

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

**PERMIT ISSUED**

Permit Number: 060345  
APR 10 2006

**CITY OF PORTLAND**

This is to certify that MUSTEIKIS EDMUND

has permission to Home Occupation- Herbalife dependent district

AT 1415 CONGRESS ST L 194 C026001

provided that the person or persons who perform or supervise the work in 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 procedure before this building or part thereof is closed 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

*Jamie Bourke* 4/6/06  
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: 06-0345	Issue Date: <b>PERMIT ISSUED</b> APR 10 2006	CBL: 194 C026001
Owner Name: MUSTEIKIS EDMUND	Owner Address: 1415 CONGRESS ST	Phone:
Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: _____ Zone: <u>3</u>

Location of Construction: 1415 CONGRESS ST	Owner Name: MUSTEIKIS EDMUND	Owner Address: 1415 CONGRESS ST
Business Name:	Contractor Name:	Contractor Address:
Lessee/Buyer's Name	Phone:	Permit Type: _____ Zone: <u>3</u>

Past Use: Duplex	Proposed Use: Duplex/ Home Occupation- Herbalife independent distributor
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Permit Fee: \$225.00	Cost of Work: \$225.00	CEO District: 3	<i>primary zone</i>
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FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <u>R3</u> Type _____
Signature: _____	Signature: <u>Jeanie Bourke</u>

Proposed Project Description:  
*leg use: 2 family residential D.U.*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  
Action:  Approved  Approved w/Conditions  Denied  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: Idobson	Date Applied For: 03/14/2006
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**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 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**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan

Maj  Minor  MM

*ok with conditions*  
Date: 3/21/06

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmar  
 Does Not Require Review  
 Requires Review  
 Approved  
 Approved w/Conditions  
 Denied

Date: \_\_\_\_\_

**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.

Construction: <u>141</u>		
Total Square Footage of Proposed Structure <u>1400</u>	Square Footage of Lot <u>4499</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>194-6-26</u> Block# Lot#	Owner: <u>ED MUSTEIKIS</u>	Telephone: <u>780-6416</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>DEREK MUSTEIKIS</u> <u>1415 CONGRESS, PORTLAND, ME, 04102</u>	Cost Of Work: \$ Fee: \$ <u>225<sup>00</sup>/00</u>
Current use: <u>APARTMENT/LIVING QUARTERS</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Home OCC. Herbalife independent distributor - no walk in customers</u>		
Project description: change of use for a home occupation, to add;		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>DEREK MUSTEIKIS</u>		
Mailing address: <u>DEREK 1415 CONGRESS ST, 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>879-1444</u>		

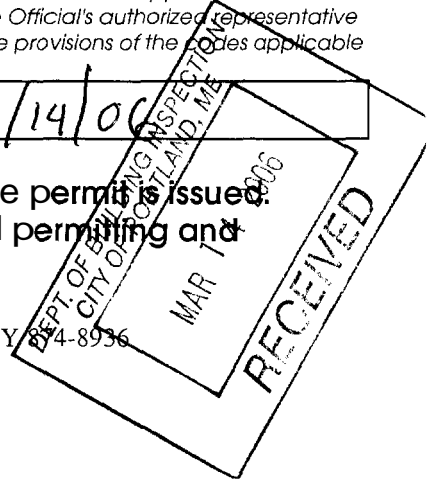
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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>Derek Musteikis</u>	Date: <u>3/14/06</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 4<sup>th</sup> floor of City Hall

389 Congress St Portland, Maine 04101 (207) 874-8700 FAX 874-8716 TTY 874-8936



March 10th, 2006

Ms. Marge Schmuckal  
Zoning Administrator  
Department of Urban Development  
City of Portland  
389 Congress St.  
Portland, Maine 04101

Dear Ms. Schmuckal:

I am requesting a permit to allow me the use of my residence at 1415 Congress St. for a home occupation. I intend to serve as a Herbalife Independent Distributor. In effect my work will be Internet healthcare supply distribution, an acceptable home occupation under item two 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 one of the same.

*"Sales person(s) provided that no retail or wholesale transactions are made on the premises."*

- a. My home occupation will occupy approximately 65 square feet (8%) of floor area of the residence.
- b. Customers place orders with me and then I place the order with Herbalife via the Internet.
- c. Goods are shipped directly to the customer from Herbalife's warehouse in Los Angeles.
- d. No goods will be stored inside or outside the residence.
- e. Storage of the material necessary to perform my work are minimal and are included in the 65 square foot office I use.
- f. There will be no external signage related to my home occupation.
- g. No exterior alterations to the residence are necessary.
- h. Since I will not be meeting clients at my residence, no additional parking is necessary.
- i. No objectionable effects will result from my home occupation.
- j. I will not require the services of any employees.
- k. Since I will not be meeting any clients at my residence, no additional traffic will be generated by my home occupation.
- l. No vehicles even nearing a gross vehicle weight of 6000 pounds are necessary for my home occupation.

As you can see, my home occupation is a secondary use of my residence. The external activity level and impact is negligible and in keeping with the residential character of the neighborhood.

Attached you will find a copy of a floor plan showing the dimensions and area of the home occupation space. Thank you for your assistance in this matter.

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

<b>Card Number</b>	1 of 1
<b>Parcel ID</b>	194 C026001
<b>Location</b>	1415 CONGRESS ST
<b>Land Use</b>	TWO FAMILY
<b>Owner Address</b>	MUSTEIKIS EDMUND 1415 CONGRESS ST PORTLAND ME 04102
<b>Book/Page</b>	
<b>Legal</b>	194-C-26 CONGRESS ST 1411-1415 BOODY ST 14110 SF

R-5 pr (A)  
12-3

Current Assessed Valuation For Fiscal Year 2006

<b>Land</b>	<b>Building</b>	<b>Total</b>
\$50,670	\$226,330	\$277,000

Estimated Assessed Valuation For Fiscal Year 2007\*

<b>Land</b>	<b>Building</b>	<b>Total</b>
\$64,900	\$296,400	\$361,300

\* Value subject to change based upon review of property status as of 4/1/06. The tax rate will be determined by City Council in May 2006.

Property Information

<b>Year Built</b> 1910	<b>Style</b> old Style	<b>Story Height</b> 2	<b>Sq. Ft.</b> 4499	<b>Total Acres</b> 0.324		
<b>Bedrooms</b> 6	<b>Pull Baths</b> 3	<b>Half Baths</b>	<b>Total Rooms</b> 15	<b>Attic</b> Full Finsh	<b>Basement</b> Full	

Outbuildings

<b>Type</b>	<b>Quantity</b>	<b>Year Built</b>	<b>Size</b>	<b>Grade</b>	<b>Condition</b>
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Sales Information

<b>Date</b> 02/12/1992	<b>Type</b> LAND t BLDING	<b>Price</b>	<b>Book/Page</b> 09932-313
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Picture and Sketch

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

[Click here to view Tax Roll Information.](#)