

108 EASTERN PROMENADE

MUNISO



7

October 19, 1977 ✓

Mr. John W. Myhaver  
108 Eastern Promenade  
Portland, Maine 04101

Re: 108 Eastern Promenade 3-C-8  
NCP - East End

Dear Mr. Myhaver:

The Housing Inspections Division of the Department of Neighborhood Conservation has recently completed an exterior inspection of your property in conjunction with the above referred program.

Congratulations are extended to you for the general conditions 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  
Neighborhood Conservation

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

7110



Photos  yes  no

3-0

Date 10-15-62

Proj. No.  C.I.  Ass'ts  Zone  Zone Viol

Stores        Com. In  Reg. Units  Dwl. Units

LOCATION	108 - E. 2 <sup>nd</sup> St. Prof.	COMP.	
OWNER AGENT	Richard H. Davis	PHONE	
OWNER AGENT			
OWNER AGENT			
OWNER AGENT			
OWNER AGENT			
OWNER AGENT			
OWNER AGENT			
OWNER AGENT			

Occupants	Information							Occupancy				Facilities				Violations
	LOC.	RENT	FURN	WK	1	RMS	PER.	ALL'D	LGNS	HEAT	BATH	FLSH	K-SK	H-W	Q-T	
1. C. WAIKOP	25	3-12	-	100	100	100	5	2	5	100	A	B	L	L	L	
2. R.H. DAVIS	3rd			100	100	100	6	2	9	100	A	B	L	L	L	
3.																
4.																
5.																
6.																
7.																
8.																

STRUCTURE SCHEDULE

STRUCTURE RATING

YARD

- GARBAGE & RUBBISH \_\_\_\_\_
- C. M. COMPL. \_\_\_\_\_
- DRAINAGE \_\_\_\_\_
- FLWE VIOL \_\_\_\_\_

STRUCTURE EXTERIOR

- STEPS STAIRS. PORCHES \_\_\_\_\_
- FOUNDATION \_\_\_\_\_
- WALLS \_\_\_\_\_
- WINDOWS. DOORS \_\_\_\_\_
- ROOF. BRIMS \_\_\_\_\_
- OUT BUILDINGS \_\_\_\_\_

INFESTATION

- RATS  RI  OI  I \_\_\_\_\_
- OTHER (SPECIFY) \_\_\_\_\_

EGRESS

- WALK  YES  NO \_\_\_\_\_
- OBST'N \_\_\_\_\_

Remarks \_\_\_\_\_

Portland Health Dept.

CS-5

Inspector AJO.

STRUCTURE INTERIOR

- HALL OBST'N \_\_\_\_\_
- HALL LIGHTING \_\_\_\_\_
- HALL FLOOR WALLS CEILING \_\_\_\_\_
- STAIRWAYS \_\_\_\_\_
- BIRWOODS. AIRSHAFT \_\_\_\_\_
- SELECT. WIRING \_\_\_\_\_
- HEATING CENTRAL YES  NO \_\_\_\_\_
- STACKS FLUES VENTS \_\_\_\_\_
- CHIMNEY \_\_\_\_\_
- EQUIPMENT. REPAIR \_\_\_\_\_
- PLUMBING
- SUPPLY LINE \_\_\_\_\_
- WASTE LINE \_\_\_\_\_
- BASEMENT
- GEN'L SANIT'N \_\_\_\_\_
- DAMPNESS RI \_\_\_\_\_
- STAIRS \_\_\_\_\_
- LIGHTING
- BAL' DWL. UNIT
- MIN 2' x 3' \_\_\_\_\_
- PAN-NESS RI  U \_\_\_\_\_
- WINDOW 1/12 X 8" \_\_\_\_\_
- EQUAL EGRESS YES  NO \_\_\_\_\_
- PROHIBITED COMB'N USE
- ASSOC. USE HAZARD \_\_\_\_\_
- HAZARDOUS VENTS \_\_\_\_\_

} NONE

Photos  yes  no  
 Proj. No.

3C  
 NWA-Job south

Date 10-13-62

COORDING	LOCATION 106 Eastern Prom	COMP.
SANIT.	R.M. LOC. 10 <sup>th</sup> Floor	PERM.
INFEST.	OCUPY Carl W. Walker	
BASE D.U.	OWNER ASBRY	YES
DET'D	ADDRESS	

DWELLING UNIT SCHEDULE

Occupants	Information	Occupancy	Facilities				Violations
			BATH	FLSH	K SK	H.W. CK'S	
1. Carl W Walker	25 yrs - 24881	101 632	5	8	8	0	
2.							
3.							
4.							

OVERCROWDING 63' x 7'	KITCHEN	BATH	TOILET	CROWD	EC	BED	SIT	BED	BED	OTHER	TOTAL	KITCHEN		SINK & WATER	
												PLUG. GEN'L	HEATING	SHARED MAX. 40U	SHARED MAX. 2 BU
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
NO SLEEP'G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VENTILATION 1/12 x 1/2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LIGHTING	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
WIRING	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CEILING	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
WINDOWS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
DOORS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
FLOOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Remarks:

Portland Health Dept.  
CS-7

Inspector afj

OK

OK

Photos  yes  no  
 Proj. No.

Date 10 15 62

Monday South

CHECK NO.	LOCATION <u>108 Eastern PROM</u>	PROP.
NAME.	R.V. LOC. <u>2nd Floor</u>	PERM.
INSPECT.	OCCUPY <u>Richard H. Davis</u>	
DATE D.W.	ISSUED	ITS
DET'D	AGENCY	
	ADDRESS	

DWELLING UNIT SCHEDULE

Occupants

3-C

Information

Occupancy

Facilities

Violations

LOC.	RENT	FURN.	WK. I.	BMJ	PER	ALL'D	LGRS	HEAT	BATH	FLSH	K.SK	H.W.	CK'G										
<u>1-R H Davis</u>																							
2.																							
3.																							
4.																							

	KITCHEN	BATH	TOILET	GINING	BED	BED	BED	OTHER	TOTAL
OVERCROWDING 65' - 7'	✓	✓	✓	✓	✓	✓	✓		
SO SLEEP'G									
VENTILATION 1/12 x 1/2									
COATING WIRING									
DRY AN BALLS									
CEILINGS									
WINDOWS									
DOORS									
FLOORS									

Remarks

KITCHEN SINK & WATER

SINK

SUPPLY & WASTE

FLOOR GEN'L

HEATING

STACKS, FLUES, VENTS

RT'DD VENTED, REP'D

BATHING FACILITIES

SHARED MAX. 4DU

RMS U. 1 PER 15

MIN. 7' STD HT.

VENT'LN

PROPER ACCESS

PL'G

SANIT'N

TOILET FACILITIES

SHARED MAX. 2 DU

RMS U. FLSH & LAV 1 PER 10

VENT'LN

PROPER ACCESS

PL'G

SANIT'N

INFESTATION

RATS  NI  O:  I

OTHER (SPECIFY)

EGRESS

DUAL  YES.  NO

OBST'N

Portland  
Health Dept.  
CS-7

Inspector 270

OK