

City of Portland, N	Maine - Building or Use	Permit Applicatio	n Permit	No:	Issue Date:	CBL:
389 Congress Street,	04101 Tel: (207) 874-870	3, Fax: (207) 874-87	16 0	8-0380		423 A005009
Location of Construction: Owner Name:			Owner Address:			Phone:
9 WELLSTONE unit	BRYCE AN	NE-MARIE	9 WELLSTONE DR			
Business Name:	Contractor Nan	ie:	Contractor	Address:	Phone	
	Maine Prope	Maine Properties, Inc.		368 Scar	2078833753	
Lessee/Buyer's Name	Phone:		Permit Typ Addition	ns - Mult	i Family	Zone:
Past Use:	Proposed Use:		Permit Fe	e:	Cost of Work:	CEO District:
Multi Condo Unit 9 Multi Condo U		Unit 9 - Remove & replace w/new PT ot print	replace w/new PT FIRE DEPT:Approved INS		0 4 PECTION: e Group: 2 3 Type: 51	
Proposed Project Descripti	on: & replace w/new PT deck sar		Signature:	IAN ACTI	VITIES DISTRIC	TBC 2003 nature T (P.A.D.) d w/Conditions Denied
			Signature:			Date:
Permit Taken By:Date Applied For:ldobson04/22/2008		Zoning Approval			<i>i</i>	
1. This permit applic		Special Zone or Revi	iews	Zonii	ng Appeal	Historic Preservation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not in District or Landn
 Building permits do not include plumbing, septic or electrical work. 		U Wetland		Miscellaneous		Does Not Require Revie
within six (6) mon	the void if work is not started the of the date of issuance.	Flood Zone		Conditional Use		Requires Review
False information permit and stop al	may invalidate a building l work	Subdivision		Interpret	ation	Approved
		Site Plan		Approve	d	Approved w/Conditions
	MAIT ISSUED	$\begin{array}{c c} Maj & Minor & MN \\ \hline \\ O & W & C \\ \hline \\ Date: & Q & P \\ \hline \\ Date: & Q & P \\ \hline \\ \end{array}$		Denied		Denied Date:
CITY	OF PORTLAND		-> <i>U</i> f)'			

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	<u>-</u>	DATE	PHONE

•	- Building or Use Permit		Permit No: 08-0380	Date Applied For: 04/22/2008	CBL:	
	Tel: (207) 874-8703, Fax: (2)	07) 874-8716	08-0380	04/22/2008	423 A005009	
Location of Construction:	Owner Name: O		Owner Address:		Phone:	
9 WELLSTONE unit 9	BRYCE ANNE-MARII	BRYCE ANNE-MARIE		9 WELLSTONE DR		
usiness Name: Contractor Name:			Contractor Address:	Phone		
	Maine Properties, Inc.		PO Box 368 Scarborough		(207) 883-3753	
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:		
			Additions - Multi	Family		
•	existing deck & replace w/new	·	ed Project Description: ve existing deck &	replace w/new PT o	deck same foot print	
Multi Condo Unit 9 - Remove deck same foot print		PT Remo	ve existing deck &			
Multi Condo Unit 9 - Remove deck same foot print Dept: Zoning Sta	itus: Approved with Conditions	PT Remo	ve existing deck &	al Approval I	Date: 04/25/2008	
deck same foot print Dept: Zoning Sta Note: developed under the o 1) This permit is being appro		PT Remo	ve existing deck & Marge Schmucka is 72 residential co ations shall require	al Approval I ondos a separate approval	Date: 04/25/2008 Ok to Issue: ✓	

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:

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.

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.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

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

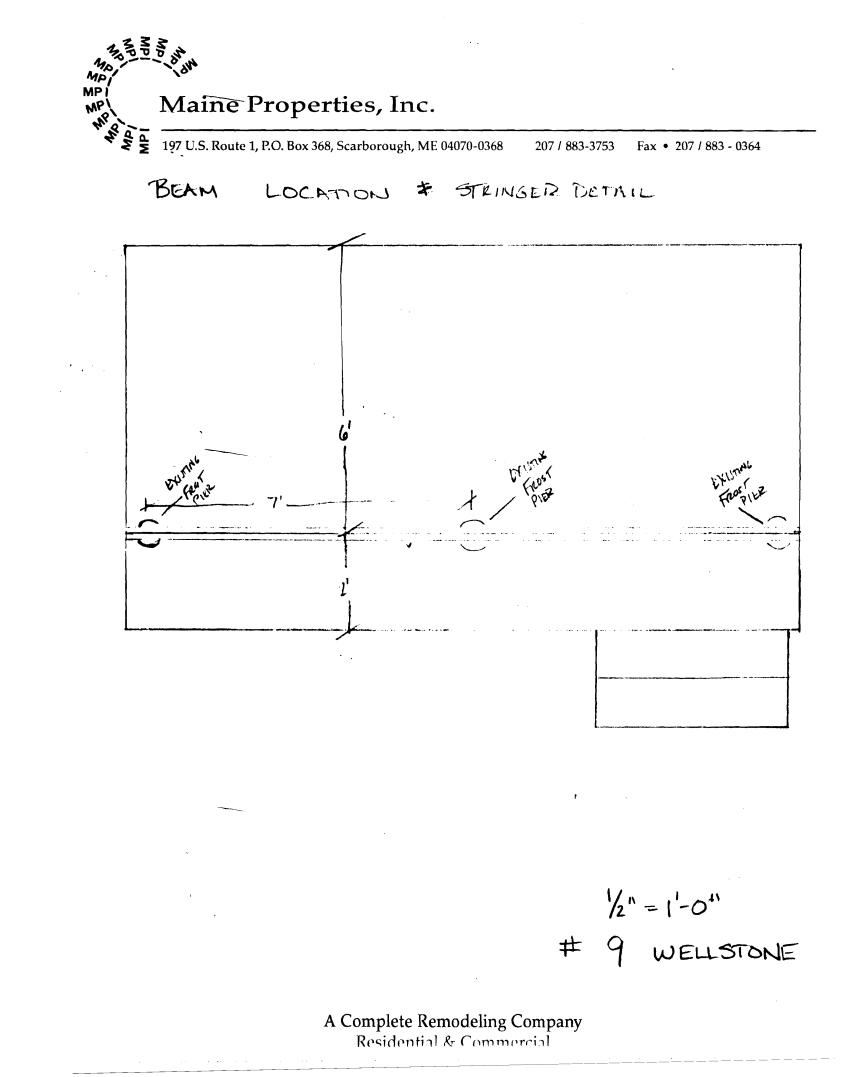
CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

ignature of Applicant/Designee

U

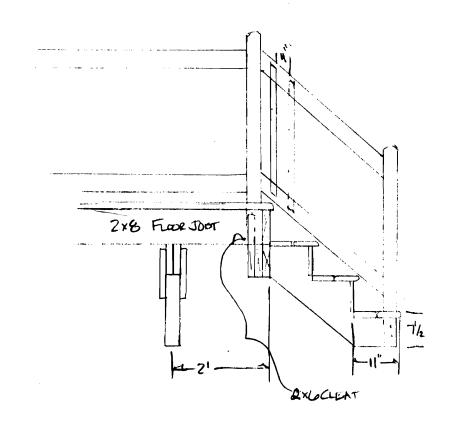
Signature of Inspections Official

Date





207 / 883-3753 Fax • 207 / 883 - 0364



STAIR CROSS SECTION 1/2" = 1'-0"

FOR ALL WELLSTONE DECKS

A Complete Remodeling Company Residential & Commercial

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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 Construction: 9 wellstone Drive						
Total Square Footage of Proposed Structure/Area Square Footage of Lot						
104						
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer* Telephone:					
Chart# Block# Lot# Name Maine Properties						
1/23 A 005007	Wellstone Condominium Ass. 883-3753					
,.	Address Wellstone Drive (Agerty Manager					
	City, State & Zip Portland Me 04103 (19 00105)					
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Cost Of					
	Name Anne-Marie Bryce Work: \$ 1,500					
	Address 9 Wellstone Drive Cof O Fee: \$					
	City, State & Zip Portland, Me 04103 Total Fee: \$ 40					
Current legal use (i.e. single family) Condominium Single family Townhouse						
If vacant, what was the previous use?						
Proposed Specific use: <u>Recreation (Deck)</u> Is property part of a subdivision? <u>Yes Condo</u> If yes, please name <u>Wellstone</u> Drive						
Project description:						
Remove existing deck and replace w/new P.T. Deck same						
Size as original (replacing due to Rott)						
Contractor's name: Maine Properties InC						
Address: PD Box 368 / 197 US R+ 1						
City, State & Zip Scarborough, Me 04070 Telephone: 883-3753						
Who should we contact when the permit is ready: IRANS BLAKE Telephone: 415-3450						
Mailing address: PO Box 368 Scarborowsh Me 04074						

Please submit all of the information outlined on the applicable Checklist. 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 or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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Signature:	ith	Date:	4/22	108

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

1/1 ×1/2 BALLETERS 4" APART 2×6 TOP RAIL HOUSE 2×4 BOTTOM RAIL 4 4×4 Posr - 33/4" SPACE - 54 × 6 P.T. ΥΥΥΥΧΧΥΥΣΧΖ 2×8 16" O.C P.T. Double Outer RIM JOIST Joist Hungers Attach Each 2x4 Cleans for support LAC TO BUILDING FLOOR JOIST FLASHING FROM BUILDING TO BEAM 4×4 Post (length to Vary) TO TOP OF DECK Threaded Rod. S.S. EXISTING FROST POST WELLSTONE DRIVE $\frac{1}{2}$ = 1'-0" SCOPE OF WORK ? DENO EXISTING DECK PROJECT MANAGER . TRAVIS BLAKE CONSTRUCT NEW SAME FOOTPRINT # 415-3450 CONTACT

Fax • 207 / 883 - 0364

207 / 883-3753

