Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BU

Please Read Application And Notes, If Any, Attached

this department.

TION

Permit Number: 090350

This is to certify thatLONGVAL KENNETH J & A	LONG	roperty ov	1	<u>, </u>		7
has permission toCreate playroom above existing	rage					-
AT 8 TIDE MILL RD		CF	212 A062001			-
provided that the person or persons, fi			ting this pern			
of the provisions of the Statutes of Ma	e and of the	ne ne	es of the City	⊸of Portla	and regulati	ing_
the construction, maintenance and use	f building:	s and stri	res, and of the	he applic	ation on file	in د

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

Not ation of ispectic must be give and writte permissic procured before this but ing or procured is lather or other sed-in. 2 HOL 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

PENALTY FOR REMOVING THIS CARD

City of Portland,		_			**	ermit No: 09-0350	Issue Date	09	CBL:	062001
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name:			Owner Address:				212 A062001 Phone:			
8 TIDE MILL RD	•	LONGVAL KENNETH J & AMY			8 TIDE MILL RD				i none.	
Business Name:		Contractor Name				actor Address:			Phone	
		property owne	er							
Lessee/Buyer's Name		Phone:			Permi	it Type:				Zone:
					Alte	erations - Dw	ellings			
Past Use:		Proposed Use:		<u>-</u>	Perm	nit Fee:	Cost of Wor	rk: (CEO District:	Ì
Single Family Home		Single Family Home - Create		\$230.00 \$21,000.0			00.00	3		
1 -		playroom abov	playroom above existing garage					INSPEC		
							Denied	Use Gro	up: R-3	Type: 5
									ERC	-,2003
					_					Type: 5 (-, 2003
Proposed Project Descrip					g:			l	00	الدواله
Create playroom abov	e existing garag	ge		Signatu			IVITIES DIS	Signature		71211
					Actio	on: Appro	ved	proved w/C	Conditions] Denied
					Signa	ature:		1	Date:	
Permit Taken By:	Date Ap	pplied For:				Zoning	Approv	al		
Ldobson	04/23	3/2009				-	9 F F · ·			
1. This permit appli	cation does not	preclude the	Spe	cial Zone or Revi	ews Zoning Appeal			Historic Pro	eservation	
Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work.		☐ Shoreland ☐ Variance ☐ Wetland ☐ Miscellaneous		☐ Variance			Not in District or Landma			
				aneous	<u> </u>	Does Not Require Revie				
3. 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			☐ Flood Zone ☐ Conditional Use			Requires Review				
			☐ Subdivision ☐ Int		Interpre	erpretation		Approved		
	The second of th		☐ Si	te Plan O.P		Approv	ed		Approved v	v/Conditions
1			Maj Minor MM Denied					☐ Denied		
			Date:	4/24/09	ost	Date:		Dat	ecs H.	
City	The second s			t I						
				CERTIFICATI					•	
I hereby certify that I a I have been authorized jurisdiction. In additional have the authority such permit.	by the owner to on, if a permit fo	make this appl r work describe	ication and in the	as his authorize application is i	d agen	nt and I agree I certify that	to conform the code of	to all app ficial's au	plicable lawa	s of this presentative
SIGNATURE OF APPLICATION	ANT			ADDRES	S		DATE		PH	ONE
RESPONSIBLE PERSON	 IN CHARGE OF W	ORK. TITLE			_		DATE		PH	ONE
		, 					~			

City of Portland, Maine - Bu	ilding or Use Permi	t	Permit No:	''	CBL:			
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-87			09-0350	04/23/2009	212 A062001			
Location of Construction:	Owner Name:	0	wner Address:	Į.	Phone:			
8 TIDE MILL RD LONGVAL KENNETH J & AMY			8 TIDE MILL RD					
Business Name:	Contractor Name:	Co	ontractor Address:		Phone			
	property owner							
Lessee/Buyer's Name	Phone:	Pe	ermit Type:	-				
		<u> </u>	Alterations - Dwel	lings				
Proposed Use:		Proposed	Project Description:					
Single Family Home - Create playro	om above existing garage	e Create p	olayroom above ex	sisting garage				
Dept: Zoning Status: Note:	Approved	Reviewer:	Chris Hanson	Approval Dat	e: 04/24/2009 Ok to Issue:			
Dept: Building Status: Note:	Approved with Condition	ns Reviewer:	Chris Hanson	Approval Dat	e: 04/24/2009 Ok to Issue: ☑			
1) The attic scuttle opening must be	e 22" x 30".							
2) Permit approved based on the pl noted on plans.	ans submitted and review	ed w/owner/contra	actor, with additio	nal information as agr	eed on and as			
Separate permits are required for need to be submitted for approva			arm or HVAC or e	xhaust systems. Separ	rate plans may			

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 Palages" will be incurred if the procedure is not followed as stated below

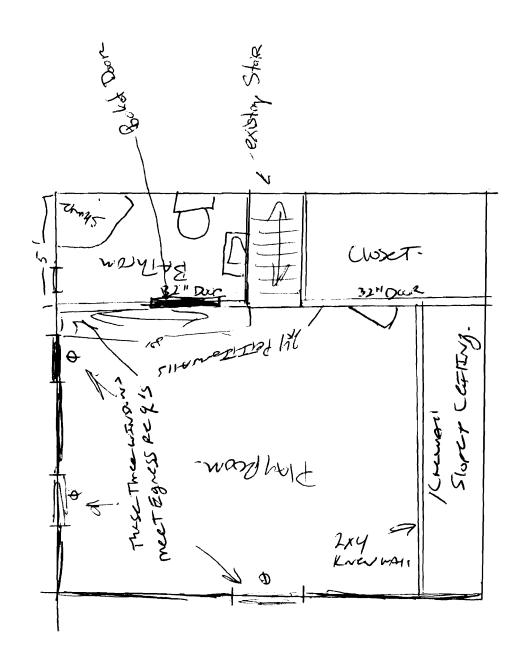
order Release will be incurred if the procedure is not followed as stated below.						
A Pre-construction Meeting will take place upon receipt of your building permit.						
X Framing/Rough Plumbing/Electrical: Prior	r to Any Insulating or drywalling					
X Final inspection required at completion of work.						
Certificate of Occupancy is not required for certain project your project requires a Certificate of Occupancy. All pro						
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.						
* 20	4-24.05					
Signature of Applicant/Designee Date						
KIA	4.24.09					
Signature of Inspections Official	Date					

CBL: 212 A062001 **Building Permit #: 09-0350**

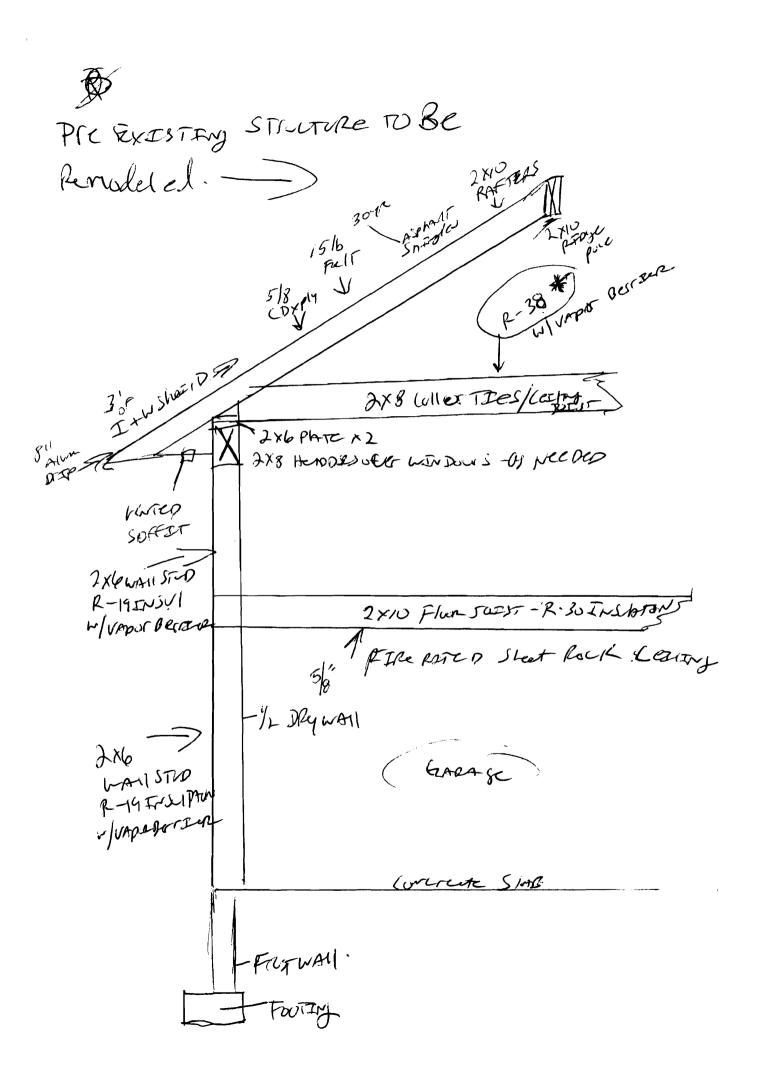
General Building Permit Application

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:	Tide mill Rd		
Total Square Footage of Proposed Structure/	Area Square Footage of Lot		Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# \[\rightarrow \rightarrow \righta	Applicant *must be owner, Lessee or B Name KEN + AMY LONGVAC Address & TIX MIII POS City, State & Zip POTIAND ME		Telephone: (201) 814-2810
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	C	ork: \$ 21, 000 ork: \$ 21, 000 of O Fee: \$
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: RESTOCCATCE Is property part of a subdivision? Project description: - Plan Room Ab Contractor's name: AMY LowbyAL	If yes, please name	s Lein	Cell. 3-801-6479
Address: 8 The Mul Rd r City, State & Zip port from Me. 09 Who should we contact when the permit is rea Mailing address: 8 The Mil Pd.	dy: AMY LONITUAL	_ Teleph	none: <u>107-874-7810</u> none: <u>107-874-2816</u>
Please submit all of the information	outlined on the applicable Chece automatic denial of your permit	•	
nay request additional information prior to the is nis form and other applications visit the Inspecti Division office, room 315 City Hall or call 874-8703.	suance of a permit. For further information	n or to	download copies of
hereby certify that I am the Owner of record of the report of the report of the part I have been authorized by the owner to make this was of this jurisdiction. In addition, if a permit for wo athorized representative shall have the authority to encovisions of the codes applicable to this permit.	application as his/her authorized agent. I agre rk described in this application is issued, I cert	ee to con ify that tl	form to all applicable he Code Official's
ignature:	Date: 4-18-09		
This is not a permit; you may	not commence ANY work until the per	mit is i	ssue



ECU. 6 6 FAM



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

Location of Construction:	Owner:		Phone:		Pormit No. (2) C. 4 G. (2)
8 Tide Mill Road	Mike Cloutier		799-6	232	Permit Ng: 9 0 4 3 8
Owner Address:	Lessee/Buyer's Name:	Phone:		sName:	
122 Clifford Street	Lessee, Buyer s rame.	T HOME.	Dusines	SI VAINO.	PERMIT ICCUED
Contractor Name:	Address:	Phone:	·		Permit Issued: 1000ED
Cloutier Construction	122 Clifford Street	i none.			
Past Use:	Proposed Use:	COST OF WORK	<u> </u>	PERMIT FEE:	MAY 6 1999
Vacant	Single family with	\$ 151,000.00		\$775.00	
Vacant	attached garage			INSPECTION:	
	actached garage	FIRE DEPT. A		Use Group 83 Type 53	I BHY OF PORTLAND I
			enied	Use Group 11 Type 5	Zene: CBL: 212-A-062
		0:		BOCA 967/11	Zene: CBL: 212-A-062
Proposed Project Description:		Signature:		Signature: A	Zoning Approval:
	anness de deservations	PEDESTRIAN AC		7117	
Construct single family with	attached garage		pproved	<i>V</i> □	Special Zone or Keviews: ///
		I		with Conditions:	Lonordiano 1911
			enied		
					□ Flood Zone
		Signature:		Date:	Subdivision
Permit Taken By: M.N.	Date Applied For: 04/2	27/99			Site Plan maj ⊡minor⊡mm nú
					Zoning Appeal
1 This population does not upon	lude the Appliant(a) from mosting appliantle	State and Endaml sular			□ Variance
-	lude the Applicant(s) from meeting applicable	e State and Federal rules.			☐ Miscellaneous
2. Building permits do not include plur	nbing, septic or electrical work.				□ Conditional Use
3. Building permits are void if work is r	ot started within six (6) months of the date of	issuance. False informa-			□ Interpretation
tion may invalidate a building permi					☐ Approved
non may invandate a building permi	i una stop un work				□Denied
			Λ.	T ISSUED VIREMENTS	
		W	PERM	••	Historic Preservation
		•••	IH DEN	7/00	Not in District or Landmark
			11401	110 SUED	☐ Does Not Require Review
			•	REMEN	☐ Requires Review
				"ENTC	Acato
				9	Action:
	CERTIFICATION				□Appoved
I hereby certify that I am the owner of rec	ord of the named property, or that the propose	d work is authorized by the	owner of	record and that I have been	1 ' '
	elication as his authorized agent and I agree to				_ I = ' ' /
	ication is issued, I certify that the code official				Y = Y = Y = Y = Y = Y = Y = Y = Y = Y =
	onable hour to enforce the provisions of the c			ive the authority to enter an	Date: to Deb Pt 413044
areas covered by such permit at any least	onable hour to enforce the provisions of the c	ode(s) applicable to such	Chin		
					//
		04/27/99	_		1 chilas To
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	0/4/91
	DE WORL MANUE			DIVONE	_
RESPONSIBLE PERSON IN CHARGE O	OF WORK, TITLE			PHONE:	CEÓ DISTRICT 3
	White-Permit Desk Green-Assessor's C	anary-D.P.W Pink-Pul	olic File	Ivory Card-Inspector	