Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY			
CII Y	UF		U

Please Read Application And Notes, If Any, Attached

NOIZ BU PERMIT

**PERMIT ISSUED** 

City of Portland

Permit Number: 100837

353 B006001 or compared this permit shall comply with all

AUG - 6

LANIE AN ITS/A

AT <del>31 WEST LYNNE AVE</del>

This is to certify that \_\_\_\_GILLIGAN MATTHEW C &

has permission to \_\_\_\_\_replace an existing 16' x 24' de

provided that the person or persons, fi of the provisions of the Statutes of Make and of the Care and ces 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.

Noti ation o spectid nust b give nd writte permissi procure this bu ig or na hereof i befd or oth sed-in. 2 lath NOTICE IS REQUIRED. HO

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

PENALTY FOR REMOVING THIS CARD

Director Building & Inspection Services

City of Portland, Maine - Build	ding or Use I	Permit Applicatio	n   Pc	rmit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 10-0837 353 B006001						
Location of Construction:	Owner Name:		Owne	r Address:	<u>-</u>	Phone:
31 WEST LYNNE AVE	GILLIGAN M	ATTHEW C & MEL	31 V	WEST LYNNE	AVE	
Business Name:	Contractor Name	:	Conti	ractor Address:		Phone
	Mick O Donne	ell	271	Pleasant Ave S	South Portland	2079393506
Lessee/Buyer's Name	Phone:		Perm	it Type:		Zonej
			Alt	erations - Dwel	llings	K-/
Past Use:	Proposed Use:	<del></del>	Perm	it Fee:	Cost of Wark:	CEO District:
Single Family Home	Single Family	Home - replace an		\$60.00	\$3,200.00	CEO District: 12,76
Proposed Project Description:		24' deck	FIRE	<b>/</b> 1 <b>7</b>	Approved INSP	ECTION: Ciroup: R·3 Type: St
replace an existing 16' x 24' deck			Signa	ituse:	Signa	iture:
PEDESTRIAN Action:  Signature:						w/Conditions Denied  Date:
Permit Taken By: Date Ap  Idobson 07/15.	plied For: /2010			Zoning A	Approval	
This permit application does not p	reclude the	Special Zone or Revi	ews	Zoning	Appeal	Historic Preservation
Applicant(s) from meeting application Federal Rules.		Shoreland		☐ Variance		Not in District or Landma
2. Building permits do not include p septic or electrical work.	lumbing,	☐ Wetland		Miscellan	eous	Does Not Require Review
3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		Condition	al Use	Requires Review
False information may invalidate permit and stop all work		Subdivision		Interpretal	tion	Approved
		Site Plan		Approved		Approved w/Conditions
PERMIT ISSU	JED	Maj Minor MM	,	☐ Denied		☐ Denied
H AUG - 6 2010		Date: ARU 8711	5/10	Date:		Date:
City of Portland						
		CERTIFICATI	ION			

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

Proposed Use: Single Family Home - rep	ace an existing 16' x 24	l' deek	1	Project Description an existing 16' x		
Dept: Zoning Note:  1) This property shall ren approval.	Status: Approved wit			Ann Machado	Approval I	Ok to Issue: 🗸
CITY OF PORTLAND, MAINE Department of Bullding Inspections Original Receipt	Received from Weithur Gilliger	Cost of Construction \$ Building Fee: Permit Fee \$ Site Fee: Certificate of Occupancy Fee:	Total: (5) Electrical (12) Site Plan (02)	23.6.6	No work is to be started until permit issued. Please keep original receipt for your records.	Taken by:  WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

## BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.
- X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers

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

  X Final inspection required at completion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

Building Permit #: 10-0837

CBL: 353 B006001

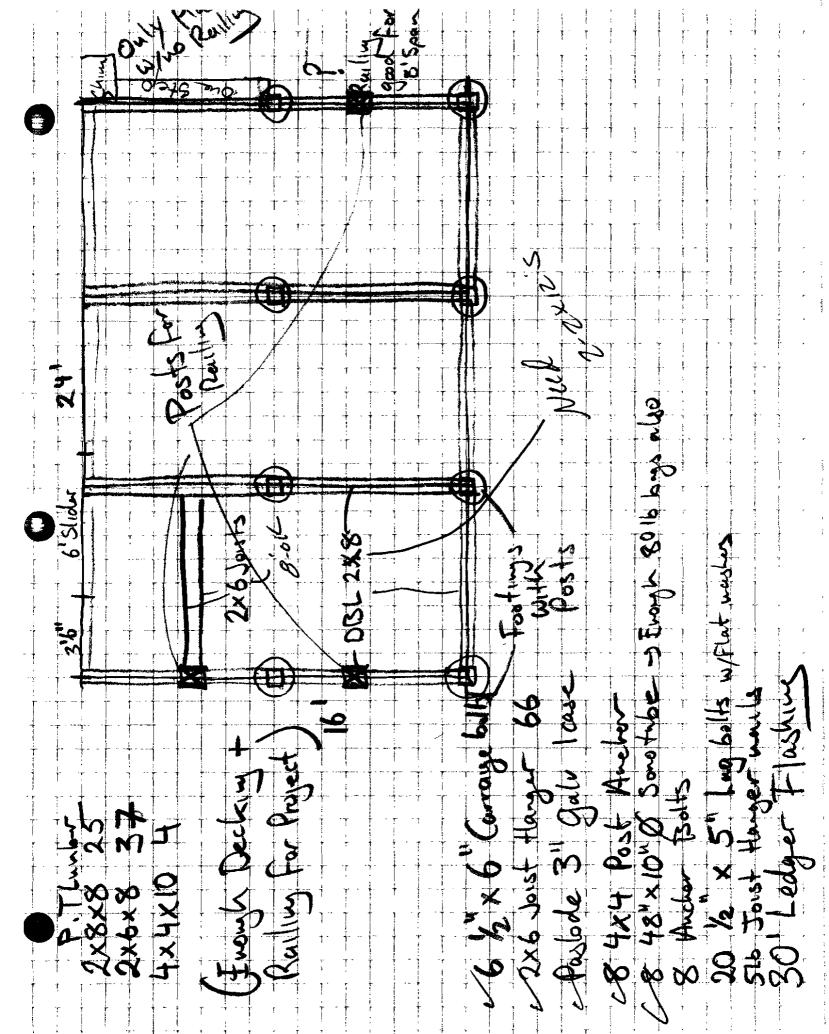


Signature:

## General Building Permit Application

Total Square Footage of Proposed Structure/Area  Square Footage of Lot  Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  Address 3: West Lynne Ave  City, State & Zip Pootage of Lot  Cost Of Name  Address 3: West Lynne Ave  City, State & Zip Pootage of Lot  Cost Of Poet \$  Cost Of Proposed Specific use:  Is property part of a subdivision?  Project description:  Replacing on exact tiny Selection British and Poet In Selection			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  Applicant must be owner, Lessee or Buyer  Name Matthew Gallingan  Address 3 West Lynne Acc  City, State & Zip Portham, ME 04103  Lessee/DBA (If Applicable)  Cover (if different from Applicant)  Name  Address  Cof O Fee: \$  City, State & Zip  Total Fee: \$  City, State & Zip  Total Fee: \$  Courrent legal use (i.e. simple family)  If vacant, what was the previous user  Proposed Specific use:  Is properly part of a subdivision?  Replacing on exacting decine and  City, State & Zip  Contractor's name  Mich O Donnell  Address  City, State & Zip  Contractor's name  Mich O Donnell  Address  Total Fee: \$  Contractor's name  Project description:  Replacing on exacting decine and  City, State & Zip  Contractor's name  Mich O Donnell  Address  The State of Tipe of the Contractor's name  Project description:  City, State & Zip  Contractor's name  Mich O Donnell  Address  Total Fee: \$  Contractor's name  Project description:  Replaced on the project description of the contractor's name  do so will result in the automatic denial of your permit.  Order obe sure the City fully understands the full scope of the project the ranning and Development Department or vequest addressed in formation prior to the issuance of sermit. For further information or to download cooies of sorm and other applications visit the inspections Division on-line at www.portlandmana.gov, or stop by the Inspections vision office, room 315 City Hall or call 874-8703.  The permit of work described in this application is issued, I certify that the Code Official's horized agent. I agree to conform to all asolicable so of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's horized representative shall have the authority to central all areas covered by this permit at an reasonable hor to enforce the			SOME OLHOS
Name Matthew Galligan   207 767 1240     Address 31 West Lynne Acc   City, State & Zip   Cost Of   Work: \$ 3,200     Name   Address   Cof O Fee: \$     Current legal use (i.e. single family)   Single Amily   Total Fee: \$     If vacant, what was the previous use:   Proposed Specific use:   Accident of the supplications of the property part of a subdivision?   No   Executive of ex	Fotal Square Footage of Proposed Structur	Square Footage of Lor	
Address 3' West Lynne Ave  City, State & Zip Post Land, HE 04/03  Cost Of Work: \$ 3,200  Cost Of Fee: \$  City, State & Zip  Contractor's name  Project description:  Replacing on existing description outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.  Project description:  Required on the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.  Verquest address of the first failure to do so will result in the automatic denial of your permit.  Verquest address of information prior to the issuance of a term. For further information or to download copies of a form and other applications Visit the Inspections Division on-line at www.portlandmane.gov., or stop by the Inspections rision office, room 315 City Hall or call 8748703.	<del>-</del>	Applicant *must be owner, Lessee or Bu	yer Telephone:
City, State & Zip Pochand, ME 04103  Current legal use (i.e. simple family)  If vacant, what was the previous use;  Proposed Specific use:  Is property part of a subdivision?  Contractor's name:  City, State & Zip  City, State & Zip  Contractor's name:  City, State & Zip  Contractor's name:  City, State & Zip  Contractor's name:  City, State & Zip  City, State & Zip  Contractor's name:  City, State & Zip  Contractor's name:  City, State & Zip  Contractor's name:  City, State & Zip  City, State & Zip  Contractor's name:  Contractor's name		Name Matthew Gilligan	207 767 1240
Owner (if different from Applicant)  Name  Address  Cost Of Work: \$ 3.200  Current legal use (i.e. single family)  If vacant, what was the previous user  Proposed Specific user:  Is property part of a subdivision?  No If yes please name  Project description:  Replacing on execting deck. 16'x 27' ED  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Address  Total Fee: \$  Contractor's name:  Mick O'Donnell  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Total Fee: \$  City, State & Zip  Contractor's name:  Mick O'Donnell  Total Fee: \$  City State & Zip  Contractor's name:  Mick O'Donnell  Total Fee: \$  Contractor's name:  Notal Fee: \$  Contractor's name:  Total Fee: \$  Total Fee: \$  Total Fee: \$  Contractor's name:  Total Fee: \$  Total Fee: \$  Contractor's name:  Total Fee: \$  Contractor's name	)S) (S) (V)	Address 31 West Lynne Ave	
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Address  City, State & Zip  Total Fee: \$  To	Lessee/DBA (If Applicable)	Owner (if different from Applicant)	
City, State & Zip  Total Fee: \$  Contract legal use (i.e. simple family)  If vacant, what was the previous user  Proposed Specific use:  Service of a subdivision?  No If yes, please name  Project description:  Replucing on exacting deck.  Contractor's name  Mick O Donnell  Address.  271 Pleasent Are  City, State & Zip Contractor's name  City, State & Zip Contractor's name  Mick O Donnell  Address.  271 Pleasent Are  City, State & Zip Contractor's name  Mick O Donnell  Address.  271 Pleasent Are  City, State & Zip Contractor's name  Mick O Donnell  Are  City, State & Zip Contractor's name  Mick O Donnell  Are  City, State & Zip Contractor's name  Mick O Donnell  Are  City, State & Zip Contractor's name  Mick O Donnell  Are  City, State & Zip Contractor's name  Dept of the project of the policy of the project of the proje		Name	Work: \$ 1,200
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Date: 7/12/10

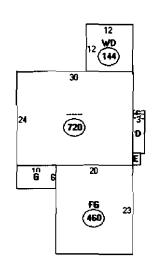


## **DECK INFORMATION REQUIRED WITH YOUR APPLICATION**

The following is a guideline of information required for the review of a deck application. It is intended to help you supply proper and complete application packages. Please label all of the following items on your plans. Thank you!

1.	A complete plot plan showing all structures & proposed structures with distances to all property lines labeled.
2.	a. Diameter of concrete filled tube 10 <sup>4</sup> b. depth below grade (minimum 4'-0" below grade) 4 <sup>4</sup> c. anchorage of column to footing 12 <sup>4</sup> d. spacing of tubes  Or e. pre cast concrete pier size  []. depth below grade (minimum 4'-0")  g. anchorage of column to footing  h. spacing of tubes
3.	Columns (members supporting framing of floor system)  a. wood size and type 2x6 Pressure Treature  b. anchorage of column to footing 4x4 Post Base secured with 4xx12" Under last
4,	Framing Members  a. Ledger size attached to building 2×10  b. Lag Bolt size and spacing on ledger 12" x 5" x 24" 0/c  c. Location of all flashing 1/2" Flushing on Ledger  d. Girder Size and spans carrying floor system Oouble 2x8 Joist spaning 8-Med -2-2x  e. Joist size, span, and spacing 2x 6 -8" Span 16" on centure  f. Joist hangers or ledger 2x6 Joist House  g. Decking size 5/4 x 6" x 16"
5.	
6.	Stair Details  a. Tread depth (measured nosing to nosing) //   b. Riser height 7/4"  c. Nosing on tread 3/4"  d. Width of stairs 81

Chen than 30" 86 the ground Chuch with galo archor bolts Deck height: 14-1511



Descriptor/Area	
A: 720 saft	720
B:WD	
144 sqft	144
C:1Fr/8 6 sapt	` ' ;
D:2Ft/f8 30 ≈aft	, ( <i>o</i>
E:1Fr/8	50
6 sqft	30
F: FG 460 soft	6
	U
G:OFP 60 soft	AIR
ou sur	460
	(0)
	VΨ

12,794 × 20% = 2558.804 MAX lot COV.

> 16×24=380 16×24=380 240

THIS IS NOT	`A BOUNDARY SI	JRVEY	
INSPECTION OF PREMISES I HEREBY CERTIFY TO Douglas Title Ca. Bank of America, NA. and its Title Insurer	31 West Lynne Avenue Portland, Maine	Job Number: _ Inspection Date: _	01-03-08
The monumentation is not in harmony with current deed description.  The building setbacks are not in conformity with town zoning requirements.  The dwelling does not appear to fall within the special flood hazard zone as delineated by the		Scale: <u>1</u> atthew C。 & Ianie R. Gili	1 4
Federal Emergency Management Agency. The land does not appear to fall within the special flood hazard zone as indicated on community-panel # 230051 0002 B	SELLER: No		· ·
12,794# Appens to be to scale	90°±	40'Scalad	7
APPEARS TO BE TO SCAPE	1	\ R9'	
R-Z-Zare)	33'	deck   20'	al .
REAV: 25 min - 40 Scalar		2 Story Wood House on Concrete	# [5]
PEAT: 25 min - 40 Scalard 29 given Side: 14 min - 20' given 250 yhous (233 given	u/e	Foundation entry garage	
Fort-NA		Paved Driveway	
	Anogra	ent R/W	Dooring ewalk Run Drive
	West Ly	nne Ave uminous	enuo )
THIS PROPERTY IS SUBJECT TO ALL		100	
RIGHTS AND EASEMENTS OF RECORD. THOSE THAT ARE EVIDENT ARE SHOWN.		MIN	1)

THIS PLAN MIGHT NOT REVEAL

CONFLICTS WITH ABUTTING DEEDS.

Bruce R. Bowman INCORPORATED 184 John Small Road Chebeague Island, Maine 04017 Phone: (207) 846-1663 Fax: (207) 846-1664

LOT 74

COUNTY \_\_\_\_ Cumberland PLAN BOOK <u>164</u> PAGE <u>51</u> LOT <u>74</u> DEED BOOK 13943 PAGE 131

THIS PLAN IS NOT FOR RECORDING Drawn by: 1