Form#P04	DISPLA	Y THIS	CARD	ON	PRINCIPAL	. FRONT	AGE	OF	WORK	
			CITY	OF	F PORT	LAN	D			
Please Read Application And Notes, If Any, Attached	1		E	Ρ	ERMIT	TION	Permit	Number	RMIT ISSUE	
This is to certify	that <u>KELS</u>	EA ANNET	<u>TE M &amp; H</u>	ARD (	a malicant			J	UL 2 7 2005	
has permission	to Chang	ge of use for ]	Home Occ	tion/ ind	ndent ine tic	eke oker				
AT 114 CAPIS	IC ST					<b>C</b> , 195 B	039001-	UIIY	OF PORTLA	ND
provided t	hat the pe	rson or p	ersons,	m or	ation	epting t	his per	mit s	hall comply	with all
of the prov the construction this depart	uction, ma				nd of the uildings and s				Portland reg pplication c	
	blic Works fo f nature of we ation.			fication h and w re this ed or IR NOT	n permit on p ding or t th		procur	ed by c	of occupancy of owner before the pereof is occupie	is build-
	REQUIRED AF						1	V	7/2	1
Fire Dept									1 1/2	2/05
Health Dept Appeal Board						In	$\sim$	10	// //	'
Other			nn				$\bigwedge$	<u>\"/</u>	~	
	DepartmentNam	le						- Bayloing &	Inspection Services	
			PENAL		R REMOVING		$\sim$	$\mathcal{I}$		
						د س				

City of Portland, Maine - Bu 389 Congress Street, 04101 Tel:	0	**		rmit No: 05-0894	BERNANTIS		39001	
Location of Construction:	Owner Name:		Owne	r Address:	JUL 27	200r Phone:	1	
114 CAPISIC ST	KELSEA ANI	NETTE M & HOWA	114	CAPISIC ST	001 27	2005		
Business Name:	Contractor Name	2:	Contr	actor Address:		Phone		
	Applicant		Por	tland   (	CITY OF POR	TLAND		
Lessee/Buyer's Name	Phone:		Permi	Permit Type:				
			Cha	inge of Use H	Home Occupation	ı	183	
Past Use:	Proposed Use:		Perm	it Fee:	Cost of Work:	CEO District:		
single Family Home	Change of use	for Home		\$225.00	\$225.00	3		
		dependent airline		Approved INSP Use O	$\frac{\text{SPECTION:}}{\text{TBC 2003}}$			
Proposed Project Description:							1	
Change of use for Home Occupation	/ independent air	line ticket broker	Signature: Signature					
			PEDE	STRIAN ACTI	VITIES DISTRICT	(P.A.D.)		
			Actio	Action: Approved Approved w/Conditions Devied				
							$\bigcirc$	
		ı — — — — — — — — — — — — — — — — — — —	Signa			Date:		
-	Applied For: 01/2005			Zoning	Approval			
1. This permit application does not	t preclude the	Special Zone or Reviews		rs Zoning Appeal		Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not in District or Landmar		
2. Building permits do not include septic or electrical work.	Wetland		Miscellaneous		Does Not Require Review			
3. Building permits are void if wor within six (6) months of the date	Flood Zone		Conditional Use		Requires Review			
False information may invalidate a building permit and stop all work		Subdivision		Interpretation		Approved		
		Site Plan		Approve	d	Approved w	/Conditions	
		Maj Minor M	mdit	Denied		Denied	$\bigcirc$	
		Date: 97	19/00	Date:		late:	$\rightarrow$	

## 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: //4	CAPISIC St. Nortland	MEOYIDI				
Total Square Footage of Proposed Structu	4	,				
ChAnce OF USE	, 19					
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# /95 B 39	Owner: MICHAEL MI Gam	Telephone: 603770//// ce//				
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Claudete FAGundes Charles 114 CAPISH St: M.L.	Cost Of Work: \$ Fee: \$				
Current use: Kesickentian Portland, Me 04101 If the location is currently vacant, what was prior use:						
Contractor's name, address & telephone:						
Who should we contact when the permit is ready:						
Mailing address:						
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:

IF THE REQURED 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 APROVE 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

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City of Portland, Maine - Building or Use Permit				Permit No:	Date Applied For:	CBL:	
<b>389</b> Congress Street, <b>04101</b> Tel: (207) 874-8703, Fax: (207) 874-8716				05-0894	07/01/2005	195 B039001	
Jocation of Construction:	location of Construction: Owner hame: O			vner Address:	Phone:		
114 CAPISIC ST	KELSEA ANNETTE	M & HOWAR	. 11	114 CAPISIC ST			
Business Name:	Contractor Name:		Co	ntractor Address:	Phone		
	Applicant			ortland			
.essee/Buyer's Name	Phone:		Per	Permit Type:			
			Change of Use Home Occupation				
'roposed Use:		Propos	sed P	Project Description:			
Change of use for Home Occupation/ independent airline ticket broker			nge o er	of use for Home C	Occupation/ mdepend	lent airline ticket	

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City of Portland, Maine Code of Ordinances Sec 14-410 Land Use Chapter 14 Rev. 12-1-00

- c. Hours of operation shall be limited to 8:30 a.m. to 9:30 p.m.
- 20. Office facility of a minister, rabbi, or priest;

21. Photographic studios;

22. Professional counseling and consulting services;

23. Profession 1 research services;

24.

- Sales person provided that no retail or wholesale transactions are made on the premises;
- **5.** Small appliance repair;
- 26. Snow plowing provided that only one (1) snow plow vehicle is stored on or generated from the site;
- 27. Special tutoring or instruction (not to exceed three (3) pupils at any given time);
- 28. Stenographic and other clerical services.
- (c) A home occupation that is not listed in paragraph (b) of this section but is similar to and no more objectionable than ,those home occupations listed' in that paragraph, shall be permitted as a conditional use subject to the requirements of paragraph (a) of this section and section 14-474 (conditional use) of this article. This provision shall not include veterinarians, kennels, animal raising, funeral homes, retail uses including antique shops, restaurants, dancing studios, towing services, repair and painting of automobiles as home occupations.

(Code 1968, § 602.18.I; Ord. No. 277-77, 11-7-77; Ord. No. 548-85, § 1, 5-6-85; Ord. No. 76-85, § 1, 7-1-85; Ord. No. 66-87, § 2, 11-2-87; Ord. NO. 329-90, 5-7-90)

Sec. 14-411. Reserved. Sec. 14-412. Reserved. Sec. 14-413. Reserved. Sec. 14-414. Reserved. Sec. 14-415. Reserved. Sec. 14-416. Reserved. Ms. Marge Schmuckal Zoning Administrator Department of Urban Development City of Portland 389 Congress Street Portland, Maine 04101

Dear Ms. Schmuckal:

I am requesting a permit to allow me the use of my residence at 114 Capisic Street, Portland, Maine 04101 for a home occupation. I intend to serve **as** an independent airline ticket broker. In effect my work will be phone, fax and computer based airline ticketing listed under item (24) 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.

- a. My home occupation will occupy approximately 169 square feet (9%) of the floor area of the residence.
- b. No goods will be stored, displayed or visible from outside the residence.
- C Storage of the material necessary to perform my occupation are minimal and included in the 169 square feet of floor space mentioned above.
- d. There will be no external signage related to my home occupation.  $\circ \mathcal{V}$
- e. No exterior alterations to the residence are necessary.
- f. Since I will not be meeting clients at my residence, no additional parking is necessary
- g. No objectionable effects will result from my home occupation.
- h. I will not require the services of any employees  $O \mathcal{K}$
- 1. Since I will not be meeting clients at my residence, no additional traffic will be generated by my home occupation.
- **j**. No vehicles even nearing a gross vehicle weight of 6,000 pounds are necessary for my home.

**As** you can see, my home occupation is a secondary and incidental use of my residence. The external activity level and impact is not effected in keeping with the residential character of the neighborhood.

Attached you will find a copy of the floor plan showing the dimensions and area of the home occupation space, as well as a letter from the owner of the residence granting permission to conduct a home occupation on the premises. Thank you and feel free to contact me if you have any questions regarding this matter.

Best Regards Clauden Fagundes

(207) 828 3717 Home (617) 821 5288 Cell Ms. Marge Schmuckal Zoning Administrator Department of Urban Development City of Portland **389** Congress Street Portland, Maine 04 101

Dear Ms. Schuckal,

As the owner of 114 Capisic Street, Portland, Maine 04101, I (Michael McGann) grant permission of Claudete A. Fagundes (Claudete Travel) to perform her home office occupation at the above mentioned address.

Signature

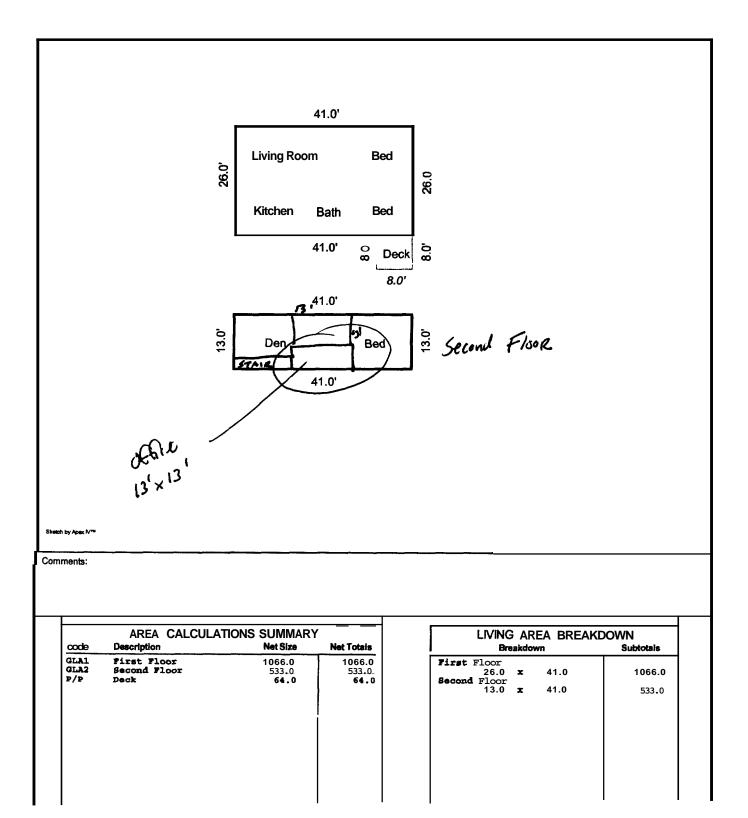
6/21/05 Date

6

Best Regards,

Michael McGann (207) 253 5245 Home (603) 770 11111 Cell

	Building Choton		
Borrower/Client McGann			
Property Address 114 Capisic St			
City_Portland	County Cumberland	State ME	<b>Zip Code</b> 04102-2247
Lender CWSOM/Landsafe			



## Building Sketch (Page - 1)

