

10

DEERING STREET

46-D-12



CITY OF PORTLAND

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

Sept. 20, 1982

DU: 6

Mr. Ronell Harris
202 Commercial Street
Portland, Maine 04101

Re: 10 Deering St. 46-D-12 NCP-LONG.

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
Lyle D. Noyes
Inspection Services Division

Mark Leary
Code Enforcement Officer - Leary (5)

jmr

City of Portland

Health Department

Check Sheet

Housing Inspection Division

STRUCTURE INSPECTION SCHEDULE

1) Insp. Name M LEZAY

2) Insp. Date 9/20/72 3) Insp. Type NCP 4) Proj. Code LONG 5) Assr.'s: Ch. Stand (6) Bldg. Census: Tract D 9) Bldg. (10) Insp. (11) Form No.

12) House No. 10 13) Sec. H. No. 14) Suff. 15) Direct. #16 Deering 17) St. Design. Street

18) Owner or Agent: Mr. Ronald Hart 19) Status ABO 20) Bldg's Rat. 1

21) Address: 202 Commercial St Zip Code 04101

22) City and State: Portland, Maine

23) D. Units 10 24) Occ. D.U.'s 10 25) Rm. Units 10 26) Occ. R.U.s 10 27) No. Occupants 10 28) Com' LU. DE 29) Bldg. Type 3 30) Stories 3 31) Const. Mat. Brick 32) O.B.'s NA

33) C.H. YES 34) Pho. NO 35) Zoned For R-3 36) Actual Land Use Res 37) D.D. Yes No X 38) Lks. Ad. Bth. Fac. 39) Disp. 40) Closing Date

EXTERIOR - Structure		Cd. Vint.	INTERIOR - Structure		Cd. Vio
Foundation	EX/FO ✓	3a	Lighting	LI ✓	8
Walls	EX/WA ✓	3a	Elec. Wiring	EW ✓	8e
Roof	RO ✓	3a	Floors	FL ✓	3b
Porch	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 ✓	6d
Roof Drains	RD ✓	3a	Supply Lines	SUL ✓	6c
Bulkhead	BU ✓	3d	Stacks	ST ✓	3e
Outbuildings	GR - Sd ✓	4e	Flues	FU ✓	3e
Yard	YA ✓	4e	Vents	VE ✓	3e
Garbage	GA ✓	4d	Chimney	IN/CH ✓	3e
Rubbish	RU ✓	4d	Heating Equip. Furnace - FU	Spaceheater - SPH ✓	9c
Containers	CO ✓	4d	Bsmt. Sanitation Litter - LI	Debris - PE ✓	4b
Drainage	DR ✓	3a	Dameness - 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
Fences	FN ✓		Bsmt. D.U. Conforms	BDU ✓	5f

Remarks on reverse side

City of Portland

Housing Inspection Division

DWELLING UNIT SCHEDULE

INSP DATE

9 20 22

OK 1st Inspection

INSP

FORM NO.

FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
1	2	DU	3	1	4	1

TENANTS NAME							Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
GERTRUDE EASTON												NO	YES	YES	LE	OFF	PL	PB	PF

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
					NO	YES	YES	LE	OFF	PL	PB	PF

KITCHEN

<input checked="" type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls	3(b)
<input checked="" type="checkbox"/> Windows - loose, broken glass, glaze	3(c)
<input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn	3(c)
<input checked="" type="checkbox"/> Floor - loose, worn, dam., buckled	3(b)
<input checked="" type="checkbox"/> Doors - Knob/1k - missing - Panels/Frames dam.	3(b)
<input checked="" type="checkbox"/> Counter/Stor. Space Yes <u>No</u>	-
<input checked="" type="checkbox"/> Sink - chipped, cracked, leaks	6(d)
<input checked="" type="checkbox"/> Range - improper stack, flue, vent	3(e)
<input checked="" type="checkbox"/> Refrigerator Space Yes <u>No</u>	-
<input checked="" type="checkbox"/> Plumbing (a) 5(a) Water Supply Hot <u>Cold</u>	6(c)
<input checked="" type="checkbox"/> Electrical (a)	
<input checked="" type="checkbox"/> Sanitation (a)	

BATHROOM

<input checked="" type="checkbox"/> Plaster - L, C, M - Ceiling/Walls	3(b)
<input checked="" type="checkbox"/> Window - loose, broken glass, glaze	3(c)
<input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn	3(c)
<input checked="" type="checkbox"/> Floor - loose, worn, dam., buckled	3(b)
<input checked="" type="checkbox"/> Door - knob/1k - missing - Panels/Frames dam.	3(b)
<input checked="" type="checkbox"/> Toilet - Tank - brkn, loose, leaks, Seat, 1' se crkd.	6(d)
<input checked="" type="checkbox"/> Lavatory - hipped, crkd, leaks, trap leaks	6(d)
<input checked="" type="checkbox"/> Bath/Shower - leaks cross connection	6(d)
<input checked="" type="checkbox"/> Ventilation Yes <u>No</u>	7
<input checked="" type="checkbox"/> Plumbing (b) 6(a) Water Supply Hot <u>Cold</u>	6(c)
<input checked="" type="checkbox"/> Electrical (b)	
<input checked="" type="checkbox"/> Sanitation (b)	

LIVING ROOM

<input checked="" type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls	3(b)
<input checked="" type="checkbox"/> Windows - loose, broken, glaze	3(c)
<input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn	3(c)
<input checked="" type="checkbox"/> Floor - loose, worn, damaged	3(b)
<input checked="" type="checkbox"/> Door - knob/1k - missing - Panels/Frames dam.	3(b)
<input checked="" type="checkbox"/> Electrical (c)	
<input checked="" type="checkbox"/> Sanitation (c)	

DINING ROOM

<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"/> Floor - loose, worn, damaged	3(b)
<input type="checkbox"/> Doors - Knobs/1k - missing, Panels/Frames dam.	3(b)
<input type="checkbox"/> Electrical (d)	
<input type="checkbox"/> Sanitation (d)	

Bedrooms and/or other rooms

<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 - broke, missing, worn	3(c)
<input type="checkbox"/> Floors - loose, worn, damaged	3(b)
<input type="checkbox"/> Door - knobs/1k - missing - Panels/Frames dam.	3(b)
<input type="checkbox"/> Electrical (e)	
<input type="checkbox"/> Sanitation (e)	
<input type="checkbox"/> Clothes Closet Yes <u>No</u>	

Plumbing	Electrical	Sanitation - Vermin O R
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REMARKS:

City of Portland

Housing Inspection Division

DWELLING UNIT SCHEDULE

INSP DATE

9/20/22

INSP

FORM NO.

5

OK 1st Inspection

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

TENANTS NAME KARE HARRIS / #3 DU 3 2 4 /

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

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

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

Plumbing Electrical Sanitation - Vermin O R

REMARKS:

City of Portland

Housing Inspection Division

DWELLING UNIT SCHEDULE

INSP DATE

9/17/21

INSP

FORM NO.

TENANTS NAME

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

PETER MCCULLOUGH

2 #4 DU 3 2 4 1

Child Un. 10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
					NA	YES	YES	LF	F-01A	PL	PB	DF

KITCHEN

(X) Plaster - L, C, M, - Ceiling/Walls 3(b)

(X) Windows - loose, broken glass, glaze 3(c)

(X) Sash/Frames - broken, missing, worn 3(c)

(X) Floor - loose, worn, dam., buckled 3(b)

(X) Doors - Knob/lk - missing - Panels/Frames dam. 3(b)

(X) Counter/Stor. Space Yes No

(X) Sink - chipped, cracked, leaks 6(d)

(X) Range - improper stack, flue, vent 3(e)

(X) Refrigerator Space Yes No

(X) Plumbing (a) 6(a) Water Supply Hot Cold 6(c)

(X) Electrical (a)

(X) Sanitation (a)

BATHROOM

(X) Plaster - L, C, M - Ceiling/Walls 3(b)

(X) Window - loose, broken glass, glaze 3(c)

(X) Sash/Frames - broken, missing, worn 3(c)

(X) Floor - loose, worn, dam., buckled 3(b)

(X) Door - knob/lk - missing - Panels/Frames dam. 3(b)

(X) Toilet - Tank - brkn, loose, leaks, Seat, 1'se crkd. 6(d)

(X) Lavatory - tipped, crkd, leaks, trap leaks 6(d)

(X) Bathtub/Shower - leaks cross connection 6(d)

(X) Ventilation Yes No 7

(X) Plumbing (b) 6(a) Water Supply Hot Cold 6(c)

(X) Electrical (b)

(X) Sanitation (b)

LIVING ROOM

(X) Plaster - L, C, M, - Ceiling/Walls 3(b)

(X) Windows - loose, broken, glaze 3(c)

(X) Sash/Frames - broken, missing, worn 3(c)

(X) Floor - loose, worn, damaged 3(b)

(X) Door - knob/lk - missing - Panels/Frames dam. 3(b)

(X) Electrical (c)

(X) 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	Description
	() 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

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
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REMARKS:

Sept. 22, 1977

Harris Oil Company
c/o Mr. Ronald Harris
202 Commercial Street
Portland, Maine 04101

Dear Mr. Harris: Re: 10 Deering Street, Portland, Maine NCF-West End
46-D-12

Your property has been surveyed by the Housing Inspections Division of this department, and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

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 1981.

If we can be of further help, please feel free to call on us.

Sincerely yours,
Joseph E. Gray, Jr., Director
Neighborhood Conservation

By 
Lyle D. Noyes,
Chief of Housing Inspections

Inspector _____
M. Leary

City of Portland

Department of Neighborhood Conservation
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

9 / 13 / 77

OK 1st Inspection

INSP

FORM NO.

17 55A

TENANTS NAME

ALEXANDER ROBINSON

FLR.# LOCATION RMG.TP. #RMS. #PEO. #ALL'D SLP.RM.

2 REDU 2 1 2 1

Rent Rent Code Furn Heat Hot Water Dual Egress Ck'ng Lav. Bath Flush
110 MU NU 1.0 YES YES LL PL PB 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
- Sirt - 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, 1'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
- Electrical (b) 6(c)
- 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"/>	<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"/> 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"/> 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"/> 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"/> Doors - 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"/> 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"/> 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"/> Clothes Closet Yes No	

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

City of Portland

Department of Neighborhood Conservation
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

9 15 77

Ok 1st Inspection

INSP

FORM NO.

1 7 55A

TENANTS NAME

JOHN MILCKER

FLR. # LOCATION RMC. TP. CRMS. #PEO. #ALL'D SLP. RM.

2 LL DU 4 2 1/2

Rent Rent Code Furn Heat Hot Water Dual Egress Ck'ng Lav. Bath Flush

NO NO NO 1st flr Vc- Vc- 1E PL PL PL

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 -
- Range - improper stack, flue, vent 6(d)
- Refrigerator Space Yes No 3(e)
- 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 - Tank - brkn, loose, leaks, Seat, 1'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 checked="" type="checkbox"/> Plaster - L, C, M - Ceiling/Walls	3(b)
<input checked="" type="checkbox"/> Windows - loose, broken, glaze	3(c)
<input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn	3(c)
<input checked="" type="checkbox"/> Floors - loose, worn, damaged	3(b)
<input checked="" type="checkbox"/> Doors - Knobs/lk - missing, Panels/Frames dam.	3(b)
<input checked="" type="checkbox"/> Electrical (e)	
<input checked="" type="checkbox"/> Sanitation (e)	
<input checked="" type="checkbox"/> Clothes Closet Yes <input checked="" type="checkbox"/> No	

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

City of Portland

Department of Neighborhood Conservation
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSPI DATE: 9/15/77
 TENANTS NAME: J. D. MILKLEP
 FLR.#: 3
 LOCATION: D1
 RMS.: 3
 PEO.: 2
 ALL'D: 4 1/2
 SLP.RM.: 1
 INSPI FORM NO.: 554

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

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

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

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

Bedrooms and/or other rooms

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

Plumber: _____
 Inspector: _____

CERTIFICATE
OF
COMPLIANCE

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

June 23, 1975 ✓

Mrs. Gladys S. Harris
Algonquin Road
Cape Elizabeth, Maine 04107

Re: Premises located at 10 Deering Street, Portland, Maine 46-D-12

Re: Mrs. Harris:

-inspection of the premises noted above was made on June 20, 1975
Housing Inspector M. Leary.

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 April 17, 1975.

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 1980.

Sincerely yours,

David C. Bittenbender
Health Director (Acting)

By

Lyle D. Sawyer
Chief of Housing Inspections

Inspector

M. Leary
M. Leary

ADMINISTRATIVE HEARING DECISION

City of Portland

Health Department - Housing Division

Tel. 775-5451 Ext. 449

Mrs. Gladys S. Harris

Algonquin Road

Cape Elizabeth, Maine 04107

Re: Premises located at

10 Jeering Street, Portland, Maine 46-D-12

OK
m j
DATE 6/20/75

Date May 27, 1975

Dear Mrs. Harris:

You are hereby notified that as a result of a telephone conversation between yourself and Inspector Leary and your request for additional time on May 21, 1975, regarding our "NOTICE OF BREISING CONDITIONS" at the above

referred premises resulted in the decision noted below.

XX Expiration time extended to June 27, 1975 in order to complete the work now in progress to correct the remaining 10 (ten) Housing Code violations as listed on the attached copy of the "Notice of Housing Conditions".

Notice modified as follows: _____

Please notify this office if all violations are corrected before the above mentioned date so that a "CERTIFICATE OF COMPLIANCE" may be issued.

In Attendance:

Mrs. Harris

Inspector Leary

Very truly yours,

David C. Bittenbender
Acting Health Director

By Lele D. Noyes

Chief of Housing Inspections

Encl. 1
LDW:rl

CITY OF PORTLAND
Health Department - Housing Division
Telephone 775-5451 - Extension 445

1
Street
Issued: 5-27-75
Copies: 3-7-75

Mrs. Gladys S. Harris
Algonquin Road
Cape Elizabeth, Maine 04107

Dear Mrs. Harris:

An examination was made of the premises at 13 D Portland, Maine, by Housing Inspector Leary. 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 defect on or before June 17, 1975. You may contact this office to arrange a satisfactory repair schedule if you are unable to make such repairs within a 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,

Health Commissioner
(acting)

Inspector M. Leary

M. Leary

By [Signature]

Chief of Housing Inspections

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

Section 57

41. Repair the loose light fixture ~~first floor rear hall wall.~~ 5-a

6/10 First Floor - apartment #2

~~Correct the condition that causes a cross connection of the fixture in the bathroom in the bathroom.~~ 6-1

6/10 First Floor - apartment #1

~~Correct the condition that causes a cross connection of the fixture in the bathroom in the bathroom.~~ 5-1

5/27 Second Floor - apartment #5

~~Install a broken water pipe under the kitchen wall.~~ 8-a
~~Correct the condition that causes a cross connection of the fixture in the bathroom in the bathroom.~~ 6-1

WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH AGGRAVATED, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

~~At the time of the survey, we were unable to gain access to apartments 14 and 15 on the second floor. We request that if there are any conditions which need correcting in these apartments that you make the repairs while doing the work on the rest of the structure.~~

SEE NEXT PAGE FOR ADDITIONAL VIOLATIONS FOUND BY INSPECTOR LEARY ON MAY 20, 1975.....

LDN
10 Deering Street (NOHC 4-17-75)

ADDITIONAL VIOLATIONS FOUND BY INSPECTOR LEARY UPON REINSPECTION ON MAY 20, 1975

- ~~121~~ ~~Repair or replace the broken, rotted hand rail and reed on rear porch. 2;3d~~
- ~~122~~ ~~Enclose the loose electrical wiring with junction box and cover on the Third Floor Rear Hall Ceiling. 2;8e~~
- ~~123~~ ~~Repair or replace the broken plaster on the ceilings and walls of Third Floor Rear Hall. 2;3d~~
- Second Floor - #4
- ~~124~~ ~~Replace broken glass in front bedroom window. 3c~~
- ~~125~~ ~~Repair loose light fixture in ceiling of bathroom. 8c~~
- ~~126~~ ~~Correct the conditions causing an obstructed means of egress kitchen door. 10(2)~~

LDN:1

NOTICE OF HOUSING CONDITIONS

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

Mrs. Gladys S. Harris
Algonquin Road
Cape Elizabeth, Maine 04107

DU 45

Chart-Bl.-Lot: 40-D-12
Location: 10 Dearing Street
Project: General
Issued: 4-17-75
Expires: 6-17-75

Dear Mrs. Harris:

An examination was made of the premises at 10 Dearing Street Portland, Maine, by Housing Inspector Leary. 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 defect on or before June 17, 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 C. Bittenbender
Health Director (Acting)

Inspector H. Leary

By [Signature]
Chief of Housing Inspections

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

- | Section(s) | Description |
|------------|---|
| | <u>1. Repair the loose light fixture - first floor rear hall wall.</u> |
| 8-a | <u>First Floor - apartment #2</u>
2. Correct the condition that causes a cross connection at the fixture in the bathroom. bathtub |
| 6-d | <u>First Floor - apartment #1</u>
3. Correct the condition that causes a cross connection at the fixture in the bathtub in the bathroom. |
| 6-d | <u>Second Floor - apartment #5</u>
4. Install a duplex convenience outlet in the kitchen wall. |
| 8-a | 5. Correct the condition that causes a cross connection at the fixture in the bathtub in the bathroom. |
| 6-d | |

WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH ASTERISKS, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

~~At the time of the survey, we were unable to gain access to apartments #4 and #6 on the second floor. We suggest that if there are any conditions which need correcting to these apartments that you make the repairs while doing the work on the rest of the structure.~~