

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 081384

This is to certify that RODERICK VIRGINIA E HE
has permission to 3 Legal residential units - Legalize 1 unit - a total of 3 legaliz units
AT 107 PLEASANT AVE C 131 L007001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lath or other work is used-in. 2 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS -

Fire Dept. C. C. C. C.
Health Dept.
Appeal Board
Other

Department Name

CITY OF PORTLAND

12/2/08 Ch...
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

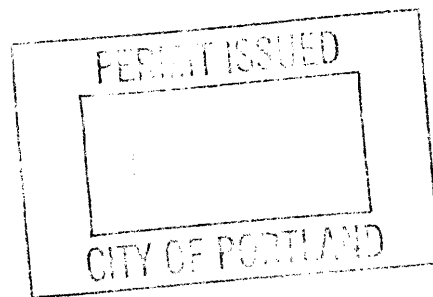
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1384	Issue Date: 12/2/08	CBL: 131 L007001
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Location of Construction: 107 PLEASANT AVE	Owner Name: RODERICK VIRGINIA E HEIRS	Owner Address: 109 PLEASANT AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Legalization of Non-Conforming Units	Zone: R-5

Past Use: Residential - 2 Legal units 1 non legal unit	Proposed Use: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units	Permit Fee: \$375.00	Cost of Work: \$375.00	CEO District: 4
Proposed Project Description: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See conditions</i>	INSPECTION: Use Group: R-2 Type: SB IBC-2003	
		Signature: <i>Craig Cass</i> Signature: <i>CL 12/2/08</i>		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: ldobson	Date Applied For: 10/29/2008	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..		Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ABM</i>
		Date: _____	Date: _____	Date: _____


CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1384	Date Applied For: 10/29/2008	CBL: 131 L007001
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Location of Construction: 107 PLEASANT AVE	Owner Name: RODERICK VIRGINIA E HEIRS	Owner Address: 109 PLEASANT AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Legalization of Non-Conforming Units	

Proposed Use: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units	Proposed Project Description: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 12/01/2008

Note:**Ok to Issue:**

- 1) With the issuance of this permit and the certificate of occupancy, this property shall remain be a three a family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 12/02/2008

Note:**Ok to Issue:**

- 1) 1. Inspection violations noted on 11/06/2008 must be corrected per violation list. See attached sht.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Ben Wallace Jr. **Approval Date:** 12/01/2008

Note:**Ok to Issue:**

- 2) Seal all through penetrations.
- 3) Fire seperation between 107 and 109 must be maintained.
- 4) Combustable storage is not permitted in exits. Anything that has the potential to interfere with the use of the exit is not permitted.
- 5) Smoke detectors are required with in dwelling units on every story and immediately outside of every sleeping area.. They will soon be required with in sleeping rooms.
- 6) All smoke detectors must be AC powered. All new installations must be interconnected with in the unit and battery back up.
- 7) All wall mounted smoke detectors must be located between 4 and 12 inches from the ceiling, or wall mounted more than 4 inches from the wall. They may not be with in 36 inches of a door from a bath room. They should not be located on exterior walls or the ceiling directly under a roof.
- 8) 1-hour fire door assemblies are required between exit stairs and units, basement or storage. If the owner paints the doors with an approved intumessent paint and adds self closing hinges they may use option 2, 3 or 4 per 101-31.2.2.1.3 (2006 ed).

Comments:

10/31/2008-amachado: Application is complete. Gave notice to neighbors form to Gayle. Gave housing form to Mike Menario. Gave Life Safety sheet to Captaon Cass.

11/6/2008-amachado: Received life safety sheet back - approved w/ conditions

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

389 Congress Street
 Portland, Maine 04101

Inspection Violations

Owner/Manager RODERICK VIRGINIA E HEIRS		Inspector Mike Menario	Inspection Date 11/6/2008
Locatation 107 PLEASANT AVE	CBL 131 L007001	Status Rescheduled	Inspection Type Building Permit-Legalize Nonconf

Code	Int/Ext	Floor	Unit No.	Area	Compliance Date
1) 110.26 (B)	Interior			Basement	
Violation: NEC 2005/NFPA 70					
Notes: 1. Wires need to be secured ,open splices need juntion boxes , panels labeled , better lighting , need house panel					
2) 6-109/5.5	Interior			Basement	
Violation: Chimneys,-flues and vent.					
Notes: 1. Chimney cleaned and checked 2. Fix drier vent					
3) 6-109.d	Interior			Basement	
Violation: Disposal of rubbish, ashes, garbage and waste					
Notes: 1. Removel of paints, trash, etc.					
4) 6-111.1	Interior			Basement	
Violation: Plumbing standards/Basic facilities.					
Notes: 1. Plumbing needs to be corrected and secured 2. Feed for oil line needs to be secured and protected					
5) 110.26 (B)	Interior		2nd	Closet	
Violation: NEC 2005/NFPA 70					
Notes: 1. Replace light in closet					
6) 110.26 (B)	Interior		3rd	Kitchen	
Violation: NEC 2005/NFPA 70					
Notes: 1. Relocate refrigerator need exist to electrical panel					
7) 6-108.b	Interior			Various locations	
Violation: Interior floors, walls, ceilings and doors					
Notes: 1. Patch holes in ceilings , floors , etc.					

Comments:



CITY OF PORTLAND

APPLICATION FOR LEGALIZATION OF NONCONFORMING DWELLING UNITS Section 14-391 - In effect March 24, 2004

Location/Address of Legalization: <u>107 PLEASANT AVE</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>131 L 7</u>	Owner: <u>VIRGINIA E. RODERICK ESTATE</u> Telephone: Address: <u>13 ROCKWOOD TERRACE</u> <u>207-797-9673</u> <u>FALMOUTH ME 04105</u>
Contact name, address & telephone if different than above: <u>REBECCA RICKER</u> <u>207-838-5322</u>	Cost of Work: \$ <u>UNKNOWN</u> Fee: \$ <u>300.00</u> \$300 per legalized unit & \$75 per C of O
Current # of legal D.U. <u>2</u>	Requested # of units To be legalized: <u>1</u> Total bldg. units: <u>3</u>
Attach evidence that each requested unit to be legalized existed as of 4/1/95: List evidence that you are submitting: <u>LETTER DATED 1/31/84 FROM CITY OF PORTLAND RE: HOUSING INSPECTION</u> <u>SHOWS THE TOTAL # OF DWELLING UNITS FOR 107-109 AS 6.</u>	
Attach evidence that the current owner/applicant neither constructed nor established the non-conforming dwelling units to be legalized: List evidence that you are submitting: <u>DEATH CERTIFICATE FOR PREVIOUS OWNER: VIRGINIA E. RODERICK 8/3/07</u> <u>(ESTATE FEDERAL ID#: 26-6071915 NO ATTACHMENT)</u>	
<i>I hereby certify that I am the Owner of record of the above property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.</i>	
Signature of applicant: <u>Rebecca L Ricker</u>	Date: <u>10/24/08</u>
This is NOT a permit, you may not commence ANY work until the permit is issued.	



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Lee Urban- Director of Planning and Development
Marge Schmuckal, Zoning Administrator

LEGALIZATION OF NONCONFORMING DWELLING UNITS FOR OFFICE USE ONLY

Address & CBL: 107 Pleasant Ave 131-L-007

Notices to owners of properties situated within 300 feet sent on: given to Gayle 10/21/08; sent 11/12/08

City Housing Ordinance compliance given on: ^{10/21/08}~~4/3/08~~ to Mikal received: 11/17/08 approved w/conditions

City NFPA compliance given on: 10/31/08 to Capt Cas received: 11/6/08 approved w/conditions

Received any letters within 10 days from notices sent? no

Unit(s) existed prior to April 1, 1995? inspection letter 107-109 6 units in 107 & 109 together. inspection 1-23-84 - 3 units.

Unit(s) shown to be established by different owner? Rebecca Ricker - personal representative for Virginia Palmer's estate - 10/12/07

Site plan included: yes

Floor plans included? yes

Is ZBA action required? no



given 10/31/08

CITY OF PORTLAND

**NFPA LIFE SAFETY CODE – FIRE PREVENTION CODE
DWELLING UNIT COMPLIANCE**

Section 14-391 of the Land Use Ordinance allows illegal nonconforming dwelling units to become legalized thru a given process. Part of this process is that the dwelling unit(s) that are requested to be legalized must comply or be able to comply with the NFPA Life Safety Code – Fire Prevention Code **PRIOR** to issuing the requested permit.

Please return this form to the Zoning Administrator (Marge Schmuckal) as to compliance or the ability to comply with these codes.

Location: 107 Pleasant Ave 131-L-007

Owner: Virginia Roderick heirs

Address of Owner: 13 Rockwood Terrace Falmouth ME 04105 Telephone: 797-9673

Applicant information if different than above: Rebecca Ricker 838-5322

Current number of legal units: two (2)

Number of units to be legalized: one (1)

total : thru (3)

Comments of approval or disapproval (list any and all conditions):

- * Need fire doors (considering AFA).
- * Need some additional smoke detectors (hardwired w/ battery backup + interconnected)
- * Some smoke detectors improperly located.
- * Combustible storage not allowed in exits.

Approved w/ conditions
see Urban Insite

Signature: Bjankel

Date: 11/6/08

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1384	Date Applied For: 10/29/2008	CBL: 131 L007001
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Location of Construction: 107 PLEASANT AVE	Owner Name: RODERICK VIRGINIA E HEIRS	Owner Address: 109 PLEASANT AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Legalization of Non-Conforming Units	

Proposed Use: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units	Proposed Project Description: 3 Legal residential units - Legalize 1 unit for a total of 3 legalized units
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Dept: Zoning	Status:	Reviewer: Ann Machado	Approval Date:	Ok to Issue: <input type="checkbox"/>
Note:				
Dept: Building	Status: Pending	Reviewer:	Approval Date:	Ok to Issue: <input type="checkbox"/>
Note:				
Dept: Fire	Status: Approved with Conditions	Reviewer: Ben Wallace Jr.	Approval Date:	Ok to Issue: <input type="checkbox"/>
Note:				

- 2) Seal all through penetrations.
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- 5) Smoke detectors are required with in dwelling units on every story and immediately outside of every sleeping area.. They will soon be required with in sleeping rooms.
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Comments:

10/31/2008-amachado: Application is complete. Gave notice to neighbors form to Gayle. Gave housing form to Mike Menario. Gave Life Safety sheet to Captaon Cass.



Signed 10/31/08

CITY OF PORTLAND

**CITY OF PORTLAND HOUSING CODE
DWELLING UNIT COMPLIANCE**

Section 14-391 of the Land Use Ordinance allows illegal nonconforming dwelling units to become legalized thru a given process. Part of this process is that the dwelling unit(s) that are requested to be legalized must comply or be able to comply with the City of Portland's Housing Code PRIOR to issuing the requested permit.

Please return this form to the Zoning Administrator (Marge Schmuckal) as to compliance or the ability to comply with these codes.

Location: 107 Pleasant Ave - 131-L-007

Owner: Virginia Rodrick heirs

Address of Owner: 13 Rockwood Terrace, Falmouth ME 04104 **Telephone:** 797-9673

Applicant information if different than above: Rebecca Ricker - 838-5322

Current number of legal units: two (2)

Number of units to be legalized: one (1)

plus: three (3)

Comments of approval or disapproval (list any and all conditions):

Approved with conditions

Signature: [Handwritten Signature]

Date: 11-17-08

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
389 Congress Street
Portland, Maine 04101

Inspection Violations

Owner/Manager RODERICK VIRGINIA E HEIRS		Inspector Mike Menario	Inspection Date 11/6/2008
Locatation 107 PLEASANT AVE	CBL 131 L007001	Status Rescheduled	Inspection Type Building Permit-Legalize Nonconf

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Violation:	Chimneys,-flues and vent.				
Notes:	1. Chimney cleaned and checked 2. Fix drier vent				
3) 6-109.d	Interior			Basement	
Violation:	Disposal of rubbish, ashes, garbage and waste				
Notes:	1. Removel of paints, trash, etc.				
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Violation:	Plumbing standards/Basic facilities.				
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Notes:	1. Replace light in closet				
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7) 6-108.b	Interior			Various locations	
Violation:	Interior floors, walls, ceilings and doors				
Notes:	1. Patch holes in ceilings , floors , etc.				

Comments:

From: Gayle Guertin
To: Ann Machado; Marge Schmuckal
Date: 11/10/2008 12:38:44 PM
Subject: legalization of non conforming units

The abutters notices for the following legalization of non-conforming dwelling units..... will be sent out on Wednesday, November 12, 2008.

Thanks Gayle

107 Pleasant Ave. CBL 131 L007
109 Pleasant Ave. CBL 131 L006
32 Ellsworth St. CBL 054 C005
56 Mellan St. CBL 048 E025

CC: Gayle Guertin

**IMPORTANT NOTICE FROM CITY OF PORTLAND
ZONING DIVISION**

**TO RESIDENTS AND PROPERTY OWNERS
IN THE VICINITY OF**

given 10/31/08

Issues: ~~Rebecca Ricker~~ Virginia Radenck heirs, owners of the property located at 107 Pleasant Avenue Street, ^{has} have submitted an application to legalize ^{an} existing non-conforming dwelling unit for a total of ^{three} dwelling units within this building. The legalization may be permitted if the applicant can meet the requirements allowed under Section 14-391 of the Zoning Ordinance.

Feedback: If you have any objection to the above permit application, you must submit your opposition in writing within ten (10) days of this notice to: City of Portland Zoning Administration City Hall - Room 315-389 Congress Street Portland, Maine 04101

FOR MORE INFORMATION

For more information you may contact Marge Schmuckal, Zoning Administrator, at (207) 874-6695. The office hours are 8:00am to 4:00pm weekdays.

OCT 25 2008

October 24, 2008

City of Portland
Department of Planning & Development
389 Congress Street
Portland, ME 04101

Re: 107/109 Pleasant Avenue, Portland, ME 04103
Application for Legalization of Nonconforming Dwelling Units

Although this is one physical building, each side was purchased separately at different times by my parents, Donald and Virginia Roderick, and legally remains two parcels.

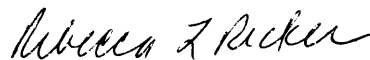
My father died in 1988 and my mother died last year on 8/3/07. Many years ago, my father made the 3rd floors of both 107 and 109 Pleasant Ave. into separate apartments. It was not until my siblings and I recently looked into selling this building that we discovered that those 3rd floor apartments were nonconforming units.

The City of Portland has assessed this property as two three-family parcels for some time.

As a personal representative of my mother's estate and one of the new owners, I am submitting this application and attached documents for your review. I have also enclosed documentation for my appointment as personal representative as well as a check for \$600.00 to cover fees for the two units.

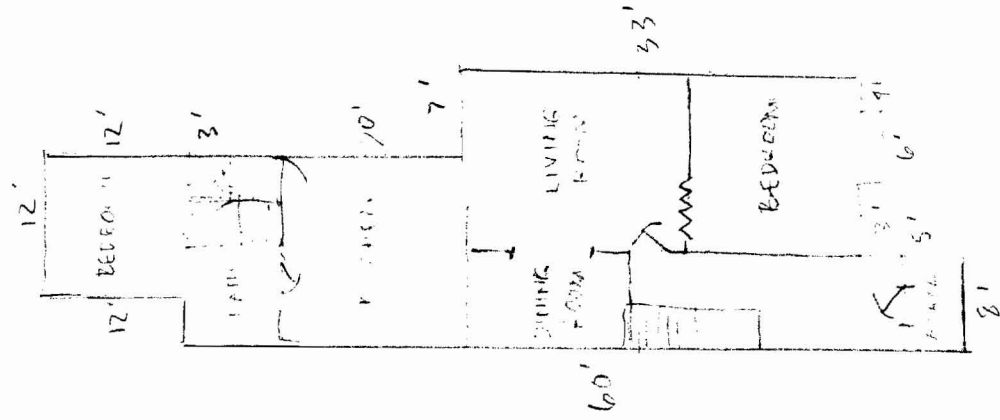
Please let me know if I have omitted anything or can answer any questions.

Sincerely,



Rebecca L. Ricker
Personal Representative
Virginia E. Roderick Estate
13 Rockwood Terrace
Falmouth, ME 04105
207-838-5322

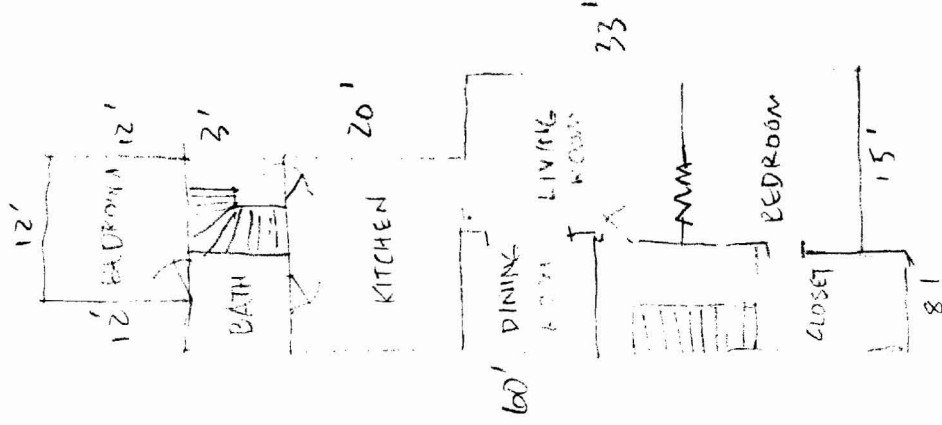
107 PLEASANT AVENUE



FIRST FLOOR

$2 \times 6 = 12$
 $12 \times 12 = 144$
 $23 \times 33 = 759$
 $16 \times 23 = 368$
 $4 \times 8 = 32$

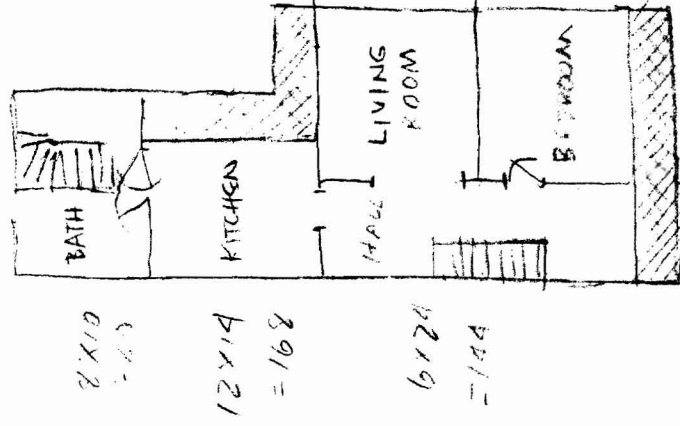
TOTAL 1315 SF



SECOND FLOOR

$23 \times 33 = 759$
 $4 \times 8 = 32$
 $16 \times 23 = 368$
 $12 \times 12 = 144$

TOTAL 1303 SF



THIRD FLOOR

$8 \times 10 = 80$
 $12 \times 14 = 168$
 $6 \times 24 = 144$
 $12 \times 14 = 168$
 $12 \times 14 = 168$

TOTAL 728 SF

City of Portland

54 Standard Insp;

Check out sheet
STRUCTURE INSPECTION SCHEDULE
ARTICLE 5 HOUSING CODE

Housing Inspection Division

1) Insp. Name HIRVING

2) Insp. Date	3) Insp. Type	4) Proj. Code	5) Ass't's: Chk	6) Blt	7) Lst	8) C. Class: 1	9) Bldg	10) Insp.	11) P. No.
1-23-84	GRA		131	1	6-7				
12) House No.	13) Sec. H. No.	14) Suffix	15) District	16) Street Name		17) St. Design			
				PLEASANT AVE					
18) Owner or Agent: <u>VIRGINIA & DONALD RODENICK - 108 PLEASANT AVE -</u>						19) Status	20) Bldg's Ra		
21) Address: <u>107-109 PLEASANT AVE</u>						<u>772-1175</u>	<u>ABO - 1</u>		
22) City and State: <u>PORTLAND ME.</u>						Zip Code <u>04103</u>			

23) D. Units	24) Occ. D.U.'s	25) Rm. Units	26) Occ. R.U.s	27) No. Occupants	28) Com' IU	29) Bldg. Type	30) S. S. No.	31) Const. Mat	32) O.R.'s
6	6			8		WO	21	WO	
33) C.H.	34) Pho.	35) Zoned For	36) Actual Land Use	37) D.D.	38) L.S. Ad. Bth. Fac.	39) Disp.	40) Closing Date		
	772-1175	R	R		Yes	No			

EXTERIOR - Structure		Cd. Viol.	INTERIOR - Structure		Cd. Viol.
Foundation	EX/FO	108-2	Lighting		113
Walls	EX/WA	108-2	Elec. Wiring	EW	113
Roof	RO	108-2	Floors	FL	108-2
Porch	PO	108-4	Walls	IN/WA	108-2
Stairs	EX/SR	108-4	Ceilings	CE	108-2
Steps	SP	108-4	Windows	IN/WI	108-3
Doors	DO	108-3	Airshafts	AS	108-3
Windows	EX/WI	108-3	Roof Rafters	ROR	108-1
Eaves	EA	108-1	Sanitation	SAN	109-5
Trim	TR	108-1	Stairways	IN/SRW	108-4
Chimney	EX/CH	108-5	Stair Treads	SRT	108-4
Gutters	GU	108-1	Wastelines	WSL	111-4
Roof Drains	RD	108-1	Supply Lines	SUL	111-3
Bulkhead	BU	108-4	Stacks	ST	114-1
Outbuildings	GR - SH		Flues	FU	114-1
Yard	YA		Vents	VE	114-1
Garbage	GA	109-4	Chimney	IN/CH	114-1
Rubbish	RU	109-4	Heating Equip. Furnace - FU	Space Heater - SH	114-2
Containers	CO	109-4	Bsmt. Sanitation Litter - LI	Debris - DE	109-4
Drainage	DR	108-1	Dampness	DMP	108-1
Infestation	IN-CR-FL	109-5	Lighting	BS/LI	113
Rats	RA	109-5	Elec. Panel	EL/pa	113
Other		109-5	Stairs	BS/SR	108-2
Fire Escape	FE	116-2	Foundation	IN/FO	108-2
Dual Egress	DE	116-2	Floor Joists		108-2
Driveways	DW		Carrying Timbers		108-2
Walks	WA		Sills		108-2
Fences	FN		Bsmt. Dwelling Unit RDU		110-6

✓ Remarks on reverse side

ARTICLE 5 HOUSING CODE
Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

City of Portland

INSP DATE

10/23/72 107-

INSP # FORM NO.

74 2 2

TENANTS NAME						FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLPRM.
SUSAN PERRY						1	R		5	2		2
Child Un. 10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs	Ck'ng.	Heat	Lav.	Bath	Flush
			N/A	MO	NO	✓	✓	EI	OF	✓	✓	✓

KITCHEN	CODE	BATHROOM	CODE
(-) Plaster - L, C, M, - Ceiling/Walls	108-2	(-) Plaster - L, C, M - Ceiling/Walls	108-2
(-) Windows - loose, broken glass, glaze	108-3	(-) Window - loose, broken glass, glaze	108-3
(-) Sash/Frames - broken, missing, worn	108-3	(-) Sash/Frames - broken, missing, worn	108-3
(-) Floor - loose, worn, dam., buckled	108-2	(-) Floor - loose, worn, dam., buckled	108-2
(-) Doors - Knob/lk - missing - Panels/Frames dam.	108-3	(-) Door - knob/lk - missing - Panels/Frames dam.	108-3
(-) Counter/Stor. Space Yes <input checked="" type="checkbox"/> No	-	(-) Toilet - Trk - brkn, loose, leaks, Seat, l'se crkd	111-1
(-) Sink - chipped, cracked, leaks	111-1	(-) Lavatory - chipped, crkd, leaks, trap leaks	111-1
(-) Range - improper stack, flue, vent	114-1	(-) Bathtub/Shower - leaks cross connection	111-1
(-) Refrigerator Space Yes <input checked="" type="checkbox"/> No	-	(-) Ventilation Yes <input checked="" type="checkbox"/> No	112
(-) Plumbing (a) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/>	111-3	(-) Plumbing (b) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/>	111-3
(-) Electrical (a)	113	(-) Electrical (b)	113
(-) Sanitation (a)	109	(-) Sanitation (b)	109
LIVING ROOM	CODE	DINING ROOM	CODE
(-) Plaster - L, C, M, - Ceiling/Walls	108-2	(-) Plaster - L, C, M - Ceiling/Walls	108-2
(-) Windows - loose, broken, glaze	108-3	(-) Windows - loose, broken, glaze	108-3
(-) Sash/Frames - broken, missing, worn	108-3	(-) Sash/Frames - broken, missing, worn	108-3
(-) Floor - loose, worn, damaged	108-2	(-) Floor - loose, worn, damaged	108-2
(-) Door - knob/lk - missing - Panels/Frames dam.	108-3	(-) Doors - Knobs/lk - missing. Panels/Frames dam.	108-3
(-) Electrical (c)	113	(-) Electrical (d)	113
(-) Sanitation (c)	109	(-) Sanitation (d)	109
Bedrooms and/or other rooms	Code		
2		(-) Plaster - L, C, M - Ceiling/Walls	108-2
		(-) Windows - Loose, broken, glaze	108-3
		(-) Sash/Frames - broken, missing, worn	108-3
		(-) Floors - loose, worn, damaged	108-2
		(-) Door - knobs/lk - missing - Panels/Frames dam.	108-3
		(-) Electrical (e)	113
		(-) Sanitation (e)	109
		(-) Clothes Closet Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

OK

OK

OK

ARTICLE 5 HOUSING CODE
Health Department
DWELLING UNIT SCHEDULE

City of Portland

Housing Inspection Division

INSP DATE

7-28-89 109

INSP 4 - FORM NO.

344

TENANTS NAME						FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLPRM.
KEVIN GURALL						2	R		4	1		1
Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
			N/A	170	NO	✓	✓	Elct	DF	✓	✓	✓

KITCHEN	CODE	BATHROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	108-2	() Plaster - L, C, M - Ceiling/Walls	108-2
() Windows - loose, broken glass, glaze	108-3	() Window - loose, broken glass, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3	() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, dam., buckled	108-2	() Floor - loose, worn, dam., buckled	108-2
() Doors - Knob/lk - missing - Panels/Frames dam.	108-3	() Door - knob/lk - missing - Panels/Frames dam.	108-3
() Counter/Stor. Space Yes <input checked="" type="checkbox"/> No	-	() Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd	111-1
() Sink - chipped, cracked, leaks	111-1	() Lavatory - chipped, crkd, leaks, trap leaks	111-1
() Range - improper stack, flue, vent	114-1	() Bathtub/Shower - leaks cross connection	111-1
() Refrigerator Space Yes <input checked="" type="checkbox"/> No	-	() Ventilation Yes <input checked="" type="checkbox"/> No	112
() Plumbing (a) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold	111-3	() Plumbing (b) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold	111-3
() Electrical (a)	113	() Electrical (b)	113
() Sanitation (a)	109	() Sanitation (b)	109
LIVING ROOM	CODE	DINING ROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	108-2	() Plaster - L, C, M - Ceiling/Walls	108-2
() Windows - loose, broken, glaze	108-3	() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3	() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, damaged	108-2	() Floor - loose, worn, damaged	108-2
() Door - knob/lk - missing - Panels/Frames dam.	108-3	() Doors - Knobs/lk - missing, Panels/Frames dam.	108-3
() Electrical (c)	113	() Electrical (d)	113
() Sanitation (c)	109	() Sanitation (d)	109
Bedrooms and/or other rooms	Code		
		() Plaster - L, C, M - Ceiling/Walls	108-2
		() Windows - Loose, broken, glaze	108-3
		() Sash/Frames - broken, missing, worn	108-3
		() Floors - loose, worn, damaged	108-2
		() Door - knobs/lk - missing - Panels/Frames dam.	108-3
		() Electrical (e)	113
		() Sanitation (e)	109
		() Clothes Closet Yes <input checked="" type="checkbox"/> No	

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

OK

OK

OK

ARTICLE 5 HOUSING CODE
Health Department
DWELLING UNIT SCHEDULE

City of Portland

Housing Inspection Division

INSP DATE

2-22-84 107-

INSP 4.

FORM NO.

TENANTS NAME					FLR.#	LOCATION	RMG.TP.	#RMS.	#PED.	#ALL'D	SLPRM.
KATHERINE RODERICK					3	R		4	1		1

Child Un. 10	Child 1 - 6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
			N/A	100	NO	4	4	Elec	Elec	4	4	4

KITCHEN	CODE	BATHROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	108-2	() Plaster - L, C, M - Ceiling/Walls	108-2
() Windows - loose, broken glass, glaze	108-3	() Window - loose, broken glass, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3	() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, dam., buckled	108-2	() Floor - loose, worn, dam., buckled	108-2
() Doors - Knob/lk - missing - Panels/Frames dam.	108-3	() Door - knob/lk - missing - Panels/Frames dam.	108-3
() Counter/Stor. Space Yes <input checked="" type="checkbox"/> No	-	() Toilet - TK - brkn, loose, leaks, Seat, l'se crkd	111-1
() Sink - chipped, cracked, leaks	111-1	() Lavatory - chipped, crkd, leaks, trap leak.	111-1
() Range - improper stack, flue, vent	114-1	() Bathtub/Shower - leaks cross connection	111-1
() Refrigerator Space Yes <input checked="" type="checkbox"/> No	-	() Ventilation Yes <input checked="" type="checkbox"/> No	112
() Plumbing (a) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/>	111-3	() Plumbing (b) 6(a) Water Supply Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/>	111-3
() Electrical (a)	113	() Electrical (b)	113
() Sanitation (a)	109	() Sanitation (b)	109

LIVING ROOM	CODE	DINING ROOM	CODE
() Plaster - L, C, M, - Ceiling/Walls	108-2	() Plaster - L, C, M - Ceiling/Walls	108-2
() Windows - loose, broken, glaze	108-3	() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3	() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, damaged	108-2	() Floor - loose, worn, damaged	108-2
() Door - knob/lk - missing - Panels/Frames dam.	108-3	() Doors - Knobs/lk - missing, Panels/Frames dam.	108-3
() Electrical (c)	113	() Electrical (d)	113
() Sanitation (c)	109	() Sanitation (d)	109

Bedrooms and/or other rooms	Code
	() Plaster - L, C, M - Ceiling/Walls 108-2
	() Windows - Loose, broken, glaze 108-3
	() Sash/Frames - broken, missing, worn 108-3
	() Floors - loose, worn, damaged 108-2
	() Door - knobs/lk - missing - Panels/Frames dam. 108-3
	() Electrical (e) 113
	() Sanitation (e) 109
	() Clothes Closet Yes <input checked="" type="checkbox"/> No

Plumbing	Electrical	Sanitation - Vermin O R
OR	OR	OR

REMARKS:



CITY OF PORTLAND

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

January 31, 1984

#DU: 6

Virginia & Donald Roderick
108 Pleasant Avenue
Portland, Maine 04103

Re: 107-109 Pleasant Ave. 131-L-6, 7 Gen.

The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above referred 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
Planning & Urban Development

By *Lyle D. Noyes*
Lyle D. Noyes
Inspections Services Division

Hubert Irving
Code Enforcement Officer
Hubert Irving (4)

jmr

Inspection Services
P. Samuel Hoffas
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

MAY 22, 1996

CITY OF PORTLAND

RODERICK VIRGINIA E
108 PLEASANT AVE
PORTLAND ME 04103

Re: 107 PLEASANT AVE
CBL: 131 - L - 007
DU: 3

Dear Ms. Roderick:

The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above referred 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. We did, however, note the following items that could cause future problems:

1. EXT - - 108.10
TRIM IS MISSING
2. INT - OVERALL - 113.50
HARD-WIRED BATTERY-BACKUP SMOKE DETECTORS ARE REQUIRED IN EACH UNIT

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,

Arthur Rowe
Code Enforcement Officer

Tammy Munson
Code Enfc.Offc./ Field Supv.

CERTIFICATION OF VITAL RECORD

STATE OF MAINE

COPY - Place of Death COPY - Place of Residence COPY - Place Permit issued

NAME KNOWN TO PHYSICIAN		STATE OF MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES		State File Number	
CERTIFICATE OF DEATH			STANDARD FORM		
1a. FIRST NAME Virginia		1b. MIDDLE NAME E.		1c. LAST NAME Roderick	
1d. JR., etc.		2. DATE OF DEATH (Mo, Dy, Yr) August 3, 2007		3. SEX F	
4. SOCIAL SECURITY NUMBER 194-20-5077		5a. AGE (Yrs) 81 Last Birthday		5b. UNDER 1 YEAR Months Days Hours Minutes	
5c. UNDER 1 DAY Hours Minutes		6. DATE OF BIRTH (Mo, Dy, Yr) July 20, 1926			
7. BIRTHPLACE (City and State or Foreign Country) West Chester, Pennsylvania		8. WAS DECEDENT EVER IN U.S. ARMED FORCES? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		9. PLACE OF DEATH (Check only one) HOSPITAL: <input type="checkbox"/> DOA <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Nursing Home <input type="checkbox"/> Residence <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> Other (Specify)	
10. FACILITY NAME (If not institution, give street and number) Cedars Nursing Care Center		11. COUNTY OF DEATH Cumberland		12. CITY OR TOWN OF DEATH Portland	
13. MARITAL STATUS <input checked="" type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		14. MOST RECENT SPOUSE (If wife, give maiden name) <input type="checkbox"/> Living <input checked="" type="checkbox"/> Deceased Donald M. Roderick		15. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) Management	
16. KIND OF BUSINESS / INDUSTRY Import/Export		17. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0 - 12 grades) 12 College (1 - 4 or 5+ years)		18. LANGUAGE (Specify) English	
19. RACE - American Indian, Black, White, etc. (Specify) White		20. RESIDENCE STATE Maine		21. RESIDENCE COUNTY Cumberland	
22. RESIDENCE CITY OR TOWN Portland		23. RESIDENCE STREET AND NUMBER 109 Pleasant Avenue			
24a. FIRST NAME Charles		24b. MIDDLE NAME Nelson		24c. LAST NAME Swett	
24d. JR., etc. n/a		25a. FIRST NAME Mary		25b. MIDDLE NAME Elizabeth	
25c. MAIDEN SURNAME Jarrett		26. INFORMANT - NAME (Type or Print) Katie Mahoney		27. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, ZIP Code) 494 Deering Avenue Portland, ME 04103	
28. METHOD OF DISPOSITION: <input type="checkbox"/> Temporary Storage <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input type="checkbox"/> Use by Medical Science <input type="checkbox"/> Other (Specify)		29. WAS BODY EMBALMED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		30a. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Evergreen Cemetery	
30b. LOCATION - (City or Town, State) Portland, Maine		30c. DATE OF DISPOSITION (Mo, Dy, Yr) 08-10-07			
31a. SIGNATURE OF FUNERAL PRACTITIONER OR AUTHORIZED PERSON <i>Moussé S. Yorkis</i>		32a. NAME AND ADDRESS OF FACILITY OR AUTHORIZED PERSON Independent Death Care of Maine LLC 471 Deering Avenue Portland Maine 04103-			
31b. LICENSE NUMBER PRI073		32b. FUNERAL ESTABLISHMENT LICENSE NUMBER: HO9917			
33. CERTIFYING PHYSICIAN: To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated. Signature and Title: <i>Peter Emery, M.D.</i>		34. DATE SIGNED (Mo, Dy, Yr) 8/6/07		35. VIEWED BODY AFTER DEATH? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
36a. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Joel L. Botler, M.D.		36b. NAME AND ADDRESS OF CERTIFIER (Type or Print) Peter Emery, M.D. 180 Park Avenue, Portland, ME, 04102		37. TIME OF DEATH 11:15 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
38. REGISTRAR'S SIGNATURE <i>Linda C. Cohen</i>		39. DATE FILED (Mo, Dy, Yr) AUG 10 2007		40. WAS AN AUTOPSY PERFORMED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
41. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		42. MANNER OF DEATH: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> THIS CERTIFICATE		Report all non-natural deaths to the Office of the Chief Medical Examiner. DO NOT COMPLETE THIS CERTIFICATE.	
43. PART I. Enter the diseases, injuries, or complications which caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (Final disease or condition resulting in death): a. <i>Pneumonia C.A.</i> DUE TO (OR AS A CONSEQUENCE OF): b. _____ DUE TO (OR AS A CONSEQUENCE OF): c. _____ DUE TO (OR AS A CONSEQUENCE OF): d. _____ CAUSE (Disease or injury which initiated events resulting in death) LAST: e. _____		Approximate Interval Between Onset and Death <i>months</i>		PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.	

VS3 R1/98

USE BLACK INK ONLY

ORIGINAL - STATE

USE BLACK INK ONLY

DE K FORM VS07H FRP 0112003

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE ABSTRACT OR COPY OF A CERTIFICATE OR RECORD WHICH IS IN MY OFFICIAL CUSTODY.

TOWN OF Portland

DATE ISSUED

AUG 10 2007

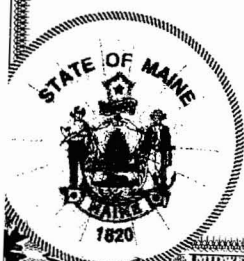
ATTEST

Linda C. Cohen
Linda C. Cohen

STATE REGISTRAR/MUNICIPAL CLERK/STATE ARCHIVIST

VS-31 R0606

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.



This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information

Card Number	1 of 1
Parcel ID	131 L007001
Location	107 PLEASANT AVE
Land Use	THREE FAMILY
Owner Address	RODERICK VIRGINIA E HEIRS 109 PLEASANT AVE PORTLAND ME 04103
Book/Page	
Legal	131-L-7 PLEASANT AVE 107 5371 SF

Current Assessed Valuation

Land	Building	Total
\$86,300	\$212,200	\$298,500

Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	
1910	Old Style	2	3071	0.123	
Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
5	3		13	Full Finsh	Full

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
-------------	-----------------	-------------------	-------------	--------------	------------------

Sales Information

Date	Type	Price	Book/Page
-------------	-------------	--------------	------------------

Picture and Sketch

Picture	Sketch	Tax Map
-------------------------	------------------------	-------------------------

[Click here](#) to view Tax Roll Information.

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

New Search!



109
LEFT

107
RIGHT

STATE OF MAINE

PROBATE COURT

PORTLAND

Location of Court

CUMBERLAND COUNTY

DOCKET NO. 2007-1318

Estate of VIRGINIA E. RODERICK,

LETTERS OF AUTHORITY OF
CO-PERSONAL REPRESENTATIVE S

If "Supervised," stamp or write in here:

TO: REBECCA RICKER, 13 ROCKWOOD TERRACE, FALMOUTH, ME 04105

ROBERTA S. COPE, 172 CONCORD STREET, PORTLAND, ME 04103

You have been appointed PERSONAL REPRESENTATIVE of the estate of VIRGINIA E. RODERICK,
deceased who died on the 3rd day of August, 2007
domiciled at PORTLAND, ME

The decedent (check (a) or (b))

(a) Left a will.

(b) Left no will

You are to administer the estate according to the law. If decedent left a will, your powers may be restricted by the provisions of the will. If these letters are marked "SUPERVISED," your powers are restricted according to law and as the court may have ordered.

During the course of your administration, you must give heed to any proceedings in this court which may affect your rights and duties as personal representative. In particular, if a petition is filed requesting that this estate be placed under supervised administration, you shall not exercise your power to distribute any estate until further notice from this court.¹

You must regardless, of other proceedings:

1. Notify all heirs, devisees, and other persons entitled to notice of your appointment within 30 days of your appointment. See 18-A MRSA § 3-705 and Form N-115.

2. Prepare an inventory of the assets of this estate within three months after your appointment and furnish it to interested persons who request it. See 18-A MRSA § 3-706 and Form DE-405.

Your letter of acceptance of this position and trust was received on October 5th, 2007 And is conclusive evidence of your acceptance of your fiduciary obligations. You may be held personally liable for any violation of your duties under law with respect to the position you have accepted.

Date: 10-12-07

Teri E. McKee
Register of Probate

¹ See 18-A MRSA § 3-503

A TRUE COPY.

ATTEST: [Signature]
Clerk Exp 2-24-09

CBL	OWNER	OWNER MAILING ADDRESS	PROPERTY LOCATION	UNITS
131 G007001	GEMMER CONSTANCE H & FREDERIC JTS	180 GLENWOOD AVE PORTLAND, ME 04103	180 GLENWOOD AVE	1
131 G008001	CUDDY MICHAEL J & JULIE B	132 PLEASANT AVE PORTLAND, ME 04103	132 PLEASANT AVE	2
131 K001001	DONALDSON HERBERT L	169 GLENWOOD AVE PORTLAND, ME 04103	169 GLENWOOD AVE	3
131 K002001	RASZMANN PETER G	120 PLEASANT AVE PORTLAND, ME 04103	120 PLEASANT AVE	3
131 K003001	CODY HELEN J	125 CONCORD ST PORTLAND, ME 04103	125 CONCORD ST	1
131 K004001	CAPELLUTI JOSEPH H & VANESSA WHITE JTS	112 PLEASANT AVE PORTLAND, ME 04103	112 PLEASANT AVE	1
131 K005001	CODY DAVID M	125 CONCORD ST PORTLAND, ME 04103	121 CONCORD ST	2
131 K006001	WALZ GAYLO H & ANN E JTS	108 PLEASANT AVE PORTLAND, ME 04103	108 PLEASANT AVE	1
131 K007001	PICCINI ELAINE WID KW VET	113 CONCORD ST PORTLAND, ME 04103	113 CONCORD ST	1
131 K008001	SANTOS JANICE A & MARSHALL S JTS	102 PLEASANT AVE PORTLAND, ME 04103	102 PLEASANT AVE	2
131 K009001	KANE BARBARA A & JAMES F JTS	10 FLEETWOOD ST PORTLAND, ME 04102	109 CONCORD ST	1
131 K010001	LEBEL PATRICIA J & WILLIAM BURNS ROGERS	107 CONCORD ST PORTLAND, ME 04103	107 CONCORD ST	2
131 K011001	RUTHERFORD PROPERTIES LLC	92 MIDDLE JAM RD GORHAM, ME 04038	94 PLEASANT AVE	4
131 K012001	LIBBY-BARNES JENNIFER & ROBERT J BARNES JTS	101 CONCORD ST PORTLAND, ME 04103	101 CONCORD ST	1
131 K013001	KIDWELL CHRISTOPHER D & CHERYL A HALLETT JTS	99 CONCORD ST PORTLAND, ME 04103	99 CONCORD ST	2
131 K014001	DIMILLO DANIEL P	88 PLEASANT AVE PORTLAND, ME 04103	88 PLEASANT AVE	2
131 K017001	BROWN BARRY J & EUGENE B BROWN &	81 BARTLEY AVE PORTLAND, ME 04103	78 PLEASANT AVE	4
131 K021001	SEMPLE CAROL M & HERBERT A JR JTS	177 GLENWOOD AVE PORTLAND, ME 04103	177 GLENWOOD AVE	1
131 K022001	TROOP MERYL C S	98 PLEASANT AVE PORTLAND, ME 04103	98 PLEASANT AVE	1
131 L001001	ABBOTT LORRAINE	127 PLEASANT AVE PORTLAND, ME 04103	127 PLEASANT AVE	1
131 L003001	EHRINGHAUS MICHAEL E & CAROLYN EHRINGHAUS JTS	11 JAMES ST PORTLAND, ME 04103	11 JAMES ST	1
131 L004001	FLANAGAN THOMAS S WWII VET	121 PLEASANT AVE PORTLAND, ME 04103	121 PLEASANT AVE	1
131 L005001	PALMLUND DAVID C & CATHERINE E PALMLUND JTS	106 CLINTON ST PORTLAND, ME 04103	106 CLINTON ST	1
131 L006001	RODERICK VIRGINIA E HEIRS	109 PLEASANT AVE PORTLAND, ME 04103	109 PLEASANT AVE	3
131 L007001	RODERICK VIRGINIA E HEIRS	109 PLEASANT AVE PORTLAND, ME 04103	107 PLEASANT AVE	3
131 L008001	DIMILLO STEVEN A & MARGARET F JTS	113 PLEASANT AVE PORTLAND, ME 04103	113 PLEASANT AVE	1
131 L009001	WINCELE STEVEN B	113 GLENWOOD AVE PORTLAND, ME 04103	101 PLEASANT AVE	4
131 L011001	JOYCE BARBARA A	93 PLEASANT AVE PORTLAND, ME 04103	93 PLEASANT AVE	1
131 L012001	LATHROP REBECCA A	85 PLEASANT AVE PORTLAND, ME 04103	85 PLEASANT AVE	2

CBL	OWNER	OWNER MAILING ADDRESS	PROPERTY LOCATION	UNITS
131 L013001	BOULTON MELODY & DARCY BOULTON & WANDA J	14 FLORENCE ST PORTLAND, ME 04103	14 FLORENCE ST	2
131 L014001	TIERNEY MARGARET M	16 FLORENCE ST PORTLAND, ME 04103	16 FLORENCE ST	2
131 L015001	JONES BOYD A & ELLENOR B JONES JTS	20 FLORENCE ST PORTLAND, ME 04103	20 FLORENCE ST	1
131 L016001	PIKE DORIS M HEIRS	84 CLINTON ST PORTLAND, ME 04103	84 CLINTON ST	1
131 L017001	JONES AARON C & PRUDENCE R JONES	90 CLINTON ST PORTLAND, ME 04103	90 CLINTON ST	1
131 L019001	WYMAN JONATHAN G & JESSICA L ANTHONY JTS	114 CLINTON ST PORTLAND, ME 04103	114 CLINTON ST	1
131 L020001	LOUDEN ROBERT B & TAMA SILVERSTEIN LOUDEN	96 CLINTON ST PORTLAND, ME 04103	96 CLINTON ST	1
131 L021001	COMMUNITY HOUSING OF MAINE	103 PLEASANT AVE PORTLAND, ME 04103	103 PLEASANT AVE	2
131 L022001	SCHRAEDER ELLEN L & PIERRE E CHARPENTIER JTS	110 CLINTON ST PORTLAND, ME 04103	110 CLINTON ST	1
131 L023001	MOULTON LYMAN L JR WWII VET CLAIRE U JTS	102 CLINTON ST PORTLAND, ME 04103	102 CLINTON ST	1
131 M001001	SMITH CYNTHIA L & DAVID A JTS	89 WOODLANDS DR FALMOUTH, ME 04105	77 PLEASANT AVE	1
131 M005001	PIKE DORIS M HEIRS	84 CLINTON ST PORTLAND, ME 04103	7 FLORENCE ST	1
131 M006001	SWIFT DOUGLAS R & SHEILA HEALY MCKINLEY JTS	11 FLORENCE ST PORTLAND, ME 04103	11 FLORENCE ST	1
136 B002001	MCGEE SAMUEL S & JENNIFER C JUDD-MCGEE JTS	89 CLINTON ST PORTLAND, ME 04103	89 CLINTON ST	1
136 B003001	MEARS SAGE D & DONNA L SCHWARTZ TRUSTEES	85 CLINTON ST PORTLAND, ME 04103	85 CLINTON ST	1
136 B004001	YORKE JAMES B	79 CLINTON ST PORTLAND, ME 04103	79 CLINTON ST	2
136 B005001	DERICE ROSE M WID WWII VET	75 CLINTON ST PORTLAND, ME 04103	75 CLINTON ST	2
136 B006001	DROUIN JULIE S & SCOTT JTS	36 FLORENCE ST PORTLAND, ME 04103	36 FLORENCE ST	1
136 B008001	ROTHMAN RUTH S	18 MERRYMEETING PORTLAND, ME 04103	95 CLINTON ST	1
136 B009001	BOTKIN JAMES H & JAMES C ROBERSON JTS	97 CLINTON ST PORTLAND, ME 04103	97 CLINTON ST	1
136 B010001	HOCHADEL JOSEPH M & BARBARA GOULD HOCHADEL JTS	103 CLINTON ST PORTLAND, ME 04103	103 CLINTON ST	1
136 B012001	TANGUAY PATRICIA U & PHILIP J JTS	113 CLINTON ST PORTLAND, ME 04103	113 CLINTON ST	1
136 B016001	SIEG PAUL L	96 HARTLEY ST PORTLAND, ME 04103	96 HARTLEY ST	1
136 B017001	ERBE JAMES D	90 HARTLEY ST PORTLAND, ME 04103	90 HARTLEY ST	1
136 B020001	PUBLICOVER BRIAN A	PO BOX 10140 PORTLAND, ME 04104	82 HARTLEY ST	1
136 B021001	RUSSELL ROBERT J & LINDA L	76 HARTLEY ST PORTLAND, ME 04103	76 HARTLEY ST	1

CBL	OWNER	OWNER MAILING ADDRESS	PROPERTY LOCATION	UNITS
Total Listed	55	UNITS	84	

107/109 PLEASANT AVE
PORTLAND, ME

OWNER:
VIRGINIA E. RODERICK ESTATE
c/o REBECCA RICKER
13 ROCKWOOD TERRACE
FAIRMOUTH, ME 04105

