Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BURNIT

Notes, If Any, Attached	PERMIT	Permit Number: 090687
This is to certify thatDIRSA ANGELA E &	THOMA CHANS Sharles B. N	
has permission to Build additional Bay o	onto exist Garage, ild ma Suite ov Gar	age. Reconfigure the Interior of the existi
AT _20 LEDGEWOOD DR	CB 415	A013001
provided that the person or person	ons, filt for communion according	this permit shall comply with all
of the provisions of the Statutes		of the City of Portland regulating
the construction, maintenance a this department.	nd use a buildings and structures	, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Noti Ition of inspection nust be given and written ermission procured before his building or partiereof is lather or otherwise section. 24 HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED AND SUSUED		
Health Dept.		
Appeal Board JUL 9 2009 Other	-\ \ \/\langle	mas M. Markery 7/9/09 Director - Building & Inspection Services
Department Name	ENALTY FOR REMOVING THIS CAR	• ,
ייטווטווטווערן אַ טוויטן	-MAPELLICON DEMOVIMO INIS CAN	U

roca	tion of Construction:	Owner Name:		Own	er Address:		Phone:	
20	LEDGEWOOD DR		ELA E & THOMAS		LEDGEWOOD DR		207-838-	5814
	ness Name:	Contractor Name			ractor Address:		Phone	
		Charles B. Me	esser Builders	PO	Box 1980 Portland	and 20777258		897
Less	ee/Buyer's Name	Phone:		- 1	it Type:			Zone:
_					ditions - Dwellings			R-3
	Use:	Proposed Use:	TT - D '11	Pern	nit Fee: Cost of V		EO District:	
Sin	gle Family Home		Home - Build onto existing	EIDI		2,000.00 INSPECT	4	J
			master Suite over	, in	ДАрргоче		p: R3	Type: 5B
		, –	nfigure the Interior of	·	Denied			ربِي
		the existing Se	econd Floor.]	TRC 2	2003
-	osed Project Description						~1 ·	7/0/10
		to existing Garage, Build ma Interior of the existing Seco		Signa	ature: ESTRIAN ACTIVITIES I	Signature:		#/9/01
(4	ordeck 11'x141 which	ed to new addition	, upper	Actio		Approved w/Co	,	Denied
		SI (Bemed
				Sign	ature:		Date:	
Pern lm	nit Taken By: d	Date Applied For: 06/30/2009			Zoning Appro	oval		
1.		on does not preclude the	Special Zone or Re	views	Zoning Appeal		Historic Pres	ervation
1.		eeting applicable State and	☐ Shoreland N/A	•	☐ Variance		Not in Distric	ct or Landmark
2.	Building permits do septic or electrical w	not include plumbing, ork.	☐ Wetland		Miscellaneous		Does Not Re	quire Review
3.		void if work is not started s of the date of issuance.	Flood Zone	ı×	Conditional Use		Requires Rev	riew
	False information mapermit and stop all w	ay invalidate a building ork	Subdivision		Interpretation		Approved	
			Site Plan		Approved		Approved w/	Conditions
			Maj ☐ Minor ☐ M	М	Denied		Denied	
			Orwicoditor	7			tu	
	! PERMIT!	SSUED	Otwicoditor Date: 7/6/04 //	<u>n</u>	Date:	Date): 	
	JUL	9 2009						
	1 (
	CITY OF PO	ORTLAND		PION.				
I he			CERTIFICA'		mosed work is authori	zed by the ov	wher of reco	ed and that
I ha	reby certify that I am t we been authorized by	he owner of record of the na the owner to make this appl	amed property, or that ication as his authorize	the prozed ager	nt and I agree to confo	rm to all app	licable laws	of this
I ha juris shal	reby certify that I am to we been authorized by ediction. In addition, it	he owner of record of the na	amed property, or that ication as his authorised in the application is	the prozed ager	nt and I agree to confo I certify that the code	rm to all app official's aut	licable laws thorized repr	of this esentative

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: order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the

	on procedure and additional fees from a "Stop Weelease" will be incurred if the procedure is not fo	
A Pre-co	nstruction Meeting will take place upon receipt o	f your building permit.
X	Footing/Building Location Inspection: Prior to precast piers	pouring concrete or setting
<u>X</u>	Foundation Inspection: Prior to placing ANY be occupiable space	ackfill for below grade
X	Framing/Rough Plumbing/Electrical: Prior to A	Any Insulating or drywalling
X	Final inspection required at completion of work	.
your proje If any of REGARI CERIFIC	the of Occupancy is not required for certain projects. ect requires a Certificate of Occupancy. All projects the inspections do not occur, the project cannot applies of the NOTICE OR CIRCUMSTANCE CATE OF OCCUPANICES MUST BE ISSUED ACE MAY BE OCCUPIED.	s <u>DO</u> require a final inspection. go on to the next phase, ES.
Signature	of Applicant/Designee	7/9/09 Date 7/9/09
Signature	as h. Malla	7/9/09
Signature	of Inspections Official	Date

CBL: 415 A013001 **Building Permit #: 09-0687**

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 Constr	uction: ZO	Ledgewood Drive	
Total Squa	re Footage of Pro		Area USA Square Footage of Lot	Number of Stories
Tax Assess Chart# 415	or's Chart, Block Block# A	& Lot Lot# \3	Applicant *must be owner, Lessee or Buyer Name Tom Hanson Address 20 Ledge wood Or City, State & Zip Felmonth Me, a	ine 838-5814
Lessee/DB	3A (If Applicable)		Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ 122,000 C of O Fee: \$
If vacant, we Proposed S Is property Project description. Contractor! Address: City, State & Who should Mailing add	s name:Ch P.O. Box & Zip_Port I we contact when ress:Sc	ous use? Same ion? A oy to S arles b. 1980 lant M the permit is rea	If yes, please name Screye build master S Messer Blans (Chuck) e. 04104 Teady: Builder Te	Reconfigure 2 Reconfigure 2 Floor Ex Elephone: 752-7482
Please su			outlined on the applicable Checklise automatic denial of your permit.	st. Failure to
ay request ac is form and o	lditional informati	on prior to the is visit the Inspect	full scope of the project, the Planning and Dessuance of a permit. For further information of ions Division on-line at www.portlandmaine.gov , or	r to download copies of
ereby certify of the I have been we of this juris thorized repre	that I am the Owne authorized by the odiction. In addition	r of record of the a wner to make this if a permit for wo the authority to en	named property, or that the owner of record authors application as his/her authorized agent. I agree took described in this application is issued, I certify the name all areas covered by this permit at any reasonable.	o conform to all applicable hat the Code Official's
gnature:	Mala		L. Date: 6-30-09	
	This is not a p	ermit; you may	not commence ANY work until the permi	t is issue

Revised 07-11-08

Applicant: Tom Marjon

7/6/09 Date:

Address: 20 Lugerad Dr.

C-B-L: 415-A-013

CHECK-LIST AGAINST ZONING ORDINANCE

Date - han bilt 1993

Zone Location - R-3

Interior or corner lot -

Proposed UserWork - add on & garage (14' x 34') & build mashrsuite overgozape?

Sougge Disposal -

Servage Disposal -

Lot Street Frontage -

Front Yard - 25 min - 112 suled

Rear Yard - 25 min - 45 suled

Side Yard - 25 bow-14 min - left - 78 sales

Projections -

-1154 - 8815 called

Width of Lot -

Height - 35'max -21's aled

Area per Family - 6 500 40k

Off-street Parking -

Loading Bays -

Site Plan -

Lot Area - 6500 min - 44,750-6

Lot Coverage Impervious Surface - 35% = 15, 174.75\$

10×48=48

1892 4

OK.

20 46

Acet lixin' 154

NIA Shoreland Zoning/Stream Protection -

Flood Plains - sanel 2 - Zone X

Location of Construction: 20 LEDGEWOOD DR Business Name: Lessee/Buyer's Name	Owner Name: DIRSA ANGELA E & Contractor Name: Charles B. Messer Bu		AS C	Owner Address: 20 LEDGEWOOD Contractor Address: PO Boy 1980 Port) DR	Phone: 207-838-5814 Phone
Business Name:	Contractor Name: Charles B. Messer Bu			Contractor Address:	DR	
	Charles B. Messer Bu	ilders				Phone
Lessee/Buyer's Name		ilders		PO Box 1980 Port		
Lessee/Buyer's Name	DI			PO Box 1980 Portland		(207) 772-5897
_	Phone:		Permit Type:			
				Additions - Dwellings		
Proposed Use:			Propose	d Project Description:		
Single Family Home - Build addition Build master Suite over Garage. Rec existing Second Floor. Extend existi (11' x 14').	onfigure the Interior of the	he	Garag	e. Reconfigure the	o existing Garage, E Interior of the existing behind the addition	

Ok to Issue: Note:

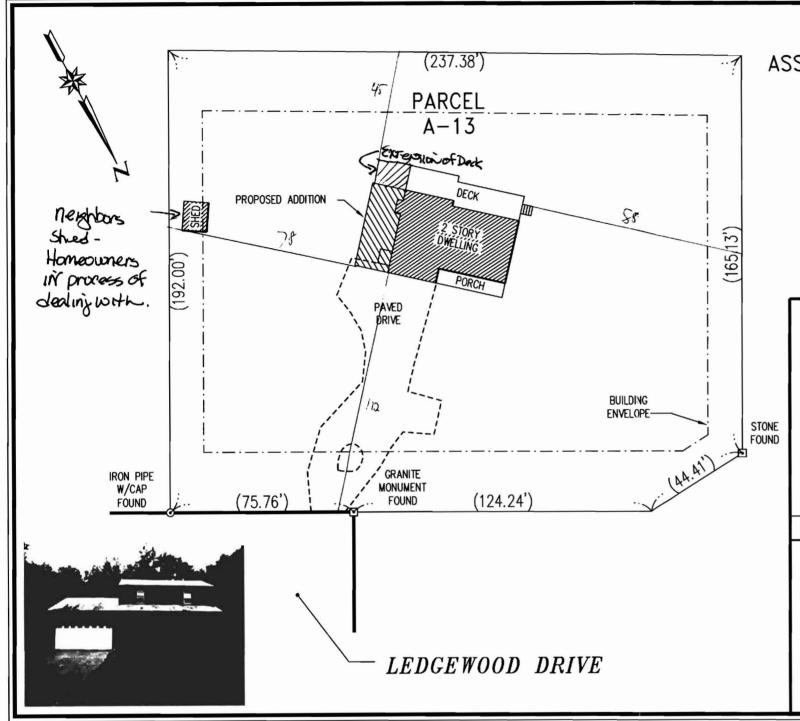
- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions Reviewer: Tom Markley **Approval Date:** 07/09/2009 Ok to Issue: Note:

- 1) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 2) Fastener schedule per the IRC 2003
- 3) The design load spec sheets for any engineered beam(s) / Trusses must be submitted to this office.
- 4) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.
- 5) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approrval prior to work.

Comments:

7/6/2009-amachado: Left vcm for Chuck Messer, contractor. Plot plan shows rear deck also being expanded but the building plans don't. Chuck dropped off a sketch for the addition of the deck (11' x 14').



20 LEDGEWOOD DRIVE, PORTLAND ASSESSOR'S MAP 415 BLOCK A PARCEL 13

Used for zoning

THIS IS NOT A BOUNDARY SURVEY. BOUNDARY LINES ARE APPROXIMATE.

THIS PLAN EXCEPTS CHAPTER 90, PART 2, SECTION 4 THROUGH 8 OF THE MAINE BOARD OF LICENSURE FOR PROFESSIONAL LAND SURVEYORS' RULES.

EXISTING CONDITION PLAN OF LAND

PORTLAND

MAINE

SCALE: 1"=40'

REVISED: 6/25/2009 JUNE 23, 2009

PREPARED FOR:

ANGELA DIRSA AND THOMAS HANSEN 20 LEDGEWOOD DRIVE

FALMOUTH, MAINE 04105

JOB NUMBER:

31521

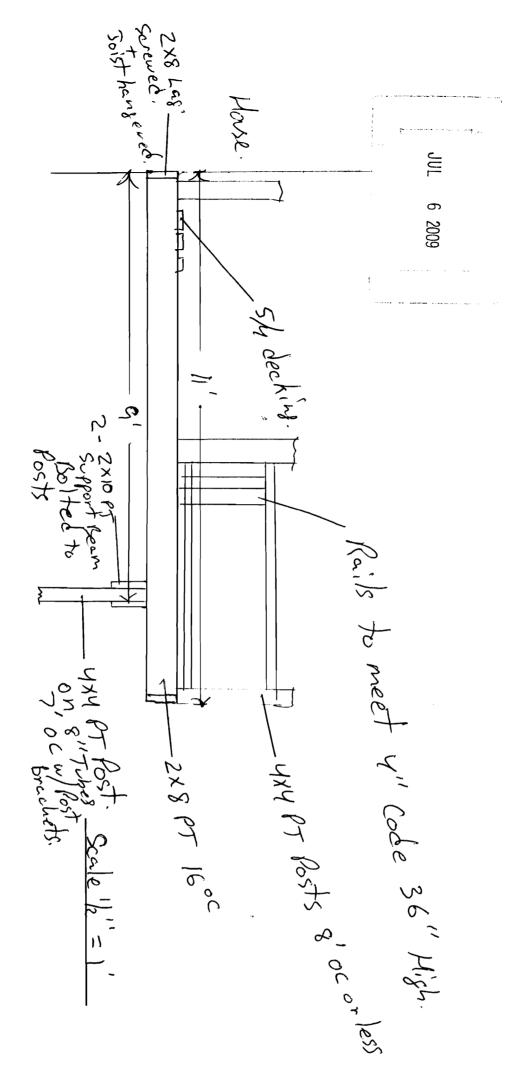
ACAD FILE: 31521.DWG



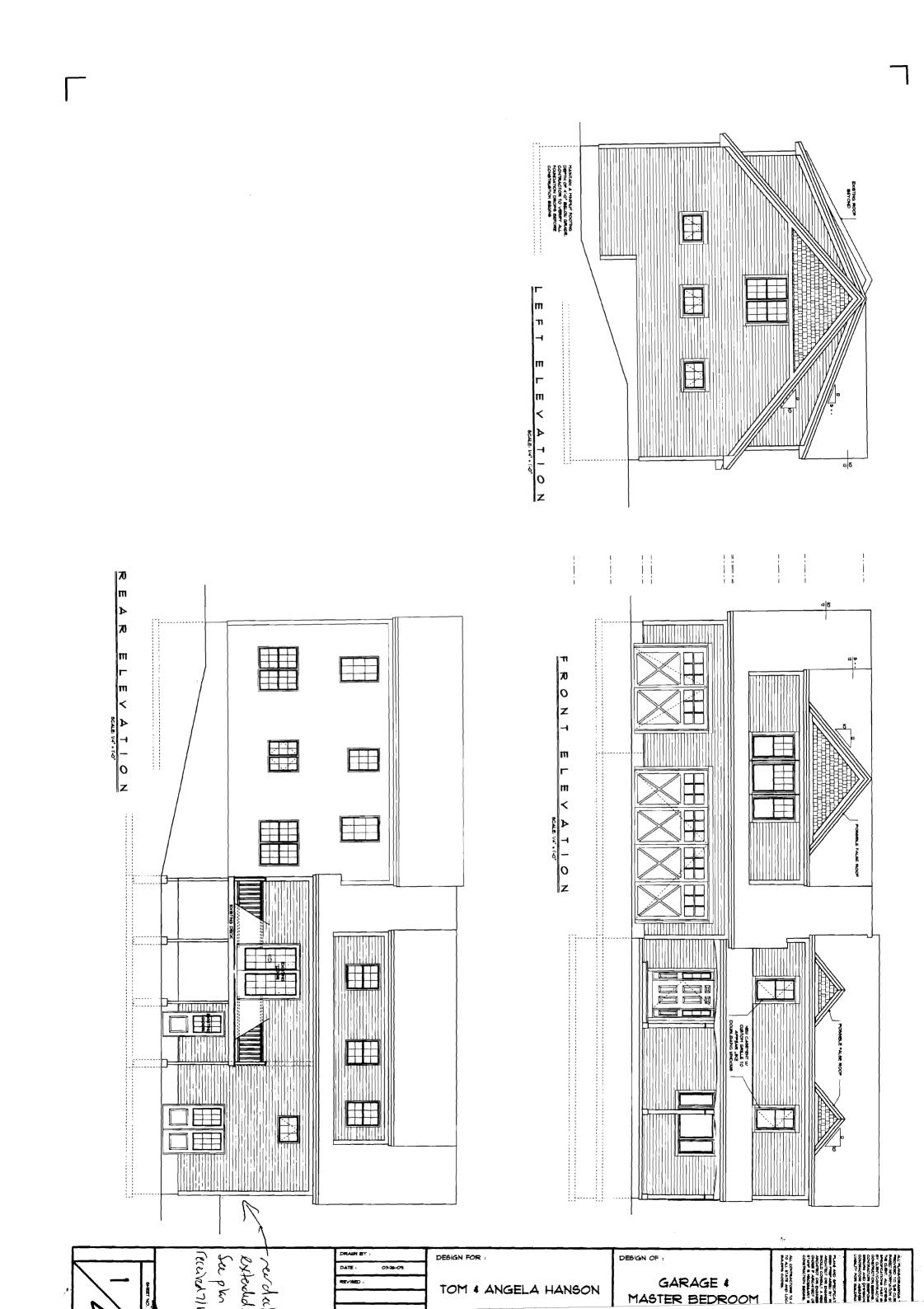
SURVEYING ENGINEERING LAND PLANNING Northeast Civil Solutions

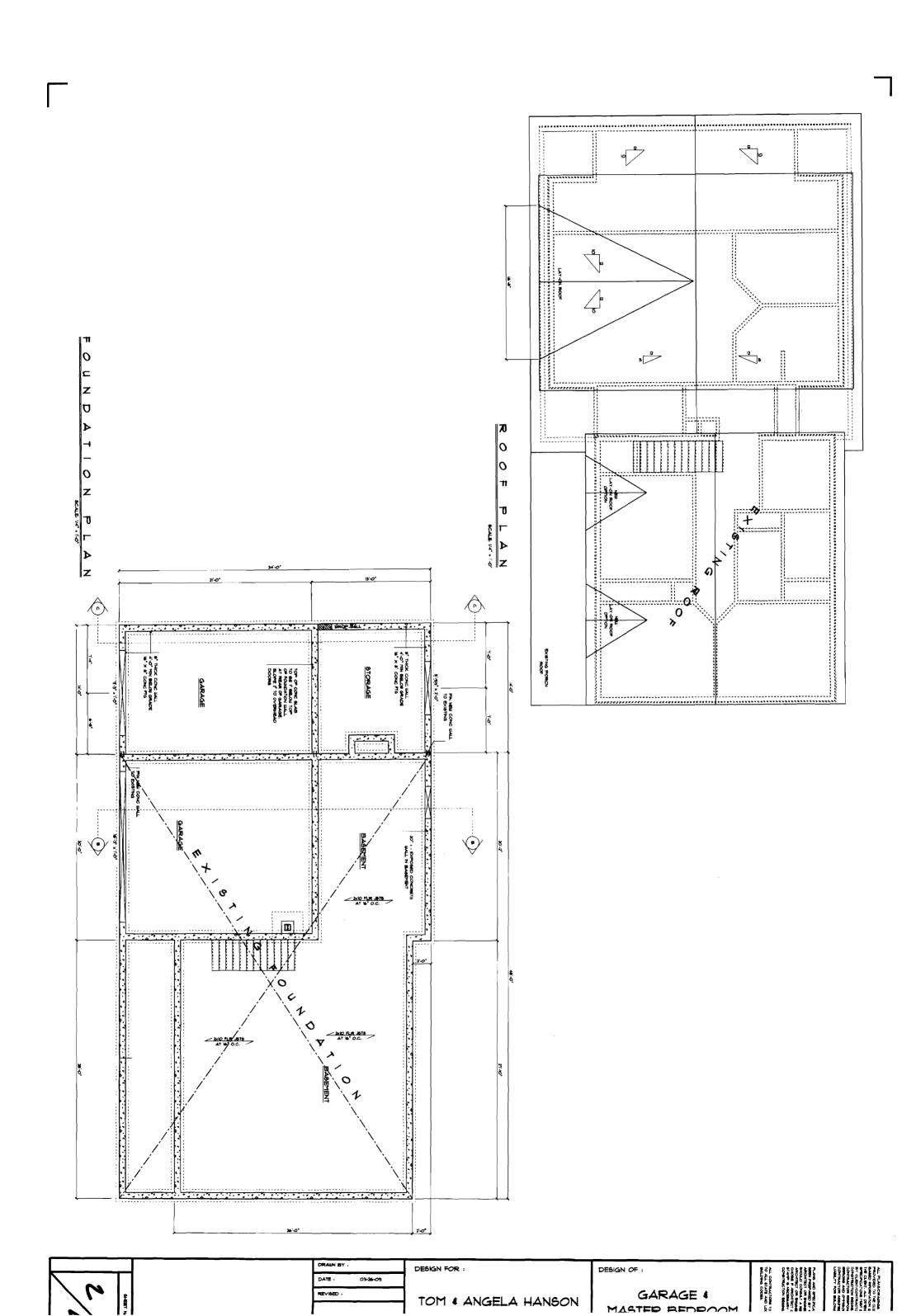


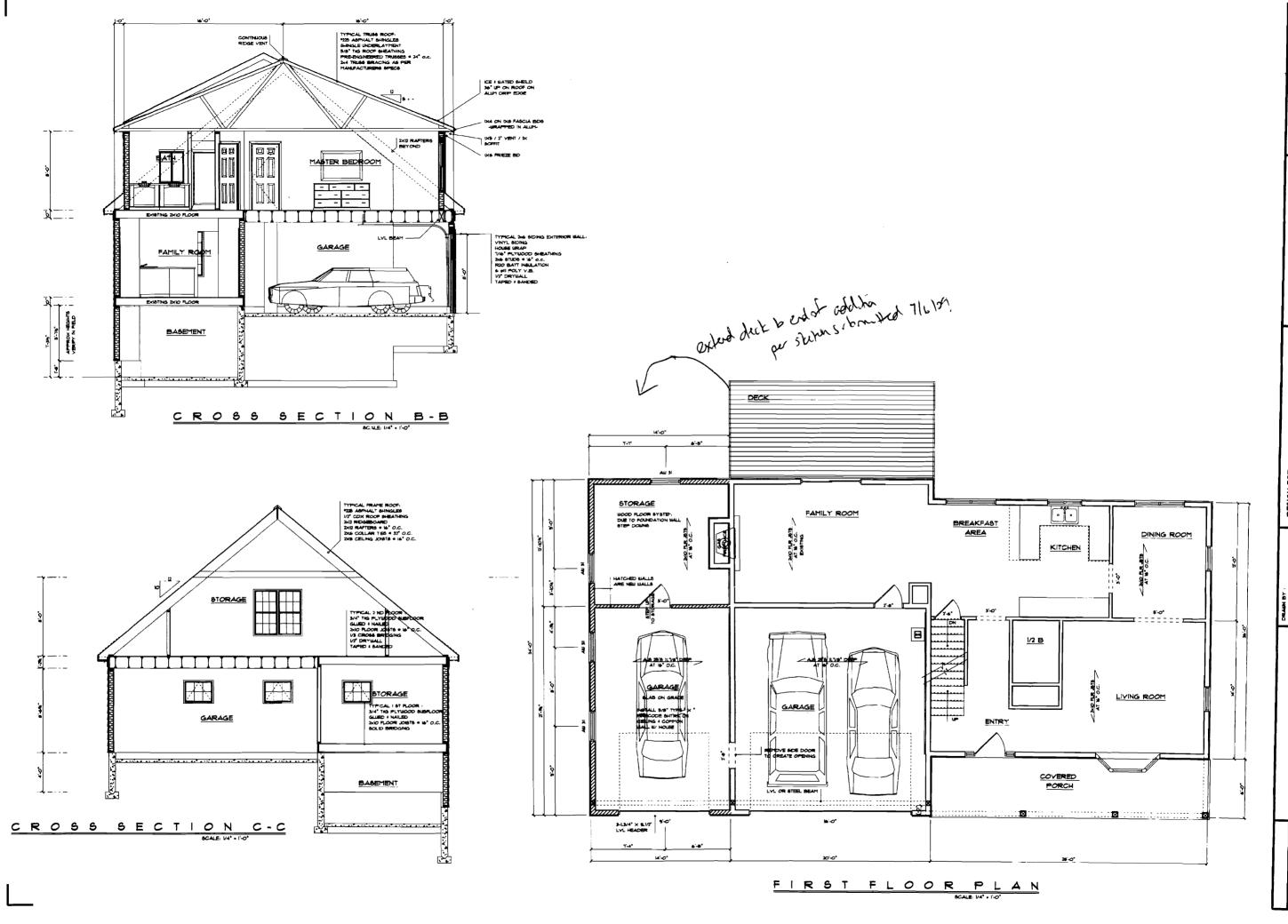
153 US ROUTE 1, SCARBOROUGH, MAINE 04074 tel: (207) 883-1000 or (800) 882-2227 fax: (207) 883-1001 e-mail: info@northeastcivilsolution.com



Tom + Angela Mansen 70 ledgewood dr.



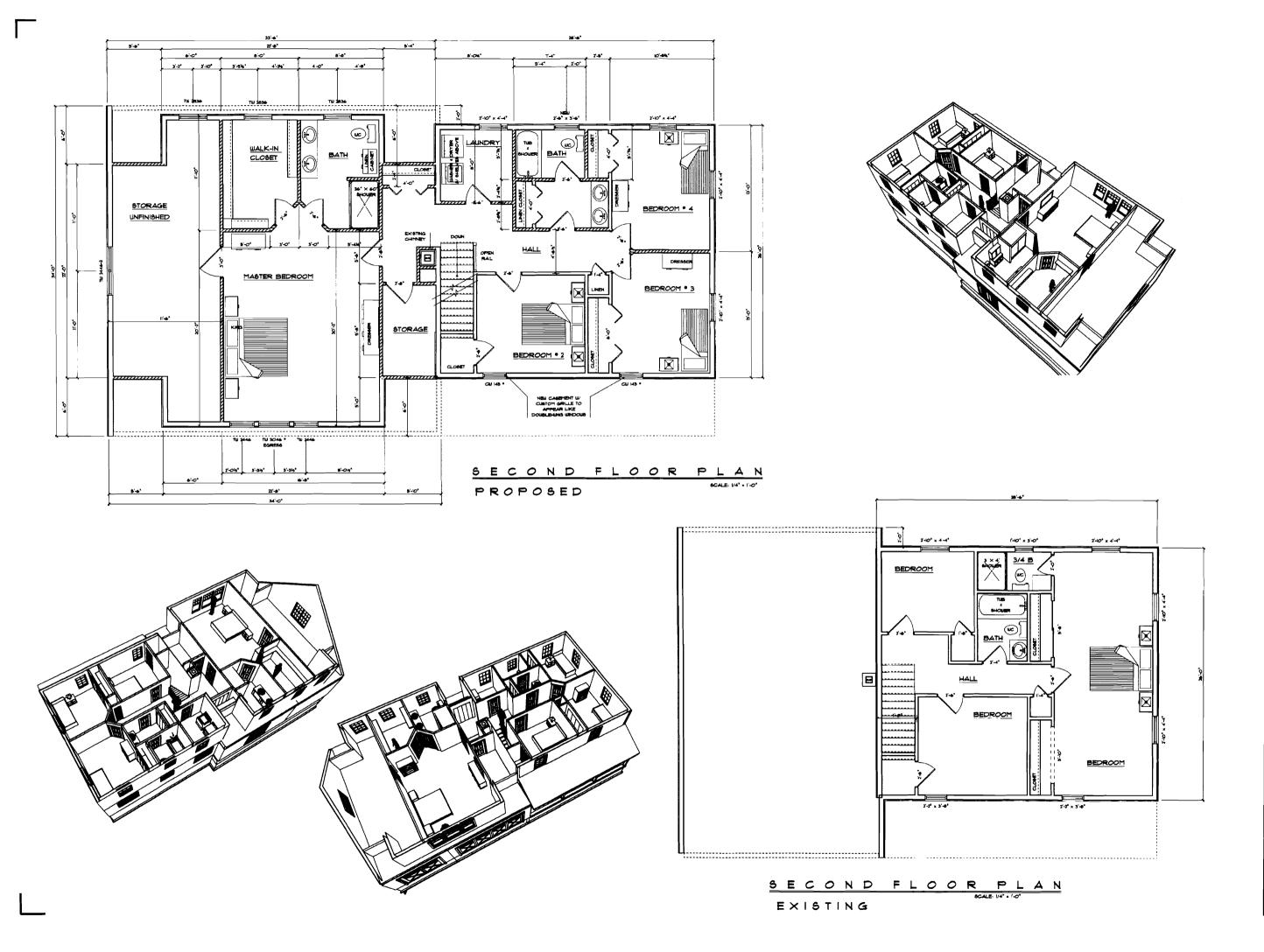




ALL CONTRACTORS TO CO TO ALL STATE AND LOCAL BLEIDING CODES.

GARAGE 4 MASTER BEDROOM

TOM & ANGELA HANSON



ALL PLANS/DRAWINGS TH, PROVIDED TO THE CLIENT BASED INFORMATION GROWN THE CLIENT ALL DIMENSION HAS BEEN CLIENT/CONTRACTOR CONTRACTOR RESPONSES AND OPHISIONS AND OPHISIONS CONTRACTOR ABBUTCHES AND OPHISIONS ALLASS. TY FOR BUILDING C.

PLANS AND SPECIFICATION
BEEN PREPARED BY RESS
ARCHIECT OR BIGNESS.
SHOULD COMMULT A RESS
SHOULD COMMULT OR ENGINEER
CHOISE P ARCHIECT OR S

ALL CONTRACTORS TO ALL STATE AND BUILDING CODES.

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GARAGE 4

TOM & ANGELA HANSON

DATE; 03-36-09 REVISED:

64EET NO.