

PERMIT ISSUED
 SEP 10 1987
 City Of Portland

I. GENERAL INFORMATION

Location/address of construction 43-47 Hammond Street
 1. Owner's name Portland West/High Planning Council Tel. 775-0100
 Address 150 Franklin St., Portland, ME
 2. Lessee's name _____ Tel. _____
 Address _____
 3. Contractor's name Frank's Construction Inc. Tel. 845-0430
 Address Box 717, Warrumbath, ME 04095
 4. Is this a legally recorded lot? yes no

II. DESCRIPTION OF WORK: To construct 4-family house as per plans

used permit to 1111 713
 III. BUILDING DIMENSIONS: length 40 width 50 square footage 1,000 height 20.0 #stories 2

IV. ZONE _____ Street frontage _____ Zoning board approval: no yes date _____
 Setbacks: front _____ back _____ side _____ side _____ Planning board approval: no yes date _____

V. REVIEW REQUIRED: variance _____ other _____
 site plan _____ subdivision _____ shore _____ floodplain mgmt _____
 Number of off-street parking spaces: _____ enclosed _____ outdoors _____

VI. FEES: base fee 860.00 other fees _____
 subdivision fee _____ late fee _____
 site plan review fee _____ TOTAL _____

VII. DETAILS OF WORK

1. WATER SUPPLY: <input checked="" type="checkbox"/> public <input type="checkbox"/> private	7. ELECTRICAL: service entrance size <u>200 amp</u> # smoke detectors <u>8</u>	8. CHIMNEY: # flues _____ material _____ # fireplaces _____
2. SEWER: <input checked="" type="checkbox"/> public <input type="checkbox"/> private, type _____	9. FRAMING: floor joists <u>2x10-2x12</u> size _____ max. on center <u>24"</u> ceiling joists <u>2x8</u> rafters <u>2x8</u> studs <u>2x6</u> wall studs <u>1x6 2x4</u>	11. BEDROOM WINDOWS height _____ width _____ sill height _____ egress window? yes <input type="checkbox"/> no <input type="checkbox"/>
3. HEAT: type <u>forced fuel oil</u> rise _____	10. If 1-story building w/masonry walls: wall thickness _____ height _____	
4. FOUNDATION: type <u>concrete</u> thickness <u>8</u> footing <u>12x16</u>		
5. ROOF: type _____ pitch _____ covering _____ load <u>asphalt</u>		
6. PLUMBING: SPRINKLER SYSTEM? yes <input type="checkbox"/> no <input type="checkbox"/>		
VIII. OFFICE USE: TAX MAP # _____ LOT # _____ VALUE/STRUCTURE _____ PERMIT EXPIRATION _____	IX. NEW OR PHASED SUBDIVISION REFERENCE Name _____ Lot _____ Block _____	

CODE: _____ If other, explain _____ Seasonal Condominium Apartment
 X. PROPOSED USE: 1040 4 family

XI. PAST USE: _____
 XII. OWNERSHIP: PUBLIC PRIVATE

XIII. EST. CONSTRUCTION COST: 11,800 XIV. GR. SQ. FT. OF LOT _____
 BUILDING _____

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY: # NEW DWELLING UNITS WITH: <u>1</u> BDRM <u>2</u> BDRMS <u>3</u> BDRMS # EXISTING DWELLING UNITS WITH: _____	XVI. # RESIDENTIAL UNITS: # NEW DWELLINGS _____ # EXISTING DWELLINGS _____ TOTAL RESIDENTIAL UNITS _____
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APPROVALS BY: DATE _____
 BUILDING INSPECTION - PLAN EXAMINER _____
 ZONING: _____
 C.E.O. _____
 FIRE DEPT. _____

MISCELLANEOUS
 Will work require disturbing of any tree on a public street? _____
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? _____

NOTES TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical, and mechanicals.

District No. <u>7</u>	XVII. SIGNATURE OF APPLICANT <u>[Signature]</u> PHONE # <u>845-1430</u> TYPE NAME OF ABOVE: <u>Frank's Construction</u> <u>1</u> <u>2</u> <u>3</u> <u>4</u>
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APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date August 25, 19 87
 Receipt and Permit number 2229

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Hammond Street 43-47
 OWNER'S NAME: Portland Peninsula Family ADDRESS: 155 Brackett Street

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>130</u>	12.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>30</u>	5.00
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground <u>X</u> Temporary _____ TOTAL amperes <u>400</u> ..	3.00
METERS: (number of) <u>5</u>	6.00
MOTORS: (number of)	2.50
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____ <u>4</u> _____ Water Heaters _____ <u>4</u> _____	
Cook Tops _____ Disposals _____ <u>4</u> _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>12</u>	18.00
MISCELLANEOUS: (number of)	
Branch Panels <u>4</u>	4.00
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 39 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery <u>4</u>	2.00
Emergency Generators _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE:
	TOTAL AMOUNT DUE: <u>52.50</u>

INSPECTION:

Will be ready on _____, 19__ ; or Will Call X

CONTRACTOR'S NAME: Forrest Elec
 ADDRESS: 121 Holm Avenue
 TEL.: 772-5257
 MASTER LICENSE NO.: 03512 SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

ELECTRICAL INSTALLATIONS —

Permit Number 22256

Location 43-470 Hammond St

Owner Portland Permittance Family

Date of Permit 8/25/87

Final Inspection D. P. West

By Inspector D. P. West

Permit Application Register Page No. 8

400 Amp App'd - 6/9/88

INSPECTIONS: Service 100 Amp by Rune (Temp)

Service called in 11/5/87

Closing-in 2/8/88 by Rune

PROGRESS INSPECTIONS: 2/15/88, Cancelled

8/5/88, M.O.H.

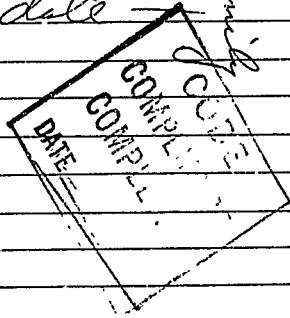
DATE:

REMARKS:

10/14/87 Called CM&P for Temporary Service

2/8/88 work may be closed in

8/5/88 Copy of O signed this date





APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date August 25, 19 87
 Receipt and Permit number 22256

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Hammond Street 43-47
 OWNER'S NAME: Portland Peninsula Family ADDRESS: 155 Brackett Street

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>130</u>	12.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>30</u>	5.00
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground <u>X</u> Temporary _____ TOTAL amperes <u>100</u> ..	3.00
Overhead _____ Underground <u>X</u> Temporary _____ TOTAL amperes <u>400</u> ..	6.00
METERS: (number of) <u>5</u>	2.50
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____ <u>4</u> _____ Water Heaters _____ <u>4</u> _____	
Cook Tops _____ Disposals _____ <u>4</u> _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>12</u>	18.00
MISCELLANEOUS: (number of)	
Branch Panels <u>4</u>	4.00
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimm'ng Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery <u>4</u>	2.00
Emergency Generators _____	
INSTALLATION FEE DUE: _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____	
FOR REMOVAL Or A "STOP ORDER" (304-16.b) _____	
TOTAL AMOUNT DUE: <u>52.50</u>	

INSPECTION:
 Will be ready on _____, 19__ ; or Will Call _____ X
CONTRACTOR'S NAME: Forrest Elec
ADDRESS: 121 Holm Avenue
TEL.: 772-5257
MASTER LICENSE NO.: 03512 **SIGNATURE OF CONTRACTOR:**
LIMITED LICENSE NO.: _____ *Forrest M. Marston*

ELECTRICAL INSTALLATIONS —

Permit Number 2 2256

Location 43-470 Hammond St

Owner Paul & Len Pennington

Date of Permit 8/25/87

Final Inspection _____

By Inspector D. P. Wood

Permit Application Register Page No. 8

INSPECTIONS: Service 400 Amp by Agno - 6/9/88
100 Amp by Russ (Temp)

Service called in 11/5/87

Closing-in 2/8/88 by Russ

PROGRESS INSPECTIONS: 2/5/88 Cancelled

8/5/88 M.O.H.

DATE:

REMARKS:

11/14/87

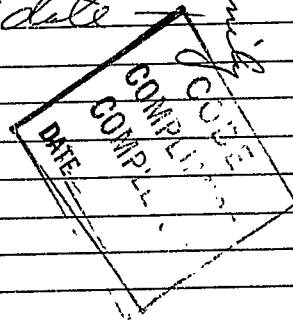
Called C.M.P. for temporary service

2/8/88

work may be closed in

8/5/88

C of O signed this date



Family



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION

Issued to **PORTLAND WEST NEIGHBORHOOD 43-43 HAMMOND STREET** Issue **AUGUST 3, 1988**

This is to certify that the building, premises, or part thereof, at the above location, built—altered—changed as to use under Building Permit No. _____, has had final inspection has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

ENTIRE

Limiting Conditions:

4 FAMILY

This certificate supersedes
certificate issued.

Approved:

8-3-88
(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

DR

I. GENERAL INFORMATION
 Location/address of construction 43-47 National Street
 1. Owner's name Portland West Main Planning Council Tel. 775-0105
 Address 155 Brackett St., Portland, ME
 2. Lessee's name _____ Tel. _____
 Address _____
 3. Contractor's name Laukia Construction Inc. Tel. 846-6436
 Address Box 717, Farmington, ME 04096
 4. Is this a legally recorded lot? yes x no _____

II. DESCRIPTION OF WORK: To construct 4-family house as per plans

send permit to call #3
 III. BUILDING DIMENSIONS: length 40 width 50 square footage 4,000 height 28'5" #stories 2
 IV. ZONE _____ Street frontage _____ Zoning board approval/no yes date _____
 Setbacks: front _____ back _____ side _____ side _____ Planning board approval/no yes date _____
 V. REVIEW REQUIRED: variance _____ other _____ Number of off-street parking spaces:
 site plan _____ subdivision _____ shore _____ floodplain mgmt _____ enclosed _____ outdoors _____
 VI. FEES:
 base fee 260.00 other fees _____
 subdivision fee _____ late fee _____
 site plan review fee _____ TOTAL _____

VII. DETAILS OF WORK
 1. WATER SUPPLY: public private
 2. SEWER: public private, type _____
 3. HEAT: type hot water gas
 4. FOUNDATION: type concrete
 thickness 8 footing 8x16
 5. ROOF: type _____ pitch _____
 covering _____ load asphalt
 6. PLUMBING:
 SPRINKLER SYSTEM? yes no
 7. ELECTRICAL:
 service entrance size 200 amp
 # smoke detectors 8
 8. CHIMNEY: # flues _____
 material _____ # fireplaces _____
 9. FRAMING: floor joists 2 -2x12 size max. on center 24"
 ceiling joists crossed rafters 2x12s
 studs 2x6 ext. wall studs 1x6 2x4
 10. if 1-story building w/masonry
 walls:
 wall thickness _____
 height _____
 11. BEDROOM WINDOWS
 height _____ width _____
 sill height _____
 egress window? yes no

VIII. OFFICE USE:
 TAX MAP # _____
 LOT # _____
 VALUE/STRUCTURE _____
 PERMIT EXPIRATION _____
 IX. NEW OR PHASED SUBDIVISION REFERENCE
 Name _____
 Lot _____
 Block _____

CODE _____ If other, explain _____
 X. PROPOSED USE 4 & 4 family Sectional _____ Condominium _____ Apartment _____
 XI. PAST USE _____
 XII. OWNERSHIP _____ PUBLIC _____ PRIVATE _____

XIII. EST. CONSTRUCTION COST: 160,000 XIV. GROSS SQ. FT. OF LOT _____
 BUILDING _____

COMPLETE XV. AND XVI. ONLY IF THE NUMBER OF UNITS WILL CHANGE
 XV. RESIDENTIAL BUILDINGS ONLY: # BEDROOMS: 1 BDRM. 2 BDRMS 3 BDRMS
 # NEW DWELLING UNITS WITH _____
 # EXISTING DWELLING UNITS WITH _____
 XVI. # RESIDENTIAL UNITS: # NEW DWELLINGS _____
 # EXISTING DWELLINGS _____
 TOTAL RESIDENTIAL UNITS _____

APPROVALS BY: _____ DATE _____
 BUILDING INSPECTION _____ PLAN EXAMINER _____
 ZONING: _____
 C.E.O. _____
 FIRE DEPT. _____
 MISCELLANEOUS
 Will work require disturbing of any tree on a public street? _____
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? _____

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical, and mechanicals.

District No. 7
 XVII. SIGNATURE OF APPLICANT [Signature] PHONE # 846-6936
 TYPE NAME OF ABOVE Es. Porter 1 2 3 4

NOTES

10-6-87 Hole being dug for foundation.

10-28 Foundation in place and within stated dimensions.

11-10-87 1st story shell almost done

12-10-87 2nd story framed

12-22 Roof 1/2 installed

12-31 All enclosed with plywood.

1-11-88 Second floor windows in place

1-25 Windows installation completed

2-8-88 - Plum. Plat.

Frame 214 to close in ca

3-10-88 - 10/0K ad
C-9889 - Committee
in progress about
C-9889. C.K. All

Alteration

Garage

Dwelling

Approved

Date of permit

Owner

Location

Permit No.

APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION PORTLAND, MAINE Oct. 7, 1986

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION . . . 43-47 Hammond St. Fire District #1 #2

1. Owner's name and address City of Portland, Me. Telephone

2. Lessee's name and address ^{FUTURE OWNER} Portland West Neighborhood Planning Council Telephone . . . 775-0105

3. Contractor's name and address 155 Brackett St. Telephone

Proposed use of building ~~3 family~~ 4 FAMILY No. of sheets

Last use No. families

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$

FIELD INSPECTOR—Mr. @ 775-5451

Appeal Fees \$
Site plan 50.00
Base Fee
Late Fee
TOTAL \$

site plan ~~review~~ review
To construct 1 building 4,352 sq ft to be used
for 4 family for low income residential

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber—Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor 2nd 3rd , roof
On centers: 1st floor 2nd 3rd , oof
Maximum span: 1st floor 2nd 3rd , roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS
BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street?
ZONING:
BUILDING CODE: Will there be in charge of the above work a person competent
Fire Dept.: to see that the State and City requirements pertaining thereto
Health Dept.: are observe?
Others:

Signature of Applicant Michael R. Charak Phone # same
Type Name of above Michael R Charak for 1 2 3 4
Portland West NEHD Planning Council Other
and Address

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or
 Pls: Portland, Maine
 Street: 42-77, Hammond
 Subdivision Lot #:
PROPERTY OWNERS NAME
 Last: Portland West Neighborhood Housing
 First: Council
 Applicant
 Name: 155 Brackett St
 Mailing Address of
 Owner/Applicant
 (If Different): Portland Me

PORTLAND PERMIT # 2,493 TOWN COPY
 Fee
 \$ 9 FEE Double Fee
 Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # _____
 Date: 9.2.87

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

[Signature] Date: 9/2/87
 Signature of Owner/Applicant

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

JUN 14 1988

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for:	Type Of Structure To Be Served:	Plumbing To Be Installed By:
<input type="checkbox"/> NEW PLUMBING <input type="checkbox"/> RELOCATED PLUMBING	<input type="checkbox"/> SINGLE FAMILY DWELLING <input type="checkbox"/> MODULAR OR MOBILE HOME <input type="checkbox"/> MULTIPLE FAMILY DWELLING <input type="checkbox"/> OTHER - SPECIFY: _____	<input type="checkbox"/> MASTER PLUMBER <input type="checkbox"/> OIL BURNERMAN <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>93011</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bath (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Dental Cuspidor	1	Garbage Disposal
		Bidet	1	Laundry Tub
		Other: _____	1	Water Heater
Number of Hook-Ups & Relocations				
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			3	Total Fixtures
			\$ 9.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 9.	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE