

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

## BUILDING INSPECTION PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 080235
MAR 25
CITY OF PORTLAND

This is to certify that REALI ARDUINO & FELIX MILLER ITS/P A Renovat Inc

has permission to Remodel kitchen, 9' x 28' liv space addition, construct 500 sq ft deck

AT 403 CAPISIC ST L 259 B001001

provided that the person or persons firm or person 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 when permission is procured before this building or part thereof is moved or services closed-in. 4 HOUR NOTIFICATION 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

*Thomas M. Mahley* 3/21/08  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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## BUILDING INSPECTION

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

Classification of inspection must be given and when permission is procured before this building or part thereof is occupied or service is closed-in. 4  
OUR NOTICE REQUIRED.

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#### OTHER REQUIRED APPROVALS

Fire Dept. \_\_\_\_\_  
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Department Name

*Thomas M. Mahley* 3/21/08  
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: 08-0235	Issue Date:	CBL: 259 B001001
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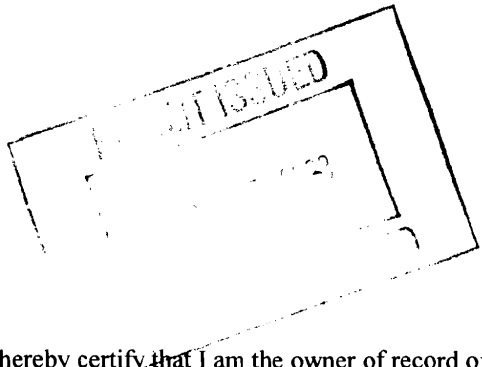
Location of Construction: 403 CAPISIC ST	Owner Name: REALI ARDUINO & FELICIA MI	Owner Address: 403 CAPISIC ST	Phone:
Business Name:	Contractor Name: P A Renovations, Inc	Contractor Address: P O Box # 1288 Scarborough	Phone: 2074504440
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: Single Family Home	Proposed Use: Single Family Home - Remodel kitchen, 9' x 28' living space addition, construct 500 sq ft deck	Permit Fee: \$840.00	Cost of Work: \$82,000.00	CEO District: 3
Proposed Project Description: Remodel kitchen, 9' x 28' living space addition, construct 500 sq ft deck		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
		Signature:	Signature:	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Signature:	Date:	

Permit Taken By: Idobson	Date Applied For: 03/17/2008	<b>Zoning Approval</b>	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>ok with conditions</i> Date: <i>3/18/08</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>9</i></p>
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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

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

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

<b>Permit No:</b> 08-0235	<b>Date Applied For:</b> 03/17/2008	<b>CBL:</b> 259 B001001
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<b>Location of Construction:</b> 403 CAPISIC ST	<b>Owner Name:</b> REALI ARDUINO & FELICIA MI	<b>Owner Address:</b> 403 CAPISIC ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> P A Renovations, Inc	<b>Contractor Address:</b> P O Box # 1288 Scarborough	<b>Phone</b> (207) 450-4440
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	

<b>Proposed Use:</b> Single Family Home - Remodel kitchen, 9' x 28' living space addition, construct 500 sq ft deck	<b>Proposed Project Description:</b> Remodel kitchen, 9' x 28' living space addition, construct 500 sq ft deck
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 03/18/2008**Note:** **Ok to Issue:** 

- 1) Separate permits shall be required for future decks, sheds, pools, and/or garages.
- 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.
- 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:** Tom Markley      **Approval Date:** 03/21/2008**Note:** **Ok to Issue:** 

- 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.



# 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>403 CAPSIC ST.</u>		
Total Square Footage of Proposed Structure/Area <u>2220 Sq Ft.</u>		Square Footage of Lot <u>9000 Sq Ft.</u>
Tax Assessor's Chart, Block & Lot Chart# <u>259</u> Block# <u>B</u> Lot# <u>1</u>		Applicant * <u>must be owner, Lessee or Buyer</u> * Name <u>EDWARD + ALAN MILLER</u> Address <u>403 CAPSIC ST.</u> City, State & Zip <u>Portland</u>
Lessee/DBA (If Applicable)		Owner (if different from Applicant) Name Address City, State & Zip
Current legal use (i.e. single family) <u>Single family</u> If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? If yes, please name Project description: <u>Remodel of kitchen</u> <u>Addition of 9x28 Living space</u> <u>Construction of 500 Sq Ft. Deck</u>		Telephone: <del>415-880-1188</del> <u>415-1188 call</u>
Contractor's name: <u>PA. RENOVATIONS, INC.</u>		Cost Of Work: \$ <u>82000.00</u> C of O Fee: \$ _____ Total Fee: \$ _____
Address: <u>PO. Box 1288</u>		MAR 17 2008
City, State & Zip <u>Scarborough ME</u>		Telephone: <u>853-9884</u>
Who should we contact when the permit is ready:		Telephone: <u>450-4440</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](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: 3-17-08

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

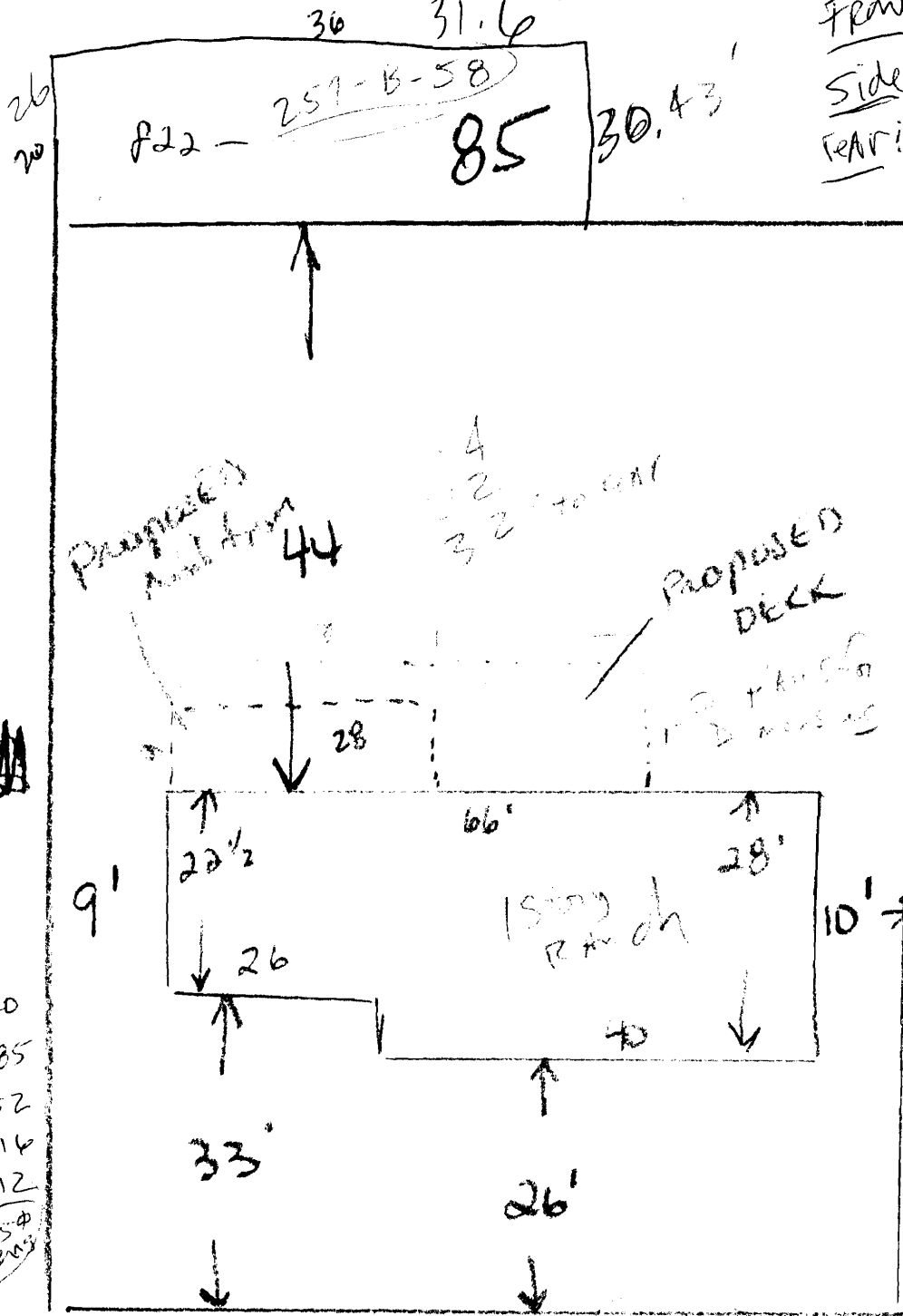
ED MILLER

403 CAPISIC ST

per ASSESSOR Plot Plan

R-3

Front: N/A  
 Side (istay ranch) 8' 9" - 9' 10" shown  
 Rear: 25' min - 32' given



8500  
 F22  
 9322

35 | 9300

100'

33  
 22.5  
 4  
 99.5

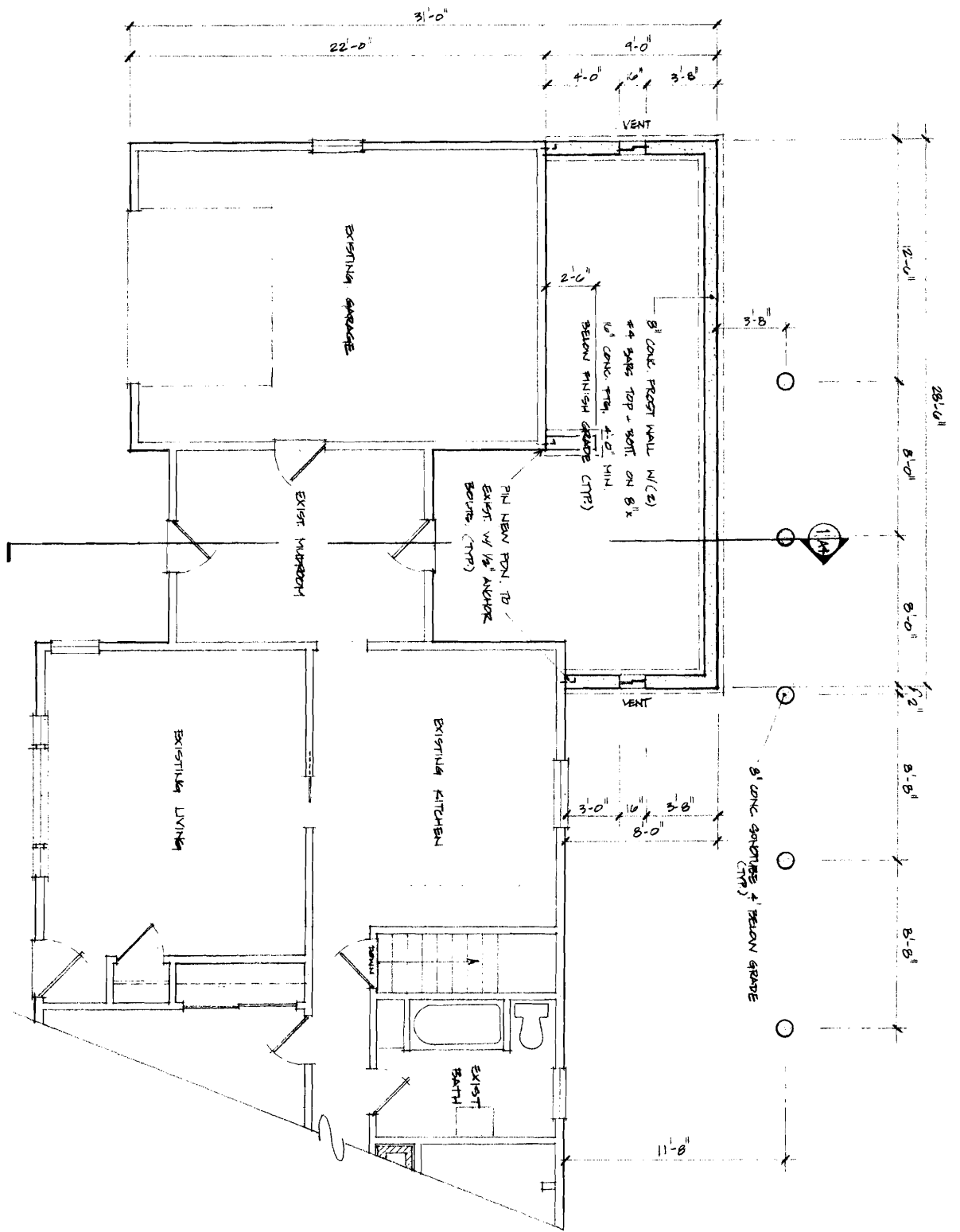
28x40 = 1120  
 225x26 = 585  
 9x28 = 252  
 12x18 = 216  
 4x28 = 112  
 2285 # covers

26  
 40  
 10  
 85

8500  
 822  
 9322 #

CAPISIC ST 9322 # x 356 = 3262.7 # MAX. COST.

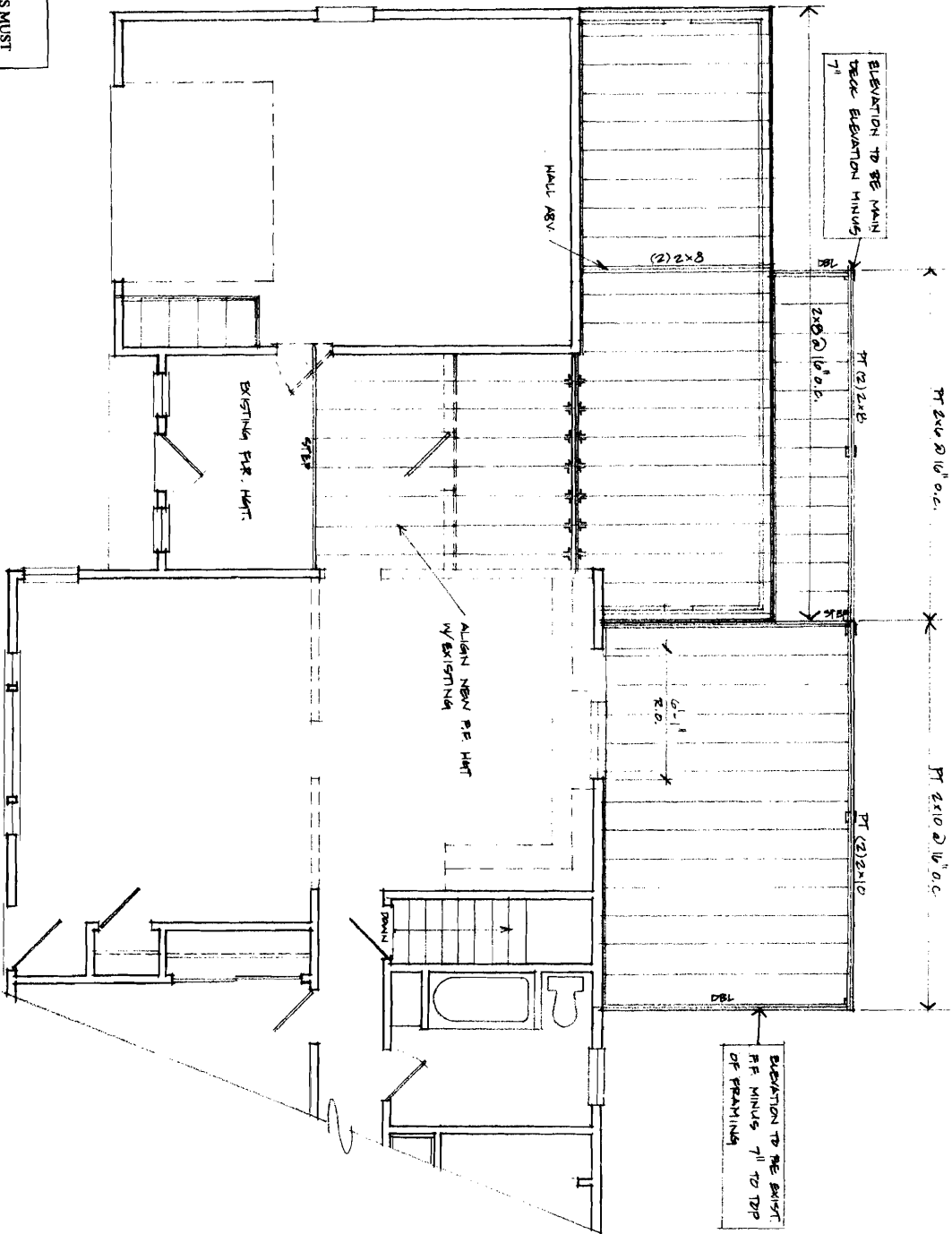




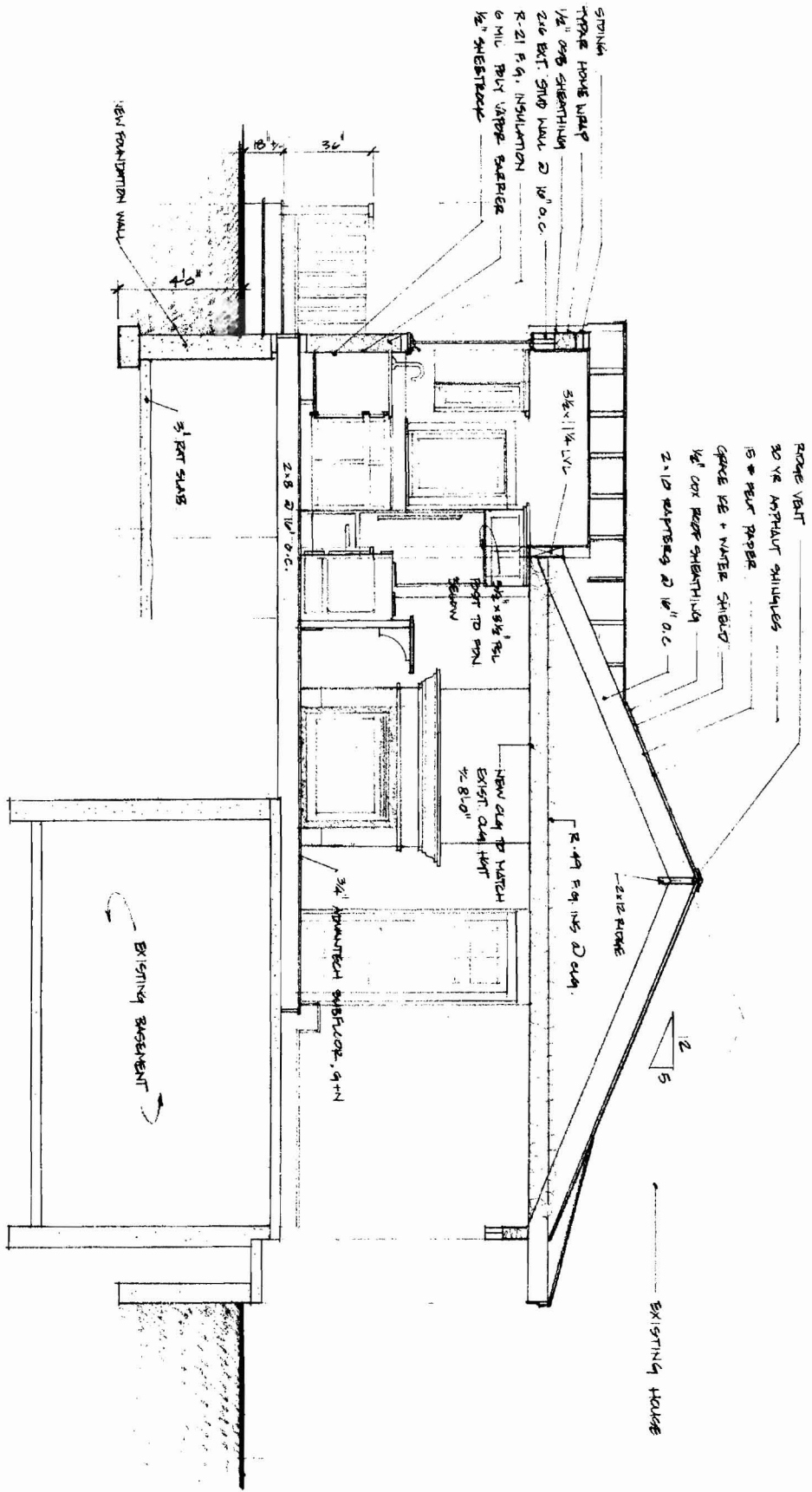


NOTE:  
 CONTRACTORS MUST  
 VERIFY TYPES AND  
 SIZES  
 OF MATERIALS SHOWN  
 FOR CODE  
 COMPLIANCE

NOTES: ROOF STRUCTURE CONSISTED OF FOX LINDBER  
 "H-BRACE" TRUSSES 24" O.C. THIS NO HEADERS  
 ARE REQUIRED @ INT PARTITION WALL OPENINGS

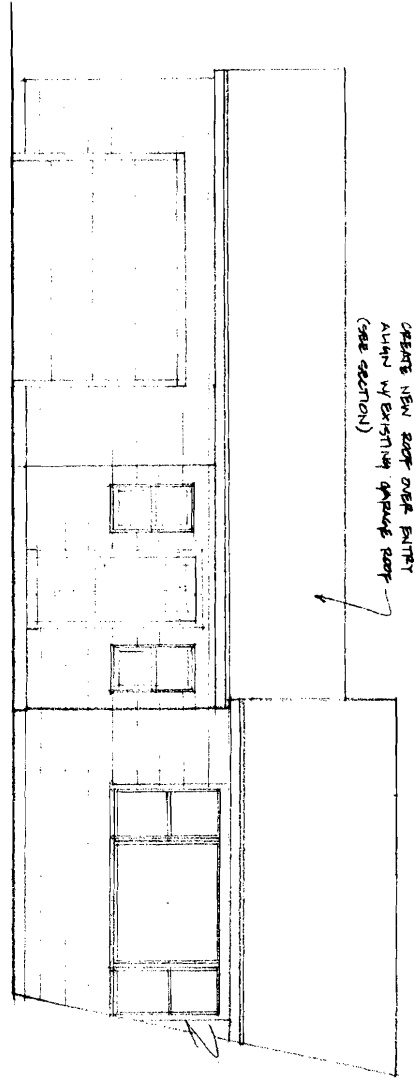


EXISTING WALL, TO REMAIN  
 TO BE REMOVED

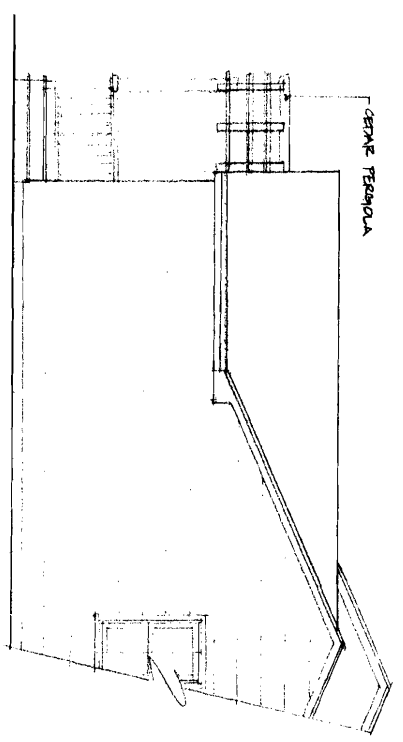


1 BUILDING SECTION  
 3/8" = 1'-0"

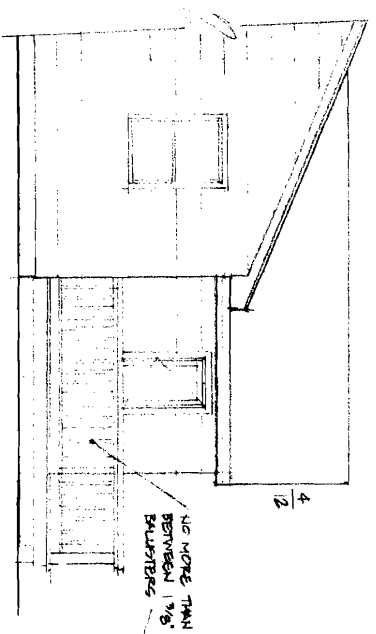
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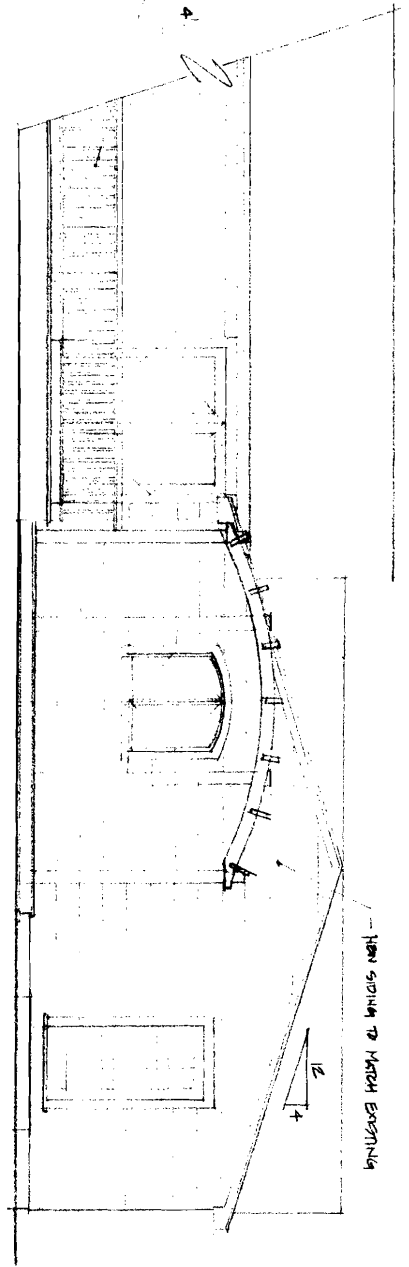
FRONT ELEVATION



LEFT ELEVATION

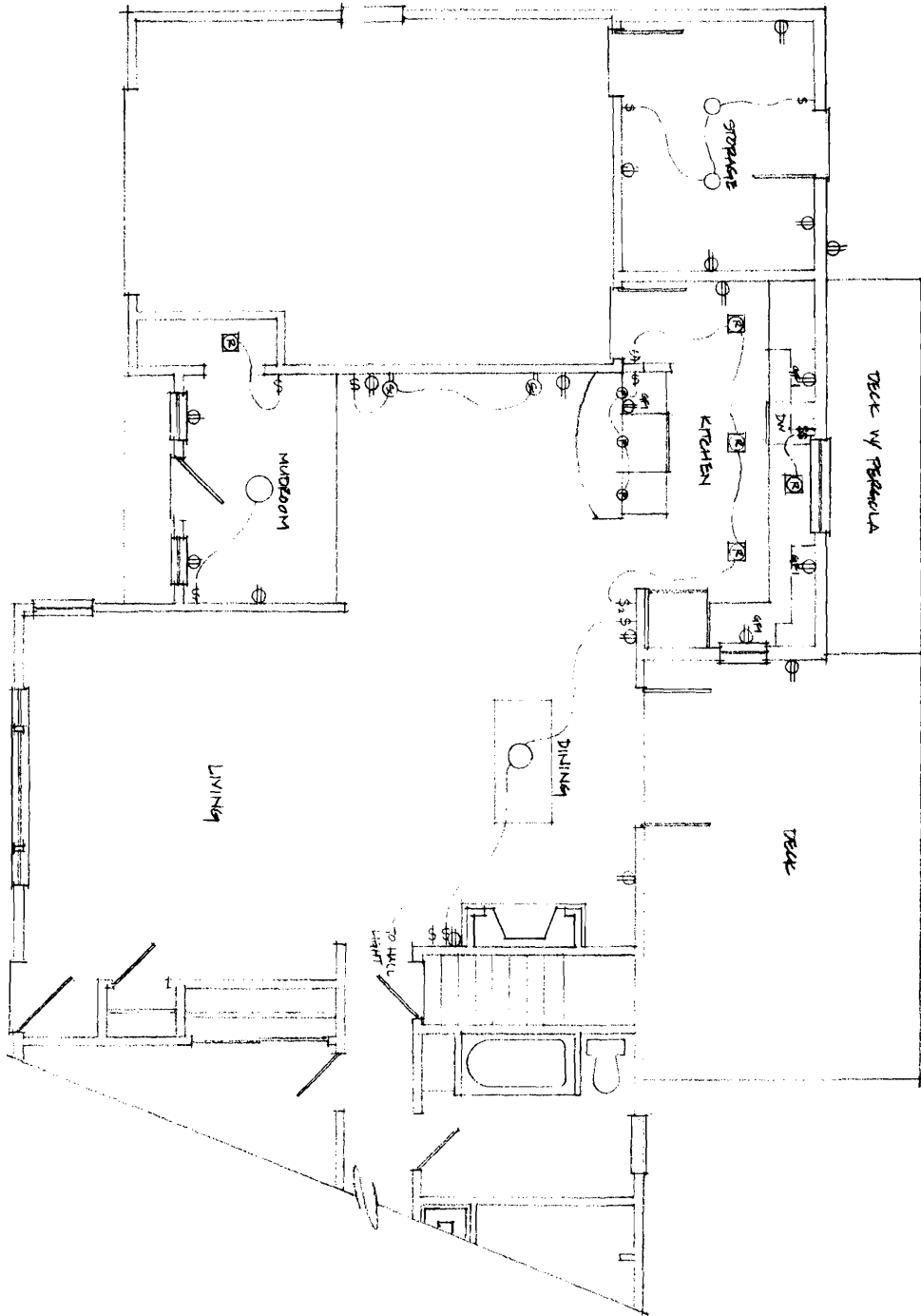


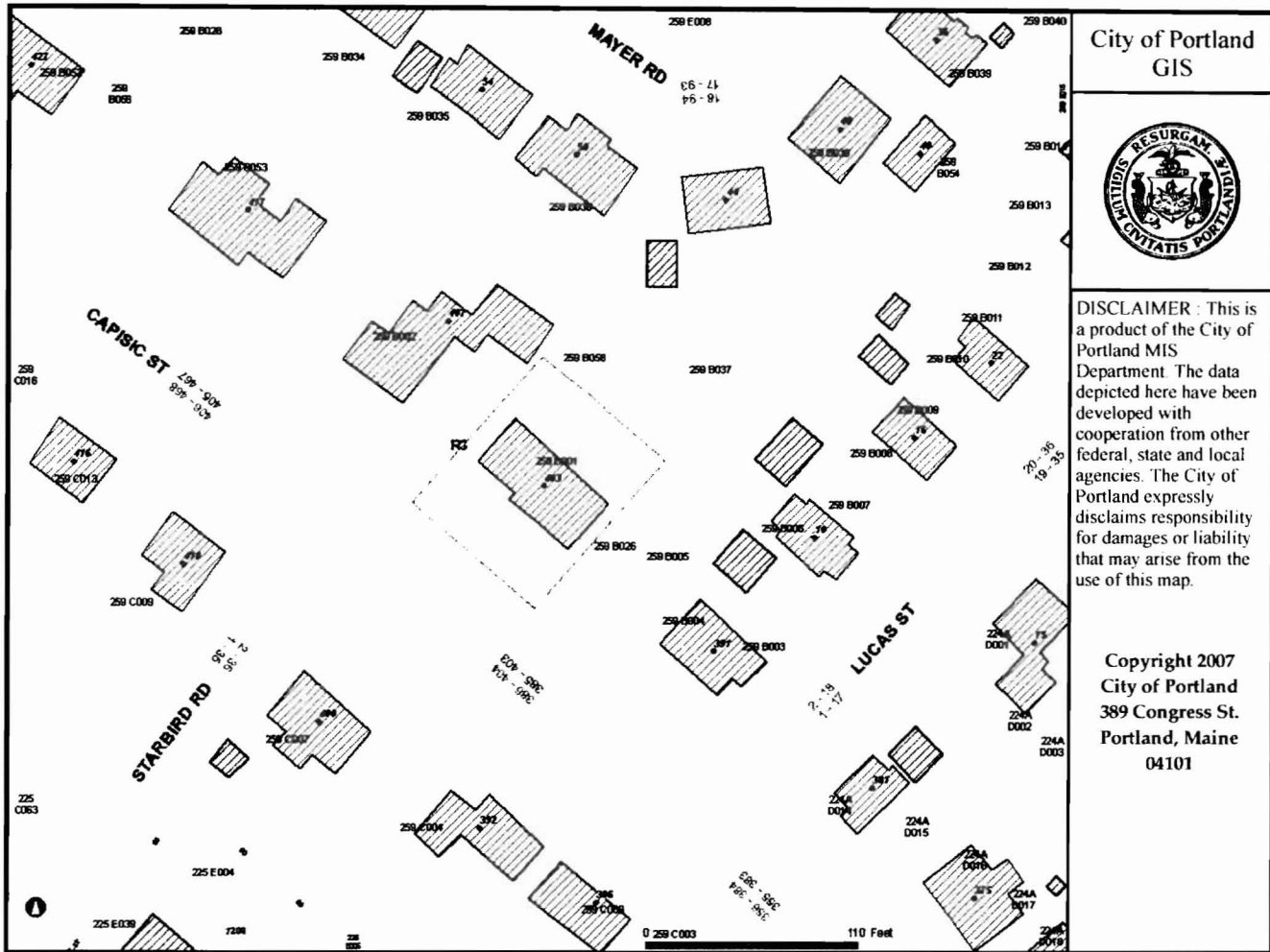
RIGHT ELEVATION



REAR ELEVATION

ELECTRICAL PLAN





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** 259 B001001  
**Location** 403 CAPISIC ST  
**Land Use** SINGLE FAMILY

**Owner Address** REALI ARDUINO & FELICIA MILLER JTS  
 403 CAPISIC ST  
 PORTLAND ME 04102

**Book/Page** 17660/198  
**Legal** 259-B-1  
 CAPISIC ST 399-403  
 8500 SF

**Current Assessed Valuation**

<b>Land</b>	<b>Building</b>	<b>Total</b>
\$59,500	\$120,000	\$179,500

**Property Information**

<b>Year Built</b> 1968	<b>Style</b> Ranch	<b>Story Height</b> 1	<b>Sq. Ft.</b> 1260	<b>Total Acres</b> 0.195		
<b>Bedrooms</b> 3	<b>Full Baths</b> 2	<b>Half Baths</b>	<b>Total Rooms</b> 5	<b>Attic</b> None	<b>Basement</b> Full	

**Outbuildings**

<b>Type</b>	<b>Quantity</b>	<b>Year Built</b>	<b>Size</b>	<b>Grade</b>	<b>Condition</b>
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**Sales Information**

<b>Date</b> 05/23/2002	<b>Type</b> LAND + BLDING	<b>Price</b>	<b>Book/Page</b> 17660-198
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**Picture and Sketch**

<b>Picture</b>	<b>Sketch</b>	<b>Tax Map</b>
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[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!**



## 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.

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

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

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

\_\_\_\_\_  
Date

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

3/21/08  
\_\_\_\_\_  
Date