

960950

Location of Construction: 2001 Congress St		Owner: Segerstrom, Mark		Phone: 879-5433	
Owner Address:		Leasee/Buyer's Name: A Better Way Chiropractic		Phone:	
Contractor Name:		Address:		Phone:	
Past Use: Dr's Office		Proposed Use: Same		COST OF WORK: \$	
				PERMIT FEE: \$ 29.50	
				INSPECTION: Use Group: Type:	
Proposed Project Description: Erect Signage		Signature:		Signature: <i>ole 9/24/96</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)			
		Action: Approved <input type="checkbox"/>			
		Approved with Conditions: <input type="checkbox"/>			
		Denied: <input type="checkbox"/>			
Permit Taken By: Mary Gresik		Date Applied For: 19 September 1996			

Permit No: 960950

**PERMIT ISSUED**

SEP 26 1996

**CITY OF PORTLAND**

Permit Issued: SEP 26 1996

Zone: *R-2* CBL: 216-A-010

Zoning Approval: *ole 9/24/96*

Special Zone or Reviews:

Shoreland *with attached*

Wetland *conducting*

Flood Zone

Subdivision

Site Plan  maj  minor  mm

1. This permit application doesn't 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..

*Approved with letter*

**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 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

SIGNATURE OF APPLICANT *Mark Segerstrom* ADDRESS: DATE: 19 September 1996 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

Denied

**Historic Preservation**

Not in District or Landmark

Does Not Require Review

Requires Review

Action:

Approved

Approved with Conditions

Denied

Date: *9/20/96*

*D. Andrew B*

CEO DISTRICT 4

*A. Powers*

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

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Owner Address:		Leasee/Buyer's Name: A Better Way Chiropractic		Phone:			BusinessName:	
Contractor Name:		Address:		Phone:			COST OF WORK: \$ PERMIT FEE: \$ 29.50 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type: Signature: Signature:	
Past Use: Dr's Office		Proposed Use: Same		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:			Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Proposed Project Description: Erect Signage				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: 9/26/96				
Permit Taken By: Mary Gresik		Date Applied For: 19 September 1996						

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White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

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LAND USE - ZONING REPORT

ADDRESS: 2001 Congress St DATE: 9/24/96

REASON FOR PERMIT: erect free standing sign

BUILDING OWNER: MARK Segerstrom C-B-L: 216-A-010

PERMIT APPLICANT: owner

APPROVED: with conditions DENIED:

# 9

CONDITION(S) OF APPROVAL

1. During its existence, all aspects of the Home Occupation criteria, Section 14-410, shall be maintained.
2. The footprint of the existing \_\_\_\_\_ shall not be increased during maintenance reconstruction.
3. All the conditions placed on the original, previously approved, permit issued on \_\_\_\_\_ are still in effect for this amendment.
4. Your present structure is legally nonconforming as to rear and side setbacks. If you were to demolish the building on your own volition, you will not be able to maintain these same setbacks. Instead you would need to meet the zoning setbacks set forth in today's ordinances. In order to preserve these legally non-conforming setbacks, you may only rebuild the garage in place and in phases.
5. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
6. Our records indicate that this property has a legal use of \_\_\_\_\_ units. Any change in this approved use shall require a separate permit application for review and approval.
7. Separate permits shall be required for any signage.
8. Separate permits shall be required for future decks and/or garage.
9. Other requirements of condition your plans did not show the total height

of the sign. It is restricted to a maximum height of 8 feet from grade

Marge Schmuckal

Marge Schmuckal, Zoning Administrator,  
Asst. Chief of Code Enforcement



PRODUCER

Cole-Harrison Agency
P.O. Box 358
83 Main St.
Kennebunk

ME 04043

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- A ACADIA INSURANCE COMPANY
B
C
D

INSURED

Dr. Mark Segerstrom
2001 Congress Street

Portland, ME 04102

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: CO LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFFECTIVE DATE, POLICY EXPIRATION DATE, LIMITS. Includes sections for General Liability, Garage Liability, Excess Liability, and Workers Compensation.

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES, SPECIAL TREATMENT
ATT: SIGN PERMIT, BUILDING INSPECTION DEPARTMENT ROOM 315

CERTIFICATE HOLDER

CITY OF PORTLAND MAINE
Building Inspection Dept.
Room 315
Portland ME

CANCELLATION

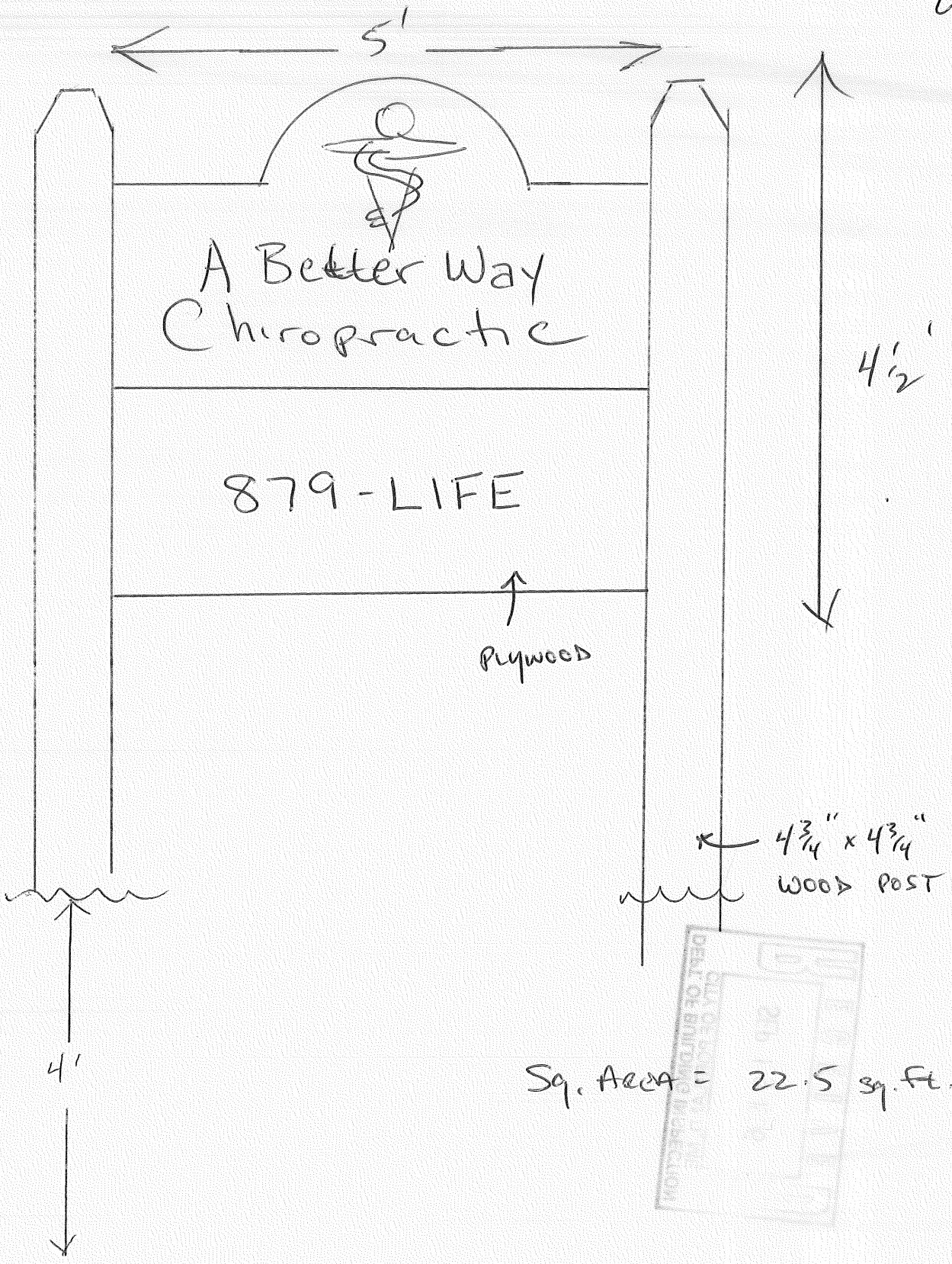
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED OR EXPIRE, THE ISSUING COMPANY SHALL BE RESPONSIBLE FOR MAILING TO THE CERTIFICATE HOLDER, NAMED TO THE LEFT, WRITTEN NOTICE OF SUCH CANCELLATION OR EXPIRATION. FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO LIABILITY OR OBLIGATION UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

COLE-HARRISON AGENCY

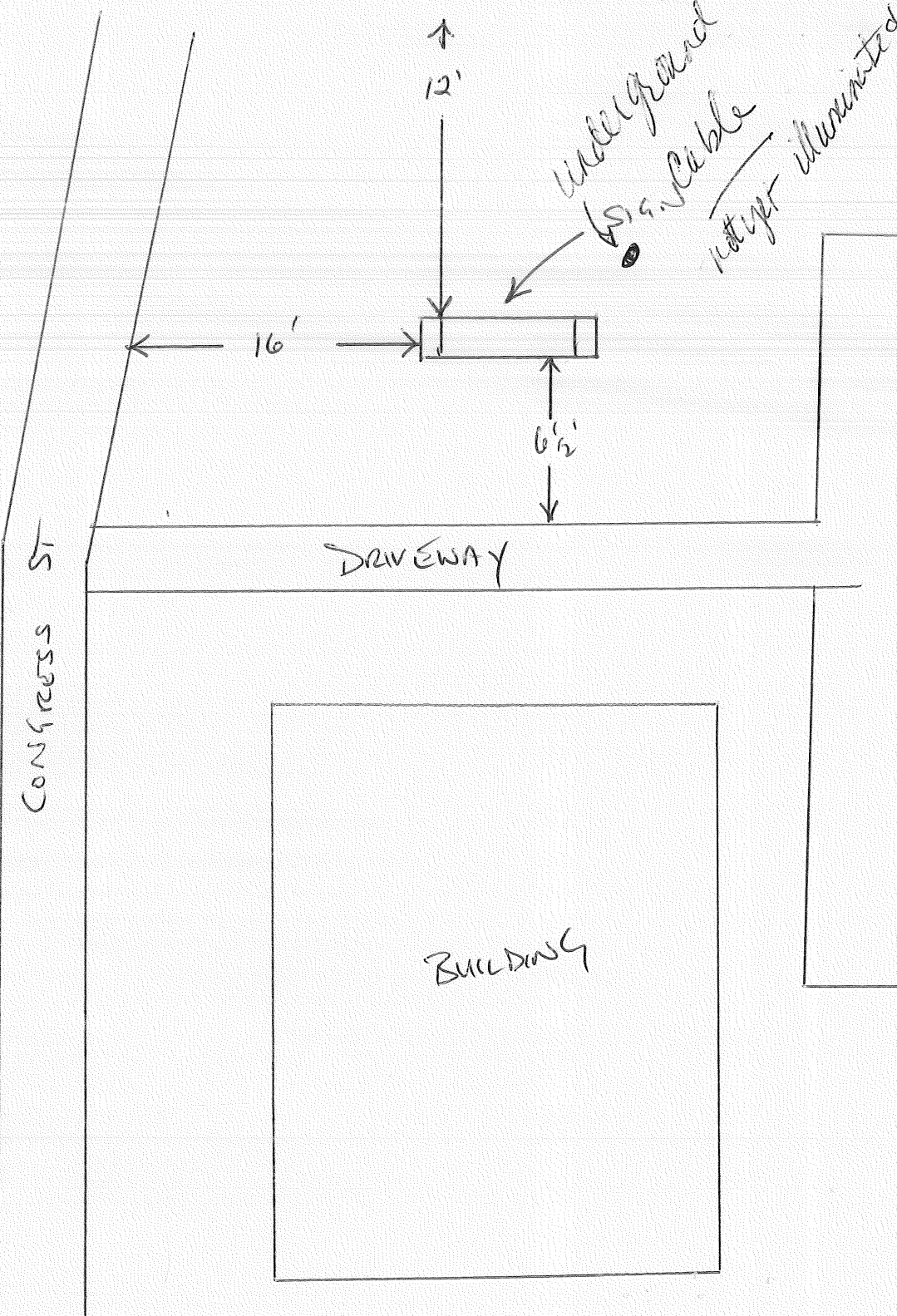
Signature of authorized representative

Condition:  
No higher than  
8'



Sq. Area = 22.5 sq. ft.

R-P



30" MAX - 22.5"  $\phi$  <sup>Shain</sup>  
 8' high - Not shown  
 max  
 5' setbacks  
 req - 12' + 16'  
 show



Condition

**SIGNAGE**

**PLEASE ANSWER ALL QUESTIONS**

ADDRESS: 2001 CONGRESS STREET ZONE: RP

OWNER: DR. MARK C SEGERSTROM

APPLICANT: SAME

ASSESSOR NO.: 216-A-010

SINGLE TENANT LOT? YES  NO

MULTI TENANT LOT? YES  NO

FREESTANDING SIGN? YES  NO   
(ex. pole sign..)

DIMENSIONS 5' x 4 1/2' - (22.5')

*30# max*

MORE THAN ONE SIGN? YES  NO  DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES  NO  DIMENSIONS \_\_\_\_\_  
(attached to bldg)

MORE THAN ONE SIGN? YES  NO  DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: NONE

LOT FRONTAGE (FEET) 85 FEET

BLDG FRONTAGE (FEET) 25 FEET

*No height shown limited to 8' high*

AWNING YES  NO  IS AWNING BACKLIT? YES  NO

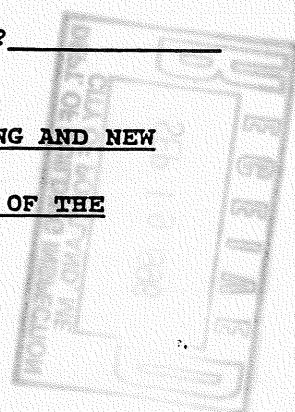
HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? \_\_\_\_\_

**A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW**

**SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE**

**PROPOSED SIGNS ARE ALSO REQUIRED.**





INFORMATION REQUIREMENTS FOR SIGN PERMIT APPLICATION

APPLICANTS FOR A SIGN PERMIT WILL BE ASKED TO SUBMIT THE FOLLOWING INFORMATION TO THE CODE ENFORCEMENT OFFICE:

1. PROOF OF INSURANCE
2. LETTER OF PERMISSION FROM THE OWNER
3. A SKETCH PLAN OF THE LOT, INDICATING LOCATION OF BUILDINGS, DRIVEWAYS AND ANY ABUTTING STREETS OR RIGHT OF WAYS. LENGTHS OF BUILDING FRONTAGES AND STREET FRONTAGES SHOULD BE NOTED (SEE ATTACHED)
4. INDICATE ON THE PLAN ALL EXISTING AND PROPOSED SIGNS
5. COMPUTATION OF THE FOLLOWING:
  - A) SIGN AREA OF EACH EXISTING AND PROPOSED BUILDING SIGN
  - B) SIGN AREA HEIGHT AND SETBACK OF EACH EXISTING AND PROPOSED FREESTANDING SIGN

A SKETCH OF ANY PROPOSED SIGN(S), INDICATING DIMENSIONS, MATERIALS, SOURCE OF ILLUMINATION AND CONSTRUCTION METHOD (SEE ATTACHED)

FEE FOR PERMIT - \$25.00 PLUS \$0.20 PER SQUARE FOOT

NOTE: ONCE A SKETCH PLAN HAS BEEN FILED FOR A PROPERTY, THE CODE ENFORCEMENT OFFICE WILL KEEP A RECORD OF THE PLAN SO THAT A NEW SKETCH PLAN WILL NOT BE REQUIRED FOR LATER CHANGES TO SIGNAGE ON THE PROPERTY. IN SUCH AN INSTANCE, APPLICANTS WILL ONLY BE REQUIRED TO SUBMIT INFORMATION APPLICABLE TO THE NEW SIGNS.

