



Planning &amp; Urban Development Department

*Director of Planning and Urban Development  
Jeff Levine**Inspection Services, Director  
Tammy M. Munson*

RICE GEOFFREY I  
657 CONGRESS ST 1ST FLOOR  
PORTLAND, ME 04101

**CBL: 132 J001001**  
**Located at: 197 PLEASANT AVE**

Dear Rice Geoffrey I,

#### NOTICE OF INTENT TO PROSECUTE

An evaluation of the above-referenced property on 12/19/2014 revealed that the structure and premises fails to comply with previous violation notices sent to you. Attached is a list of those violations.

The property continues to be in violation of Article V. Of the Housing Code of the City of Portland. All referenced violations shall be corrected within 5 days of the date of this notice. A re-inspection of the premises will occur on \_\_\_\_\_ at which time compliance will be required.


This is a notice of intent to prosecute. The matter is being referred to the City of Portland Corporation Counsel for legal action and possible civil penalties, as provided for in Section 1-15 of the Code, and in Title 30-A M.R.S.A. ss 4452.

Please be advised that because this is a letter of intent to prosecute, and that Section 6.2 of the Code requires that you pay a \$150.00 re-inspection fee due to the repeated violations.

This must be paid prior to \_\_\_\_\_. Failure to pay the assessed fee within 30 days shall cause the City to assess a lien against the property pursuant to Section 1-16 of the Code.

Please feel free to contact me if you have any questions or would like to discuss this matter further.

Sincerely,

  
Craig R. Messinger

**CITY OF PORTLAND  
PORTLAND FIRE DEPARTMENT**

390 Congress Street  
Portland, Maine 04101

**Inspection Violations**

<b>Owner/Manager</b> RICE GEOFFREY I		<b>Inspector</b> John Martell	<b>Inspection Date</b> 11/17/2014
<b>Location</b> 197 PLEASANT AVE	<b>CBL</b> 132 J001001	<b>Status</b> Failed	<b>Inspection Type</b> Fire Prevention-FP Routine Inspe

Code	Int/Ext	Floor	Unit No.	Area	Compliance Date
1) 9.002	Interior				12/22/2014
<b>Violation:</b>	1-HOUR FIRE DOORS ASSEMBLIES REQ; 1-HOUR FIRE DOORS ASSEMBLIES REQUIRED				
<b>Notes:</b>	1-HOUR FIRE DOORS ASSEMBLIES REQUIRED--FIRE DOORS ON ALL UNITS AND ENTRIES TO BASEMENTS NEED TO BE 1 HOUR FIRE RATED DOORS WITH SELF CLOSING HINDGES.				
2) 6.002	Interior			Basement	
<b>Violation:</b>	OPEN ELECTRICAL JUNCTION BOX; ELECTRICAL COVERS IN BASEMENT				
<b>Notes:</b>	ELECTRICAL COVERS IN BASEMENT---ALL OPEN WIRES NEED TO TERMINATE IN JUNCTION BOX OR BE REMOVED IF NOT IN SERVICE. VIOLATION THROUGHOUT BOTH BASEMENT AREAS.				
3) 55.530	Interior				
<b>Violation:</b>	LABEL UNIT DOORS; LABEL UNIT DOORS				
<b>Notes:</b>	LABEL UNIT DOORS---LABEL UNIT DOORS, SOME DOORS MISSING NUMBERS. ALSO NEED CONTRASTING NUMBER ON EXTERIOR DOOR TO IDENTIFY DWELLING FROM STREET.				
4) 55.390	Interior				
<b>Violation:</b>	PROTECTION				
<b>Notes:</b>	SPRINKLER HEAD REQUIRED OVER BOILER IN BASEMENT AND ALSO GAS FIRED HOT WATER HEATERS.				
5) 55.125	Interior				
<b>Violation:</b>	REPAIR CORRIDOR WALLS; REPAIR CORRIDOR WALLS				
<b>Notes:</b>	REPAIR CORRIDOR WALLS---HOLES IN BASEMENT STAIRS, FILL CHASES IN BASEMENT, HOLE IN MOP ROOM CLOSET IN FIRST FLOOR HALLWAY.				
6) 55.040	Interior				
<b>Violation:</b>	VERTICLE OPENING VIOLATION; VERTICLE OPENING VIOLATION				
<b>Notes:</b>	VERTICLE OPENING VIOLATION--1 HOUR FIRST SEPERATION NEEDED BETWEEN 1ST AND 2ND FLOOR HALLWAYS.				
7) 55.140	Interior			Laundry Room	
<b>Violation:</b>	HAZARDOUS AREAS				
<b>Notes:</b>	LAUNDRY ROOM ON 2ND FLOOR NEEDS 1 HOUR SEPERATION FROM MEANS OF EGRESS				
8) 1.130					
<b>Violation:</b>	1-4.4.3.2 MEANS OF EGRESS SHALL BE ILLUMINATED; ILLUMINATION OF MEANS OF EGRESS SHALL BE PROVIDED (NORMAL LIGHTING).				
<b>Notes:</b>	EXIT SIGNS SHALL BE CONTINUOUSLY ILLUMINATED AND USE AN EMERGENCY LIGHTING SOURCE. HALLWAYS WILL HAVE ADEQUATE ILLUMINATION AT ALLL TIMES.				

---

---

**CITY OF PORTLAND  
PORTLAND FIRE DEPARTMENT**

390 Congress Street  
Portland, Maine 04101

---

**Inspection Violations**

<b>Owner/Manager</b> RICE GEOFFREY I		<b>Inspector</b> John Martell	<b>Inspection Date</b> 11/17/2014
<b>Location</b> 197 PLEASANT AVE	<b>CBL</b> 132 J001001	<b>Status</b> Failed	<b>Inspection Type</b> Fire Prevention-FP Routine Inspe

9) 55.162

**Violation:** 10-1 HARDWIRED SMOKE DETECTORS REQUIRED; HARDWIRED, PHOTOELECTRIC SMOKE ALARMS WITH BATTERY BACK UP REQ IN EACH SLEEPING ROOM, IMMEDIATELY OUTSIDE OF THE SLEEPING ROOMS AND WITHIN 21 FEET AND ON EACH LEVEL WITH IN THEDWELLING UNIT. ALARMS MUST BE INTERCONNECTED WITHIN THE INDIVIDUAL DWELLING UNIT.

**Notes:** HARDWIRED, PHOTOELECTRIC SMOKE ALARMS WITH BATTERY BACK UP REQ IN EACH SLEEPING ROOM, IMMEDIATELY OUTSIDE OF THE SLEEPING ROOMS AND WITHIN 21 FEET AND ON EACH LEVEL WITH IN THEDWELLING UNIT. ALARMS MUST BE INTERCONNECTED WITHIN THE INDIVIDUAL DWELLING UNIT.

---

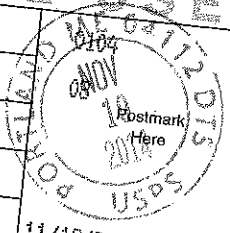
**Comments:** Received complaint that there were no fire doors on the units. Review of records in Naviline shows fire doors were writtin up in 2001. Made appointment with Adam Rice, property manager to do inspection today.

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

PORTLAND ME 04101

Postage	\$ 0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 6.49</b>



11/19/2014

Sent To  
Geoffrey Rice  
Congress St. 1st floor  
Portland, ME 04101

PS Form 3800, August 2006

See Reverse for Instructions

7012 3050 0000 050E 2T02  
5606 9815

OFFICIAL USE

**SENDER: COMPLETE THIS SECTION**

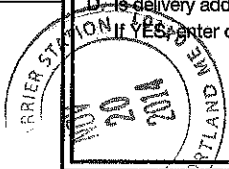
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Geoffrey Rice  
657 Congress St  
1st floor  
Portland, ME 04101

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1?  Yes  
 No



3. Service Type
- Certified Mail  Express Mail
  - Registered  Return Receipt for Merchandise
  - Insured Mail  C.O.D.
4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7012 3050 0000 5606 9815