Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERM

tion⊿

Permit Number: 061639

epting this permit shall comply with all

nances of the City of Portland regulating

ctures, and of the application on file in

| This is to certify that | THOMPSON ERICA E /n/: | | | | |
|-------------------------|--------------------------|---------|--|---------------|------|
| has permission to | Change of use Home Occup | n / Day | | | |
| AT 31 LAFAYETTES | T | | | . 014 C013001 | |

rm or

ine and of the

e of buildings and

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

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

ification of insper on mustern and volen permoon procedure this ilding of the there is need or the second of the s

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

EXPIRE

OTHER REQUIRED APPROVALS

Fire Dept.

Health Dept.

Appeal Board

Other

Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

| City of Portland, M | Iaine - Bui | lding or Use | Permi | it Applicatio | n F | ermit No: | Issue Date | : | CBL: | |
|---|------------------------------------|--------------------------------------|------------------------------------|-----------------------------------|-------------------------------|--|------------------------|----------------------|----------------------------|----------------------|
| 389 Congress Street, | 04101 Tel: | (207) 874-8703 | 3, Fax: | (207) 874-871 | 6 | 06-1639 | | | 014 C | 013001 |
| Location of Construction: | | Owner Name: | | | Owi | er Address: | | | Phone: | |
| 31 LAFAYETTE ST THOMPSON | | | ERICA | E | 31 LAFAYETTE ST | | | | | |
| Business Name: Contractor Nam | | | e: | | Con | tractor Address: | | | Phone | |
| n/ a | | n/a | | | Po | rtland | | | İ | |
| Lessee/Buyer's Name Phone: | | Phone: | | | Pern | nit Type: | | | | Zone: |
| | | | | j | Cr | ange of Use | Home Occu | pation | | 1 Kt |
| Past Use: | | Proposed Use: | | | Per | mit Fee: | Cost of Wor | ·k: | CEO District: | |
| Residential 4 unit | | Residential 4 unit Change of use: to | | \$225.00 \$225 | | 25.00 | 1 | | | |
| | | | | occupation use | FIR | E DEPT: | Approved | INSPI | ECTION: | |
| | | in the owner's | first flo | or dwelling | | L | Denied | Use G | roup: | Type: |
| | | unit | | | | I | Demed | | | |
| | | ĺ | | | | | | ļ | | |
| Proposed Project Description | n: | <u> </u> | | | 1 | | | | | |
| Change of use to add a | day care hom | e occupation use | in the | owner's first | Sign | ature: | | Signat | ure: | |
| floor dwelling unit. | | | | | PEDESTRIAN ACTIVITIES DISTRIC | | | FRICT | CT (P.A.D.) | |
| | | | | | Acti | оп: Аррго | ved Ap | proved v | v/Conditions | Denied |
| | | | | | | | | | L | |
| | | | | | Sigr | nature: | | | Date: | |
| Permit Taken By: | li l | pplied For: | | | | Zoning | Approva | al | | |
| dmartin | 11/0 | 6/2006 | | | | T ====: | | | | |
| 1. This permit applica | | | Special Zone or Reviews Shoreland | | ws | ws Zoning Appeal | | ł | Historic Preservation | |
| Applicant(s) from 1 Federal Rules. | neeting appli | cable State and | | | | [] Variance | | | Not in District or Landmar | |
| 2. Building permits do not include plumbing, septic or electrical work. | | ☐ Wetland ☐ Miscel | | aneous | Does Not Require Re | | equire Review | | | |
| 3. Building permits are void if work is not started within six (6) months of the date of issuance. | | | Flood Zone | | Conditional Use | | | Requires Review | | |
| False information may invalidate a building permit and stop all work | | Subdivision | | [] Interpretation | | | Approved | | | |
| | | |] Si | te Plan | | Approv | ed | | Approved w | /Conditions |
| | | | Maj | Minor MM | F. | Denied | | | Denied | \searrow |
| | | | Date | of a Circle | 2) / | Date: | |], | Date: | |
| I hereby certify that I am I have been authorized b jurisdiction. In addition shall have the authority t such permit. | y the owner to , if a permit fo | o make this appl or work describe | med prication d in the | as his authorize application is i | ne pro d age ssued | oposed work in and I agree, I certify that | to conform the code of | to all a ficial's | applicable laws | of this oresentative |
| SIGNATURE OF APPLICAN | | | | ADDRES | | | DATE | | PHO | ONE |
| | | | | | | | | | | |
| | | | | | | | | | | 2005 |
| RESPONSIBLE PERSON IN | CHARGE OF V | VORK. TITLE | | | | | DATE | | PHO | ONE |



STATE OF MAINE

Department of Health & Human Services

Certificate of Approval

FAMILY CHILD CARE PROVIDER

This is to certify that the licensed entity named below is hereby granted this License in accordance with Maine law.

| ISSUED TO: | I.D. # | 443825 | |
|-------------------------------------|----------------|-----------------------------|---------------------|
| THOMPSON, ERICA | TYPE | E:FULL | _ |
| THE SCHOOLHOUSE 31 LAFAYETTE STREET | EFFECTIVE FROM | M: 05/26/2007 TO 05/26/2008 | - |
| PORTLAND ME 04101- | CHILD CARE | CAPACITY 12 | AGE 0 - 12 SEX Both |

Commissioner, Department of Health & Human Services

The Schoolhouse

Ms. Marge Schmuckal
Zoning Administrator
Department of Urban Development
City of Portland
389 Congress Street
Portland, Maine 04101

Dear Ms. Schmuckal,

I am requesting a permit to allow me the use of my residence at 31 Lafayette Street for a home occupation. I intend to use it as a fully licensed, Home Daycare for six children, an acceptable home occupation #18.

The following is an explanation of how my home occupation meets the criteria listed.

- My home occupation will occupy approximately 342 square feet (23%) of floor area of the residence.
- No goods will be stored, displayed, or be visible from outside the residence.
- Storage of the material necessary to perform my occupation are minimal and are included in above space.
- There will be no external signage related to my home occupation.
- No exterior alterations to the residence are necessary.
- There is no need for parking.
- No objectionable effects will result from my home occupation.
- I will not require the services of any employees.
 - No additional traffic will be generated by my home occupation.

There will be no motor vehicles of any kind being stored on the property in connection with my home occupation.

As you can see, my home occupation is a secondary and incidental use of my residence. The external activity level and impact is negligible and in keeping with the residential character of the neighborhood.

Attached, you will find a copy of a floor plan showing my entire dwelling and area of the home occupation space (shaded area).

Thank you for your assistance in this matter.

Ereca Thompson

Sincerely,

Erica Thompson

Director

The Schoolhouse

DEC ~=

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 Parcel ID Location

Land Use

1 of 1 014 C013001 31 LAFAYETTE ST

FOUR FAMILY

Owner Address

THOMPSON ERICA E 31 LAFAYETTE ST PORTLAND ME 04101

Book/Page Legal 20400/154

14-C-13 LAFAYETTE ST 29-31

4050 SF

Current Assessed Valuation

Land \$92,700 Building \$239,600

Total \$332,300

Property Information

Year Built 1885

Old Style

Story Height

Sq. Ft. 3234

Total Acres

0.093

Bedrooms

Full Baths

Half Baths

Total Rooms 16

Attic Full Finsh Basement Full

Outbuildings

Туре

Quantity

Year Built

Size

Grade

Condition

Sales Information

| Date | | | | | | |
|------------|--|--|--|--|--|--|
| 10/01/2003 | | | | | | |
| 08/01/1998 | | | | | | |
| 09/01/1995 | | | | | | |

Туре LAND + BLDING LAND + BLDING LAND + BLDING

Price \$412,000 \$168,000 \$118,000

Book/Page 20400-154 14102-226 12062-054

Picture and Sketch

Picture

Sketch

Таж Мар

Click here to view Tax Roll Information.

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

New Search!



14-C-13 31 LA Fagette St

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: MA | 31 Lafa | jetle St. | Portland | Maine 0410 |
|--|--|--|----------------------------------|--|
| Total Square Footage of Proposed Structu | ure S | Square Footage | of Lot | |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# | Owner: ER | CICA THOMP | 50N | Telephone: (247)253-5125 |
| Lessee/Buyer's Name (If Applicable) | telephone: | ime, address & | l w | cost Of Vork: \$ ee: \$ |
| Current use: 4 UMIT NISIAA If the location is currently vacant, what we | ntial | | | 12/27/07 See letter |
| Approximately how long has it been vaca Proposed use: | ant: - Mid | Care-fa | amily d | ay care home; |
| Contractor's name, address & telephone: Who should we contact when the permit Mailing address: | / · / · / · / · / · / · · | ica Inomy | 1427/07 0507) - | 12th 253.5125 |
| We will contact you by phone when the preview the requirements before starting a and a \$100.00 fee if any work starts before | ny work, with c | a Plan Reviewer. | | |
| F THE REQUIRED INFORMATION IS NOT INCL DENIED AT THE DISCRETION OF THE BUILDING NFORMATION IN ORDER TO APROVE THIS PI | S/PLANNING D | | | |
| hereby certify that I am the Owner of record of the reave been authorized by the owner to make this appurisdiction. In addition, if a permit for work described in all have the authority to enter all areas covered by this permit. | lication as his/her in this application i | authorized agent. I d is issued, I certify that | agree to confo the Code Offic | rm to all applicable laws of this cial's authorized representative |

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

Date: /

nimpin

Signature of applicant:

FIRST FLOOR DWELLING UNIT FOR HOME OCCUPATION

