Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And Notes, If Any, Attached	В	PERMIT	Γ	PERMIT ISSUED	
This is to certify that	Erin Associates Llc /Granite	sstructic		OCT 1 7 2005	
has permission to	Build a new 2100 sq ft single	nity hor			
AT 60 Willow Ln			191 B03700	CITY OF PORTLAND	

m or milon

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.

N ication inspect must git and writing permis in procubit the this to ding or in thereo land or company to the procubit of the procuping the p

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

epting this permit shall comply with all

ne and of the process of the City of Portland regulating

of buildings and sn. tures, and of the application on file in

OTHER	REQUIRED	APPROVALS
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Fire Dopt. _____

Health Dept. ____

Appeal Board ____

Other _____

Department Name

PENALTY FOR REMOVING TRUS/CARD

toute 10/19
uiding & Inspection Services

LOY TWW

5 carred permit sum



CITY OF PORTLAND, MAINE

Department of Building Inspections

823

20 05

Received from Grant La Carist
Location of Work / 1 9 Willow
1623
Cost of Construction \$
Permit Fee \$
remit ree
Building (IL) Plumbing (IS) Electrical (I2) Site Plan (U2)
Other
1
CBL: 19/ 6 37
Check #: 5196 Total Collected \$ 1998

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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

389	Congress Street, 04101 T	el: (207) 8/4-8/03	, rax. (207) 674-67	10	05-1202	OCT	10)05		8037001
Loca	ation of Construction:	Owner Name:		Owner /	Address:			P	hone:	
60	Willow Ln LOT **	Erin Associate	es Lle	13 Acc	orn Ln	NTV OF	DODT	TANI	7	100
Busi	ness Name:	Contractor Name	1:		tor Address		PUKI	-	hone	Control of the contro
		Granite Const	ruction Co.		ox 8790 I	ortland		1	207632	21124
Less	ee/Buyer's Name	Phone:		Permit 7 Single	Type: Family					Zone:
Past	Use:	Proposed Use:		Permit	Fee:	Cost of Wo	rk:	CEO	District	= PPINT
Va	cant Land		Home/ Build a new	\$	1,698.00	\$178,0	00.00		3	INT
		2100 sq ft sing	gle family home	FIRE D	EPT:	Approved Denied	100	iroup: f	23	Type: 5B
Prop	oosed Project Description:						-	1		1011
Bu	ild a new 2100 sq ft single far	nily home	~ 11	Signate			Signa	ture:	MB	10/17/0
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		V	171	Signatu			proved	Date:	1000 YOX 104	Deffied
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ate Applied For:	/~\		re	g Approv			1000 YOX 104	Denied
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	obson	08/23/2005 s not preclude the	Special Zone or Rev	Signatu	Zonin	g Approv		Date	istoric P	reservation
ld	This permit application does Applicant(s) from meeting a	08/23/2005 s not preclude the pplicable State and	☐ Shoreland NA	Signatu	Zonin	g Approving Appeal		Date:	istoric P	reservation
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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 THEE		DATE	PHONE

DATE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

set bad OK forting Okto for 01/20/06. Foundation Bullfell inspection Stones, channage, farming all DIC-OIC to Buchfell. Jon M: 8/08/07 Foundation only of completed SIGN OUT Front (Eric Ase LLC 632-1719 Homes not secure from ontry. SMH. 9/8/08 Dana came in to reactivate the permit - has a buyer I Told him I would get back & him 9/24/08 permit is Expired, need to Re-apply to resume work.

City of Portland, Maine 89 Congress Street, 04101	Tel: (207) 874-8703, Fax: ((207) 874-8716	05-1202	08/23/2005	191 B037001
ocation of Construction:	Owner Name:		Owner Address:		Phone:
50 Willow Ln. Lot #7	Erin Associates Llc		13 Acom Ln		
usiness Name:	Contractor Name:		Contractor Address:		Phone
	Erin Associates LLC		13 Acorn Ln South	Portland	(207) 838-8575
essee/Buyer's Name	Phone:		Permit Type:		(2017030 0313
			Single Family		
roposed Use:		Dynnass.	d Project Description:		
Single Family Home/ Build a	new 2100 sq ft single family ho	ome Build	a new 2100 sq ft sir	ngle family home	
Note:) Separate permits shall be	atus: Approved with Condition required for future decks, sheds a single family dwelling. Any	, pools, and/or g	- T		Ok to Issue: 🗹
and the second second second	oved on the basis of plans subm	itted Any devia	tions shall require a	senarate annoval l	before starting that
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9/27/2005-tmm: left message w/builder - need to get copy of review list. Spoke w/Jim - will pick up list

Business Name:	Contractor Name:	Contractor Address:	Phone
	Erin Associates LLC	13 Acorn Ln South Portland	(207) 838-8575
Lessee/Buyer's Name	Phone:	Permit Type: Single Family	

9/24/2008-jmb: Dana Ireland came in on 9/8/08 inquiring about reactivating the permit. This has expired (see letter) and a new

Owner Address:

Phone:

Owner Name:

Location of Construction:

application will need to be submitted.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life - www.portlandmaine.gov

Director of Planning and Urban Development Penny St. Louis Littell

> Inspection Services, Director Jeanie Bourke

September 24, 2008

Erin Associates, LLC Attn. Dana Ireland 13 Acorn Lane South Portland, ME 04106

RE: 60 Willow Lane CBL: 191 B037001 Permit #: 05-1202

Dear Mr. Ireland,

This letter serves as notification that the above referenced building permit is considered expired per the building code adopted by the City of Portland.

The International Residential Code 2003 Sec. R105.5 states: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time the work is commenced. The building official is authorized to grant, in writing, one or more extensions of time, for periods not more than 180 days each. The extension shall be requested in writing and justifiable cause demonstrated.

This permit was approved on October 17, 2005, and based on the inspection entry notes; the foundation backfill was performed on January 20, 2006. There is a comment in the computer program from the administrative assistant on January 9, 2007 that you came to this office to report that Granite Construction was no longer the general contractor. This office did not receive a letter of request for an extension of this permit.

Based on that information and the suspension of work well in excess of 180 days, this permit is no longer valid. If you wish to resume work on this project, an application must be submitted for review for zoning, building and site plan approvals. Please feel free to access the previously approved plans when you submit the new application.

Feel free to contact me if you need additional information.



Residential 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: Lot	7 Willow LANE	
Total Square Footage of Proposed Structure	Square Footage of Lot	16,543
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: ERIN + ASS.	Telephone: 632 1124
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: GRANITE CONST. POBOX 8790 Poret M& 04104 632	Cost Of Work: \$ 178,000
Current Specific use: LAND Proposed Specific use: SINGLE F Project description: 2100 56	Amily	OF STATE OF
Contractor's name, address & telephone: 60 Who should we contact when the permit is rea Mailing address: Po Box 8790		8790 Port ME 04104
PortlAND MG	04104 P	hone: 632-1124

Please submit all of the information outlined in the Residential Application Checklist. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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:	2	Date: 8/1/05	
Parmu Fore St 00 for the first \$100	0 00 Construction (Coer 59 00 per additional \$1000 00 cost	63