



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date 7/18/90, 19\_\_\_\_  
 Receipt and Permit number 01446

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 15 Cumberland Ave.

OWNER'S NAME: James Somma ADDRESS: 51 Alice St; Pld

FEE\$

**OUTLETS:**  
 Receptacles \_\_\_\_\_ Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL \_\_\_\_\_

**FIXTURES:** (number of)  
 Incandescent \_\_\_\_\_ Fluorescent \_\_\_\_\_ (not strip) TOTAL \_\_\_\_\_  
 Strip Fluorescent \_\_\_\_\_ ft. \_\_\_\_\_

**SERVICES:**  
 Overhead \_\_\_\_\_ Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes \_\_\_\_\_

**METERS:** (number of) 1 \_\_\_\_\_ .50

**MOTORS:** (number of)  
 Fractional \_\_\_\_\_  
 1 HP or over \_\_\_\_\_

**RESIDENTIAL HEATING:**  
 Oil or Gas (number of units) \_\_\_\_\_  
 Electric (number of rooms) \_\_\_\_\_

**COMMERCIAL OR INDUSTRIAL HEATING:**  
 Oil or Gas (by main boiler) \_\_\_\_\_  
 Oil or Gas (by separate units) \_\_\_\_\_  
 Electric Under 20 kws \_\_\_\_\_ Over 20 kws \_\_\_\_\_

**APPLIANCES:** (number of)

Ranges _____	Water Heaters _____
Coc. Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
<b>TOTAL</b> _____	

**MISCELLANEOUS:** (number of)

Branch Panels \_\_\_\_\_

Transformers \_\_\_\_\_

Air Conditioners Central Unit \_\_\_\_\_  
 Separate Units (windows) \_\_\_\_\_

Signs 20 sq. ft. and under \_\_\_\_\_  
 Over 20 sq. ft. \_\_\_\_\_

Swimming Pools Above Ground \_\_\_\_\_  
 In Ground \_\_\_\_\_

Fire/Burglar Alarms Residential \_\_\_\_\_  
 Commercial \_\_\_\_\_

Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under \_\_\_\_\_  
 over 30 amps \_\_\_\_\_

Circus, Fairs, etc. \_\_\_\_\_

Alterations to wires \_\_\_\_\_

Repairs after fire \_\_\_\_\_

Emergency Lights, battery \_\_\_\_\_

Emergency Generators \_\_\_\_\_

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... INSTALLATION FEE DUE: \_\_\_\_\_  
 FOR REMOVAL OF A "STOP ORDER" (304-18.b) ..... DOUBLE FEE DUE: \_\_\_\_\_  
 TOTAL AMOUNT DUE: 5.00 minimum fee

**INSPECTION:**  
 Will be ready on 7/20- am, 19\_\_\_\_; or Will Call \_\_\_\_\_

**CONTRACTOR'S NAME:** Somma Electric  
**ADDRESS:** 15 Florence Rd; Gray  
**TEL:** 657-3406

**MASTER LICENSE NO.:** #04031 **SIGNATURE OF CONTRACTOR:** *Joseph Somma*  
**LIMITED LICENSE NO.:** \_\_\_\_\_

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY  
 CONTRACTOR'S COPY — GREEN



**PLUMBING APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207) 285-3826

**PROPERTY ADDRESS**  
Town Or Plantation: Portland  
Street Subdivision Lot #: 15 Cumberland Ave

**PROPERTY OWNERS NAME**  
Last: SOMMA First: JIM

Applicant Name: Eugene W. Somma

Mailing Address of Owner/Applicant (if different): 90A Hodgwood Drive

**Caution: Permit Required**

PORTLAND 3970 TOWN COPY

Date Permit Issued: 19 5 90 Fee: 15

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # \_\_\_\_\_

**Owner/Applicant Statement**  
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a permit.

Signature of Owner/Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Caution: Inspection Required**  
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: OCT 11 1990

**PERMIT INFORMATION**

This Application is for:

1.  NEW PLUMBING  
2.  RELOCATED PLUMBING

SEP 6 1990

Type Of Structure To Be Served:

1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER - SPECIFY \_\_\_\_\_

Plumbing To Be Installed By:

1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D. HOUSING DEALER/MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER

LICENSE # 10,669,81

Hook-Up & Piping Relocation Maximum of 10 Hook-Ups	Number	Column 2	Number	Column 1
		Type of Fixture		Type of Fixture
<p><b>OR</b></p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Hosebib / Silcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Close (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
Number of Hook-Ups & Relocations				
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	5	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total) \$15

TOWN COPY



FILL IN AND SIGN WITH INK

901862

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED

SEP 6 1990

Portland, Maine, Sept. 5, 1990

City of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 15 Cumberland Ave. Use of Building 5 Apts. No. Stories 3 New Building Existing " X
Name and address of owner of appliance Jim Souza 58 Alice St Portland, Maine
Installer's name and address Eugene McCool 90A Ledgewood Dr. Fal. Telephone 797-9489

General Description of Work

To install new gas heating system

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 2 feet
From top of smoke pipe 3 feet From front of appliance 3 feet From sides or back of appliance 3 feet
Size of chimney flue 3 inch Other connections to same flue no
If gas fired, how vented? outside Rated maximum demand per hour 50,000 BTU
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labeled by manufacturer's laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

License # 01378 Cost of Work \$1500.00

Amount of fee enclosed? \$30.00

APPROVED:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

CS 320

FILE COPY

Signature of Installer

Eugene McCool

Mr. MacIsaac

901830

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$70. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: James G. Somma Phone # 797-8060  
Address: 58 Alice St; Ptld, ME 04103  
LOCATION OF CONSTRUCTION 15 Cumberland Ave.  
Contractor: owner Sub: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
Est Construction Cost: 10,000. Proposed Use: x 5-unit apt bldg  
Past Use: 4-unit apt bldg  
# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion CHANGE OF USE - from 4-apt to 5-apt bldg  
with interior renovations

For Official Use Only PERMIT ISSUED  
Date 8/7/90 Subdivision: \_\_\_\_\_ Name: AUG 27 1990  
Inside Fire Limits \_\_\_\_\_ Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
Time Limit \_\_\_\_\_ Estimated Cost 10,000. City of Portland  
Zoning: R-6  
Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
Review Required: \_\_\_\_\_  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other (explain) OK W.D.A. 8-23-90

Foundation:  
1. Type of Soil: \_\_\_\_\_  
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
3. Footings Size: \_\_\_\_\_  
4. Foundation Size: \_\_\_\_\_  
5. Other \_\_\_\_\_

Floor:  
1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
2. Girder Size: \_\_\_\_\_  
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
7. Other Material: \_\_\_\_\_

Exterior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. No. windows \_\_\_\_\_  
3. No. Doors \_\_\_\_\_  
Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
4. Tracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
5. Corner Posts Size \_\_\_\_\_  
6. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
7. Sheath \_\_\_\_\_ Size \_\_\_\_\_  
8. Siding \_\_\_\_\_  
9. Masonry Materials \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
10. Metal Materials \_\_\_\_\_

Interior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
3. Wall Covering Type \_\_\_\_\_  
4. Fire Wall if required \_\_\_\_\_  
5. Other Materials \_\_\_\_\_

Ceiling:  
1. Ceiling Joists Size \_\_\_\_\_  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
3. Type Ceilings: \_\_\_\_\_  
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
5. Ceiling Height: \_\_\_\_\_  
# \* \* \* \* \*

Roof:  
1. Truss or Rafter Size \_\_\_\_\_ Spacing: Approved \_\_\_\_\_  
2. Sheathing Type \_\_\_\_\_ Size: APPROVED WITH CONDITIONS \_\_\_\_\_  
3. Roof Covering Type \_\_\_\_\_  
Date: 8/9/90

Chimneys:  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
Date: 8/9/90

Heating:  
Type of Heat: \_\_\_\_\_  
Electrical:  
Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
2. No. of Tubs or Showers \_\_\_\_\_  
3. No. of Flushes \_\_\_\_\_  
4. No. of Lavatories \_\_\_\_\_  
5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
1. Type: \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Squar. Footage \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant \_\_\_\_\_  
Signature of CEO \_\_\_\_\_  
Inspection Dates \_\_\_\_\_

PERMIT ISSUED 8-7-90  
WHIP-LETTER 8-23-90



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED

FEB 12 1990

City Of Portland

Portland, Maine, February 12, 1990

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 15 Cumberland Ave. Use of Building Apts No. Stories 2 New Building Existing " X
Name and address of owner of appliance Jim Somma 58 Alice St. Portland
Installer's name and address Gene McCool 90A Ledgewood Falmouth Telephone 797-9489

General Description of Work

To install gas boiler Heatmaker forced hot water

IF HEATER, OR POWER BOILER

Location of appliance cellar Any burnable material in floor surface or beneath? none
If so, how protected? Kind of fuel? gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 2 feet
From top of smoke pipe From front of appliance 8-10 feet From sides or back of appliance 4-5 feet
Size of chimney flue Other connections to same flue
If gas fired, how vented? from unit itself Rated maximum demand per hour 50,000 BTU
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Heigh. of Legs, if any
Size of opening at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

\$2400

01378 License

Amount of fee enclosed? 25.00

APPROVED:

Signature line for approval

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

CS 337

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY Gene McCool

J.M. MacIsaac



216

FILL IN AND SIGN WITH INK

PERMIT ISSUED

FEB 12 1990

City Of Portland



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, February 12, 1990

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 15 Cumberland Ave. Use of Building Apts No. Stories 2 New Building Existing X
Name and address of owner of appliance Jim Souza 53 Alice St. Portland
Installer's name and address Gene McCool 90A Edgewood Falmouth Telephone 797-9489

General Description of Work

To install gas boiler heat exchanger forced hot water

IF HEATER, OR POWER BOILER

Location of appliance cellar Any burnable material in floor surface or beneath? none
If so, how protected? Kind of fuel? gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 2 feet
From top of smoke pipe From front of appliance 8-10 feet From sides or back of appliance 4-5 feet
Size of chimney flue Other connections to same flue
If gas fired, how vented? from unit itself Rated maximum demand per hour 50,000 BTU
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

\$2400

01378 License

Amount of fee enclosed? 25.00

APPROVED:

Signature line for inspector

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

CS 306

INSPECTION

FILE

APPLICANT'S

ASSESSOR'S COPY

Gene McCool

Signature of Installer

Gene McCool signature

CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION 15 Cumberland Avenue

Date of Issue November 29, 1990

Issued to James G. Souza

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 901830, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

Entire

APPROVED OCCUPANCY

Five-apartment building

Limiting Conditions:

None

This certificate supersedes  
certificate issued

Approved:

(Date)

Inspector

*William J. Flynn*  
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

901830

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$70 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

**PERMIT ISSUED**

Owner: James G. Chase Phone # 797-3060

Address: 53 Alice St; Ptld, ME 04103

LOCATION OF CONSTRUCTION 15 Cumberland Ave.

Tractor: OWNER Sub: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Est. Construction Cost: 10,000. Proposed Use: 5-unit apt bldg

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Tot. Sq. Ft. \_\_\_\_\_

# Stories \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion: CHANGE OF USE - from 4-apt to 5-apt bldg

with interior renovations

Foundation:

1. Type of Soil: \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_

2. Set Backs - Front: \_\_\_\_\_

3. Footing Size: \_\_\_\_\_

4. Foundation Size: \_\_\_\_\_

5. Other \_\_\_\_\_

Floor:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.

2. Girder Size: \_\_\_\_\_

3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_ Spacing 16" O.C.

4. Joists Size: \_\_\_\_\_ Size: \_\_\_\_\_

5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_

6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_

7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Studding Size: \_\_\_\_\_ Spacing \_\_\_\_\_

2. No. windows \_\_\_\_\_

3. No. Doors \_\_\_\_\_

4. Header Sizes: \_\_\_\_\_ Spacing \_\_\_\_\_

5. Bracing: Yes No \_\_\_\_\_

6. Corner Posts Size: \_\_\_\_\_

7. Insulation Type: \_\_\_\_\_ Size \_\_\_\_\_

8. Sheathing Type: \_\_\_\_\_ Size \_\_\_\_\_

9. Siding Type: \_\_\_\_\_ Weather Exposure \_\_\_\_\_

10. Masonry Materials \_\_\_\_\_

11. Metal Materials \_\_\_\_\_

Interior Walls:

1. Studding Size: \_\_\_\_\_ Spacing \_\_\_\_\_

2. Header Sizes: \_\_\_\_\_ Spacing \_\_\_\_\_

3. Wall Covering Type: \_\_\_\_\_

4. Fire Wall, if required: \_\_\_\_\_

5. Other Materials: \_\_\_\_\_

For Official Use Only  
Date: 8/7/90  
Subdivision: AUG 27 1990  
City Of Portland  
Ownership: Public

Zoning: R-6  
Street Frontage Provided: \_\_\_\_\_  
Provided Setback: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other (Explain): OK with letter 8-23-90

Ceiling:  
1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
2. Ceiling Strapping Size: \_\_\_\_\_  
3. Type Ceiling: \_\_\_\_\_ Size \_\_\_\_\_  
4. Insulation Type: \_\_\_\_\_  
5. Ceiling Height: \_\_\_\_\_

Roof:  
1. Truss or Rafter Size: \_\_\_\_\_ Span \_\_\_\_\_  
2. Sheathing Type: \_\_\_\_\_ Size \_\_\_\_\_  
3. Roof Covering Type: \_\_\_\_\_

Chimneys:  
Type: \_\_\_\_\_ Number of Fire Places: 2

Heating:  
Type of Heat: \_\_\_\_\_

Electrical:  
Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
1. Approval of soil test if required: \_\_\_\_\_  
2. No. of Tubs or Showers: \_\_\_\_\_  
3. No. of Flushes: \_\_\_\_\_  
4. No. of Lavatories: \_\_\_\_\_  
5. No. of Other Fixtures: \_\_\_\_\_

Swimming Pools:  
1. Type: \_\_\_\_\_ Square Footage \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Permit Received By: Louise F. Chase

Signature of Applicant: \_\_\_\_\_

Signature of CEO: James G. Chase

Inspection Dates: \_\_\_\_\_

**PERMIT ISSUED WITH LETTER**

White-Tax Assesor Yellow-GPCOG White Tag-CEO © Copyright GPCOG 1988

02-5-8

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 70.-  
 Subdivision Fee \$ \_\_\_\_\_  
 Site Plan Review Fee \$ \_\_\_\_\_  
 Other Fees \$ \_\_\_\_\_  
 (Explain) \_\_\_\_\_  
 Late Fee \$ \_\_\_\_\_

Inspection Record

Type	Date
<u>Basement unit</u>	<u>9-13-90</u>
<u>CLOSING</u>	<u>11-15-90</u>
<u>FINAL</u>	<u>11-29-90</u>

COMMENTS 9-13-90 New unit will be added in cellar.  
11-29-90 OK Issue C of O.

Signature of Applicant Gene B. Somme

Date 8-7-90

BUILDING PERMIT REPORT

ADDRESS: 15 Cumberland Ave. DATE: 24/Aug/90

REASON FOR PERMIT: To Change The Use From 4 dwelling units To 5 dwelling units.

BUILDING OWNER: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

PERMIT APPLICANT: \_\_\_\_\_

APPROVED: X 3 X 4 R, X X X 9 DENIED: \_\_\_\_\_

CONDITION OF APPROVAL OR DENIAL:

- 1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.
- 2.) Precaution must be taken to protect concrete from freezing.
- X 3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.
- X 4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- X 5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors, ceiling, or by placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.
- X 6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m<sup>2</sup>). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).
- X 7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station fire detector shall be installed in each guest room, suite or sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

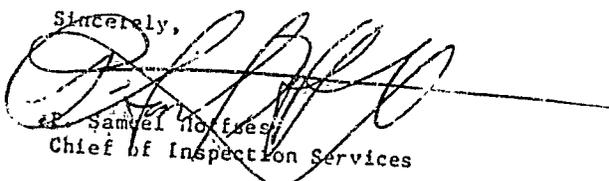
In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

- 8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fire-resistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.
- 9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches cannot pass through any opening.
- 10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year."
- 11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

Sincerely,

  
Samuel Hoffes  
Chief of Inspection Services

lcl  
11/15/88

Lt. GARRNEY PFC



FILL IN AND SIGN WITH INK

901862

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED

SEP 6 1990

Portland, Maine, Sept. 5, 1990

City of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 15 Cumberland Ave. Use of Building 5 Apts. No. Stories 3 New Building Existing X
Name and address of owner of appliance Jim Somma 58 Alice St Portland, Maine
Installer's name and address Eugene McCool 90A Ledgewood Dr. Fal. Telephone 797-9489

General Description of Work

To install new gas heating system

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 2 feet
From top of smoke pipe 3 feet From front of appliance 3 feet From sides or back of appliance 3 feet
Size of chimney flue 3 inch Other connections to same flue no
If gas fired, how vented? outside Rated maximum demand per hour 50,000 BTU
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

License # 01378 Cost of Work \$1500.00

- 1. FILL PIPE
2. 1 1/4 VENT PIPE
3. Kind of heat
4. Burner rating & support
5. Name & Label
6. Remote control
7. High limit control
8. Main cutoff switch
9. Low water cutoff
10. High limit control
11. Piping support & protection
12. Valves in supply line
13. Capacity of tanks
14. Tank rating & support
15. Oil gauge
16. Pressure control
17. Other items pertaining thereto are observed? Yes
18. Adequate ventilation
19. Smokeproof to combustibles
20. Thermal control switch

APPROVED: [Signature]
Amount of fee enclosed? \$30.00

Will there be in charge of the work a person competent to see that the State and City Code provisions pertaining thereto are observed? Yes

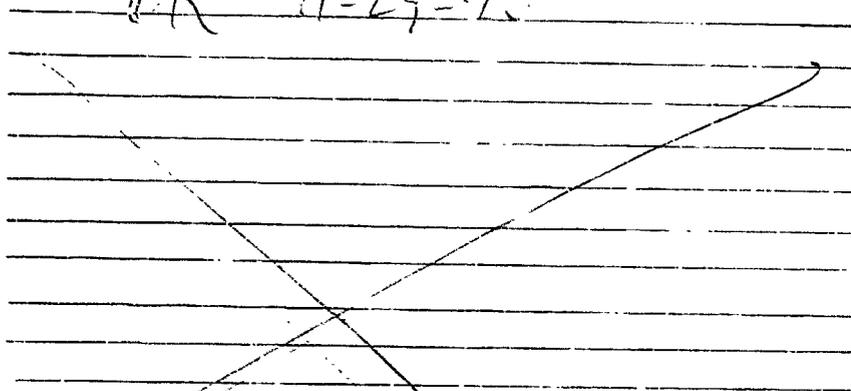
Signature of Installer [Signature]

INSPECTION COPY

[Signature]

NOTES

OK 11-29-95



Permit No.
Location
Owner
Date of permit
Approved

*[Faint, illegible handwritten notes in the left column of the bottom section]*

1. 1 1/2" FILL PIPE
2. 1 1/4" VENT PIPE
3. Kind of heat
4. Burner rigidity & support
5. Name & Label
6. Remote control
7. High limit control
8. Main cutoff switch
9. Low water cutoff
10. High limit control
11. Piping support & protection
12. Valves in supply line
13. Capacity of tanks
14. Tank rigidity & support
15. Oil gauge
16. Instruction card
17. Oil leaks
18. Adequate ventilation
19. Smoke pipe to combustibles
20. Thermal control switch



**APPLICATION FOR PERMIT**  
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES  
 ELECTRICAL INSTALLATIONS

Date 2/12/90, 19  
 Receipt and Permit number G1099

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:  
 The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of  
 Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 15 Cumberland Ave.  
 OWNER'S NAME: James G. Somma ADDRESS: 58 Alice St - Portland

	FEES
OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>1-30</u>	3.00
FIXTURES: (number of) Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>5</u> Strip Fluorescent _____ ft. _____	3.00
SERVICES: Overhead <input checked="" type="checkbox"/> Underground _____ Temporary _____ TOTAL amperes <u>200</u>	3.00
METERS: (number of) <u>6</u>	3.00
MOTORS: (number of) Fractional _____ 1 HP or over _____	3.00
RESIDENTIAL HEATING: Oil or Gas (number of units) _____ Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING: Oil or Gas (by a main boiler) _____ Oil or Gas (by separate units) _____ Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of) Ranges <u>1</u> Water Heaters _____ Cook Tops _____ Disposals _____ Wall Ovens _____ Dishwashers <u>1</u> Dryers _____ Compactors _____ Fans _____ Others (denote) _____	
TOTAL <u>2</u>	
MISCELLANEOUS: (number of) Branch Panels _____ Transformers _____ Air Conditioners Central Unit _____ Separate Units (windows) _____ Signs 20 sq. ft. and under _____ Over 20 sq. ft. _____ Swimming Pools Above Ground _____ In Ground _____ Fire/Burglar Alarms Residential _____ Commercial _____ Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ over 30 amps _____ Circus, Fairs, etc. _____ Alterations to wires _____ Repairs after fire _____ Emergency Lights, battery _____ Emergency Generators _____	3.00
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE:
	TOTAL AMOUNT DUE: <u>15.00</u>

INSPECTION:  
 Will be ready on 2/16/90 @ 1pm, 1990; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: Joseph Somma  
 ADDRESS: 16 Florence Rd - Gray, ME  
 TEL.: 657-3406  
 MASTER LICENSE NO.: 704031  
 LIMITED LICENSE NO.: \_\_\_\_\_

SIGNATURE OF CONTRACTOR:

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY  
 CONTRACTOR'S COPY — GREEN



Inspection Services  
P. Samuel Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

CITY OF PORTLAND

NOVEMBER 27, 1996

CRUMP, J. THOMAS  
PO BOX 10179  
PORTLAND ME 04104

Re: 15 CUMBERLAND AVE  
CBL: 014- - A-024-001-01  
DU: 5

Dear Mr. Crump:

The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above-referenced property.

Congratulations are extended to you for the general condition of your property which was found to meet the standards established by the City's Housing Code.

Good maintenance is the best way to protect the value of your property and neighborhood.

Please feel free to call on us if we can be of assistance to you.

Sincerely,

*Marland Wing*  
Marland Wing  
Code Enforcement Officer

*Tammy Munson*  
Tammy Munson  
Code Enfc. Off./ Field Supv.