

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

Location of Construction: 511 Cumberland Ave		Owner: Lois Phillips & Mark Tenney		Phone: 775-2279/775-4927		Permit No: <b>98063</b>	
Owner Address: SAA #XX #1 Portland, ME		Lessee/Buyer's Name: Kathleen B. Bremer		Phone: 879-4268		BusinessName:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>JUN 18 1998</b>  <b>CITY OF PORTLAND</b> </div>	
Past Use: <del>XXXX</del> Multi		Proposed Use:		COST OF WORK: \$ _____ PERMIT FEE: \$ 25.00			
Proposed Project Description:  Change Use/Home Occupation TO Apt #1  Therapist		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____		INSPECTION: Use Group: Type: BOCA 96 Signature: <i>Huffman</i>		Zone: <i>R-7</i> CBL: 048-F-016 Zoning Approval: <i>OK with conditions</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		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"/>	
Permit Taken By: VD		Date Applied For: 09 June 1998					

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..

**PERMIT ISSUED WITH REQUIREMENTS**

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: 10 June 1998 PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

- Zoning Appeal**
- Variance
  - Miscellaneous
  - Conditional Use
  - Interpretation
  - Approved
  - Denied

- Historic Preservation**
- Not in District or Landmark
  - Does Not Require Review
  - Requires Review

- Action:**
- Approved
  - Approved with Conditions
  - Denied

Date: *[Signature]*

CEO DISTRICT 1  
*m.w.s*

**THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED**

**Building or Use Permit Pre-Application  
Additions/Alterations/Accessory Structures  
To Detached Single Family Dwelling**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

**NOTE\*\*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: <i>511 Cumberland Ave.</i>			
Tax Assessor's Chart, Block & Lot Number Chart# <i>48</i> Block# <i>F</i> Lot# <i>16</i>	Owner: <i>LOIS PHILLIPS &amp; MARK TENNEY</i>	Telephone#: <i>775-4927</i> <i>775-2279</i>	
Owner's Address: <i>APT 1</i> <i>511 CUMBERLAND AVE.</i>	Lessor/Buyer's Name (If Applicable) <i>879-4268</i> <i>RATHGEO B. BREMER</i>	Cost Of Work: <i>\$ 0</i>	Fee: <i>\$25.00</i>
Proposed Project Description: (Please be as specific as possible) <i>IN HOME OCCUPATION / change</i>			
Contractor's Name, Address & Telephone <i>N/A</i>		Rec'd By: <i>Vicki Sover</i>	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must Include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan (Sample Attached)

If there is expansion to the structure, a complete plot plan (Site Plan) must include:

- The shape and dimension of the lot, all existing buildings (if any), the proposed structure and the distance from the actual property lines. Structures include decks porches, a bow windows cantilever sections and roof overhangs, as well as, sheds, pools, garages and any other accessory structures.
- Scale and required zoning district setbacks

**4) Building Plans (Sample Attached)**

A complete set of construction drawings showing all of the following elements of construction:

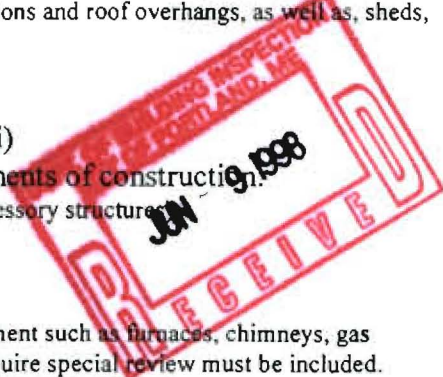
- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

**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/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: <i>[Signature]</i>	Date: <i>6-2-98</i>
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Site Review Fee: \$150.00/Building Permit Fee: \$25.00 for the 1st \$1000.cost plus \$5.00 per \$1,000.00 construction cost thereafter.



LAND USE - ZONING REPORT

ADDRESS: 511 Cumberland Ave - Apt #1 DATE: June 15, 1998

REASON FOR PERMIT: change of use from apt to apt with H.O. AS Therapist

BUILDING OWNER: Lois Phillips & Mark Tenney-B.L. 48-F-16

PERMIT APPLICANT: KATHLEEN B. BREMER

APPROVED: with conditions DENIED: \_\_\_\_\_

#1, #7

CONDITION(S) OF APPROVAL

1. During its existence, all aspects of the Home Occupation criteria, Section 14-410, shall be maintained.
2. The footprint of the existing \_\_\_\_\_ shall not be increased during maintenance reconstruction.
3. All the conditions placed on the original, previously approved, permit issued on \_\_\_\_\_ are still in effect for this amendment.
4. Your present structure is legally nonconforming as to rear and side setbacks. If you were to demolish the building on your own volition, you will not be able to maintain these same setbacks. Instead you would need to meet the zoning setbacks set forth in today's ordinances. In order to preserve these legally non-conforming setbacks, you may only rebuild the garage in place and in phases.
5. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
6. Our records indicate that this property has a legal use of \_\_\_\_\_ units. Any change in this approved use shall require a separate permit application for review and approval.
7. Separate permits shall be required for any signage, under home occupation guidelines
8. Separate permits shall be required for future decks and/or garage.
9. Other requirements of condition \_\_\_\_\_

Marge Schmuckal Marge Schmuckal, Zoning Administrator,  
Asst. Chief of Code Enforcement

511 Cumberland Avenue  
Portland, ME 04101

June 1, 1998

Marge Schmuckal  
Zoning Administrator  
Portland City Hall  
389 Congress Street  
Portland, ME 04101

Ms. Schmuckal:

The purpose of this letter is to inform you that I have given permission to my first floor tenant, Kathleen B. Bremer, to conduct an in home counseling service out of her apartment at the above address. Ms. Bremer's apartment is spacious and does have parking available.

Sincerely,



Mark Tenney  
Building Owner

511 Cumberland Ave.  
Portland, ME 04101

June 1, 1998

Marge Schmuckal  
Zoning Administrator  
Portland City Hall  
389 Congress Street  
Portland, ME 04101

Ms. Schmuckal:

RE: Application for Home Occupation Permit

I am a Clinical Counselor and wish to be able to see clients in my home. I believe that the outlined criteria have been met as indicated below. Additionally, I have obtained permission from my landlord, as evidenced by the enclosed letter, to provide counseling services out of my first floor apartment. In addition to being spacious, the apartment has both front and rear entrances. We are located directly across the street from PROP. Since I will be working with a number of DHS children, the location is most convenient.

1. Criteria

- a. As described in the attached layout of my apartment, 19% of the total floor space would be used for the counseling office.
- b. Due to the type of business, counseling, there would be no goods or materials to be displayed or stored.
- c. No space required. Any materials would be available, on shelves, for client use.
- d. The only sign would be a small brass name plate on the exterior door.
- e. No exterior alterations are required.
- f. The building has ample off street parking.
- g. Relative to the items listed in item g, these are not applicable to a counseling service.
- h. There will be no employees other than myself.

- i. Due to the nature of the occupation, there will be no noticeable difference in traffic volume.
- j. Not applicable given the nature of the occupation.

2. Type of Business

- i. Dentists, doctors, therapists, and health care practitioners.

3. Not Applicable

Business type falls within those categories listed in paragraph 2.

Division 25. Space and Bulk Regulations and Exceptions

This section is not applicable. No physical changes are required to either the building or the land/yard.

I will be happy to provide any additional information you require in order to issue an in home occupation permit.

Sincerely,



Kathleen B. Bremer

Apartment	Layout		Sq. Feet	
	Room Size			
LR	13.5 x 15		202.50	
<b>DR</b>	<b>13 x 15</b>		<b>195.00</b>	<b>To be used as counseling office</b>
Hall	3 x 30		90.00	
Bath	7.5 x 6.5		48.75	
Bedroom	10.5 x 12		126.00	
Bedroom	10.5 x 2		131.25	
Plus	10.5 x 10.5			
Kitchen	13 x 14		182.00	
Pantry	7 x 6		42.00	
Total Sq Ft			1017.50	
<b>Office Space</b>			<b>195.00</b>	<b>Office equals 19% of total floor space</b>

