

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

## BUILDING PERMITS

# PERMIT

Permit Number: 081360

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED  
OCT 19 2008  
CITY OF PORTLAND

This is to certify that MACLEOD IAN D R & ACACIA TRUST STEES/H

has permission to Amend permit # 080935 Add sight, 3 to som ab triple up window placement change

AT 15 CAPTAINS LANDING C 218 B056001

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 HOURLY 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

*[Handwritten Signature]*  
10/29/08  
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: 08-1360	Issue Date:	CBL: 218 B056001
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Location of Construction: 15 CAPTAINS LANDING	Owner Name: MACLEOD IAN D R & ACADIA	Owner Address: 511 CONGRESS ST STE 900	Phone:
Business Name:	Contractor Name: Hildreth & White	Contractor Address: PO Box 8433 Portland	Phone 2076717591
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Single Family	Zone: C8/RPZ

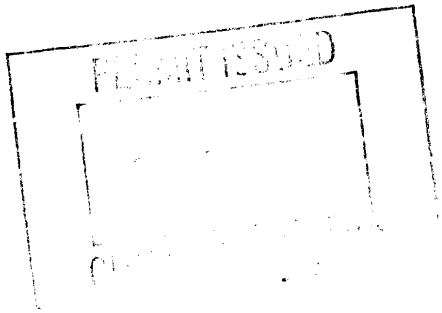
Past Use: Single Family Home	Proposed Use: Single Family Home - Amend permit # 080935 Add skylight, 3 transom above triple unit, window placement change	Permit Fee: \$30.00	Cost of Work: \$650.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>NA</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i>	

Proposed Project Description: Amend permit # 080935 Add skylight, 3 transom above triple unit, window placement change	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Idobson	Date Applied For: 10/24/2008	<b>Zoning Approval</b>
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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..

<b>Special Zone or Reviews</b> <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: <i>3/10/20/08</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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:
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**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

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

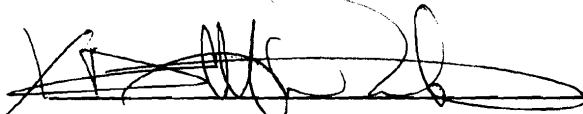
  X   Final/Certificate of Occupancy: Prior to any occupancy of the structure or use.

NOTE: There is a \$75.00 fee per inspection at this point.

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

11/26/08

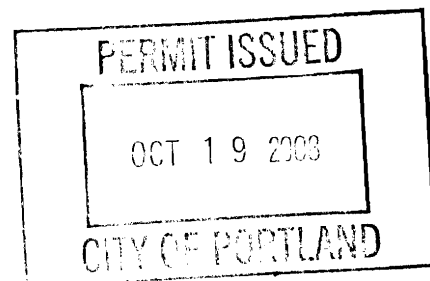
Date

  
\_\_\_\_\_

Signature of Inspections Official

10/29/08

Date



**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 08-1360	<b>Date Applied For:</b> 10/24/2008	<b>CBL:</b> 218 B056001
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<b>Location of Construction:</b> 15 CAPTAINS LANDING	<b>Owner Name:</b> MACLEOD IAN D R & ACADIA	<b>Owner Address:</b> 511 CONGRESS ST STE 900	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Hildreth & White	<b>Contractor Address:</b> PO Box 8433 Portland	<b>Phone</b> (207) 671-7591
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Amendment to Single Family	

<b>Proposed Use:</b> Single Family Home - Amend permit # 080935 Add skylight, 3 transom above triple unit, window placement change	<b>Proposed Project Description:</b> Amend permit # 080935 Add skylight, 3 transom above triple unit, window placement change
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 10/28/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> <li>1) All previous conditions on the original permit are still in force.</li> <li>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.</li> <li>3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.</li> <li>4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.</li> </ol>			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 10/29/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<ol style="list-style-type: none"> <li>1) All conditions issued under 08-0935 are applicable to this permit.</li> </ol>			

**BUILDING PERMIT INSPECTION PROCEDURES**

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

**to schedule your inspections as agreed upon**

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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:

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**A Pre-construction Meeting will take place upon receipt of your building permit.**

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

  X   **Final/Certificate of Occupancy: Prior to any occupancy of the structure or use.**

**NOTE: There is a \$75.00 fee per inspection at this point.**

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**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

\_\_\_\_\_  
Signature of Applicant/Designee

\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

*10/29/08*



# 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>15 CAPTAIN'S LANDING / Lot 26</u>		
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart# <u>218</u> Block# <u>3</u> Lot# <u>56</u>	Applicant * <b>must be owner, Lessee or Buyer</b> Name <u>IAN Macleod</u> Address <u>W. TWIN KNOLL</u> City, State & Zip <u>PORTLAND ME 04102</u>	Telephone: <u>831-5384</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>650</u> C of O Fee: \$ _____ Total Fee: \$ <u>30</u>
Current legal use (i.e. single family) <u>NONE VACANT</u> Number of Residential Units _____ If vacant, what was the previous use? <u>NONE</u> Proposed Specific use: <u>RESIDENTIAL</u> Is property part of a subdivision? <u>YES</u> If yes, please name <u>RIVERS EDGE</u> Project description: <u># 08-0935 ← SEE EXISTING PERMIT</u> <u>ADD 1 SKYLIGHT (3) TRANSOM ABOVE TRIPLE UNIT / ADD 1 TRANSOM IN BR</u> <u>MODIFY LEFT GABLE &amp; KITCHEN UNITS</u>		
Contractor's name: <u>HILDRETH &amp; WHITE</u>		
Address: <u>P.O. BOX 8433</u>		
City, State & Zip <u>PORTLAND, ME 04104</u>		Telephone: <u>671-7591</u>
Who should we contact when the permit is ready: <u>DAN WHITE</u>		Telephone: <u>671-7591</u>
Mailing address: <u>P.O. BOX 8433 PORTLAND ME 04104</u>		

**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](http://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.

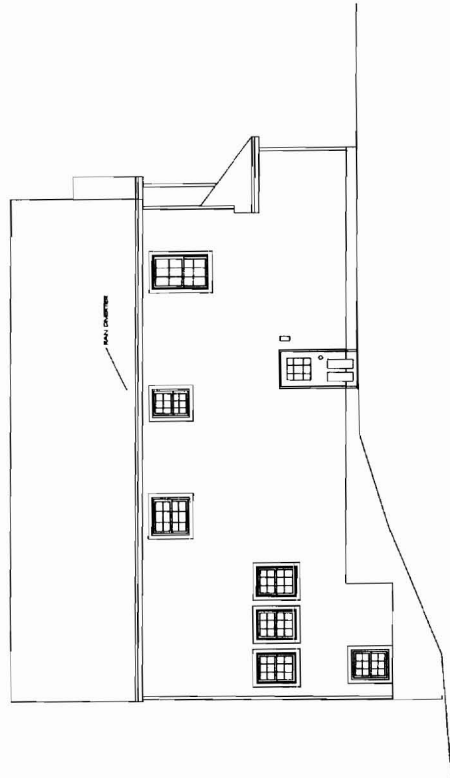
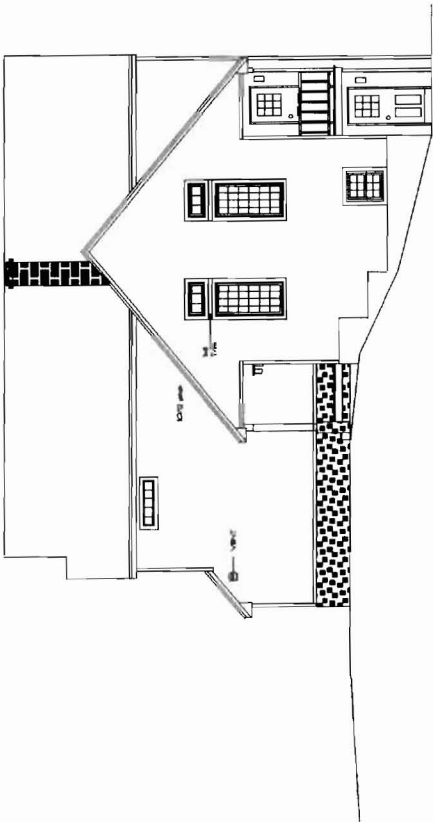
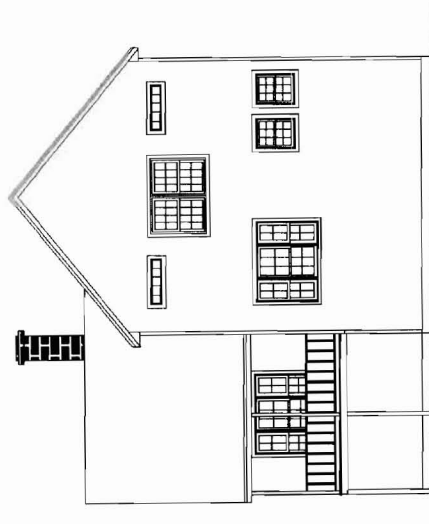
Signature: [Signature] Date: ~~9/27/08~~ 10/24/08

This is not a permit; you may not commence ANY work until the permit is issue

Revised 9-26-08

\* WINDOW CHANGES highlighted in yellow on PRINTS

REVISIONS  
10/23/08



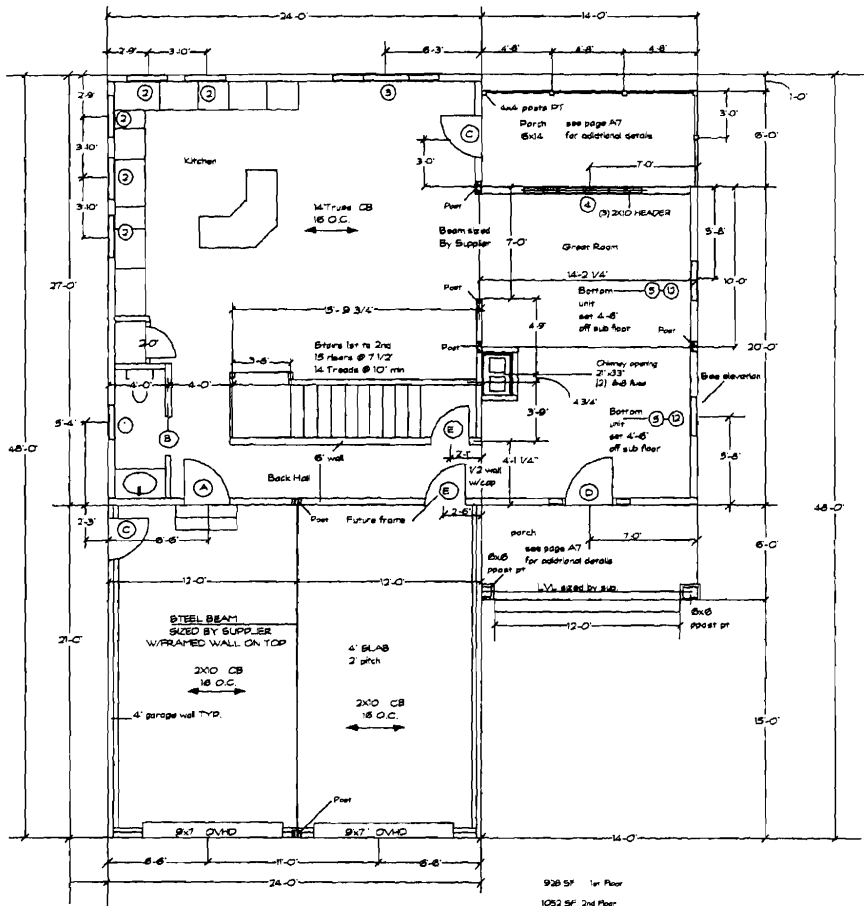


REVISIONS  
REV. 10/23/08

MACLEOD RESIDENCE LOT 26 RIVERS EDGE
BY HILDRETH & WHITE
SCALE: 1/4" = 1'-0" (DATE: 1/21/08)
PAGE: A1

OCT 24 2008



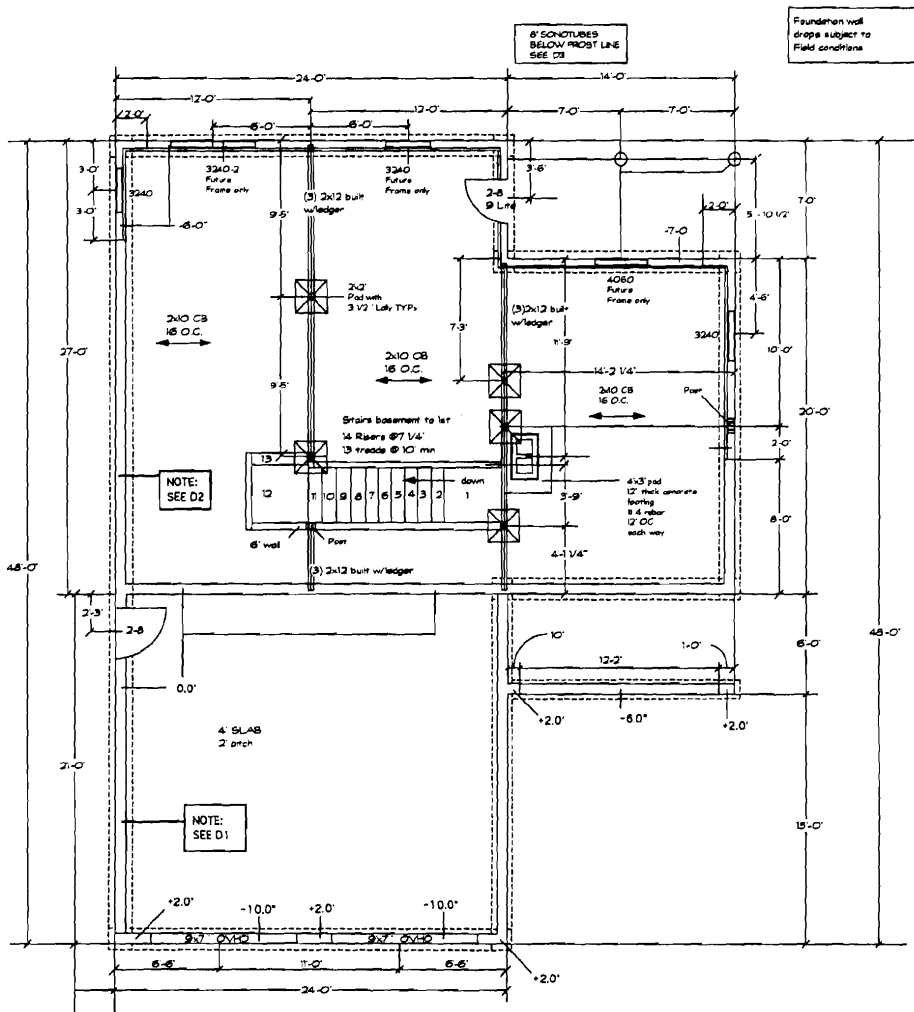


938 SF 1st Floor  
 1052 SF 2nd Floor  
 1990 SF Total

REVISIONS  
 rev. 10/23/08

MACLEOD RESIDENCE  
 LOT 26 RIVERS EDGE  
 BY HLDRETH & WHITE  
 SCALE 1/4" = 1'-0"  
 DATE 7/27/08  
 PAGE: A3

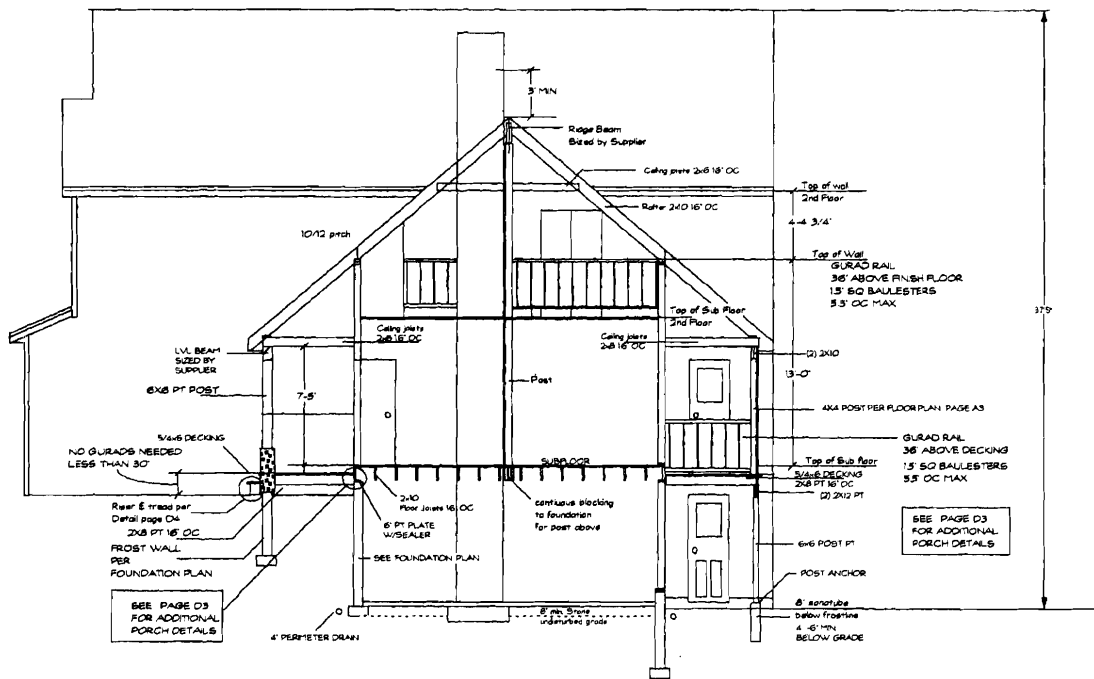




Revisions  
rev. 10/23/08

MACLEOD RESIDENCE  
LOT 26 RIVERS EDGE  
BY HILDRETH & WHITE  
SCALE: 1/4" = 1'-0"  
DATE: 7/27/08  
PAGE: AS





SEE PAGE D3 FOR ADDITIONAL PORCH DETAILS

SEE PAGE D3 FOR ADDITIONAL PORCH DETAILS

MACLEOD RESIDENCE  
 LOT 26 RIVERS EDGE  
 BY HALDRETH & WHITE  
 SCALE: 1/4" = 1'-0"  
 DATE: 7/27/08  
 PAGE: AT

DOOR SCHEDULE

TYPE	STYLE	QTY	EXT / INT
A	STEEL FIRE DOOR-3066	1	EXT
B	POCKET 2066	1	INT
C	FIBERGLASS 2066 2 LITE	3	EXT
D	FIBERGLASS 3066	1	EXT
E	6 PANEL 2666	5	INT
F	6 PANEL 3066	2	INT
G	6 PANEL 2066	6	INT
H	6 PANEL 2466	1	INT
I	3 PANEL 1666	1	INT

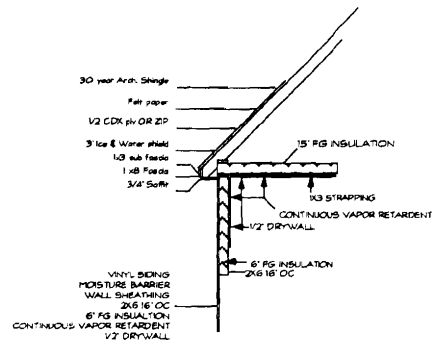
WINDOW SCHEDULE

TYPE	STYLE	QTY	SF	U FACTOR
1	DH 3040	2	16.67	.33
2	DH 3242	5	46.67	.33
3	DH 2466-PW3666-Q12466	1	38.5	.33
4	SEE # 4 BELOW	1	38.5	.33
5	PW3672	2	26.0	.33
6	DH 4060-2	2	66.67	.33
7	DH 3642-2	1	21.0	.33
8	DH 4060	1	16.67	.33
9	DH 3640-TEMPERED	1	10.0	.33
10	TR 3412	2	5.87	.33
11	DH 3636	2	18.0	.33
12	TR3618	2	9.0	.33
13	FS 156	1	5.94	.48

#4 DH 2454/TR3412-PW3654/TR3612-DH2454/TR3412

ALL WINDOWS ARE HANCOCK VINYL CLASSIC EXCEPT SKYLIGHT + VELUX

SOFFIT DETAIL



REVISIONS  
rev. 10/23/08

HANCOCK RESIDENCE  
LOT 28 RIVERS EDGE  
BY HLORETH & WHITE  
SCALE 1/4" = 1'-0"  
DATE 7/27/08  
PAGE A0