

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

## BUILDING PERMIT

This is to certify that BARBARA & HEIDI MACQUINN

Located At 10 TWIN KNOLLS UNIT

Job ID: 2011-08-1896-CH OF USE

CBL: 194 - - C - 043 - 010 - - - -

has permission to Renting out 2 rooms

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes 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

**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](mailto: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. A certificate of occupancy inspection is required. Please call the number above.**

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 OCCUPIED.



# PORTLAND MAINE

*Strengthening a Remarkable City, Building a Community for Life • [www.portlandmaine.gov](http://www.portlandmaine.gov)*

Director of Planning and Urban Development  
Penny St. Louis

Job ID: 2011-08-1896-CH OF USE

Located At: 10 TWIN KNOLLS  
UNIT

CBL: 194 - - C - 043 - 010 - - - -

## **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. This property shall remain ten (10) residential condominiums. Any change of use shall require a separate permit application for review and approval.
3. This particular single family condo unit (#10) is still considered a single family dwelling with the letting out of two rooms as allowed under 14-404(e) of the land use zoning ordinance. The requirements of 14-404(e) shall be upheld during the existence of letting out the two rooms.
4. No additional kitchen facilities shall be allowed to be added to accommodate the two rooms.

# City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-08-1896-CH OF USE	Date Applied: 8/5/2011	CBL: 194 - - C - 043 - 010 - - - -
Location of Construction: TWIN KNOLLS LANE - UNIT #10	Owner Name: BARBARA & HEIDI MACQUINN	Owner Address: 10 TWIN KNOLLS LN PORTLAND, ME - MAINE 04102
Business Name: Twin Knolls Condos	Contractor Name: owner	Contractor Address:
Lessee/Buyer's Name:	Phone:	Permit Type: change of use
Past Use: 10 residential condominiums	Proposed Use: In single family condo unit #10 to change the use to a single family condo with the letting out of two rooms	Cost of Work: \$1000.00
	Fire Dept: <i>NA</i>	Inspection: 12.3 Use Group: 5B Type: TRC 09
Proposed Project Description: C of U from Res Condo to Res Condo w/2 rm to rent	Pedestrian Activities District (P.A.D.)	
Permit Taken By: Lannie	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 informatin may invalidate a building permit and stop all work.</p>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland <i>ok under 1A-404(e)</i></p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: <i>8/12/14</i></p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p><b>Historic Preservation</b></p> <p><input checked="" type="checkbox"/> Not in Dist 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>
	<p><b>CERTIFICATION</b></p>		

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 appication 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	PHON	





# General Building Permit Application

P-3  
PRW

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: <u>10 Twin Knolls Lane</u>			
Total Square Footage of Proposed Structure/Area		Square Footage of Lot	Number of Stories
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#  <u>194</u> <u>C</u> <u>43</u>		Applicant * <u>must be owner, Lessee or Buyer</u> * Name Address City, State & Zip	Telephone:
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name <u>Heidi MacQuinn</u> Address <u>10 Twin Knolls Lane</u> City, State & Zip <u>Portland ME 04103</u>		Cost Of Work: \$ C of O Fee: \$ Total Fee: \$
Current legal use (i.e. single family) <u>residential condo</u> Number of Residential Units <u>1</u> <span style="color: red;">legal use 10 res. condos</span>			
If vacant, what was the previous use? _____			
Proposed Specific use: <u>residential condo w/ two room apartment - one person per room</u>			
Is property part of a subdivision? _____ If yes, please name _____			
Project description: <u>Change of use from residential condo to residential condo w/ two rooms for rent</u>			
Contractor's name: <u>N/A</u>			
Address: _____			
City, State & Zip _____		Telephone: _____	
Who should we contact when the permit is ready: <u>Heidi MacQuinn</u>		Telephone: <u>299-4730</u>	
Mailing address: <u>See above</u>			

**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 [www.portlandmaine.gov](http://www.portlandmaine.gov), 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: Heidi MacQuinn Date: 8/5/11

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

sale," "lawn sale," "attic sale," "rummage sale," or other similar casual sale of tangible personal property which is advertised by any means whatsoever whereby the public at large is or can be made aware of such sale, shall be deemed to be "customarily incidental" if such sale occurs after sales have been conducted on the same premises for six (6) or more days previously during the calendar year.

Except where the principal use consists of the sale of alcoholic beverages for consumption on premises or where the principal structure is an airline terminal, pinball machines or amusement devices shall not be considered to be accessory uses whenever there are more than a total of two (2) such machines or devices on the premises.

- (b) Off-street parking when serving conforming uses located in any zone.
- (c) Home occupations as defined in section 14-47 and section 14-410.
- (d) Signs as defined in division 22 of this article.

X (e) The letting of rooms within an existing dwelling unit in any residential zone, provided that:

1. There shall be no more than two (2) persons occupying such room or rooms; *one person per room.*
2. There shall be not more than two (2) rooms per dwelling unit occupied for such use; and *two bedrooms rented.*
3. There shall be no increase in the bathroom and/or kitchen facilities in the dwelling, and no such facility shall have been constructed in the immediately preceding two (2) years. *no.*

(Code 1968, § 602.18.C; Ord. No. 574-81, 4-6-81; Ord. No. 66-87, § 1, 11-2-87; Ord. No. 240-09/10, 6-21-10)

**Sec. 14-405. Business entrances.**

Supplement 2010-3  
14-434

Second

First floor - open area - bedroom for one renter.  
- bedroom - for second renter.  
- bathroom

*Heidi MacLinn*

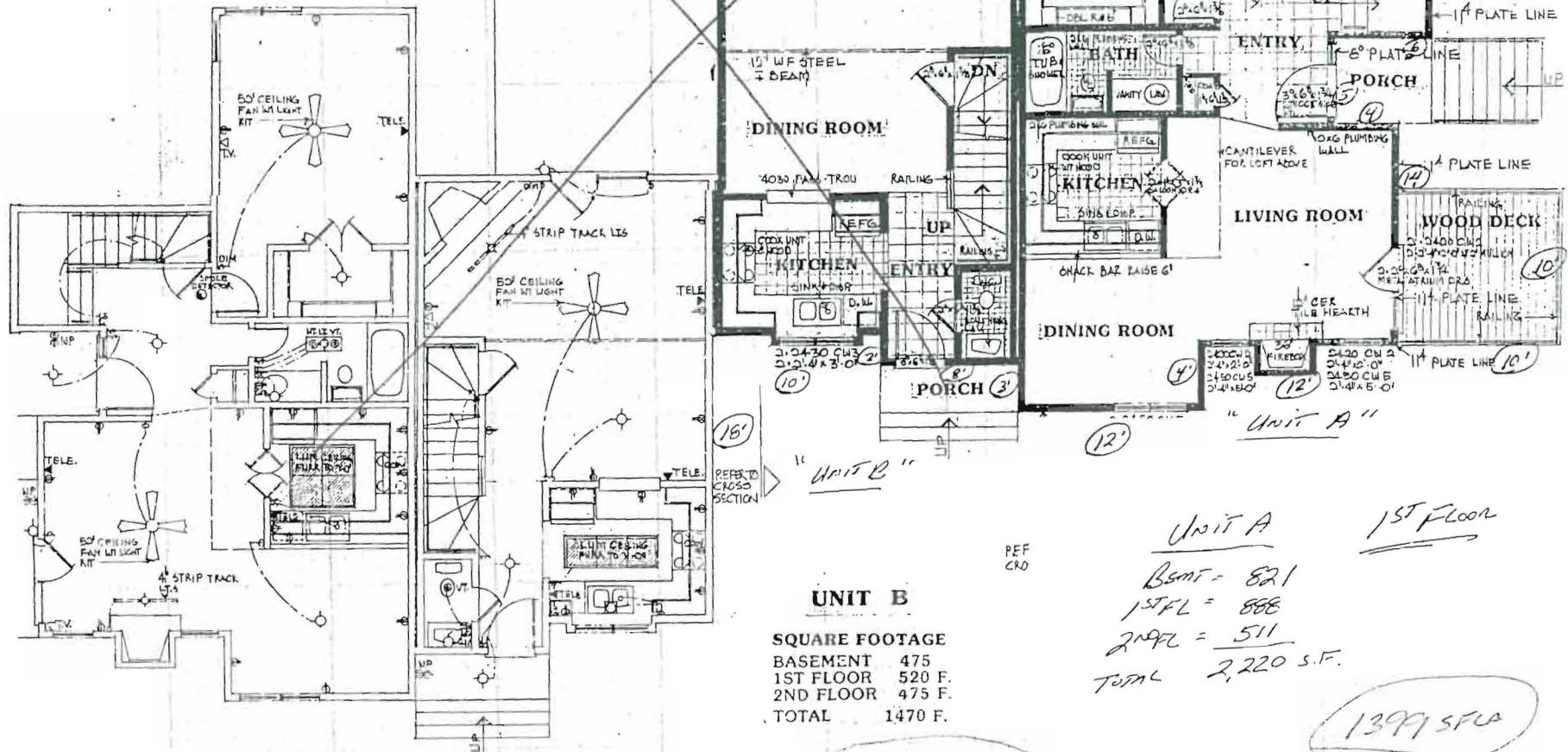
first floor - Heidi's bedroom

kitchen, dining area & living room & bathroom



144-C-45

4 UNIT STYLE 1ST FLOOR  
"TWIN KNOLLS"



### UNIT B

SQUARE FOOTAGE	
BASEMENT	475
1ST FLOOR	520 F.
2ND FLOOR	475 F.
TOTAL	1470 F.

995 PSELA

### UNIT A

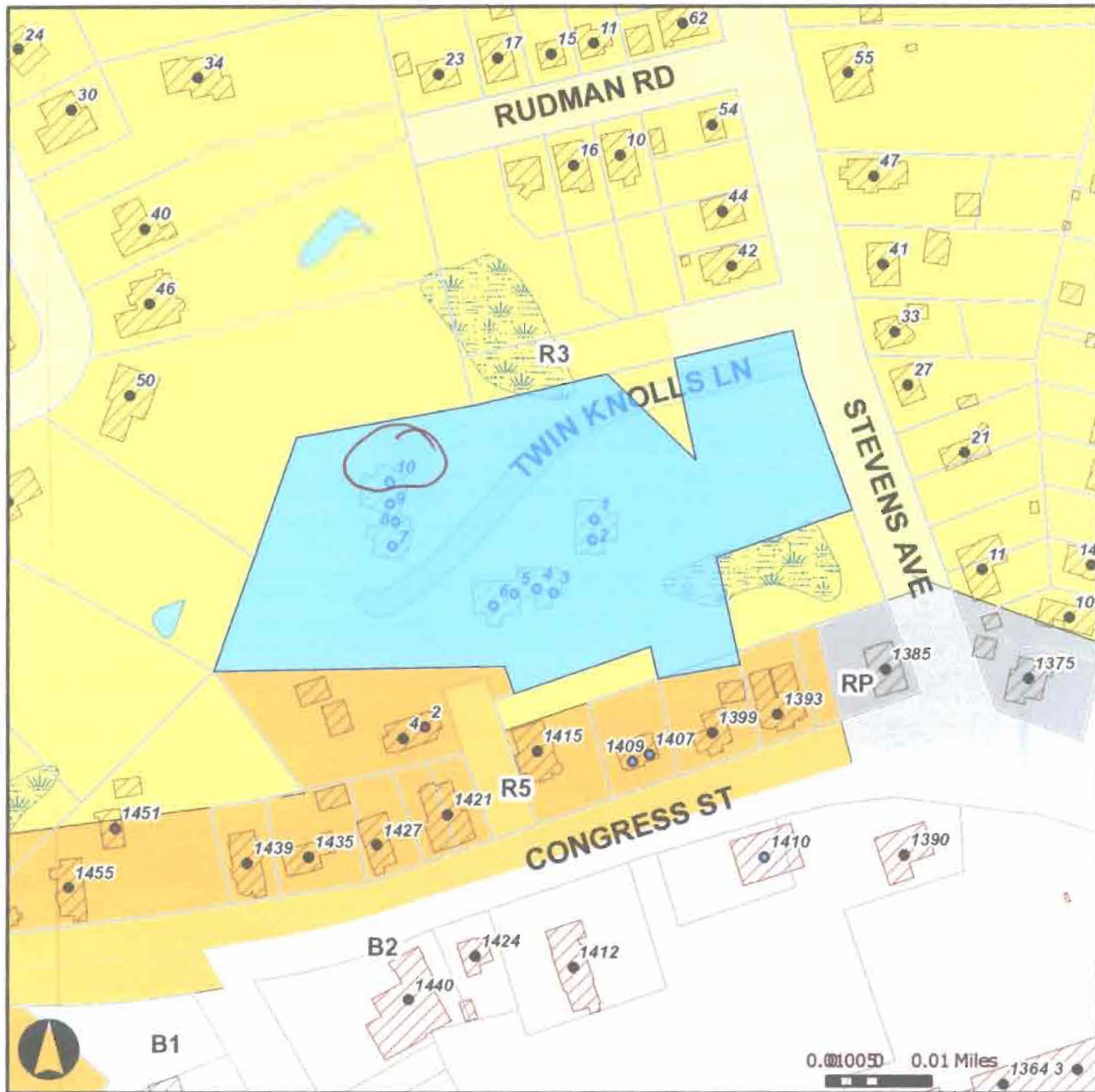
BSMT = 821  
1ST FL = 888  
2ND FL = 511  
TOTAL 2,220 S.F.

1397 SFLA





# Map



## Address Candidates



## Parcels



## Parcels



## Interstate



## Streets



## Shoreland Overlay Zone



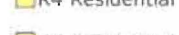
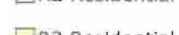
## Stream Overlay Zone



## Island Zoning



## Zoning (continued)



## Zoning (continued)





# CITY OF PORTLAND, MAINE

Department of Building Inspections

## Original Receipt

August 5 20 11

Received from Heidi MacQuinn

Location of Work 10 Twin Knolls Lane

Cost of Construction \$ \_\_\_\_\_ Building Fee: 30.00

Permit Fee \$ \_\_\_\_\_ Site Fee: \_\_\_\_\_

Certificate of Occupancy Fee: 75.00

Total: 105.00

Building (IL) ☒ Plumbing (I5) \_\_\_\_\_ Electrical (I2) \_\_\_\_\_ Site Plan (U2) \_\_\_\_\_

Other \_\_\_\_\_

CBL: 194-C-413

Check #: CC

Total Collected \$ 105.00

**No work is to be started until permit issued.  
Please keep original receipt for your records.**

Taken by: AGM

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy

