



PORTLAND MAINE

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Jeff Levine, AICP, Director
Marge Schmuckal, Zoning Administrator

January 7, 2013

Drew Crandall
@ Cross Fit MF
429 Warren Avenue
Portland, ME 04103

RE: 429 Warren Avenue – 304-B-032 – B-4 Zone – application #2013-00026

Dear Mr. Crandall,

I am in receipt of a permit application to make alterations to your business CrossFit MF at 429 Warren Avenue. Please note that your permit application is being denied based on the fact that the underlying use has never been established. This office has never received the required permit(s) for a change of use. No certificate of occupancy has been issued for your use. No permits for any of your signage, either attached to the building or the sign panel on the free-standing sign are on record.

Before this office can approve any renovations to the your business, we require a change of use permit with alterations along with a separate permit for your signage.

Please either go on-line for the permit application for “Commercial Change of Use” application or come into our offices in room 315 City Hall to pick up a paper copy of the application. We will certainly need very good, scaled building plans and a parking site plan showing available parking for your use. Follow the directions and submit the required paperwork to Inspection Services.

If you have any questions regarding this letter, please feel free to contact me at 874-8695.

Very truly yours,

Marge Schmuckal
Zoning Administrator

Cc to: Garronteed Construction, 27 St Mary's Street, Biddeford, ME 04005
Peter Holmes, 401 Warren Avenue, Portland, ME 04103

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 2013-00026	Issue Date:	CBL: 304 B032001
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Location of Construction: 429 WARREN AVE	Owner Name: 424 WARREN AVENUE LLC	Owner Address: 401 WARREN AVE PORTLAND , ME 04103	Phone: (207) 899-7770
Business Name: Cross Fit MF	Contractor Name: Garranteed Construction	Contractor Address: 27 St. Mary's Street Biddeford ME 04005	Phone: (207) 468-8476
Lessee/Buyer's Name <i>No Name reported</i>	Phone: <i>[Handwritten]</i>	Permit Type: Alterations - Commercial	Zone: B4
Past Use: Commercial / Gym	Proposed Use: Gym	Permit Fee: \$90.00	Cost of Work: \$7,000.00
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	INSPECTION: Use Group: Type:
Proposed Project Description: Divide office area to add bathroom and a changing room. <i>Never had</i> <i>Needs a change</i> <i>use 1st</i>		Signature: <i>[Handwritten Signature]</i>	Signature:
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date:	
Permit Taken By: gg	Date Applied For: 01/04/2013	<i>see letter</i> Zoning Approval <i>Denied</i> <i>1/7/13</i>	

<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 information may invalidate a building permit and stop all work..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<p>Zoning Appeal</p> <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	<p>Historic Preservation</p> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied
	Date:	Date:	Date:

DENIED

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



2013 00026

Entered electronic file

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: <u>429 Warren Avenue</u>		
Total Square Footage of Proposed Structure/Area <u>435 SF</u>	Square Footage of Lot	Number of Stories <u>1</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>304 B032</u>	Applicant: (must be owner, lessee or buyer) Name <u>MisFit LLC</u> Address <u>429 Warren Avenue</u> City, State & Zip <u>Portland, ME 04103</u>	Telephone: <u>207-899-7770</u>
Lessee/DBA <u>CrossFit MF</u>	Owner: (if different from applicant) Name <u>Peter Holmes</u> Address <u>401 Warren Ave.</u> City, State & Zip <u>Portland, ME 04103</u>	Cost of Work: <u>\$6,636</u> C of O Fee: <u>\$255</u> Historic Review: \$ <u> </u> Planning Amin.: \$ <u> </u> Total Fee: \$ <u> </u>
Current legal use (i.e. single family) <u>Commercial</u> / <u>CrossFit</u> Number of Residential Units <u>0</u> If vacant, what was the previous use? <u>storage</u> Proposed Specific use: <u>Add one bathroom and one changing room to office.</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>Dividing office area to add Bathroom + changing area</u>		
Contractor's name: <u>Guaranteed Construction</u>		Email: _____
Address: <u>27 St. Mary's Street</u>		
City, State & Zip <u>Biddeford, Me. 04005</u>		Telephone: <u>207-468-8476</u>
Who should we contact when the permit is ready: <u>Drew Crandall</u>		Telephone: <u>207-899-7770</u>
Mailing address: <u>429 Warren Avenue (CrossFit MF)</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, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

and 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: [Signature] Date: 1/4/13

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















