



Planning & Urban Development Department

Jeff Levine, AICP, Director
Marge Schmuckal, Zoning Administrator

January 10, 2014

J. Casey McCormack, Esq.
c/o Jensen-Baird, Gardner-Henry
P.O. Box 4510
Portland, Maine 04112

RE: 620 Ocean Avenue, 630 Ocean Avenue, 640 Ocean Avenue – 170-A-020 & 174-A-013 – (the
"Property")

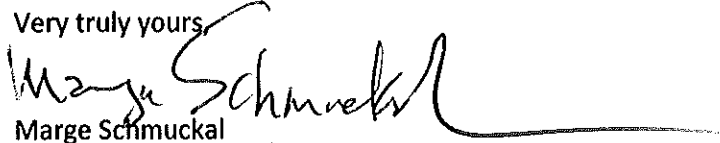
Dear Attorney McCormack,

I am in receipt of your request for a determination letter concerning the Property. The primary zone of the Property is an R-3 residential zone with an approximate 100 foot strip of an R-5 zone along Ocean Avenue.

The Property has gone through site plan reviews and building permit approvals. Such paper work is included with this letter. On 1/8/98 The Property was granted a variance for the rear and side setback for the expansion of Cedars Nursing Care Facility. On 9/13/2005 The Planning Board approved a site plan, conditional use appeal for the expanded use of the property and for the subdivision of land concerning the proposal of three condominiums. All related paperwork is included. All Certificates of Occupancy that have been issued are also enclosed.

To the best of my knowledge there are no current or pending legal actions against the Property. If you have any questions regarding this letter, please feel free to contact me at (207) 874-8695.

Very truly yours,


Marge Schmuckal
Zoning Administrator
City of Portland, Maine

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

November 24, 1987
 Date

Jewish Home for Aged
 Applicant
158 North Street, Portland ME 04101
 Mailing Address
Intermediate/long term care facility
 Proposed Use of Site
1.93 / 37,060 sq. ft.
 Acreage of Site / Ground Floor Coverage

518-634 Ocean Avenue
 Address of Proposed Site
175-A-13
 Site Identifier(s) from Assessors Maps
R-5, R-3
 Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No
 Board of Appeals Action Required: () Yes () No
 Planning Board Action Required: () Yes () No

Proposed Number of Floors 2
 Total Floor Area 74,120

Other Comments: _____
 Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW

(Date Received)

- Major Development — Requires Planning Board Approval Review Initiated
 Minor Development — Staff Review Below

	LOADING AREA	PARKING	CIRCULATION PATTERNS	ACCESS	PEDESTRIAN WALKWAYS	SCREENING	LANDSCAPING	SPACE & BULK OF STRUCTURES	LIGHTING	CONFLICT WITH CITY PROJECTS	FINANCIAL CAPACITY	CHANGE IN SITE PLAN
APPROVED	X	X	X		X	X	X	X	X	X	X	X
APPROVED CONDITIONALLY				X								
DISAPPROVED												

REASONS:

- high boundary*
1. THAT A HIST. AND BOUND. VOLUME DESCRIPTION OF THE SNOW FLOWING GARMENT INCLUDING ITS DEPICTION IN A PLAN SHOULD BE SUBMITTED FOR CITY REVIEW AND APPROVAL. (Planning III)
 2. THE WIDTH OF THE ALLEYWAY ACCESS LANE SPACE BEING DESCRIBED ON THE PLAN AND NOT 16 FEET AS DESCRIBED ON SITE PLAN SHEET. (Attach Separate Sheet if Necessary) C-102, C-110
 3. (SEE ATTACHMENT)

Richard [Signature] 11-30-87
 SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY

302317
 Permit # City of Portland **BUILDING PERMIT APPLICATION Fee** Zone Map # Lot# 8
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: <u>Jewish Home for the Aged</u> Phone # <u>775-7724</u> Address: <u>Cedar Nursing Care Facility Center Inc. Forest Ave</u> LOCATION OF CONSTRUCTION: <u>618 Ocean Avenue</u> Contractor: <u>F.P. & C.H. Murray Inc. Sub. 799-8136 Dwayne Robinson</u> Address: <u>P.O. BOX 2530 So Ptld</u> Phone # <u>04106</u> Est. Construction Cost: <u>2,686,338.</u> Proposed Use: <u>Nursing Home</u> Past Use: <u> </u> # of Existing Res. Units <u> </u> # of New Res. Units <u> </u> Building Dimensions: L <u> </u> W <u> </u> Total Sq. Ft. <u> </u> # Stories <u> </u> # Bedrooms <u> </u> Lot Size <u> </u> Is Proposed Use: Seasonal <u> </u> Condominium <u> </u> Conversion <u> </u> Explain Conversion: <u>Construct new as per 2 sets const & plot plan</u>	For Official Use Only Date: <u>Nov 28, 1989</u> Subdivision: <u> </u> Inside Fire Limits: <u> </u> Name: <u> </u> Edge Code: <u> </u> Lot: <u> </u> Time Limit: <u> </u> Ownership: <u> </u> Public <u> </u> Estimated Cost: <u>13,451.00</u> Private <u> </u> Zoning: <u> </u> Street Frontage Provided: <u> </u> Provided Setbacks: Front <u> </u> Back <u> </u> Side <u> </u> Side <u> </u> Review Required: Zoning Board Approval: Yes <u> </u> No <u> </u> Date: <u> </u> Planning Board Approval: Yes <u> </u> No <u> </u> Date: <u> </u> Conditional Use: <u> </u> Variance <u> </u> Site Plan <u> </u> Subdivision <u> </u> Shoreside Zoning: Yes <u> </u> No <u> </u> Floodplain: Yes <u> </u> No <u> </u> Special Exception <u> </u> Other (Explain) <u> </u>
--	--

Foundation:
 1. Type of Soil:
 2. Set Backs - Front Rear Side(s)
 3. Footings Size:
 4. Foundation Size:
 5. Other:

Floor:
 1. Sills Size: Sills must be anchored.
 2. Girder Size:
 3. Lally Column Spacing: Size:
 4. Joists Size: Spacing 16" O.C.
 5. Bridging Type: Size:
 6. Floor Sheathing Type: Size:
 7. Other Material:

Exterior Walls:
 1. Studding Size Spacing
 2. No. windows
 3. No. doors
 4. Sill Sizes Span(s)
 5. E. Yes No
 6. Corner Posts Size
 7. Insulation Type Size
 8. Sheathing Type Size
 9. Siding Type Weather Exposure
 10. Masonry Materials
 11. Metal Materials

Interior Walls:
 1. Studding Size Spacing
 2. Header Sizes Span(s)
 3. Wall Covering Type
 4. Fire Wall if required
 5. Other Materials

Ceiling:
 1. Ceiling Joists Size:
 2. Ceiling Strapping Size Spacing
 3. Type Ceiling:
 4. Insulation Type Size
 5. Ceiling Height:

Roof:
 1. Truss or Rafter Size Spacing
 2. Sheathing Type Size
 3. Roof Covering Type

Chimneys:
 Type: Number of Fire Places

Heating:
 Type of Heat:

Electrical:
 Service Entrance Size: Smoke Detector Required: Yes No

Plumbing:
 1. Approval of soil test if required: Yes No
 2. No. of Tubs or Showers
 3. No. of Flushes
 4. No. of Lavatories
 5. No. of Other Fixtures

Swimming Pools:
 1. Type:
 2. Pool Size: x Square Footage
 3. Must conform to National Electrical Code and State Law.

Permit Received By Deborah Goode
 Signature of Applicant Date 11/28/89
 Signature of Date 1-16-90
 Inspection Date:

PERMIT ISSUED
JAN 19 1990
CITY OF PORTLAND

RECEIVED
WITH LETTER



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 618 Ocean Ave.

Issued to F.P. M.C.H. Murray Inc.

Date of Issue 7/31/91

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. 90/0047, 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

Entire

Nursing care facility

Limiting Conditions: per Public Works:

1. Ten percent defect guarantee for twelve months.
2. As built mylacs
3. All landscaping to be completed to satisfaction of City Arborist

This certificate supersedes
certificate issued

Approved:

7/31/91
(Date)

Inspector

Inspector of Building

Notice: This certificate identifies lawful use of building or premises and does not be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.



CITY OF PORTLAND, MAINE

389 CONGRESS STREET
PORTLAND, MAINE 04101
(207)874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

January 19, 1990

F. P. & C. H. Murray Inc.
P.O. Box 2530
South Portland, ME 04106

Re: Cedar Nursing Care (618-634 Ocean Ave.)

Dear Sir:

Your application to construct a 37,060 square foot long-term care facility has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

Site Plan Review Requirements

Public Works -

1. Revised plan showing deletion of catch basin on Ocean Avenue.
2. Construction detail of outlet with hydro brake.
3. Plan showing upgrade of road shoulder along Ocean Avenue.

Inspection Services - approved; W. Giroux

Planning Division -

1. That a management and boundary survey description of the snow plowing easement including its depiction on a plan should be submitted for city review and approval.
2. The width of the emergency access lane shall be as depicted on the plan and not 16 feet as depicted on site plan sheets c-102, c-110.
3. The applicant shall notify persons located in the vicinity who may be affected by the blasting prior to commencing the blasting. The applicant shall inform the Planning Authority of notices sent to area residents regarding blasting related information for the project site, including the process of inspecting residences in the affected area. The applicant shall further certify as to those persons notified about the blasting.

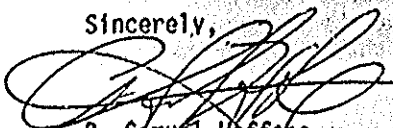
Fire Department - approved; F.F. John Doblowski

Building and Fire Code Requirements.

1. Construction type shall be limited to those allowed in Table 12- 1.6.2.
2. Door #22 from Romm B03 to stairwell B02 may not open into the stairwell enclosure.
3. Hazardous areas as described in Section 12-3.2 shall have separation/protection in accordance with Section 12-3.2.1.
4. Basement shall be subdivided in accordance with Section 12-3.7.1 b., 12-3.7.2, 12-3.7.3.
5. Ramps shall be Class A with a maximum slope of 1 in 10 in accordance with Section 5-2.5, or 1 in 15 without landings.
6. The minimum width of doors as the means of egress from sleeping rooms, diagnostic and treatment areas shall be 44" in accordance with Section 12-2.3.5 , including those in folding partitions in rooms.
7. Rubbish chutes and laundry chutes to be installed in accordance with N.F.P.A. #82 and shall be provided with automatic sprinkler protection as required in Section 3-4 and 4-4.
8. Wastecompactors and waste storage rooms shall be in accordance with N.F.P.A. #82, Chapter 5 and Chapter 6.
9. Emergency lighting shall be in accordance with Section 12-2.9. Basement corridor coverage as shown on E-101 is questionable. Room 127, occupational therapy, a small assembly area should be provided with emergency lighting.
10. Marking of the means of egress shall be in accordance with Section 12-2.10. Additional exit signs are required as follows: at the door from corridor #112 to corridor #180, at the door from stair #102 to service corridor #186, on either side of horizontal exit on second floor.
11. The atrium-like area main entry lobby to the lounge/family room shall be protected in accordance with 12-3.1 reference Section 6-2.4.6.
12. Detection, alarm, and communication systems shall be in accordance with 12-.4. Zone disconnect is required, a visual and audible trouble indicator is required on the remote annunciator, if one is used. A spare zone is requested for future use. A masterbar connection is required. If the owner wishes to connect to the municipal system, arrangements must be made with Mr. Freeman Cleaves, Head of Communications. The following areas require additional detection: trash and laundry chute rooms on each floor to be provided with rate of rise detectors; spacing of smoke detectors on second floor corridor near horizontal exit requires an additional corridor detector.
13. Sprinkler system and hood, duct, extinguishing system to be reviewed by separate permit.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Garroway, P.F.D.
Paul Niehoff, P.P.W.
Steve Harris, P.P.W.
R. Knowland, Planning

lec

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 74-8703, FAX: 874-8716

Location of Construction: 630 Ocean Ave		Owner: J.H.A. Properties, Inc.		Phone:		Permit No: 980590	
Owner Address: 640 Ocean Ave 04103		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: C.M. Cimino, Inc.		Address: 3 Warren Ave Westbrook, ME		Phone: 04092 854-8876		Permit Issued: JAN - 9 1998	
Past Use: Vacant		Proposed Use: Residential		COST OF WORK: \$ 10,330,000.00		PERMIT FEE: \$ 51,670.00	
Proposed Project Description: Intermediate Care Facility		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type: 5A BOCA 96 Signature: <i>[Signature]</i>	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____	
Permit Taken By: SP/MG		Date Applied For: 03 June 1998		Zone: <i>R-3(E-5)</i>		OBL: 174-A-013+	

PERMIT ISSUED
JAN - 9 1998
CITY OF PORTLAND

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

Application For site plan 5/27/97.
Received In Inspection for Building Permit 3/June/98
#

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

04 June 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ 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 *1/8/98*
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: *1/3/98*

CEO DISTRICT 7



**CITY OF PORTLAND
CERTIFICATE OF VARIANCE APPROVAL**

I, **MATTHEW D. MANAHAN**, the duly appointed Chairman of the Board of Appeals for the City of Portland, Cumberland County and State of Maine, hereby certify that on the 8th day of January, 1998, the following variance was granted pursuant to the provisions of 30-A, M.R.S.A., Section 4353(5) and the City of Portland's Code of Ordinances.

1. Property Owner: *JHA Services, Incorporated*

2. Property: *Cumberland County Registry Book* , Page

(Last recorded Deed in Chain of Title)

174-A-10, 11, 12, 13, 14, 15, 20, 24 and 170-A-20, 33, 34, and 35, 630 Ocean Avenue, Portland, Maine

3. Variance and Conditions of Variance: *Grant relief of Sections 14-90(4), 14-120(4) and 14-422 to JHA Services, Incorporated, owner, which would grant relief from the minimum back and side yard setback requirements and allow for the expansion of the Cedars Nursing Care Facility.*

IN WITNESS WHEREOF, I have hereto set my hand and seal this 12th day of January, 1998.

Matthew D. Manahan, Chairman

Matthew D. Manahan
Chairman, Zoning Board of Appeals
City of Portland

STATE OF MAINE
Cumberland, ss.

Then personally appeared the above-named Matthew D. Manahan and acknowledged the above certificate to be his free act and deed in his free act and deed in his capacity as Chairman of the Portland Board of Appeals.

MARGARET SCHMUCKAL
NOTARY PUBLIC, MAINE
MY COMMISSION EXPIRES JUNE 28, 1998
1998

(Printed or Typed Name)
Notary Public

PURSUANT TO 30-A M.R.S.A. SECTION 4353(5), THIS CERTIFICATE MUST BE RECORDED BY THE PROPERTY OWNER IN THE CUMBERLAND COUNTY REGISTRY OF DEEDS WITHIN 90 DAYS FROM FINAL WRITTEN APPROVAL FOR THE VARIANCE TO BE VALID. FURTHERMORE, THIS VARIANCE IS SUBJECT TO THE LIMITATIONS SET FORTH IN SECTION 14-474 OF THE CITY OF PORTLAND'S CODE OF ORDINANCES.

FINDINGS OF FACT
ALL APPEALS

TYPE OF APPEAL Variance

1. Name of Applicant Cedars Nursing Care Center, Inc. and JHA Properties, Inc.
2. Address of Applicant 630 Ocean Avenue
3. Right of applicant to appeal.
Owner JA
Option to Purchase
4. Location of property under appeal 630 Ocean Ave
5. Zone in which the property is located A-3 and R-5
6. Present use of property nursing care facility / vacant
7. Proposed use if the appeal is granted.
Intermediate care facility combined w/ existing nursing home

8. Names and addresses of those appearing in support of the application:

- | | |
|----------------------|---------------------|
| <u>Bob Stevens</u> | <u>Jamie Broden</u> |
| <u>Dave</u> | <u>Dick Beech</u> |
| <u>Taki Tsomides</u> | |
| <u>Kathy Colman</u> | |

9. Names and addresses of those appearing in opposition to the application:

- | | |
|--|--|
| | |
| | |
| | |

10. Listing of the documentary evidence presented to the Board (e.g., plans, photos, maps, etc.)

- | | |
|--|--|
| | |
| | |

VARIANCES

A variance may be granted if the Board finds that it will not be contrary to the public interest where, owing to special conditions, a literal enforcement of the Ordinance would result in "undue hardship". The following questions must all be answered, with supporting findings of fact, in order to grant the appeal.

1. Can the land yield a reasonable return (not the highest return) without the granting of a variance?

No 6 (deny the appeal)

Reasons (including evidence) _____

2. Are there factors which are unique to this property, and not to the general conditions of the neighborhood, which create a need for a variance?

Yes _____
No 6 (deny the appeal)

Reasons (including evidence) _____

3. Will the granting of the variance alter the essential character of the locality?

Yes _____ (deny the appeal)
No 6

Reasons (including evidence) _____

4. Is the hardship a result of action taken by the applicant or a prior owner (self-created hardship)?

Yes _____ (deny the appeal)
No 6

Reasons (including evidence) _____

If the appeal is granted, does the Board wish to impose conditions which will further the intent and purpose of this Ordinance?

Yes _____

No _____

Specific Conditions _____

Reasons _____

Date of Public Hearing _____

Motion Move to grant the variance request by Cedar Nursing Home
(including conditions and findings of fact) Center, Inc. and JHA

Properties, Inc. are to allow the expansion as presented.

Votes in Favor

Votes Opposed

Elizabeth L. Brandy
[Signature]
[Signature]
[Signature]
[Signature]
[Signature]



PORTLAND MAINE

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

Marge S.

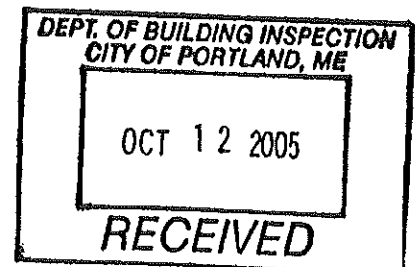
Planning and Development Department
Lee D. Urban, Director

Planning Division
Alexander Jaegerman, Director

September 19, 2005

Mr. David Kamila
Land Use Consultants
966 Riverside Street
Portland ME 04103

RE: Cedars Assisted Living Facility Expansion; 630 Ocean Avenue
CBL: 174-A-013, 174-A-014, 170-A-002,
#2004-0078



Dear Mr. Kamila:

On September 13, 2005, the Portland Planning Board voted on the following motions for the Cedars Assisted Living Facility expansion in the vicinity of 630 Ocean Avenue.

1. The Planning Board voted 7-0 that the plan was in conformance with the Conditional Use standards of the Land Use Code.
2. The Planning Board voted 7-0 that the plan was in conformance with the Site Plan Ordinance (including Site Location of Development Law) of the Land Use Code with the following conditions of approval:
 - i. The Applicant shall submit documentation from the DEP/ACE approving the Natural Resources Protection Act Permit application for the proposed mitigation plan and that the City Council approves the DEP covenant agreement for the Evergreen Cemetery mitigation.
 - ii. The site plan shall meet the requirements stated in Jim Seymour's memo dated September 8, 2005 except paragraph 2A.
 - iii. The final condominium documents shall be reviewed and approved by Corporation Counsel.

O:\PLANDEVREVV\OCEAN630\9-13-05APPROVALLETTER.DOC

3. The Planning Board voted 7-0 that the plan was in conformance with the Subdivision Ordinance of the Land Use Code with the following conditions of approval:
 - i. The Applicant shall submit documentation from the DEP/ACE approving the Natural Resources Protection Act Permit application for the proposed mitigation plan and that the City Council approves the DEP covenant agreement for the Evergreen Cemetery mitigation.
 - ii. The plan shall meet the requirement stated in Jim Seymour's memo dated September 8, 2005 except for paragraph 2A.
 - iii. That the final condominium documents shall be reviewed and approved by Corporation Counsel.
 - iv. That the final plat shall be reviewed and approved by planning staff.

The approved plan includes 30 assisted living units.

The approval is based on the submitted site plan and the findings related to Conditional Use, Site Plan (including Site Location of Development Law) and Subdivision review standards as contained in Planning Report #52-05, which is attached.

Please note the following provisions and requirements for all site plan approvals:


1. Where submission drawings are available in electronic form, the applicant shall submit any available electronic Autocad files (*.dwg), release 14 or greater, with seven (7) sets of the final plans.
2. A performance guarantee covering the site improvements as well as an inspection fee payment of 2.0% of the guarantee amount and 7 final sets of plans must be submitted to and approved by the Planning Division and Public Works prior to the release of the building permit. If you need to make any modifications to the approved site plan, you must submit a revised site plan for staff review and approval.
3. The site plan approval will be deemed to have expired unless work in the development has commenced within one (1) year of the approval or within a time period agreed upon in writing by the City and the applicant. Requests to extend approvals must be received before the expiration date.
4. A defect guarantee, consisting of 10% of the performance guarantee, must be posted before the performance guarantee will be released.

5. Prior to construction, a pre-construction meeting shall be held at the project site with the contractor, development review coordinator, Public Work's representative and owner to review the construction schedule and critical aspects of the site work. At that time, the site/building contractor shall provide three (3) copies of a detailed construction schedule to the attending City representatives. It shall be the contractor's responsibility to arrange a mutually agreeable time for the pre-construction meeting.
6. If work will occur within the public right-of-way such as utilities, curb, sidewalk and driveway construction, a street opening permit(s) is required for your site. Please contact Carol Merritt at 874-8300, ext. 8828. (Only excavators licensed by the City of Portland are eligible.)

The Development Review Coordinator must be notified five (5) working days prior to date required for final site inspection. The Development Review Coordinator can be reached at the Planning Division at 874-8632. Please make allowances for completion of site plan requirements determined to be incomplete or defective during the inspection. This is essential as all site plan requirements must be completed and approved by the Development Review Coordinator prior to issuance of a Certificate of Occupancy. Please schedule any property closing with these requirements in mind.

If there are any questions, please contact Richard Knowland at 874-8725.

Sincerely,



Lee Lowry III, Chair
Portland Planning Board

cc: Lee D. Urban, Planning and Development Department Director
Alexander Jaegerman, Planning Division Director
Sarah Hopkins, Development Review Services Manager
Richard Knowland, Senior Planner
Jay Reynolds, Development Review Coordinator
Marge Schmuckal, Zoning Administrator
Inspections Division
Michael Bobinsky, Public Works Director
Traffic Division
Eric Labelle, City Engineer
Jeff Tarling, City Arborist
Penny Littell, Associate Corporation Counsel
Greg Cass, Fire Prevention
Assessor's Office
Approval Letter File
Kathryn Callnan, President, The Cedars, 630 Ocean Avenue, Portland ME 04103

Applicant: JAA Services
Address: 630 Ocean Ave
CEDARS

Date: 9/12/05
C-B-L: 174-A-013 +

CHECK-LIST AGAINST ZONING ORDINANCE

Date - Existing establishment # 07-0242

Zone Location - R-3 Prime - R-5 in 100' strip along Rd

Interior or corner lot -

Proposed Use/Work - New Assisted Living Project Not a PRUD
of 30 additional units of 60 Beds

Sewage Disposal - City

Lot Street Frontage - 50' \approx 425' shown

Front Yard - 25' - 238' scaled

Rear Yard - 25' - 326'

Side Yard - 16' - 269' & 187'

Projections -

Width of Lot - 65' - \approx 586' scaled

~~No lot elevations~~
Height - 35' max - 28'6" to ridge is shown

Lot Area -

10.57 Acres shown

per Assessor
272,300
166,800
<hr/>
439,100

Lot Coverage/Impervious Surface - 35% allowed

Area per Family - N/A

Off-street Parking - see other side for breakdown - 149 pkg spaces req - 171 pkgs counted
SAY 188 -

Loading Bays - 2 required - (Ambulance/Emergency & 1 service/supply vehicle)
Both shown

Site Plan - # 2004-0078

Shoreland Zoning/Stream Protection - N/A

Flood Plains - Panel 7 - Zone X

Conditional use for long-term expanded care facilities
Also Subdivision - 1 lot with 3 condop parcels
working with Wetland mitigation: DEPAT
Evergreen Cemetery
in this project

CITY OF PORTLAND, MAINE

PLANNING BOARD

Kevin Beal, Chair
Michael Patterson, Vice Chair
Bill Hall
Lee Lowry III
Shalom Odokara
David Silk
Janice E. Tevanian

October 25, 2006

Mr. David Kamila
Land Use Consultants
966 Riverside Street
Portland, ME 04103

RE: Cedars Assisted Living Facility Expansion; 630 Ocean Avenue;

CBL: CBL # 174-A-013; 174-A-014; 170-A-002; #2006-0200.

Dear Mr. Kamila,

On October 24, 2006, the Portland Planning Board voted on the following motions for the Cedars Assisted Living Facility expansion in the vicinity of 630 Ocean Avenue:

1. The Planning Board voted 7-0 that the plan was in conformance with the Conditional Use Standards of the Land Use Code.
2. The Planning Board voted 7-0 that the plan was in conformance with the Site Plan Ordinance Standards of the Land Use Code with the following condition of approval:
 - i. That the site plan shall be revised to incorporate the comments of Jim Seymour (Development Review Engineer) memo dated October 24, 2006 and shall comply with these comments.

The approved plan includes 30 assisted living units.

The approval is based on the submitted site plan and the findings related to site plan and conditional use review standards as contained in Planning Report #61-06, which is attached.

Please note the following provisions and requirements for all site plan approvals:

1. Where submission drawings are available in electronic form, the applicant shall submit any available electronic AutoCAD files (*.dwg), release 14 or greater, with seven (7) sets of the final plans.

2. A performance guarantee covering the site improvements as well as an inspection fee payment of 2.0% of the guarantee amount and 7 final sets of plans must be submitted to and approved by the Planning Division and Public Works prior to the release of the building permit. If you need to make any modifications to the approved site plan, you must submit a revised site plan for staff review and approval.
3. The site plan approval will be deemed to have expired unless work in the development has commenced within one (1) year of the approval or within a time period agreed upon in writing by the City and the applicant. Requests to extend approvals must be received before the expiration date.
4. A defect guarantee, consisting of 10% of the performance guarantee, must be posted before the performance guarantee will be released.
5. Prior to construction, a pre-construction meeting shall be held at the project site with the contractor, development review coordinator, Public Work's representative and owner to review the construction schedule and critical aspects of the site work. At that time, the site/building contractor shall provide three (3) copies of a detailed construction schedule to the attending City representatives. It shall be the contractor's responsibility to arrange a mutually agreeable time for the pre-construction meeting.
6. If work will occur within the public right-of-way such as utilities, curb, sidewalk and driveway construction, a street opening permit(s) is required for your site. Please contact Carol Merritt at 874-8300, ext. 8828. (Only excavators licensed by the City of Portland are eligible.)

The Development Review Coordinator must be notified five (5) working days prior to date required for final site inspection. The Development Review Coordinator can be reached at the Planning Division at 874-8632. Please make allowances for completion of site plan requirements determined to be incomplete or defective during the inspection. This is essential as all site plan requirements must be completed and approved by the Development Review Coordinator prior to issuance of a Certificate of Occupancy. Please schedule any property closing with these requirements in mind.

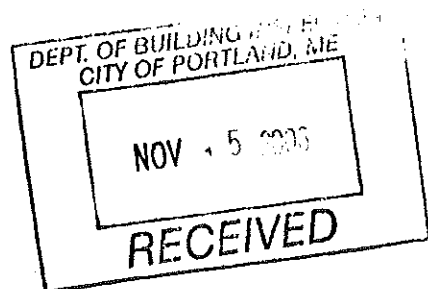
If there are any questions, please contact Rick Knowland, Senior Planner at 874-8725.

Sincerely,



Kevin Beal, Chair
Portland Planning Board

cc: Lee D. Urban, Planning and Development Department Director
Alexander Jaegerman, Planning Division Director
Sarah Hopkins, Development Review Services Manager
Rick Knowland, Senior Planner
Jay Reynolds, Development Review Coordinator
— Marge Schmuckal, Zoning Administrator
Inspections Division



City of Portland, Maine - Building or Use Permit Application

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

Permit No: 07-0242	Issue Date:	CBL: 174 A013001
-----------------------	-------------	---------------------

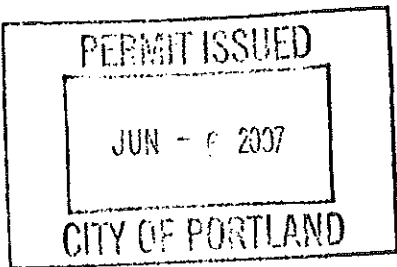
Location of Construction: 618 OCEAN AVE	Owner Name: JEWISH HOME FOR THE AGED	Owner Address: 630 OCEAN AVE	Phone:
Business Name: The Inn at Cedars	Contractor Name: C.M. Cimino Inc.	Contractor Address: 3 Warren Ave Westbrook	Phone 2078548876
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone: R-3 prime

Past Use: The Inn at Cedars-	Proposed Use: The Inn at Cedars - Addition to the Cedars for Assisted living facility	Permit Fee: \$48,745.00	Cost of Work: \$4,864,522.00	CEO District: 4	A-5-100 strip along ocean
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: I-1 Type: 5A SEE CONDITIONS 6/3/07		

Proposed Project Description: Addition to the Cedars for Assisted living facility	Signature: <i>Grea, C. [unclear]</i>	Signature: <i>[unclear]</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: Idobson	Date Applied For: 03/09/2007	Zoning Approval	
-----------------------------	---------------------------------	------------------------	--

<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> <p><input type="checkbox"/> Shoreland <i>N/A</i></p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision <i>1 lot with 3 condo parcels</i></p> <p><input checked="" type="checkbox"/> Site Plan <i>2004-0078</i></p> <p>Maj <input checked="" type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>ok with conditions 3/15/07</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input checked="" type="checkbox"/> Conditional Use <i>for long term extended care facilities</i></p> <p><input type="checkbox"/> Interpretation</p> <p><input checked="" type="checkbox"/> Approved <i>by PB</i></p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>9/13/05</i></p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>S</i></p>
---	---	---	---



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
Department of Building Inspection

Certificate of Occupancy

LOCATION 618 OCEAN AVE CBL 174 A013001

Issued to Jewish Home For The Aged The/C.M. Cimino Inc. Date of Issue 03/19/2009

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. 07-0242 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

Entire

APPROVED OCCUPANCY

Assisted Living Facility
Use Group I-1
Type 5A
IBC 2003

Limiting Conditions: None

This certificate supersedes certificate issued AUGUST 4, 2008

Approved: 3/19/09 J. Cimino
(Date) Inspector

[Signature]
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

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

Permit No: 08-1259	Issue Date: 11/19/08	CBL: 174 A013001
-----------------------	-------------------------	---------------------

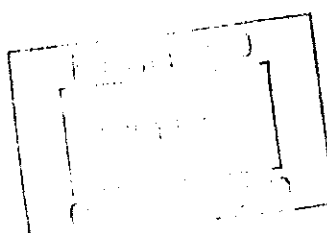
Location of Construction: 618 OCEAN AVE	Owner Name: JEWISH HOME FOR THE AGED	Owner Address: 630 OCEAN AVE	Phone:
Business Name:	Contractor Name: TBD	Contractor Address:	Phone:
Lessee/Buyer's Name:	Phone:	Permit Type: Additions - Commercial	Zone: R-3A

Past Use: Cedars Nursing Care	Proposed Use: Cedars Nursing Care - 1420 sq ft Masonry addition along with 1133 sq ft associated renovations	Permit Fee: \$4,220.00	Cost of Work: \$420,000.00	CEO District: 4
Proposed Project Description: 1420 sq ft Masonry addition along with 1133 sq ft associated renovations		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied See Conditions	INSPECTION: Use Group: I-2 Type IA IBC-2003	

Signature: <i>Gina Cross</i>	Signature: <i>CE</i> 11/19/08
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: Idobson	Date Applied For: 10/07/2008	Zoning Approval	
-----------------------------	---------------------------------	------------------------	--

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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <i>NA</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>Zone 7</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan # 2008-0126 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>10/9/08</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input checked="" type="checkbox"/> Conditional Use <i>to PB</i> <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>10/14/08</i> Date: <i>10/14/08</i>	Historic Preservation <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"/> Dealed Date: <i>9</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

Applicant: Cedars

Date: 9/2/08

Address: 630 Ocean Ave

C-B-L: 170-A-020

CHECK-LIST AGAINST ZONING ORDINANCE

#08-1259

Date -

Zone Location - R-3

Conditional use expansion
Req.

Interior or corner lot -

Proposed Use/Work -

Rehab CTR Addition ~ a little over 1,000 sq ft

Sewage Disposal - City

Lot Street Frontage - 150' min - 50' + provided

Front Yard - 25' min - much over 25' shown

Rear Yard - 25' min - much over 25' shown

Side Yard - 9' min - 50' + at closest

1 story
Projections

Width of Lot - 65' ok

Height - 35' MAX

1 story proposed - unscrapped drawings attached in Section #9

Lot Area -

Lot Coverage/Impervious Surface - 35% MAX - not near 75% MAX

- Adding a little more landscaping where driveway was

Area per Family - N/A

Off-street Parking - will elem. 2 parking

- currently providing well over the min parking study submitted 7-9-08

Loading Bays -

Site Plan - 2008-0126

Shoreland Zoning/Stream Protection - N/A

Flood Plains - Panel 7 - Zone X



APPLICATION FOR EXEMPTION FROM SITE PLAN REVIEW

CEDARS NURSING CARE CENTER
Applicant

533 OCEAN AVE. PORTLAND, OR
Applicant's Mailing Address

503-969-4774 Iconics Associates
Consultant/Agent/Phone Number

10/11/01
Application Date

Skilled Care Lobby & Ambulance Entrance Upgrades
Project Name/Description

533 OCEAN AVE. PORTLAND, OR
Address of Proposed Site

CBL: 174-A-19

Description of Proposed Development:

The proposed work includes renovations of the existing main lobby, replacing existing doors and adding a new reception desk. At the ambulance entrance, renovating interior spaces as well as adding exterior canopy. Neither changes will affect the existing square footage of the building and there will be no other relocations to the life safety systems of the structure.

Please Attach Sketch/Plan of Proposal/Development

Criteria for Exemptions:
See Section 14-523 (4) on back side of form

- a) Within Existing Structures; No New Buildings, Demolitions or Additions
- b) Footprint Increase Less Than 500 Sq. Ft.
- c) No New Curb Cuts, Driveways, Parking Areas
- d) Curbs and Sidewalks in Sound Condition

Applicant's Assessment (Yes, No, N/A)	Planning Office Use Only
Yes No New Buildings	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 618 OCEAN AVE CBL 174 A013001

Issued to Jewish Home For The Aged The/P.M. Construction Date of Issue 06/12/2009

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. 08-1259, 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

Rehabilitation Center

APPROVED OCCUPANCY

Cedars Nursing Care
Use Group I2
Type 2B
IBC 2003

Limiting Conditions: None

This certificate supersedes certificate issued 04/02/09

Approved:

06/12/09 *William A. Collins*
(Date) Inspector

[Signature]
Inspector of Buildings

CAPT. K. Santora
6/16/09

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or leasee for one dollar.



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 618 OCEAN AVE CBL 174 A013001

Issued to Jewish Home For The Aged The/P.M. Construction Date of Issue 06/12/2009

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. 08-1259, 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
Rehabilitation Center

APPROVED OCCUPANCY
Cedars Nursing Care
Use Group I2
Type 2B
IBC 2003

Limiting Conditions: This certificate supersedes the certificate dated 04/02/09. All landscaping /site work is complete.

This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.



Attorneys at Law

TEN FREE STREET
P.O. BOX 4510
PORTLAND, MAINE 04112-4510
(207) 775-7271 (Phone)
(207) 775-7935 (Fax)

www.jbgh.com

MERTON G. HENRY
FRANK H. FRYE
BRIAN C. BROWNE
OF COUNSEL

RAYMOND E. JENSEN
(1908-2002)
KENNETH BAIRD
(1914-1987)
M. DONALD GARDNER
(1918-2003)

YORK COUNTY
OFFICE
11 MAIN STREET, SUITE 4
KENNEBUNK, MAINE 04043
(207) 985-4676 (Phone)
(207) 985-4932 (Fax)

KENNETH M. COLE III
NICHOLAS S. NADZO
DAVID J. JONES
MICHAEL A. NELSON
RICHARD H. SPENCER, JR.
LAWRENCE R. CLOUGH
RONALD A. EPSTEIN
WILLIAM H. DALE
JOSEPH H. GROFF III
F. BRUCE SLEEPER
DEBORAH M. MANN
LESLIE E. LOWRY III
PATRICIA M. DUNN

MICHAEL J. QUINLAN
R. LEE IVY
ROGER P. ASCH
NATALIE L. BURNS
SALLY J. DAGGETT
BRENDAN P. RIELLY
NICHOLAS J. MORRILL
MARCIA G. CORRADINI
KATHLEEN T. KONKOLY
MARK A. BOWER
JENNIFER W. PETERS
J. CASEY MCCORMACK
TUDOR N. GOLDSMITH

RECEIVED

DEC 23 2013

December 16, 2013

Dept. of Building Inspections
City of Portland Maine
Ms. Marge Schmuckal
389 Congress St, Room 308
Portland, Maine 04101

RE: 620 - 640 Ocean Avenue Zoning Determination Letter

Dear Ms. Schmuckal:

We are requesting a zoning and code enforcement determination letter for the following property:

WAD
Property Address: 620 Ocean Avenue, 630 Ocean Avenue, 640 Ocean Avenue *- 3 condos*
Chart/Block/Lot: 170/A/20, 174/A/13
Owner Name: JHA Assisted Living, Inc., Cedars Nursing Care Center, Inc., JHA Properties, Inc.

Pursuant to city policy, we have enclosed a check in the amount of \$150.00 made out to the City of Portland for the determination letter request.

Very truly yours,

J. Casey McCormack, Esq.

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
 389 Congress Street
 Portland, Maine 04101

RECEIPT OF FEES

Application No: 0000-1834	Applicant: CEDARS NURSING CARE CENTE
Project Name: 630 OCEAN AVE	Location: 630 OCEAN AVE
CBL: 170 A020001	Application Type: Determination Letter
Invoice Date: 12/04/2013	

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$150.00		\$150.00		\$0.00	On Receipt

Previous Balance	\$0.00
-------------------------	---------------

Fee Description	Qty	Fee/Deposit Charge
Zoning Determinations	1	\$150.00
		\$150.00
Total Current Fees:	+	\$150.00
Total Current Payments:	-	\$150.00
Amount Due Now:		\$0.00

CBL 170 A020001
Bill to: CEDARS NURSING CARE CENTER INC
 630 OCEAN AVE
 PORTLAND, ME 04103

Application No: 0000-1834
Invoice Date: 12/04/2013
Invoice No: 43516
Total Amt Due: \$0.00
Payment Amount: \$150.00

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.
 Check the status of your permit or schedule an inspection on-line at <http://www.portlandmaine.gov/planning/permitstatus.asp>

Assessor's Office | 389 Congress Street | Portland, Maine 04101 | Room 115 | (207) 874-8486

[City](#) [Home](#) [Departments](#) [City Council](#) [E-Services](#) [Calendar](#) [Jobs](#)

This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information:

Services	CBL	170 A020002
	Land Use Type	BENEVOLENT & CHARITABLE
	Verify legal use with Inspections Division	
Applications	Property Location	620 OCEAN AVE UNIT 2
Doing Business	Owner Information	JHA ASSISTED LIVING INC 630 OCEAN AVE PORTLAND ME 04103
Maps	Book and Page	24446/225
Tax Relief	Legal Description	170-A-20 174-A-13 OCEAN AVE 618-654 CEDARS CONDO # 2
Tax Roll	Acres	0

Q & A

Current Assessed Valuation:

browse city services a-z	TAX ACCT NO.	49458	OWNER OF RECORD AS OF APRIL 2013 JHA ASSISTED LIVING INC
	LAND VALUE	\$1,097,700.00	630 OCEAN AVE
	BUILDING VALUE	\$3,007,900.00	PORTLAND ME 04103
browse facts and links a-z	BENEVOLENT AND CHARITABLE	(\$4,105,600.00)	
	NET TAXABLE - REAL ESTATE	\$0.00	
	TAX AMOUNT	\$0.00	



Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

Building Information:

	Building 1	
Year Built	2008	
Style/Structure Type	NURSING HOME	
# Units	1	
Building Num/Name	1 - THE INN AT CEDARS	
Square Feet	26317	

[View Sketch](#) [View Map](#) [View Picture](#)

Exterior/Interior Information:

	Building 1	
Levels	B1/B1	
Size	2021	
Use	SUPPORT AREA	
Height	8	
Heating	HW/STEAM	
A/C	NONE	

	Building 1	
Levels	01/01	
Size	12208	
Use	NURSING HOME	



Best viewed at 800x600, with Internet Explorer

Height 8
Walls FRAME
Heating HEAT PUMP
A/C CENTRAL

Building 1

Levels 02/02
Size 12088
Use NURSING HOME
Height 8
Walls FRAME
Heating HEAT PUMP
A/C CENTRAL

Other Features:

Building 1

Structure PORCH - ENCL UPPER
Size 153X1

Building 1

Structure PORCH - ENCL
Size 153X1

Sales Information:

Sale Date	Type	Price	Book/Page
10/10/2006	LAND + BUILDING	\$150,000.00	24446/225
7/10/2006	LAND + BUILDING	\$0.00	24155/029

[New Search!](#)

Assessor's Office | 389 Congress Street | Portland, Maine 04101 | Room 115 | (207) 874-8486

[City](#)
[Home](#)
[Departments](#)
[City Council](#)
[E-Services](#)
[Calendar](#)
[Jobs](#)

This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information:

Services

Applications

Doing Business

Maps

Tax Relief

Tax Roll

Q & A

CBL 170 A020001
Land Use Type BENEVOLENT & CHARITABLE
Verify legal use with Inspections Division
Property Location 630 OCEAN AVE UNIT 1
Owner Information CEDARS NURSING CARE CENTER INC
 630 OCEAN AVE
 PORTLAND ME 04103
Book and Page 10354/212
Legal Description 170-A-20 174-A-13
 OCEAN AVE 618-654
 CEDARS CONDO # 1
Acres 0

Current Assessed Valuation:

[browse city services a-z](#)

[browse facts and links a-z](#)

TAX ACCT NO. 23840 **OWNER OF RECORD AS OF APRIL 2013**
 CEDARS NURSING CARE CENTER INC
LAND VALUE \$1,097,700.00
BUILDING VALUE \$6,668,800.00
BENEVOLENT AND CHARITABLE (\$7,766,500.00)
NET TAXABLE - REAL ESTATE \$0.00
TAX AMOUNT \$0.00

630 OCEAN AVE
PORTLAND ME 04103



Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

Building Information:

Best viewed at 800x600, with Internet Explorer

Building 1
Year Built 1991
Style/Structure Type NURSING HOME
Units 99
Building Num/Name 1 - CEDARS
Square Feet 49382

[View Sketch](#)
[View Map](#)
[View Picture](#)

Exterior/Interior Information:

Building 1
Levels B1/B1
Size 6886
Use NURSING HOME
Height 11
Heating HOT AIR
A/C CENTRAL

Building 1
Levels 01/01
Size 21248
Use NURSING HOME

Use NURSING HOME
Height 12
Walls BRICK/STONE
Heating HOT AIR
A/C CENTRAL

Building 1

Levels 02/02
Size 21248
Use NURSING HOME
Height 11
Walls BRICK/STONE
Heating HOT AIR
A/C CENTRAL

Other Features:

Building 1

Structure SPRINKLER - WET
Size 12345X1

Building 1

Structure ELEVATOR - ELEC. PASSENGER
Size 1X150

Sales Information:

Sale Date	Type	Price	Book/Page
10/23/1992	LAND + BUILDING	\$0.00	10354/212

New Search!

Assessor's Office | 389 Congress Street | Portland, Maine 04101 | Room 115 | (207) 874-8486

[City](#) [Home](#) [Departments](#) [City Council](#) [E-Services](#) [Calendar](#) [Jobs](#)

This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information:

Services

Applications

Doing Business

Maps

Tax Relief

Tax Roll

Q & A

CBL 170 A020003
Land Use Type BENEVOLENT & CHARITABLE
 Verify legal use with Inspections Division
Property Location 640 OCEAN AVE UNIT 3
Owner Information JHA PROPERTIES INC
 630 OCEAN AVE
 PORTLAND ME 04103
Book and Page
Legal Description 170-A-20 174-A-13
 OCEAN AVE 618-654
 CEDARS CONDO # 3
Acres 0

Current Assessed Valuation:

[browse city services a-z](#)

[browse facts and links a-z](#)

TAX ACCT NO. 49568 **OWNER OF RECORD AS OF APRIL 2013**
 JHA PROPERTIES INC
LAND VALUE \$1,097,700.00 630 OCEAN AVE
BUILDING VALUE \$13,366,400.00 PORTLAND ME 04103
BENEVOLENT AND CHARITABLE (\$14,464,100.00)
NET TAXABLE - REAL ESTATE \$0.00
TAX AMOUNT \$0.00



Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

Building Information:

Best viewed at 800x600, with Internet Explorer

Building 1
Year Built 1999
Style/Structure Type NURSING HOME
Units 61
Building Num/Name 1 - ATRIUM
Square Feet 87942

[View Sketch](#) [View Map](#) [View Picture](#)

Exterior/Interior Information:

Building 1
Levels 01/01
Size 29314
Use NURSING HOME
Height 8
Walls BRICK/STONE
Heating HOT AIR
A/C CENTRAL

Building 1
Levels 02/03
Size 29314

Use NURSING HOME
Height 8
Walls BRICK/STONE
Heating HOT AIR
A/C CENTRAL

Other Features:

Building 1
Structure CANOPY - AVG
Size 1X740

Building 1
Structure ELEVATOR - ELEC. PASSENGER
Size 2500X500

[New Search!](#)

