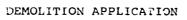


(a)

| APPLICATION | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------|
| APPLICATION FOR PER | MIT | ar restri |
| B.O.C.A. USE GROUP | ······································ | Jall Robert |
| B.O.C.A. TYPE OF CONSTRUCTION | 0.11.4.4 | EC. 28 KE |
| ZONING LOCATION PORTLAND, MAINE | Dec. 17, 1982 | |
| To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, M. | IAINT | |
| equipment or change use in accordance to erect, after, repair, demolish, | move or install the follow | ing building structure |
| ordinance of the City of Partition with plans and specifications, if any subm | Portland B.O.C.A. But | laing Code and Zoning |
| Location State of the St. Comer 2-6 Spith St | ure nerewith and the fo | sillowing specifications: |
| 1. Owner's name and address Levinsky, a Inc278 Congress | t. Fire I | District #1 D #2 D |
| 3. Contraviario num address . Zigrace Design Space This | Telep | phone |
| 1. Owner's name and address 2. I essee's name and address 3. Contractor's name and address Proposed use of building Proposed use of building | Ind Plan. Teler | hone - 773-3865 |
| Proposed use of building Last use Material | | No. of sheets |
| Last use | ······· Vo | o. families |
| Material | No | o. families |
| Other buildings on same lor | | ığ |
| FIELD INSPECTOR AL- | Appeal Fees | \$ |
| FIELD INSPECTOR—Mr. | Base Fee | 25.00 |
| @ 775-5451 To set construction trailer to be used for Christmas return week, trailer 121 x 561 | Late Fee | 15.0c. |
| return week, trailer 12' x 56' | TOTAL | \$ |
| to be used from Dec. 24 to Dec. 31, 1982 as per plans. 1 sheet of plans. | | * ***** ******* |
| | Stamp of Sp | ecial Conditions |
| send permit to # 1 04161 | • | |
| | | |
| NOTE TO APPLICANT: Separate permits are required by the installers and su and mechanicals. | . | |
| and Aechanicals. | ocontractors of heating | , piumbing, electrical |
| | | |
| | | |
| Is any plainbing involved in this work? | | |
| Is any plumbing involved in this work? Is connection to be made to public sewer? Has septic tank notice been sent? DETAILS OF NEW WORK Is any electrical work If not, what is propose Form notice seen? | involved in this work? | ******* |
| rias septic tank notice been sept? | ed for sewage? | |
| Height average grade to top of plate | to highest mains -6. | ****** |
| Size, front depth No. stories solid or fined ian Material of foundation Thickness, top bottom | nd? earth or | rrock? |
| Kind of roof | · · · · · · · · cellar · · · · · | |
| No. of chimneys | CITIII | ' |
| Framing Lumber—Kind | · · · · · Kind of heat | fred · |
| Size Girder | posis Nar on cont | lls |
| Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor Joists and rafters: Ist floor | r and flat roof span ove | T 8 feet |
| Joists and rafters: Ist floor | 3ra , ro | of |
| Maximum span: 1st floor | rdro | of |
| If one story building with masonry walls, thickness of walls? | rd, ro | of |
| No car powers IF A GARAGE | neigi | nt? |
| 110. Cars now accommodated on same lot | ommercial cars to be acc | ommodes d |
| Will automobile repairing be done other than minor repairs to cars habitually stor APPROVALS BY: DATE | ed in the proposed buil | ding? |
| BUILDING ASSECTION BLAND | MISCELLANFOUS | , |
| 20.11(10. | urbing of any tree on a p | ublic street? |
| BUILDING CODE. | | |
| Fire Dept.:, | ee of the above work a and City requirements p | person competent |
| | ··· | pertaining thereto |
| | | er turnen. |
| Signature of Applicant Brock Levinsky for | Phone #xx | same |
| Type Name of a sendingly, s. INC. | XX | 25 |
| | 10 | 2 4 3 4 4 |
| and Ac | ldress | *********** |
| | | |
| FIELD INSPECTOR'S COPY APPLICANT'S COPY OFF | ICE FILE COPY | |
| | | |
| and the control of th | | in the second of the second |

e

BUILDING INSPECTIONS CITY OF FORTLAND, MAINE DEPARTMENT OF TRBAN DEVELOPMENT



| (| 0 | 1 |
|---|-------------------------|---------|
| | RECEIVED AUG 30 1982 | 1 |
| | A CHI SVI III | 1 |
| | CITY OF PORTLAND | <u></u> |

| | CHEST STATE OF THE PARTY OF THE |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Samuel liceto & lo | hereby requests |
| permission to Diamolish | |
| beginning on the following date: \$10.52 | |
| at: 36/-263 Congrue St. | |
| The contractors are hereby required to notify and mest th departments on the site of proposed demolition. | e following |
| UTILITY APPROVAL: | |
| Central Maine Power Co. Line Dept. 772-7411 | 7 Date <u>9-30-</u> 81 |
| New England Telephone Co. Mr. Jones 797-1195/797-1943 1976 Reven Shiller | Date <u>§-30-</u> 22 |
| Northern Utilities, Inc. Mr Garty 797-800 ext. 42 m. McClain TCP | 1 Date <u>8-30-9</u> 2 |
| Por:land Water District Dispatcher 774-5961 ext 31 m. Man J TEA | Date <u>9-30-92</u> |
| Public Cable TV Mr. Smith/Mr. DesRochers 775-3431 Mule 704 | 1 Date <u>8-30-8</u> 3. |
| CITY OF PORTLAND: | |
| Sewer Division 797-5302/775-5451 ext. 470 | Date 8-30-12 |
| Sidewalk Division Public Wks. ext. 488/489 See Builgeo 70 | 9 Date <u>8-30-</u> 82 |
| Traffic Division 775-5451 ext. 468/469 | Date <u>9-30-92</u> |
| Fire Alarm Mr. Allen 775-6361 ext.321 Mr. Allen Tc. | A Date <u>8-30-92</u> |
| Forestry Keith Jones 775-2921 ext.33 | Date |
| Have contacted <u>ALL</u> the above Utility companies and/or C for locations of Utilities and they have signed this sh | ity Departments eet. |
| Signature: Thomas Clarto | Date 9-30-82 |
| TO THE PURPOSENCY MUE DAME OF MUE EMPROPHOYA | |

Ī

CITY OF PORITAND, MAINE LJHDING & INSPECTION SERVICES

Date August 30, 1982

| To: Samuel Aceto & Company Contractor |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 376 Warren Avenue |
| With relation to permit applied for to demolish a 2 family, 2 story dwelling at (address) 261-263 Congress Street |
| at (address) 261-263 Congress Street belonging to |
| (owner) Levinsky's |
| (owner) Levinsky's Defining to molition work until a permit has been issued from this department. Section 6 of the Ordinance for redeat and approximately section 6 of the Ordinance for redeat and approximately section 6. |
| and verman eridication. No permit for the demolition of a building or structure unless provision is made for rodent shall be issued by the Building and Inspection Services Department until and supervision of a permit for rodent and vermin eradication have been carried out under the building and Inspection Services Department until and supervision of a perst control operator registered with the Health Department." |
| operator is to be employed. |
| NOTICE - PED ATRITOTOR |
| A PER'HT TO DENOLISH OR RENOVE A STRUCTURE SHALL EXPIRE THIRTY (30) DAYS AFTER THE DATE OF ISSUANCE. |
| P. Samuel Hoffses Chief of Inspection Services |
| Health Department comments: 1-8 NO EVINENCE INDICATIVE OF |
| RODENT ACTIVITY TO A COL |
| Copies to: |
| 2 - Health - Environ. (Mr. Vandolcski) 1 - Health - (Mr. Noyes) 1 - Public Works ! - Fire Dept. |

| APPLICATION FOR | PERMIT | EPDMP TOOTTE |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------|
| B.O.C.A. USE GROUP | | PERMIT ISSUED |
| JONING LOCATION | 60764 | SEP 9 1000 |
| ZONING LOCATION | uase | 1982 |
| To the CHIEF OF ALL DING & INSPECTION | August 36, 1982 | PIPO AL TIODAR |
| The undersigned hereby applies for a promise | AND MAINE | of LOUITPUR |
| The undersigned hereby applies for a permit to erect, alter, repair, der equipment or change use in accordance with the Laws of the State of Me Ordinance of the City of Portland with plans and specifications of the | molish, move or install the follow | ing building, structure, |
| Ordinance of the City of Bond I | The Portuing D.O.C.A. Bull | ding Code and Zoning |
| LUCATION 261-263 Congress C | · suomice a research and the fo | llowing specifications: |
| 1. Owner's name and address Levinsky's279. Conganss. 2. Lessee's name and address | St Fire D | istrict #1 []. #2 [] |
| 2. Lessee's name and address 3. Contractor's name and address Samuel Aceto, Co. = 376 Western Co. = | Telep | hone |
| 3. Contractor's name and address . Samuel -Aceto Co376 . Was | then Ave. Portland Telep | hone 797-6761 |
| ripposed use of building | ******************* | No. of sheets |
| Last use 2 . family | No | families |
| Material | reof | families |
| Other buildings on same lot | Kooiin | g |
| | Appeal Fees | 5 |
| FIELD INSPECTORMr. | Base Fee | |
| . @ 775-5451 | Late Fee | 25.00 |
| To demolish 2 story, 2 family dwelling | | ************** |
| utilities called . | TOTAL | \$ 25.00 |
| _ | 20.62 Stamp of Sn | ecial Conditions |
| East to modify Lept. I | 0 6 83 | conditions |
| Raid from Health De | = 7-7-0- | |
| NOTE TO APPLICANT: Separate name | | |
| NOTE TO APPLICANT: Separate permits are required by the installer and mechanicals. | s and subcontractors of heating, | plumbing, electrical |
| | | |
| | | |
| Is any plumbing in all the DETAILS O. NEW WO | *** | |
| any promoting involved in this world | | • |
| Is connection to be made to public sewer? If not, what is Has septic tank notice been sent? | ar work involved in this work? | ************* |
| Has septic tank notice been sent? Form notice s. Height average grade to top of plate It not, what is | ent? | ********* |
| Height average grade to top of plate | e grade to highest point of roo | ······ |
| Material of foundation | inediana? earth of | rock? |
| Kind of roof | bottom cellar | |
| No. of chimneys | totatovering | |
| Framing Lumber—Kind | e ···· Kind of heat | · · · · · fuel · · · · · · · · · · · · · · · · · · · |
| Size Girder | Zč May on some | lls |
| Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every Joists and rafters: | ery floor and flat roof span over | r X feet |
| | | |
| Maximum span: lst floor | , 3rd ro | of |
| Maximum span: 1st floor | , 3rd ro | of |
| | | |
| vo. cars now accommodated on same lot | umbarra | , i |
| | ally stored in the property | ommodated |
| | Marcon | ding? |
| BUILDING INSPECTION—PLAN EXAMINER | MISCELLANEOUS | |
| | uire disturbing of any tree on a p | ublic street? |
| Will there be to see that the consequence of the co | in charge of the above work a | Derson comment |
| lealth Dept.: to see that the | c State and City requirements i | Pertaining thereto |
| thers: are observed? | ******* | - Therefore |
| | 1 | , |
| Signature of Applicant Desarcos Coles | D Phone # . | Famo |
| Type Name of above Sam Aceto for Samuel Aceto & Co. | 10 | 2 F1 2 F1 4 F2 |
| Samuel Aceto & Co. | Other | ∠ ⊔ 3 Ц <u>X</u> 4 [] |
| | and Address | |
| | | |
| FIELD INSPECTOR'S COPY APPLICANT'S COPY | OFFICE FILE COPY | |
| •—————————————————————————————————————— | STATE COPT | • |

NOTES

(COPY)



CITY OF PORTLAND, MAINE Department of Building Inspection

Certificate of Occupancy

LOCATION #261-263 Congress St

Issued to

Stanley Cress
76 William St.

This is to rertify that the building, premises, or part thereof, at the above location, built—altered -changed as to use under Building Permit No. 70/245 , 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 Three Rooms-first floor

APPROVED OCCUPANCY

Re-Weaving Shop

Limiting Conditions:

This certificate supersedes certificate issued

(Date)

Inspector

Inspector of Buildings

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

INSPECTION COPY

Signature of owner.

APPLICATION FOR PERMIT

Class of Building or Type of Structure Init'd Class

TO THE SECRET SON PERMIT LIVED MAR 17 245

| MAGN | PortLind, Main | Commence of the second second of the second | CITY of PORTLAND |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| To the INSPECTOR OF BU | ILDINGS, PORTLAND, | MAINE | • |
| mt | abblicator a bemit to a | rect after repair demolish install the following | giuilding structure equipment |
| in accordance with the Laws of | the State of Maine, the | Building Code and Zoning Ordinance of th | e City of Portland, plans and |
| specifications, if any, submitted | herewith and the following | ing specifications: | Dist No. |
| LocationZOIZOJCONILI | . 655 000 | Within Fire Limits? Nillian St. | 773-0730 |
| Owner's name and address | Stanley Cress, | 70 MILLICAI DVS | Telephone |
| Lessee's name and address | radioante es perchesens sarrado falonistaros - de es pad das cida antiques da un | and the same pipeline of a formal of the same points of the same of the same and the same of the same | T-1 |
| Contractor's name and addre | 55 | and spreadings of the property of the second | |
| Architect | | Specifications Plans Plans | omm. No. of sheets |
| Proposed use of building | 9 <u>%</u> | - Yeaving Shop & Apartment Buil Doctor's Office ntist Office & Apartments | urieno. iamiles |
| Last use | De | ntist Cffice & Spertmants | No. lamines |
| Material frame No. sto | oriesHeat | Style of roof | Roonng |
| | | and better transcript that makes there is dealer. Management as an enterior trac design appears also the calculations | Fee \$ 2.00 |
| Estimated cost \$ | - 4411 | | Fee \$ |
| | General D | escription of New Work | |
| | | | |
| TO CHANGE USE OF FI | mst floor(#263) f | rom lightist office to referent | CG SHOP, NO ALTERATIONS. |
| 20 0,111,02 | (three rooms) | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |
| | | | |
| It is understood that this peri | nit does not include insu | allation of heaving apparatus which is to be | taken out setarately by and in |
| the name of the heating contra | ctor. PERMIT TO E | BE ISSUED TO owner | |
| | Def | ails of New Work | |
| Le any olymbine involved in | this work? | Is any electrical work involved | in this work? |
| Te connection to be made to | public sewer? | If not, what is proposed for se | wager |
| Harachie tack notice been | sent? | Form notice sent? | |
| The laterage area to tor | o of plate | Height average grade to highest po | oint of roof |
| Height average grade to to | y or plate | ssolid or filled land? | earth or rock? |
| Size, front dept | n | hickness, topbottom | cellar |
| Material of foundation | | nickness, top bottom | Wildi a manufacture and wilder |
| Kind of roof | Rise per foot | Roof covering | C |
| No. of chimneys | Material of chimne | ys of lining Kind o | i heat tuel |
| Framing Lumber-Kind | ; Dressed or f | ull size? Corner posts | |
| Size Girder | _ Columns under girde | ers Size N | lax. on cente. |
| Studs (outside walls and ca | arrying partitions) 2x4- | 16" O. C. Bridging in every floor and fla | t 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 | , nx.f |
| If one story building with | masonry walls, thickness | s of wails? | height? |
| I one story bunding with | | · . | |
| en Total | | If a Garage | و المعملونين المعملونين المعملونين المعملونين المعملونين المعملونين المعملونين المعملونين المعملونين المعملوني |
| No. cars now accommodate | ed on same lot, to b | pe accommodatednumber commercia | I cars to be accommodated |
| Will automobile repairing I | oe done other than mine | or repairs to cars habitually stored in the | proposed building? |
| | |] Illiscellar | |
| PPROVED: | | Will work require disturbing of any | |
| 5.K 3/17/70- ac | de. | Will work require disturbing of any | to work a paore or competent to |
| ministration of the first franchistic Marine | In the particular province province particular and indicated and indicat | Will there be in charge of the above | work a person competent to |
| | | see that the State and City requi | rements pertaining thereto are |
| | | observed? <u>yes</u> | |
| tentamente pur l'appropriate de la primerie de la primerie de la primerie de l'approprie de l'ap | | Stanley Cress | |
| | | - 12 7 | a — |

| Permit No. 245 Location 26/263 Chiques y Owner Accorder (1900) Date of permit 3/19/70 Notif. closing-in Inspn. closing-in Final Notif. Final Inspn. Cert. of Occur and issued 3/25/70= K Staking Out Notice Form Check Notice | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NOTES | |

*45

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE ERECTED PROJECTING OVER A PUBLIC SIDEWALK FROM THE PREMISES AT 26 > (2007) IN PORTLAND, MAINE

premises at 163 Carrage ST in Portland, Maine hereby gives consent to the erection of a certain sign owned by Kelegule projecting over the public sidewalk from sid premises as described in application to the Inspector of Buildings Portland, Maine for a permit to cover erection of said sign; And in consideration of the issuance of said permit Burbara Eira, owner of said premises, in event said sign shall cease to serve the purpose for which it was erected or shall become dangerous and in event the owner of said sign shall fail to remove said sign or make it permanently safe in case the sign still serves the purpose for which it was erected, hereby agrees for himself or itself, for his heirs, its successors, and his or its assigns, to completely remove said

sign within ten days of notice from said Inspector of Buildings that said sign is in such condition and of order from him to ramove it. In Witness whereof the owner of said premises has signed this consent and agreement this 17 Cu

sign within ten days of notice from said Inspector of Buildings that said

RECEIVED FEB 18 370 CITY OF PUR LAND

Plastic face-15 sq.ft. Und.Label.

BS ELISHIESS JONE

FEB 10 1970 150

APPLICATION FOR PERMIT TO ERECT

SIGN OVER PUBLIC SIDEWALK OR STREET

Portland, Maine, Februarisment for the following described to the following described

| To the INSPECTOR OF BUILDINGS, PORTLAND, ME. The undersigned hereby applies for a permit to erect the fo walk or street in accordance with the Building Code of the City of | ortland, Meine, llowing describe Portland, and t | , | T Parkeys | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|---------------------------|------------|---------------------------------------|
| Location 263 Congress Ch. | | | | |
| Owner of building to which sign is to be attached Barbara Cress | s, 253 Congr | ess St | T Dist. No | |
| Name and address of owner of signReliable Reweaving, | 263 Courses | s St. | 2.5 | |
| Contractor's name and address Coyne Sign Company 195 S | t.John St. | , | ****.11. | 772-4144 |
| When does contractor's bond expire? Dec. 31, 1970 | - | · | releptione | |
| No. stories 22 Material of wall to which sign is to be at | | Interior Li nen-flshin | | |
| Details of Sign and Cor | | | 173.19 | J. 1967 |
| Building owner's consent and agreement filed with application | yes | · · · · · · · · · | | |
| Electric? yes Vertical dimension after erection | 31411 | Hocizonta | 51 | |
| Weight 85 ibs., Will there be any hollow spaces? | yes | Any rigid fr | | yes. |
| Material of frame argleiron No. advertising fac. | 2 | terial | plastic | DARK: |
| No. rigid connections 2 Are they fastened di | ictly to frame. | of sign? | yes | · · · · · · · · · · · · · · · · · · · |
| No their Lie was as we want | tion, top or bot | | | - 4. Prosi- |
| No. guys 3, material (1)-cable (2)-angleiron | | Size 5/1 | 6-cable | 1.10 |
| Minimum clear height above sidewalk or street101 | , , , , , | laxl | x3/16-an | gleirch |
| Maximum projection into street 51 | 11/11 | 1 | | |
| Signature of contractor | TAK | oenel_ | Fee \$ | |
| NSPECTION COPY | | | 1 1 5 | \overline{a} |

| -11-1 | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Permit No. 10/050 / - | |
| | - |
| 1. xation 10 3 Capes 44 | |
| Owner Barbine Cress. | |
| Date of permit 1/9/34 | and the same of th |
| , | |
| Sign Con-ractor | |
| . Final Irspn. | |
| NOTES Of | |
| NOTES | 5.12-01 |
| 3-17-70 Mg Start | 10 6 2 7 |
| wheeler and sure | 12000 |
| Control of Stand | |
| to the same | - 150 |
| 18:21 tot Ell | |
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APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

FILL IN AND BIGN WITH INK

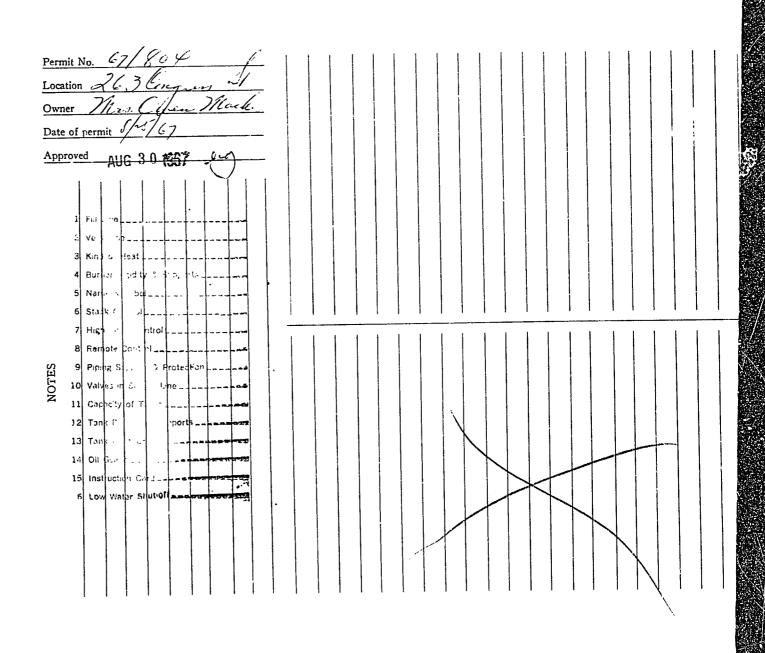
PERMIT ISSUED POSO4

Portland, Maine, August 25 1967

CITY OF PORTLAND

| o install the following heating, cooking or power equipment in accorder City of Portland, and the following specifications: Building Apt. House No. Stories New Building Existing " Building Apt. House No. Stories Existing " Mack, 143 Dartmouth St. Existing " Mack, 143 Dartmouth St. Existing " Mack Building Existing " Incompact House #321 Description of Work Hoerican heat. (1st. floor) BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? Oppliance or casing top of furnace ppliance From sides or back of appliance is to same flue |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Building Apt. House No. Stories 3 New Building en Mack, 143 Dartmouth St. ny, 372 Main St. Biddeford Me. Telephone License #321 Description of Work nection with existing steam heat. (1st. floor) BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? opliance or casing top of furnace ppliance From sides or back of appliance as to same flue |
| ny, 372 Main St.Biddeford Me.Telephone License #321 Description of Work nection with existing steam heat.(lst. floor) BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? opliance or casing top of furnace ppliance From sides or back of appliance as to same flue |
| Description of Work nection with existing steam heat.(lst. floor) BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? opliance or casing top of furnace ppliance |
| Description of Work nection with existing steam heat.(lst. floor) BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? opliance or casing top of furnace ppliance |
| BELATED R, OR POWER BOILER able material in floor surface or beneath? Kind of fuel? opliance or casing top of furnace ppliance |
| Able material in floor surface or beneath? Kind of fuel? Opliance or casing top of furnace ppliance |
| Kind of fuel? opliance or casing top of furnace ppliance From sides or back of appliance |
| ppliance or casing top of furnace |
| ppliance From sides or back of appliance |
| as to same flue |
| |
| Rated maximum demand per hour |
| sure proper and safe combustion? |
| OIL BURNER |
| Labelled by underwriters' laboratories? yes es oil supply line feed from top or bottom of tank? Size of vent pipe 1½" existing Number and capacity of tan': 275 existing Watts No. existing yes How many tanks enclosed? |
| KING APPLIANCE |
| Any burnable material in floor surface or beneath? |
| |
| e to combustible material from top of appliance? |
| nd back . From top of smokepipe |
| s to same flue |
| ow vented? Forced or gravity? |
| MENT OR SPECIAL INFORMATION |
| |
| |
| |
| |
| |
| ter, etc., \$1.00 additional for each additional heater, etc., in same |
| |
| 3291.4 |
| Will there be in charge of the above work a person competent to |
| see that the State and City requirements pertaining thereto are |
| observed? Shapiro Oil Company |
| by: Alexander D |
| |

My



CITY OF PORTLAND
HEALTH DEPARTMENT
HOUSING DIVISION



Loc w/i S Dongrees Street Loc w/i S Dongrees Street Bldg Fire r Elec Other Issued September 23, 1959 Expires October 23, 1959

W2 B685

Mr. Hyron Josetian 105 Bartsouth Mercat Forthand, Mains

Dear Sir:

an examination was made of the premises located

Non-compliance with the ordinances relating to housing conditions was found as detailed below.

In accordance with the provisions of the above ordinance, you are hereby ordered to correct these defects according to specifications within the time limits allowed. Failure to comply with this notice will necessitate legal action.

necessitate legal action.

Some repairs or improvements required will necessitate permits which are to be obtained from the Building Inspector, Health, Fire or other City Departments. These must be obtained before the work is started.

If any additional information is desired, visit or telephone the Housing Supervisor at this Office, telephone 4-1431, extension 226. kindly notify this office as soon as all corrections have been completed.

Very truly yours, Edward W. Colby, M.D. Health Director

Ilousing Supervisor

VIOLATIONS & SPECIFICATIONS

Responsibility of Owner or Agent ** Responsibility of Occupant

legal r and put in good order all dilapidated and hacardeen parts of the structure as follows:

Repair or replace the house, sorn, dilapidated and hacardeen parts of the outside front porch handralling.

Replace the relation bricks and point up the locae joints on the foundation to the garage, of the atracture.

Replace the broken window pares in the garage, in the front bedroom, and left bedroom of the left floor apt., and in the front and rear bedrooms of the living room of the left floor apt., and in the dindre room of the left floor apt.

Repair or replace the locae, creaked, or missing planter on the coiling of the cellar, in the front and rear hallower of the structure, in the left bedroom of the left floor apt.

Repair or replace the locae, creaked, or missing planter on the walls of the front and rear hallows of the structure, in the left bedroom of the left floor apt.

Repair or replace the locae, creaked, or missing planter on the walls of the front and rear hallows, in the bathroom of the last floor apt., and in the hathroom of the left floor apt.

Repair or replace the locae, torn, dilapidated, and hamarkes parts of the treads and risers on the staired in the cellar and in the hall to the left floor apt.

Repair or replace the missing deer known on the front lecture door of the 3rd floorest.

Repair or replace the missing deer known on the front lecture door of the 3rd floorest.

Repair or replace the locae, wors, and hazardees parts of the floor in the othic.

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allandialla. Noonk, esskibassa, ksemis reskiblik distriktiva silvatsissa usel silvatsissa filmburassa khrenadissa disd * structure.

To air or replace the cross consection in the bathroom of the 3rd floor ept.

- Clean the cleanest is the entropy by receiving and proporty disposing of all asked
- ispair or replace the 3rd floor apt. furnace.

ACCOUNTS AND PRODUCTORY CONTINUES:

a. Accounties a general close-up of the celiar, and in the statement of the let floor apply by recoving and properly dispending of all twosh, fills, litter, and debrie.

b. Had the precises of all inferration (mice, cockremence). If you are while to do it persuall, we suggest that yes procuse the certains of a pest certain operator registered with this department.

The above modificated conditions are in violation of the City Ordinance Windows Standards for Continued Companys, Whithoutty to Vecate Relatings, and Standard and Vernin Controls, and must be corrected on or before October 23, 1959.



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

FRAIT ISSUED DEC 025,315

Portland, Mainc, December 14, 1951.

ITY of FORTLAND

| A The undersigned hereby applies for a permit to install the c. n | | • |
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| The undersigned hereby applies for a permit to install the foll ance with the Laws of Maine, the Building Code of the City of Portla | | |
| Section as Journal as Street Ties of Date 1 | | |
| Name and address of owner of applianceHymanBoxstein,267 Installer's name and addressSnapiroAppliance et (i) 1.00 | Ement nouse No. Stories | Existing " |
| Installer's name and address Snapiro Appliance of Cil Co | S. Congress Street | |
| A CONTRACTOR OF THE CONTRACTOR | proderord Telephone | ******** ***** ***** |
| General Donating | | |
| To install oil burning equipment in connection with st | eam heating creating | - / |
| × | Aminited of the Parket | |
| | a . | |
| Location of appliance or source of local | RBOILER | |
| Location of appliance or source of heat | Type of floor beneath applian | nce |
| If wood, how protected? | Kind of fu | el |
| Minimum distance to wood or combustible material, from top of appl | iance or casing top of furnace | |
| From top of smoke pipe From front of appliance | From sides or back of applia | ince |
| Size of chimney fluc | | |
| If gas fired, how vented? | Rated maximum demand per hour | Chigg 1 |
| | | |
| Name and type of burner Silent Glow | | * - |
| Will operator be always in attendance? Does oil supply line Type of floor beneath burner | feed from Annual Lives laborator | ries? yes |
| Type of floor beneath burner | reed from top or bottom of tank? | bottom |
| Location of oil storagebasement Number a If two 275-gallon tanks, will three-way valve be provided? | | |
| If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? | and capacity of lanks1-275ga | 1 |
| Will all tanks be more than five feet from any flame? yes How. Total capacity of any existing storage tanks for furnace hypners. 3, 27 | | **** ******************* |
| Total capacity of any existing storage tanks for furnace burners1-27 | many tanks fire proofed? | |
| IF COOKING APPLIA | 5. Ear. | t |
| Location of appliance | NCE | |
| If wood how presented? | Type of floor beneath appliance | , m = 1 = 1 = 0 |
| Location of appliance | The state of the s | Act of the control of |
| From front of appliance | C | |
| From front of appliance From sides and back | From top of smokepine | |
| Is bood to be asset to the connections to same flue | The state of the s | *************************************** |
| Size of chimney flue | ** 6" | *************************************** |
| If gas fired, how vented? | ated maximum demand per hour | |
| MISCELLANEOUS EQUIPMENT OR SPE | CIAI INFORMA | |
| A STATE OF THE STA | CIAL INFORMATION | 1934 P. 19 4 44, |
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| | | *********** |
| Amount of fee enclosed? 2.00 (\$2.00 for | | ********** |
| Amount of fee enclosed?2.00(\$2.00 for one heater, etc., 50 cents a building at same time.) | dditional for each additional heater | , etc., in same |
| | | |
| APPROVED | | |
| Will thora he in the | - Inner and a second | • |
| see that the Cra | charge of the above work a person | competent to |
| State that the State | e and City requirements pertaining | g thereto are |
| obscrved? .yes | war. | |
| Shapiro Oil & A | ppliance Co. | and the second of the second o |
| | A service of | a remaining a same of the |
| INSPECTION COPY Signature of Installer by: | Ellina | ngapangangan ng pagan |
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| 2 Fill Pipe | • | NOTES | | |
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PERMIT ISSUEDWO. 1481

| APPLICATION FOR D | FERMIT ISSUED - 12184 |
|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WINTER TOR P | ERMIT FOR HEATING, COOKING OR POWER EQUIPMENT |
| | |
| To the INSPECTOR OF BUILDINGS, PORT | Portland, Maine, Sept. 16, 1936 |
| I lle undersimed Land | |
| accordance with the Laws of Maine, the Ru | a permit to install the following heating, cooking or power equipment in ilding Code of the City of Portland, and the following |
| Location 263 Communication | n permit to install the following heating, cooking or power equipment in ilding Code of the City of Portland, and the following specifications: |
| Location 263 Congress St. | Use of Building Dwelling |
| Name and address of owner 263 Congre | Use of Building Dwelling Ward Lise of Building Dwelling Street Ward Telephone 2-1991 Telephone 2-1991 The Equipment of Work Equipment Telephone 2-1991 The Equipment Co. of Maine The Equipment Co. of Maine The Equipment Co. of Maine The Equ |
| Contractor's name and address 253 Cumb | SS Street 1 & Equipment Co. of Maine Ward 2 |
| = = = Gamb | 3114nd Avenue Telephone 2-1991 |
| Ge | neral Description of Work |
| To installOil Bunning | OF CAN |
| To install Oil Burning I | POWER BOILER OR COOKING DEVICE Kind of Firel Oil Cooking Street Cooking of Firel Oil Cooking Device Cooking of Firel Oil Cooking Device Cooking of Firel Oil Cooking Device Cooking Devic |
| | The Control of the Co |
| IF HEATER, I | OWER BOILER OR COOKING DEVICE |
| is neater or source of heat to be in cellar? ye | If not, which story |
| Material of supports of heater or equipment (co | regate de- |
| Material of supports of heater or equipment (co | POWER BOILER OR COOKING DEVICE Kind of Fuel Oil is the process of |
| The continuation makes | riol from A |
| from top of smoke pipe, from f | ront of heater |
| Size of chimney flueOther connecti | ront of heaterfrom sides or back of heater Ons to same flue IF OIL RIPNER |
| | IF OIL BURNER |
| Name and type of human Gillianna | 17 GIL BURNER |
| Will | CO Labeled and approved by Underwriters' Laboratories? Yes |
| will operator he always in attendance? | Type of all factories? Yes |
| Location oil storage basement | Labeled and approved by Underwriters' Laboratories? Yes Type of oil feed (gravity or pressure) pressure No. and capacity of tinks 1 275-gallon |
| Will all tanks be more than seven for t | No. and capacity of tanks 1 275-gallon |
| | |
| Amount of fee enclosed? \$1.00 (\$1.00 for or | ne heater at to |
| building at same time.) | BALLAND OIL of hall by for each additional heater, etc. in same |
| INSPECTION COPY | ne heater, etc., 50 cents addition of the first each additional heater, etc., in same |

| Ward 2 Permit No. 36/1481 | • . |
|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Location 263 Congress St. | - 10/15/36. Dr. Bant |
| 10 | - 10/15/36, fru Bantow |
| | pere. |
| Post Card sent 9/16/36 | Cido, |
| Notif. for inspn. Man | i and a second s |
| Approval Tag issued 10/3/36 306 | |
| Oil Burner Check List (date) 10/3/2/ | |
| 1. Kind of heat Steam | |
| 2. Label | |
| 3. Anti-siphon | |
| 4. Oil storage | |
| 5. Tank distance | |
| 6. Vent pipe 6" "Xill 1926/ 12" dans | |
| 7. Fill pipe | |
| 8. Gauge | |
| 9. Rigidity | |
| 10. Feed safety | |
| 11. Pine sizes and material | |
| 12. Control valve | |
| 13. Ash pit vent | |
| 14. Temp. or pressure safety | and the second s |
| 15. Instruction card | |
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| 39/36/36 marcleanout, | The second secon |
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APPLICATION FOR PERMIT 155UED Class of Building or Type of Structure_

| | | of Structure | Third Class | JUL 2 |
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| To the INSPECT | FOR OF BUILDINGS, PORTLAND AND | Portland, M | aine,Jul | V 2. 1920 |
| The under accordance with any, submitted L | signed hereby applies for a permit to a the Laws of the State of Maine, the Berewith and the following specification Congress Street | erest alter install-the | lolland a | 4000 |
| Location 288 | rewith and the following specification | uilding Code of the Cos: | ty of Portland | ling structure equipm |
| Owner's or I | Longress Street W | Vard_2 w | | , Prans una specificati |
| Contractor's | Congress Street 4 name and address Dr. Louis De and address R. L. Vasser, 95 and address | Within 205 C | Fire Limits? | yos Dist. No |
| Architector's name | and address W. L. VESST, 95 ad address idding dwelling | Shard don or | s_St | Telephone |
| Architect's name as | ad address W. L. Vasser, 95 ad address dwelling house | THE THE NEW | | Telephone 3-799 |
| Proposed use of bu | ilding dwelling houses | | | |
| Other buildings on | ame lot no no 25. | | | No familia |
| Plans filed as part of | this application? | | | |
| Estimated cos. \$ | this application? no | No. of | sheets | |
| Material | No stories 2 | it Building to be A | Iterad | Fee \$25 |
| Last use | dwelling house | Style of roof | | • |
| | dwelling house | | R | oofing |
| To rebuild cent | General Description | tion of New Work | | No. families |
| | General Descriptor rear chimney from attic fl | oor up | | |
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| the heating contractor. | ermit does not include installation of heating | anna matus and a se | | SAND OF OCCUPANT |
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| Size, front | ermit does not include installation of heating Details of M | Hointe | aken out separat | ely by and in the name o |
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| Ward & Permit No. 36/98/ | The state of the s |
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| Location 263 Conquest. | the state of the s |
| Owner D. Louis Derry | |
| Date of permit 7/2 36 | |
| Notif. closing-in | |
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| Final Notif. | ————————————————————————————————————— |
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| Final Inspn. 7/6/36. Sunte. oft. | |
| Cort. of Occupancy issued Rine | 一 |
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Location, Ownership and detail must be correct, complete and legible.

Separate application required for every building.

Plans must be filed with this application.

Application for Permit for Alterations, etc.

| | To the INSPECTOR OF BUILDINGS: | Portland, | August 17,1920 | 191 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------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| 1 | The undersigned applies for a peri | nit to olton tion follow | | |
| | Location 263 Congress | int to after the follo | owing-described building:— | |
| | Name of Owner or Lessee Dr. W. G. Doine | Ward, | | yes |
| | Name of Owner or Lessee, Dr. W. C. Doixel | | Address 263 Congress | |
| L. | " " Contractor, Googing & Clari | K | " 45 Portland: | |
| Descrip | " " Architect, | MY 12 | transportunitions of a creat wreather play of the principle. | ************************************** |
| tion of | Material of Building is Wood Style of R | loof, 1120 | Material of Roofing, tar | & gravel |
| Present | Size of Building is 50ft feet long; | . feet wi | de. No. of Stories, 3 | ************************************** |
| Bldg. | Cellar Wall is constructed of stone is | inches wide on bot | tom and batters toir | iches on top. |
| mar Str. Str. Warning | Underpinning is brick is | inches thick; is | | 2 |
| (| Height of Building, 40ft Wall, if Brick; 1st, | 2d, | 3d, | th, |
| No. | what was building last used for? | Merring | No. of Families? 2 | |
| 1.2 s | What will Building now be used for? | iame | 7 () () () () () () () () () (| |
| - 3 | | PROPOSED W | | , , , , , , , , , , , , , , , , , , , |
| | Build addition 1970 and at | TROTOSED W | ORK | , Š |
| 1 | Build addition Lr19 ,one story | high, flat ter | Eravel roof exterior | covered. |
| | The state of the s | Or Craft Crite | | |
| | | | with the top purpose of the color of the col | * * * * * * * * * * * * * * * * * * * * |
| in the second | to the second of | incor on many company around | · minorum pominicamia nabamorum ma · n m | |
| | The state of the s | | | |
| , and the second of the second | a time to the second | mananinainas samins en ma | Estimated Cost S,900 |) |
| Ng sa Nggayaran | | D ON ANY SI | | |
| e de la companya de La companya de la companya de l | | | | , |
| | Size of Extension, No. of feet long?; No. of feet | t wide? | lo, of feet high above sidewal | lk? |
| | No. of Stories high? ; Style of Roof? | | Material of Roofing? | myrical annimia |
| | Of what material will the Extension be built. | bare cretes versustations control avenuations of | Foundation? | |
| | If of Brick, what will be the thickness of External Wall | s?inclies | s; and Party Walls | inches. |
| | How will the extension be occupied? | How conne | ected with Main Building? | |
| | WHEN MOVED, RAI | | | , |
| | No. of Stories in height when Moved, Raised, or Built | tinon ? | D. 12 | |
| 1 | No. of feet high from level of ground to highest part of | Doct to 1 2 | Proposed Foundations | |
| • • | No. of feet high from level of ground to highest part of How may feet will the External Walls be increased in the | Roof to be? | en action in manufacturemental in security and | · · · · · · · · · · · · · · · · · · · |
| . : | How may feet will the External Walls be increased in h | eight? | Party Walls | - |
| - 4.5 | "man a com ana can a coma pomina perma can ana ana ana ana ana ana ana ana an | oren terrentziaren errentzia errentzia errentzia. | sometime follower commerce are set durings everyone it we to | *************************************** |
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| | A second | to a class serving on emergence 3 of \$150 Alberts | allering have present the same sequential temporal or extensional of the | |
| · *, | Come invante from a microsoft carrie on career manus arrest from the carrier of the on the occurrence | | and the second s | |
| | IF ANY PORTION OF THE EXTERN | AL OR PART | Y WALLS ARE REM | OVED |
| | Will an opening be made in the Party or External Walls | | : | |
| | Size of the opening? | Lan | 5 | Story. |
| r' | Size of the opening? | Tiow protected | The same of the sa | |
| | | | wante on annual to a manual morning of | |
| | Signature of Owner Authorized Represents | or Joog | ins & Al | |
| .' | | | | Z |
| | Ago | iress | | • |



Location, ownership and detail must be correct, complete and legible. Separate application required for every building. Plans must be filed with this application.

APPLICATION FOR PERMIT TO BUILD

(3D CLASS BUILDING)

| | Portland, Me., August 17, 1920 19 |
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| | |
| TO THE INSPECTOR OF BUILDINGS | |
| INSPECTOR OF BOILDINGS | eby applies for a permit to build, according to the following |
| The undersigned here Specifications:— | • |
| | Wd2 |
| Location 263 Congress Name of owner is: Dr. W C Doing1 | Address 253 Congress |
| Name of owner is? The W of Bellian | Address |
| Name of mechanic is? Googling & Glove | |
| Name of architect is? | Delegant maintage derived |
| Proposed occupancy of building (purpose)? | s?No |
| If a dwelling or tenement house, for how many families | No. |
| Are there to be stores in lower story? | N- of fact deep? |
| Size of lot, No. of feet front?; No. o | f feet rear? ; No. of feet deep? 11ft; No. of feet deep? 18ft; rear? ; rear? |
| Size of building, No. of feet front? 114; No. o | f feet rear?, No. of feet doop |
| No. of stories, front? 1 | ; rear |
| | |
| Distance from lot lines, front?feet; side? | feet; side?feet; rear?feet t to lot line.does not obstruct any windows where fire extinguisher to be installed |
| Fireston to be used? Build not nearer than 2 f | t to lot line, adds not obtained installed |
| | |
| Will the building be erected on solid or filed land! Will the foundation be laid on earth, rock or piles? | 1.73 |
| · _ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` | distance on centres: |
| | |
| | |
| _ * | |
| girts:concreto | , 3d, 4th |
| O. C. " " " " | · · · · · · · · · · · · · · · · · · · |
| 9. 0. | 2 |
| | |
| Braces, how put in: Building, how framed? | |
| Building, how framed:thickne | ss of?laid with mortar? |
| | |
| | |
| | |
| | |
| Will the building be heated by steam, turnaces, stove Will the building conform to the requirements of the building conform to the requirements of the building to the buildin | and where placed? |
| No. of brick walls? | |
| Means of egress? | |
| | |
| | Tenement House, give the following particulars: |
| If the building is to be occupied as a | I Guerran Manager |
| What is the height of cellar or basement? | |
| What will be the clear height of first story? | second?third? |
| Garage moons of egress is to be provided? | |
| State what means of sgreat | Scuttle and steplander to roof? |
| 2 | |
| Estimated Cost, Signature of owner or aut | Lior- |
| a 1600. ircd cepresentative, | Longen gull |
| | Address, |
| · · · · · · · · · · · · · · · · · · · | Atturess |
| | Address |

Inspection Services P. Samuel Florisas Chicil



Planning and Urban Development Joseph E. Gray Jr. Director

CITY OF PORTLAND

August 17, 1995

CLARKE MERLE V 6 WHITE BIECH LN PORTLAND ME 04103

> Re: 263 Cumberland Ave CBL: 025- - F-008-001-01 DU: 15

Dear Mr. Clarke:

You are hereby notified, as owner or agent, that an inspection was made of the above referenced property. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspections Report".

In accordance with the provisions of the above mentioned Code, you are hereby ordered to correct those defects within sixty (60) days. If you are unable to make such repairs within the specified time, you may contact this office to arrange a satisfactory repair schedule. If we do not hear from the mention of the contact that the second state within the se you within ten (10) days from this date, we will assume the repairs to be in progress and, on re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

You should consult this department to insure that any Please Note: corrective action you should undertake complies with the building, plumbing, electrical, zoning and other Articles of the City Code.

Please contact this office if you have any questions regarding this order.

Your cooperation will aid this department in it's goal to maintain decent, safe, and sanitary housing for all of Portland's residents.

Sincerely,

Tammy Munson

Tammy Marson Code Enic. Offr./ Field Supv.

389 Congress Street • Portland, Maine 04101 • (207) 874-8704 • FAX 874-8716 • TTY 874-8936

HOLGING INSPECTION REPORT

Location: 263 Cumberland Ave Housing Conditions Date: August 17, 1995 Expiration Date: October 16, 1995

Items listed below are in violation of Article V of the Municipal Codes, "Aousing Codes", and must be corrected before the expiration date:

| τ. | EXT - THROUGHOUT - | |
|----|---------------------------------|--------|
| _ | REMOVE STOPS FROM THE WINDOWS | 108.30 |
| 2. | INT - THROUGHOUT - | |
| | SEALL ALL FIRE PENETI ATIONS | 108.20 |
| 3. | EXT - REAR - FIRE ESCAPE & DECK | |
| | BALUSTERS ARE MISSING | 108.40 |
| 4. | INT - BASEMENT - LEFT, FRONT - | |
| | INCORRECT STORAGE OF FLAMMARIES | 116.10 |

Inspection Services
P. Samuel Hoffses
Chief

Miller was



Planning and Urban Development Joseph E. Gray Jr. Director

CITY OF PORTLAND

August 09, 1995

CLARKE MERLS W 6 WHITE BIRCH LN PORTLAND ME 04103

Re: 263 Cumberland Ave CBL: 026- - F-008-001-01 DU: 0

Dear Mr. Clarke:

This is to inform you, as cweer or agent of the property located at the above referenced address, that we have released the entire structure from posting.

Therefore, you may rent this structure to others or occupy it yourself.

If you have any questions regarding this matter, please do not hesitate to contact this office.

Sincerely,

Tammy Munson
Code Enfc. Offr./ Field Supv.

389 Congress Street • Portland, Maine 04101 • (207) 874-8704 • FAX 874-8716 • TTY 874-8936