

101 Danforth Street

CL 103

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

Department of Planning & Urban Development
Inspections Services Division
Tel. 775-5451 - Ext. 311 - 318 - 319

Mr. Thomas Conneen
640 Brighton Avenue
Portland, Maine 04102

DU 12

Ch. 44 Blk. F Lot 3
Location: 101 Danforth St.

Project: NCP-NDP
Issued: May 24, 1983
Expires: Aug. 24, 1983

Dear Mr. Conneen:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 101 Danforth Street, Portland, Maine by Code Enforcement Officer Marge Schmuckal. Violations of Chapter 307 of the Municipal Codes (Minimum Standards for Housing) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above mentioned Code, you are hereby ordered to correct those defects on or before August 24, 1983. 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 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 Code Standards.

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

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

Very truly yours,
Joseph E. Gray, Jr., Director of
Planning & Urban Development

By Lyle D. Hayes
Lyle D. Hayes,
Inspection Services Division

Marge Schmuckal
Code Enforcement Officer - Marge Schmuckal (3)

Attachments:

jmr

HOUSING INSPECTION REPORT

OWNER: Mr. Thomas Conneen CODE ENFORCEMENT OFFICER - Marge Schruckal (3)
101 Danforth Street, Portland, Maine 44-F-3 NCP-NDP Notice of Housing Conditions
DATED: May 24, 1983 EXPIRES: August 24, 1983

ITEMS LISTED BELOW ARE IN VIOLATION OF "CHAPTER 307 OF THE MUNICIPAL CODES - MINIMUM STANDARDS FOR HOUSING" AND MUST BE CORRECTED.

- | | <u>SEC. (S)</u> |
|---|-----------------|
| 1. MIDDLE - roof - worn and leaking. | 3-a |
| <u>FOURTH FLOOR RIGHT FRONT</u> | |
| 2. MIDDLE LIVING ROOM - closet ceiling - broken plaster. | 3-b |
| <u>FOURTH FLOOR LEFT FRONT</u> | |
| 3. RIGHT MIDDLE LIVING ROOM - ceiling - broken and leaking plaster. | 3-b |

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

Department of Planning & Urban Development
Inspections Services Division
Tel. 775-5451 - Ext. 311 - 318 - 319

Mr. Thomas Conneen
640 Brighton Avenue
Portland, Maine 04102

DU 12

Ch. 44 Blk. F Lot 3
Location: 101 Danforth St.

Project: NCP-NDP
Issued: May 24, 1983
Expires: Aug. 24, 1983

Dear Mr. Conneen:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 101 Danforth Street - Portland, Maine by Code Enforcement Officer Marge Schmuckal. Violations of Chapter 307 of the Municipal Codes (Minimum Standards for Housing) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above mentioned Code, you are hereby ordered to correct those defects on or before August 24, 1983. 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 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 Code Standards.

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

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

Very truly yours,
Joseph E. Gray, Jr., Director of
Planning & Urban Development

By Lyle D. Royes,
Inspection Services Division

M. Schmuckal
Code Enforcement Officer - Marge Schmuckal (3)

Attachments:

jmr

HOUSING INSPECTION REPORT

OWNER: Mr. Thomas Corneen

CODE ENFORCEMENT OFFICER - Marge Schuckal (3)

101 Danforth Street, Portland, Maine 44-F-3 NCP-3DP Notice of Housing Conditions
DATED: May 24, 1983 EXPIRES: August 24, 1983

ITEMS LISTED BELOW ARE IN VIOLATION OF "CHAPTER 307 OF THE MUNICIPAL CODES - MINIMUM STANDARDS FOR HOUSING" AND MUST BE CORRECTED.

- | | <u>SEC. (S)</u> |
|---|-----------------|
| 1. <u>MIDDLE</u> - roof - worn and leaking. | 3-a |
| <u>FOURTH FLOOR RIGHT FRONT</u> | |
| 2. MIDDLE LIVING ROOM - closet ceiling - broken plaster. | 3-b |
| <u>FOURTH FLOOR LEFT FRONT</u> | |
| 3. RIGHT MIDDLE LIVING ROOM - ceiling - broken and leaking plaster. | 3-b |

City of Portland

Housing Inspection Division

DWELLING UNIT SCHEDULE

1) INSP. Date

2) INSP.

3) FORM NO.

5 - 10 - 83

4) TENANT'S NAME

5) Flr. #

6) Location

7) Eng. Tp.

8) #Rms.

9) #Peo.

10) #All'd

11) Slip. Rms.

12) Child Under 10

13) Child 1-6

14)

15) Rent

16) Rent Code

17) Furn.

18) Heat

19) Hot Water

20) Dual Egress

21) Ck'ng

22) Lav.

23) Bath

24) Flush

Viol. No.

Remedy

Cond.

Violation

Location

Room Type

Area Type

Resp. Party

Code Sect. Violated

Violation Rem. - Date

2

BR

PLASTER

M.I

LI

CL

✓

3b

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

5 20 08

INSP

FORM NO.

TENANTS NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLPRM.

Child Un.10 Child 1-6 + Lead Survey - Results Rent Rent Code Furn Hot Water Dual Egrs. Ck'ng. Heat Lav. Bath Flush

KITCHEN
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
() Counter/Stor. Space Yes No
() Sink - chipped, cracked, leaks 6(d)
() Range - improper stack, flue, vent 3(e)
() Refrigerator Space Yes No
() Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
() Electrical (a)
() Sanitation (a)

BATHROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Window - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
() Lavatory - chipped, crkd, leaks, trap leaks 6(d)
() Bathtub/Shower - leaks cross connection 6(d)
() Ventilation Yes No 7
() Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
() Electrical (b)
() Sanitation (b)

LIVING ROOM
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Electrical (c)
() Sanitation (c)

DINING ROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
() Electrical (d)
() Sanitation (d)

Bedrooms and/or other rooms
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - Loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floors - loose, worn, damaged 3(b)
() Door - knobs/lk - missing - Panels/Frames dam 3(b)
() Electrical (e)
() Sanitation (e)
() Clothes Closet Yes No

Plumbing Electrical Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspector Division

INSP DATE

5-20-82

HSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLPRM.
										1st	1st Flr		3			
Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush				
									LE	PL	PB	PF				

KITCHEN

	CODE
() Plaster - L, C, M, - Ceiling/Walls	3(b)
() Windows - loose, broken glass, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, dam., buckled	3(b)
() Doors - Knob/lk - missing - Panels/F:ames dam.	3(b)
() Counter/Stor. Space Yes No	-
() Sink - chipped, cracked, leaks	6(d)
() Range - improper stack, flue, vent	3(e)
() Refrigerator Space Yes No	-
() Plumbing (a) 6(a) Water Supply Hot Cold	6(c)
() Electrical (a)	
() Sanitation (a)	

BATHROOM

	CODE
() Plaster - L, C, M - Ceiling/Walls	3(b)
() Window - loose, broken glass, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, dam., buckled	3(b)
() Door - knob/lk - missing - Panels/Frames dam.	3(b)
() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd.	6(d)
() Lavatory - chipped, crkd, leaks, trap leaks	6(d)
() Bathtub/Shower - leaks cross connection	6(d)
() Ventilation Yes No	7
() Plumbing (b) 6(a) Water Supply Hot Cold	6(c)
() Electrical (b)	
() Sanitation (b)	

LIVING ROOM

	CODE
() Plaster - L, C, M, - Ceiling/Walls	3(b)
() Windows - loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, damaged	3(b)
() Door - knob/lk - missing - Panels/Frames dam.	3(b)
() Electrical (c)	
() Sanitation (c)	

DINING ROOM

	CODE
() Plaster - L, C, M - Ceiling/Wal	3(b)
() Windows - loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, damaged	3(b)
() Doors - Knobs/lk - missing, Panels/Frames dam.	3(b)
() Electrical (d)	
() Sanitation (d)	

Bedrooms and/or other rooms

	Code
() Plaster - L, C, M - Ceiling/Walls	3(b)
() Windows - Loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floors - loose, worn, damaged	3(b)
() Door - knobs/lk - missing - Panels/Frames dam.	3(b)
() Electrical (e)	
() Sanitation (e)	
() Clothes Closet Yes No	

Plumbing	Electrical	Sanitation - Vermin O R
----------	------------	-------------------------

REMARKS: Was small kitchen

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

20 03 1

INSP

FORM NO.

TENANTS NAME

FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLPRM.
1st	Leak		3	VAC		

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rgn. Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									LE	PL	FB	PT

KITCHEN

- Plaster - L, C, M, - Ceiling/Walls
- Windows - loose, broken glass, glaze
- Sash/Frames - broken, missing, worn
- Floor - loose, worn, dam., buckled
- Doors - Knob/lk - missing - Panels/Frames dam.
- Counter/Stor. Space Yes No
- Sink - chipped, cracked, leaks
- Range - improper stack, flue, vent
- Refrigerator Space Yes No
- Plumbing (a) 6(a) Water Supply Hot Cold
- Electrical (a)
- Sanitation (a)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)
-
- 6(a)
- 3(e)
-
- 6(c)

BATHROOM

- Plaster - L, C, M - Ceiling/Walls
- Window - loose, broken glass, glaze
- Sash/Frames - broken, missing, worn
- Floor - loose, worn, dam., buckled
- Door - knob/lk - missing - Panels/Frames dam.
- Toilet - Tank - brkn, loose, leaks, Seat, l'se crkd.
- Lavatory - chipped, crkd, leaks, trap leaks
- Bathtub/Shower - leaks cross connection
- Ventilation Yes No
- Plumbing (b) 6(a) Water Supply Hot Cold
- Electrical (b)
- Sanitation (b)

- CODE
- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)
- 6(d)
- 6(d)
- 7
- 6(c)

LIVING ROOM

- Plaster - L, C, M, - Ceiling/Walls
- Windows - loose, broken, glaze
- Sash/Frames - broken, missing, worn
- Floor - loose, worn, damaged
- Door - knob/lk - missing - Panels/Frames dam.
- Electrical (c)
- Sanitation (c)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)

DINING ROOM

- Plaster - L, C, M - Ceiling/Walls
- Windows - loose, broken, glaze
- Sash/Frames - broken, missing, worn
- Floor - loose, worn, damaged
- Doors - Knobs/lk - missing, Panels/Frames dam.
- Electrical (d)
- Sanitation (d)

- CODE
- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)

Bedrooms and/or other rooms

Code
<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls
<input type="checkbox"/> Windows - Loose, broken, glaze
<input type="checkbox"/> Sash/Frames - broken, missing, worn
<input type="checkbox"/> Floors - loose, worn, damaged
<input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam.
<input type="checkbox"/> Electrical (e)
<input type="checkbox"/> Sanitation (e)
<input type="checkbox"/> Clothes

Plumbing

Electrical

No

ion - Vermin O R

REMARKS:

Handwritten notes in the remarks section.

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

5-20-83

INSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush				
									LE	PL	PL	PF				

- KITCHEN**
- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
 - Windows - loose, broken glass, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, dam., buckled 3(b)
 - Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - Counter/Stor. Space Yes ___ No ___
 - Sink - chipped, cracked, leaks 6(d)
 - Range - improper stack, flue, vent 3(e)
 - Refrigerator Space Yes ___ No ___
 - Plumbing (a) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - Electrical (a)
 - Sanitation (a)

- BATHROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
 - Window - loose, broken glass, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, dam., buckled 3(b)
 - Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
 - Lavatory - chipped, crkd, leaks, trap leaks 6(d)
 - Bathtub/Shower - leaks cross connection 6(d)
 - Ventilation Yes ___ No ___ 7
 - Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - Electrical (b)
 - Sanitation (b)

- LIVING ROOM**
- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
 - Windows - loose, broken, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, damaged 3(b)
 - Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - Electrical (c)
 - Sanitation (c)

- DINING ROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
 - Windows - loose, broken, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, damaged 3(b)
 - Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - Electrical (d)
 - Sanitation (d)

Bedrooms and/or other rooms										Code	
											<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls 3(b)
											<input type="checkbox"/> Windows - Loose, broken, glaze 3(c)
											<input type="checkbox"/> Sash/Frames - broken, missing, worn 3(c)
											<input type="checkbox"/> Floors - loose, worn, damaged 3(b)
											<input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam. 3(b)
											<input type="checkbox"/> Electrical (e)
											<input type="checkbox"/> Sanitation (e)
											<input type="checkbox"/> Clothes Closet Yes ___ No ___

Plumbing	Electrical	Sanitation - Vermin 0 R
----------	------------	-------------------------

REMARKS: Mrs. Smolle De Vich

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Handwritten signature

Housing Inspection Division

INSP DATE

5 - 20 - 82

INSP

FORM NO.

TENANT'S NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLPRM.

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ing.	Heat	Lav.	Bath	Flush
									LE	PL	PS	FF

KITCHEN

- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
- Windows - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
- Counter/Stor. Space Yes ___ No ___ -
- Sink - chipped, cracked, leaks 6(d)
- Range - improper stack, flue, vent 3(e)
- Refrigerator Space Yes ___ No ___ -
- Plumbing (a) 6(a) Water Supply Hot ___ Cold ___ 6(c)
- Electrical (a)
- Sanitation (a)

BATHROOM

- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
- Window - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
- Lavatory - chipped, crkd, leaks, trap leaks 6(d)
- Bathtub/Shower - leaks cross connection 6(d)
- Ventilation Yes ___ No ___ 7
- Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
- Electrical (b)
- Sanitation (b)

LIVING ROOM

- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Electrical (c)
- Sanitation (c)

DINING ROOM

- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
- Electrical (d)
- Sanitation (d)

Bedrooms and/or other rooms

Code
<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls 3(b)
<input type="checkbox"/> Windows - Loose, broken, glaze 3(c)
<input type="checkbox"/> Sash/Frames - broken, missing, worn 3(c)
<input type="checkbox"/> Floors - loose, worn, damaged 3(b)
<input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam. 3(b)
<input type="checkbox"/> Electrical (e)
<input type="checkbox"/> Sanitation (e)
<input type="checkbox"/> Clothes Closet Yes ___ No ___

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

5-20-83

INSP

FORM NO.

TENANTS NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLPRM.

Child Un.10 Child 1-6 + Lead Survey Results Rent Rent Code Furn Hot Water Dual Eqrs. Ck'ng. Heat Lav. Bath Flush

KITCHEN

- () Plaster - L, C, M, - Ceiling/Walls 3(b)
- () Windows - loose, broken glass, glaze 3(c)
- () Sash/Frames - broken, missing, worn 3(c)
- () Floor - loose, worn, dam., buckled 3(b)
- () Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
- () Counter/Stor. Space Yes No
- () Sink - chipped, cracked, leaks 6(d)
- () Range - improper stack, flue, vent 3(e)
- () Refrigerator Space Yes No
- () Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
- () Electrical (a)
- () Sanitation (a)

CODE

BATHROOM

- () Plaster - L, C, M - Ceiling/Walls 3(b)
- () Window - loose, broken glass, glaze 3(c)
- () Sash/Frames - broken, missing, worn 3(c)
- () Floor - loose, worn, dam., buckled 3(b)
- () Door - knob/lk - missing - Panels/Frames dam. 3(b)
- () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
- () Lavatory - chipped, crkd, leaks, trap leaks 6(d)
- () Bathtub/Shower - leaks cross connection 6(d)
- () Ventilation Yes No 7
- () Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
- () Electrical (b)
- () Sanitation (b)

CODE

LIVING ROOM

- () Plaster - L, C, M, - Ceiling/Walls 3(b)
- () Windows - loose, broken, glaze 3(c)
- () Sash/Frames - broken, missing, worn 3(c)
- () Floor - loose, worn, damaged 3(b)
- () Door - knob/lk - missing - Panels/Frames dam. 3(b)
- () Electrical (c)
- () Sanitation (c)

CODE

DINING ROOM

- () Plaster - L, C, M - Ceiling/Walls 3(b)
- () Windows - loose, broken, glaze 3(c)
- () Sash/Frames - broken, missing, worn 3(c)
- () Floor - loose, worn, damaged 3(b)
- () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
- () Electrical (d)
- () Sanitation (d)

CODE

Bedrooms and/or other rooms

										Code	
										() Plaster - L, C, M - Ceiling/Walls	3(b)
										() Windows - loose, broken, glaze	3(c)
										() Sash/Frames - broken, missing, worn	3(c)
										() Floors - loose, worn, damaged	3(b)
										() Door - knobs/lk - missing - Panels/Frames dam.	3(b)
										() Electrical (e)	
										() Sanitation (e)	
										() Clothes Closet Yes No	

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

INS Smoke Detector

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

INSP FORM NO.

TENANTS NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLRRM.

Child Un.iG Child 1-6 + Lead Survey - Results Rent Rent Code Furn Hot Water Dual Egrs. Ck'ng. Heat Lav. Bath Flush

3rd 2A 3 FE PL PB PF

KITCHEN	CODE	BATH ROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	3(b)	() Plaster - L, C, M - Ceiling/Walls	3(b)
() Windows - loose, broken glass, glaze	3(c)	() Window - loose, broken glass, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)	() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, dam., buckled	3(b)	() Floor - loose, worn, dam., buckled	3(b)
() Doors - Knob/lk - missing - Panels/Frames dam.	3(b)	() Door - knob/lk - missing - Panels/Frames dam.	3(b)
() Counter/Stor. Space Yes No	-	() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd.	6(d)
() Sink - chipped, cracked, leaks	6(d)	() Lavatory - chipped, crkd, leaks, trap leaks	6(d)
() Range - improper stack, flue, vent	3(e)	() Bathtub/Shower - leaks cross connection	6(d)
() Refrigerator Space Yes No	-	() Ventilation Yes No	7
() Plumbing (a) 6(a) Water Supply Hot Cold	6(c)	() Plumbing (b) 6(a) Water Supply Hot Cold	6(c)
() Electrical (a)		() Electrical (b)	
() Sanitation (a)		() Sanitation (b)	

LIVING ROOM	CODE	DINING ROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	3(b)	() Plaster - L, C, M - Ceiling/Walls	3(b)
() Windows - loose, broken, glaze	3(c)	() Windows - loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)	() Sash/Frames - broken, missing, worn	3(c)
() Floor - loose, worn, damaged	3(b)	() Floor - loose, worn, damaged	3(b)
() Door - knob/lk - missing - Panels/Frames dam.	3(b)	() Doors - Knobs/lk - missing, Panels/Frames dam.	3(b)
() Electrical (c)		() Electrical (d)	
() Sanitation (c)		() Sanitation (d)	

Bedrooms and/or other rooms	Code
() Plaster - L, C, M - Ceiling/Walls	3(b)
() Windows - Loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floors - loose, worn, damaged	3(b)
() Door - knobs/lk - missing - Panels/Frames dam.	3(b)
() Electrical (e)	
() Sanitation (e)	

Plumbing Electrical Sanitation - Vermin O R

REMARKS: HAS Smoke Detector



CITY OF PORTLAND

JOSEPH E. GRAY, JR.
DIRECTOR OF PLANNING
AND URBAN DEVELOPMENT

March 25, 1982

Mr. Frank Morang
235 Brackett Street
Portland, Maine 04102

DU: 13

Re: 101 Danforth St. 44-F-3 WE

The Housing Inspections Division of the Department of Planning & Urban Development has recently completed an overall inspection of your property.

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

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

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

Sincerely yours,
Joseph E. Gray, Jr., Director of
Planning & Urban Development

By Lyle D. Noyes / BM
Lyle D. Noyes
Inspection Services Division

Mary Schmuckal
Code Enforcement Officer - Schmuckal (3)

Jmr

City of Portland

NEIGHBORHOOD CONSERVATION
Check Off Sheet
STRUCTURE INSPECTION SCHEUDLE

Housing Inspection Division

1) Insp. Name Schneid

2) Insp. Date <u>3-24-82</u>	3) Insp. Type	4) Proj. Code	5) Assr's: Chart <u>44</u>	6) Bl.	7) Lot <u>3</u>	8) Census: Tract	9) Blk.	10) Insp.	11) Form No.	
12) Hous. No. <u>101</u>	13) Sec. H. No.	14) Suff.	15) Direct	16) Street Name <u>Denison</u>			17) St. Design.			
18) Owner or Agent: <u>FRANK MORNING</u>							19) Status	20) Bldg's Rat. <u>1</u>		
21) Address: <u>255 Brackett St</u>							22) City and State: <u>Portland</u> Zip Code			

23) D. Units <u>13</u>	24) Occ. D. U.'s	25) Rm Units	26) Occ. R. U.'s	27) No. Occupants	28) Com'l U.	29) Bldg. Type	30) Stories <u>4</u>	31) Const. Mat. <u>Brick</u>	32) O. B's
33) C. H.	34) Pnc.	35) Zoned For	36) Actual Land Use	37) D. D.	38) Lks. Ad. Bth. Fac.	39) Disp.	40) Closing Date		

EXTERIOR - Structure		Cd. Viol.	INTERIOR - Structure		Cd. Viol.
Foundation	EX/FO	3a	Light	LI	8
Walls	EX/WA	3a	Elec. Wiring	EW	8e
Roof	RO	3a	Floors	FL	3b
Perch	PO	3d	Walls	IN/WA	3b
Stairs	EX/SR	3d	Ceilings	CE	3b
Steps	SP	3d	Windows	IN/WI	3c
Doors	DO	3c	Airshafts	AS	3c
Windows	EX/WI	3c	Roof Rafters	ROR	3a
Eaves	EA	3a	Sanitation	SAN	4e
Trim	TR	3a	Stairways	IN/SRW	3d
Chimney	EX/CH	3e	Stair Treads	SRT	3d
Gutters	GU	3a	Wastelines	WSL	6c
Roof Drains	RD	3a	Supply Lines	SUL	6c
Bulkhead	BU	3d	Stacks	ST	3e
Outbuildings	GR - SH	4e	Flues	FU	3e
Yard	YA		Vents	VE	3e
Garbage	GA	4d	Chimney	IN/Ch	3e
Rubbish	RU	4f	Heating Equip. Furnace - FU	Spaceheater - SPH	9c
Containers	CO	4d	Bsmt. Sanitation Litter - LI	Debris - DE	4b
Drainage	DR	3a	Dampness - DM		3a
Infestation	IN-CR-FL	4e	Lighting	BS/LI	8c
Rats	RA	4e	Elec. Panel	EL/PA	8e
Other		4e	Stairs	BS/SR	3d
Fire Escape	FE	10	Foundation	IN/FO	3a
Dual Egress	DE	10	Floor Joists	FL/JO	3a
Driveways	DW		Carrying Timbers	CA/TI	3a
Walks	WA		Sills	SI	3a
Other			Bsmt. D. U. Conforms BDU		5f

Remarks on reverse side

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3-24-52

INSP

FORM NO.

TENANTS NAME

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Loc. #	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
									14A		3			

- KITCHEN**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - () Counter/Stor. Space Yes No
 - () Sink - chipped, cracked, leaks 6(d)
 - () Range - improper stack, flue, vent 3(e)
 - () Refrigerator Space Yes No
 - () Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
 - () Electrical (a)
 - () Sanitation (a)

- BATHROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Window - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
 - () Lavatory - chipped, crkd, leaks, trap leaks 6(d)
 - () Bathtub/Shower - leaks cross connection 6(d)
 - () Ventilation Yes No 7
 - () Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
 - () Electrical (b)
 - () Sanitation (b)

- LIVING ROOM**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Electrical (c)
 - () Sanitation (c)

- DINING ROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - () Electrical (d)
 - () Sanitation (d)

Bedrooms and/or other rooms

Code
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - Loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floors - loose, worn, damaged 3(b)
() Door - knobs/lk - missing - Panels/Frames dam. 3(b)
() Electrical (e)
() Sanitation (e)
() Clothes Closet Yes No

Plumbing Electrical Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3-28-87

INSP

FORM NO.

TENANTS NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLRRM.

Child Un.10 Child 1-6 + Lead Survey - Results Rent Rent Code Furn Hot Water Dual Egrs. Ck'ng. Heat Lav. Bath Flush

KITCHEN CODE BATHROOM CODE
() Plaster - L, C, M, - Ceiling/Walls 3(b) () Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - loose, broken glass, glaze 3(c) () Window - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c) () Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b) () Floor - loose, worn, dam., buckled 3(b)
() Doors - Knob/lk - missing - Panels/Frames dam. 3(b) () Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Counter/Svor. Space Yes No - () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
() Sink - chipped, cracked, leaks 6(d) () Lavatory - chipped, crkd, leaks, trap leaks 6(d)
() Range - improper stack, flue, vent 3(e) () Bathtub/Shower - leaks cross connection 6(d)
() Refrigerator Space Yes No - () Ventilation Yes No 7
() Plumbing (a) 6(a) Water Supply Hot Cold 6(c) () Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
() Electrical (a) () Electrical (b)
() Sanitation (a) () Sanitation (b)

LIVING ROOM CODE DINING ROOM CODE
() Plaster - L, C, M, - Ceiling/Walls 3(b) () Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c) () Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c) () Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b) () Floor - loose, worn, damaged 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b) () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
() Electrical (c) () Electrical (d)
() Sanitation (c) () Sanitation (d)

Bedrooms and/or other rooms Code
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - Loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floors - loose, worn, damaged 3(b)
() Door - knobs/lk - missing - Panels/Frames dam. 3(b)
() Electrical (e)
() Sanitation (e)
() Clothes Closet Yes No

Plumbing Electrical Sanitation - Vermin 0 R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3-31-87

INSP

FORM NO.

TENANTS NAME

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL SLRRM

Child Un.10 Child 1-6 + Lead Survey - Results Rent Rent Code Furn Hot Water Dual Eqrs. Ck'ng. Heat Lav. Bath Flush

KITCHEN
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
() Counter/Stor. Space Yes No
() Sink - chipped, cracked, leaks 6(d)
() Range - improper stack, flue, vent 3(e)
() Refrigerator Space Yes No
() Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
() Electrical (a)
() Sanitation (a)

BATHROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Window - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
() Lavatory - chipped, crkd, leaks, trap leaks 6(d)
() Bathtub/Shower - leaks cross connection 6(d)
() Ventilation Yes No 7
() Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
() Electrical (b)
() Sanitation (b)

LIVING ROOM
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Electrical (c)
() Sanitation (c)

DINING ROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
() Electrical (d)
() Sanitation (d)

Bedrooms and/or other rooms
Code
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - Loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floors - loose, worn, damaged 3(b)
() Door - knobs/lk - missing - Panels/Frames dam. 3(b)
() Electrical (e)
() Sanitation (e)
() Clothes Closet Yes No

Plumbing Electrical Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3-21-97

INSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
										1st	BEAN					

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush

- KITCHEN**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - () Counter/Stor. Space Yes ___ No ___ -
 - () Sink - chipped, cracked, leaks 6(d)
 - () Range - improper stack, flue, vent 3(e)
 - () Refrigerator Space Yes ___ No ___ -
 - () Plumbing (a) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - () Electrical (a)
 - () Sanitation (a)

- BATHROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Window - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
 - () Lavatory - chipped, crkd, leaks, trap leak. 6(d)
 - () Bathtub/Shower - leaks cross connection 6(d)
 - () Ventilation Yes ___ No ___ 7
 - () Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - () Electrical (b)
 - () Sanitation (b)

- LIVING ROOM**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Electrical (c)
 - () Sanitation (c)

- DINING ROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - () Electrical (d)
 - () Sanitation (d)

Bedrooms and/or other rooms										Code		
										() Plaster - L, C, M - Ceiling/Walls	3(b)	
										() Windows - Loose, broken, glaze	3(c)	
										() Sash/Frames - broken, missing, worn	3(c)	
										() Floors - loose, worn, damaged	3(b)	
										() Door - knobs/lk - missing - Panels/Frames dam.	3(b)	
										() Electrical (e)		
										() Sanitation (e)		
										() Clothes Closet Yes ___ No ___		

Plumbing _____ Electrical _____ Sanitation - Vermin O R _____

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3 1 2 4 2 -

INSP

FORM NO.

TENANTS NAME

FLR.# LOCATION RMG. TP. #RMS. #PEO. #ALL'D SLRRM.

Child Un. 10	Child 1 - 6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
--------------	-------------	-------------------------	------	-----------	------	-----------	------------	--------	------	------	------	-------

KITCHEN

- Plaster - L, C, M, - Ceiling/Walls 3(b)
- Windows - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
- Counter/Stor. Space Yes ___ No ___ -
- Sink - chipped, cracked, leaks 6(d)
- Range - improper stack, flue, vent 3(e)
- Refrigerator Space res. No ___ -
- Plumbing (a) 6(d) Water Supply Hot ___ Cold ___ 6(c)
- Electrical (a)
- Sanitation (a)

BATHROOM

- Plaster - L, C, M - Ceiling/Walls 3(b)
- Window - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
- Lavatory - chipped, crkd, leaks, trap leaks 6(d)
- Bathtub/Shower - leaks cross connection 6(d)
- Ventilation Yes ___ No ___ 7
- Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
- Electrical (b)
- Sanitation (b)

LIVING ROOM

- Plaster - L, C, M, - Ceiling/Walls 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Electrical (c)
- Sanitation (c)

DINING ROOM

- Plaster - L, C, M - Ceiling/Walls 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
- Electrical (d)
- Sanitation (d)

Bedrooms and/or other rooms

												Code
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls 3(b)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Windows - loose, broken, glaze 3(c)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sash/Frames - broken, missing, worn 3(c)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Floors - loose, worn, damaged 3(b)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam. 3(b)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Electrical (e)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sanitation (e)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Clothes Closet Yes ___ No ___

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

8-24-71

TENANT'S NAME

INSP

FORM NO.

Child Un. 10	Child 1-6	Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush

K. TCHEN

- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
- Windows - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
- Counter/Stor. Space Yes ___ No ___
- Sink - chipped, cracked, leaks 6(d)
- Range - improper stack, flue, vent 3(e)
- Refrigerator Space Yes ___ No ___
- Plumbing (a) 6(a) Water Supply Hot ___ Cold ___
- Electrical (a) 6(c)
- Sanitation (a)

- BATHROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
- Window - loose, broken glass, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, dam., buckled 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
- Lavatory - chipped, crkd, leaks, trap leaks 6(d)
- Bathtub/Shower - leaks cross connection 6(d)
- Ventilation Yes ___ No ___ 7
- Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
- Electrical (b)
- Sanitation (b)

LIVING ROOM

- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Door - knob/lk - missing - Panels/Frames dam. 3(b)
- Electrical (c)
- Sanitation (c)

- DINING ROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
- Windows - loose, broken, glaze 3(c)
- Sash/Frames - broken, missing, worn 3(c)
- Floor - loose, worn, damaged 3(b)
- Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
- Electrical (d)
- Sanitation (d)

Bedrooms and/ other rooms

Code
<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls 3(b)
<input type="checkbox"/> Windows - Loose, broken, glaze 3(c)
<input type="checkbox"/> Sash/Frames - broken, missing, worn 3(c)
<input type="checkbox"/> Floors - loose, worn, damaged 3(b)
<input type="checkbox"/> Door - knob/lk - missing - Panels/Frames dam. 3(b)
<input type="checkbox"/> Electrical (e)
<input type="checkbox"/> Sanitation (e)
<input type="checkbox"/> Clothes Closet Yes ___ No ___

Plumbing

Electrical

Sanitation - Vermin 0 R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

3/14/01

INSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn.	tot Water	Dual Ears.	Ck'ng.	Heat	Lav.	Bath	Flush				

- KITCHEN**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - () Counter/Stor. Space Yes No
 - () Sink - chipped, cracked, leaks 6(d)
 - () Range - improper stack, flue, vent 3(e)
 - () Refrigerator Space Yes No
 - () Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
 - () Electrical (a)
 - () Sanitation (a)

- BATHROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Window - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
 - () Lavatory - chipped, crkd, leaks, trap leaks 6(d)
 - () Bathtub/shower - leaks cross connection 6(d)
 - () Ventilation Yes No 7
 - () Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
 - () Electrical (b)
 - () Sanitation (b)

- LIVING ROOM**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Electrical (c)
 - () Sanitation (c)

- DINING ROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - () Electrical (d)
 - () Sanitation (d)

Bedrooms and/or other rooms	Code
() Plaster - L, C, M - Ceiling/Walls	3(b)
() Windows - Loose, broken, glaze	3(c)
() Sash/Frames - broken, missing, worn	3(c)
() Floors - loose, worn, damaged	3(b)
() Door - knobs/lk - missing - Panels/Frames dam.	3(b)
() Electrical (e)	
() Sanitation (e)	
() Clothes Closet Yes <u>No</u>	

Plumbing _____ Electrical _____ Sanitation - Vermin 0 R _____

REMARKS: _____

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

INSP

FORM NO.

TENANTS NAME												FLR.#	LOCATION	RMG. TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
												2D	2nd					

Child Un. 10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush

- KITCHEN**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - () Counter/Stor. Space Yes ___ No ___ -
 - () Sink - chipped, cracked, leaks 6(d)
 - () Range - improper stack, flue, vent 3(e)
 - () Refrigerator Space Yes ___ No ___ -
 - () Plumbing (a) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - () Electrical (a)
 - () Sanitation (a)

- BATHROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Window - loose, broken glass, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, dam., buckled 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 3(b)
 - () Lavatory - chipped, crkd, leaks, trap leaks -
 - () Bathtub/Snower - leaks cross connection 6(d)
 - () Ventilation Yes ___ No ___ 7
 - () Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ 6(c)
 - () Electrical (b)
 - () Sanitation (b)

- LIVING ROOM**
- () Plaster - L, C, M, - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - () Electrical (c)
 - () Sanitation (c)

- DINING ROOM**
- () Plaster - L, C, M - Ceiling/Walls 3(b)
 - () Windows - loose, broken, glaze 3(c)
 - () Sash/Frames - broken, missing, worn 3(c)
 - () Floor - loose, worn, damaged 3(b)
 - () Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - () Electrical (d)
 - () Sanitation (d)

Bedrooms and/or other rooms												Code
												() Plaster - L, C, M - Ceiling/Walls 3(b)
												() Windows - Loose, broken, glaze 3(c)
												() Sash/Frames - broken, missing, worn 3(c)
												() Floors - loose, worn, damaged 3(b)
												() Door - knobs/lk - missing - Panels/Frames dam. 3(b)
												() Electrical (e)
												() Sanitation (e)
												() Clothes Closet Yes ___ No ___

Plumbing	Electrical	Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-21-67

INSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
										42	1212					

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ing.	Heat	Lav.	Bath	Flush

- KITCHEN**
- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
 - Windows - loose, broken glass, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, dam., buckled 3(b)
 - Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
 - Counter/Stor. Space Yes No
 - Sink - chipped, cracked, leaks 6(d)
 - Range - improper stack, flue, vent 3(e)
 - Refrigerator Space Yes No
 - Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
 - Electrical (a)
 - Sanitation (a)

- BATHROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
 - Window - loose, broken glass, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, dam., buckled 3(b)
 - Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
 - Lavatory - chipped, crkd, leaks, trap leaks 6(d)
 - Bathtub/Shower - leaks cross connection 6(d)
 - Ventilation Yes No 7
 - Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
 - Electrical (b)
 - Sanitation (b)

- LIVING ROOM**
- Plaster - L, C, M, - Ceiling/Walls CODE 3(b)
 - Windows - loose, broken, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, damaged 3(b)
 - Door - knob/lk - missing - Panels/Frames dam. 3(b)
 - Electrical (c)
 - Sanitation (c)

- DINING ROOM**
- Plaster - L, C, M - Ceiling/Walls CODE 3(b)
 - Window - loose, broken, glaze 3(c)
 - Sash/Frames - broken, missing, worn 3(c)
 - Floor - loose, worn, damaged 3(b)
 - Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
 - Electrical (d)
 - Sanitation (d)

Bedrooms and/or other rooms

										Code
										<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls 3(b)
										<input type="checkbox"/> Windows - Loose, broken, glaze 3(c)
										<input type="checkbox"/> Sash/Frames - broken, missing, worn 3(c)
										<input type="checkbox"/> Floors - loose, worn, damaged 3(b)
										<input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam. 3(b)
										<input type="checkbox"/> Electrical (e)
										<input type="checkbox"/> Sanitation (e)
										<input type="checkbox"/> Clothes Closet Yes No

Plumbing	Electrical	Sanitation - Vermin O R
----------	------------	-------------------------

REMARKS:

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

INSP

FORM NO.

TENANTS NAME										FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLR.RM.
Child Un. 10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Eqrs.	Ck'ng.	Heat	Lav.	Bath	Flush				
KITCHEN						CODE	BATHROOM						CODE			
<input type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls <input type="checkbox"/> Windows - loose, broken glass, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, dam., buckled <input type="checkbox"/> Doors - Knob/lk - missing - Panels/Frames dam. <input type="checkbox"/> Counter/Stor. Space Yes ___ No ___ <input type="checkbox"/> Sink - chipped, cracked, leaks <input type="checkbox"/> Range - improper stack, flue, vent <input type="checkbox"/> Refrigerator Space Yes ___ No ___ <input type="checkbox"/> Plumbing (a) 6(a) Water Supply Hot ___ Cold ___ <input type="checkbox"/> Electrical (a) <input type="checkbox"/> Sanitation (a)						3(b) 3(c) 3(c) 3(b) 3(b) - 6(d) 3(e) - 6(c)	<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls <input type="checkbox"/> Window - loose, broken glass, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, dam., buckled <input type="checkbox"/> Door - knob/lk - missing - Panels/Frames dam. <input type="checkbox"/> Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. <input type="checkbox"/> Lavatory - chipped, crkd, leaks, trap leaks <input type="checkbox"/> Bathtub/Shower - leaks cross connection <input type="checkbox"/> Ventilation Yes ___ No ___ <input type="checkbox"/> Plumbing (b) 6(a) Water Supply Hot ___ Cold ___ <input type="checkbox"/> Electrical (b) <input type="checkbox"/> Sanitation (b)						3(b) 3(c) 3(c) 3(b) 3(b) 6(d) 6(d) 6(d) 7 6(c)			
LIVING ROOM						CODE	DINING ROOM						CODE			
<input type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls <input type="checkbox"/> Windows - loose, broken, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, damaged <input type="checkbox"/> Door - knob/lk - missing - Panels/Frames dam. <input type="checkbox"/> Electrical (c) <input type="checkbox"/> Sanitation (c)						3(b) 3(c) 3(c) 3(b) 3(b)	<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls <input type="checkbox"/> Windows - loose, broken, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, damaged <input type="checkbox"/> Doors - Knobs/lk - missing, Panels/Frames dam. <input type="checkbox"/> Electrical (d) <input type="checkbox"/> Sanitation (d)						3(b) 3(c) 3(c) 3(b) 3(b)			
Bedrooms and/or other rooms													Code			
							<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls <input type="checkbox"/> Windows - Loose, broken, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floors - loose, worn, damaged <input type="checkbox"/> Door - knobs/lk - missing - Panels/Frames dam. <input type="checkbox"/> Electrical (e) <input type="checkbox"/> Sanitation (e)						3(b) 3(c) 3(c) 3(b) 3(b)			
Plumbing						Electrical						Sanitation - Vermin O R				
REMARKS: <i>Plumbing work completed</i>																

DATE

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-14-82

INSP

FORM NO.

TENANTS NAME

FLR. # LOCATION RMG. TP. #RMS. #PEO. #ALL'D SLRRM.

Child Un. 10 Child 1-6 + Lead Survey - Results Rent Rent Code Furn Hot Water Dual Egrs. Ck'ng. Heat Lav. Bath Flush

KITCHEN
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
() Counter/Stor. Space Yes No
() Sink - chipped, cracked, leaks 6(d)
() Range - improper stack, flue, vent 3(e)
() Refrigerator Space Yes No
() Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
() Electrical (a)
() Sanitation (a)

BATHROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Window - loose, broken glass, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, dam., buckled 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
() Lavatory - chipped, crkd, leaks, trap leaks 6(d)
() Bathtub/Shower - leaks cross connection 6(d)
() Ventilation Yes No 7
() Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
() Electrical (b)
() Sanitation (b)

LIVING ROOM
() Plaster - L, C, M, - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Door - knob/lk - missing - Panels/Frames dam. 3(b)
() Electrical (c)
() Sanitation (c)

DINING ROOM
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floor - loose, worn, damaged 3(b)
() Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
() Electrical (d)
() Sanitation (d)

Bedrooms and/or other rooms:
Code
() Plaster - L, C, M - Ceiling/Walls 3(b)
() Windows - Loose, broken, glaze 3(c)
() Sash/Frames - broken, missing, worn 3(c)
() Floors - loose, worn, damaged 3(b)
() Door - knobs/lk - missing - Panels/Frames dam. 3(b)
() Electrical (e)
() Sanitation (e)

() Clothes Closet Yes No
Sanitation - Vermin O R

Plumbing Electrical

REMARKS: *no lead paint found*

DATE

REQUEST FOR SERVICE

PORTLAND HEALTH DEPARTMENT

DATE RECEIVED	12-14-81	BY	Joyce	DISTRICT	St. Vincent
REQUEST BY	NAME	Maurice Hartley - 773-0842			
	ADDRESS	101 Danforth St. - 4TH FL. - apt 12			
OWNER	NAME	Frank Morang - 772-2486 (circled)			
	ADDRESS	101 Danforth St. - 4TH FL. - apt 12			
CONDITIONS	insufficient heat				
<div style="border: 1px solid black; border-radius: 50%; padding: 5px; display: inline-block;"> CORRECTED VERBAL ORDER </div>					
Call tomorrow morning between 8:00 A.M. & 9:00 A.M.					
COMMENTS	12/15/81 left at 9:00 AM. The unit is a gas furnace. The unit is not working. The unit is not working. The unit is not working.				
SPECIAL INSTRUCTIONS	actual temp. at night is 60 degrees. The unit is not working. The unit is not working.				
DIVISION	SANITATION	HOUSING	NURSING	C1517	
PRIORITY	ROUTINE	SPECIAL	BY		
	URGENT	REPORT TO	DATE		

of the time, I have to go to an accident
light in the area to get in.
12/15/21 9:35 owner called and said he knew the tenant that
was complaining - the tenant was served an eviction notice
by Sheriff Stanley for non-payment and the tenant is supposed to be out
today. Tenant is in the area on his side, etc.
Owner said he has to get the tenant to get him
know if there are any other times at any time, they'll
have his number. He said he can't talk at all to be
sure!

REQUEST FOR SERVICE

PORTLAND HEALTH DEPARTMENT

DATE RECEIVED	2-19-88	BY	Bm	DISTRICT	Seary
REQUEST BY	NAME	Tenants			
	ADDRESS	101 Danforth			
OWNER	NAME	Carol Leighton		774-4167	
	ADDRESS	85 Park Street			
CONDITIONS	ADDRESS	101 Danforth interi bldg.			
<p>Hot water only 11-2 and 4-7. Tenants say owner contacted but refuses to provide at other times; and has posted notice in halls to that effect.</p>					
COMMENTS	<p>Contacted owner to advise of problem. Will contact within 2 days. Hot water tank repaired. Also contacted (3-7-88)</p>				
SPECIAL INSTRUCTIONS	<p>J-corrected</p>				
DIVISION	SANITATION		HOUSING		NURSING
PRIORITY	ROUTINE		SPECIAL		BY
	URGENT		REPORT TO		DATE
					3/2/88

CERTIFICATE
OF
COMPLIANCE

CITY OF PORTLAND
Department of Health & Social Services
Housing Inspections Division
Telephone: 775-5451 - Extension 448

June 21, 1976 ✓

Mrs. Carol Leighton
278 State Street
Portland, Maine 04101

Re: Premises located at 101 Danforth Street, Portland, Maine 44-E-3 NDP

Dear Mrs. Leighton:

A re-inspection of the premises noted above was made on June 18, 1976
by Housing Inspector Gough.

This is to certify that you have complied with our request to correct the violation of the
Municipal Codes relating to housing conditions as described in our "Notice of Housing
Conditions" dated December 13, 1974.

Thank you for your cooperation and your efforts to help us maintain decent, safe and
sanitary housing for all Portland residents.

In order to aid in the preservation of Portland's existing
housing inventory, it shall be the policy of this department
to inspect each residential building at least once every five
years. Although a property is subject to re-inspection at any
time during the said five year period, the next regular
inspection of this property is scheduled for June 1981.

Sincerely yours,

Director
Health & Social Services

By [Signature]
Chief of Housing Inspections

Inspector [Signature]

M. Gough

/88

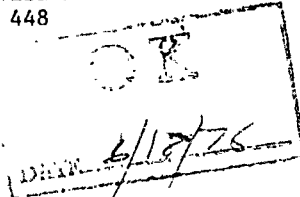
NOTICE OF HOUSING CONDITIONS

DU 15

CITY OF PORTLAND
Health Department - Housing Division
Telephone 775-5451 - Extension 448

Carol Leighton
278 State Street
Portland, Maine

Chart-Bl.-Lot: 44-F-3
Location: 101 Danforth Street
Project: NDP 3
Issued: December 13, 1974
Expires: February 13, 1975



Dear Ms. Leighton:

An examination was made of the premises at 101 Danforth Street Portland, Maine, by Housing Inspector Gough. Violations of Municipal Codes relating to housing conditions were found as described in detail below.

In accordance with provisions of the above mentioned Codes, you are requested to correct these defects on or before February 13, 1975. You may contact this office to arrange a satisfactory repair schedule if you are unable to make such repairs within the specified time. We will assume the repairs to be in progress if we do not hear from you within ten days from this date and, on re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with Code Standards.

Your cooperation will help this Department in its goal to maintain all Portland residents in decent, safe and sanitary housing.

Very truly yours,

David Bittenbender
Health Director

Inspector

H. Gough

By

Chief of Housing Inspections

EXISTING VIOLATIONS OF CHAPTER 307 - "MINIMUM STANDARDS FOR HOUSING"

Section(s)

- | | |
|---|----|
| 1. Replace the loose plaster in the second floor front hall ceiling. | 3b |
| 2. Repair the loose clapboards on the right rear of shed. | 3a |
| 3. Repair the loose plaster on first floor front hall ceiling. | 3b |
| 4. Replace the broken treads on the stairway of the first floor rear hall. | 3d |
| 5. Repair the broken panel on the first floor left rear shed door. | |
| 6. Determine the reason and remedy the condition causing the rear shed to separate from the main structure. | 3a |
| 7. Replace the missing plaster on ceiling of third floor front hall. | 3b |
| 8. Replace the missing asphalt siding on fourth floor left rear wall. | 3a |
| 9. Make the left rear exterior door weathertight. | 3c |
| 10. Point up the foundation where needed - overall. | 3a |
| 11. Replace the rotted and broken treads on the first floor left porch. | 3d |
| 12. Provide adequate lighting on first, second and third floor rear halls. | 8d |
| First Floor - Left | |
| 13. Install a lavatory trap in the bathroom. | 6d |
| First Floor - Left Rear | |
| 14. Replace the rotted sash in kitchen window. | 3c |
| 15. Repair the broken frame in kitchen door. | 3c |
| 16. Repair the loose plaster in the front bedroom ceiling. | 3b |
| 17. Repair the loose plaster in the rear bedroom ceiling. | 3b |
| 18. Repair the loose sash in the front bedroom window. | 3c |
| 19. Repair the broken closet door in the rear bedroom. | 3c |
- continued

101 Danforth Street - continued

<u>First Floor - Left Rear continued</u>		
20.	Repair the loose sash in rear bedroom window.	3c
<u>First Floor - Right</u>		
21.	Repair the loose plaster in ceiling and walls of living room.	3b
22.	Repair the loose sash in window of living room.	3c
<u>Second Floor - Left Front</u>		
23.	Repair the loose tile in living room ceiling.	3b
24.	Repair the loose sash in living room window.	3c
*25.	Repair the leaking radiator in living room.	9c
<u>Second Floor - Right Front</u>		
26.	Repair the loose sash in windows of living room, kitchen and bathroom.	3c
27.	Replace the missing putty in window of kitchen.	3c
28.	Repair the loose plaster in ceiling of kitchen.	3b
<u>Second Floor - Rear</u>		
29.	Remove the peeling paint in kitchen ceiling.	3b
30.	Repair the loose sash in windows of kitchen and living room.	3c
31.	Repair the loose sash in windows of rear bedroom.	3c
32.	Repair the loose plaster in ceiling of bathroom.	3b
33.	Replace the missing putty in window of living room.	3c
34.	Repair the loose sash in rear bedroom window.	3c
<u>Third Floor - Left Front</u>		
35.	Install a 3-piece bathroom consisting of a toilet, bathtub or shower and a lavatory.	6a
36.	Repair the loose sash in the windows of kitchen and living room.	3c
<u>Third Floor - Right Front</u>		
37.	Repair the loose sash in windows of kitchen, bathroom and living room.	3c
38.	Replace the missing putty in windows of living room and bathroom.	3c
*39.	Repair inoperative light in ceiling of living room.	8a
<u>Third Floor - Rear</u>		
40.	Install a 3-piece bathroom consisting of a toilet, lavatory and a bathtub or shower.	6a
41.	Repair the loose sashes in the windows of kitchen and living room.	3c
<u>Fourth Floor - Left Front</u>		
42.	Install a 3-piece bathroom consisting of a bathtub or shower, toilet and a lavatory.	6a
43.	Repair the loose sash in the window of living room.	3c
44.	Replace the missing putty in the window of living room.	3c
<u>Fourth Floor - Right Front</u>		
45.	Install a 3-piece bathroom consisting of a bathtub or shower, lavatory and toilet.	6a
46.	Replace the missing plaster in the wall of kitchen.	3b
47.	Repair the loose sash in the living room window.	3c
48.	Replace the missing putty in the living room window.	3c
<u>Fourth Floor - Left Middle</u>		
49.	Install a 3-piece bathroom consisting of a bathtub or shower, lavatory and toilet.	8a
50.	Repair the loose sash in living room window.	3c
51.	Replace the missing putty in the living room window.	3c
<u>Fourth Floor - Middle Right</u>		
52.	Install a 3-piece bathroom consisting of a bathtub or shower, lavatory and toilet.	6a
53.	Repair the loose sash in the living room window.	3c
54.	Replace the missing putty in the living room window.	3c
<u>Fourth Floor - Rear</u>		
55.	Install a 3-piece bathroom consisting of a bathtub or shower, lavatory and toilet.	6a
56.	Repair the loose sash in the kitchen and living room window.	3c
57.	Repair the loose sash in the rear bedroom window.	3c
58.	Replace the rotted sash in the windows of living room and kitchen.	3c
59.	Replace the missing putty in living room window.	3c
60.	Repair the loose sash in the living room window.	3c
61.	Repair the loose floor boards in the rear bedroom.	3b

WHEN MAKING YOUR REPAIRS FIRST PRIOR TO BE GIVEN TO THOSE ITEMS WITH ASTERISKS AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH AND SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

April 20, 1976

Ms. Carol Leighton
278 State Street
Portland, Maine 04101

Re: 101 Danforth Street, Portland, Maine 44-F-3
4th Floor Rear

Dear Ms. Leighton:

This is to inform you, as owner or agent of the property located at
101 Danforth Street, Portland, Maine, that we have released the
4th Floor Rear from posting.

Therefore, you may rent the apartment to others or occupy it yourself.
If any additional information is desired, visit or call this office.

Sincerely yours,
David C. Bittenbender
Health Director


Lyle D. Noyes
Chief of Housing Inspections

Inspector ME

M. Gough

LDH:rl

January 25, 1974

Mrs. Carol Leighton
RFD #1
Carlbou, Maine

Carol Leighton
Re: 101 Danforth Street
First Floor Apartment Rear
Apartment #3

Dear Mrs. Leighton:

This is to inform you, as owner or agent of the property located at 101 Danforth Street, Portland, Maine, that we have released the first floor rear apartment #3 from posting.

Therefore, you may rent the apartment to others or occupy it yourself.

If any additional information is desired, visit or call this office.

Sincerely,

Lyle D. Moyes
Lyle D. Moyes
Chief of Housing Inspections

LDN/cw

Inspector _____

March 3, 1972

Mrs. Carol B. Leighton
101 Vaughan Street
Portland, Maine 04102

Relinquished
Re: 101 Danforth Street

Dear Mrs. Leighton:

As owner or agent of the property located at 101 Danforth Street, Portland, Maine, you are hereby notified that as the result of a recent inspection the first floor rear apartment #3 and the third floor rear apartment # 15 are hereby declared unfit for human occupancy.

The above-mentioned apartments are to be kept vacant so long as the following conditions continue to exist thereon:

- a. The property is damaged, decayed, deteriorated, unsanitary and unsafe (or vermin-infested) in such a manner as to create a serious hazard to the health, safety, and general welfare of the occupants or the public.

Therefore, you will not occupy, permit anyone to occupy, or rent the above mentioned without the written consent of the Health Officer or his agent, certifying that the conditions have been corrected.

Sincerely,

Lyle D. Noyes
Lyle D. Noyes
Chief of Housing Inspections

LDN:gh

Inspector *[Signature]*

REINSPECTION RECOMMENDATIONS

INSPECTOR MG

LOCATION 1110 1st St
 PROJECT 1110
 OWNER C. J. Hamilton

NOTICE OF HOUSING CONDITIONS		HEARING NOTICE		FINAL NOTICE	
Issued	Expired	Issued	Expired	Issued	Expired
12/10/74	2/3/75				

A reinspection was made of the above premises and I recommend the following action:

DATE 1-18-76	MG	ALL VIOLATIONS HAVE BEEN CORRECTED <input checked="" type="checkbox"/> Send "CERTIFICATE OF COMPLIANCE" <input checked="" type="checkbox"/> "POSTING RELEASE" <input type="checkbox"/>
4-27-76	MG	SATISFACTORY Rehabilitation in Progress Time Extended To <u>12/31/76</u> <u>AS PER 30 DAYS ON 4-27-76</u> Time Extended To _____ Time Extended To _____
		UNSATISFACTORY Progress Send "HEARING NOTICE" _____ "FINAL NOTICE" _____
		"NOTICE TO VACATE" _____ POST Entire _____ POST Dwelling Units _____
		UNSATISFACTORY Progress Request "LEGAL ACTION" Be Taken _____

INSPECTOR'S REMARKS: com. ok c/c

[Large handwritten scribble]

INSTRUCTIONS TO INSPECTOR: _____

Sheet #2

Idn:1971

REINSPECTION RECOMMENDATIONS

LOCATION 101 Dorchester ST
Project Gen
Owner Leighton

INSPECTOR ago

NOTICE OF HOUSING CONDITIONS		HEARING NOTICE		FINAL NOTICE	
Issued	Expired	Issued	Expired	Issued	Expired
<u>1-21-72</u>	<u>2-21-72</u>				

A reinspection was made of the above premises and I recommend the following action:

Date		ALL VIOLATIONS HAVE BEEN CORRECTED Send "CERTIFICATE OF COMPLIANCE" _____	"POSTING RELEASE" ^{1/2/74} <u>DV-H-3</u>
<u>12/19/73</u>	<u>MG</u>	SATISFACTORY Rehabilitation In Progress Time Extended To <u>1-21-74</u> <u>vestib</u>	
<u>1/22/74</u>		Time Extended To <u>(RE MEMO-DV 2-1-74 - THE 14TH OF ART # 15 FOR PROGRESS</u>	
		Time Extended To _____	
		UNSATISFACTORY Progress Send "HEARING NOTICE" _____	"FINAL NOTICE" _____
		"NOTICE TO VACATE" _____ POST Entire _____	
		POST Dwelling Units _____	
		UNSATISFACTORY Progress Request "LEGAL ACTION" Be Taken _____	
<u>12/13/73</u>	<u>ago</u>	INSPECTOR'S REMARKS: <u>Re. Carstairs on starting work today, gave her a list of violations arising from Carstairs' inspection. Left message with caretaker for summary call me.</u>	
<u>12/21/73</u>	<u>MG</u>	<u>cont. contact made, but Carstairs said work would be done in 3 wks. vestib. unit to 1-21-74</u>	
<u>1/22/74</u>	<u>MG</u>	<u>all work except ART # 15 which is still in progress on the 14TH -</u>	
<u>2/1/74</u>	<u>MG</u>	INSPECTION BY _____	S-TO-INSPECTOR: _____
<u>4/11</u>	<u>G</u>	<u>2 till</u>	<u>1 copy</u>
<u>10/2/74</u>	<u>MG</u>	<u>20</u>	<u>11/</u>

CERTIFICATE
OF
COMPLIANCE

DATE: January 17, 1984

DU: 12

CITY OF PORTLAND

Department of Planning & Urban Development
Housing Inspections Division
Telephone: 775-5451 - Extension 311 - 318

Mr. Thomas Conneen
640 Brighton Avenue
Portland, Maine 04102

Re: Premises located at 101 Danforth St. 44-F-3 NDP

Dear Mr. Conneen:

A re-inspection of the premises noted above was made on January 5, 1984
by Code Enforcement Officer Marge Schmuckal

This is to certify that you have complied with our request to correct the violation of
the Municipal Codes relating to housing conditions as described in our "Notice of Housing
Conditions" dated May 24, 1983.

Thank you for your cooperation and your efforts to help us maintain decent, safe and
sanitary housing for all Portland residents.

In order to aid in the preservation of Portland's existing housing
inventory, it shall be the policy of this department to inspect each
residential building at least once every five years. Although a
property is subject to re-inspection at any time during the said
five-year period, the next regular inspection of this property is
scheduled for January 1989.

Sincerely yours,

Joseph E. Gray, Jr., Director of
Planning and Urban Development

By Lyle D. Noyes
Lyle D. Noyes
Inspection Services Division

Marge Schmuckal
Code Enforcement Officer - Marge Schmuckal (3)

jmr

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

DU 12

Department of Planning & Urban Development
Inspections Services Division
Tel. 775-5451 - Ext. 311 - 318 - 319

Ch. 44 Blk. F Lot 3
Location: 101 Danforth St.

Mr. Thomas Conneen
640 Brighton Avenue
Portland, Maine 04102

Project: NCP-NDP
Issued: May 24, 1983
Expires: Aug. 24, 1983

Dear Mr. Conneen:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 101 Danforth Street, Portland, Maine by Code Enforcement Officer Marge Schmuckal. Violations of Chapter 307 of the Municipal Codes (Minimum Standards for Housing) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above mentioned Code, you are hereby ordered to correct those defects on or before August 24, 1983. 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 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 Code Standards.

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

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

Very truly yours,
Joseph E. Gray, Jr., Director of
Planning & Urban Development

Director, Services Division

Marge Schmuckal
Code Enforcement Officer - Marge Schmuckal

Attachments:

jmr