### CITY OF PORTLAND, MAINE DEVELOPMENT REVIEW APPLICATION PLANNING DEPARTMENT PROCESSING FORM

2010-0005

	DRC Co	ору	Application I. D. Number
Madd Lic		3/9/2010	
Applicant			Application Date
543 Allen Ave , Portland, ME 04103			164 Hicks Street
Applicant's Mailing Address			Project Name/Description
	1!	50 - 150 Hicks St, Portl	• ,
Consultant/Agent		ddress of Proposed Site	
Applicant Ph: (207) 233-1715 Agent Fax:	29	97 F001001	
Applicant or Agent Daytime Telephone, Fax	A	ssessor's Reference: Ch	art-Block-Lot
Proposed Development (check all that apply): 🕡	New Building  Building Add	dition 🔲 Change Of U	se ✔ Residential ☐ Office ☐ Retail
Manufacturing Warehouse/Distribution	☐ Parking Lot ☐ Apt 0		ther (specify)
112		0	
- Projection of the Assessment		Total Disturbed Area of t	the Site Zoning
Ch∉ck Review Required:			☐ Design Review
Site Plan (major/minor)	Conditional - PB Subdiv	ision # of lots	<b>□</b> •
	Conditional - ZBA  Shorela		DEP Local Certification  Preservation Site Location
Amendment to Plan - Staff Review			Site Location
<b>_</b>		Variance Flood Ha	Trousing Replacement
After the Fact - Major	Stormy	vater Traffic M	lovement Other
After the Fact - Minor	PAD R	eview 14-403 S	Streets Review
Fees Paid: Site Plan <b>\$50.00</b> Subdiv	ision Eng	ineer Review	\$250.00 Date 3/10/2010
DDC Approval Status	Revie	wer Da	D. P. e.co
DRC Approval Status:			Divisor
Approved Approv	/ed w/Conditions	Denied	
Condition Compliance	grature (	3/26/18 date	Attached
Performance Guarantee	ed*	Not Required	
No building permjt may be issued until a performar	nce guarantee has been submit	ted as indicated below	
\/	•		
Performance Guarantee Accepted	data		
	date	amount	expiration date
Inspection Fee Paid	against trys control growing a growing against the control of the		
	date	amount	
Building Permit Issue	~~		
\/	date		
Performance Guarantee Reduced			
u	date	remaining balance	· ·
Temporary Certificate of Occupancy		Conditions (See Attach	
	date		expiration date
Final Inspection	1.1.5004.41%		
	date	signature	_
Certificate Of Occupancy			
<u> </u>	date		
Performance Guarantee Released			
	date	signature	
Defect Guarantee Submitted			
= ~ ~ ~ · · · · · · · · · · · · · · · ·	submitted date	amount	expiration date
Defect Guarantee Released			·
	date	signature	

#### **MEMORANDUM**

To:

**FILE** 

From:

Philip DiPierro

Dept: DRC

Subject: Application ID: 2010-0005

Date:

3/26/2010

see conditions.

#### **Approval Conditions of DRC**

- 1 All Site work (final grading, landscaping, loam and seed) must be completed prior to issuance of a certificate of occupancy.
- 2 Two (2) City of Portland approved species and size trees must be planted on your street frontage prior to issuance of a Certificate of Occupancy.
- The Development Review Coordinator (874-8632) must be notified five (5) working days prior to date required for final site inspection. Please make allowances for completion of site plan requirements determined to be incomplete or defective during the inspection. This is essential as all site plan requirements must be completed and approved by the Development Review Coordinator prior to issuance of a Certificate of Occupancy. Please schedule any property closing with these requirements in mind.
- 4 All damage to sidewalk, curb, street, or public utilities shall be repaired to City of Portland standards prior to issuance of a certificate of occupancy.
- A sewer permit is required for your project. Please contact Carol Merritt at 874-8300, ext. 8822. The Wastewater and Drainage section of Public Services must be notified five (5) working days prior to sewer connection to schedule an inspector for your site.
- 6 A street opening permit(s) is required for your site. Please contact Carol Merritt ay 874-8300, ext. 8822. (Only excavators licensed by the City of Portland are eligible.)
- 7 As-built record information for sewer and stormwater service connections must be submitted to Public Services Engineering Section (55 Portland Street) and approved prior to issuance of a Certificate of Occupancy.
- 8 The Development Review Coordinator reserves the right to require additional lot grading or other drainage improvements as necessary due to field conditions.
- Erosion and Sedimentation control shall be established and inspected by the Development Review Coordinator prior to soil disturbance, and shall be done in accordance with Best Management Practices. Maine Department of Environmental Protection Technical and Design Standards and Guidelines. All Erosion and Sedimentation control measures must be inspected and maintaned daily.
- 01 The house lateral for the sewer must be connected into the sewer line, not the sewer manhole. If the stub shown on the site plan does not exist, then the sewer lateral must be connected into the sewer line after the manhole.

# Memorandum Department of Planning and Urban Development Planning Division



TO:

Inspections Department

FROM:

Philip DiPierro, Development Review Coordinator

DATE:

October 221, 2010

RE:

C. of O. for # 164 Hicks Street, Madd, LLC Single Family

(Id#2010-0005) (CBL 297 F 001001)

After visiting the site, I have the following comments:

Site work complete:

At this time, I recommend issuing a Permanent Certificate of Occupancy.

Cc:

Inspection Services Manager

File: Barbara Barhydt, Development Review Services Manager

File: Urban Insight

## Philip DiPierro - Certificate of Occupancy/Final Scheduled. Property Addr: 164 HICKS ST Parcel ID: 297 F001001 Dist: 5

From:

Lannie Dobson

To:

C of O; nadams

Date:

10/18/2010 3:44 PM

Subject: Certificate of Occupancy/Final Scheduled. Property Addr: 164 HICKS ST Parcel ID: 297 F001001

Date: 10/21/2010 Time: 6:00:00 AM

Note: 712-3741 Dan Property Addr. 164 HICKS ST Parcel ID: 297 F001001

Application Type: Prmt Application ID: 100229

Contact:

Phone1: Phone2:

Owner Name: MADD LLC Owner Addr: 543 ALLEN AVE PORTLAND, ME 04103

City of Portland, Mai						Permit No:	Issue Date	*	CBL:		
389 Congress Street, 041	01 Tel: (	(207) <b>87</b> 4-8703	3, Fax:	(207) 874-871	6	10-0444			297 F00	01001	
Location of Construction:		Owner Name:				wner Address:		Phone:			
150 Hicks St						543 Allen Ave			207-712-3741		
Business Name:		Contractor Name:			Contractor Address:				Phone		
		Madd, LLC / Len Anderson			543 Allen Ave Portland				20723317	15	
Lessee/Buyer's Name		Phone:			Permit Type:				***	Zone:	
						Amendment to S	ingle Famil	ly			
Past Use: Propos		Proposed Use:	=			Permit Fee: Cos		·k:	CEO District:		
p		New Single Family / Amendment to						30.00			
		permit# 100229, to show footprint and setbacks for new set up for				Approved		CTION:			
		home (house to be flipped).				Denied	Use G	roup:	Type:		
		I I I I I I I I I I I I I I I I I I I	10 00 111	ppva).							
D		<u> </u>			4						
Proposed Project Description:		L 64 1-4	1 (1	1.6							
Amendment to permit # 100229, to show footprint an up for home (house to be flipped).			ia setba	cks for new set					Signature:		
	up for home ( nouse to be impped).					PEDESTRIAN ACTIVITIES DISTRIC			T (P.A.D.)		
				Action: Appro			ed Approved w/Conditions Denied				
					Signature:				Date:		
Permit Taken By:	Date A	oplied For:				Annuaria	.1	Date			
gg	04/29	Zoning Approval						11			
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoning Appeal			Historic Preservation				
		☐ Shoreland		☐ Variance			Not in District or Landmark				
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland			Miscellaneous		ĺ	Does Not Require Review		
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 Site Plan Maj Minor MM			☐ Interpretation ☐ Approved ☐ Denied			☐ Approved ☐ Approved w/Conditions ☐ Denied		
					Date:			D	Date:		
I hereby certify that I am the I have been authorized by th jurisdiction. In addition, if a shall have the authority to en such permit.	ie owner to a permit fo	make this appl r work describe	med pro ication a d in the	as his authorized application is is	he p d ag	gent and I agree ed, I certify that	to conform the code of	to all a ficial's	pplicable laws authorized repr	of this esentative	
				,, <u>_</u>						·	
SIGNATURE OF APPLICANT				ADDRESS	3		DATE		PHO	√E	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



