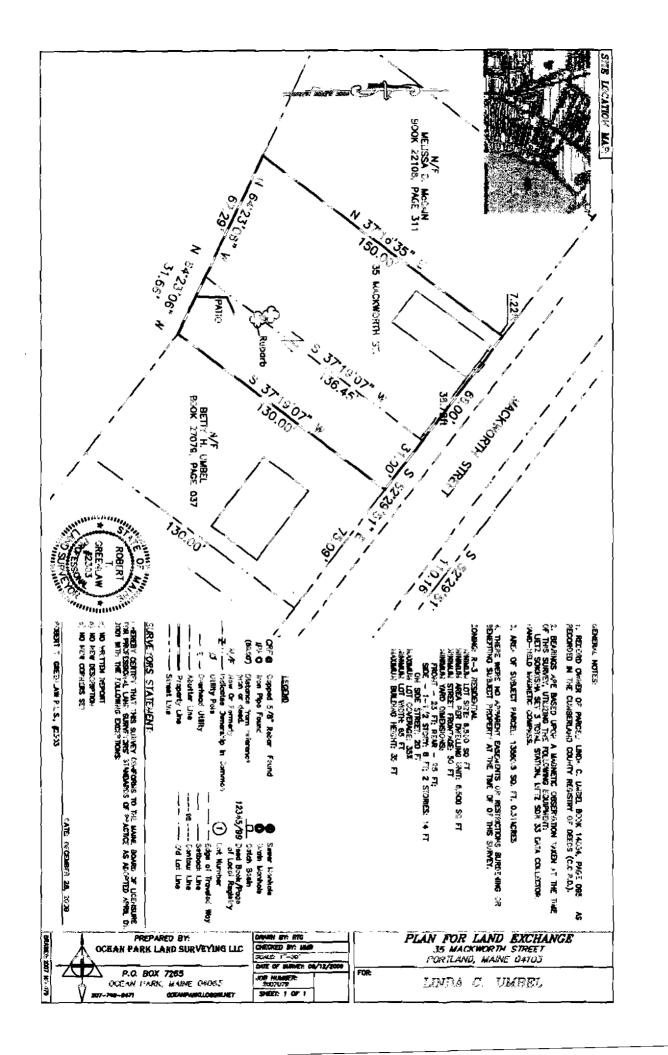


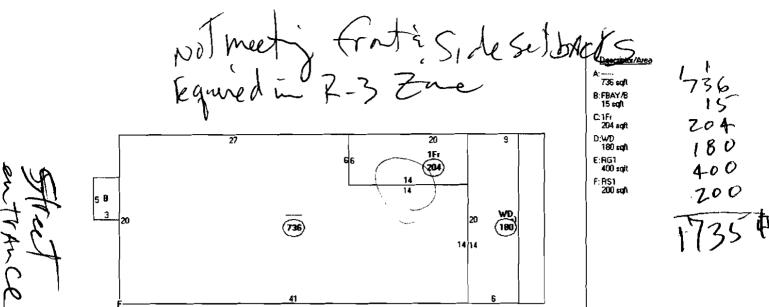
TPB SEE PROVIDED TITLE REFERENCES FOR APPURTENANCES, IF ANY. APPLICANT: D. Page & J. Reynolds FILE#: 20922518 James D. Nadeau, LLC OWNER: Linda Umbel \_ \_ \_ CLIENT#: 4167-09 LENDER: REQ. PARTY: Baxter Title Company Professional Land Surveyors TITLE REFERENCES: COUNTY: Cumberland Certified Floodplain Managers DEED BOOK: 14034 PAGE: 95 PLAN BOOK: 3 PAGE: 10 LOT: p/o 2 MUNICIPAL REFERENCE: MAP: \_\_139 \_\_\_ BLOCK: \_\_D \_\_\_ LOT: \_\_7 THE DWELLING DOES NOT FALL WITHIN A SPECIAL FLOOD HAZARD AREA PER FEMA COMMUNITY MAP No. 230051 PANEL: 0007C ZONE: X DATE: 12/8/1998 918 BRIGHTON AVE. PH.(207)878-7870 PORTLAND, ME. 04102 F.(207)878-7871

THIS INSPECTION IS VALID ONLY WITH AN EMBOSSED SEAL AND IS NUIL & VOID SO DAYS AFTER INSPECTION DATE. THIS IS NOT A BOUNDARY SURVEY - NOT FOR RECORDING

THE DWELLING WAS THE IN COMPLIANCE WITH MUNICIPAL ZONING

SETBACK REQUIREMENTS AT THE TIME OF CONSTRUCTION.





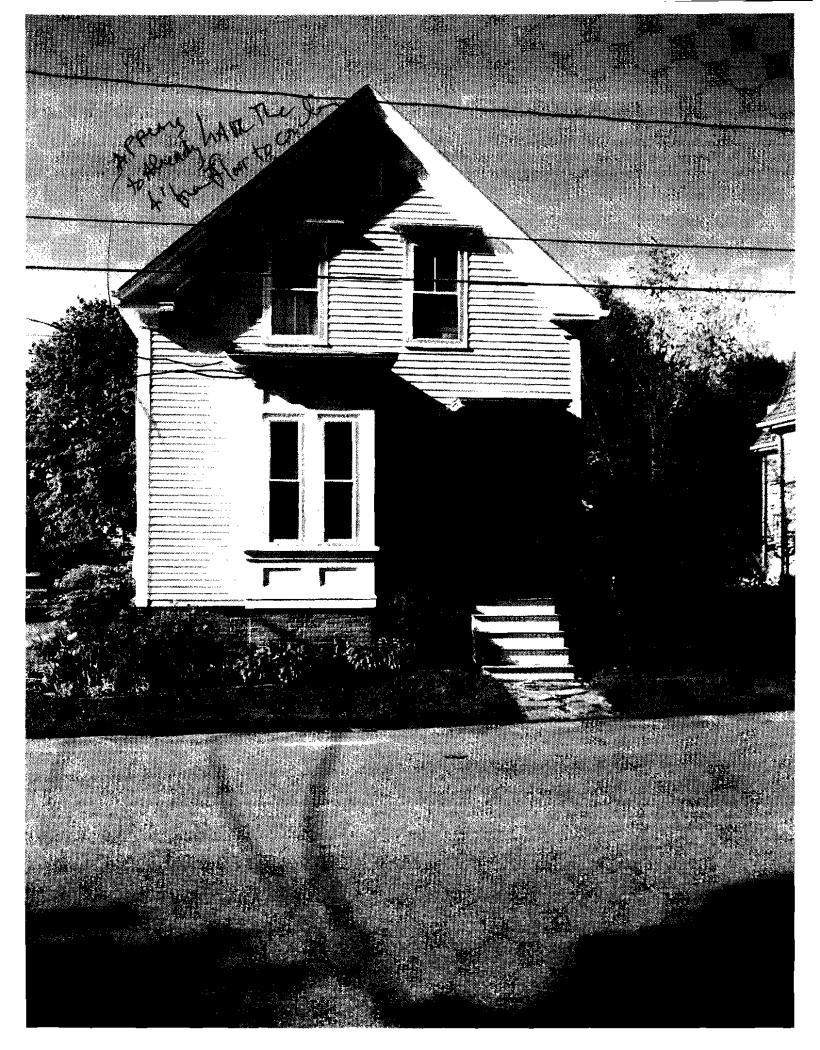
Lotsize 11,754 - over R-3 min lotsize of 6,500 F

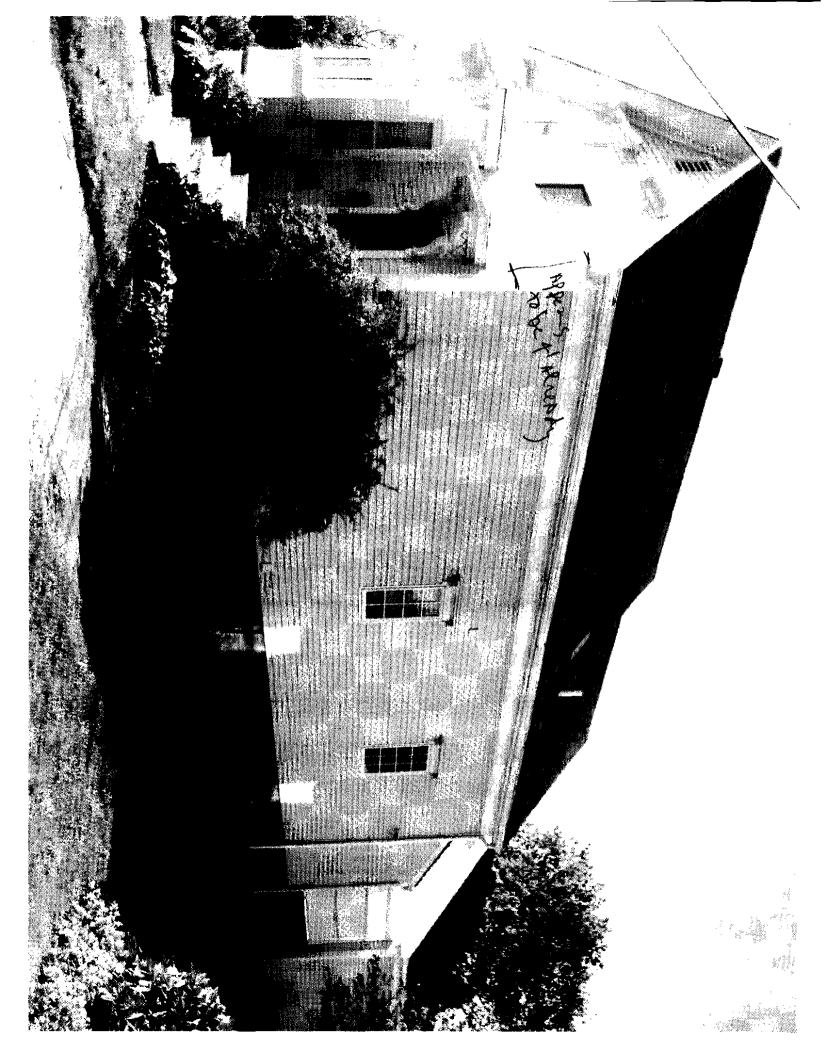
14-4366) using The 80% section 1735# x80% = 1388# Albourble weeke

14 + 20' = 280 # = 16% = are Ase of
The 80% Allowed
This zeo-1735

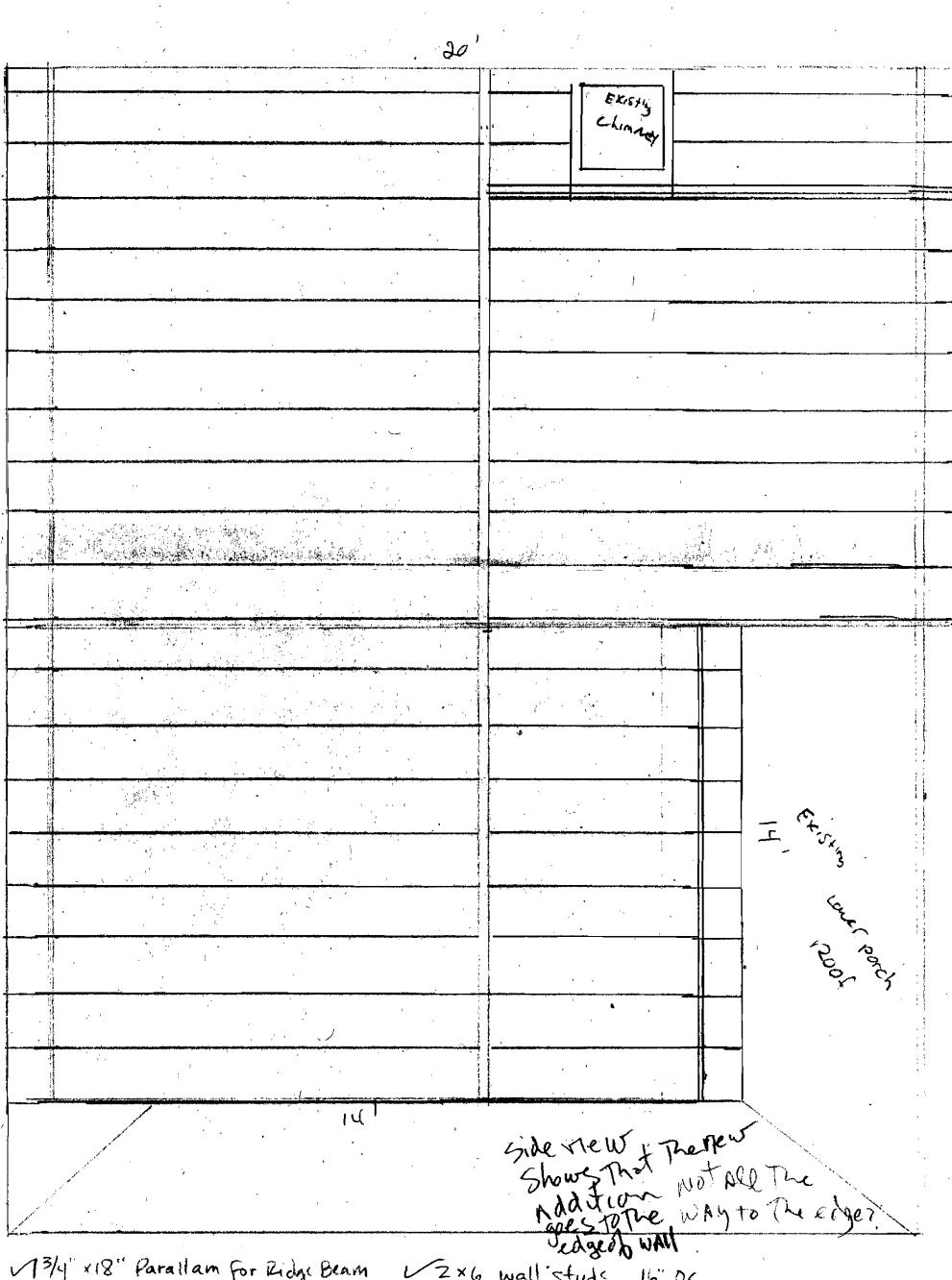
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Way to The
Way to The



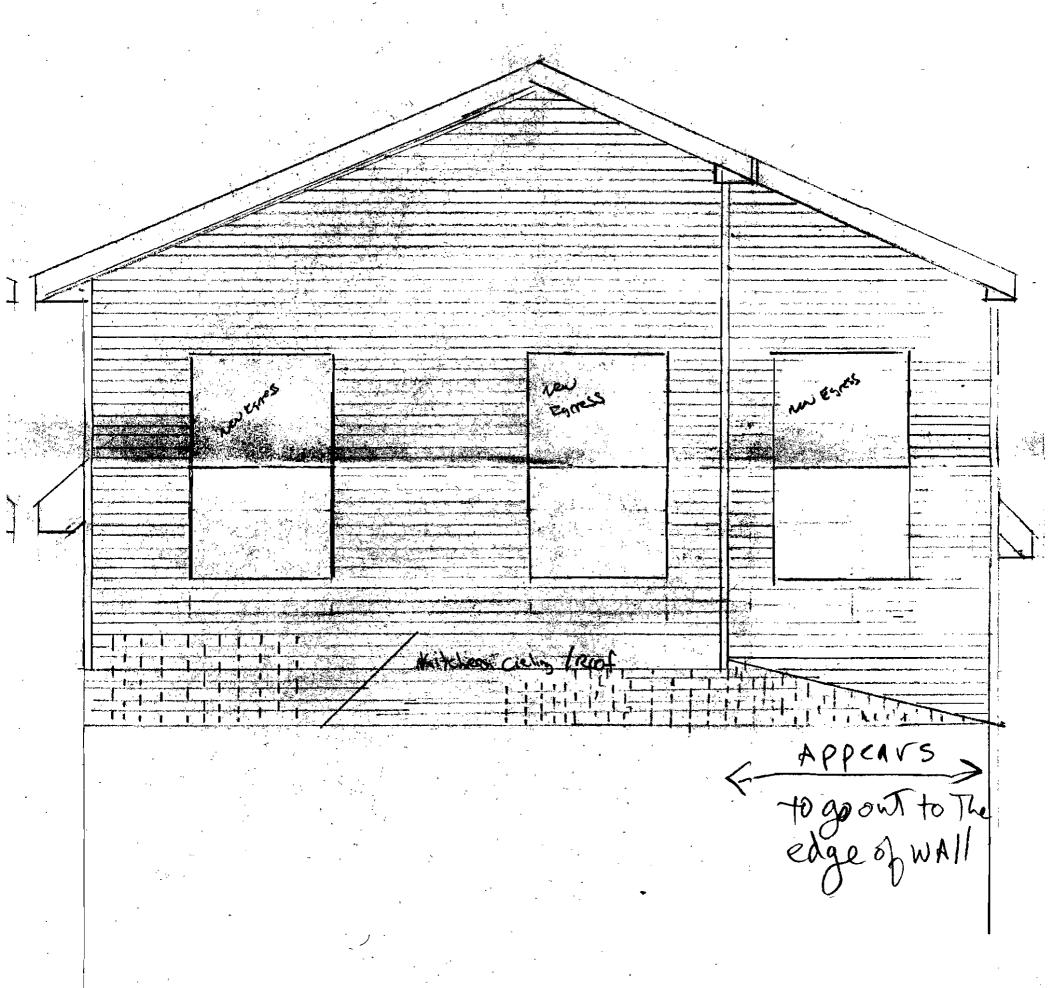




# Existing proof/min tlase



13/4" x18" Parallam for Ridge Beam CZX10 Rafters 16" OC U5/8 plywood sheathing VZ×6 wall studes 16" OC 1/2 wall shearthing OTTIPLE ZX8 Headers ROOF STRUCTURE FOR PROPOSED DARMERS/ROOF RAISING



RAGE LOCAL

