

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND BUILDING PERMI'



This is to certify that RACHEL » ANDERSON

Job ID: 2011-07-1722-CH OF USE

Located At 956 WASHINGTON

CBL: 161 - - F - 010 - 001 - - - - -

has permission to Home occupation on 1st floor

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED. A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

93

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY) or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.
- 1. Final Certificate of Occupancy inspection required prior to operating.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCU0PIED.



Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Director of Planning and Urban Development Penny St. Louis

Job ID: <u>2011-07-1722-CH OF USE</u> Located At: <u>956 WASHINGTON</u> CBL: <u>161 - F - 010 - 001 - - - -</u>

Conditions of Approval:

Zoning

- 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.** With the issuance of this permit and the certificate of occupancy, this property shall remain a three family dwelling with a home occupation in the first floor unit. Any change of use shall require a separate permit application for review and approval.

Fire

This permit is for change of use only; any construction shall require additional permits. The occupancy shall comply with City Code Chapter 10 upon inspection.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-07-1722-CH OF USE	Date Applied: 7/15/2011		CBL: 161 F - 010 - 00	1		
Location of Construction: 956 WASHINGTON AVE	Owner Name: RACHEL ANDERSON		Owner Address: 201 Falmouth rd Falmouth, me - maine 04105		Phone: 207-212-1937	
Business Name:	Contractor Name:		Contractor Address:			Phone:
Lessee/Buyer's Name: Shannon Emery	Phone: 207-400-0933		Permit Type: CHUSE-HO - Home Occupancy			Zone: R-5
Past Use: Three family Proposed Project Description add home occupation to first loor of	Three family – change first floor dwelling to dwelling & home occupation for "Polarity Therapy".		Cost of Work: Fire Dept: Approved &/conditioning Denied N/A Signature: Capt. Mane 8/18/11 Pedestrian Activities District (P.A.D.)		CEO District: Inspection: Use Group: Type: SB Stemptore:	
Permit Taken By:			Zoning Approval			
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrial work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 		Special Zone or Reviews Shoreland Wetlands Flood Zone Subdivision Site Plan Maj Min MM Date: Of Mondulation SITEM		Zoning Appeal Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied Date.	Does not l Requires l Approved	it or Landmark Require Review Review w/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 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

PHONE

SURGAL
TY CONTRACTOR
PORTLAND

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any roperty within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 95(2	Washington Hie #1 P-	H.L. AKE OHINS			
Total Square Footage of Proposed Structure/A	rea Square Footage of Lot				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant * <u>must</u> be owner, Lessee or Buye Name Snannon Emery	r* Felephone: 202-400-0733			
161 FO10	Address 95 to Weshington And City, State & Zip P+11, Mc OHIC				
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of			
Massage therapy / Polanty	Name Rachel Anderson	Work: S150-00			
Thempo RECEIVED	Address 956 buchington Hue	C of O Fee: \$ 75.0			
JUL 1 5 2011	City, State & Zip 1+1d, Two 24103 207-252-8837	Total Fee: S 225,06			
If vacant, what was the previous inspections	<u></u>				
Proposed Specific used Portland Maline	alt und	Change of upe			
Is property part of a subdivision? <u>No</u>	If yes, please name				
Current legal use (i.e. single family) <u>Multi-lunit</u> If vacant, what was the pretrives use bections Proposed Specific use of Portland Maline ult unto Is property part of a subdivision? <u>No</u> If yes, please name <u>units</u> use floor Project description: To home occupation units units property floor Saille Transformation					
no Structural	Sail	le Transformation			
Contractor's name:		1			
Address:					
City, State & Zip	Celephone:				
Who should we contact when the permit is rea	dy: T	elephone:			
Mailing address:					

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <u>www.portlandmaine.gov</u>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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;

This is not a permit; you may not commence ANY work until the permit is issue

Date:

7, August 2011

Ann B. Machado Zoning Specialist 389 Congress Street Rm. 315 Portland, Maine 04101

Dear Ann,

I have added the two items that I left out in my previous cover letter. I hope that is right and in the form that is acceptable. I have also drawn out my building and driveway as requested with the length and width dimensions. Also, I am enclosing the plot plan that my landlord has access to.

I have also printed two pictures of the property and drive (the best that it would show) from Google maps to give you a better idea. If you have any questions, please give me a call. Have a wonderful day.

Best, Shannon S. Emery 956 Washington Ave. Apt 1 Portland, Maine 04103 207-775-2980



AUG 1 5 2011

7, August 2011

Addendum

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

RECEIVED

AUG 1 5 2011

Dept. of Building Inspections **Gity of Portland Maine**

Attn: Ann Machado,

Hello, my name is Shannon Emery and I am requesting a permit to allow me the use of my residence at 956 Washington Avenue for a home occupation. My line of business is going to be primarily a Polarity Therapy practice, combined with massage therapy. My work will be Polarity Therapy, an acceptable home occupation listed under item (2) of Section 14-410 of the Portland Zoning Ordinance. The following is an explanation of how my home occupation meets the criteria listed under item (1) of the same.

- My home will occupy approximately 108 square feet of the floor residence.
 No goods will be stored displayed or be visible for the stored displayed dis
- Storage of the materials necessary to perform my occupation are minimal and are . indicated in the 108 square feet of floor space mentioned above.
- There will be no external signage related to my home occupation. •
- No exterior alterations to the residence are necessary. •
- I do have additional parking for 2 cars at a time.
- I will not require the services of any employees. •
- No vehicles even nearing a gross vehicle weight of 6000 pounds are necessary for my home occupation.
- My home occupation is a body work practice, and designated to one room in my home; • therefore it shall not produce any offensive noises, vibration, smoke, dust or other particulate matter, odorous matter, heat, humidity, glare or other objectionable effects.
- No traffic shall be generated by home occupation as Washington Avenue has a considerable amount of traffic already and only one vehicle may enter or leave the premises at a time.

As you can see, my home occupation is a secondary and incidental use of my residence. The external activity level will not disrupt any of the residential character of the neighborhood in any means.

Attached you will find a letter from my landlord Rachel Anderson who has given me permission to use my residence for this business. Also enclosed are the floor plans of the unit. Thank you for your assistance in this matter.

Shannon S. Emery

parking Sonits 12x 124

124-18= 68.5pm



State -

11.18 th. = 2411

RECEIVED





AUG 1 5 2011

161F010001_1_141.jpg (948×384)



168		
1060	14	10,2%

February 6, 2011

To Whom It May Concern;

I give Shannon Emery permission to practice her message therapy business out of her home at 956 Washington Avenue in Portland Maine. This permission is conditional on the business complying with all state and local laws and permitting requirements. In addition permission is conditional on the business holding, at its own expense, general public liability insurance for personal injury, death, or property damage of One Million Dollars (1,000,000). Lessee shall provide Lessor with a certificate of such insurance naming Rachel H. Anderson as an additional insured. Such policy shall be provided and the coverage may not be cancelled without (10) day written notice to Lessee and Lessor. If coverage is cancelled Lessor must be told within One (1) business day and business must stop immediately.

Sincerely,

Rachel Andrem, owner

Rachel Anderson, Owner



Address 927 Washington Avenue

Adoress (s.approx)mate





Drive way



AUG 1 5 2011



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Penny St. Louis - Director of Planning and Urban Development Marge Schmuckal, Zoning Administrator

July 21, 2011

Shannon Emery 956 Washington Avenue, #1 Portland, ME 04103

7/22/11 - Vin from Chemin schund will lift vin - needs plotplan - Ibar pla 06

Re: 956 Washington Avenue – 161 F010 – R-5 – home occupation – Permit #2011-07-1722

Dear Ms. Emery,

I am in receipt of your application to add a home occupation to your apartment on the first floor at 956 Washington Avenue. At this point your application is incomplete, and I cannot complete my review.

First, in your cover letter you do not address two of the required conditions under section 14-410(a):

7. The home occupation shall not produce offensive noise, vibration, smoke, dust or other particulate matter, odorous matter, heat, humidity, glare or other objectionable effects; (letter g in the Sample Letter)

9. No traffic shall be generated by the home occupation in greater volumes than would normally be expected in a residential neighborhood; (letter i in the Sample Letter). You need to address how neither of these will be an issue with your proposed home occupation.

Second, you need to provide a plot plan of the property. The plot plan must include the shape and dimension of the lot, the footprint of any structures and the location and dimensions of parking area(s) and driveway(s).

Finally, your floor plan needs to be more accurate. You need to draw the outline of your apartment and then draw the actual rooms with their dimensions, not just the square footage of each room. It does not need to be to scale, but it needs to reflect what is there. This is important to show how you are meeting the criteria for the square footage of the home occupation and the percentage of the area it occupies in your apartment.

A HO WAY	ORTLAND, MA					
Original Receipt						
Received from	Julie 15	20				
Location of Work	Auropen	July -				
Cost of Construction \$	Building Fee:	150.00				
Permit Fee \$	Site Fee:					
Certifica	te of Occupancy Fee:	N. Car				
/	Total:	44.5.CV				
Building (IL) Plumbing (I5)	Electrical (I2) Site Pl	an (U2)				
Other CBL: 161 7 010	-					
Check #:	Total Collected s					
No work is to be sta Please keep original Taken by:						

ł



Address 927 Washington Avenue

Address is approximate





Drive Way

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AUG 1 5 2011