

Inspection Services
Michael J. Nugent
Manager



Department of Urban Development
Joseph E. Gray, Jr.
Director

CITY OF PORTLAND

NOTICE OF VIOLATION

September 01, 1998

Regina M Lee
46 Caleb St
Portland Me 04102

RE: 28 CALIEB ST
CBL: 188- - C-031-001-01
DU: 2

Certified Mail Receipt # Z 564 696 096

Dear Ms Lee:

An evaluation of your property at 28 Caleb St on August 7, 1998 revealed that the structure fails to comply with Chapter 6, Article V, of the Code of Ordinances of the City of Portland, The Housing Code.

Attached is a list of the violations and copies of the referenced Code sections.


This is a notice of violation pursuant to Section 6-118 of the Code. All referenced violations shall be corrected within 30 days of the date of this notice. A reinspection of the premises will occur on OCTOBER 01, 1998 at which time compliance will be required. Failure to comply will result in this office referring the matter to the City of Portland Corporation Counsel for legal action and possible civil penalties, as provided for in Section 1-15 of the Code.

This constitutes an appealable decision pursuant to Section 6-127 of the Code. Please feel free to contact me at 874-8693, if you wish to discuss the matter or have any questions.

389 Congress St, Portland, Maine 04101 (207) 874-8700 FAX 874-8716 TTY 874-8936

Please be advised that the Portland City Council has amended the Building regulations to include a \$75.00 reinspection fee. This violation will automatically cause a reinspection at no charge. If there are any subsequent inspections, however, the \$75.00 fee will be assessed for each inspection. A copy of the amendment has been attached for your convenience.

Sincerely


Merlin Leary
Code Enforcement Officer

/s/asp

cc: Central File

389 Congress St, Portland, Maine 04101 (207) 874-8700 FAX 874-8716 TTY 874-8936

HOUSING INSPECTION REPORT

Location: 28 CALLEB ST

Housing Conditions Date: AUGUST 7, 1998

Expiration Date: OCTOBER 01, 1998

- | | |
|--|--------|
| 1. INT - 2ND FLOOR APT 2 - DINING ROOM
Missing screen | 108.30 |
| 2. INT - 2ND FLOOR APT 2 -
Missing hardwired smoke detectors | 113.50 |
| 3. INT - 2ND FLOOR APT 2 - REAR HALL/REAR BEDROOM
Ceilings inoperative light fixtures | 113.50 |
| 4. INT - 2ND FLOOR APT 2 - FRONT DOOR
Inoperative latch assembly | 108.30 |
| 5. INT - 2ND FLOOR APT 2 - FRONT STORM DOOR
Missing latch | 108.30 |

PRIORITY VIOLATION NUMBER(S):

2 3

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Regina Lee
46 Caleb St
Portland ME 04102

4a. Article Number
Z 564 696 096

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input checked="" type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery
9-11-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)
X M. Lee Giles

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

Z 564 696 096

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to <i>Regina Lee</i>	
Street & Number	
Post Office, State, & ZIP Code	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

Thank you for using Return Receipt Service