

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

Permit Number: 021401

This is to certify that Penobscot Bay Medical/n/a
has permission to Build 14' x 20' Shed
AT 331 Veranda St

PERMIT DENIED

434 C001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances 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.

Notification of inspection must be given and work in progress must be reported before this building or part thereof is occupied or otherwise used-in. HOUR NOTIFICATION REQUIRED.

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

PERMIT DENIED

PERMIT DENIED

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

| | | |
|-----------------------|-------------|---------------------|
| Permit No: 02-1401 | Issue Date: | CBL: 434 C001001 |
|-----------------------|-------------|---------------------|

PERMIT
DENIED

| | | | |
|--|---|---|--|
| Location of Construction: 331 Veranda St | Owner Name: Penobscot Bay Medical | Owner Address: Po Box 9746 | Phone: 207-791-3222 |
| Business Name: n/a | Contractor Name: n/a | Contractor Address: n/a Portland | Phone: |
| Lessee/Buyer's Name: n/a | Phone: n/a | Permit Type: Additions - Commercial | Zone: R-5 |
| Past Use: Martins Point Health Care | Proposed Use: Martins Point Health Care / Build 14' x 20' Shed 200* | Permit Fee: \$65.00 | Cost of Work: \$5,744.00 |
| Proposed Project Description: Build 14' x 20' Shed | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: Type: |
| | | Signature: | Signature: |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | | | |
| | | Signature: | Date: |

| | | | | |
|--|---|---|---|--|
| Permit Taken By: gg | Date Applied For: 12/24/2002 | Zoning Approval | | |
| 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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.. | Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: | Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: | Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: | |

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 | | DATE | PHONE |

All Purpose Building Permit Application

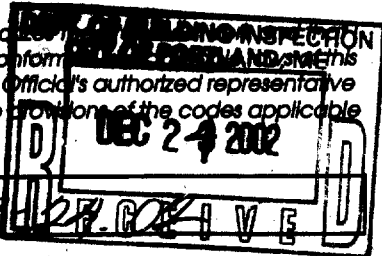
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

| | | |
|--|---|---|
| Location/Address of Construction: <u>331 Veranda St</u> | | |
| Total Square Footage of Proposed Structure <u>280</u> | Square Footage of Lot | |
| Tax Assessor's Chart, Block & Lot Chart# <u>434</u> Block# <u>C</u> Lot# <u>001</u> | Owner: <u>Martin's Point Health Care</u> | Telephone: <u>791-3223</u> |
| Lessee/Buyer's Name (if Applicable) | Applicant name, address & telephone: <u>Eugene M Gillies</u> <u>Martin's Point Health Care</u> <u>791-3723</u> | Cost Of Work: \$ <u>5744</u> Fee: \$ |
| Current use: <u>Storage shed</u> | | |
| If the location is currently vacant, what was prior use: <u>14x20 shed</u> | | |
| Approximately how long has it been vacant: _____ | | |
| Proposed use: _____ | | |
| Project description: _____ | | |
| Contractor's name, address & telephone: | | |
| Who should we contact when the permit is ready: <u>Eugene M Gillies</u> | | |
| Mailing address: <u>331 Veranda St.</u> <u>Portland Me 04103</u> | | |
| We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: | | |

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws and ordinances within 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 of applicant: <u>Eugene M Gillies</u> | Date: <u>12/24/2012</u> |
|---|-------------------------|



This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

Zoning Division
Marge Schmuckal
Zoning Administrator

Department of Planning & Development
Lee Urban, Director



CITY OF PORTLAND

January 9, 2003

Eugene M. Gillies
C/o Martin's Point Health Care
331 Veranda Street
Portland, ME 04103

RE: 331 Veranda Street – 434-C-001 – R-5 Zone – Shoreland Overlay Zone

Dear Mr. Gillies,

I am in receipt of your permit application to erect a 14' x 20' shed at 331 Veranda Street. The location in which you are proposing your shed is within a Shoreland Overlay Zone. This Zone does not allow any structure within 75' of the high water mark. Your plans sketched in a figure of 70 feet from the waters edge. That location is in violation of the regulations. This office requires a stamped site plan survey showing exactly where this new structure is being placed in regards to the high water mark. This project also requires a site plan review application thru the Planning Division. However, you may be able to obtain a site plan exemption instead. Before that could be determined, both our divisions require a stamped site plan survey to show actual setbacks. Both offices have the forms for each type of application.

Your permit is on hold until this office receives all the necessary information so that compliance with the City Ordinances can be determined.

If you have any questions, please do not hesitate to call.

Sincerely,

A handwritten signature in black ink that reads "Marge Schmuckal".

Marge Schmuckal
Zoning Administrator

CC: Sarah Hopkins, Planning Division
File

SHED HAPPENS, INC.

"We're here for all of your lawn and garden structures"

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- 14' X 20' Regular Style
- 2 Windows
- 1 4' Double Door
- 2 Vents
- 25 Year Shingles
- 3/4" CDX Plywood on deck
- 7/16" OSB for roof sheathing
- Kiln dried lumber
- 6 cement blocks
- 2"X4"X88" Walls

Price-\$5470.50 + tax

2 X8 floor jo.

3/4" plywood

t.g. Siding (pine)

4 4x4 pt
set on blocks

- All sheds are set 4" X 4"
- Play Houses set on 2" X 4"
- Delivery is considered to be to driveway only.
- As long as property owner assumes responsibility, we will place your shed where you want it.
- Built on sight, in some cases may be an extra charge. If we have to move rock, rubbish or any other items to have a safe work area we have to charge a minimum of \$25.00
- We are Maine's only full service Shed and Gazebo manufacturer and distributor. Our styles or custom built to your favorite style shed or screen house design.
- Other services available: concrete slab, stone base, excavating your site, stump and rock removal.
- Property owner is fully responsible for all permits and setbacks from property lines.
- Materials are subject to change without notice at manufacturer's discretion.
- All credit card transactions must be done at our business location. It is your choice to either pay in full at the time of ordering or pay in full prior to setting up a delivery time or be charged an additional 3% fee for on site charges.
- All our structures are ordered to your specifications so we shall charge a 20% restocking fee on any canceled orders after construction has begun.

Limited Warranty

Shed Happens, Inc. warrants your building to the original owner as long as it remains in its original location against defects in workmanship and materials for ten years, as long as the shed is used for the purpose for which it was originally constructed. Our products are created for personal, family and residential use only. The structures are not designed for commercial applications, except by a written agreement with our customers.

In the event that sheds are constructed to our customer's specifications, our customer will assume any risk associated with those specifications. Shed Happens, Inc. makes no warranty express or implied with respect to customer's designs and specification, except that products will be free from defects in workmanship and materials as indicated previously. We make no warranties, express or implied, with respect to doors and windows that are used in our sheds.

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Shed Happens, Inc.
 Route 35
 Standish, Maine 04084
 (207) 892-3636
 Fax (207) 892-3622
 Email: info@shedhappensinc.com

SHED HAPPENS, INC.

1042 CHADBOURNE ROAD
 STANDISH, MAINE 04084
 (207) 892-3636

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|------------|---|---------------|----------|------------------|---------|
| PHONE: DAY | 831-2602 | DATE: | 12/13/02 | SOLD BY: | |
| EVENING | | | | | |
| NAME: | MARTINS PAINT HEALTH CARE | | | | |
| ADDRESS: | 331 VELANDA ST. | | | | |
| CITY: | PORTLAND | STATE: | ME | ZIP CODE: | 04103 |
| CASH | VISA | MASTERCARD | DISCOVER | AMERICAN EXPRESS | CHECK # |
| Size | Roof | Shingle Color | | Amount | |
| 14x20 | Gambrel Gable | Black | White | | |
| | | Brown | Tan | | |
| Quantity | | | | | |
| | Additional Single Door 30" | | | | |
| | Additional 4', 5', 6' Double Door | | | | |
| | Additional Single Hung Window w/ Screen | | | | |
| | Pressure Treated Ramps 4', 5' 6' | | | | |
| | 3' x 8', 3' x 10', 3' x 12' Lofts | | | | |
| | Additional Blocking to Level Shed | | | | |
| | Extended Overhang Rakes | | | | |
| | Extended Overhang Eaves | | | | |
| | Porch Overhang 2', 3', 4' | | | | |
| | 88" STUDS | | | | |
| NOTES: | | | | Sub Total | 5470.50 |
| | | | | Tax @ 5% | 273.52 |
| | | | | Total | 5744.02 |
| | | | | Deposit Paid | |
| | | | | Balance Due | 5744.02 |
| | | | | | |
| Signature: | | | | | |

Thank You!