

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 030734

This is to certify that Powers Brent W &/no contractor / selfhas permission to build 12' x 16' deckAT 27 Bernard Rd

437 D012001

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 occupied or closed-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. **PERMIT ISSUED**

Health Dept. _____

Appeal Board **JUN 26 2003**Other _____
Department Name**CITY OF PORTLAND****PENALTY FOR REMOVING THIS CARD**

Director - Building & Inspection Services

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0734	Issue Date: JUN 26 2003	CBL: 437 D012001
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Location of Construction: 27 Bernard Rd	Owner Name: Powers Brent W &	Owner Address: 27 Bernard Rd CITY OF PORTLAND	Phone: 207-878-9567
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: single family	Proposed Use: single family - 12' x 16' deck	Permit Fee: \$37.00	Cost of Work: \$1,600.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>[Signature]</i>	INSPECTION: Use Group: R-3 Type: SB BOCA 99 <i>[Signature]</i>	

Proposed Project Description: build 12' x 16' deck	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: tmm	Date Applied For: 06/25/2003	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 checked="" type="checkbox"/> Shoreland <i>Well beyond 75' high</i> <input type="checkbox"/> Wetland <i>Water mark</i> <input checked="" type="checkbox"/> Flood Zone <i>Zone AE</i> <input type="checkbox"/> Subdivision <i>See attached elevation certificate</i> <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 6/26/03	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: 6/26/03
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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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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7/9/03 Met w/ owner. checked Sand Tubes. All ARE $> 48"$
Setbacks also OK. Gave OK to pour 9m.

**FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM**

O.M.B. No. 3057-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME Brent & Diane Powers		Policy Number	
BUILDING STREET ADDRESS (including Apt. Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 27 Bernard Road		Company NAIC Number	
CITY Portland	STATE Maine	ZIP CODE 04103	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Assessor's Map 437, Block D, Parcel 12			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (N ^{or} - N ^{or} - W ^{est} or W ^{est} - N ^{or} - W ^{est})	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 Portland 230051		B2. COUNTY NAME Cumberland		B3. STATE Maine	
B4. MAP AND PANEL NUMBER 230051 0007	B5. SUFFIX B	B6. FIRM INDEX DATE 7/16/1986	B7. FIRM PANEL EFFECTIVE/REVISED DATE 7/7/1997	B8. FLOOD ZONE(S) A2	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 70.3

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): Benchmark on Allen A.

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 2 (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 C3a-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

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>65.28</u> ft.(m)	License Number, Entered Seq. Signature, and Date
<input type="checkbox"/> b) Top of next higher floor	<u>72.69</u> ft.(m)	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft.(m)	
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> ft.(m)	
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>N/A</u> ft.(m)	
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>69.09</u> ft.(m)	
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>70.50</u> ft.(m)	
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>sq. in. (sq. cm)</u>	

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 M. Johann Buljean		LICENSE NUMBER PLS 1314	
TITLE Professional Land Surveyor		COMPANY NAME Northeast Civil Solutions	
ADDRESS 153 U.S. Route One	CITY Scarborough, ME 04074	STATE	ZIP CODE
SIGNATURE 	DATE December 6, 2001	TELEPHONE (207) 883-1000	

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

37 Bernard Street

CITY

Portland, ME 04103

STATE

ZIP CODE

For Insurance Company Use:

Policy Number

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

☐ 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 this building is _____ ft.(m) _____ in.(cm) _____ above or _____ below (check one) the highest adjacent grade.

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.

E4. 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

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
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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

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>27 Bernard Road, Portland, ME 04103</u>			
Total Square Footage of Proposed Structure		Square Footage of Lot <u>6500</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>437</u>	Block# <u>D</u>	Lot# <u>12</u>	Owner: <u>Brett & Diane Powers</u> Telephone: <u>878-9567</u>
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone: <u>Diane Powers</u> <u>27 Bernard Road, Portland,</u> <u>ME 04103</u> <u>878-9567</u>	Cost Of Work: \$ <u>1600.- (est.)</u> Fee: \$ <u>— self</u>
Current use: <u>Lawn</u>		\$ <u>37.00</u>	
If the location is currently vacant, what was prior use: _____			
Approximately how long has it been vacant: _____			
Proposed use: <u>deck</u>		<u>16' X 80' 12'</u>	
Project description: <u>deck on back of house</u>			
Contractor's name, address & telephone: <u>none - doing work ourselves</u>			
Who should we contact when the permit is ready: <u>Diane Powers - 878-9567</u> <u>Call</u>			
Mailing address: _____			
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>878-9567</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: <u>[Signature]</u>	Date: <u>3/19/03</u> DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME
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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.

RECEIVED

P-3
Stream
Prot.



WOODARD & CURRAN
Engineering • Science • Operations

41 Hutchins Drive • Portland, ME 04102

(207) 774-2112 • 1-800-426-4262

Fax: (207) 774-6635

CORPORATE OFFICES: Maine, Massachusetts,
New Hampshire, Connecticut, Illinois, Florida
Operational offices throughout the U.S.

Handwritten: TAMMY - They want to know the counter - Day Permit

FAX Transmittal Sheet

To: MARGE SCHNUCKAL FAX #: 874 8716
Sender: BRENT POWERS Date: JUNE 20
No. of Pages (including cover sheet) 15
Hard Copy to Follow in Mail: Yes ☐ No ☒

Comments

MARGE,

I WILL CALL TO FOLLOW UP FOR AN APPT.
PLEASE CALL 329-4951 W/ QUESTIONS OR
E MAIL: BPDPO@MAINE.BR.COM.

Thanks,
Brent Powers

Note:

This message is intended only for the use of the individual or entity named above and may contain information that is privileged, confidential, and exempt from disclosure under the applicable law. If you are not the intended recipient or the employer or agent responsible for delivering the message to the intended recipient, please notify us immediately by telephone and return the original to us by postal service at the address noted on this stationery. Any dissemination, distribution, or copying of this communication by anyone other than the intended recipient is strictly prohibited. Thank you!

NOTES

1. THIS IS NOT A BOUNDARY SURVEY. THE PROPERTY LINES AS SHOWN ARE BASED UPON PLAN REFERENCED IN NOTE 3.
2. RECORD OWNERSHIP OF THE PARCEL SURVEYED CAN FOUND IN A DEED FROM ELEANOR D. MINVILLE TO BRENT W. & DIANE R. POWERS AND RECORDED IN THE CUMBERLAND COUNTY REGISTRY OF DEEDS IN DEED BOOK 11046, PAGE 56.
3. PLAN REFERENCE:
PLAN ENTITLED "MEADOW VIEW PARK SECTION B MADE FOR THE MINAT CORPORATION" BY CARL EMERY, DATED 12/12/1961 AND RECORDED IN THE CUMBERLAND COUNTY REGISTRY OF DEEDS IN PLAN BOOK 60, PAGE 57.
4. THE PARCEL SURVEYED IS IDENTIFIED ON THE CITY OF PORTLAND TAX ASSESSOR'S MAP 437 BLOCK D PARCEL 12.

SKETCH PLAN OF LAND

AT 27 BERNARD ROAD

PORTLAND MAINE

SCALE: 1" = 20'

DECEMBER 5, 2001

PREPARED FOR: BRENT & DIANE POWERS
27 BERNARD ROAD
PORTLAND, MAINE 04103

JOB NUMBER: 22851

ACAD FILE: 22851



SURVEYING ENGINEERING LAND PLANNING

Northeast Civil Solutions

INCORPORATED

153 US ROUTE 1, SCARBOROUGH, MAINE 04074

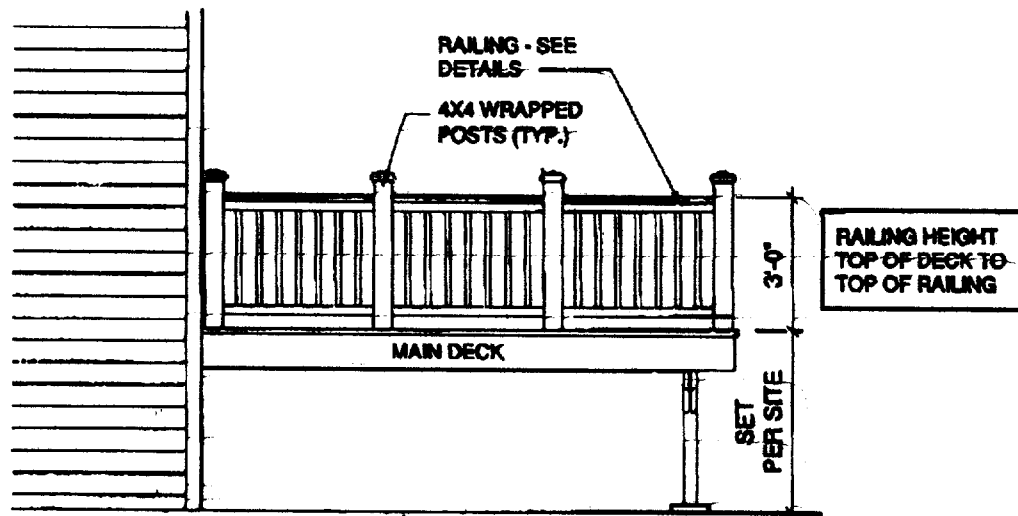
tel
207.883.1000
800.882.2227

fax
207.883.1001

e-mail
ncs@maine.ncs.com

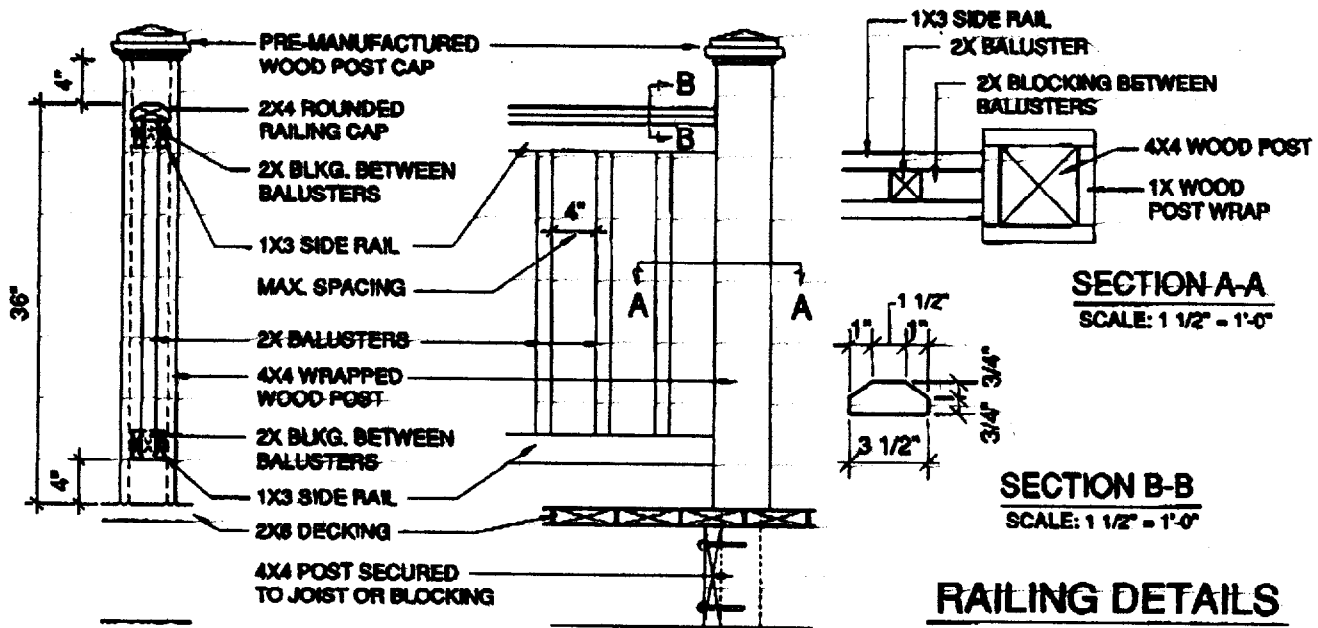


Elevation and Details

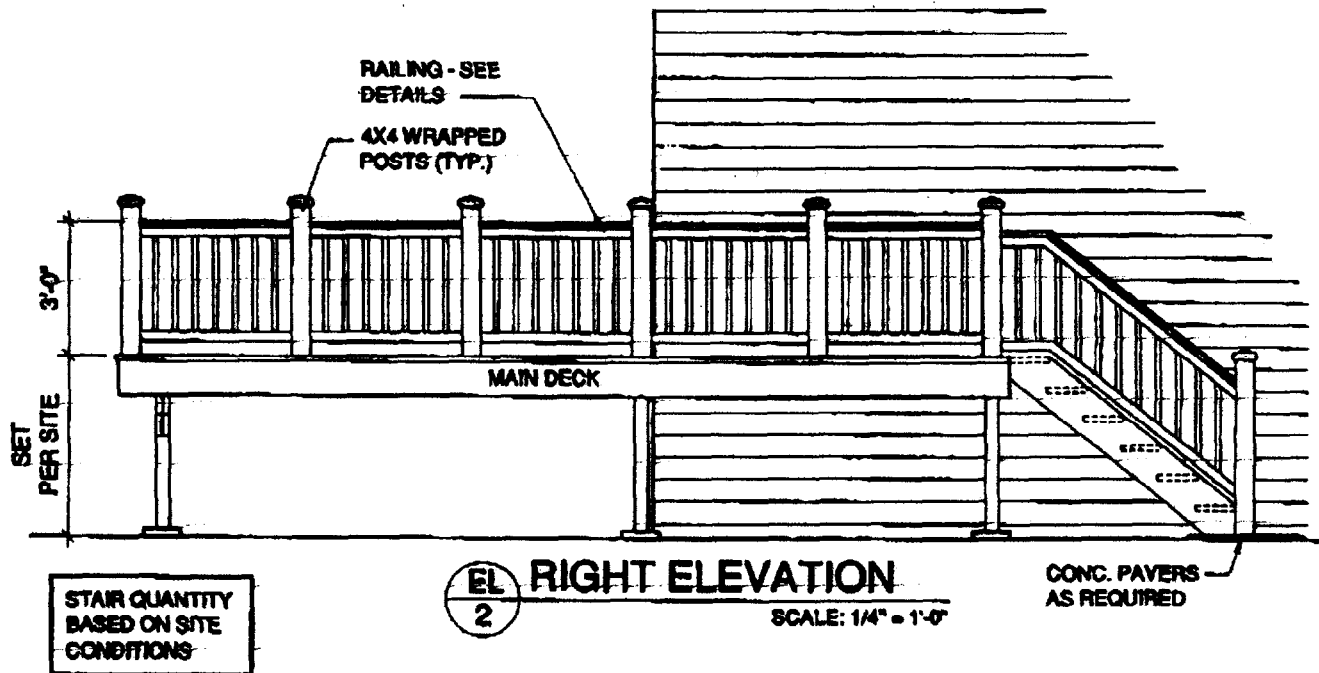


EL 3 LEFT ELEVATION

SCALE: 1/4" = 1'-0"

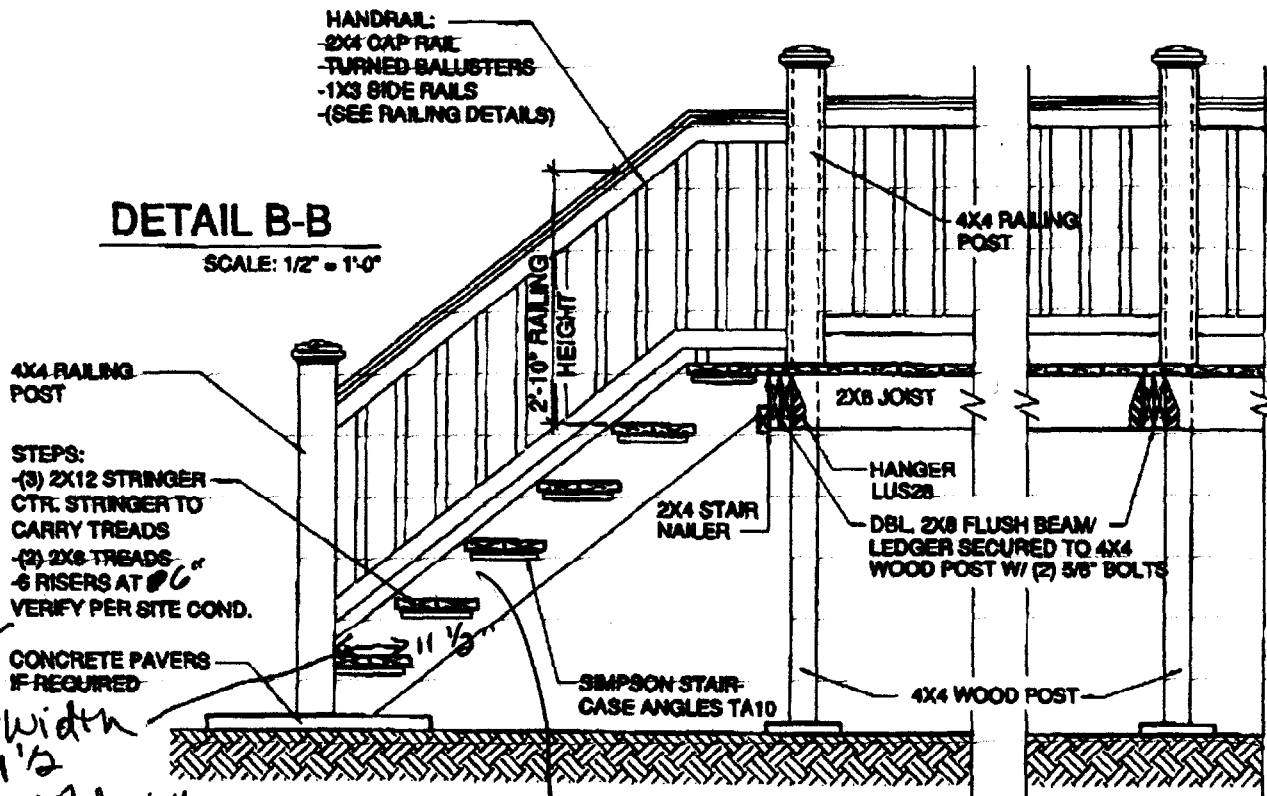


Elevation and Detail

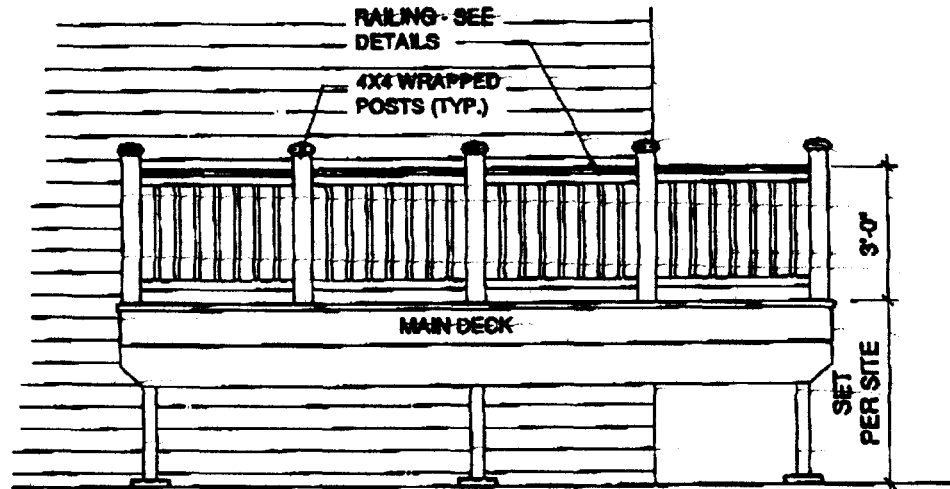


DETAIL B-B

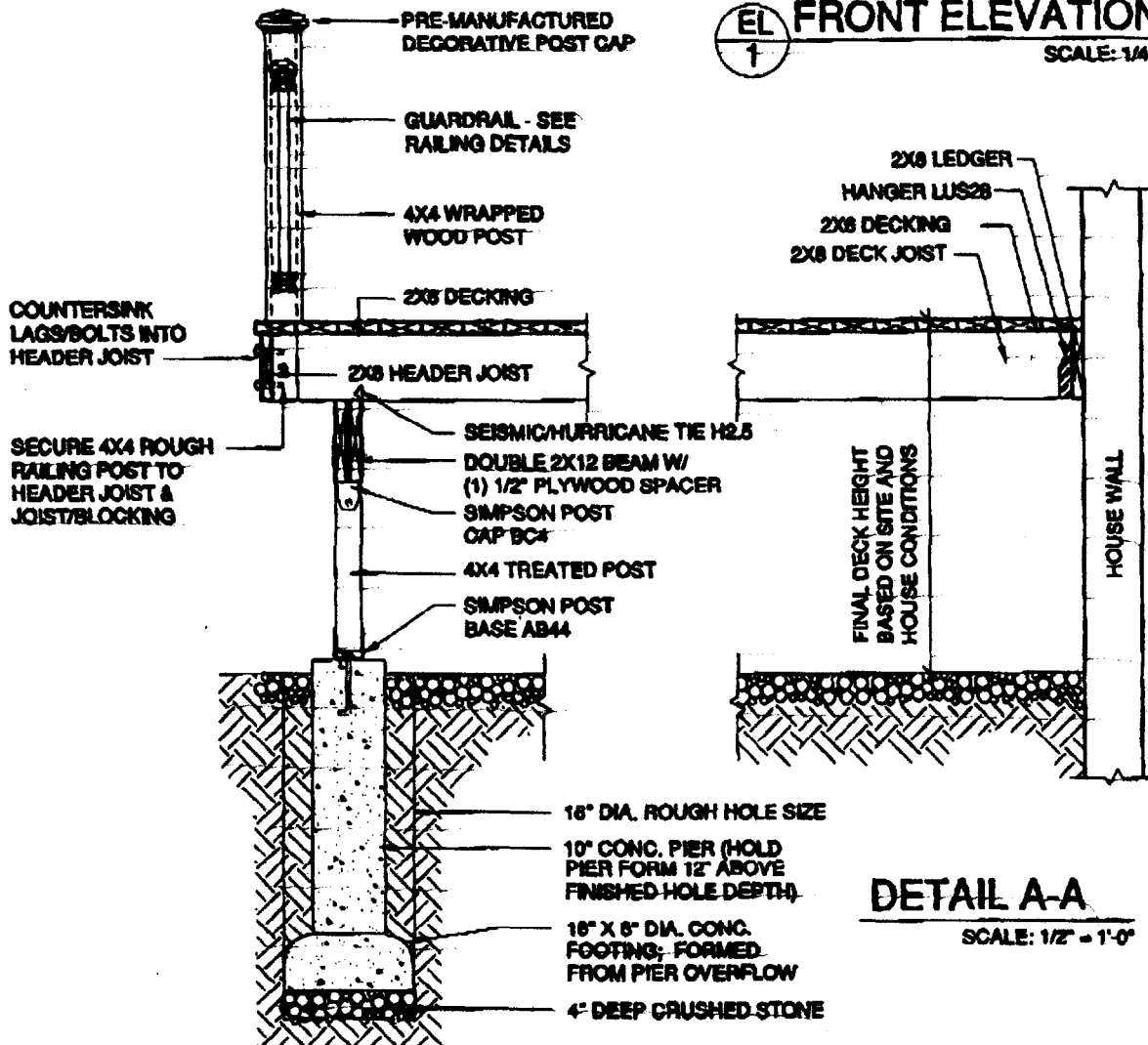
SCALE: 1/2" = 1'-0"



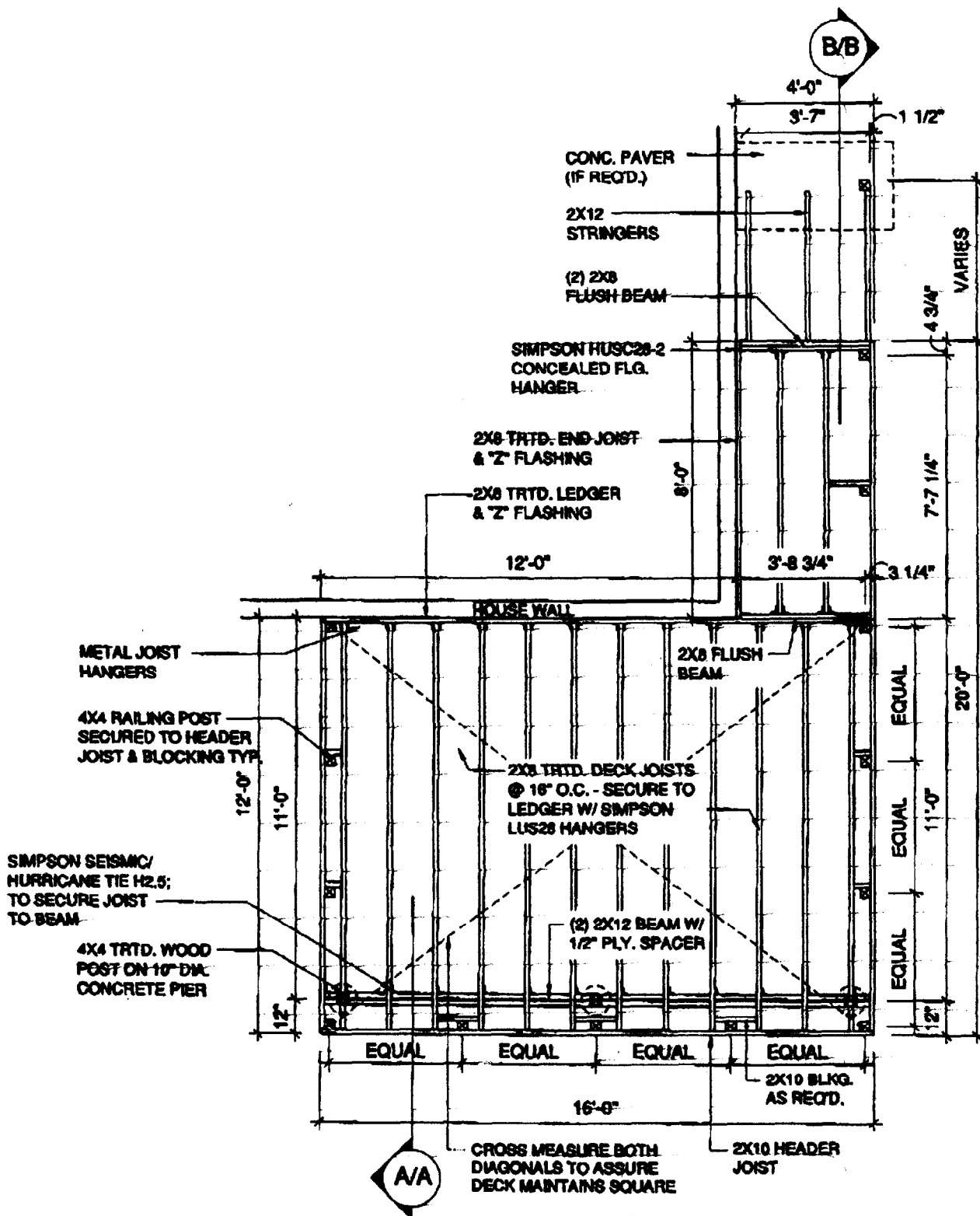
NO open risers

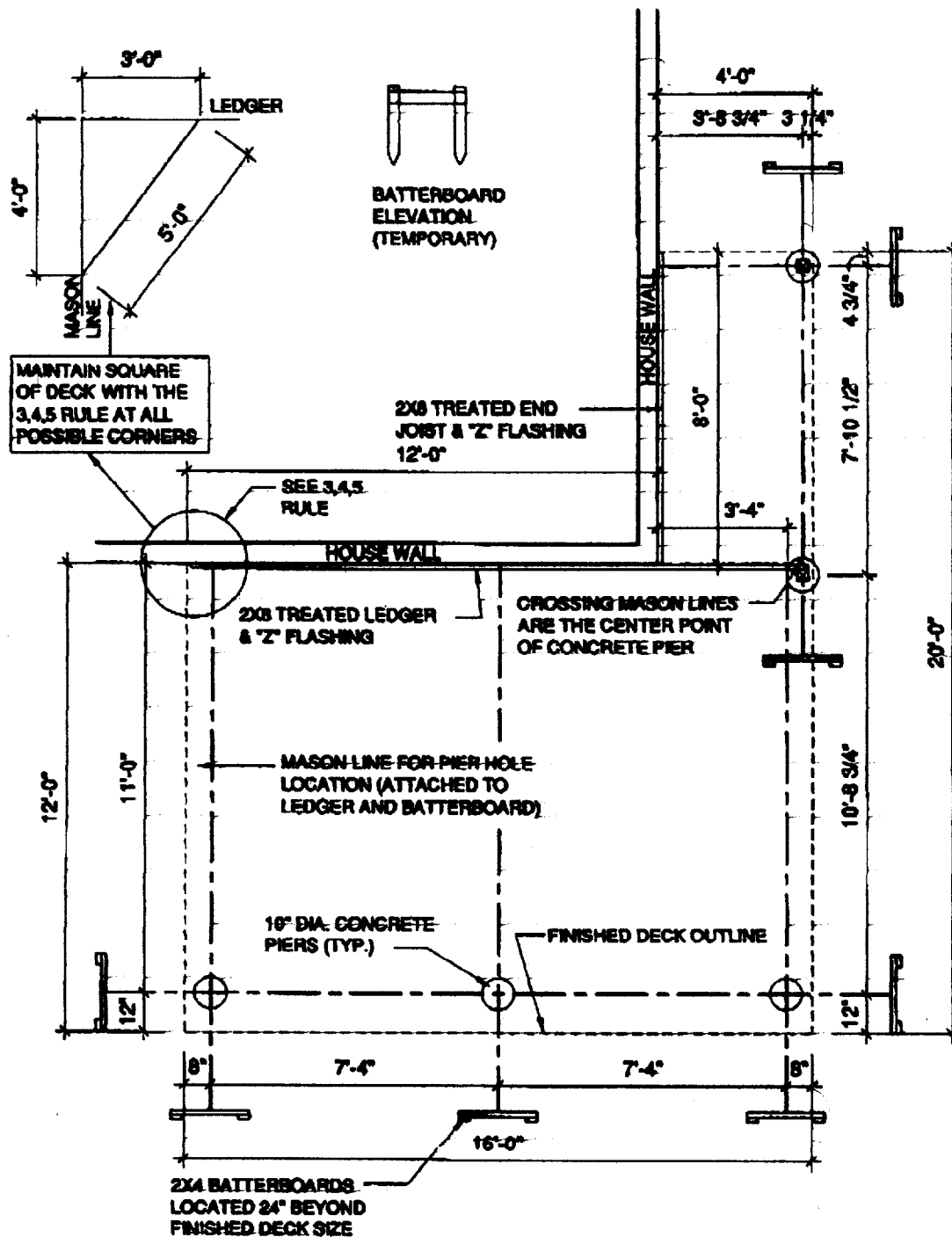
**FRONT ELEVATION**

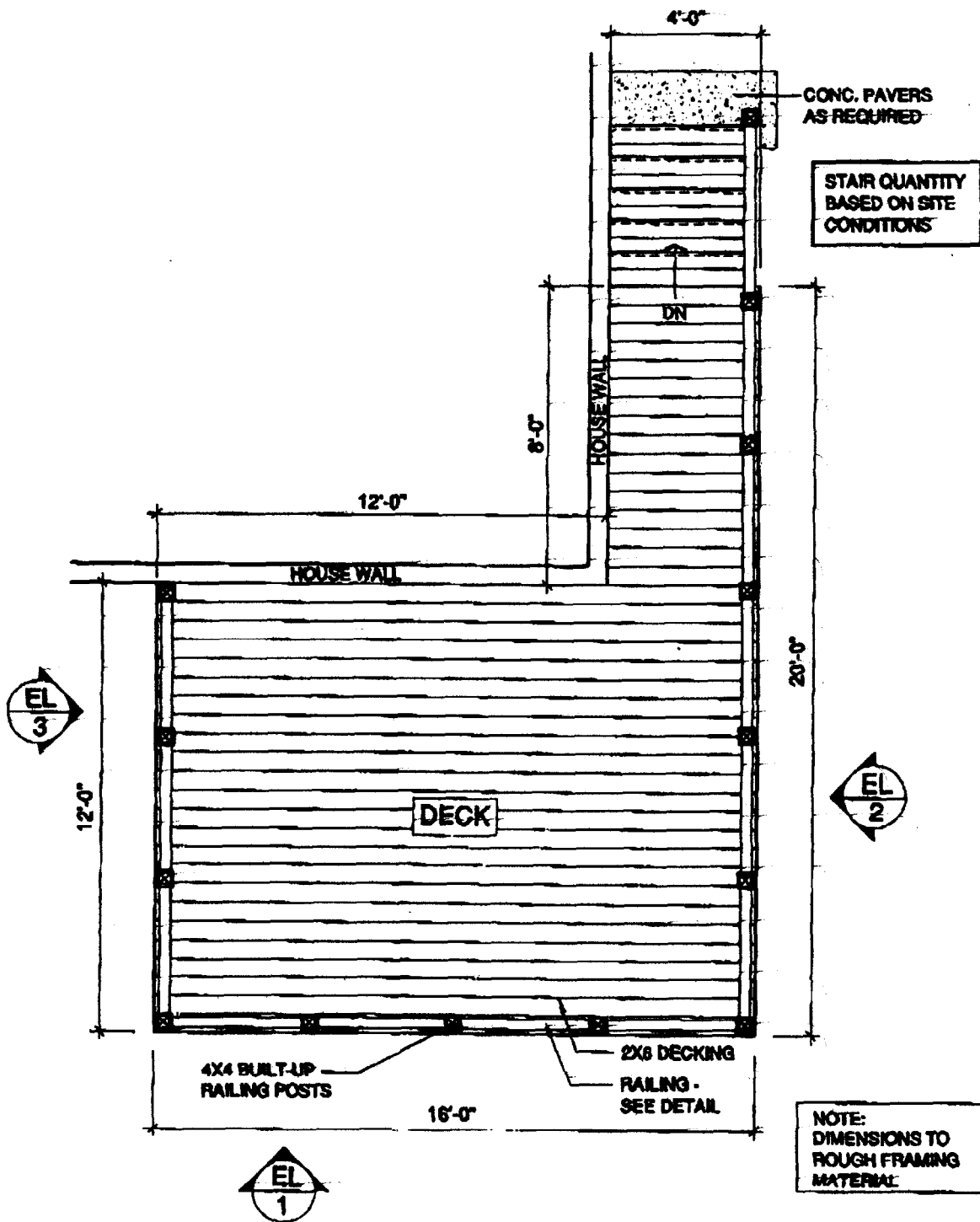
SCALE: 1/4" = 1'-0"

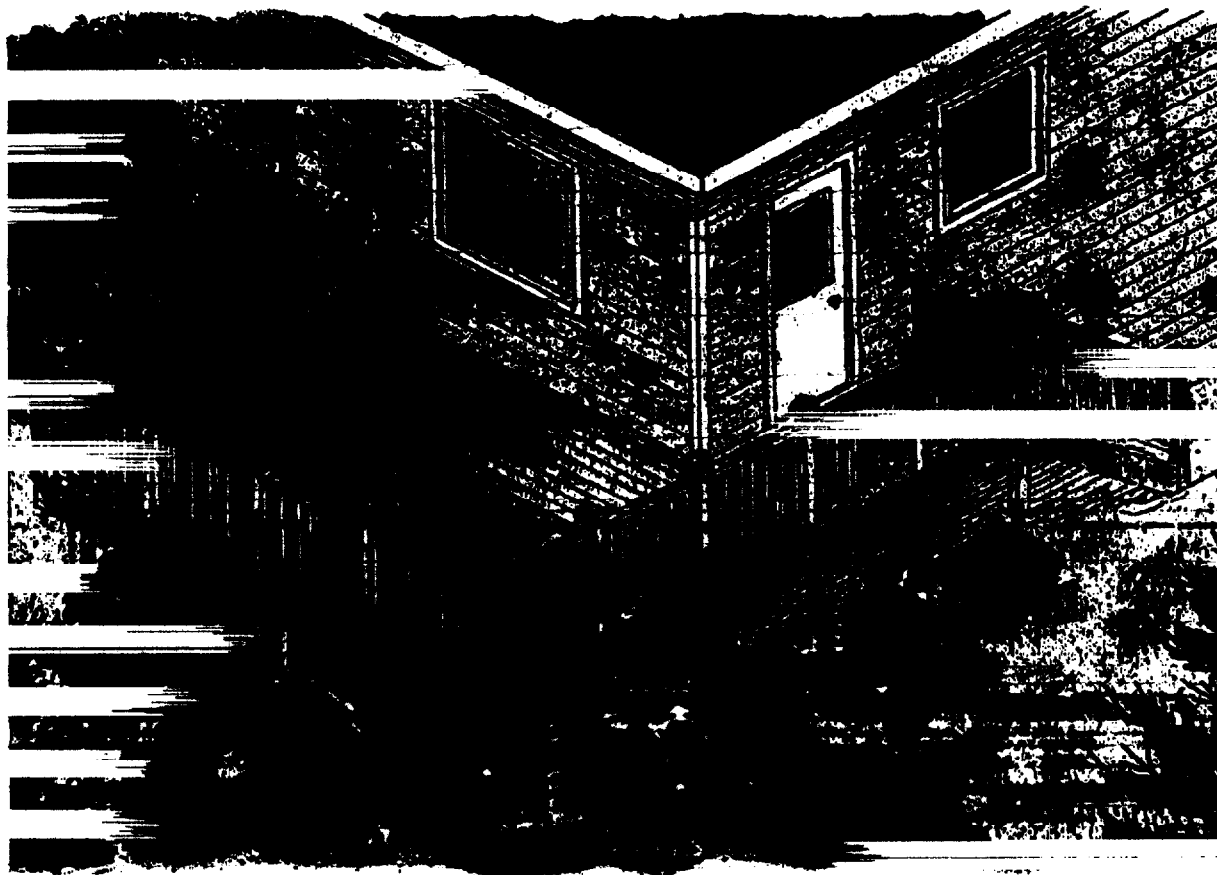
**DETAIL A-A**

SCALE: 1/2" = 1'-0"









THE CLIFTON

HPM-1110

A convenient side-entry stoop with stairway access from the front yard makes this deck ideal for a narrow lot. When no access is possible from the back of the home, this functional deck fits the bill. Enjoy all types of outdoor activities atop the deck; use the space below to shelter oversized outdoor items.

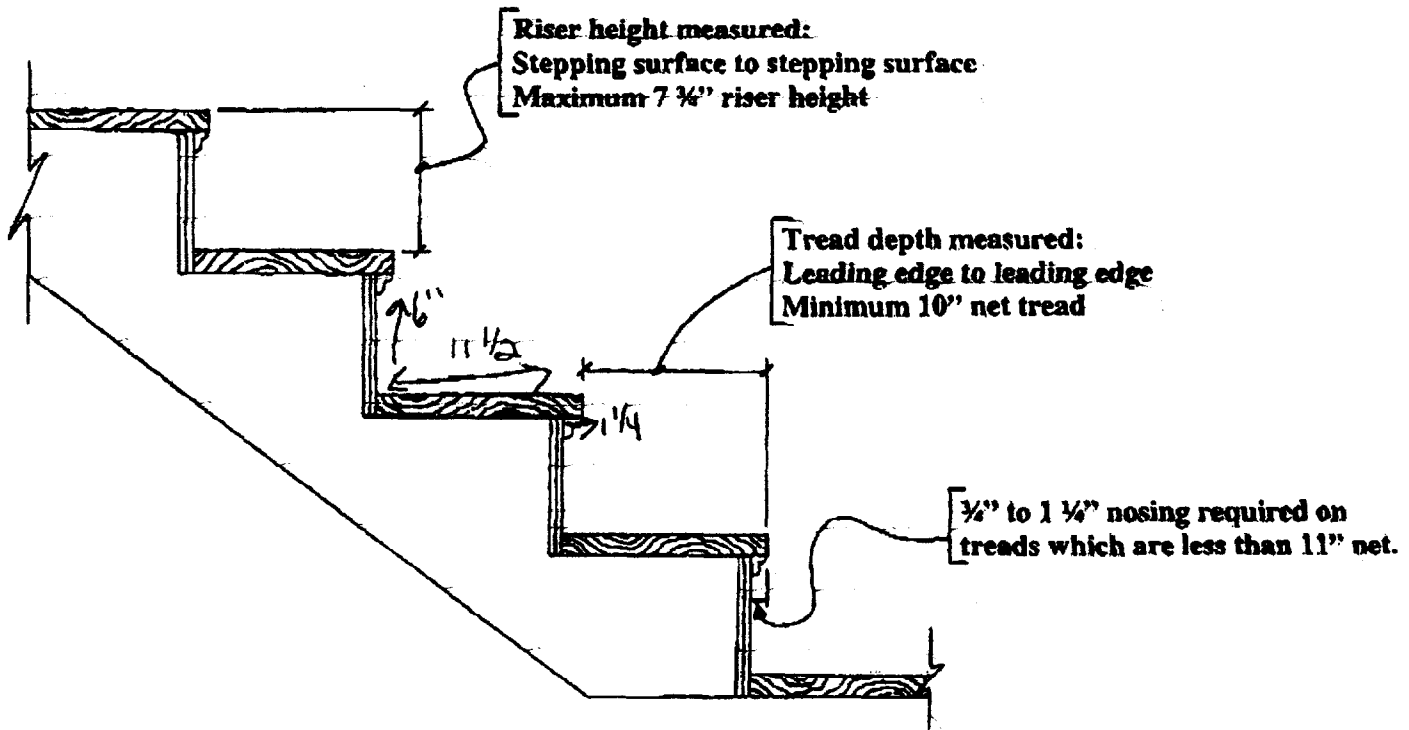
Dimensions for this deck are 16' X 12'.

**TREAD & RISER DIMENSIONS
ONE & TWO FAMILY
1999 BOCA NATIONAL BUILDING CODE
SECTION 1014.6 TREADS & RISERS**

In occupancies in 1 and 2 family dwellings (Use Group R-3) and in accessory occupancies (shed, garages, etc.) to 1 and 2 family dwellings the following are the tread and riser requirements:

The **MAXIMUM** riser height shall be $7\frac{3}{4}"$ and the minimum riser height shall be $4"$. The **MINIMUM** tread depth shall be $10"$ (measured from leading edge of tread to leading edge of tread). A nosing not less than $\frac{3}{4}"$ but not more than $1\frac{1}{4}"$ SHALL be required on treads where the depth is less than $11"$. Openings in risers shall not exceed $4"$.

Correct method of measuring treads and risers:



Please note: To achieve a minimum $10"$ net tread the stringer must be cut to $10"$.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

☒ **Pre-construction Meeting:** Must be scheduled with your inspection team upon receipt of this permit. Jay Reynolds, Development Review Coordinator at 874-8632 must also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

☒ **Footing/Building Location Inspection:** Prior to pouring concrete

☒ **Re-Bar Schedule Inspection:** Prior to pouring concrete

☒ **Foundation Inspection:** Prior to placing ANY backfill

☒ **Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling

☒ **Final/Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

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.

☒ **CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED**

[Signature]
Signature of applicant/designee

6/27/03
Date

[Signature]
Signature of Inspections Official

6/27/03
Date

CBL: 437 D 012 Building Permit #: 03 07 34