DISPLAT THIS	CARD ON PRINCIPAL	. FRONTAGE	OF WORK	
C	ITY OF PORT	LAND		
Please Read Application And	BUILDING INSPEC			
Notes, If Any. Attached	PERMIT		nit Number: 090874	٦
This is to certify thatMesser Charles B/n/	1			
has permission to From Single Family	to Handica mily un			
AT1476 Forest Ave				
provided that the person or per	sons firmer concerning	conting this pe	rmit shall comply y	with al
the construction, maintenance this department.	and use of buildings and s		f the application or	n file ii
Apply to Public Works for street line	given and written permissions			
and grade if nature of work requires such information.	before this building or pad in lathed or otherwise closed HOUS NOTICE IS REQUIRE	ereof is procu I-in. 24 ing or	tificate of occupancy m red by owner before this part thereof is occupied	s build-
and grade if nature of work requires such information. OTHER REQUIRED APPROVALS	before this building or pad the lathed or otherwise deced HOL: NOTICE IS REQUIRE	ereof is procu I-in. 24 ing or	red by owner before this	s build-
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and grade if nature of work requires such information. OTHER REQUIRED APPROVALS Fire Dept	before this building or pad in lathed or otherwise deced HOUSENOTICE IS REQUIRE	ereof is procu I-in. 24 ing or	red by owner before this	s build-

PENALTY FOR REMOVING THIS CARD

.

City of Portland, Maine - Building or Use Permit Application					ιΓ	Permit No:	Issue Date:	te: CBL:		
389	Congress Street, 04101	Tel: (207) 874-8703	, Fax:	(207) 874-8716	5	09-0874			298 B02	23001
Location of Construction: Owner Name:					Owner Address:			Phone:		
1476 Forest Ave Messer Charles B			s B		Po Box 1980					
Business Name: Contractor Name:			:		Contractor Address: Phone			Phone		
n/a					n/a Portland					
Lessee/Buyer's Name Phone:					Permit Type: Zo				Zone: R-Z	
Past Use: Proposed Use:					Pe	rmit Fee:	Cost of Wor		CEO District:	
			: From Single Family			\$105.00	\$	0.00	5	
		to Handicap fa	mily unit.		FL	RE DEPT:	Approved		CTION:	
							Use G	Use Group: $R3$ Type: SB		
						-	TPC 2002		2	
								<u>ب</u>		200
-	osed Project Description:								1	
Fro	m Single Family to Handic	ap family unit.			Denied Use Group: 7(5) Type: SLS IRC 2003 Signature: 9/1/09 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
					PE	DESTRIAN ACTI	VITIES DIST	KICI (P.A.D.)	
				Action: Approved Approv			roved w	oved w/Conditions Denied		
					Sig	gnature:			Date:	
Permit Taken By: Date Applied For:				Zoning Approval						
gg		08/12/2009								
1.	This permit application do	bes not preclude the	Spe	Special Zone or Reviews		Zonin	Zoning Appeal		Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland					Not in District or Landmark			
2.	 Building permits do not include plumbing, septic or electrical work. 		Wetland		🗌 Miscella	Miscellaneous		Does Not Require Review		
3. Building permits are void if work is not started			Second Zone			Conditional Use		Requires Review		
within six (6) months of the date of issuance.										
False information may invalidate a building			Subdivision			Interpretation		Approved		
	permit and stop all work									
	· · · · · · · · · · · · · · · · · · ·		Si	te Plan			d		Approved w/0	Conditions
		2-1	Maj	Minor MM	_	Denied			Denied	
			iviaj į							>
				C wan ca	r0	Date			Date:	
			Date.		5-	2 20		L	Jaic.	
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		*								

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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY) to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. X

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, **REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

 $\frac{9(109)}{\text{Date}}$

Signature of Applicant/Designee

Signature of Inspections Official

CBL: 298 B023001

Building Permit #: 09-0874

City of Portland, Maine -		Permit No:	Date Applied For:	CBL:			
389 Congress Street, 04101	Tel: (207) 874-8703, Fax:	(207) 874	4-8716	09-0874	08/12/2009	298 B023001	
Location of Construction:	cation of Construction: Owner Name:			wner Address:		Phone:	
1476 Forest Ave	Messer Charles B	Messer Charles B			Po Box 1980		
Business Name:	Contractor Name:	Contractor Name:		ontractor Address:		Phone	
	n/a		n	/a Portland			
.essee/Buyer's Name	Phone:		Pe	ermit Type:			
roposed Use:			Proposed	Project Description:			
Change of Use: From Single Fa	mily to Handicap family unit.		From Si	ingle Family to Ha	andicap family unit.		
	us: Approved with Condition	ns Rev	iewer:	Marge Schmucka	l Approval D		
Note:						Ok to Issue:	
1) This is NOT an approval fo	r an additional dwelling unit. stoves, microwaves, refrigera						
 This is NOT an approval fo not limited to items such as This property shall remain a 		itors, or ki nange of u	tchen sin ise shall i	nks, etc. Without s	pecial approvals.	nt including, but	
 This is NOT an approval fo not limited to items such as This property shall remain a approval. This use functions 	stoves, microwaves, refrigera handicap family unit. Any ch s as single family use with allo	tors, or ki nange of u owances f	itchen sin ise shall i or staff.	iks, etc. Without s require a separate	pecial approvals. permit application f	nt including, but for review and	
 This is NOT an approval fo not limited to items such as This property shall remain a approval. This use functions This permit is being approve work. 	stoves, microwaves, refrigera handicap family unit. Any ch s as single family use with allo	ttors, or ki nange of u owances f itted. Any	tchen sin ise shall r or staff. y deviatio	iks, etc. Without s require a separate	pecial approvals. permit application f	nt including, but for review and before starting that	
 This is NOT an approval fo not limited to items such as This property shall remain a approval. This use functions This permit is being approve work. 	stoves, microwaves, refrigera handicap family unit. Any ch as single family use with allo ed on the basis of plans subm	ttors, or ki nange of u owances f itted. Any	tchen sin ise shall r or staff. y deviatio	aks, etc. Without s require a separate ons shall require a	pecial approvals. permit application f separate approval b	nt including, but for review and before starting that	
 This is NOT an approval fo not limited to items such as This property shall remain a approval. This use functions This permit is being approve work. Dept: Building Stat 	stoves, microwaves, refrigera handicap family unit. Any ch as single family use with allo ed on the basis of plans subm us: Approved with Condition	ators, or ki nange of u owances f itted. Any ns Rev	itchen sin ise shall i or staff. y deviatio /iewer:	aks, etc. Without s require a separate ons shall require a Tom Markley	pecial approvals. permit application f separate approval b Approval D	nt including, but For review and before starting that Pate: 09/01/2009 Ok to Issue: V	

Comments:

8/27/2009-mes: permit based on a letter sent by Ann concerning the use.



General 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: 1476	o Forest Avenue 04103
Total Square Footage of Proposed Structure/A 3868 Sq F4	rea Square Footage of Lot Number of Stories
Tax Assessor's Chart, Block & LotChart#Block#Lot#	Applicant *must be owner Lesse or Buyer*Telephone:Name Shalon House Inc.207-
298 - B - 23	Address 106 Gilman St 874-1080
	City, State & Zip Portland ME
Lessee/DBA (If Applicable)	Owner (if different from Applicant)Cost Of Work: \$ 30.00Name C harles Messer
	Address 1476 Forest Ave Cof O Fee: \$ 5.00
	City, State & Zip Por Tland, ME 04103 Total Fee: \$ 105,00
Current legal use (i.e. single family) <u>Sino</u> If vacant, what was the previous use? <u> </u>	Le Family Number of Residential Units Family Unit
Project description: Shalon House,	Inc. proposes that the current, single-
family use be changed -	to a Handicap Family unit USR. Handicapped it and staff is on-hand to provide support service
Contractor's name:	
Address:	
City, State & Zip	Telephone:
Who should we contact when the permit is ready	
Mailing address:	AUG 1 2 2009

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 <u>www.portlandmaine.gov</u>, 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.

Date: 🖁 Signature: 09 This is not a permit; you may not commence ANY work until the permit is issue Revised 07-11-08



Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Penny St. Louis Littell - Director of Planning and Urban Development Marge Schmuckal, Zoning Administrator

July 13, 2009

Norman Maze Shalom House 106 Gilman Street Portland, ME 04102

Re: 1476 Forest Avenue – 298 B023 – R-3- group home

Dear Mr. Maze,

This letter is a follow up to the telephone conversation that we had July 6, 2009.

As you know, I have researched our records for the property at 1476 Forest Avenue and found that the legal use is a single family home. This is based on the most recent permit in our records, permit #99-0312, which listed the use as a "1 family". At his inspection on July 6, 2009, Code Enforcement Officer Jon Rioux found that the property is not being used as a single family home. He found that there were four "units" with independent locks on each door and a shared kitchen. Since this is not the legal use of the building, the property must be brought into compliance.

1476 Forest Avenue is located in a R-3 residential zone. Section 14-87(a)(3) of the ordinance lists a handicapped family unit as a permitted use. If the use of the property fits the definition of a handicapped family unit (section 14-47), then you need to apply for a change of use permit from a single family home to a handicapped family unit. Section 14-88(a)(1) of the ordinance lists a sheltered care group home as a conditional use. If the use of the property fits the definition of a sheltered care group home (section 14-47) and can meet the criteria outlined in section 14-88(a)(1), then you need to apply for a conditional use through the Zoning Board of Appeals. You have thirty days to bring the property into compliance.

You have the right to appeal my decision. If you wish to exercise your right to appeal, you have thirty days from the date of this letter in which to appeal. If you should fail to do so, my decision is binding and not subject to appeal. Please contact the office for the necessary paper work if you decide to appeal.

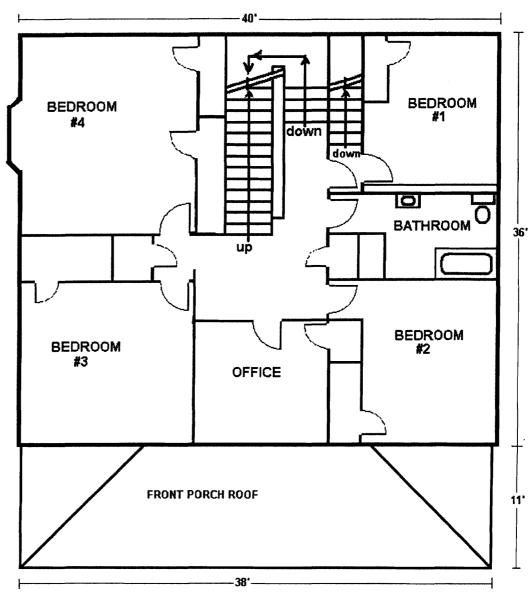
Please feel free to call me at 874-8709 if you have any questions.

Yours truly, _B N

Ann B. Machado Zoning Specialist (207) 874-8709

Room 315 – 389 Congress Street – Portland, Maine 04101 (207) 874-8695 – FAX:(207) 874-8716 – TTY:(207)-874-3936

RECEIVED JUL 1 5 2009



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1476 FOREST AVE SECOND FLOOR PLAN

