

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU...TION

PERMIT

PERMIT ISSUED

Permit Number: 090764

JUL 22 2009

This is to certify that MCGONIGAL SHEA D & JOSEPH T M... LITS/Sc...

has permission to Construct 495 sf 2 story rear addition for family rm/water bedroom including balcony and deck

AT 57 MACKWORTH ST

C... 139 D012001

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 Maine and of the Ordinances of the City of Portland regulating 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 written permission procured before this building or part thereof is lath... or other... used-in. 2... HOW... 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

James Burke 7/22/09
Director - Building & Inspection Services

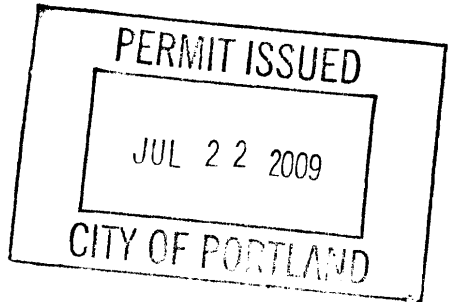
PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0764	Issue Date: 07/22/2009	CBL: 139 D012001
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Location of Construction: 57 MACKWORTH ST	Owner Name: MCGONIGAL SHEA D & JOSEPH	Owner Address: 57 MACKWORTH ST	Phone: 749-7388
Business Name:	Contractor Name: Scott LeClair	Contractor Address: 53 Boyton Road Buckston	Phone: 2075905039
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3
Past Use: Single Family	Proposed Use: Single Family w/495 sf 2 story rear addition for family rm/master bedroom including balcony and deck	Permit Fee: \$1,600.00	Cost of Work: \$158,000.00
Proposed Project Description: Construct 495 sf 2 story rear addition for family rm/master bedroom including balcony and deck		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied N/A	INSPECTION: Use Group: R3 Type: SB IRC-2003 Signature: JMB 7/22/09
		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: jmb	Date Applied For: 07/22/2009	Zoning Approval		
<ol style="list-style-type: none"> 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 7/22/09 JMB	Zoning Appeal <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: _____	Historic Preservation <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: _____



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

City of Portland, Maine - Building or Use Permit
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0764	Date Applied For: 07/22/2009	CBL: 139 D012001
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Location of Construction: 57 MACKWORTH ST	Owner Name: MCGONIGAL SHEA D & JOSEPH	Owner Address: 57 MACKWORTH ST	Phone: () 749-7388
Business Name:	Contractor Name: Scott LeClair	Contractor Address: 53 Boyton Road Buckston	Phone: (207) 590-5039
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family w/495 sf 2 story rear addition for family rm/master bedroom including balcony and deck	Proposed Project Description: Construct 495 sf 2 story rear addition for family rm/master bedroom including balcony and deck
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Dept: Zoning	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 07/22/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> 1) As discussed during the review process, the property must be clearly identified prior to pouring concrete and compliance with the required setbacks must be established. Due to the proximity of the setbacks of the proposed addition, it may be required to be located by a surveyor. 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. 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. 			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 07/22/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> 1) Typical stair detail will be submitted vial email to Jeanie prior to commencing work 2) The attic scuttle opening must be 22" x 30". 3) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans. 4) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process. 5) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work. 			

Comments:
 7/22/2009-jmb: Met with Joe M. And Whitten Architects for permit by appointment

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

 X **Foundation Inspection: Prior to placing ANY backfill for below grade occupiable space**

 X **Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling**

 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

 7-22-09
Date

 7/22/09
Date



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>57 Madworth St</u>		
Total Square Footage of Proposed Structure/Area <u>4955F</u>		Square Footage of Lot <u>9644</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>139 D-12-39</u>	Applicant * must be owner, Lessee or Buyer * Name <u>Joseph McBonigal</u> Address <u>57 Madworth St</u> City, State & Zip <u>Portland</u>	Telephone: <u>207</u> <u>749-7388</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>158,000</u> C of O Fee: \$ _____ Total Fee: \$ <u>1600.00</u>
Current legal use (i.e. single family) <u>Single Family</u> If vacant, what was the previous use? <u>Single Family</u> Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>ADDITION Family Room + Bedroom / balcony & deck</u> <u>2 story</u>		
Contractor's name: <u>Scott Heclair</u>		
Address: <u>53 Baynton</u>		
City, State & Zip <u>Buxton 04093</u>		Telephone: <u>590-5039</u>
Who should we contact when the permit is ready: <u>Joe McBonigal</u>		Telephone: <u>207-749-7388</u>
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 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 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: <u>[Signature]</u>	Date: <u>7-22-07</u>
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This is not a permit; you may not commence ANY work until the permit is issue

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 D012001
Location 57 MACKWORTH ST
Land Use SINGLE FAMILY

Owner Address MCGONIGAL SHEA D & JOSEPH T MCGONIGAL JTS
 57 MACKWORTH ST
 PORTLAND ME 04103

Book/Page 22704/344
Legal 139-D-12-39
 MACKWORTH ST 57-59

 9644 SF

R-3
35%

Current Assessed Valuation

Land	Building	Total
\$125,000	\$165,700	\$290,700

Property Information

Year Built 1932	Style Old Style	Story Height 2	Sq. Ft. 1692	Total Acres 0.221
Bedrooms 3	Full Baths 2	Half Baths	Total Rooms 9	Attic Part Finsh
				Basement Full

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
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Sales Information

Date	Type	Price	Book/Page
06/01/2005	LAND + BLDING	\$339,000	22704-344
08/21/2001	LAND + BLDING	\$259,000	16654-172
04/30/1996	LAND + BLDING	\$110,500	12477-098

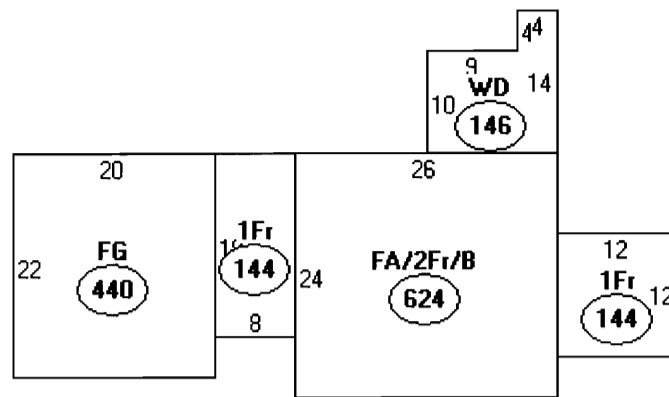
Picture and Sketch

[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: FA/2Fr/B
 624 sqft
 B: 1Fr
 144 sqft
 C: FG
 440 sqft
 D: WD
 146 sqft
 E: 1Fr
 144 sqft

3,375
 - 1,498

1,877 allowed

OK
 New Footprint =
 495
 - 146
 349 SF

Lot 9,644
 x .35

 3,375