

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

## BUILDING INSPECTION

Permit Number 041539

**PERMIT ISSUED**

NOV - 3 2006

**CITY OF PORTLAND**

This is to certify that MAROTTO ANNA M /Arnold McAllister

has permission to Demo Carport

AT 90 DIBIASE ST

298 B033001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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 occupied or service closed-in. 4 HOUR NOTICE 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. McAllister*  
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

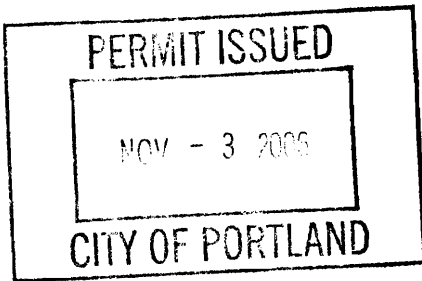
Permit No: 06-1539	Issue Date:	CBL: 298 B033001
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Location of Construction: 90 DIBIASE ST	Owner Name: MAROTTO ANNA M	Owner Address: 90 DIBIASE ST	Phone:
Business Name:	Contractor Name: Arnold McAllister	Contractor Address: 40B Tyler Ave NG	Phone 2073293018
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions	Zone: B3

Past Use: Single Family	Proposed Use: Single Family demo carport	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 5
Proposed Project Description: Demo Carport <i>connected to permit 06-1446</i>		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R3</i> Type: <i>SB</i> <i>JRC 2003</i>	
		Signature:	Signature: <i>Jan 19/30/06</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: dmartin	Date Applied For: 10/19/2006	<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..



Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>OK 10/19/06 AM</i>	Date: _____	Date: <i>AM</i>

## 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 Application**

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

Permit No: 06-1539	Issue Date:	CBL: 298 B033001
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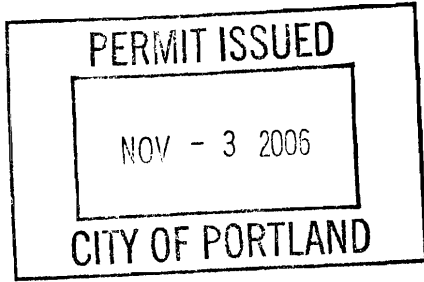
Location of Construction: 90 DIBIASE ST	Owner Name: MAROTTO ANNA M	Owner Address: 90 DIBIASE ST	Phone:
Business Name:	Contractor Name: Arnold McAllister	Contractor Address: 40B Tyler Ave NG	Phone 2073293018
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions	Zone: B3

Past Use: Single Family	Proposed Use: Single Family demo carport	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 5
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: R3 Type: SB DEC 2003		Signature: <i>[Signature]</i> Date: 10/30/06		

Proposed Project Description: Demo Carport <i>connected to permit 06-144b</i>	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____
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Permit Taken By: dmartin	Date Applied For: 10/19/2006	<b>Zoning Approval</b>
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <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>OK 10/19/06 AM</i>	Zoning Appeal <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: _____	Historic Preservation <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: <i>AM</i>
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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**  
**Department of Building Inspections**

\_\_\_\_\_ 11/15/20 \_\_\_\_\_

Received from B. P. [unclear]

Location of Work 57 [unclear] St

Cost of Construction \$ \_\_\_\_\_

Permit Fee \$ 100.00

Building (IL) \_\_\_ Plumbing (I5) \_\_\_ Electrical (I2) \_\_\_ Site Plan (U2) \_\_\_

Other \_\_\_\_\_

CBL: 136-02

Check #: 1069 Total Collected \$ 100

**THIS IS NOT A PERMIT**

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy



# Demolition of A Structure 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>90 DIBIASE ST.</u>		
Total Square Footage of Proposed Structure <u>300 S/F</u>		Square Footage of Lot <u>.288 ACRES (12526)</u>
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>298      <del>B032007</del>      33</u>	Owner: <u>ANNA MAROTU</u>	Telephone: <u>878-1214</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>ARNOLD McALLISTER</u> <u>40 B TYLER AVE</u> <u>N.G ME 207-329-3018</u>	Cost Of <u>DUMP FEES</u> Work: \$ <u>ONLY</u> Fee: \$ <u>30</u>
Current Specific use: <u>CAR PORT (GARAGE)</u> If vacant, what was the previous use? _____ How long has it been vacant?: _____		
Project description: <u>TAKE DOWN CARPORT</u>		
Contractor's name, address & telephone: _____		
Who should we contact when the permit is ready: <u>ARNOLD McALLISTER</u> Mailing address: <u>40 B TYLER AVE</u> Phone: <u>329-3018</u> <u>NEW GLouceSTER</u>		<div style="border: 2px solid red; padding: 5px; width: fit-content; margin: auto;"> <p style="margin: 0; font-size: small; color: red;">DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME</p> <div style="border: 1px solid black; padding: 5px; margin: 5px auto; width: 80%;"> <p style="margin: 0; font-size: x-large;">OCT 18 2006</p> </div> <p style="margin: 0; font-size: large; color: red; font-weight: bold;">RECEIVED</p> </div>

Please submit all of the information outlined in the Demolition call list. 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 visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections 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 of applicant: <u>Arnold McAllister</u>	Date: <u>10/13/06</u>
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**This is not a permit; you may not commence ANY work until the permit is issued.**

✓ # 1585



# BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

- OK TO Demo carport JMB
- Footing/Building Location Inspection: Prior to pouring concrete
- ~~NA~~ Re-Bar Schedule Inspection: Prior to pouring concrete
- ~~NA~~ Foundation Inspection: Prior to placing ANY backfill ACM
- ~~NA~~ Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling
- 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 ACM

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

ACM If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

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

Arnold M. Galante  
Signature of Applicant/Designee \_\_\_\_\_ Date \_\_\_\_\_  
Donna Martin Admin  
Signature of Inspections Official \_\_\_\_\_ Date 11-3-06

CBL: 298 B 033 Building Permit #: 06-1446 & 06-1539



To Be Removed  
90 DIBINSE ST.  
PORTLAND.





Maine Department of Environmental Protection
Lead & Asbestos Hazard Prevention Program

17 State House Station, Augusta, Me 04333-0017

Tel: (207) 287-2651 Fax: (207) 287-7826



Building Demolition Notification Form (BDNF)

Important Notice: Maine law requires the filing of this Building Demolition Notification Form prior to demolition of any building except a single-family home

1) Building owners are required to provide this notification of the demolition of a building to the DEP at least 5 working days prior to the demolition. This notification is not required before the demolition of a single-family residence or related structure (e.g., garage, shed, barn). It is also not required if previous notification of the demolition has been provided to the DEP as part of an asbestos abatement project notification. Demolition means the tearing down or intentional burning of a building or part of a building.

2) Prior to demolition, building owners must determine if there is any asbestos-containing material(s) (ACM) in the building. An "asbestos inspection" by a DEP-licensed Asbestos Consultant is required for all buildings except single-family homes and residential buildings with 2-4 units built after 1980. In lieu of an asbestos inspection, pre-1981 residential buildings with 2-4 units can be surveyed to identify possible ACM by someone knowledgeable about ACM, such as a code enforcement officer or building inspector. If materials that may contain asbestos are found, then you can either assume they are ACM or hire a DEP-licensed Asbestos Consultant to test the materials.

3) Whenever more than 3 square feet or 3 linear feet of ACM is identified, the ACM must be abated in accordance with the Maine Asbestos Management Regulations by a DEP-licensed Asbestos Abatement Contractor. This includes materials presumed to be ACM. Check www.state.me.us/dep/rwm/asbestos/index.htm for a listing of asbestos contractors.

Prior to issuing a local demolition permit, the DEP or municipal demolition permits complete this form and fax it to the DEP for municipal demolition permits if the required asbestos inspection or survey has not been completed.

Were asbestos-containing materials found? (post-1980 2-4 unit)

No Asbestos Form needed per Ann.

property address:

with 2-4 units
with 2-4 units

asbestos survey performed by: (name & address)

(name of)

telephone:

property owner: (name & address)

demolition contractor: (name & address)

telephone:

telephone:

demolition start date:

demolition end date:

Notification Submitted by: (please print)

Date Submitted

Help save Maine fisheries - Remove and recycle mercury thermostats and fluorescent lamps from your building prior to demolition!

REVISED JULY 2004



# Demolition Call List & Requirements

Site Address: 90 DIBIASE ST.

Owner: ANNA MAROTTO

Structure Type: CAR PORT.

Contractor: ARNOLD McALLISTER

## Utility Approvals

Utility Approvals	Number	Contact Name/Date
Central Maine Power	1-800-750-4000	<u>CINDY DESCHENES 10/13/06</u>
Northern Utilities	797-8002 ext 6241	<u>MARK ALLEN 10/13/06</u>
Portland Water District	761-8310	<u>JAN WALKER 10/13/06</u>
Dig Safe	1-888-344-7233	<u>MARY 10/13/06</u> <u>(2006 40 8669)</u>

After calling Dig Safe, you must wait 72 business hours before digging can begin.

DPW/ Traffic Division (L. Cote)	874-8891	<u>L. COTE X-8891 10/17</u>
DPW/ Sealed Drain Permit (C. Merritt)	874-8822	<u>CARA MERRITT 10/13/06</u>
Historic Preservation	874-8726	<u>DEB ANDREWS 10/13/06</u>
Fire Dispatcher	874-8576	<u>DISPATCHER WILLIAMS 10/13/06</u> <u>CALL WHEN HAPPENING</u>

## Additional Requirements

- 1) Written Notice to Adjoining Owners ANTHONY LIMBARDO 84 DIBIASE 10/17
- 2) A Photo of the Structure(s) to be demolished JENNIA AALLS 84 DIBIASE 10/17  
PAT JOHNSON 19 THURS 10/17  
HANNA STORCH 1477 FOREST 10/17  
CHECK NEXER 10/16
- 3) Certification from an asbestos abatement company NOT NEEDED (NEED BUILDING INSPECTOR TO TAKE A LOOK)

DEP – Environmental (Augusta) 287-2651 SANDY 10/13/06

U.S. EPA Region 1 – No Phone call required. Just mail copy of State notification to:

Demo / Reno Clerk  
US EPA Region I (SEA)  
JFK Federal Building  
Boston, MA 02203

I have contacted all of the necessary companies/departments as indicated above and attached all required documentation.

Signed: Arnold McAllister

Date: 10/13/06

Stalcom House (Howard Sturtevant)  
(check message)