

Town of Long Island



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BUILDING PERMIT APPLICATION# 613

LOT# 805 ZONE IR1 LOT SIZE _____ STREET LOCATION 859 Island Ave
14 Apple tree Ln.

OWNER/APPLICANT Jonathan + Wylie Morini

OWNER/APPLICANT ADDRESS 222 Chace Mill Rd Sterling MA 01564

TELEPHONE HOME _____ WORK _____ CELL 617-594-4954

CONTRACTOR _____

ADDRESS _____

TELEPHONE WORK _____ CELL _____ JOB SITE _____

EMAIL _____

APPLICATION TYPE

____ NEW PRINCIPAL STRUCTURE X ADDITION ____ RELOCATION
____ NEW ACCESSORY STRUCTURE ____ ALTERATION ____ REPLACEMENT
____ REPAIR

PROJECT DESCRIPTION (BRIEF EXPLANATION OF WORK TO BE DONE):

- 20'x22' Addition on North side of house. Addition will be a Family room with bath and Pantry
- Continue existing wrap around porch from west side of house to the North connecting to Addition

DIMENSIONS OF PROPOSED STRUCTURE 20'x22' w/ 24'x10' porch

PROPOSED FOUNDATION TYPE:

____ FULL 10' ____ FULL 8' ____ 4' FROST WALL X PIER ____ SLAB

SETBACKS OF PROPOSED STRUCTURES (MUST BE SHOWN ON "REQUIRED" SITE PLAN)

FRONT 98' FT SIDES 39' FT / 47' FT REAR 36' FT

BUILDING HEIGHT

THE VERTICAL DISTANCE FROM THE AVERAGE ORIGINAL GRADE TO THE TOP OF THE HIGHEST ROOF BEAMS OF A FLAT ROOF, OR TO THE MEAN LEVEL OF THE HIGHEST GABLE OR SLOPE OF GABLE OR HIP ROOF. (MAX 35' ALLOWED)

EXISTING STRUCTURES ± 30' FTPROPOSED STRUCTURES ± 20' FT**FOR STRUCTURES TO BE OCCUPIED OR FOR AN INCREASE IN THE # OF BEDROOMS TO BE SERVICED BY PRIVATE SEPTIC SYSTEM:**# OF EXISTING BEDROOMS 4 # OF ADDITIONAL BEDROOMS 0**CEO PERMIT CHECKLIST:**

SEASONAL CONVERSION	<u>YES</u>	<input checked="" type="checkbox"/> <u>NO</u>
SEPTIC REVIEW NEEDED	<u>YES</u>	<input checked="" type="checkbox"/> <u>NO</u>
SEPTIC DESIGN NEEDED	<u>YES</u>	<input checked="" type="checkbox"/> <u>NO</u>
EXISTING LOT COVERAGE	<u> </u>	OVER ON COVERAGE <u> </u> <u>YES</u> <u> </u> <u>NO</u>

11.6% total

NO BUILDING HEREAFTER ERECTED SHALL BE OCCUPIED OR USED, IN WHOLE OR IN PART, UNTIL A CERTIFICATE OF OCCUPANCY SHALL HAVE BEEN ISSUED BY THE CODE ENFORCEMENT OFFICER.

MINIMUM OF THREE INSPECTION REQUIRED FOR ALL CONSTRUCTION WORK.

1. FOUNDATIONS (FOOTINGS, WALLS, DRAINAGE, WATER PLUG)
2. FRAMING (PRIOR TO COVERING STRUCTURAL MEMBERS)
3. FINAL INSPECTION BEFORE OCCUPANCY

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING AND SHORELAND CONSTRUCTION MAY REQUIRE MAINE DEP PERMIT

THIS PERMIT APPLICATION DOES NOT PRECLUDE THE APPLICANT(S) FROM MEETING APPLICABLE STATE AND FEDERAL RULES.

THIS PERMIT WILL BE COME NULL AND VOID IF CONSTRUCTION IS NOT STARTED WITHIN SIX MONTHS OF PERMIT ISSUE DATE.

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS THEIR AGENT. I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF THIS PERMIT IS ISSUED, I CERTIFY THAT THE CODE OFFICIAL OR HIS REPRESENTATIVE SHALL HAVE THE AUTHORITY TO ENTER ALL AREAS COVERED BY SUCH PERMIT AT ANY REASONABLE HOUR FOR THE PURPOSES OF INSPECTING SAID WORK.

PRINTED NAME Jonathan Morini OWNER/AUTHORIZED AGENTSIGNED *Jon Morini* DATE ~~12/9/2020~~ 4/23/21
OWNER / AUTHORIZED AGENTAPPROVED BY CODE ENFORCEMENT OFFICER YES NOSIGNED *[Signature]* DATE 4/23/21ESTIMATED COST INCLUDING MATERIALS & LABOR \$ 45,000PERMIT FEE: 294.00 PAID: CASH CHECK# 2350
(SEE PAGE 4 FOR PERMIT FEE SCHEDULE)

FOR MORTGAGE LENDER USE ONLY

GENERAL NOTES: (1) DISTANCES SHOWN ARE TAKEN FROM PROVIDED TITLE REFERENCES SHOWN BELOW. (2) THE PURPOSE OF THIS INSPECTION IS TO RENDER AN OPINION AS FOLLOWS: A) DWELLING AND ACCESSORY STRUCTURE'S COMPLIANCE WITH RESPECT TO MUNICIPAL ZONING SETBACKS, AND B) FLOOD HAZARD DETERMINATION BY HORIZONTAL SEALING ON BELOW REFERENCED FEMA MAP. (3) THIS INSPECTION EXCEPTS OUT ALL TECHNICAL STANDARDS CURRENTLY SET FORTH BY STATE OF MAINE BOARD OF LANDSURVEY FOR PROFESSIONAL LAND SURVEYORS. (4) THIS INSPECTION IS TO BE USED ONLY BY THE BELOW LISTED LENDER, TITLE ATTORNEY & TITLE INSURER AND IS NOT TO BE USED BY ANOTHER PARTY FOR BOUNDARY LINE LOCATIONS OR LAND TITLE OPINIONS. (5) A BOUNDARY SURVEY SHOULD BE PERFORMED TO RENDER A PROFESSIONAL OPINION PERTAINING TO BOUNDARY LINE LOCATIONS, EASEMENTS, RIGHTS OF WAY, ENCUMBRANCES, ENCROACHMENTS, AND/OR CONFLICTS WITH ANOTHER'S DEEDS.

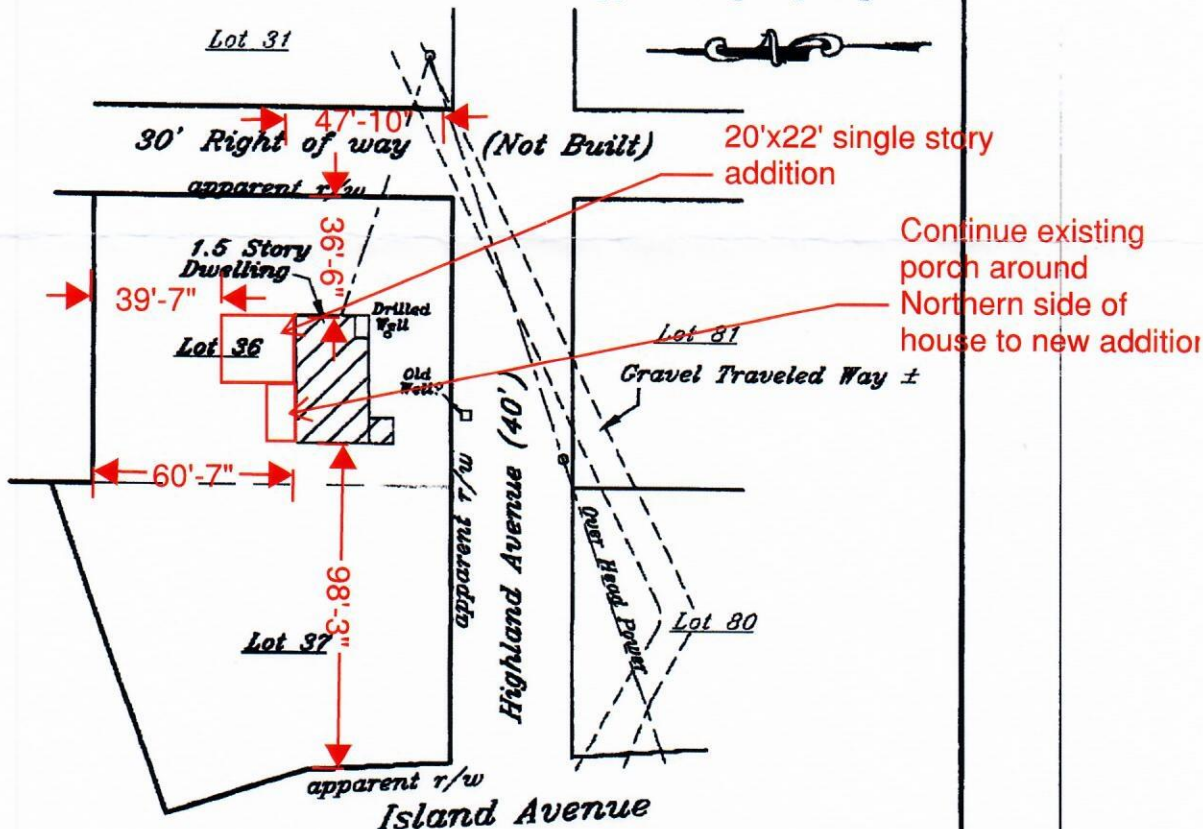
**THIS SKETCH IS NOT TO BE USED FOR CONSTRUCTION PURPOSES
THE LOCATION OF IMPROVEMENTS SHOWN ARE APPROXIMATE ONLY.**

ADDRESS: 859 Island Avenue
Long Island, Maine

INSPECTION DATE: 4-11-07

SCALE: 1" = 50'

Note: The traveled way and power lines fall outside the apparent right of way.



INSP. BY CJP

SEE PROVIDED TITLE REFERENCES FOR APPLICABLE APPURTENANCES, IF ANY.

APPLICANT: Jeffrey M. Green & Corinne L. Hood REQ. PARTY: Atlantic Title Company

OWNER: Dana Peterson

ATTORNEY:

LENDER: NE Moves Mortgage LLC

FILE No. 20720240

CLIENT No. 1305343

TITLE REFERENCES:

DEED BOOK: 15111 PAGE: 218

PLAN BOOK: 6 PAGE: 44 LOT: 36, 37

COUNTY: Cumberland

MUNICIPAL REFERENCE:

MAP: 103 BLOCK: B LOT: 1, 2

THE DWELLING DOES NOT FALL WITHIN A SPECIAL FLOOD HAZARD ZONE PER FEMA COMMUNITY MAP No. 230051
PANEL: 4B ZONE: C DATE: 12-8-98

THE DWELLING WAS IN COMPLIANCE WITH MUNICIPAL ZONING SETBACK REQUIREMENTS AT THE TIME OF CONSTRUCTION.

COMMENTS: The gravel traveled way shown above appears to be used to access this property.

A Boundary Survey is recommended for an accurate location.

James D. Nadeau, LLC
Professional Land Surveyors

918 BRIGHTON AVENUE
PORTLAND, ME 04106

PH (207) 878-7070
FAX (207) 878-7071

THIS INSPECTION IS VALID ONLY WITH AN EMBOSSED SEAL AND IS NULL & VOID 90 DAYS AFTER INSPECTION DATE.

THIS IS NOT A BOUNDARY SURVEY - NOT FOR RECORDING