

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION PERMIT

Permit Number: 061669

Please Read
Application And
Notes, If Any,
Attached

This is to certify that NIAA ANDREW B & LISA BULTHUIS ITS/Nate Schroeder
has permission to 1 story addition w/new bed, bath & Living room & Kitchen remodel
AT 53 MACKWORTH ST 139 D009001

PERMIT ISSUED
DEC 28 2006
CITY OF PORTLAND

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State and of the Ordinances of the City of Portland relating to the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission procured before this building or part thereof is laid or closed-in. 24 HOUR 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

Thomas M. Markley 11/27/06
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-1669	Issue Date:	CBL: 139 D009001
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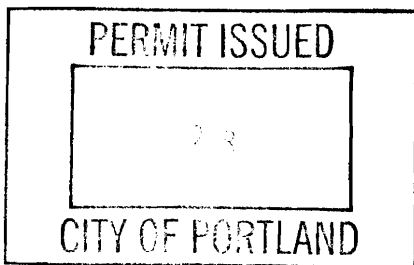
Location of Construction: 53 MACKWORTH ST	Owner Name: NJAA ANDREW B & LISA L BUL	Owner Address: 53 MACKWORTH ST	Phone:
Business Name:	Contractor Name: Nate Schrock	Contractor Address: 94 Wall Street Portland	Phone 2077978845
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R3

Past Use: Single Family Home	Proposed Use: Single Family Home- 1 story addition w/new bed, bath & Living room & Kitchen remodel	Permit Fee: \$770.00	Cost of Work: \$75,000.00	CEO District: 4
Proposed Project Description: 1 story addition w/new bed, bath & Living room & Kitchen remodel		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: 5B IRC 2003 Signature: <i>Jm</i> 11/27/06	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: ldobson	Date Applied For: 11/14/2006	Zoning Approval		
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input checked="" type="checkbox"/> Flood Zone X <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 11/27/06 <i>ABM</i>	<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: _____	<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>ABM</i>



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.

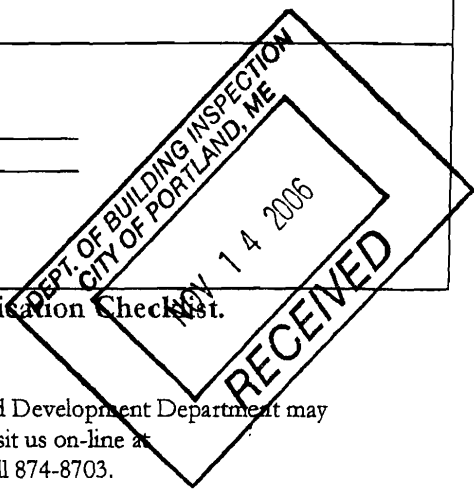
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



General 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>53 Mackworth</u>		
Total Square Footage of Proposed Structure <u>825 Square ft.</u>	Square Footage of Lot <u>9820</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>139</u> Block# <u>D</u> Lot# <u>9</u>	Owner: <u>Andrew Njaa</u> & <u>Lisa Bulthuis</u>	Telephone: (home) <u>871-5848</u> Cell <u>653-9754</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Nate Schrock</u> <u>40 Allen Dr.</u> <u>Windham, Me. 04062</u> Phone <u>415-7283</u>	Cost Of Work: \$ <u>75,000 (est)</u> Fee: \$ <u>770⁰⁰</u> C of O Fee: \$ _____
Current Specific use: <u>Residence</u> If vacant, what was the previous use? _____ Proposed Specific use: _____		
Project description: <u>1 story Addition, crawl spc. underneath</u> <u>New Bed/Bath/Living room etc. & Kitchen remodel (in existing structure)</u>		
Contractor's name, address & telephone: Who should we contact when the permit is ready: <u>Nate Schrock</u> Mailing address: <u>40 Allen Dr.</u> <u>Windham, Me. 04062</u> Phone: <u>415-7283</u>		



Please submit all of the information outlined in the Commercial Application 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 visit us on-line at www.portlandmaine.gov, stop by the Building Inspections 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 of applicant: <u>[Signature]</u>	Date: <u>11/13/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-1669	Date Applied For: 11/14/2006	CBL: 139 D009001
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Business Name:	Contractor Name: Nate Schrock	Contractor Address: 94 Wall Street Portland	Phone: (207) 797-8845
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

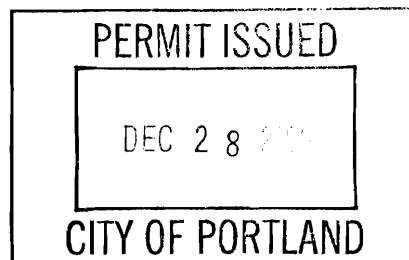
Proposed Use: Single Family Home- 1 story addition w/new bed, bath & Living room & Kitchen remodel	Proposed Project Description: 1 story addition w/new bed, bath & Living room & Kitchen remodel
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 11/17/2006**Note:** **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 2) Separate permits shall be required for future decks, sheds, pools, and/or garages.
- 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:** Tom Markley **Approval Date:** 11/27/2006**Note:** **Ok to Issue:**

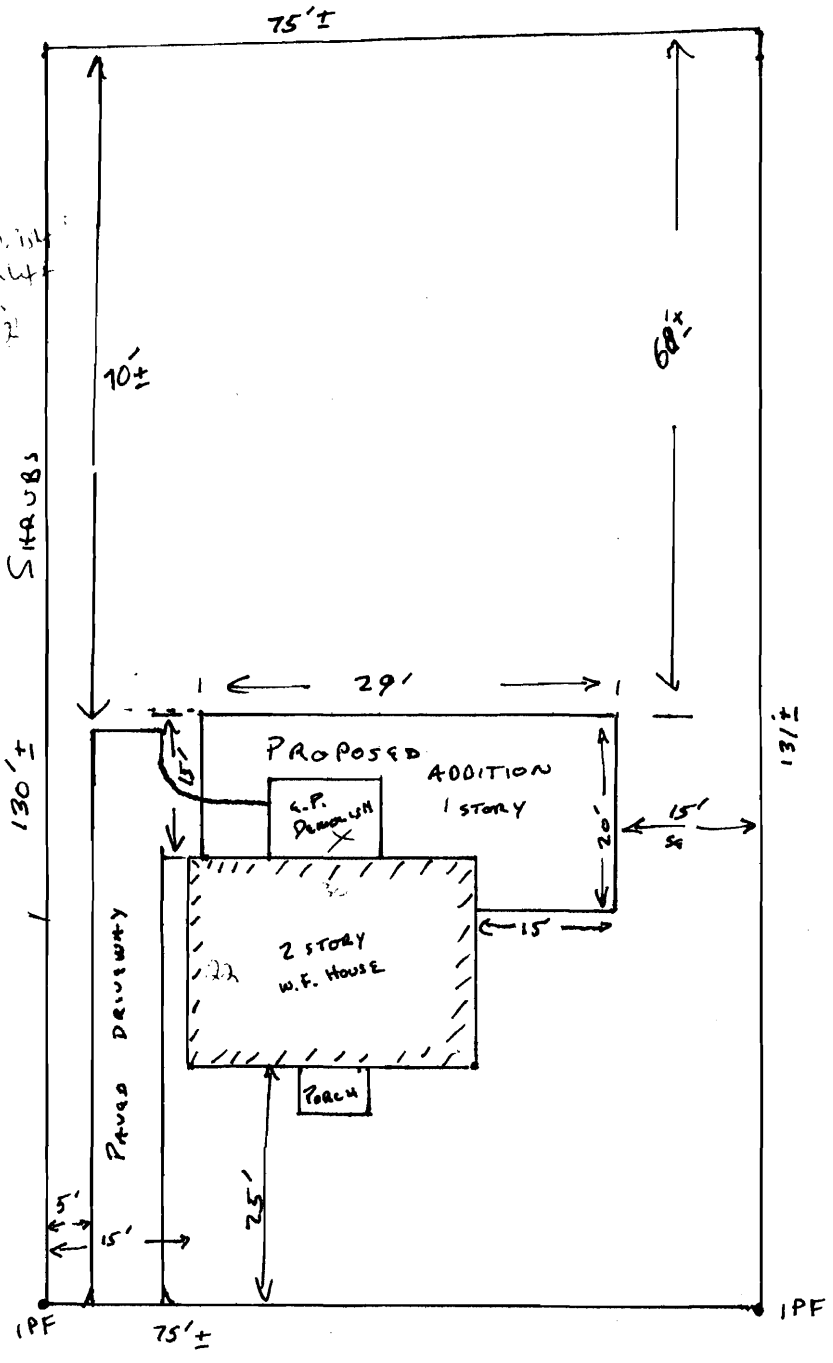
- 1) The design load spec sheets for any engineered beam(s) must be submitted to this office.
- 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 3) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



R3 - 105' x 185' 1/2
 front 25' 1/2 - OK
 rear 25' 1/2 - 65' given
 side 15' 1/2 - 15' given
 height 35' 1/2 - 15' 1/2
 lot coverage 35' 1/2 (3448.2)
 OK

66
 435 15x29
 75 8x15
 1170 sq ft

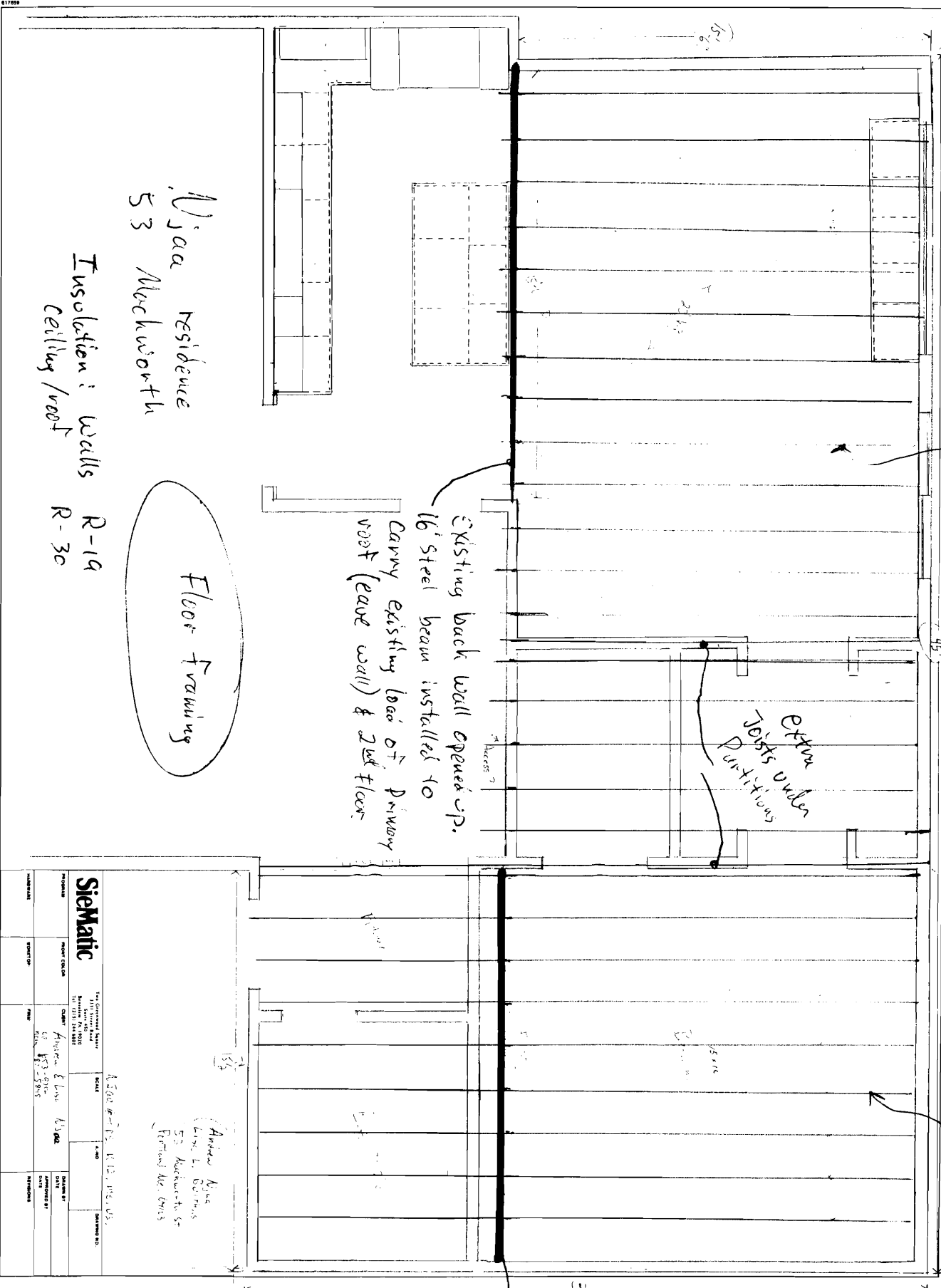
height 35' max
 15.75' OK



53 MACKWORTH ST
 ANDREW NYHA - 653-9754 cell
 LISE BULTHOIS - 653-6674 cell
 871 5898 Home

16' TGI's Existing F.I.F. no. let into Joist section. If no. possible. hung at opposite ends

26' long engineered 19.2" O.C. "I" With Steel Joists for beam support



Nisa residence
53 Merckworth

Insulation: Walls R-19
Ceiling/roof R-30

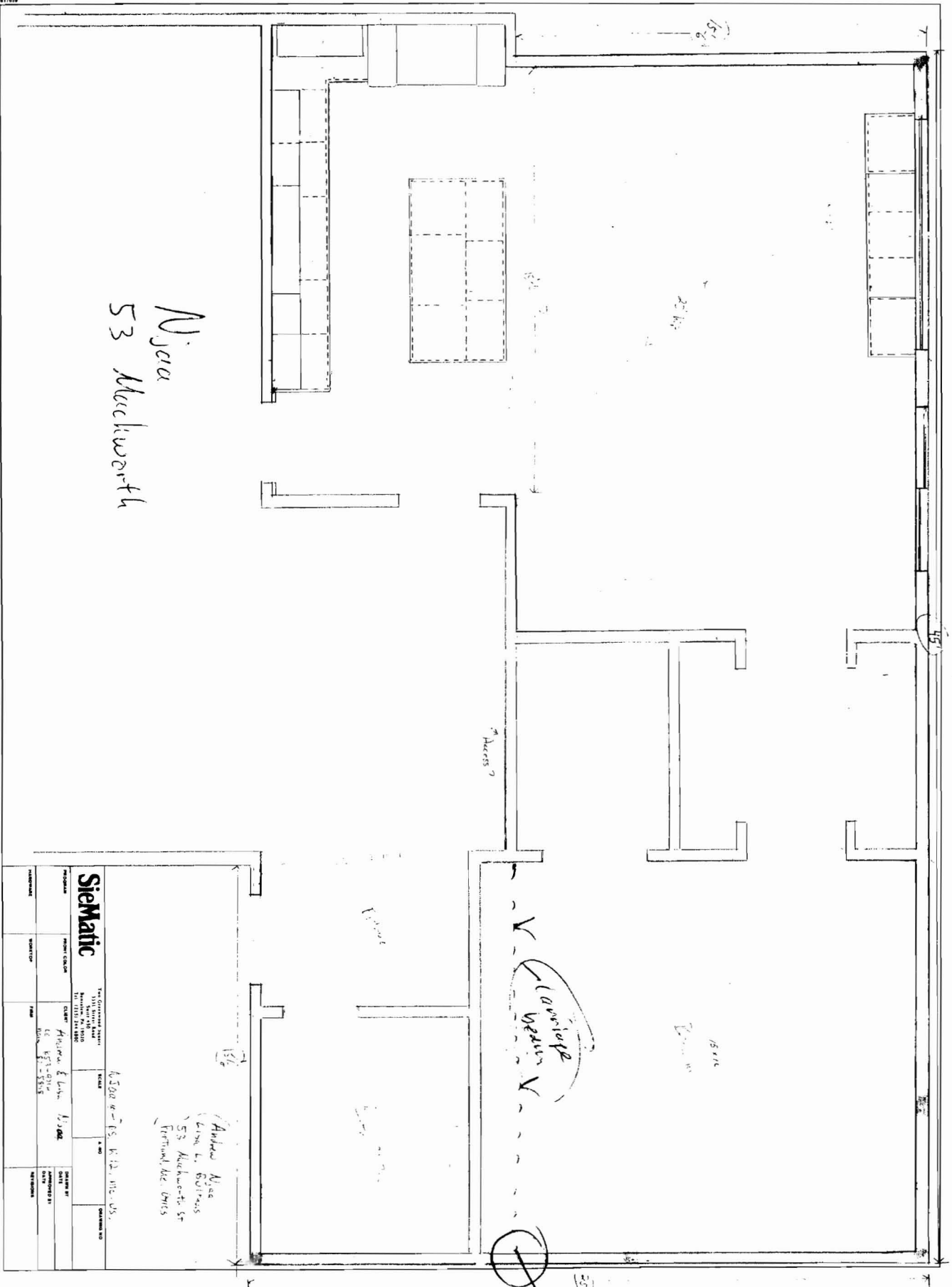
Floor Framing

Siematic		14000 10th St. W. #100 Seattle, WA 98148 Tel: (206) 244-8888		SCALE		AS SHOWN	
PROJECT CODE	CLIENT	DATE	PROJECT NO.	DATE	PROJECT NO.	DATE	PROJECT NO.
	Angus & Lisa	11/12/05	11/12/05	11/12/05	11/12/05	11/12/05	11/12/05
PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.
PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.	PROJECT NO.

Andrew Nye
Engr. L. B.S. 53 Merckworth St
Portland, OR, OREGON

151
Floor Carriage beam
16' Steel
for TGI Support

Foundation plan 4' First wall
 (Sill bolts every _____?)

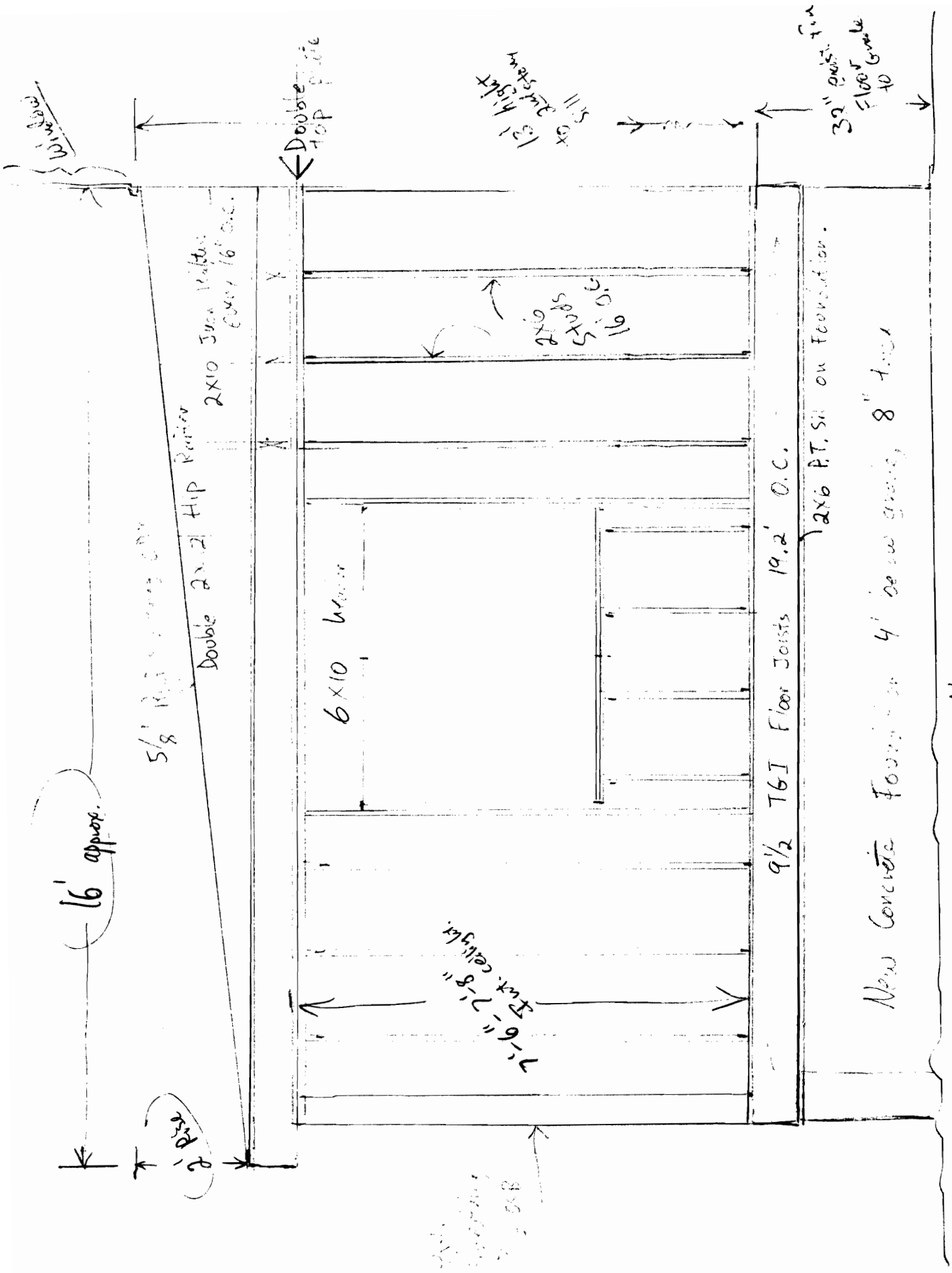


N. J. Area
 53 Mackworth

⊗ Pocket for
 Floor Joist
 beam

Andrew Mac
 1200 E. 60th St
 53 Mackworth St
 Portland, Ore. 97215

Siematic THE COMPANY NAME 11111 1st Street Portland, Ore. 97215		1200 E. 60th St. Portland, Ore. 97215	
PROJECT LOCATION	CLIENT	NAME	ADDRESS
	Andrew & Linda Mac	N. J. Area	53 Mackworth St
DATE	DATE	DATE	DATE



16' approx.

5/8" Thick Sheathing

Double 2x2 Hip Rafter

2x10 Joist Rafters Every 16" O.C.

6x10 beam

7'-6" - 7'-8" Int. ceiling

5x6 studs 16" O.C.

9 1/2" TGI Floor Joists 19.2" O.C.

2x6 PT. sill on foundation.

New Concrete Foundation 4' below grade, 8" thick

Double top plate

131 height x 2 1/2 system

32" double finish floor grade

Njeda residence 53 Mackworth

4x10" joists
16" o.c.

2x10
rafters 16" o.c.

Double 2x12
h.i.r.
in floor

15x16'
Bedroom

Bath 9x7'-6"

15'-6"

Andrew Nise
Lisa L. Gurnus
53 Mulhworth St
Fenton, Mo. 65033

1/2008-12-12-12-12-12

Siematic		SCALE	A-10	REVISION NO.
The Client's Name: 123 Main Street City, State, Zip		CLIENT	Andrew Nise Lisa L. Gurnus	DATE
PROJECT	PROGRAM	DATE	DATE	DATE
DATE	DATE	DATE	DATE	DATE

Storage

Closet

Existing eave/support wall

Green = Existing
Red = new

Ex't. Gable
ew wall

Old/New Partitions
& Roof Framing

Njsua Residence
53 Mulhworth

This section
of existing work will
be removed
Steel joists
to be installed
above

Remove
to top



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	1 of 1
Parcel ID	139 D009001
Location	53 MACKWORTH ST
Land Use	SINGLE FAMILY
Owner Address	NJAA ANDREW B & LISA L BULTHUIS JTS 53 MACKWORTH ST PORTLAND ME 04103
Book/Page	12646/331
Legal	139-D-9 MACKWORTH ST 49-55 9852 SF

Current Assessed Valuation

Land	Building	Total
\$125,900	\$119,700	\$245,600

Property Information

Year Built 1949	Style Garrison	Story Height 2	Sq. Ft. 1350	Total Acres 0.226		
Bedrooms 3	Full Baths 1	Half Baths 1	Total Rooms 6	Attic None	Basement Full	

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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Sales Information

Date 08/01/1996	Type LAND + BLDING	Price \$125,000	Book/Page 12646-331
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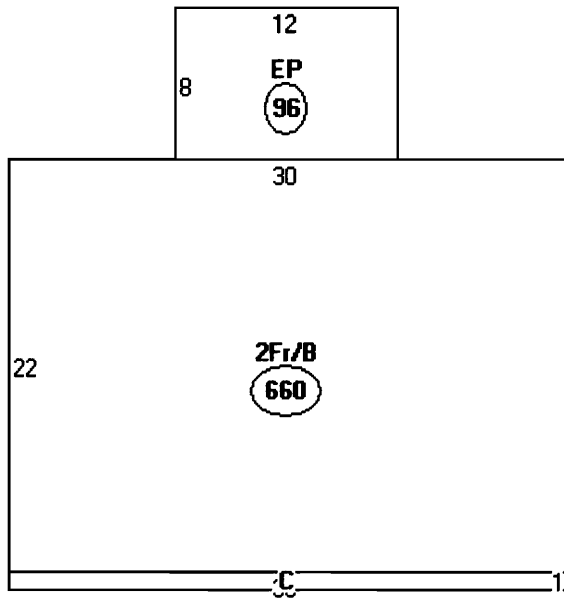
Picture and Sketch

[Picture](#) [Sketch](#) [Tax Map](#)

[Click here to view Tax Roll Information.](#)

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

New Search!



Descriptor/Area

- A: 2Fr/B
660 sqft
- B: EP
96 sqft
- C: FOH
30 sqft