Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PRECTION PERM

Permit Number: 080381

This is to certify that_

ZUB PATRICIA A /Maine I erties, I

has permission to Remove existing deck & rep

-w/new deck s e foot pr

tion a

L 423 A005012 CITY OF PORTLAND

epting this permit shall comply with all

ctures, and of the application on file in

ances of the City of Portland regulating

AT 12 WELLSTONE Unit 12

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

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

fication inspe n must n and w n permi n procu ding or re this t thered ed or o osed-in. JR NOTICE IS REQUIRED.

of buildings and

m or

ine and of the

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

City of Portland, Maine - Bi 389 Congress Street, 04101 Tel	: (207) 874-8703	8, Fax: (207) 874-871	10	08-0381		423 A005012
Location of Construction:	Owner Name:			Address:		Phone:
12 WELLSTONE Unit 12	ZUB PATRICIA A		4 QU	4 QUAKER LN		
Business Name:	Contractor Name		Contractor Addre			Phone
	Maine Propert	ties, Inc.		ox 368 Scarbo	rough	2078833753
Lessee/Buyer's Name	Phone:		Permit			Zone
				itions - Multi I	amily	R.
Past Use:	Proposed Use:		Permit	Fee: C	ost of Work:	CEO District:
Multi Condo Unit 12		Jnit 12- Remove	Į	\$40.00	\$1,500	1 1 1 1 1 1 1
		& replace w/new PT	FIRE			NSPECTION:
	deck same foo	t print		$(I \mid Z)$	1	Use Group: $12-3$ Type:
			1 1		Denied	
light USC: 72 TE	deutral	> U	1 /	1//	Y 1	IBC par
Proposed Project Description:	Speace in	- 40.	し		•	5 41
Remove existing deck & replace w	/new PT deck sam	e foot print	Signatu	ıre.		Signature:
		F		STRIAN ACTIV		
			1	_		
			Action	: Approved	Appro	oved w/Conditions Denied
			Signatu	ure:		Date:
i l	Applied For:			Zoning A	pproval	
Idobson 04/	/22/2008				 	
1. This permit application does no		Special Zone or Revie	ews	Zoning	Appeal	Historic Preservation
Applicant(s) from meeting app Federal Rules.	licable State and	Shoreland		Variance		Not in District or Lar
 Building permits do not includ septic or electrical work. 	e plumbing,	Wetland		Miscellane	ous	Does Not Require Re
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.		Flood Zone		Conditiona	ıl Use	Requires Review
		Subdivision		Interpretati	on	Approved
		Site Plan		Approved		Approved w/Condition
		Maj ☐ Minor ☐ MM	ان ⊏1	Denied		Denied
PERMIT ISSU	ヒリー		\downarrow	$\overline{20}$		\perp
		Jak WyhCa	nary	Date:		Date:
		21	7/1	A		12
1.00) 1/6	-5/0	8		
			,			
CITY OF PORTI	AND 1					
L VIII VI I VIII						
		CERTIFICATI	ION			
						u the owner of record and
hereby certify that I am the owner	of record of the na	med property, or that t	he prop	osed work is a	uthorized b	y the owner of record and
hereby certify that I am the owner have been authorized by the owner urisdiction. In addition, if a permit	r to make this appl for work describe	ication as his authorize d in the application is i	d agent ssued, I	and I agree to certify that th	conform to e code offic	all applicable laws of this ial's authorized representa
have been authorized by the owner urisdiction. In addition, if a permit hall have the authority to enter all a	r to make this appl for work describe	ication as his authorize d in the application is i	d agent ssued, I	and I agree to certify that th	conform to e code offic	all applicable laws of this ial's authorized representa
have been authorized by the owner irisdiction. In addition, if a permit hall have the authority to enter all a	r to make this appl for work describe	ication as his authorize d in the application is i	d agent ssued, I	and I agree to certify that th	conform to e code offic	all applicable laws of this ial's authorized representa
have been authorized by the owner urisdiction. In addition, if a permit	r to make this appl for work describe	ication as his authorize d in the application is i	ed agent issued, I mable ho	and I agree to certify that th	conform to e code offic	all applicable laws of this ial's authorized representa
have been authorized by the owner urisdiction. In addition, if a permit hall have the authority to enter all auch permit.	r to make this appl for work describe	ication as his authorize d in the application is i uch permit at any reaso	ed agent issued, I mable ho	and I agree to certify that th	conform to e code offic the provision	all applicable laws of this ial's authorized representa on of the code(s) applicab

City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No:	Date Applied For:	CBL:
08-0381	04/22/2008	423 A005012

	Owner Name:		Owner Address:	Phone:
12 WELLSTONE Unit 12	ZUB PATRICIA A		4 QUAKER LN	
Business Name:	Contractor Name:		Contractor Address:	Phone
	Maine Properties, Inc.		PO Box 368 Scarborougl	h (207) 883-3753
Lessee/Buyer's Name	Phone:		Permit Type:	•
			Additions - Multi Family	y
Proposed Use:		Propos	ed Project Description:	
deck same foot print		l		
Dept: Zoning Sta	tus: Approved with Condition	ns Reviewer	: Marge Schmuckal	Approval Date: 04/25/2008
•	tus: Approved with Condition		_	
Note: R-5 using the 1984 PI 1) This permit is being appro	RUD rules - Legal use for entire	e property is 72 itted. Any devi	residential dwelling units ations shall require a separ	Ok to Issue:
Note: R-5 using the 1984 PI 1) This permit is being appro work. It is understood tha	RUD rules - Legal use for entire ved on the basis of plans submi	e property is 72 itted. Any devi be increase dur	residential dwelling units ations shall require a separ	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.

Order IX	ixelease will be mearled if the procedure is not long w	ed as stated below.
A Pre-co	construction Meeting will take place upon receipt of yo	ur building permit.
X	_ Footing/Building Location Inspection: Prior to pour precast piers	ring concrete or setting
X	_ Framing/Rough Plumbing/Electrical: Prior to Any	Insulating or drywalling
X	_ Final inspection required at completion of work.	
your proje	ate of Occupancy is not required for certain projects. You oject requires a Certificate of Occupancy. All projects <u>DC</u> of the inspections do not occur, the project cannot go on RDLESS OF THE NOTICE OR CIRCUMSTANCES.	require a final inspection.
	ICATE OF OCCUPANICES MUST BE ISSUED AND	PAID FOR, BEFORE THE
SPACE	MAY BE OCCUPIED.	5/8/8
Signature	re of Applicant/Designee De	ate $5\sqrt{80}$
Signature	re of Inspections Official Da	ate

Building Permit #: 08-0381

CBL: 423 A005012

MPI Mai

Maine Properties, Inc.

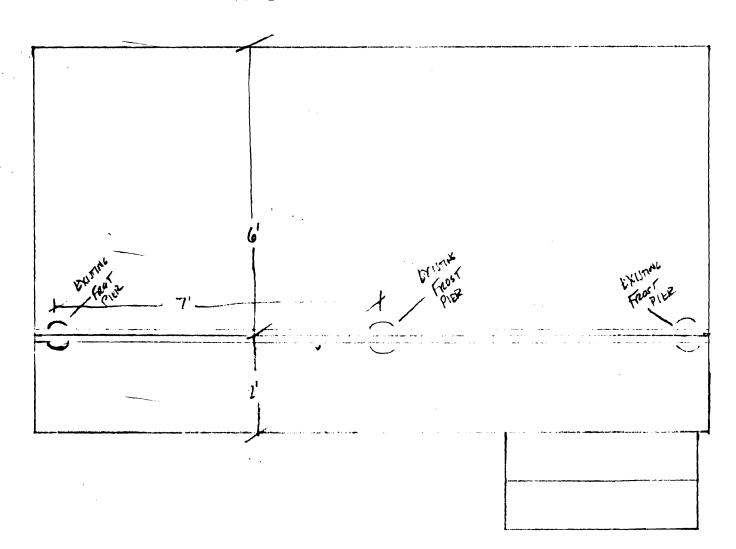
197 U.S. Route 1, P.O. Box 368, Scarborough, ME 04070-0368

207 / 883-3753

Fax • 207 / 883 - 0364

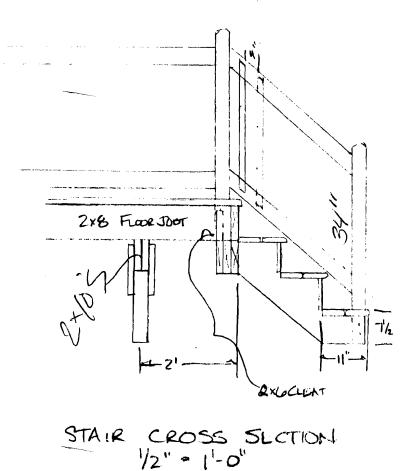
BEAM

LOCATION & STRINGER DETRIL



1/2" = 1'-0" # 12 WELLSTONE

A Complete Remodeling Company Residential & Commercial



FOR ALL WELLSTONE DECKS

A Complete Remodeling Company Residential & Commercial

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.

<u>·</u>					
Location/Address of Construction: 12 wellstone Drive					
Total Square Footage of Proposed Structure/Area Square Footage of Lot					
	D4				
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer*	Telephone:			
Chart# Block# Lot#	Name Maine Properties 40	Pete Garrett			
156 D 011001	Name Maine Properties Clo Wellstone Condominium He	5. 883-3753			
107	Address Wellstone Drive	(Agerty Manager			
	City, State & Zip Portland, Me 04103	S (Tight 19 To will so			
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of			
	Name Patty Zub	Work: \$ 1,500			
	Address H Quaker Lane	C of O Fee: \$			
	City, State & Zip Portland Me	Total Fee: \$ <u>40</u>			
	04103	10tai ree. \$			
Current legal use (i.e. single family) Condo	minium Single family Tow	nhouse			
If vacant, what was the previous use?					
Proposed Specific use: Recreation	Deck)				
Is property part of a subdivision? Yes Condo If yes, please name wellstone Drue					
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 Scarboroyah	Me 04070 Tel	ephone: <u>883-3753</u>			
Who should we contact when the permit is ready: TRAYS BURKE Telephone: 415-3450					
Mailing address: PO Box 368 Scarborough Me 04074					
Please submit all of the information outlined on the applicable Checklist. Failure to					

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 www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

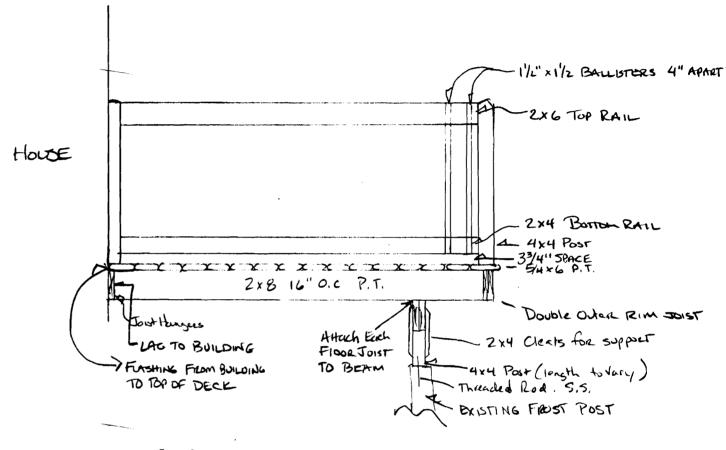
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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. A Sulle	Date: 4/22/08	

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

197 U.S. Route 1, P.O. Box 368, Scarborough, ME 04070-0368

207 / 883-3753 Fax • 207 / 883 - 0364



WELLSTONE DRIVE 1'-0"

PROJECT MANAGER - TRAVIS BLAKE CONTACT # 415-3450 SCOPE OF WORK:

DEMO EXISTING DECK

CONSTRUCT NEW

SAME FOOTPRINT

