

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

PERMIT ISSUED		CBL:
Permit No: 01-1225-001	Issue Date: 10 2001	350 B009001

Location of Construction: 80 Primrose Ln	Owner Name: Johnson Dean P & Susan E	Owner Address: 80 Primrose Ln	Phone: 207-797-0437
Business Name:	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	Zone: R-3

Past Use: single family	Proposed Use: home office, custom window treatments	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 2
Proposed Project Description: add a home office to the existing single family home		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: 50	

Signature:	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: jodinea	Date Applied For: 10/04/2001	Zoning Approval		
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1. This permit application does not 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..	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 checked="" type="checkbox"/> MM <input type="checkbox"/> Date: <i>ok with conditions</i> <i>10/4/01</i>	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 Date:	Historic Preservation <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:
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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

LAND USE - ZONING REPORT

ADDRESS: 80 Primrose LN DATE: 10/4/01

REASON FOR PERMIT: to allow a home occupation - interior decorator

BUILDING OWNER: Johnson C-B-L: 350-B-009

PERMIT APPLICANT: owner

APPROVED: with conditions: #1, #2, #6, #8, #10

CONDITION(S) OF APPROVAL

1. This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
2. During its existence, all aspects of the Home Occupations criteria, Section 14-410, shall be maintained.
3. All the conditions placed on the original, previously approved, permit issued on _____ are still in effect for this amendment, and/or revised permit.
4. The footprint of the existing _____ shall not be increased during maintenance reconstruction.
5. Your present structure is legally nonconforming as to setbacks. If you are to demolish this structure on your own volition, you will only have one (1) year to replace it in the same footprint (no expansions), with the same height, and the same use. Any changes to any of the above shall require that this structure met the current zoning standards.
6. This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval. *with a home occupation*
7. 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.
8. Separate permits shall be required for any new signage, *under home occupation guidelines*
9. Separate permits shall be required for future decks, sheds, pool(s), and/or garage.
10. This is not an approval for an additional dwelling unit. You shall not add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. without special approvals.
11. All of the attached Floodplain forms shall be appropriately filled out, signed, and returned prior to the issuance of any certificates of occupancy.
12. Other requirements of condition: _____

Marge Schmuckal Marge Schmuckal, Zoning Administrator

01-1205

THIS IS NOT A PERMIT; CONSTRUCTION, DEMOLITION, SITE CLEARING OR ALTERATION OF THE SITE CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED.

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: 80 PRIMROSE LANE, PORTLAND, ME

Total Square Footage of Proposed Structure	Square Footage of Lot
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Tax Assessor's Chart, Block & Lot Number <u>J 65811-99</u>	Owner: <u>SUSAN JOHNSON</u> <u>80 PRIMROSE LN</u> <u>Portland, Me 04103</u>	Telephone#: <u>207-797-0437</u> <u>EX CAL</u>
Chart# <u>350 - B - 9</u>	Block#	Lot#

Lessee/Buyer's Name (If Applicable)	Owner's/Purchaser/Lessee Address:	Cost Of Work: \$ _____	Fee: \$ <u>30.00</u>
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Current use: Residential
 If the location is currently vacant, what was prior use: _____
 Approximately how long has it been vacant: _____
 Proposed use: Home Office
 Project description: Change of Use for a home occupation, to add:
CHANGE OF USE

Contractor's Name, Address & Telephone: NONE
 Applicants Name, Address & Telephone: _____
 Who should we contact when the permit is ready: _____
 Telephone: _____
 If you would like the permit mailed, what mailing address should we use: _____

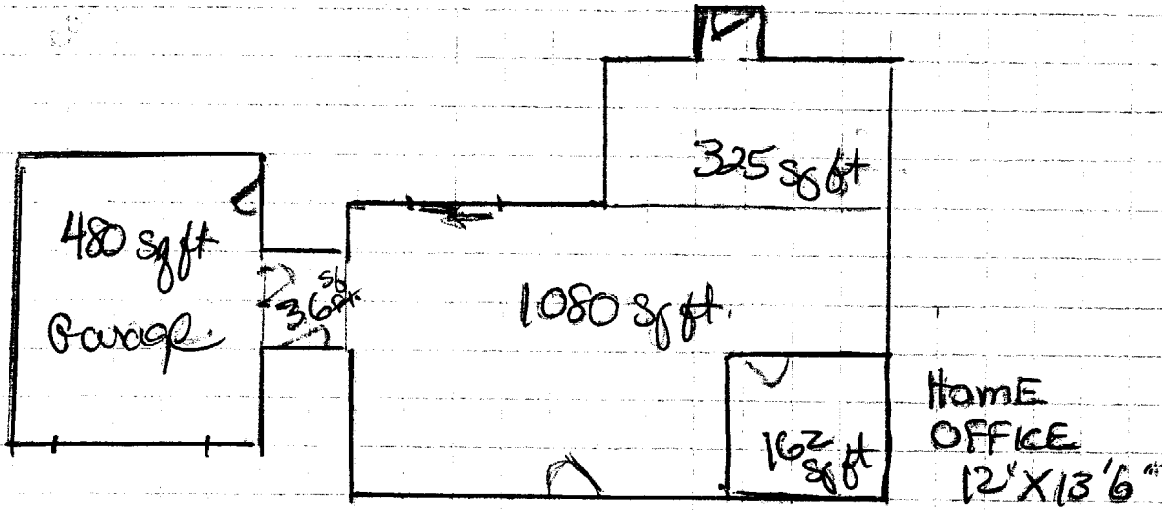
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED.
 AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

Certification

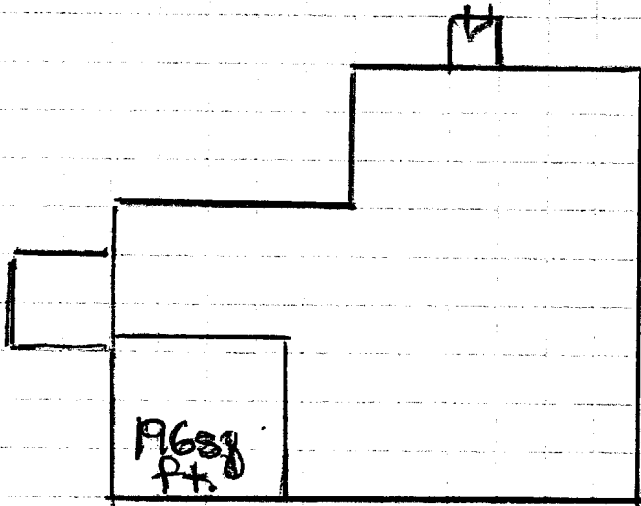
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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 of applicant: <u>Susan E Johnson</u>	Date: <u>9-27-01</u>
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Susan Johnson
 80 PRIMROSE LANE
 PORTLAND, ME
 04103



RANCH - 1st FLOOR



BASEMENT LEVEL

Office	162 sq ft
Storage +	196 sq ft
<hr/>	
TOTAL SPACE	358 sq ft.

(14'x14" Storage Space - Basement)

(each sq = 4 ft.
 +/-)

September 28, 2001
Zoning Administrator
Dept. Of Urban Development
City Of Portland
389 Congress Street
Portland, ME 04101

Dear Administrator,

I am requesting a permit to allow me the use of my residence at 80 Primrose Lane for a home occupation. I am a Window Treatment Consultant and plan to operate a "Shop at Home Service" for interior custom window treatments. In effect my work will be as an interior decorator, an acceptable home occupation listed under Section: 14-410 Home Occupation as listed in line B- 16 of the Portland Zoning Ordinance. The following is an explanation of how my home occupation meets the criteria listed under item (A) of the same:

- 1.) My home occupation will occupy approximately 358 Square feet (10.9%) of floor space of my residence.
- 2) No products will be stored or visible from outside the residence.
- 3) Storage of materials and office equipment to perform my business are limited and can easy be stored in the 358 square feet of space mentioned above.
- 4) There will be no exterior signage related to my business.
- 5) No alterations are necessary either inside or outside the residence.
- 6) No parking is necessary, as I will not be meeting any clients at this residence.
- 7) There are no environmental effects to be emanating from this location.
- 8) I am the sole proprietor and no other employees will be located at this location.
- 9) No extra traffic will be generated by the home occupation in greater volume than would normally be expected in a residential neighborhood.
- 10) There shall not be any motor vehicles exceeding six thousand pounds stored at this property or used in connection with the home occupation.

As you can see my home occupation is secondary and will not affect or detract from the residential character of my neighborhood.

Attached is a copy of a floor plan showing dimensions and area of my home occupation space. I am an owner of this property.

Should you have any questions, I may be reached at 797-0437.

Sincerely,

Susan E. Johnson
D.b.a./ Classic Window Decor



CITY OF PORTLAND

CERTIFICATE OF SOLE PROPRIETOR ADOPTING NAME OTHER THAN THEIR OWN

(Title 31 M. R. S. A. Section 2)

The undersigned hereby certifies that he/she intends to engage in the Retail Sales of Custom Window Treatments business as sole proprietor thereof, and to adopt the name, style or designation Classic Window Decor in the conduct of said business.

SUSAN E. JOHNSON

Printed Name of Proprietor

Susan E Johnson

Signature of Proprietor

80 Primrose Ln. Portland, ME

Home Address

04103

SAME

Business Address

BELOW INFORMATION MUST BE COMPLETED BY NOTARY PUBLIC OF ATTORNEY

STATE OF MAINE

Cumberland SS.

September 24 A.D. 2001

Then Susan E. Johnson personally appeared and made oath to the foregoing certificate, that the same is true.

Before me,

Notary Public or Attorney Commission Expires Sept. 23, 2006

**NOTE— This certificate shall be deposited in the office of the clerk of the city or town in which the business is to be carried on. The clerk is entitled to a fee of TEN dollars for recording this certificate.

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT	DATE
<i>Inspections</i>	<i>12/2/01</i>
RECEIVED FROM	
<i>Susan E. Johnson</i>	
ADDRESS	
<i>50 Riverside</i>	

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	<i>Change of Use</i>		<i>3000</i>
	<i>check # 134</i>		
	<i>CRN: 350 B009</i>		
<input type="checkbox"/> CASH	<input checked="" type="checkbox"/> CHECK	<input type="checkbox"/> OTHER	TOTAL <i>3000</i>

RECEIVED BY *[Signature]*