

24-26 CUMBERLAND AVENUE



Full cut # 920R - Half cut # 9202R - Third cut # 9203R - Fifth cut # 9205R



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

Date June 7, 19 78  
 Receipt and Permit number A 12083

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: 24 Cumberland Ave.

OWNER'S NAME: Harry Modes ADDRESS: same

OUTLETS: (number of)

Lights	_____	
Receptacles	_____	
Switches	_____	
Plugmold	_____ (number of feet)	
TOTAL	_____	FEES

FIXTURES: (number of)

Incandescent	_____	
Fluorescent	_____ (Do not include strip fluorescent)	
TOTAL	_____	
Strip Fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	<u>100</u>	<u>3.00</u>
Temporary	_____	_____

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 a main boiler)	_____	
Oil or Gas (by separate units)	_____	
Electric (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	_____	Others (denote)	_____
TOTAL	_____		

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
Emergency Lights, battery	_____	
Emergency Generators	_____	

INSTALLATION FEE DUE:	_____
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	_____
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	_____
FOR PERFORMING WORK WITHOUT A PERMIT (304-9) .....	_____
TOTAL AMOUNT DUE:	<u>-3.50</u>

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call xx

CONTRACTOR'S NAME: E & E Service  
 ADDRESS: 52 Fessenden St.  
 TEL.: 774-2020

MASTER LICENSE NO.: 2533  
 LIMITED LICENSE NO.: \_\_\_\_\_

SIGNATURE OF CONTRACTOR:

INSPECTOR'S COPY













FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, October 5, 1951

PERMITS DIVISION 01958 OCT 5 1951 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 24. Cumberland Avenue Use of Building 2-family dwelling No. Stories 2 Building Existing Name and address of owner of appliance Mrs. Esther Abrahamson, 24 Cumberland Avenue Installer's name and address Community Oil Co., 204 Kennebec Street Telephone 2-7481

General Description of Work

To install oil burning equipment in connection with existing steam heating system

IF HEATER, OR POWER BOILER

Location of appliance or source of heat Type of floor beneath appliance If wood, how protected? Kind of fuel Minimum distance to wood or combustible material, from top of appliance or casing top of furnace From top of smoke pipe From front of appliance From sides or back of appliance Size of chimney flue Other connections to same flue If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner Sun Ray Labelled by underwriters' laboratories? yes Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom Type of floor beneath burner concrete Location of oil storage basement Number and capacity of tanks 1-275 gal. If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? yes How many tanks fire proofed? Total capacity of any existing storage tanks for furnace burners 1-275 gal.

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance If wood, how protected? Minimum distance to wood or 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? If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED: Oct. 10.5.51 [Signature]

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

Community Oil Co.

Signature of Installer by: [Signature]

INSPECTION COPY

NOTES

1	Fill Pipe	
2	Vent Pipe	
3	Kind of Heat	
4	Burner Rigidity & Supports	
5	Name & Label	
6	Start Control	
7	High Limit Control	
8	Remote Control	
9	Piping Support & Direction	
10	Valves in Supply Line	
11	Capacity of Tanks	
12	Tank Rigidity & Supports	
13	Tank History	
14	Oil Gauge	
15	Instruction Card	
16		
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Permit No. 511958 10-23-51  
Location 24 Commercial Bank Bldg.  
Owner Mrs. Catharine O. Anderson  
Date of permit 10/5/51  
Approved [Signature]



APARTMENT HOUSE ZONES

APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class  
Portland, Maine, April 26, 1951

PERMIT ISSUED  
00703  
APR 30 1951  
CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to ~~erect~~ alter ~~repair~~ ~~rebuild~~ ~~construct~~ the following building ~~structure~~ ~~structure~~ in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 24 Cumberland Avenue Within Fire Limits? yes Dist. No. \_\_\_\_\_  
Owner's name and address Mrs. Esther Abrahamson, 21 Cumberland Avenue Telephone \_\_\_\_\_  
Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
Contractor's name and address Michael DeCourcy, 58 Beckett Street Telephone 4-9593  
Architect \_\_\_\_\_ Specifications \_\_\_\_\_ Plans yes No. of sheets 2  
Proposed use of building apartment house No. families 3  
Last use \_\_\_\_\_ " 2 No. families 3  
Material wood No. stories 3 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_  
Other buildings on same lot \_\_\_\_\_  
Estimated cost \$ 150. Fee \$ 2.00

General Description of New Work

To remove existing pitch roof on front one story piazza and provide floor at second floor level. 2x6 floor joists, 10" on centers, 21' span. existing 4x6 plate.  
To use existing window for access to piazza.

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. PERMIT TO BE ISSUED TO Michael DeCourcy

Details of New Work

Is any plumbing involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_  
Height average grade to top of plate \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_  
Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ solid or filled land? \_\_\_\_\_ earth or rock? \_\_\_\_\_  
Material of foundation \_\_\_\_\_ Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
Kind of roof \_\_\_\_\_ Rise per foot \_\_\_\_\_ Roof covering \_\_\_\_\_  
No. of chimneys \_\_\_\_\_ Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_ Kind of heat \_\_\_\_\_ fuel \_\_\_\_\_  
Framing lumber—Kind \_\_\_\_\_ Dressed or full size? \_\_\_\_\_  
Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ Girt or ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
Girders \_\_\_\_\_ Size \_\_\_\_\_ Columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.  
Joists and rafters: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
On centers: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
Maximum span: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
If one story building with masonry walls, thickness of walls? \_\_\_\_\_ height? \_\_\_\_\_

If a Garage

No. cars now accommodated on same lot \_\_\_\_\_, to be accommodated \_\_\_\_\_ number commercial cars to be accommodated \_\_\_\_\_  
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? \_\_\_\_\_

Miscellaneous

Will work require disturbing of any tree on a public street? no  
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

APPROVED:

OK - 4/30/51 - [Signature]

Mrs. Esther Abrahamson

Signature of owner BY:

Michael DeCourcy

INSPECTION COPY

514

Permit No. 51703

Location 217 W. Mainland Ave.

Owner Mrs. Edith Chapman

Date of permit 4/30/51

Notif. closing-in

Inspn. closing-in

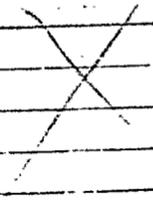
Final Notif.

Final Inspn. 5/2/51

Cert. of Occupancy issued

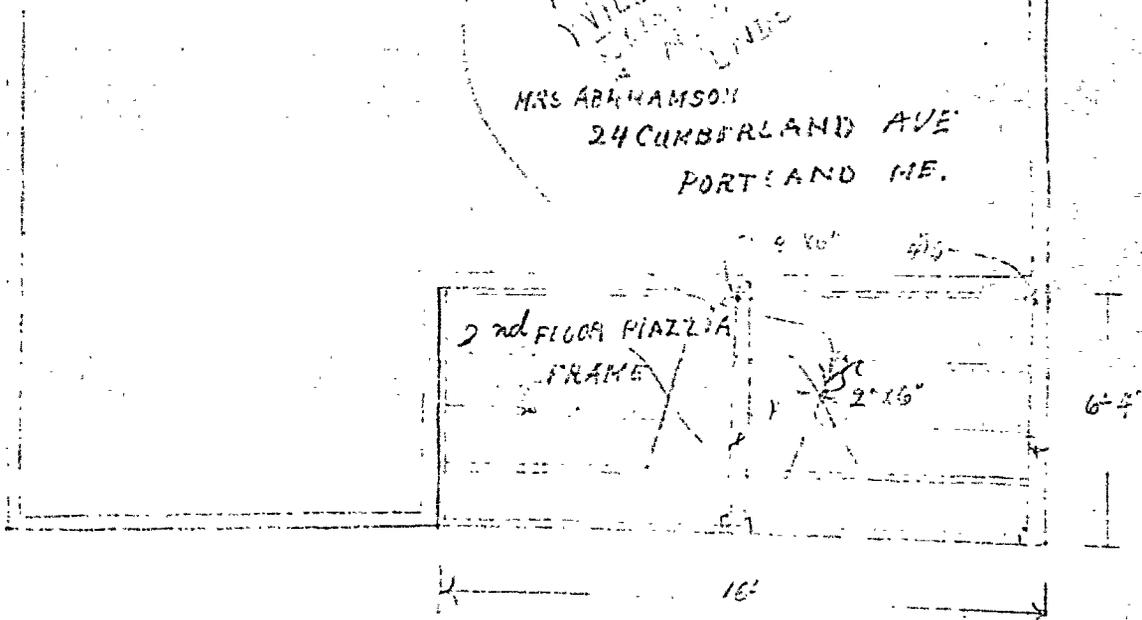
NOTES

5/8/51 - Work done P. S. J.



FROM JOLIE  
1107 N. B. ST.  
CUMBERLAND, ME.  
WILL BE SUPPLYING  
MRS ABRAHAMSON  
24 CUMBERLAND AVE  
PORTLAND ME.

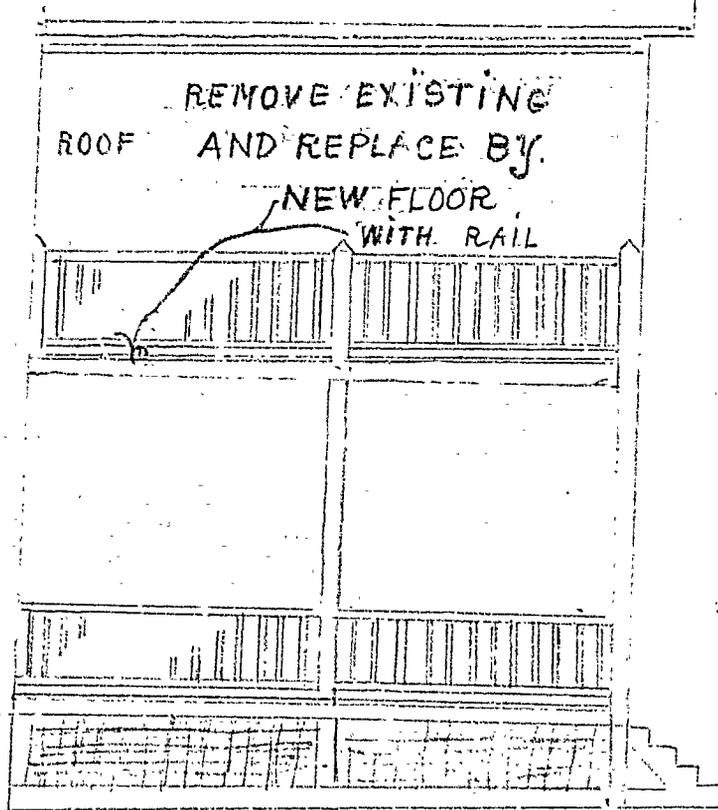
M. DeCourcy  
TEL 4-9593



24 CUMBERLAND AVE

REMOVE EXISTING  
ROOF AND REPLACE BY  
NEW FLOOR  
WITH RAIL

MRS ABRAHAMSON  
24 CUMBERLAND AVE  
PORTLAND ME.





FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine April 4, 1946

PERMIT ISSUED 00522 APR 5 1946

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 24 Cumberland Ave Use of Building Dwelling No. Stories 2 New Building Existing
Name and address of owner of appliance Mrs. W. W. Chapman 24 Cumberland Ave
Installer's name and address Gould-Farmer Co. of Maine, Inc. 70 Free Telephone 38187

General Description of Work

To install Oil burner in gravity hot water heating system

IF HEATER, OR POWER BOILER

Location of appliance or source of heat Basement Type of floor beneath appliance
If wood, how protected? Kind of fuel oil
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner Petro 1-9-70 Labelled by underwriters' laboratories? yes
Will operator be always in attendance? No Does oil supply line feed from top or bottom of tank? bottom
Type of floor beneath burner concrete
Location of oil storage Basement Number and capacity of tanks 1-275
If two 275-gallon tanks, will three-way valve be provided?
Will all tanks be more than five feet from any flame? yes How many tanks fire proofed? none

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance
If wood, how protected?
Minimum distance to wood or 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?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

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

Gould-Farmer Co. of Maine, Inc.

Signature of Installer

[Signature]

FILE COPY

Permit No. 46/522

Location 24 Cumberland Ave

Owner Etta Abrahamson

Date of permit 4/5/46

Approved 4-18-46 P. H. H.

NOTES

- 1. End Pipe
- 2. Vent Pipe
- 3. ~~3. Hot Water Circulation~~
- 4. ~~4. Piping Material & Supports~~
- 5. ~~5. Name & Label~~
- 6. ~~6. Start Control~~
- 7. ~~7. High Limit Control~~
- 8. ~~8. Remote Control~~
- 9. ~~9. Piping Support & Protection~~
- 10. ~~10. Valves & Shut-off~~
- 11. ~~11. Capacity~~
- 12. ~~12. Distance~~
- 13. ~~13. Capacity~~
- 14. ~~14. Capacity~~

931121

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Raymond T. Goodwin Phone # 772-2983  
 Address: 24 Cumberland Ave - Ptld, ME 04101  
 LOCATION OF CONSTRUCTION 24 Cumberland Ave.  
 Contractor: Nicely's Pl/Htg Sub: 839-5962  
 Address: Box 568 - Gorham, ME Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: 3-fam w tank  
 \_\_\_\_\_ Past Use: 3-fam  
 # 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: install one 275-gln tank - basement

**For Official Use Only**

Date: 11/30/93 Subdivision: \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name: \_\_\_\_\_  
 Blg Code \_\_\_\_\_ Lot: DEF-1000  
 Time Limit \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_

Zoning: \_\_\_\_\_  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ 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: WDA 11-30-93 (Explain)

**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. window \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 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 \_\_\_\_\_ 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 \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

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

**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 \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law \_\_\_\_\_

Permit Received By: Louise E. Chase  
 Signature of Applicant: Raymond T. Goodwin Date: 11-30-93  
 CEO's District: 1 Raymond T. Goodwin  
 CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO W. M. Deary

White - Tax Assessor

931121

Permit # 931121 City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Act# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Raymond T. Goodwin Phone # 772-2983  
Address: 24 Cumberland Ave- Ptld, ME 04101  
LOCATION OF CONSTRUCTION 24 Cumberland Ave.  
Contractor: Nicely's Pl/Htg Sub: 839-5962  
Address: Box 568 - Gorham, ME Phone # \_\_\_\_\_  
Est. Construction Cost: \_\_\_\_\_ Proposed Use: 3-fam w tank  
Past Use: 3-fam  
# 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 install one 275-gal tank - basement

**For Official Use Only**  
Date: 11/30/93 Subdivision: \_\_\_\_\_  
Inside Fire Limits: \_\_\_\_\_ Name: DEC-11000  
Bldg Code: \_\_\_\_\_ Lot: \_\_\_\_\_  
Time Limit: \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_ CITY OF PORTLAND  
Zoning: Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ 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) WPH-11-30-93

**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 \_\_\_\_\_  
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
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 \_\_\_\_\_ 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 \_\_\_\_\_ Span \_\_\_\_\_  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
3. Roof Covering Type \_\_\_\_\_

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

**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 \_\_\_\_\_ Square Footage \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Raymond T. Goodwin Date 11-30-93

CEO's District 1 Raymond T. Goodwin

CONTINUED TO REVERSE SIDE  
Ivory Tag - CEO M. Deary

White - Tax Assessor

24 Cumberland Ave Pitt Me

