City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: Permit No: Location of Construction: Owner: Ward Hand Owner Address: BusinessName: Phone: Lessee/Buyer's Name: Phone: Contractor Name: Address: PERMIT FEE: **COST OF WORK:** Proposed Use: Past Use: 9 1998 \$ 25.00 Residential Residential **FIRE DEPT.** □ Approved INSPECTION: Type: ☐ Denied Use Group: 3 N. U. Signature: Signature: Zoning Approval: 3 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Proposed Project Description: Approved Action: Special Zone or Reviews: Home occupation - massage copy to Judith wolf of Cafe. Approved with Conditions: ☐ Shoreland □ Wetland Denied ☐ Flood Zone ☐ Subdivision Date: Signature: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: UB Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. IN Contidos ☐ Conditional Use 2. ☐ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Approved tion may invalidate a building permit and stop all work.. ☐ Denied Historic Preservation Not in District or Landmark □ Does Not Require Review □ Requires Review Action: □Appoved CERTIFICATION ☐ Approved with Conditions 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 □ Denied 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 10/7/98 PHONE: DATE: ADDRESS: SIGNATURE OF APPLICANT

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

CEO DISTRICT

NO ATTREAMONS- CHANGA OF USA - CONTACT FOR FWAR ON 10-21-98 Front Right Room only on Second Flows		
CHANGA OF USA - CONTAL	V FOR FINA (Q1)	
10-21-98 Front R-54+ R.	com only on Second Flows	
	Inspection Record	
	Type Date Equipolation:	
	Foundation:	
	Plumbing:	
	Final:	
	Other:	



CITY OF PORTLAND, MAJINE Department of Building Inspection

Certificate of Occupancy

LOCATION

(117-8-001)

Issued to

Date of Issue

23 Matcher 1998

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 981160 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Second Floor Apt

Limiting Conditions:

Three Family Dwelling w/Home Occ - 2nd fl Message Therapy

This certificate supersede certificate issued	5
Approved:	

(Date)

Inspector

Inspector of Buildings

LAND USE - ZONING REPORT 113 Fessen ADDRESS: DATE: REASON FOR PERMIT: BUILDING OWNER: CONDITION(S) OF APPROVAL During its existence, all aspects of the Home Occupation criteria, Section 14-410, shall be maintained. The footprint of the existing _____ shall not be increased during maintenance 2. reconstruction. All the conditions placed on the original, previously approved, permit issued on _____ 3. are still in effect for this amendment. Your present structure is legally nonconforming as to rear and side setbacks. If you were 4. 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. This property shall remain a single family dwelling. Any change of use shall require a 5. separate permit application for review and approval. Our records indicate that this property has a legal use of Thee units. Any change in this approved use shall require a separate permit application for review and approval. Separate permits shall be required for any signage, under home occupation quidel Separate permits shall be required for future decks and/or garage. Other requirements of condition____ Marge Schmuckal, Zoning Administrator,

Asst. Chief of Code Enforcement

To Whom It May Concern: Re: Home Occupation I am a lecensed massage h a home office at 113 Fessenden Street in Cortland. My office (2) 8 X8. Shipe are the littless esplays of any kind Record Storage is at Sta Whole d. Shul are me signed. no alterations were made. I see no more than fine Clients Py day Usually 30 hein hetween. diquellas. There ded no Affensus odore, noise de So I am the only therepart wolker y one the Tople day on this Street de Milhen norma me wehicles heed Enclosed please find I letter from my Skelich of apt & office

Judith WOIX 413 Fessenber St Cotton Meo 4103 porch entrance Salward Denoon Kitcher Sidle Landy

Sticken 12x14
Study 12x14
Den 12x13
Bedroom 11x12

1 storage (claset
1 lacendy
1 Bathroom

From: WARD HAND OWNER OF 1/3 Fessenden ST, Portland, M.

To: Whom it May concern

I am the owner of a 3 unit apartment building located at 113 Fessenden st, portland, me. Judy Wolf is the tenant occuping the 2nd floor apartment. Judy has an office on the second floor Which she used for message theraphy. I am aware of her office and have fiven my concent for her to use the space as an office should you need more information you can contact me at! 113 fessenden at or by phone: 207-363-5116

Word Hal

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

Building or Use Permit Pre-Application

Attached Single Family Dwellings/Two-Family Dwelling

Multi-Family or Commercial Structures and Additions Thereto

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

the City, payment arrangements must be r	nade before permits of any kin	id are accepted.
Location/Addressof Construction (include Portion of Building):	assenden St I	20 Hand 11 PO4103
Total Square Footage of Proposed Structure	Square Footage of Lot	20 Han 1 11 CO4103
Tax Assessor's Chart, Block & Lot Number Owner:		Telephone#: 4:772-3.167
Lot#(X)	ARD HAND	0, 363-5716
Owner's Address: 113 Fessenden Sportland Mc04103 Judi	's Name (If Applicable) # The WOI f	Cost Of Work: Fee \$ 10/14 \$
Proposed Project Description:(Please be as specific as possible) Home Occupation	- Massay	so therepuse
Contractor's Name, Address & Telephone		Rec'd By
Current Use: Residential Mult fam	Proposed Use:	e w/ Home Oca
2) A Copy of your Const	Purchase and Sale Agreement ruction Contract, if available Plan/Site Plan oposed projects. The attached	TO THE LAND, ME
4) Buil Unless exempted by State Law, construction docume A complete set of construction drawings showing all of the follow Cross Sections w/Framing details (including porches, de Floor Plans & Elevations Window and door schedules Foundation plans with required drainage and dampproof Electrical and plumbing layout. Mechanical drawings for	ing elements of construction: ecks w/ railings, and accessory st	tructures) EGEDVE
oquipment, 11 v ite equipment (an nandling) or other ty	pes of work that may require spe ification posed work is authorized by the owner o	cial review must be included. of record and that I have been authorized by the
Building Permit Fee: \$25.00 for the 1st \$1000.cost Additional Site review and related fe	t plus \$5.00 per \$1.000.00 constr	ruction cost thereafter.

117-B-1

Left message

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LICENSE INSPECTION SLIP

APPLICANT(S)	CLERK'S OFFICE USE ONLY
BUSINESS	NEW RENEWAL
NAME	CHANGE OF OWNERSHIP
ADDRESS 113 Fesser	den st Date issued 9-24-98
PHONE 772-0002	
TYPE OF	DATE OF APPLICATION:
LICENSE(S) Massage	
	WHITE-Clerk, YELLOW-Inspections, PINK-Fire) wthconditorian
ZONING: AF	PPROVED 151 DENIED ZONE R-5
9/29/93	MynSchmickel
DATE	SIGNATURE OF ZONING ENFORCEMENT OFFICIAL
COMMENTS: (£0 - be S	me Home Occ. Permit is Applied for (unfo Sent)
	(unto Sent)
INSPECTION SERVICES:	APPROVED DENIED
DATE	CICNIA TUDE OF DIGDEGROOD
DATE	SIGNATURE OF INSPECTOR
DATE	SIGNATURE OF CHIEF OR ASST. CHIEF OF INSPECTION
COMMENTS:	
FIRE PREVENTION BUREAU:	APPROVED DENIED
DATE	SIGNATURE OF FIRE PREVENTION OFFICER
COMMENTS:	