

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED

Permit Number: 070416

MAY 21 2007

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that KYNES SANDRA J /n/ a

has permission to change of use from a 2 unit residential to professional occupation Massage therapist, Yoga instructor and writer

AT 27 MAY ST 057 C008001

provided that the person or persons, firm or corporation accepting 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 procured before this building or part thereof is altered or closed-in. 24 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

Signature: [Handwritten Signature] 5/15/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 07-0416	Issue Date:	CBL: 057 C008001
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Location of Construction: 27 MAY ST	Owner Name: KYNES SANDRA J	Owner Address: 27 MAY ST	Phone:
Business Name:	Contractor Name: n/a	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use Home Occupation	Zone: R6

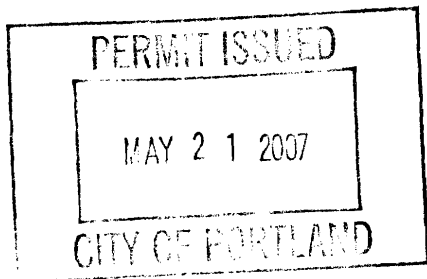
Past Use: Residential 2 unit	Proposed Use: Residential 2 unit change of use from a 2 unit residential to incl home occupation of Massage therapist, Yoga instructor and writer	Permit Fee:	Cost of Work: \$0.00	CEO District: 2
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Proposed Project Description: change of use from a 2 unit residential to incl home occupation of Massage therapist, Yoga instructor and writer	FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied INSPECTION: Use Group: <i>K-3</i> Type: <i>SB</i> Signature: <i>[Signature]</i> Signature: <i>[Signature]</i> PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date:
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Permit Taken By: dmartin	Date Applied For: 04/23/2007	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	Zoning Appeal	Historic Preservation
<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>5/11/07 ABW</i>	<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:	Yes <input 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>Any extenr work requires a separate review & approval thru Historic preservation</i>



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

City of Portland, Maine - Building or Use Permit

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

Permit No: 07-0416	Date Applied For: 04/23/2007	CBL: 057 C008001
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Location of Construction: 27 MAY ST	Owner Name: KYNES SANDRA J	Owner Address: 27 MAY ST	Phone:
Business Name:	Contractor Name: n/ a	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use Home Occupation	

Proposed Use: Residential 2 unit change of use from a 2 unit residential to incl home occupation of Massage therapist, Yoga instructor and writer	Proposed Project Description: change of use from a 2 unit residential to incl home occupation of Massage therapist, Yoga instructor and writer
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 05/11/2007**Note:** Legal use of the building was 2 residential units per pre1957 assessing records. **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) During its existence, all aspects of the Home Occupations criteria, Section 14-410, shall be maintained.
- 3) Separate permits shall be required for any new signage.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 05/15/2007**Note:** **Ok to Issue:**

- 1) This is a Change of Use ONLY permit. It does NOT authorize any construction activities.

Change of Use

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 May Street, Portland</u> <u>04102</u>		
Total Square Footage of Proposed Structure <u>1,123 1st floor apartment</u>	Square Footage of Lot <u>2,504.7</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>57</u> Block# <u>C</u> Lot# <u>8</u>	Owner: <u>Sandra Kynes</u>	Telephone: <u>772-1509</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: \$ <u>N/A</u> Fee: \$
Current use: <u>apartment in 2 family house</u>		
If the location is currently vacant, what was prior use: _____ Approximately how long has it been vacant: _____ Proposed use: _____ Project description: <u>change of use for a home occupation, to add;</u>		<div style="border: 1px solid black; padding: 5px; text-align: center;">DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME APR 23 2007 RECEIVED</div>
Contractor's name, address & telephone: <u>N/A</u>		
Who should we contact when the permit is ready: <u>Sandra Kynes</u> Mailing address: <u>27 May Street, Portland, ME 04102</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>772-1509</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.

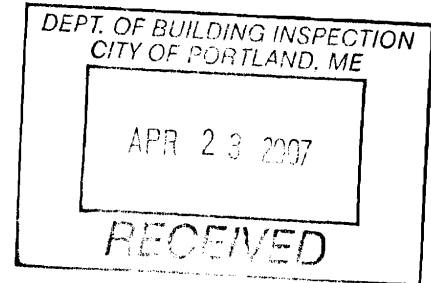
Signature of applicant: <u>Sandra Kynes</u>	Date: <u>4/20/07</u>
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**This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall**

Sandra Kynes
27 May Street, 1st Floor
Portland, Maine 04102
(207) 772-1509 • kynes@kynes.net

April 20, 2007

Ms. Marge Schmuckal
Zoning Administrator
Planning and Development Department
City of Portland
389 Congress Street, Room 315
Portland, Maine 04101



Dear Ms. Schmuckal:

Enclosed is my application for a permit to allow me to use my residence at 27 May Street for a home occupation: I am a massage therapist (licensed with the State of Maine and applying for a Portland business license), yoga instructor (of individual students and pairs) and writer. All three of these endeavors are listed as acceptable home occupations in Section 14-410 of the Portland Zoning Ordinance as items 9, 27 and 5, respectively. My occupation meets the criteria listed in section (a) of the Ordinance as follows:

1. ✓ My home studio occupies approximately 210 square feet of my 1,123 square-foot apartment. (187 1/2)
2. No goods or materials are stored outside or visible from the outside.
3. Storage of all materials for my business is within the studio space.
4. There will be no exterior signage related to my business.
5. There will be no exterior alterations.
6. My property includes a private driveway next to the house. In addition, as my target market is the West End community, I expect many clients will arrive by walking.
7. There will be no objectionable effects generated by my business.
8. I will be the sole employee.
9. Because I work with one or two people at a time, I don't believe it will generate a greater than normal amount of traffic for a residential neighborhood. Also, as noted in number 6 above, I expect many clients will walk.
10. No vehicles near or greater than 6,000 pounds are necessary for my business.

My home occupation will occupy less than 20% of my residence and have negligible impact on the residential character of the neighborhood.

In addition to my permit application, I have enclosed a floor plan showing the dimensions and area of my home occupation, and a check in the amount of \$225.00 for the Change of Use and Certificate of Occupancy fees.

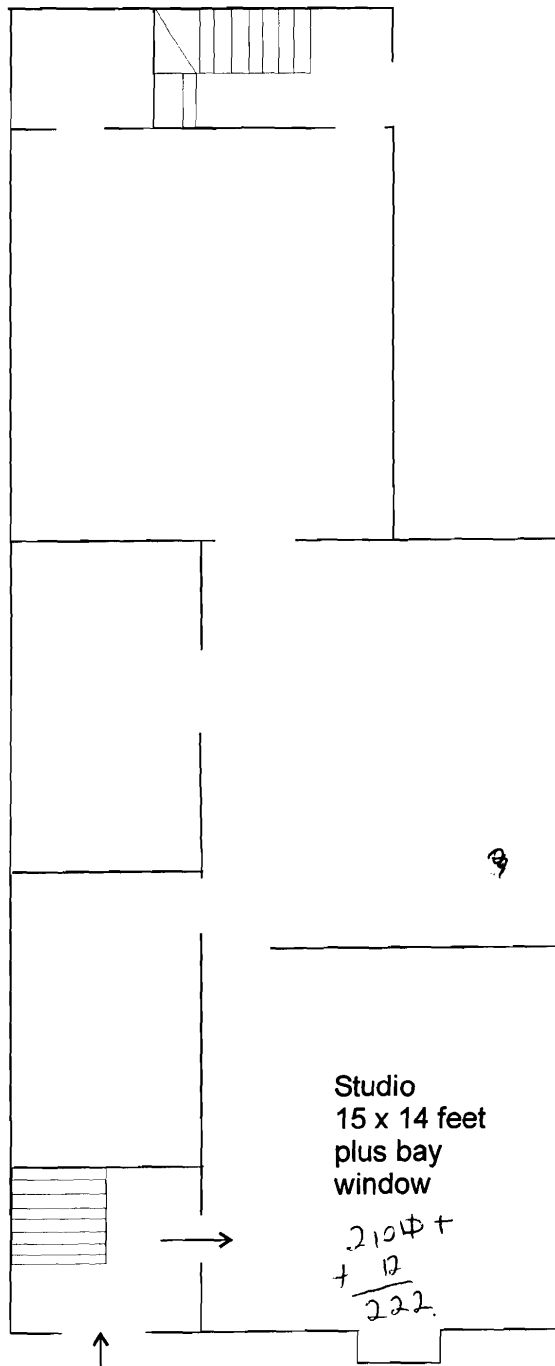
Thank you and I look forward to hearing from you.

Sincerely,

Sandra Kynes

Application for
Change of Use
27 May Street
Portland

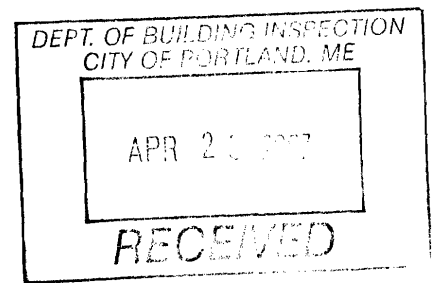
Floor Plan for First Floor
Apartment

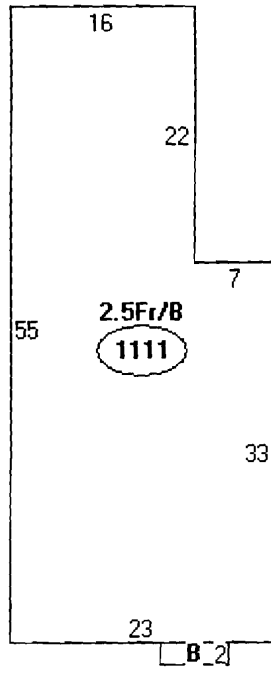


Depth of structure
55 feet

Main entrance at front
of house on May Street

Width of structure
23 feet





Descriptor/Area

A: 2.5Fr/B
1111 sqft

B: 2FBAY/B
12 sqft