

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1027	Issue Date: SEP - 5	CBL: 141 F026001
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Location of Construction: 108 Read St	Owner Name: Fitzgerald Mary Elizabeth	Owner Address: 108 Read St	Phone: 207-828-1929
Business Name: n/a	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Change of Use - Dwellings	Zone: R-3

Past Use: Single Family w/ Massage Room	Proposed Use: Same: Change Use; Guest Room to Massage Room	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	

Proposed Project Description: Change Use; Guest Room to Massage Room	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:

Permit Taken By: cih	Date Applied For: 08/20/2001	Zoning Approval	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>ok with conditions</i> Date: <i>9/4/01</i></p>	<p>Zoning Appeal</p> <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 <p>Date:</p>	<p>Historic Preservation</p> <input checked="" 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 <p>Date: <i>[Signature]</i></p>
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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

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: 108 Read St Portland ME 04103

Total Square Footage of Proposed Structure	Square Footage of Lot <u>5250 sq. ft.</u>
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Tax Assessor's Chart, Block & Lot Chart# <u>141</u> Block# <u>F</u> Lot# <u>006</u>	Owner: <u>MARY E. FITZGERALD</u>	Telephone: <u>828-1929</u>
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Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: \$ _____ Fee: \$ <u>30,00</u>
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Current use: massage room

If the location is currently vacant, what was prior use: extra room / guest room

Approximately how long has it been vacant: —

Proposed use: massage therapy

Project description: change of use from guest room to massage room

Contractor's name, address & telephone: N/A

Who should we contact when the permit is ready: MARY E. FITZGERALD

Mailing address: 108 Read St xx mail
Portland ME 04103

Phone: 828-1929

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: Mary E. Fitzgerald

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND
Date: 8-20-01

This is not a permit, you may not commence ANY WORK until the permit is issued.

RECEIVED

8/20/01
Camp

LAND USE - ZONING REPORT

ADDRESS: 108 Reed St DATE: 9/4/01

REASON FOR PERMIT: Change of use to add a home occupation for
MASSAGE THERAPIST

BUILDING OWNER: Mary E. Fitzgerald C-B-L: 141-F-026

PERMIT APPLICANT: owner

APPROVED: with conditions; #1, #2, #8

CONDITION(S) OF APPROVAL

1. This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
2. During its existence, all aspects of the Home Occupations criteria, Section 14-410, shall be maintained.
3. All the conditions placed on the original, previously approved, permit issued on _____ are still in effect for this amendment, and/or revised permit.
4. The footprint of the existing _____ shall not be increased during maintenance reconstruction.
5. Your present structure is legally nonconforming as to setbacks. If you are to demolish this structure on your own volition, you will only have one (1) year to replace it in the same footprint (no expansions), with the same height, and the same use. Any changes to any of the above shall require that this structure met the current zoning standards.
6. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
7. 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.
8. Separate permits shall be required for any new signage. under Home occupation guidelines
9. Separate permits shall be required for future decks, sheds, pool(s), and/or garage.
10. This is not an approval for an additional dwelling unit. You shall not add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. without special approvals.
11. All of the attached Floodplain forms shall be appropriately filled out, signed, and returned prior to the issuance of any certificates of occupancy.
12. Other requirements of condition: _____

Marge Schmuckal Marge Schmuckal, Zoning Administrator

Meditative Massage

Beth Fitzgerald, LMT
108 Read Street
Portland, Maine 04103
207-828-1929

August 31, 2001

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

received
9/4/01

Dear Mrs. Schmuckal,

I am requesting a permit to allow me to use my residence at 108 Read Street for a home occupation. I am a Massage Therapist, an acceptable home occupation listed under item (2) of section 14-410 of the Portland Zoning Ordinance; specifically, "therapists, and health care practitioners."

The following is an explanation of how my home occupation meets the criteria listed under item (1) of the same.

- a. The room I will use is approximately 95 sq. ft., which is 10% of the overall area: 950 sq. ft.
- b. No goods will be stored, displayed or be visible from outside the residence.
- c. Storage of items necessary to perform my occupation is minimal and can be included in the 95 sq. ft. of floor space mentioned above.
- d. I do not have an exterior sign at present. If I do decide to have one in the future it will be no larger than 6" x 18" and be affixed to the building just above the mailbox on the porch entrance, not extending from the building at all.
- e. No exterior alterations are required.
- f. I see only one client at a time, never overlapping clients, so the driveway is adequate for parking needs.

g. No objectionable effects will result from my home occupation.

h. I will not require the services of any employees.

i. I hope to generate a business of 2 clients a day eventually, which will be an insignificant traffic increase on Lead Street.

j. No vehicles even nearing a gross weight of 6,000 pounds are necessary for my home occupation.

The external activity level and impact of my home occupation is negligible and in keeping with the residential character of the neighborhood.

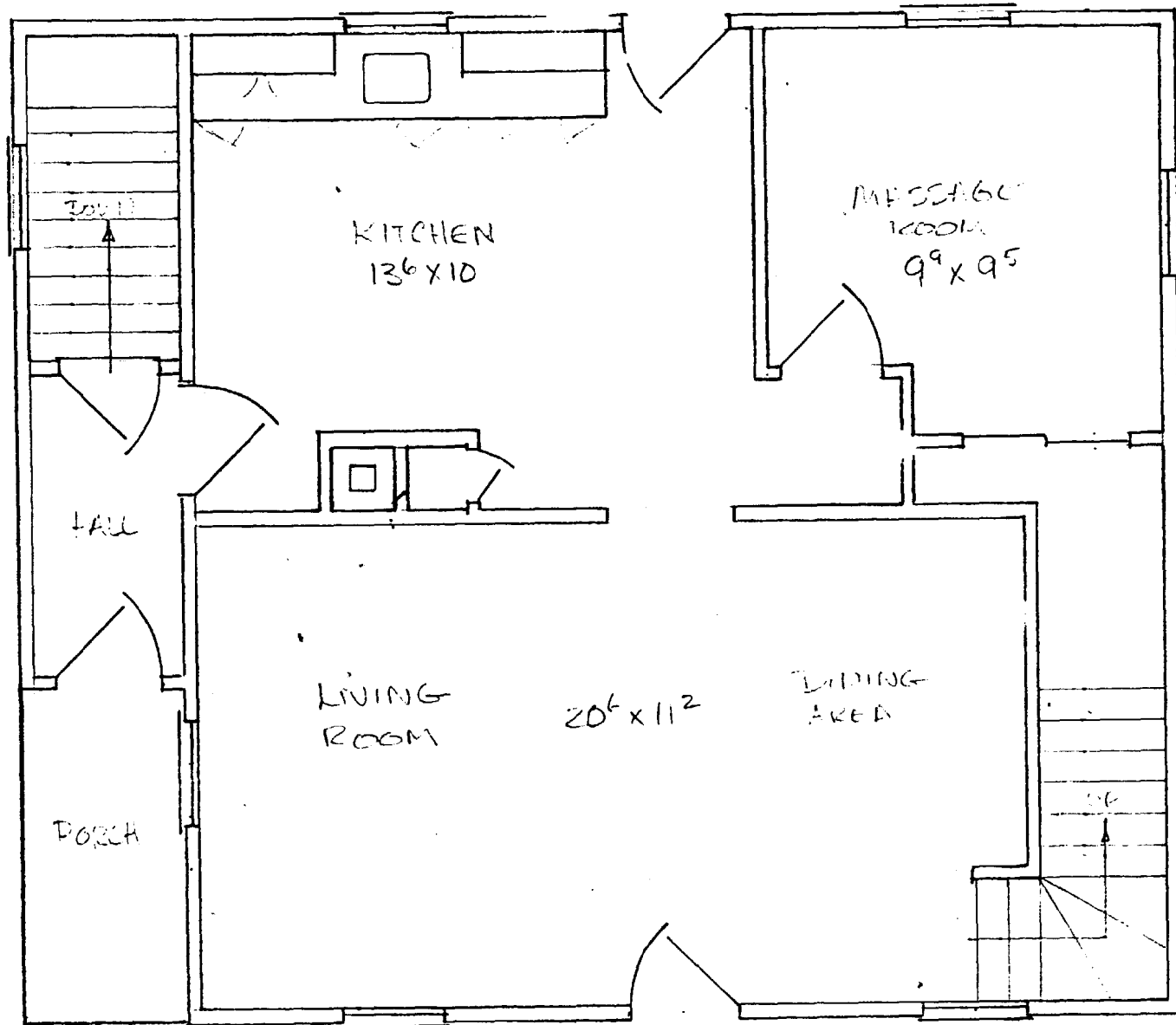
I own the house, so the request for a letter from the owner of the building is not applicable.

Attached please find copies of the floor plan showing the dimensions of the home occupation space.

Thank you for your assistance.

Sincerely,

Beth Letzger



Recs Needed
2/4/01

THIS IS NOT A BOUNDARY SURVEY

INSPECTION OF PREMISES

I HEREBY CERTIFY TO GRANITE STATE TITLE SHAWMUT MORTGAGE CO. AND ITS TITLE INSURER

108 READ STREET
PORTLAND, MAINE

Job Number: 163-12
Inspection Date: 01-03-92
Scale: 1" = 20'

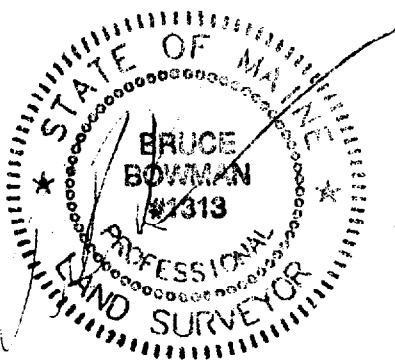
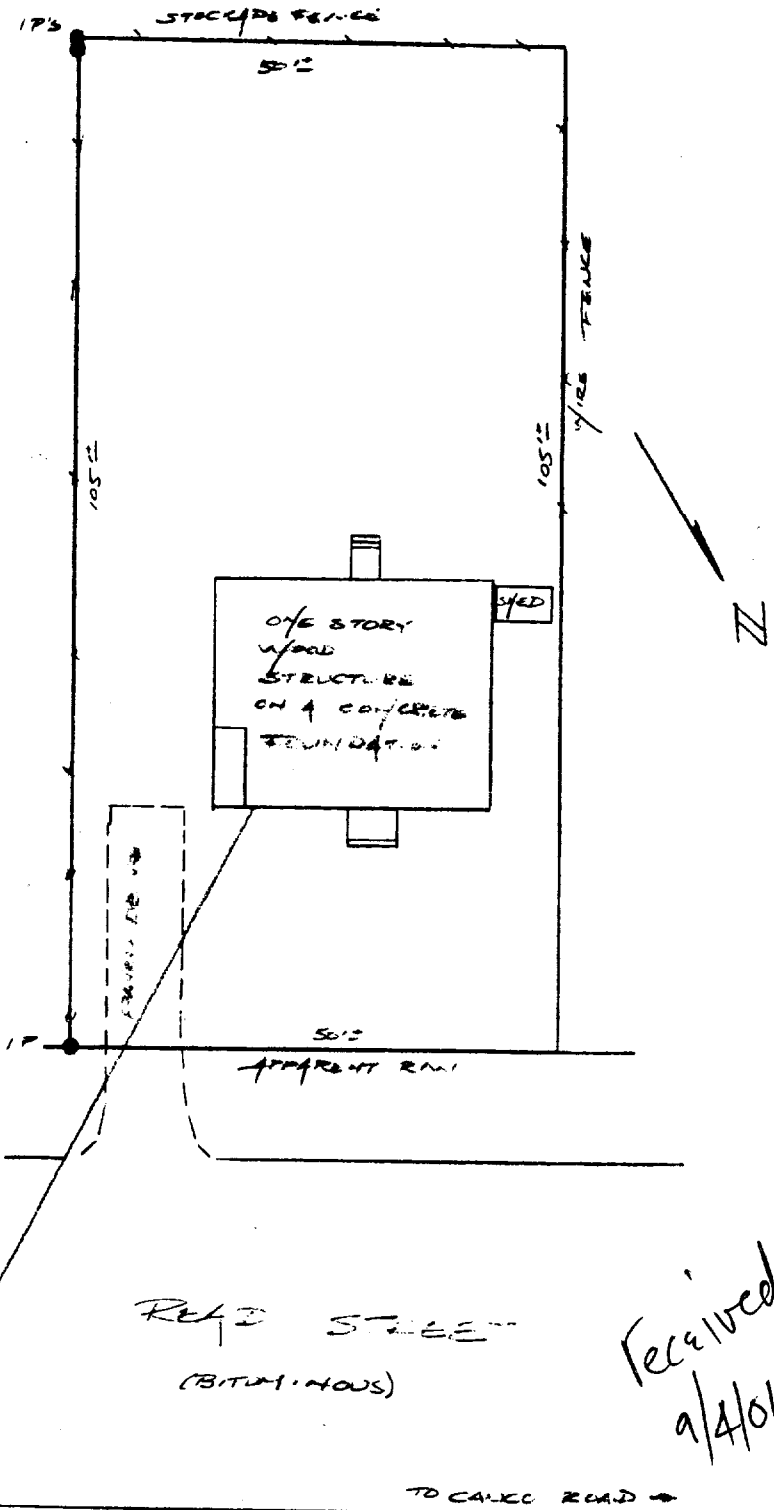
The monumentation is in harmony with current deed description.

The building setbacks are not in conformity with town zoning requirements.

The land and the dwelling do not appear to fall within the special flood hazard zone as delineated by the Federal Emergency Management Agency.

BUYER: MARY FITZGERALD

SELLER: MARK A CURTIS
SHERYL H BROWN



Shed 1x2
8008 1/18
10/1/92

THIS PROPERTY IS SUBJECT TO ALL RIGHTS AND EASEMENTS OF RECORD. THOSE THAT ARE EVIDENT ARE SHOWN. THIS PLAN MIGHT NOT REVEAL CONFLICTS WITHIN ABUTTING DEEDS.

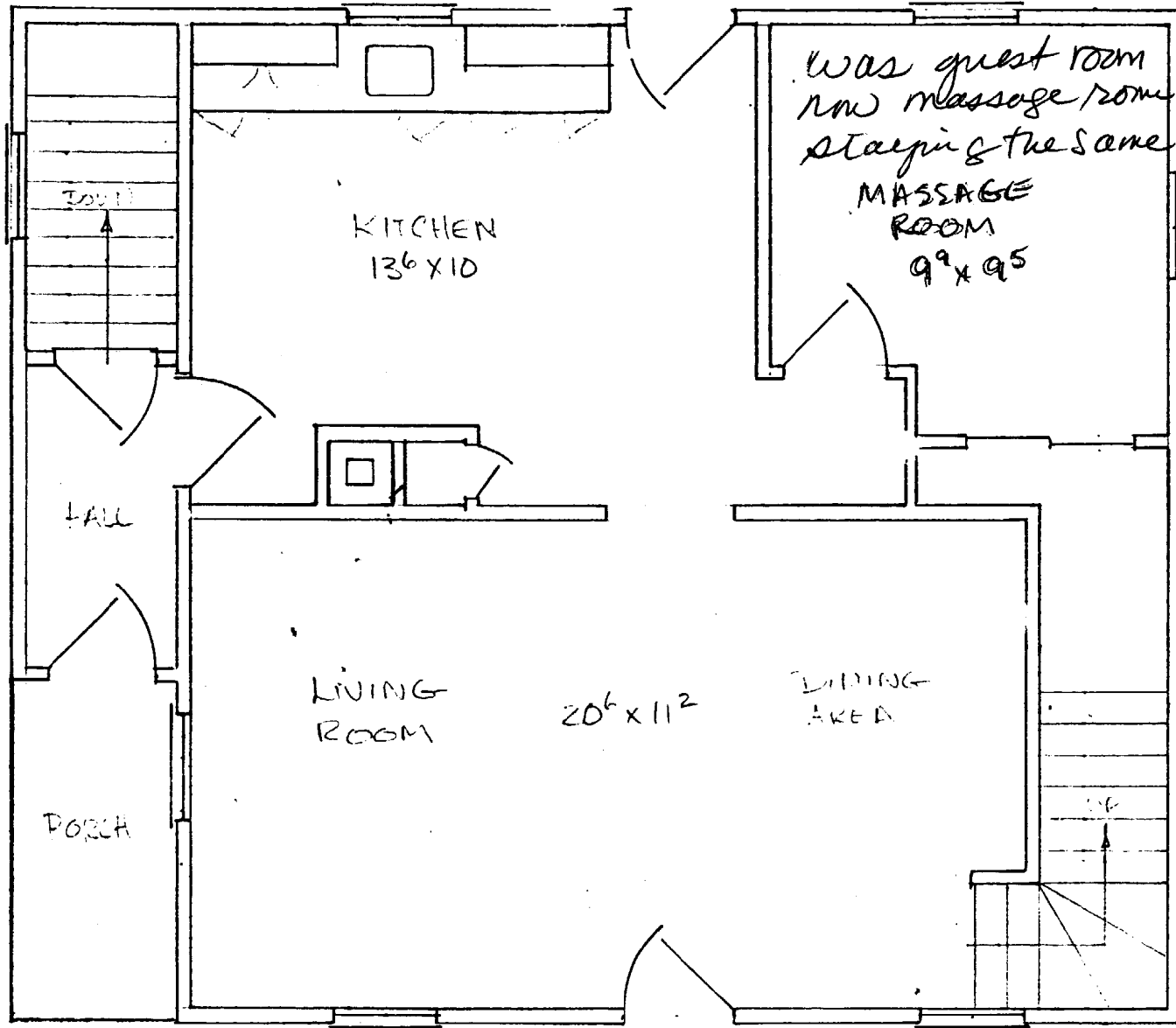
BRUCE R. BOWMAN, INC.
48 Mill Road
Cumberland, Maine 04021
Phone: (207)829-3959

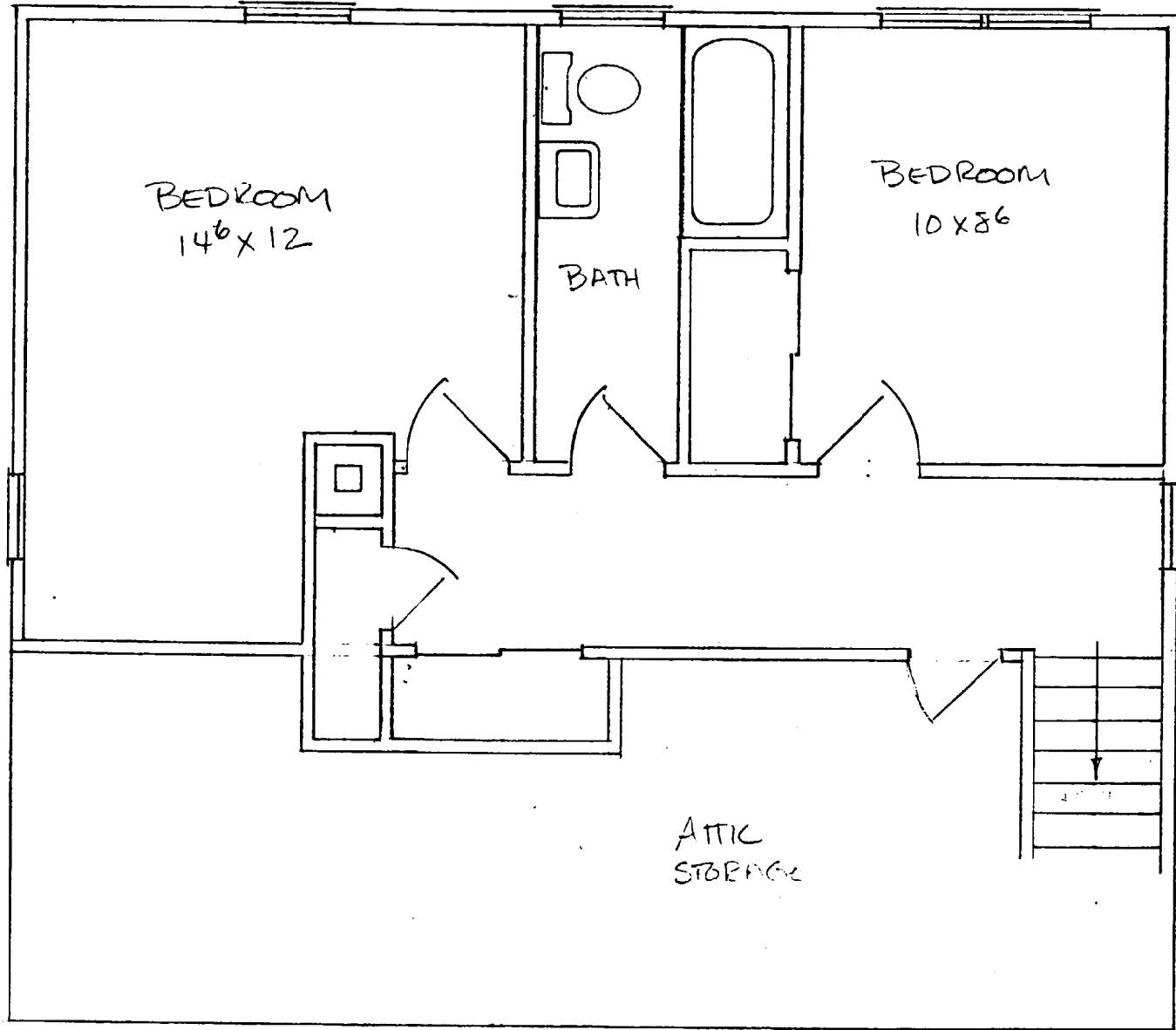
PLAN BOOK 14 PAGE 32 LOT 37
DEED BOOK 9430 PAGE 12 COUNTY CUMBERLAND

THIS PLAN IS NOT FOR RECORDING

Drawn by: JC

Received
9/4/01





DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Sanitation DATE 8/20/01
RECEIVED FROM Mary E. Fitzgerald
ADDRESS 108 1/2 Oak St - 00

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	<u>Permit</u>		
	<u>Change of use</u>		<u>30.00</u>
	<u>Check # 0596</u>		
	<u>CB 141 F 026</u>		

CASH CHECK OTHER TOTAL 30.00

RECEIVED BY [Signature]