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January 21, 2016

Request for Zoning Verification Letter

Dept. of Building Inspections
City of Portland Maine

To:	Ann Machando	From:	Jessica Edge
Company:	City of Portland	Phone:	(405) 253-2437
Phone:		Fax:	Toll-free 800-986-0586
Email:	-amachado@portlandmaine.org	Email:	Jedge@firstam.com

Pages, including this cover page: 3

Subject Property: 191 Riverside St ^{Riverside Ct}
 Use: Berlin City TSL Portland Summit Automotive Group 268-A-002, 268-X-1, 268-B-4, 5, 6, 7, 13

At our client's request, please provide the following information:

- Zoning Compliance/Verification Letter:** Please supply a letter (or use the enclosed template and copy onto letterhead) stating in which zoning district the subject property is currently located, whether or not it is considered to be a permitted use, and any compliance information you may be able to provide. Please use municipality letterhead, or if this is not possible for some reason, please enclose a municipality fax coversheet showing that the zoning letter is enclosed.
- Adjacent Property Designations and Uses (if known):** Current zoning district in which properties adjacent to the subject property North, South, East & West are located ^{W, S - R-4}
- Any Variances, Special Permits or Conditions:** Please note the existence of these items as they relate to the subject property and supply documentation, if available ^{East beyond compliance R-3}
- Code Violations:** Please note whether or not there are currently any open/outstanding zoning or building code violations that apply to the subject property
- Approved Site Plan and/or Conditions of Approval, if applicable:** Please supply one or both of these documents, particularly if the subject property is located in a Planned Development

Please advise me at your earliest convenience of any required fees or forms, if any of these items is not available or if I should be directing any portion of my request to another party. I am on a strict timeline so your prompt attention to this matter is greatly appreciated. Upon completion, please forward the information to me via fax (800-986-0586) or via email (jedge@firstam.com) and US mail. I truly appreciate your help with this matter and look forward to your reply. Please do not hesitate to contact me with any questions or concerns you may have. Thank you very much for your assistance!

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Zoned R-4

Jessica Edge, Research Specialist
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E-mail: Jedge@firstam.com / Fax# (800) 986-0586/ Contact# (405) 253-2437

Subject Property: 191 Riverside St
Use: Berlin City TSL Portland Summit Automotive Group

To Whom It May Concern:

In response to your request for information regarding the above-referenced property, we have researched our files and present the following:

1. The current zoning classification for the subject property is _____.

2. According to the zoning ordinances and regulations of this district, the use of the subject property is a:

Current Use _____

- Permitted Use by Right
- Permitted Use by Special/Specific Use Permit (see comments, or attached approval documentation)
- Permitted Use by Conditional Use Permit (see comments, or attached approval documentation)
- Legal Non-Conforming Use (use was existing prior to the adoption of the zoning ordinance/code)
- Non-Permitted Use

3. Adjacent property zoning designation: North: _____
South: _____
East: _____
West: _____

4. Conformance: Per current zoning ordinances and regulations applicable to the subject property, the current structure(s) is:

- Legal Conforming (complies with, or is otherwise exempt from, applicable zoning regulations, including parking)
- Legal Non-Conforming (does not meet the current zoning requirements due to amendments, re-zoning, variance granted or other changes. See comments)
- Grandfathered (developed prior to the adoption of the zoning code/ordinance)
- Non-Conforming (see comments)

Comment: _____

5. Have any variances, special permits/exceptions, ordinances or conditions been granted/approved for the subject property:

- No, There do not appear to be any variances, special permits/exceptions, ordinances or conditions that apply to the Subject property.
- Yes, The following apply to the subject property: _____ Variance
(Documentation/copies attached) _____ Special Permit/Exception
_____ Ordinance
_____ Conditions

Comment: _____

6. Rebuild: In the event of casualty, in whole or in part, the structure located on the subject property:

- May be rebuilt in its current form (i.e. no loss of square footage, same footprint, with drive through(s), if applicable).
- May not be rebuilt in its current form, except upon satisfaction of certain conditions, limitations or requirements. Please see section _____ of the current zoning code/ordinance for details.

7. Code Violations Information:

- There do NOT appear to be any outstanding/open zoning or building code violations that apply to the subject property.
- The following outstanding/open _____ zoning / _____ building code violations apply to the subject property:

Comment: _____

9. Site Plan Information:

- The subject property was not subject to a site plan approval process
- The subject property was subject to site plan approval; a copy of the approved site plan is attached
- The subject property was subject to site plan approval, but a copy of the approved site plan is no longer in existence (*was lost or destroyed*). All other existing documents applicable to site plan approval for the site are attached.
- An approved site plan for the subject property is on file, but our office does not have the necessary resources to reproduce and distribute copies of the plan. All other existing documents applicable to site plan approval are attached.
- Other, (as noted here):

Comment: _____

Further comments regarding the subject property:

This information was researched on _____, 2016, by the undersigned, per request and as a public service. The undersigned certifies that the above information contained herein is believed to be accurate and is based upon, or relates to the information supplied by the requestor. The Authority assumes no liability for errors and omissions. All information was obtained from public records, which may be inspected during regular business hours.

ZONING AUTHORITY:

By: _____

Municipality: _____

Title: _____

Department: _____

Printed Name: _____

Phone: _____