

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
 Application And
 Notes, If Any,
 Attached

BUILDING INSPECTION

PERMIT

Permit Number: 1086426

PERMIT ISSUED

APR 29 2008

CITY OF PORTLAND

This is to certify that FORZESE MARYhas permission to Change existing Breezway to throomAT 23 SAMUEL RD

437 D007001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission procedure is complete this building or part thereof is closed or otherwise closed-in. 4 HOUR NOTICE IS 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. _____

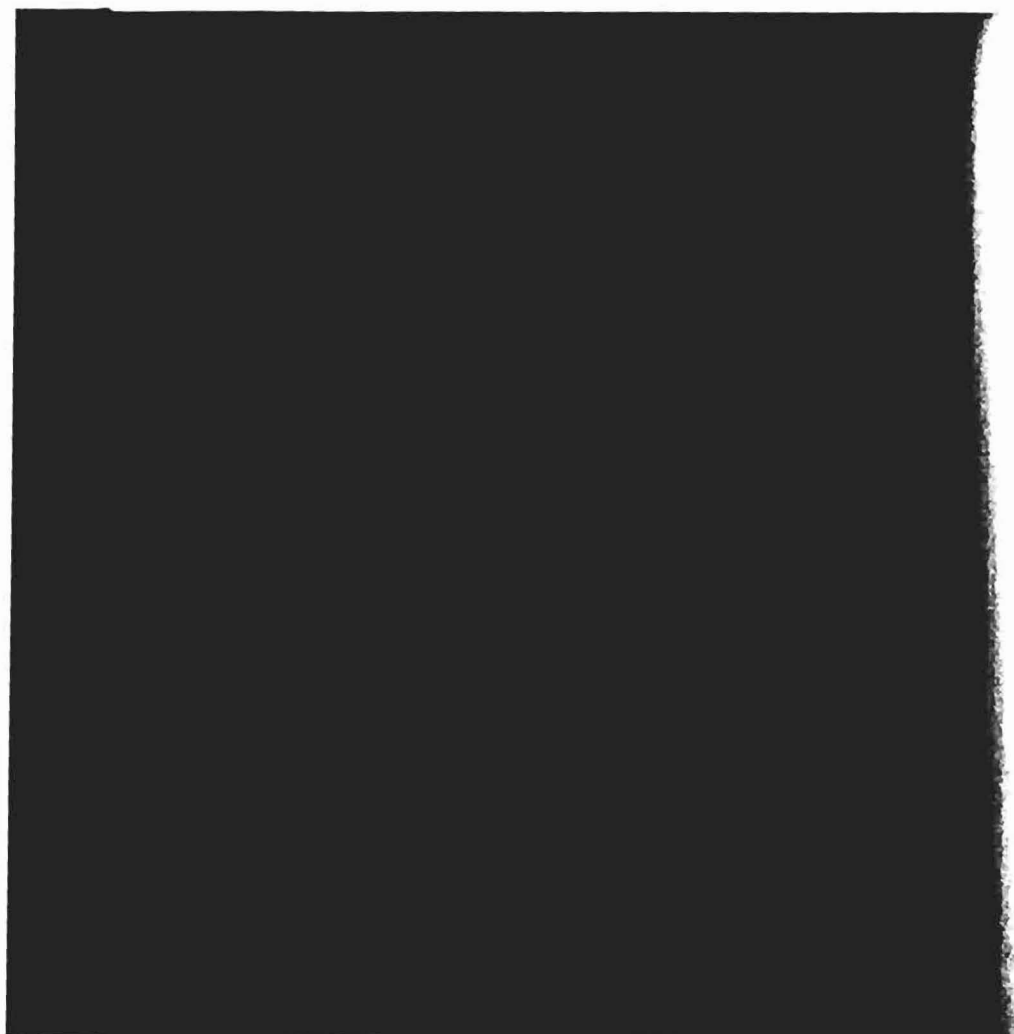
Appeal Board _____

Other _____

Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
The undersigned hereby applies for a permit to make electrical installations
in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
National Electrical Code and the following specifications:

Date 4-30-08
Permit # 2008 4281
CBL# 437 D 007

LOCATION: 23 Samuel Rd METER MAKE & # _____
CMP ACCOUNT # _____ OWNER Mary Fozzese
TENANT _____ PHONE # _____

					TOTAL EACH FEE	
OUTLETS	Receptacles	Switches	Smoke Detector		.20	5
FIXTURES	Incandescent	Fluorescent	Strips		.20	2
SERVICES	Overhead	Underground	TTL AMPS <800		15.00	
	Overhead	Underground	>800		25.00	
Temporary Service	Overhead	Underground	TTL AMPS		25.00	
					25.00	
METERS	(number of)				1.00	
MOTORS	(number of)				2.00	
RESID/COM	Electric units				1.00	
HEATING	oil/gas units	Interior	Exterior		5.00	
APPLIANCES	Ranges	Cook Tops	Wall Ovens		2.00	
	Insta-Hot	Water heaters	Fans		2.00	
	Dryers	Disposals	Dishwasher		2.00	2
	Compactors	Spa	Washing Machine		2.00	
	Others (denote)				2.00	
MISC. (number of)	Air Cond/win				3.00	
	Air Cond/cent		Pools		10.00	
	HVAC	EMS	Thermostat		5.00	
	Signs				10.00	
	Alarms/res				5.00	
	Alarms/com				15.00	
	Heavy Duty(CRKT)				2.00	
	Circus/Carnv				25.00	
	Alterations				5.00	
	Fire Repairs				15.00	
	E Lights				1.00	
	E Generators				20.00	
PANELS	Service	Remote	Main		4.00	
TRANSFORMER	0-25 Kva				5.00	
	25-200 Kva				8.00	
	Over 200 Kva				10.00	
					TOTAL AMOUNT DUE	
					MINIMUM FEE/COMMERCIAL 55.00	MINIMUM FEE 45.00

CONTRACTORS NAME DICK McPaffie MASTER LIC. # 7764
ADDRESS PO BOX 10842 PORT 04104 LIMITED LIC. # _____
TELEPHONE 671-9142

SIGNATURE OF CONTRACTOR Dick McPaffie

White Copy - Office • Yellow Copy - Applicant

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.

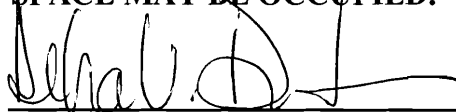
A Pre-construction Meeting will take place upon receipt of your building permit.

 X 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 DO 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.



Signature of Applicant/Designee

4.29.2008

Date



Signature of Inspections Official

4/29/08

Date

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0426	Date Applied For: 04/28/2008	CBL: 437 D007001
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Location of Construction: 23 SAMUEL RD	Owner Name: FORZESE MARY	Owner Address: 23 SAMUEL RD	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family Home - Change existing Breezway to bathroom	Proposed Project Description: Change existing Breezway to bathroom
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/29/2008

Note: **Ok to Issue:**

- 1) The original permit for the structure was issued under permit # 04-1351. A setback inspection was performed on 11-16-04 by J. Reed.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/29/2008

Note: **Ok to Issue:**

- 1) The original structure did not have a close-in inspection performed under permit # 04-1351.
- 2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.



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: <u>23 Samuel Rd. Portland</u>		
Total Square Footage of Proposed Structure/Area		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>437</u> <u>D</u> <u>7</u>	Applicant * must be owner, Lessee or Buyer* Name Address City, State & Zip	Telephone:
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Estate of Mary Forzese</u> Address <u>same</u> City, State & Zip	Cost Of Work: \$ <u>1000</u> C of O Fee: \$ _____ Total Fee: \$ <u>30</u>
Current legal use (i.e. single family) <u>single family</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>Change of use from Breezeway to Bathroom</u>		
Contractor's name: _____ Address: _____ City, State & Zip _____ Telephone: _____ Who should we contact when the permit is ready: _____ Telephone: _____ Mailing address: <u>Susan Deschambault · 791-5534 © 232-7001</u>		

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: Susan Deschambault Date: 4/28/08

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

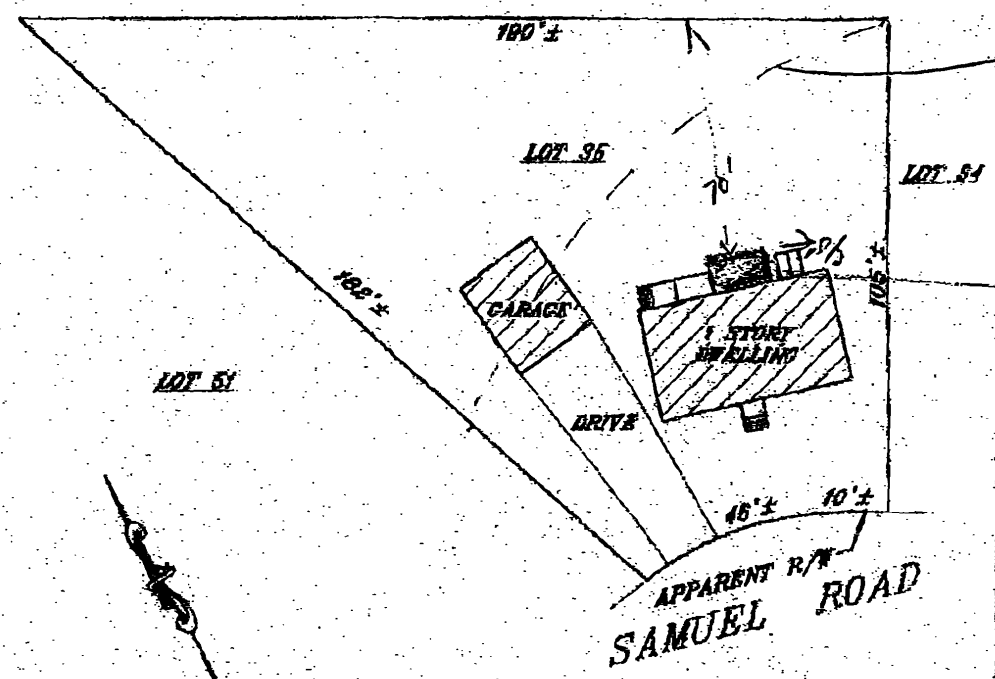
7-21-04

R3 Shoreland
Rear 25' Req 50' scaled
Side 8' Req 25' scaled

ADDRESS: 81 SAMUEL ROAD
PORTLAND, MAINE

SCALE: 1" = 30'

not accurate

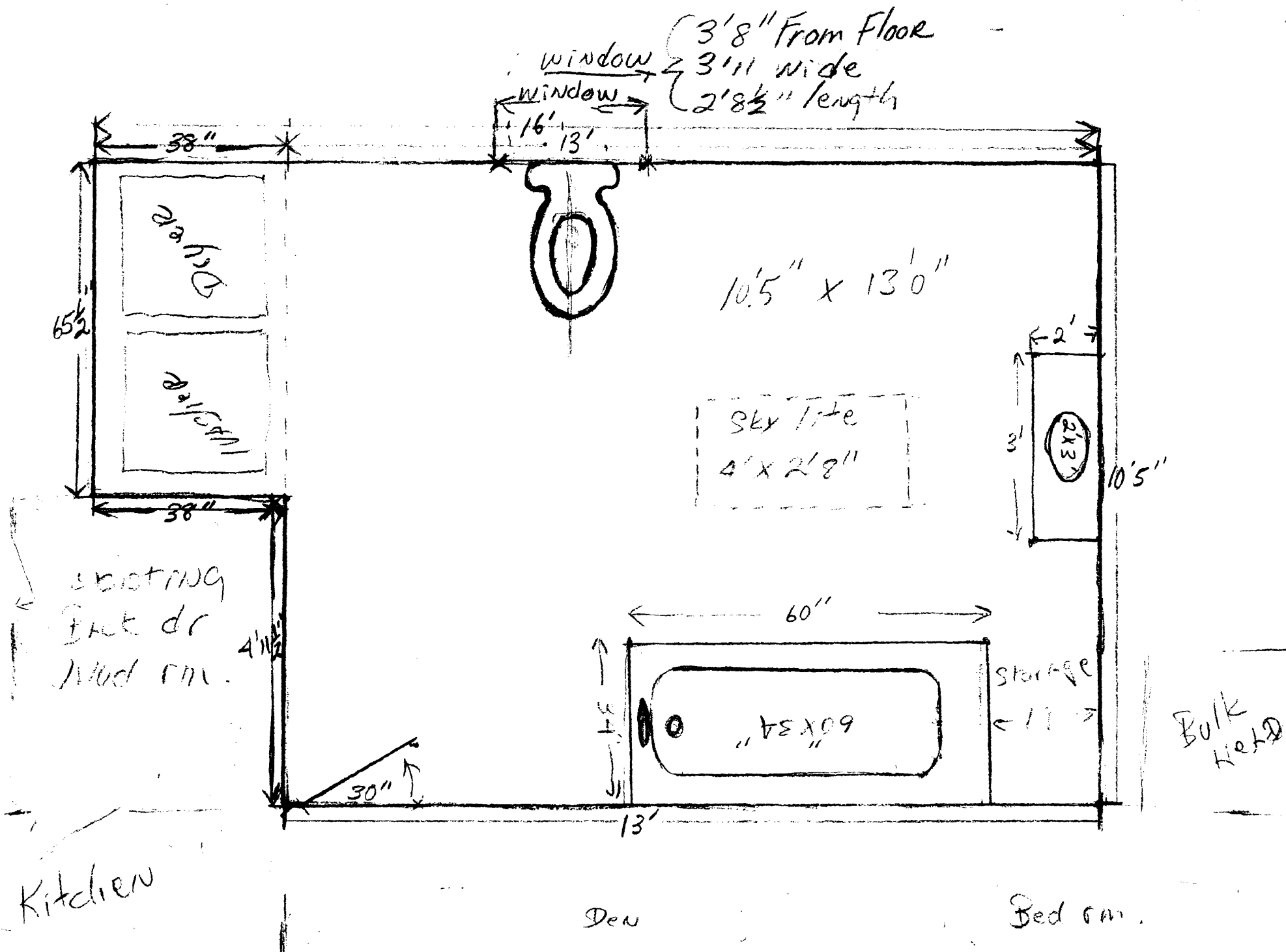


→ scaled apparent shoreland zone

10' x 14' Breezeway

APPARENT R/W
SAMUEL ROAD

INSIDE WALL MEASUREMENT



City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0426	Issue Date:	CBL: 437 D007001
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Location of Construction: 23 SAMUEL RD	Owner Name: FORZESE MARY	Owner Address: 23 SAMUEL RD	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: Single Family Home	Proposed Use: Single Family Home - Change existing Breezway to bathroom	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 4
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Proposed Project Description:
Change existing Breezway to bathroom

FIRE DEPT: Approved Denied
Signature: *[Signature]*

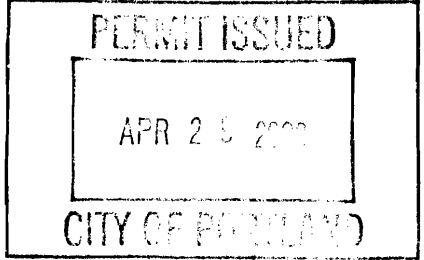
INSPECTION:
Use Group: R-3 Type: SB
Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 04/28/2008	Zoning Approval
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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: <i>4/29/08</i>	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 checked="" 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: <i>4/25/08</i>
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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

6-18-08

OK

Plum + Elec.

W/E W

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 23 Samuel

PROPERTY OWNERS NAME

Last: _____ First: _____
Applicant Name: Robert Curlew
Mailing Address of Owner/Applicant (If Different): 62-4003 P+H
158 St John St Portland ME

2008-8115

PORTLAND PERMIT # 10614 TOWN COPY

Date Permitt Issued: 5/02/08 \$ 1140 If Double Fee FEE Charged

Thomas R. Mahley L.P.I. # 0244
Local Plumbing Inspector Signature

137 D 007

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: _____ Date: 5/1/08

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: _____ Date Approved: _____

PERMIT INFORMATION

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER/MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # 11568

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>OR</p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>OR</p> <p>TRANSFER FEE [\$6.00]</p>		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	Fixtures (Subtotal) Column 2			Fixtures (Subtotal) Column 1
<p>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</p> <p style="font-size: 2em; opacity: 0.5;">600</p>				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1351	Issue Date:	CBL: 437 D007001
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Location of Construction: 23 Samuel Rd	Owner Name: Deschambault Susan	Owner Address: 62 Farragut St	Phone: 797-6922
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R3

Past Use: single family	Proposed Use: Single Family Home -Build 10' x 20' Breezeway on rear of home 14'	Permit Fee: \$285.00	Cost of Work: \$9,700.00	CEO District: 4	Shoreland
Proposed Project Description: Build 10' x 20' Breezeway on rear of home 14'		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB BOCA 1999 Signature: JMB 10/26/04		
		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: dmartin	Date Applied For: 09/09/2004	Zoning Approval		
<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 Review <input checked="" type="checkbox"/> Shoreland <i>Edge of property in 20' well over 15' min</i> <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Flood Zone <i>Panel 1 Zone AE structure removed per LOMA Elevation Cert.</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: JMB 10/26/04	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 checked="" 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: JMB

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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

Permit Number: 041351

PERMIT

This is to certify that Deschambault Susan/Owner

has permission to Build 10' x 20' Breezeway on rear of home

AT 23 Samuel Rd

437 D007001

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 written permission procured before this building or part thereof is altered or enclosed-in.
 HEAR NOTICE IS 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

Jeanie Bourke 10/26/04
 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1351	Date Applied For: 09/09/2004	CBL: 437 D007001
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Location of Construction: 23 Samuel Rd	Owner Name: Deschambault Susan	Owner Address: 62 Farragut St	Phone: () 797-6922
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family Home -Build 10' x 14' Breezeway on rear of home	Proposed Project Description: Build 10' x 14' Breezeway on rear of home
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Dept: Zoning **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 10/26/2004

Note: 9/29/04 left vm w/Susan D. To discuss issues, ie. Shoreland zone, flood plain, construction details. She called back and said the former owner started the process for a LOMA and will locate the elevation cert. 10/22 received new info with LOMA & elevation cert., ok to issue **Ok to Issue:**

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 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:** Jeanine Bourke **Approval Date:** 10/26/2004

Note: **Ok to Issue:**

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, or heating.

This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information

Card Number 1 of 1
Parcel ID 437 D007001
Location 23 SAMUEL RD
Land Use SINGLE FAMILY

Owner Address MANCINI JOSEPH S WWII VET & CAROLINA JTS
 99 PREBLE ST APT 712
 SOUTH PORTLAND ME 04106

Book/Page
Legal 437-D-7
 SAMUEL RD 23
 13649 SF

Valuation Information

Land	Building	Total
\$36,650	\$63,100	\$99,750

Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
1964	Ranch	1	1008	0.313	2	1		5	None	Full

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
GARAGE-WD/CB	1	1972	20X24	C	A

Sales Information

Date	Type	Price	Book/Page
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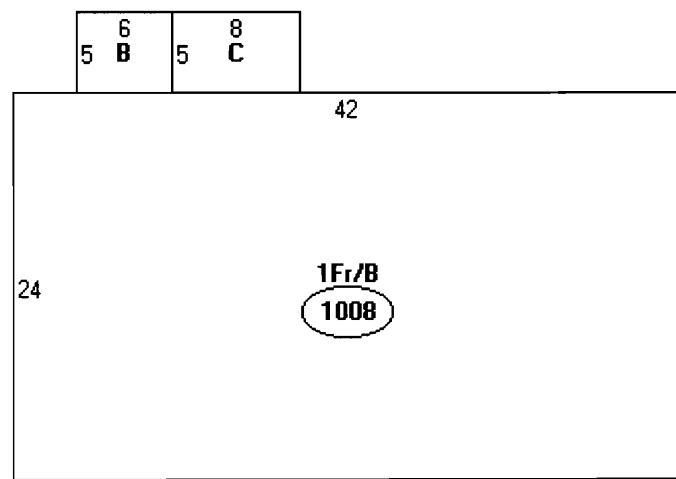
Picture and Sketch

[Picture](#) [Sketch](#)

[Click here](#) to view Tax Roll Information.

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.

New Search!



Descriptor/Area

- A: 1Fr/B
1008 sqft
- B: WD
30 sqft
- C: EP
40 sqft

1078
480 Garage

1,558
140 New

1,698 SF

Lot = $12,649 \times 25\%$
3,162.25 SF

JK



SEP - 8

All Purpose Building Permit Application

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

Location/Address of Construction: <u>23 Samuel Road Portland Me</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>43</u> Block# <u>D</u> Lot# <u>007</u>		Owner: <u>Susan Deschambault</u> Telephone: <u>7976922</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Owner</u>	Cost Of Work: \$ <u>17,000.00</u> Fee: \$ <u>174.00</u>
Current use: <u>Single Family home</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Bed rm - addition 22x20' 10x20' Breeze way</u>		
Project description:		
Contractor's name, address & telephone: <u>Owner</u>		
Who should we contact when the permit is ready: <u>Susan Deschambault</u>		
Mailing address: <u>62 Farragut St. Portland Maine</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: <u>797-6922</u>		

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 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 of applicant: Susan Deschambault Date: 9-7-04

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

C# 1042

1-21-09

R3 Shoreland

Rear 25' Req 5D scaled

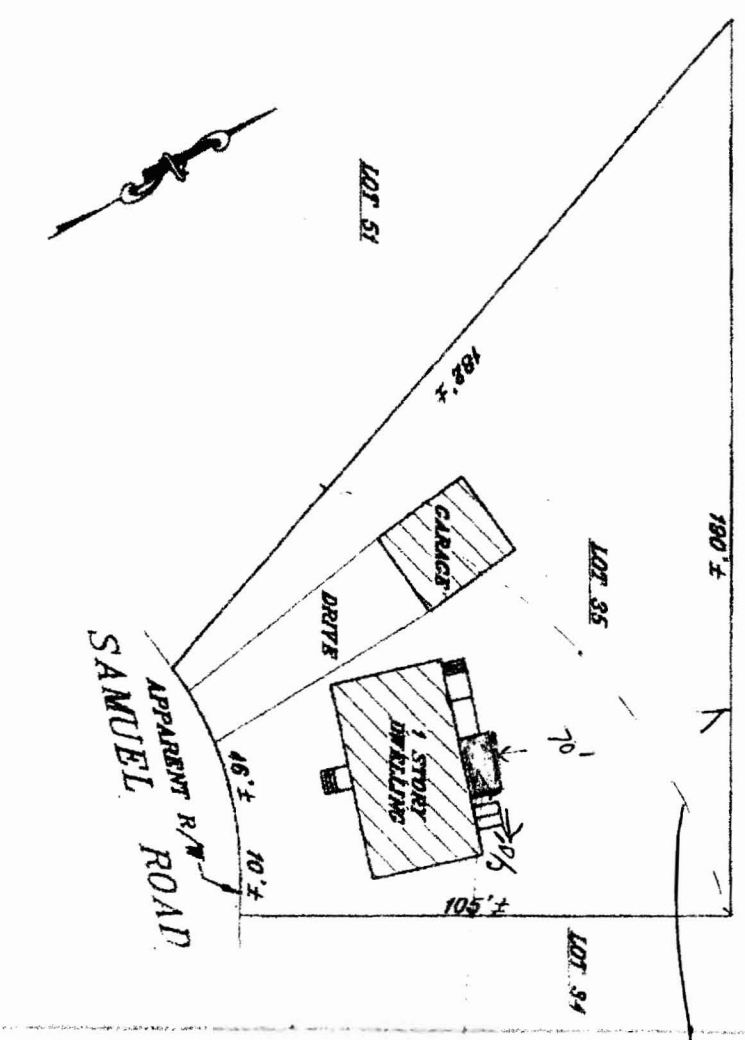
Side 8' Req. 25' scaled

Scaled apparent shoreland zone

ADDRESS: 89 SAMUEL ROAD
ROBERTLAND, MAINE

SCALE 1" = 30'

Not accurate

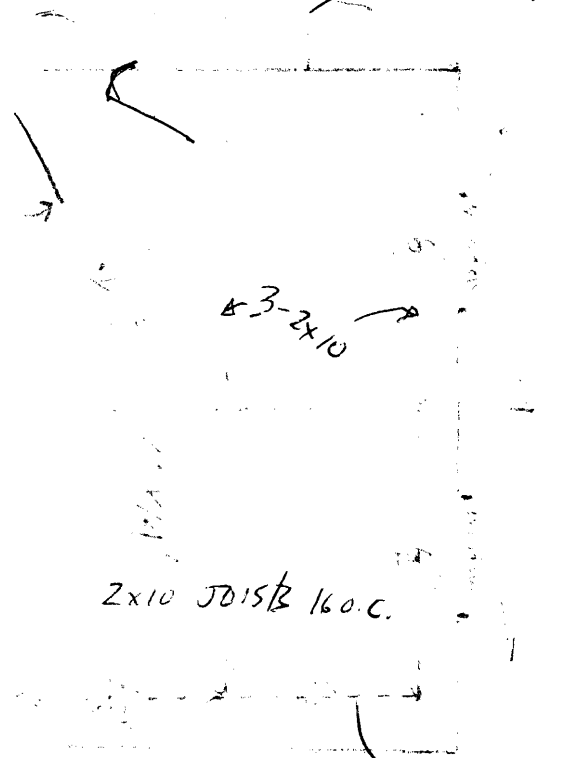


100'±

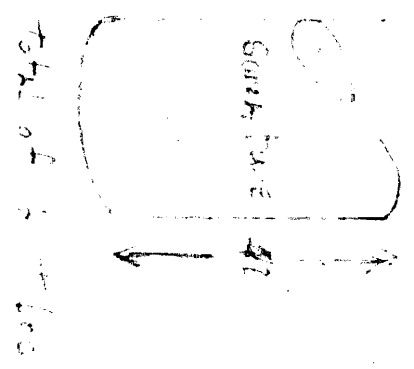
Rafters
2x8-16 O.C.
Gable

Notes
Per Dawson Moulton
9/29/04

Existing breezeway



4x6 Posts - Simpson brackets
Lag Rim to house



Proposal

FROM

Dawson Moulton Builders

Proposal No.

Sheet No.

Date

9-21-04

Proposal Submitted To

Work To Be Performed At

Name Suzanne Deschambault
 Street 62 FAERAGUT ST
 City PORTLAND
 State MAINE
 Telephone Number 797-6922

Street 23 SAMUEL RD.
 City PORTLAND State MAINE
 Date of Plans _____
 Architect Contractor

We hereby propose to furnish all the materials and perform all the labor necessary for the completion of a 10' x 14' Breeze way A 23 Samuel Rd. (Expansion) (6) 10" SOLA TUBES 48" deep
 Floor Joist 2" x 10" x 16" O.C. - 30 x 10" Joist Carriers
 3/4" Ply wood Sub 1st 5/8" Ply wood Sub 2nd Floor Layer
 EXTERIOR WALL - 2x4x16' O.C. 1/2" Ply wood Sheath
 ROOF CAP - Shingle to Match exs - House
 R-13 INS - FACED
 1/2" SHEET ROCK interior walls Type - Sand To Finish -
 INSTALL (2) Windows 30x36" (1) dr 2'-8" x 6'-2"
 ROOF TO MATCH existing roof 1/2 pitch
 IDENTICAL (2) outlets (2) lights (2) switches - 15AMP Breaker

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of

with payments to be made as follows: 3,500.00 Dollars (\$ 3,500.00)
3,500.00 Nine thousand Seven
2,700.00 hundred dollars \$ 9,700.00

Any alteration or deviation from above specifications involving extra costs, will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance upon above work. Workmen's Compensation and Public Liability Insurance on above work to be taken out by Contractor

Respectfully submitted

Per

Note — This proposal may be withdrawn by us if not accepted within 30 days

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Accepted

9/21/04

Signature

Suzanne Deschambault

Date

9-21-04

Signature

Dawson Moulton

Doc#: 72305 Ek:21763 Pg: 345

WARRANTY DEED
(Maine Statutory Short Form)

KNOW ALL PERSONS BY THESE PRESENTS, that Joseph S. Mancini of Portland, County of Cumberland and the State of Maine, for consideration paid, GRANTS to Susan E. Deschambault of Portland, County of Cumberland and the State of Maine, whose mailing address is 62 Farragut Street, Portland, Maine 04102 with **WARRANTY COVENANTS**, the land with buildings thereon in Portland, County of Cumberland and State of Maine, described as follows:

A certain lot or parcel of land, together with the buildings thereon, situated in Portland, County of Cumberland and State of Maine, and being lot numbered thirty-five (#35) as shown on the Plan of Meadow View Park, Section B, recorded in the Cumberland County Registry of Deeds in Plan Book 60, Page 57.

The frontage of said lot on Samuel Road is made up of two segments: one being 10.22 feet in length as shown on said Plan and the second being 45.78 feet in length which measurement was erroneously written as 40.70 feet in the preparation of said Plan.

The westerly sideline of said lot is 182.15 feet which measurement was erroneously written as 183.40 feet in the preparation of said Plan.

Meaning and intending to convey the same premises conveyed to the Grantor by deed from The Minat Corporation dated November 13, 1963 and recorded in the Cumberland County Registry of Deeds in Book 2787, Page 485. Carolina Mancini died August 1, 2003 leaving Joseph S. Mancini as sole surviving Joint Tenant.

Witness my hand and seal this 3rd day of September, 2004.


Witness


Joseph S. Mancini

STATE OF MAINE
COUNTY OF CUMBERLAND, SS.

September 3, 2004

Then personally appeared before me the above named Joseph S. Mancini and acknowledged the foregoing instrument to be his free act and deed.

Before me  SEP 03 2004

Notary Public/ Attorney at Law

C. TRENT GRACE
Notary Public, Maine
My Commission Expires February 6, 2008

Received
Recorded Register of Deeds
Sep 09 2004 11:48:34A
Cumberland County
John B. O'Brien

A04-827

First Financial Mortgage

DATE: 9/20
TO: Susan Deschambault
COMPANY: _____
FAX NUMBER: _____
FROM: Cher
OUR FAX NO. (207) 775-0885

NO. OF PAGES (INCLUDING THIS SHEET): 2

RE: _____

If you have any problems receiving this fax, please call us at:

(207)775-4200.

78 Atlantic Place • South Portland, Maine 04106



FEMA

What You Need to Know About Federal Disaster Assistance and National Flood Insurance

**NATIONAL
FLOOD
INSURANCE
PROGRAM**

**When you think about buying a
flood insurance policy, do you have
these kinds of reactions:**

**Disaster assistance will be available
if my home (or business) is flooded.
I don't need to buy flood insurance!**

It's too expensive!

**My home isn't going to be flooded—
we've never been flooded before!**

Here are the facts you need to know before you decide.

**Disaster assistance will be available
if my home (or business) is flooded.
I don't need to buy flood insurance!**

Did you know that before most forms of Federal disaster assistance are offered, the President must declare a major disaster?

Did you know that the Federal Emergency Management Agency's Individual and Family Grant Program (for Personal Property) and Temporary Housing Program (for Home Repair and Rental Assistance) are available **only** if the President declares a major disaster and makes that assistance available?

Did you know that the most typical form of Federal disaster assistance is a loan that must be paid back with interest?

Did you know that the average Individual and Family Grant payment is less than \$2,500?

Did you know that to qualify for Home Repair Assistance, your home must have relatively minor damage that can be repaired quickly?

Did you know you cannot qualify for Rental Assistance unless your home has been destroyed or significantly damaged?

(over)

ADDITIONAL INFORMATION REGARDING LETTERS OF MAP AMENDMENT

For Letters of Map Amendment (LOMAs), the Federal Emergency Management Agency (FEMA) bases its determination on the flood hazard information available at the time of the determination. Requestors should be aware that flood conditions may change or new information may be generated that would supersede FEMA's determination. In such cases, the community will be informed by letter.

Requestors also should be aware that removal of a property (parcel of land or structure) from the Special Flood Hazard Area (SFHA) means FEMA has determined that the property is not subject to inundation by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood). This does not mean the property is not subject to other flood hazards. The property could be inundated by a flood with a magnitude greater than the base flood or by localized flooding not shown on the effective National Flood Insurance Program (NFIP) map.

The effect of a LOMA is that it removes the Federal requirement for the lender to require flood insurance coverage for the property. The LOMA *is not* a waiver of the condition that the property owner maintain flood insurance coverage for the property. *Only* the lender can waive the flood insurance purchase requirement because the lender imposed the requirement. *The property owner must request and receive a written waiver from the lender before canceling the policy.* The lender may determine, on its own as a business decision, that it wishes to continue the flood insurance requirement to protect its financial risk on the loan. If the lender decides to release the property owner from the flood insurance requirement, and the property owner decides to cancel the policy and seek a refund, the NFIP will refund the premium paid for the current policy year, provided that no claim is pending or has been paid on the policy during the current policy year. The property owner must provide the written waiver to the property insurance agent or company that is servicing his or her policy. The agent or company will then process the refund request.

The LOMA provides FEMA's comment on the mandatory flood insurance requirements of the NFIP as they apply to a particular property. A LOMA is not a building permit, nor should it be construed as such. Any development, new construction, or substantial improvement of a property impacted by a LOMA must comply with all applicable State/Commonwealth, local, and other Federal criteria.

Even though the property is not located in an SFHA, as mentioned in the LOMA, it could be flooded by a flooding event with a greater magnitude than the base flood. In fact, more than 25 percent of all losses in the NFIP occur to property located outside the SFHA in Zones B, C, X (shaded), or X (unshaded). More than one-fourth of all policies purchased under the NFIP protect property located in these zones. That risk is just not as great as the flood risk to property located in SFHAs. To offer flood insurance protection to owners of such property, the NFIP offers two types of flood insurance policies: the Standard Policy and the Preferred Risk Policy (PRP). The PRP is



Federal Emergency Management Agency

Washington, D.C. 20472

October 12, 2004

MR. ROBERT T. GREENLAW, P.L.S.
BACK BAY BOUNDARY, INC.
65 NEWBURY STREET
PORTLAND, ME 04101

CASE NO.: 04-01-1666A
COMMUNITY: CITY OF PORTLAND, CUMBERLAND COUNTY,
MAINE
COMMUNITY NO.: 230051

DEAR MR. GREENLAW:

This is in reference to a request that the Federal Emergency Management Agency (FEMA) determine if the property described in the enclosed document is located within an identified Special Flood Hazard Area, the area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood), on the effective National Flood Insurance Program (NFIP) map. Using the information submitted and the effective NFIP map, our determination is shown on the attached Letter of Map Amendment (LOMA) Determination Document. This determination document provides additional information regarding the effective NFIP map, the legal description of the property and our determination.

Additional documents are enclosed which provide information regarding the subject property and LOMAs. Please see the List of Enclosures below to determine which documents are enclosed. Other attachments specific to this request may be included as referenced in the Determination/Comment document. If you have any questions about this letter or any of the enclosures, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, P.O. Box 2210, Merrifield, VA 22116-2210. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.

Sincerely,

Doug Bellomo, P.E., CFM, Acting Chief
Hazard Identification Section, Mitigation Division
Emergency Preparedness and Response Directorate

LIST OF ENCLOSURES:

LOMA DETERMINATION DOCUMENT (REMOVAL)

cc: State/Commonwealth NFIP Coordinator
Community Map Repository
Region



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	CITY OF PORTLAND, CUMBERLAND COUNTY, MAINE	Lot 35, Plan of Meadow View Park, Section B, as described in Deed, recorded in Book 2787, Pages 493 and 494, filed on November 13, 1963, by the Register of Deeds, Cumberland County, Maine
	COMMUNITY NO.: 230051	
AFFECTED MAP PANEL	NUMBER: 2300510007C	
	NAME: CITY OF PORTLAND, CUMBERLAND COUNTY, MAINE	
	DATE: 12/08/1998	
FLOODING SOURCE: FALL BROOK		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 43.695, -70.286 SOURCE OF LAT & LONG: PRECISION MAPPING STREETS 6.0 DATUM: NAD 83

DETERMINATION

LOT	BLOCK/SECTION	SUBDIVISION	STREET	OUTCOME WHAT IS REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NGVD 29)	LOWEST ADJACENT GRADE ELEVATION (NGVD 29)	LOWEST LOT ELEVATION (NGVD 29)
35	-/B	Plan of Meadow View Park	23 Samuel Road	Structure	X (unshaded)	70.1 feet	70.7 feet	69.0 feet


Special Flood Hazard Area (SFHA) - The SFHA is an area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood).

ADDITIONAL CONSIDERATIONS (Please refer to the appropriate section on Attachment 1 for the additional considerations listed below.)

PORTIONS REMAIN IN THE SFHA

This document provides the Federal Emergency Management Agency's determination regarding a request for a Letter of Map Amendment for the property described above. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we have determined that the structure(s) on the property(ies) is/are not located in the SFHA, an area inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood). This document amends the effective NFIP map to remove the subject property from the SFHA located on the effective NFIP map; therefore, the Federal mandatory flood insurance requirement does not apply. However, the lender has the option to continue the flood insurance requirement to protect its financial risk on the loan. A Preferred Risk Policy (PRP) is available for buildings located outside the SFHA. Information about the PRP and how one can apply is enclosed.

This determination is based on the flood data presently available. The enclosed documents provide additional information regarding this determination. If you have any questions about this document, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, P.O. Box 2210, Merrifield, VA 22116-2210. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.


 Doug Bellomo, P.E., CFM, Acting Chief
 Hazard Identification Section, Mitigation Division
 Emergency Preparedness and Response Directorate

Version 1.3.4

62175103 0301288303012883



Federal Emergency Management Agency

Washington, D.C. 20472

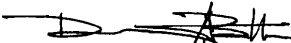
LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

PORTIONS OF THE PROPERTY REMAIN IN THE SFHA (This Additional Consideration applies to the preceding 1 Property.)

Portions of this property, but not the subject of the Determination/Comment document, may remain in the Special Flood Hazard Area. Therefore, any future construction or substantial improvement on the property remains subject to Federal, State/Commonwealth, and local regulations for floodplain management.

This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, P.O. Box 2210, Merrifield, VA 22116-2210. Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip/>.


Doug Bellomo, P.E., CFM, Acting Chief
Hazard Identification Section, Mitigation Division
Emergency Preparedness and Response Directorate

Version 1.3.4
62175103 0301288303012883

To Yady Pimentel
Ohio Savings Bank
att: Escrow Dept.

3 pages

10/20/04

#1855757

Attached please find a FEMA release proving that
23 Samuel Road is not in a flood zone. Please
reduce my monthly payment to reflect this change.

Thanks

Susan Deschenault

(W) 207-791-5534

(H) 207-797-6922

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Susan Deschembault		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 23 Samuel Road		Company NAIC Number	
CITY Portland	STATE ME	ZIP CODE 04103	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 35, Meadow View Park, Section b, as shown on Plan Book 117, Page 9, filed in July 14, 1977 in the Cumberland County Registry of Deeds, Portland, Maine.			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 230051		B2. COUNTY NAME Cumberland		B3. STATE ME	
B4. MAP AND PANEL NUMBER 2300510007C	B5. SUFFIX	B6. FIRM INDEX DATE 12/08/1998	B7. FIRM PANEL EFFECTIVE/REVISED DATE 12/08/1998	B8. FLOOD ZONE(S) X	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 70.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 4 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) _____ ft.(m)
- b) Top of next higher floor 74.28 ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
- d) Attached garage (top of slab) _____ ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) _____ ft.(m)
- f) Lowest adjacent (finished) grade (LAG) _____ ft.(m)
- g) Highest adjacent (finished) grade (HAG) _____ ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____
- i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

#2303 10-22-2004

Signature: *Robert T. Greenlaw*

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME Robert T. Greenlaw, PLS

LICENSE NUMBER 2303

TITLE Professional Land Surveyor

COMPANY NAME Back Bay Boundary, Inc.

ADDRESS
65 Newbury Street

CITY
Portland

STATE
ME

ZIP CODE
04101

SIGNATURE

Robert T. Greenlaw

DATE
10-22-2004

TELEPHONE
207-774-2855

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 23 Samuel Road			Policy Number
CITY Portland	STATE ME	ZIP CODE 04103	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

This flood Certificate is for the proposed addition to the rear of the existing structure. The elevation is based on survey performed on 08-19-2004 by Back Bay Boundary, Inc. The addition will utilize a 4-foot frost wall and typical construction.

The finish floor will be at the same elevation as the existing structure, 4.28 feet above the BFE

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
 Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

____ ft.(m) Datum: ____

G9. BFE or (in Zone AO) depth of flooding at the building site is:

____ ft.(m) Datum: ____

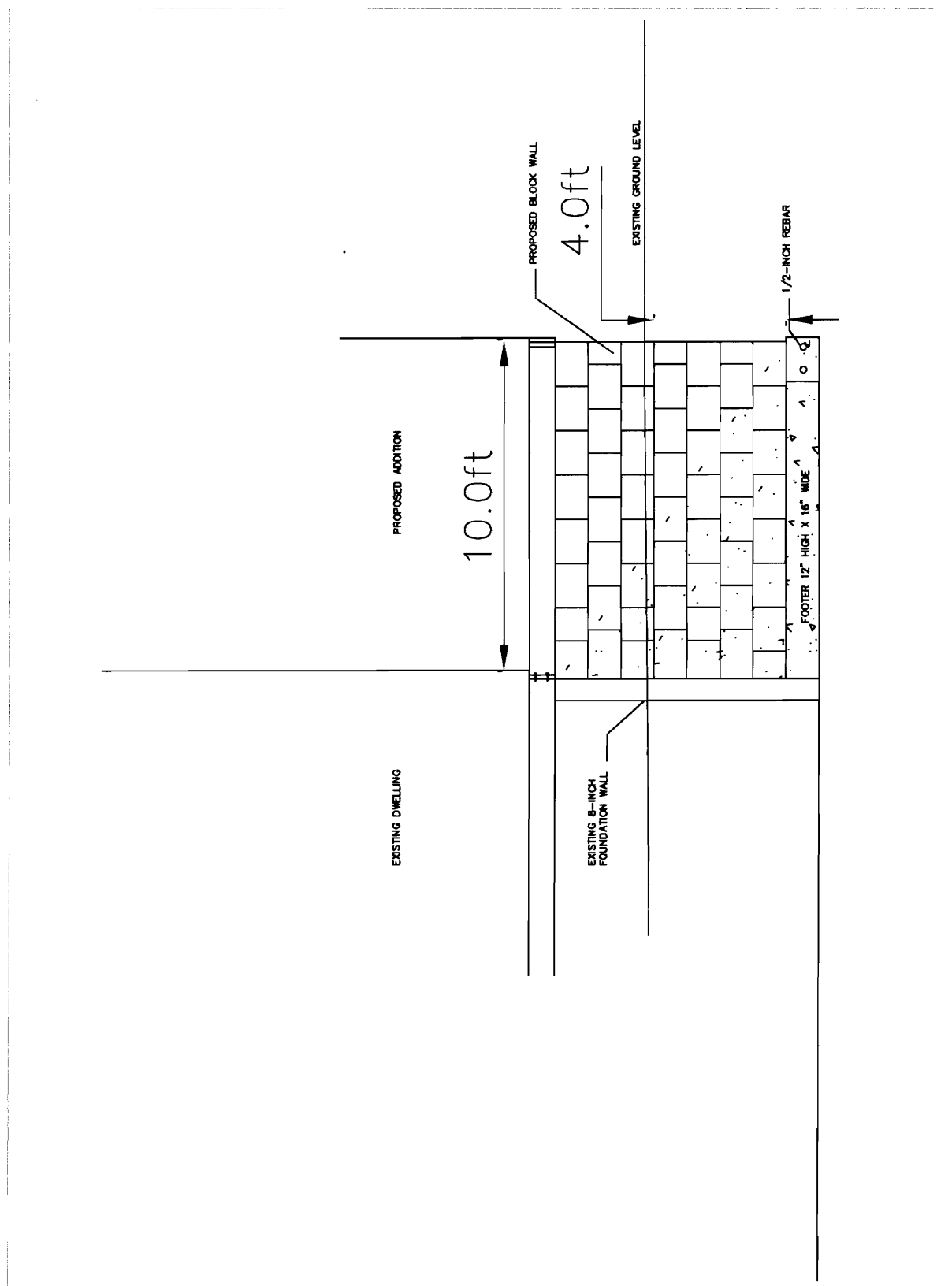
LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments

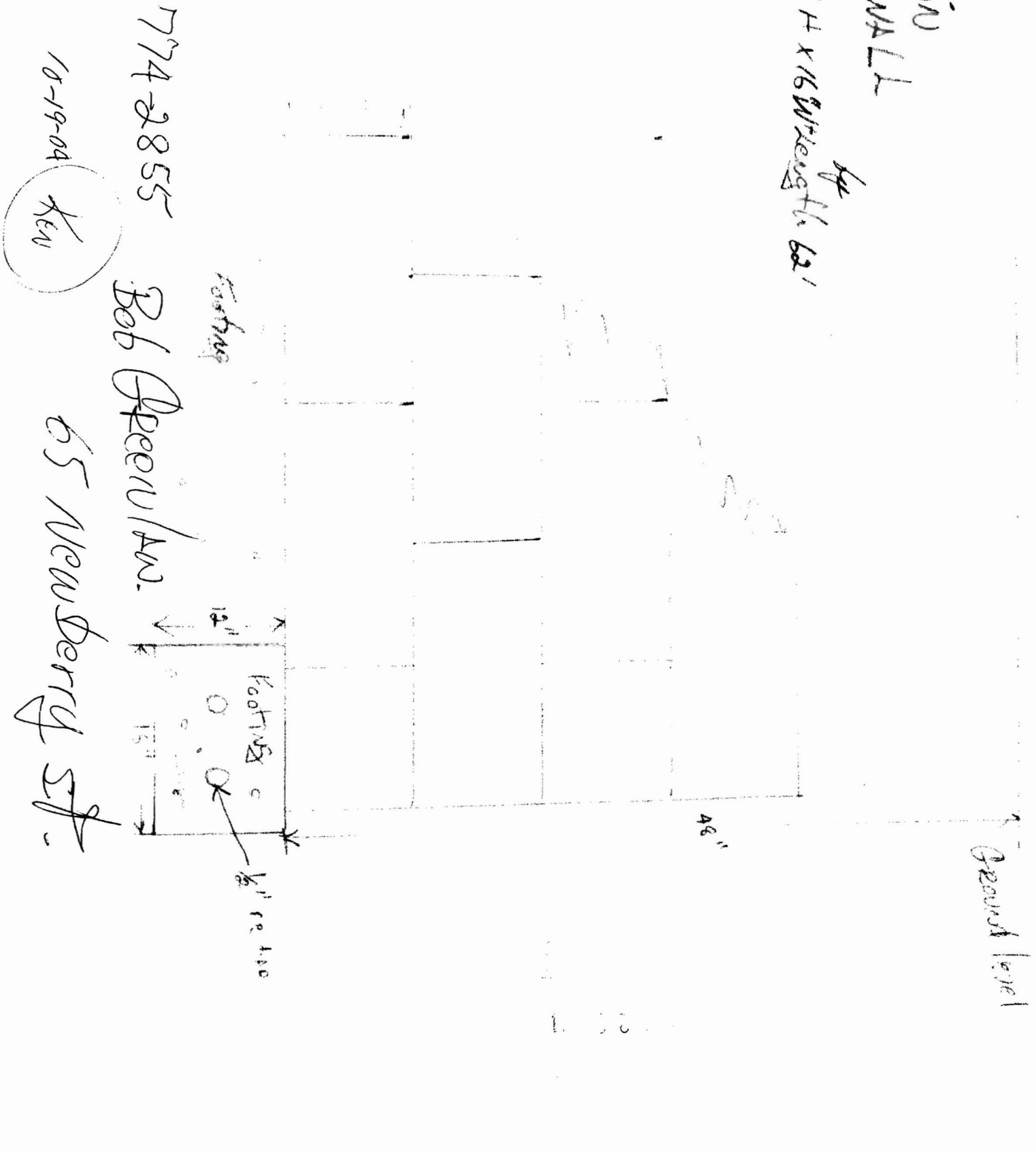


23 SSMVAL #4 -

Foundation
Block wall

footings 12" H x 16" width length 62'

Ground level



Acise | Address

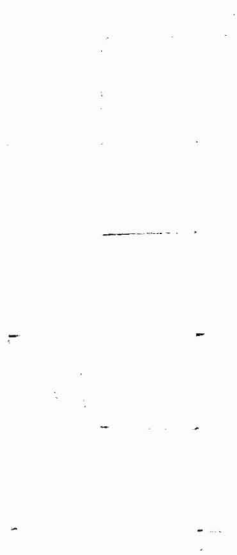
Board level

Foundation Joist

Thick WALL

Footings 12" H x 16W x 24" D

46"



17 2 2