

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that RICHARD F WWII VET MCDONOUGH lited At 41 WINDING WAY

Job ID: 2012-05-4124-ALTR

CBL: 225- C-031-001

has permission to Rebuild Existing Deck

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

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**



PORTLAND MAINE

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

Acting Director of Planning and Urban Development
Gregory Mitchell

Job ID: 2012-05-4124-ALTR

Located At: 41 WINDING WAY

CBL: 225- C-031-001

Conditions of Approval:

Building

A graspable handrail is required to be installed 34"-38" above the leading edge of a tread.

Guardrails 34" high measured from the leading edge of the tread is required to be installed on both side of the stairs.



General Building Permit Application

Entered 5/31/12

(B3)

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.

2012-05-4124 AIR

R-3

Location/Address of Construction: <u>41 Winding Way</u>		
Total Square Footage of Proposed Structure/Area <u>192 sq ft</u>	Square Footage of Lot <u>15,500</u>	Number of Stories <u>1</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>225-C-031</u>	Applicant * must be owner, Lessee or Buyer* Name <u>Michael Shackley</u> Address <u>12 Plymouth St</u> City, State & Zip <u>Portland Me 04103</u>	Telephone: <u>831-6611</u> <u>2000</u>
Lessee/DBA (If Applicable) RECEIVED MAY 31 2012 Dept. of Building Inspections City of Portland Maine	Owner (if different from Applicant) Name <u>Chris Shackley</u> Address <u>41 Winding Way</u> City, State & Zip <u>Portland Me 04103</u>	Cost Of Work: <u>\$1900.00</u> C of O Fee: \$ _____ Total Fee: \$ <u>40.00</u>
Current legal use (i.e. single family) <u>single family</u> Number of Residential Units <u>1</u> If vacant, what was the previous use? _____ Proposed Specific use: <u>single family</u> Is property part of a subdivision? _____ If yes, please name _____? Project description: <u>Rebuild Existing Deck</u>		
Contractor's name: <u>Michael Shackley</u> Address: <u>12 Plymouth St</u> City, State & Zip <u>Portland Me 04103</u> Telephone: <u>831-6611</u> Who should we contact when the permit is ready: <u>Michael Shackley</u> Telephone: _____ Mailing address: <u>12 PLYMOUTH ST PORTLAND, ME</u>		

Call do not send

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: Michael Shackley Date: 5-31-12

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



PORTLAND MAINE

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Receipts Details:

Tender Information: Cash
Tender Amount: 40.00

Receipt Header:

Cashier Id: bsaucier
Receipt Date: 5/31/2012
Receipt Number: 44467

Receipt Details:

Referance ID:	6714	Fee Type:	BP-Constr
Receipt Number:	0	Payment Date:	
Transaction Amount:	40.00	Charge Amount:	40.00
Job ID: Job ID: 2012-05-4124-ALTR - Rebuilding existing deck; Disabled Owner			
Additional Comments: 41 Winding Way			

Thank You for your Payment!

R-3

FEAR: 25' min - 50' show
Side: 1 story 8' min - 10' x show
Front: N/A

70' $\frac{12}{581}$

16'

12'

DECK

House

10'

42'

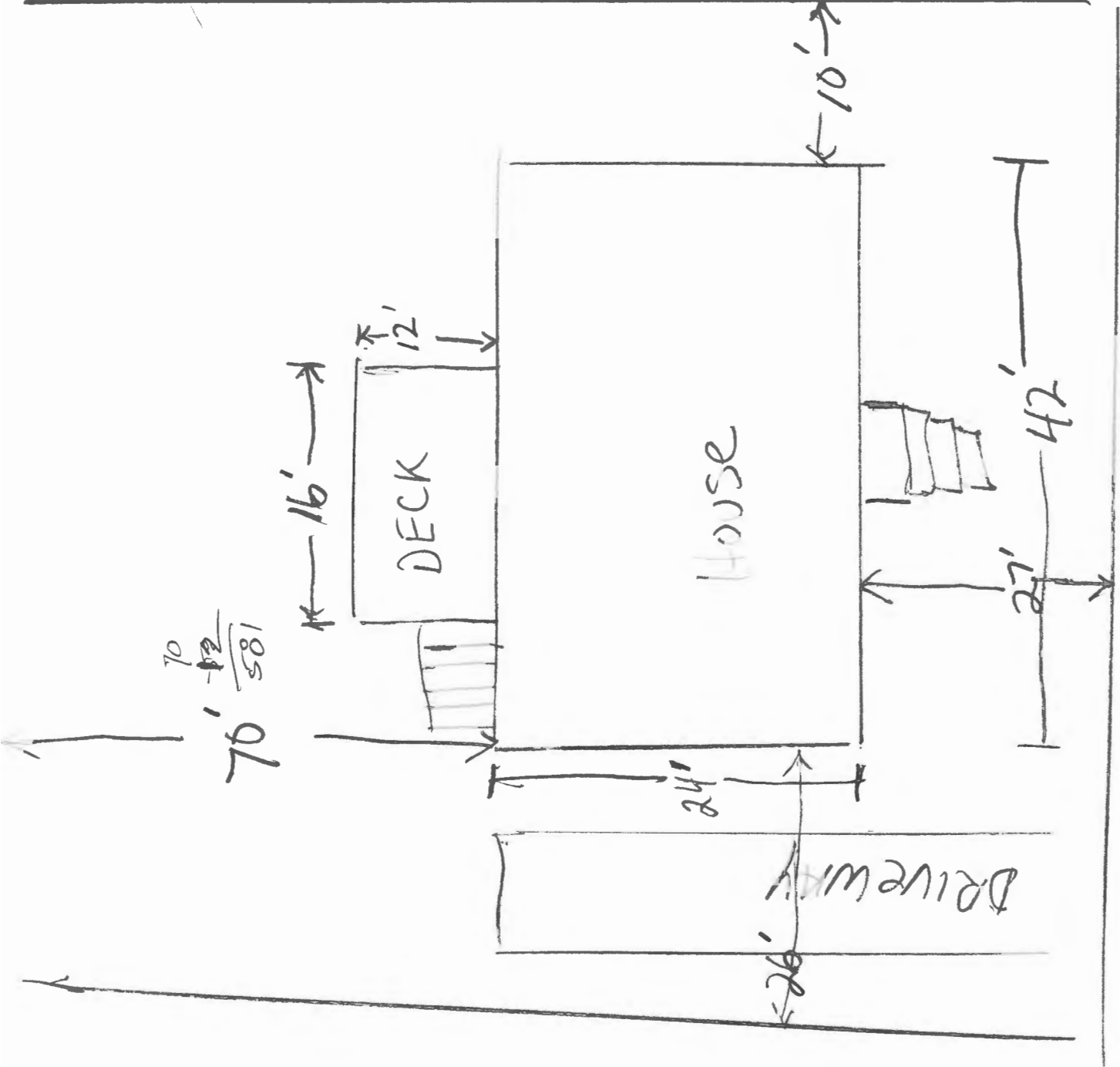
27'

24'

DRIVEWAY

26'

ROADWAY





Assessor's Office 389 Congress Street Portland, Maine 04101 Room 115 (207) 874-8486

City Home Departments City Council E-Services Calendar Jobs

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:

Services

Applications

Doing Business

Maps

Tax Relief

Tax Roll

Q & A

browse city services a-z

browse facts and links a-z

CBL 225 C031001
Land Use Type SINGLE FAMILY
Property Location 41 WINDING WAY
Owner Information MCDONOUGH RICHARD F WWII VET
 41 WINDING WAY
 PORTLAND ME 04102
Book and Page 8454/203
Legal Description 225-C-31
 WINDING WAY 41

Current Assessed Valuation:

TAX ACCT NO.	29574	OWNER OF RECORD AS OF APRIL 2011
		MCDONOUGH RICHARD F WWII VET
LAND VALUE	\$66,000.00	41 WINDING WAY
BUILDING VALUE	\$107,000.00	PORTLAND ME 04102
HOMESTEAD EXEMPTION	(\$10,000.00)	
POST WORLD WAR I VETERAN	(\$6,000.00)	
NET TAXABLE - REAL ESTATE	\$157,000.00	
TAX AMOUNT	\$2,869.96	



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

Building Information:

Building 1

Year Built 1956
Style/Structure Type RANCH
Stories 1
Units 1
Bedrooms 2
Full Baths 1
Half Baths 1
Total Rooms 5
Attic NONE
Basement FULL
Square Feet 1008

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



Outbuildings/Yard Improvements:

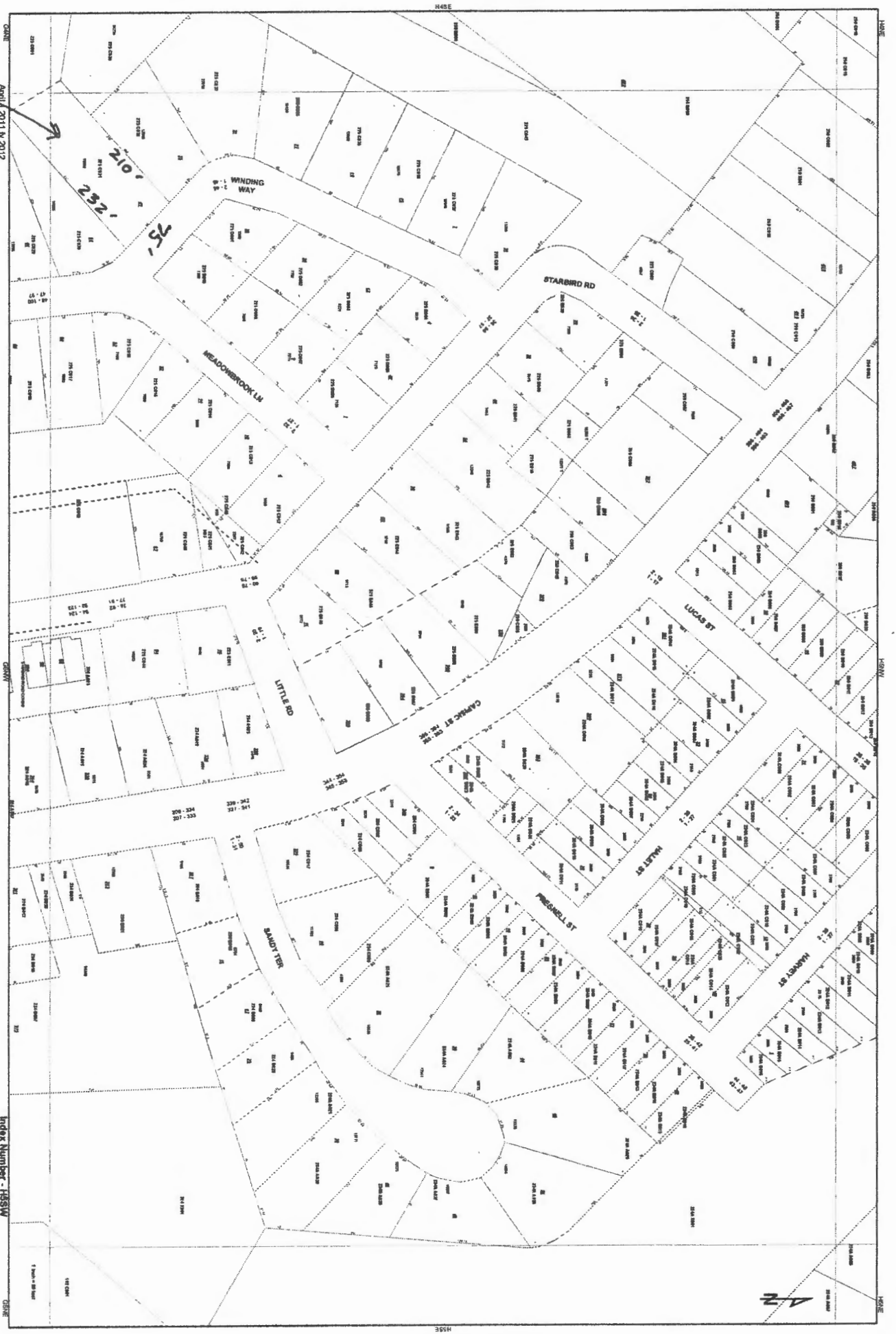
Building 1

Year Built 1970
Structure SHED-FRAME
Size 8X12
Units 1
Grade C
Condition A

Sales Information:

Sale Date	Type	Price	Book/Page
8/30/1988	LAND + BUILDING	\$0.00	8454/203

[New Search!](#)



April 2011 v 2012

41 WINDING WAY
 16500 SF = LOT SIZE
 75' ROAD FRONTAGE

CBL = 225 C031

Index Number - H&SW



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP
 B.O.C.A. TYPE OF CONSTRUCTION 396
 ZONING LOCATION PORTLAND, MAINE, .. MAY 11, 1981

MAY 13 1981

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 41 Winding Way Fire District #1 #2
 1. Owner's name and address Frederick Fuller same Telephone
 2. Lessee's name and address Telephone
 3. Contractor's name and address Home Builders, Inc. 1082 Bridgton Rd Telephone 854-5330
 4. Architect Specifications Westbrook Plans No. of sheets
 Proposed use of building dwelling No. families
 Last use No. families
 Material No. stories Heat Style of roof Roofing
 Other buildings on same lot
 Estimated contractual cost \$ 4500 Fee \$ 10

FIELD INSPECTOR—Mr.
 This application is for: @ 775-5
 Dwelling Ext. 23
 Garage
 Masonry Bldg.
 Metal Bldg.
 Alterations
 Demolitions
 Change of Use
 Other

GENERAL DESCRIPTION

To construct open porch 19'x15' as per plan
 foundation will be 8" sono tubes
 ramp will be constructed for access

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4
 Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work?	Is any electrical work involved in this work?
Is connection to be made to public sewer?	If not, what is proposed for sewage?
Has septic tank notices been sent?	Form notice sent?
Height average grade to top of plate	Height average grade to highest point of roof
Size, front 19 depth 15 No. stories	solid or filled land? earth or rock?
Material of foundation sono tubes below grade	Thickness, top bottom cellar
Kind of roof none Rise per foot	Roof covering
No. of chimneys Material of chimneys	of lining Kind of heat fuel
Framing Lumber—Kind Dressed	full size? Corner posts Sills
Size Girder Columns under	Size Max. on centers
Studs (outside walls and carrying partitions)	4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters 1st floor	2nd 3rd roof
On centers 1st floor	2nd 3rd roof
Maximum span 1st floor	2nd 3rd roof
If one story building with masonry walls, thickness of walls?	height?

IF A GARAGE

No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY:
 BUILDING INSPECTION—PLAN EXAMINER
 ZONING:
 BUILDING CODE:

DATE MISCELLANEOUS
 Will work require disturbing of any tree on a public street?

P.O. Box 6762, Portland, ME 04103.
207-774-7241 (phone) 207-761-4798 (fax)

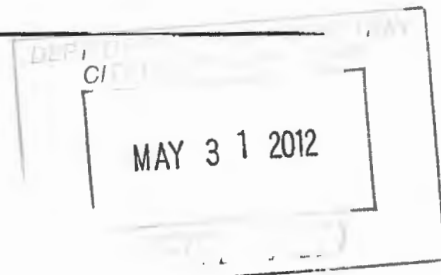
**STEPHEN D. BITHER
ATTORNEY AT LAW**

Fax

To: MARGE - Code Enforcement **From:** S. Bither
Fax: 874-8716 **Pages:** 2
Date: 5/31/12

Re: 41 Winding Way
225-C-31

CC:



- Urgent
- For Review
- Please Comment
- Please Reply
- Please Recycle

____ copy of deed to Christine Shackley, recorded Cumb Cty Reg Deeds Bk 28053, p104.

Thank you.

sb

5/31/12

Jon,

This is The Right
 title & interest
 for The "hungry-up"
 VEARR deck
 in Marge

VIEW ONLY
HE WRONG
ITACT THE

**NOTE: THIS COMMUNICATION IS
BY THE PERSON TO WHOM IT IS
PARTY, OR IF THE ADDRESSEE IS
SENDER AT 207-774-7241. THANK**

DEED OF DISTRIBUTION
BY PERSONAL REPRESENTATIVE (TESTATE)
(STATUTORY SHORT FORM)

DEPT. OF REVENUE
CITY OF PORTLAND, MAINE
MAY 31 2012

KNOW ALL PERSONS BY THESE PRESENTS, THAT CHRISTINE A. SHACKLEY, of Westbrook, Cumberland County, Maine, duly appointed and acting Personal Representative of the Estate of RICHARD MCDONOUGH, deceased, whose will was duly admitted to probate in the Probate Court for the County of Cumberland, Maine, by the powers conferred by law, and every other power, in distribution of the estate, grants to CHRISTINE A. SHACKLEY, with an address of 29 Sargent Street, Westbrook, ME 04092 the following real estate located in Portland, County of Cumberland and State of Maine:

A certain lot or parcel of land with the buildings thereon situated in the City of Portland, County of Cumberland and State of Maine, and being lot numbered (8) as shown on the plan of Riverview Park recorded in Cumberland County Registry of Deeds in Plan Book 45, Page 38.

Being the same premises conveyed to Frederick B. Fuller and Richard F. McDonough, as Joint Tenants, by deed dated August 30, 1988, and recorded in Cumberland County Registry of Deeds in Book 8454, Page 203. Said Frederick B. Fuller died on November 23, 1996.

Witness herein the hand and seal this 31 of May, 2012.

Steph Bitter
Witness

Christine A. Shackley
Personal Representative

STATE OF MAINE
CUMBERLAND, ss

Personally appeared before me CHRISTINE A. SHACKLEY, in her said capacity and acknowledged the foregoing to be her free act and deed and the free act and deed of the Estate of RICHARD MCDONOUGH.

DATE: 5/31/12

Steph Bitter
Notary Public/Attorney at Law 3911

Printed Name: Steph Bitter
Stephen A. Bitter

CERTIFICATION OF VITAL RECORD

STATE OF MAINE

ORIGINAL - STATE COPY - Place of Death COPY - Place of Residence COPY - Place Permit Issued

STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
MEDICAL EXAMINER FORM
CERTIFICATE OF DEATH State File Number:

1a. FIRST NAME Richard		1b. MIDDLE NAME F		1c. LAST NAME McDonough		1d. JR., etc. n/a	
2. DATE OF DEATH (Mo, Dy, Yr) 01/22/2012		3. SEX M		4. SOCIAL SECURITY NUMBER 006-18-7512		5a. AGE (Yrs) 86	
7. BIRTHPLACE (City and State or Foreign Country) Portland, Maine		8. WAS DECEDENT EVER IN U.S. ARMED FORCES? NO		9. PLACE OF DEATH (Check only one) HOSPITAL: <input type="checkbox"/> DOA <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> OTHER: <input type="checkbox"/> Nursing Home <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)			
10. FACILITY NAME (If not institution, give street and number) 41 Winding Way			11. COUNTY OF DEATH Cumberland		12. CITY OR TOWN OF DEATH Portland		
13. MARITAL STATUS <input type="checkbox"/> Married <input checked="" type="checkbox"/> Never married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced		14. MOST RECENT SPOUSE (If wife, give maiden name) n/a		15. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) Postal Worker		16. KIND OF BUSINESS/INDUSTRY U. S. Post Office	
17. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12 grades) 12		18. ANCESTRY - French, English, Irish, etc. (Specify) College (1-4 or 5+ grades) Irish		19. RACE - American Indian, Black, White, etc. (Specify) White			
20. RESIDENCE STATE Maine		21. RESIDENCE COUNTY Cumberland		22. RESIDENCE CITY OR TOWN Portland		23. RESIDENCE STREET AND NUMBER 41 Winding Way	
24a. FATHER'S FIRST NAME Michael		24b. FATHER'S MIDDLE NAME n/a		24c. FATHER'S LAST NAME McDonough		24d. FATHER'S JR., etc. n/a	
25a. MOTHER'S FIRST NAME Mary		25b. MOTHER'S MIDDLE NAME n/a		25c. MOTHER'S MAIDEN SURNAME Connolly			
26. INFORMANT - NAME (Type or Print) Christine Shackley				27. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, ZIP Code) 29 Sargent Street, Westbrook, Maine 04092			
28. METHOD OF DISPOSITION: <input type="checkbox"/> Temporary Storage <input type="checkbox"/> Burial <input checked="" type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input type="checkbox"/> Use by Medical Science <input type="checkbox"/> Other (Specify)						29. WAS BODY EMBALMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
30. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Brooklawn Crematory				31. LOCATION - City or Town, State Portland, Maine		32. DATE OF DISPOSITION (Mo, Dy, Yr) 01/24/2012	
33. SIGNATURE OF FUNERAL PRACTITIONER OR AUTHORIZED PERSON <i>[Signature]</i>				34. NAME AND ADDRESS OF FACILITY OR AUTHORIZED PERSON Conroy-Tully Crawford Funeral Homes & Cremation Services 172 State Street, Portland, Maine 04101			
35. LICENSE NUMBER 1321				36. FUNERAL ESTABLISHMENT LICENSE NUMBER 09757			
37. MEDICAL EXAMINER: On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the cause and manner as stated. Signature and Title: <i>[Signature]</i>				38. DATE SIGNED (Mo, Dy, Yr) 01/24/2012		39. VIEWED BODY AFTER DEATH? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
40. NAME AND ADDRESS OF MEDICAL EXAMINER (Type or Print) Donald F. Yorkey, Jr., D.O., 5 Elmwood Avenue, Westbrook, Maine 04092						41. TIME OF DEATH Found 9:30 AM	
42. REGISTRAR'S SIGNATURE <i>[Signature]</i>				43. DATE FILED (Mo, Dy, Yr) JAN 25 2012			
44. WAS AN AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		45. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could Not Be Determined		46. DATE OF INJURY (Mo, Dy, Yr)		47. DESCRIBE HOW INJURY OCCURRED	
48. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		49. TIME OF INJURY <input type="checkbox"/> AM <input type="checkbox"/> PM		50. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)			
51. LOCATION - Street and Number or Rural Route Number, City or Town, State		52. LOCATION - Street and Number or Rural Route Number, City or Town, State					
53. PART I - Enter the diseases, injuries, or complications which caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (final disease or condition resulting in death) a. Arteriosclerotic Cardiovascular Disease DUE TO (OR AS A CONSEQUENCE OF): Sequentially list conditions, if any, leading to immediate cause: b. Error UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) c. d. PART II - Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.							

VS3-ME-R199-1 HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF A CERTIFICATE OR RECORD WHICH IS IN MY OFFICIAL CUSTODY

TOWN OF: Portland
DATE ISSUED: JAN 25 2012
ATTEST: Katherine L. Jones
Katherine L. Jones



VS-31 This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

RECEIVED
MAY 31 2012
Dept. of Building Inspections
City of Portland, Maine

STATE OF MAINE

2012-0276

Cumberland, ss.

REGISTRY OF PROBATE

I, John B. O'Brien Register of the Probate Court for said County of Cumberland, hereby certify, that at the Probate Court holden at Portland in and for said County, on the 23rd Day of March, in the year of our Lord 2012

CHRISTINE SHACKLEY
29 SARGENT STREET
WESTBROOK, ME 04092

was duly appointed Personal Representative of the Estate of RICHARD F. MCDONOUGH late of PORTLAND, ME

In the County of Cumberland and State of Maine, deceased without bond.

I also certify, that it appears by the records and files of said Court that said appointment has not been revoked or annulled.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of said Court, this 23 day of March, 2012.

John B O'Brien

, Register.

RECEIVED
MAY 31 2012
Dept. of Building Inspections
City of Portland Maine

Replace Existing Deck

