Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

#### **INCRECTION**

Permit Number: 061460

Tion a septing this permit shall comply with all

ances of the City of Portland regulating actures, and of the application on file in

This is to certify that	CLARK STEVEN M				
has permission to	Remove attached shed and I	from r	DITHE	onnected	permit# 061399
AT 35 TORONITA ST				ے 409 D026001	

ine and of the

rm or

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and the of buildings and this department.

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

fication finspe n mus n and w en permi on proci re this lding or rt there ed or bsed-in JR NO QUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS
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Fire Dept. Health Dept. Appeal Board \_ Other Department Name

PENALTY FOR REMOVING THIS CARD

389 Congress Street, 04101	- Building or Use 1				50		409 D0	26001
		, rax: (	207) 874-871	<u> </u>				
Location of Construction: 35 TORONITA ST	Owner Name: CLARK STEV	/IT/NI N. f.		Owner Address: 35 TORONIT	ACT		Phone:	
Business Name:	Contractor Name			Contractor Addr			Phone	
Lessee/Buyer's Name	Phone:			Permit Type:				Zone:
				Demolitions			T	R13
Past Use:	Proposed Use:	TT T		Permit Fee:	Cost of Wo		CEO District:	
Single Family Home	Single Family attached shed			\$30.0		50.00	CCTION:	
	home connecte			FIRE DEFT.	Approved Denied	Use G	roup: R3	Type: 5B
					zemea		roup: K3  DC 2  ure: Jm 16	013
Proposed Project Description:								
Remove attached shed and De	ck from rear of home co	onnected	l w/ permit#	Signature:		Signat	ure: In 1	0/11/04
061399				PEDESTRIAN A		STRICT (	(P.A.D.)	•
				Action: A	proved A	proved w	//Conditions	Denied
				Signature:			Date:	
Permit Taken By:	Date Applied For:			Zon	ing Approv	al		
ldobson	10/04/2006	Snec	ial Zone or Revie	we 7	Zoning Appeal		Historic Pres	 servation
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> </ol>		Shoreland		☐ Variance			Not in District or Landman	
2. Building permits do not in septic or electrical work.	nclude plumbing,	Wetland		Miscellaneous			Does Not Require Review	
3. Building permits are void within six (6) months of the		Flood Zone		Сог	iditional Use		Requires Rev	view
False information may inverse permit and stop all work		Subdivision		[ Interpretation			Approved	
		Site	e Plan	_ App	proved		Approved w/	Conditions (
		Maj [	Minor MM	_ Der	nied		Denied	
		01	INIOL AB	Λ   <sub>D</sub> .			, AGA^	
		Date: N	לות שטוףונ	Date:		1	Date:	
I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this applermit for work describe	med pro ication a d in the a	s his authorized application is is	ne proposed wor I agent and I ag I sued, I certify t	ree to conforn hat the code o	to all a	pplicable laws authorized repr	of this resentative
SIGNATURE OF APPLICANT		-	ADDRESS	3	DAT	E	РНО	ONE

•		ilding or Use Permit (207) 874-8703, Fax: (	-8716	Permit No: 06-1460	Date Applied For: 10/04/2006	CBL: 409 D026001	
Location of Construction:	_	Owner Name:	_	0	Owner Address:		Phone:
35 TORONITA ST		CLARK STEVEN M			35 TORONITA ST		
Business Name:		Contractor Name:		C	Contractor Address:		Phone
Lessee/Buyer's Name		Phone:		P	Permit Type: Demolitions		
Single Family Home- R home connected w/ per		hed shed and Deck from i			e attached shed an † 061399	d Deck from rear of	home connected w/
Dept: Zoning Note:	Status:	Approved	Revi	ewer:	Ann Machado	Approval Da	ate: 10/04/2006 Ok to Issue: ✓
Dept: Building Note:  1) Application approv and approrval prior	al based upo	Approved with Condition on information provided by			Tom Markley leviation from app		Ok to Issue:

# EURGALE OF THE STREET

#### 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: 35 Toriv	inta St. Porti	and Off Ray
Total Square Footage of Proposed Structure	Square Footage of Lot	
5'-20'	Lot size Acdt-)	0,410
Tax Assessor's Chart, Block & Lot Owner:		Telephone:
Chart# Block# Lot#		7562001611
409 D 36-31 Antho	ing Forcer	17745187 Home
Lessee/Buyer's Name (If Applicable) Applicant n		Cost Of
1740 00	ith St	Work: \$ 100
	9	Fee: \$
Port (	0~0 M E. 04 (6)	
Current Specific use: Adishion	porch Shed	
If vacant, what was the previous use?		
How long has it been vacant?:		
Project description: Name Strell Charl Shed no h	act of hour bout addition	hair
Project description: demo single story shed on b Connected to per	1 # 01 =1 200	
Connector to per	THE TO I STY.	
Contractor's name, address & telephone:		191 2 33
Contractor's marie, address & telephone.		
Who should we contact when the permit is ready:	Athan Ferrar	
Mailing address: Phone:	745767	OFT PARTIES IN THE PA
	/	
	/	
	<del></del>	
		<u> </u>
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.		10 40 00
<b>J</b>		
In order to be sure the City fully understands the full scope of the p		
request additional information prior to the issuance of a permit. Fo www.portlandmaine.gov, stop by the Building Inspections office, re		at
www.portunname.gov, stop by the bunding hispections office, it	5011 515 City Tian of Can 674-6705.	
I hereby certify that I am the Owner of record of the named property, or the been authorized by the owner to make this application as his/her authorized.	hat the owner of record authorizes the pr	coposed work and that I have
In addition, if a permit for work described in this application is issued, I ce	rtify that the Code Official's authorized r	epresentative shall have the
authority to enter all areas covered by this permit at any reasonable hour to	enforce the provisions of the codes appl	licable to this permit.
- Under Deven		
Signature of applicant:	Date:	+106

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



#### Demolition Call List & Requirements

ORTLAND!		1 11
Site Address: 35 Toronita	5+ Own	ier: Anthomy terror
Structure Type: 5 ma) Adish	1107 Cont	ractor: Scwl
<b>Utility Approvals</b>	Number	Contact Name/Date
Central Maine Power	1-800-750-4000	Deb Krelter
Northern Utilities	797-8002 ext 6241	Mark Allen
Portland Water District	761-8310	Doughert
Dig Safe	1-888-344-7233	2006 400 1425
After calling Dig Safe, you must wait 72	business hours before	e digging can begin.
DPW/ Traffic Division (L. Cote)	874-8891	Lisa Cote
DPW/ Sealed Drain Permit (C. Merritt)	874-8822	Carol Merritt
Historic Preservation	874-8726	Deb Andrews
Fire Dispatcher	874-8576	Deptudy Smith
Additional Requirements  1) Written Notice to Adjoining Owne	.rc	
2) A Photo of the Structure(s) to be d		
3) Certification from an asbestos abate		
o, a	· · · · · · · · · · · · · · · · · · ·	
DEP – Environmental (Augusta)	287-2651	
U.S. EPA Region 1 – No Phone call requir	ed. Just mail copy of Sta	te notification to:
Demo / Reno Clerk US EPA Region I (SEA) JFK Federal Building Boston, MA 02203		
I have contacted all of the necessary con required documentation.		as indicated above and attached all



#### 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



Date Submitted

#### **Building Demolition Notification Form (BDNF)**

## Important Notice: Maine law requires the filing of this <u>Building Demolition</u> <u>Notification Form</u> 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 requests that **municipalities** have applicants for municipal demolition permits complete this form and fax it to the DEP at 207-287-7826. Municipalities should not issue local demolition permits if the required asbestos inspection or survey has not been performed and identified ACM removed.

Were asbestos-containing materials found? ☐ yes ☐ no	no inspection or survey required (post-1980 2-4 unit)
property address:	building description:
35 Toronita	pre-1981 residential with 2-4 units  post-1980 residential with 2-4 units  other: Sixle Conly
asbestos survey performed by: (name & address)	asbestos inspection performed by: (name of
Abstract Professiones Cotestiones telephone: 773-1276	licensed Asbestos Consultant)  Abatement Professionals (CIP)  telephone: 7)3-1276
property owner: (name & address) U	demolition contractor: (name Laddress)
Anthony Forverv telephone: 7745107	Anthony Frvor telephone: 7562001
demolition start date: ASAO	demolition end date:

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

Notification Submitted by: (please print)

## Dear Neighbor,

My name is Anthony Ferrar. I am notifying you that I now own the property adjoining you at 35 Toronita St.

I plan to build an addition on my property with permission from the City of Portland, yet to be approved, of a two Story Structure—being a garage and two bedrooms.

If you have any questions please contact me anthony Ferrar at 7745107 or write me at 74 Smith St., Poitland, Me 04101

Thank you for your time,

anthony + Bonnie Ferrar

City of Portland, Maine 389 Congress Street, 04101	_		ì	Issue Date		0026001	
Location of Construction:	Owner Name:		Owner Address:		Phone:		
35 TORONITA ST	Anthony Ferra	ır	35 TORONITA	ST		207-774-5107	
Business Name:	Contractor Name	::	Contractor Address	:	Phone		
	Home owner						
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Co	mmercial		Zone:	
Past Use:	Proposed Use:	25 hory	Permit Fee:	Cost of Wor	k: CEO District:	7	
Single Family		24'x32' addition and	\$620.00	\$60,00	00.00 4		
	remove existing allowed by the series has a series of the	i <del>s por</del> eh pertor ik and back imo permit sependi	FIRE DEPT:	Approved Denied	Use Group: 123	Туре: 5	
					TRC ?	2013	
Proposed Project Description:	vioting north / / MOY	e partot	G:		3	10/11/2	
32'x24' addition and remove of existing Mck and bo	act with Cairo o	unit sipuate)	Signature: PEDESTRIAN ACT	IVITIES DIST	Signature:	<u> 10//1/06</u>	
DAILING MAY	o per or ( o )	• ,				Desired	
			Action: Appro	oved App	proved w/Conditions	Denied	
			Signature:		Date:		
Permit Taken By:	Date Applied For:		Zoning	g Approva	al		
dmartin	09/22/2006	Special Zone on Doni	Zona Zona	Historia De	asawation		
1. This permit application do Applicant(s) from meeting Federal Rules.	-	Special Zone or Revi	Wariance Zoning Appeal			Historic Preservation  Not in District or Landma	
Building permits do not in septic or electrical work.	nclude plumbing,	Wetland	☐ Miscell	Miscellaneous		Require Review	
3. Building permits are void within six (6) months of the		Flood Zone panel 7-zone	✓ Conditi	☐ Conditional Use		eview	
False information may inv permit and stop all work	_	Subdivision	Interpretation		Approved		
		Site Plan	Approv	red	Approved v	w/Conditions	
		Maj Minor MM	1 Denied		☐ Denied		
		Date: 10 ) ]  0]	M Date:		Date:		
					(		
		CERTIFICAT	ION				
I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this appliermit for work described	cation as his authorized in the application is i	ed agent and I agree ssued, I certify that	to conform the code off	to all applicable law ficial's authorized rep	s of this presentative	

PHONE

DATE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, M	aine - Buil	ding or Use	Permi	t Application	ı F	ermit No:	Issue Date	::	CBL:		
389 Congress Street, 0	4101 Tel: (	207) 874-8703	, Fax:	(207) 874-871	6 _	06-1399			409 I	0026001	
Location of Construction:		Owner Name:			Owr	ner Address:	·		Phone:		
35 TORONITA ST		Anthony Ferra	ır		35	TORONITA S	ST		207-774	4-5107	
Business Name:		Contractor Name	::		Con	tractor Address:			Phone		
		Home owner									
Lessee/Buyer's Name		Phone:			Perr	nit Type:			·	Zone:	
					Al	terations - Coi	mmercial			R3	
Past Use:	<u> </u>	Proposed Use:		- 	Per	mit Fee:	Cost of Wor	·k:	CEO District:	1	
Single Family		Single Family	24'x32'	addition and		\$620.00	\$60,00	00.00	4		
,		remove existing	e porel	nertof	FIR	E DEPT:	Approved		CTION:		
		existing de	ik and	hour sepante			Denied	Use Gr	oup: [2]	Type: 5	
		perano (ou	no per	mit symme		L	_ Deliled				
		'	,					_	IRC.	2013	
Proposed Project Description	:							-	IRC :		
32'x24' addition and rem	ove existing	porch remove	- piv	-31	Sign	nature:		Signatu	ire: A	10/11/08	
32'x24'addition and rem exis by Mck an	d back po	rih ( dino p	emi)	- supural)	PED	ESTRIAN ACT	IVITIES DIS	TRICT (I	P.A.D.)	7.5/7./	
	1	,			Acti	ion: Appro	ved 🗀 App	nroved w	Conditions	Denied	
					1101	поп гъррго	700 [] 71p	prov <b>eu</b> w	Conditions	Democa	
					Sign	nature:			Date:		
Permit Taken By:	Date Ap	oplied For:				Zoning	Approva	al .			
dmartin	09/22	2/2006									
This permit applicat	ion does not	preclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Pr	eservation	
Applicant(s) from m Federal Rules.		•	☐ St	oreland		Varianc	e		Not in Dis	trict or Landm	
2. Building permits do		olumbing,	Wetland			Miscellaneous			Does Not Require Review		
<ul><li>septic or electrical work.</li><li>Building permits are void if work is not started within six (6) months of the date of issuance.</li></ul>			Flood Zone part 7-zone;			Condition	onal Use		Requires R	Leview	
False information m permit and stop all v	ay invalidate		l '	bdivision		Interpre	tation		Approved		
			☐ Si	te Plan		Approve	ed		Approved	w/Conditions	
			Maj [	Minor MM	'	Denied			Denied		
			- 0K	w (cord, her)	71.				THIN		
			Date:	१०। १०। आ	<u> </u>	Date:		Da	ate:		
I hereby certify that I am to I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to	make this appli r work described	med pro cation a d in the	as his authorized application is is	e pro l age sued	nt and I agree, I certify that	to conform the code off	to all ap licial's a	oplicable law uthorized re	s of this presentative	
SIGNATURE OF APPLICANT				ADDRESS			DATE		PH	IONE	
RESPONSIBLE PERSON IN (	CHARGE OF W	ORK, TITLE	_				DATE		PH	ONE	

307 Congress Bulcot, 0 1101 Ten	1/0/10/4-0/03	Hax:	(207) 874-8710	6 06-1460			409 D0	26001	
Location of Construction:	Owner Name:			Owner Address:			Phone:		
35 TORONITA ST	CLARK STEV	VEN M		35 TORONITA S	T				
Business Name:	Contractor Name	e:		Contractor Address:	Phone				
Lessee/Buyer's Name	Phone:	-		Permit Type: Demolitions				Zone:	
Past Use:	Proposed Use:		J	Permit Fee:	Cost of Wor	k:	CEO District:	<u></u>	
Single Family Home Single Family			Remove	\$30.00	ĺ	50.00	4		
	attached shed home connecte		ck from rear of ermit# 061399	FIRE DEPT:			CTION: coup: R3  DCC 2  ure: In 18	Type: 5B	
D ID : D : U	<u> </u>						DRC 2	03	
<b>Proposed Project Description:</b> Remove attached shed and Deck fro	om rear of home o	onnacta	d w/ permit#	C:turn		C: a.t.	1 1	161	
061399	om rear or nome co	onnecte	u w/ perimi#	Signature: PEDESTRIAN ACT	VITIES DIST	FRICT (	P.A.D.)	11/08	
				Action: Appro			/Conditions	Denied	
				Signature:	_		Date:		
	Applied For:			Zoning	Approva	al			
Idobson 10/	04/2006	- Cma	sial Zana au Darria	an Zoni	ng Appeal		Historic Pres	owestion .	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Review  Shoreland		☐ Variance			Not in District or Landman		
2. Building permits do not include septic or electrical work.	e plumbing,	Wetland		Miscellaneous			Does Not Require Review		
3. Building permits are void if wo within six (6) months of the dat	e of issuance.	∏ Fl	ood Zone	Conditional Use			Requires Rev	iew	
False information may invalida permit and stop all work	te a building	∏ Su	bdivision	Interpret	ation		Approved		
		Si Si	te Plan	Approve	ed		Approved w/0	Conditions	
		Maj [	Minor MM	Denied			Denied		
			Olylob ABN	Date:		D	ate:		
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit to shall have the authority to enter all arouch permit.	to make this appli for work described	med pro cation a d in the	as his authorized application is iss	e proposed work is agent and I agree sued, I certify that	to conform the code off	to all ap ïcial's a	oplicable laws outhorized repre	of this esentative	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

	ty of Portland, Maine	_			06-1460	Issue Date	:	409 D0	26001
	Congress Street, 04101		, Fax:	<u> </u>					<del></del>
	ation of Construction: TORONITA ST	Owner Name: CLARK STEV	/ENIM		Owner Address: 35 TORONITA S'	т		Phone:	
⊢—	iness Name:	Contractor Name			Contractor Address:			Phone	
Less	see/Buyer's Name	Phone:	<u>-</u>	I	Permit Type: Demolitions				Zone:
Past	: Use:	Proposed Use:		<u> </u>	Permit Fee:	Cost of Wor	k: CE	O District:	<del></del>
Single Family Home Single Family attached shed			and Dec	<b>L</b>	\$30.00 \$150.00  FIRE DEPT: Approved INS			4 ON: : ₹3	Туре: 5
							1	XC2	013
Re	posed Project Description: move attached shed and Do 1399	eck from rear of home co	onnecte	•	Signature: PEDESTRIAN ACTIV	VITIES DIST	Signature:	XC2 <u>Im 18</u>	>////a/
					Action: Approve	ed 🗌 App	proved w/Cor	nditions [	Denied
					Signature:		Da	ite:	
	mit Taken By:	Date Applied For:			Zoning	Approva	al		
<u> </u>	obson	10/04/2006	Spe	cial Zone or Review	S Zonin	g Appeal		Historic Pres	ervation
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			☐ Si	te Plan	Approved	i		Approved w/0	Conditions
			Maj [ <b>∂</b> ⊀	Minor MM	Denied			Denied	
				Olylob ABM	Date:		Date:	<i></i>	
I ha juris shal such	reby certify that I am the over been authorized by the odiction. In addition, if a place the authority to entend permit.	owner to make this appli ermit for work described	med pro cation a d in the	as his authorized a application is issu nit at any reasonal	proposed work is agent and I agree to ued, I certify that the	o conform he code off the provi	to all appli icial's auth	cable laws orized reprocode(s) app	of this esentative olicable to
SIG	NATURE OF APPLICANT			ADDRESS		DATE		PHO	٧E
RES	PONSIBLE PERSON IN CHAR	GE OF WORK, TITLE		-	-	DATE		PHO	NE