



63 ATLANTIC STREET

CITY OF PORTLAND, MAINE

Application for Permit to Install Wires

Permit No. 996
 Issued 11-30, 1973

Portland, Maine

To the City Electrician, Portland, Maine:

The undersigned hereby applies for a permit to install wires for the purpose of conducting electric current, in accordance with the laws of Maine, the Electrical Ordinance of the City of Portland, and the following specifications:

(This form must be completely filled out — Minimum Fee, \$1.00)

Owner's Name and Address W.M. Cimpster Tel.
 Contractor's Name and Address Cummins Tel.
 Location 63 Atlantic Use of Building Shedding
 Number of Families Apartments Stores Number of Stories ✓
 Description of Wiring: New Work Additions Alterations

Pipe Cable ✓ Metal Molding BX Cable Plug Molding (No. of feet)
 No. Light Outlets Plugs Light Circuits Plug Circuits

FIXTURES: No.
 SERVICE: Pipe Cable ✓ Underground No. of Wire 3 Size #2
 METERS: Relocated Added Total No. Meters

MOTORS: Number Phase H. P. Amps Volts Starter
 HEATING UNITS: Domestic (Oil) No. Motors Phase H.P.
 Commercial (Oil) No. Motors Phase H.P.
 Electric Heat (No. of Rooms)

APPLIANCES: No. Ranges Watts Brand Feeds (Size and No.)
 Elec. Heaters 1 Watts 4500/4500
 Miscellaneous Watts Extra Cabinets or Panels

200
150
3 Transformers Air Conditioners (No. Units) Signs (No. Units)
 Will commence 11/30, 1973 Ready to cover in 1973 Inspection 12/3, 1973
 Amount of Fee \$ 3.00 Signed [Signature]

DO NOT WRITE BELOW THIS LINE

SERVICE ✓ METER ✓ GROUND ✓
 VISITS: 1 2 3 4 5 6
 7 8 9 10 11 12

REMARKS:

INSPECTED BY [Signature] (OVER)

LOCATION *63. Atlantic. H.*
 INSPECTION DATE *12/21/63*
 WORK COMPLETED
 TOTAL NO. INSPECTIONS
 REMARKS

FEEES FOR WIRING PERMITS EFFECTIVE JULY 31, 1963

WIRING	
1 to 30 Outlets	\$ 2.00
31 to 60 Outlets	3.00
Over 60 Outlets, each Outlet05
(Each twelve feet or fraction thereof of fluorescent lighting or any type of plug molding will be classed as one outlet).	
SERVICES	
Single Phase	2.00
Three Phase	4.00
MOTORS	
Not exceeding 50 H.P.	3.00
Over 50 H.P.	4.00
HEATING UNITS	
Domestic (Oil)	2.00
Commercial (Oil)	4.00
Electric Heat (Each Room)75
APPLIANCES	
Ranges, Cooking Tops, Ovens, Water Heaters, Disposals, Built-in Dishwashers, Dryers, and any permanent built-in appliance — each unit	1.50
MISCELLANEOUS	
Temporary Service, Single Phase	1.00
Temporary Service, Three Phase	2.00
Circuses, Carnivals, Fairs, etc.	10.00
Meters, relocate	1.00
Distribution Cabinet or Panel, per unit	1.00
Transformers, per unit	2.00
Air Conditioners, per unit	2.00
Signs, per unit	2.00
ADDITIONS	
5 Outlets, or less	1.00
Over 5 Outlets, Regular Wiring Rates	



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED
013722
JUN 25 1952
CITY of PORTLAND

Portland, Maine, June 25, 1952

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 63 Atlantic St. Use of Building Dwelling No. Stories 1 1/2 ~~2~~ New Building
Name and address of owner of appliance William Compton, 63 Atlantic St. Existing " "
Installer's name and address Woods Bros, 41 Portland Street Telephone
Bruno Oil & Service

General Description of Work

To install oil burning equipment with existing hot water heat

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to burnable material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

Name and type of burner Quiet Heet Labeled by underwriter's laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom
Type of floor beneath burner cement
Location of oil storage basement Number and capacity of tanks 1-275 Gal.
If two 275-gallon tanks, will three-way valve be provided?
Will all tanks be more than five feet from any flame? yes How many tanks fire proofed?
Total capacity of any existing storage tanks for furnace burners none

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to wood or combustible material from top of appliance
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED:

W. C. Mills
6-25-52

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

William Compton
~~Woods Bros~~
Bruno Oil & Service

Signature of Installer

By: Bruno Oil Service Co.
W. C. Mills

INSPECTION COPY



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

PERMIT ISSUED
11-08

Class of Building or Type of Structure: Third Class

Portland, Maine. September 22, 1939

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~install~~ the following building structure-equipment in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 63 Atlantic Street Within Fire Limits? yes Dist. No. 3
Owner's or Lessee's name and address Mrs. Stella Sweater, 63 Atlantic St. Telephone _____
Contractor's name and address W. T. Vassar, 95 Sheridan St. Telephone 3-7996
Architect _____ Plans filed no No. of sheets _____
Proposed use of building dwelling house No. families 1
Other buildings on same lot _____
Estimated cost \$ 50. Fee \$.50

Description of Present Building to be Altered

Material wood No. stories 1 1/2 Heat steam Style of roof _____ Roofing _____
Last use dwelling house No. families 1

General Description of New Work

To rebuild front chimney, entire,

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Is any plumbing work involved in this work? _____
Is any electrical work involved in this work? _____ Height average grade to top of plate _____
Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
To be erected on solid or filled land? _____ earth or rock? _____
Material of foundation concrete Thickness, top _____ bottom _____ cellar _____
Material of underpinning _____ Height _____ Thickness _____
Kind of Roof _____ Rise per foot _____ Roof covering _____
No. of chimneys 1 Material of chimneys brick of lining tile
Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____
Framing Lumber—Kind _____ Dressed or Full Size? _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Material columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O. C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.
Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
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 _____
Total number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

INSTRUCTION COPY

Signature of owner Mrs. Stella Sweater
By William Vassar

50450



(A) APARTMENT HOUSE ZONE

Permit No. 15411

APPLICATION FOR PERMIT

AUG 18 1928

Class of Building or Type of Structure Third Class
Portland, Maine, August 15, 1928

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect alter install the following building-structure-equipment in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 63 Atlantic Street Ward 1 Within Fire Limits? Yes Dist. No. 3
Owner's or Lessee's name and address Mrs. Estella Sweetser, 63 Atlantic St. Telephone _____
Contractor's name and address S. E. Cummings, 97 Congress St. Telephone F 6270-21
Architect's name and address _____ No. families 1
Proposed use of building Dwelling house and 2 car garage
Other buildings on same lot none

Description of Present Building to be Altered

Material Wood No. stories _____ Heat _____ Style of roof _____ Roofing _____
Last use Dwelling house and 2 car garage No. families 1

General Description of New Work

To remove entryway connection between two car garage and dwelling house and rebuild the same making it two feet deeper. Present entry is about 4' x 6' **NO OPERATION BEFORE LATHING OR CLOSING-IN IS WAIVED.**
will be 4' x 6'

CERTIFICATE OF OCCUPANCY REQUIREMENT IS FULFILLED.

Details of New Work

Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
To be erected on solid or filled land? _____ earth or rock? _____
Material of foundation posts Thickness, top _____ bottom _____
Material of underpinning _____ Weight _____ Thickness _____
Kind of roof flat (shed) Roof covering Asphalt roofing Class D Unad. Lab.
No. of chimneys _____ Material of chimneys _____ of lining _____
Kind of heat _____ Type of fuel _____ Distance, heater to chimney _____
If oil burner, name and model _____
Capacity and location of oil tanks _____
Is gas fitting involved? _____ Size of service _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Material columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O.C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.
Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
Maximum span: 1st floor _____, 2nd _____, 3rd _____, height? _____
If one story building with masonry walls, thickness of walls? _____

If a Garage

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

Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no
Plans filed as part of this application? yes No. sheets 1 Fee \$.25
Estimated cost \$ 5.
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? Yes

Signature of owner By Stephen E. Cummings
Mrs. Estella Sweetser

APPROVED
INSPECTION COPY
Oliver P. Simpson
CITY ENGINEER

City of Portland, Maine -- Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 63 Atlantic St		Owner: Rothman, Leslie		Phone:		Permit No: 960075	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Rainbow Construction		Address: P.O. Box 894 Ptld, ME 04104		Phone: 799-3051		Permit Issued: FEB - 7 1996	
Past Use: 1-fam		Proposed Use: Same w/int reno		COST OF WORK: \$ 10,000.00		PERMIT FEE: \$ 70.00	
Proposed Project Description: Make Interior Renovations		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: 93 Type: EB Signature: [Signature]		Zone: CBL: 016-B-020	
		Signature: [Signature]		Signature: [Signature]		Zoning Approval: to remain 1-family 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"/>	
Permit Taken By: Mary Gresik		Date Applied For: 06 February 1996		Signature:		Date:	

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
 - Building permits do not include plumbing, septic or electrical work.
 - 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..
- 15 YC 15-0116/00350

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: Craig Cooper ADDRESS: _____ DATE: 06 Feb 96 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED
FEB - 7 1996
CITY OF PORTLAND

Zone: CBL: 016-B-020

Zoning Appeal:
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: _____

CEO DISTRICT 1
m. leary

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8793, FAX: 874-8716

Location of Construction: 63 Atlantic St		Owner: Rothman, Leslie		Phone:		Permit No 960075	
Owner Address:		Lease/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Rainbow Construction		Address: P.O. Box 394 Portland, ME 04104		Phone: 799-3051		Permit Issued: FEB - 7 1996	
Past Use: 1-fam		Proposed Use: Same w/ int renos		COST OF WORK: \$ 10,000.00		PERMIT FEE: \$ 70.00	
Proposed Project Description: Make Interior Renovations		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>A</i> Type: <i>5B</i> <i>BOC 993</i>		Zone: <i>2-1</i> CBL: 016-b-020	
		Signature:		Signature: <i>[Signature]</i>		Zoning Approval: <i>for remain</i>	
Permit Taken By: <i>Mary Grasik</i>		Date Applied For: <i>06 February 1996</i>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Special Zone or Review: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Action: Approved <input type="checkbox"/> Approved with Condition: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature:		Date:		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	

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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.

15 YC 15-0116/00350

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* ADDRESS: DATE: *06 Feb 96* PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED	
FEB - 7 1996	
CITY OF PORTLAND	
Zone: <i>2-1</i>	CBL: 016-b-020
Zoning Approval: <i>for remain</i>	
Special Zone or Review: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan major <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 type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
Date: <i>[Signature]</i>	
CEO DISTRICT <input type="checkbox"/>	

PLUMBING APPLICATION PROPERTY ADDRESS

Department of Human Services
Division of Health Engineering
(207) 289-3823

Form of Plantation: 2271
 Street Subdivision of #: 63 Atlantic COM. NTS
 Applicant Name: [Handwritten Name]
 Mailing Address of Owner/Applicant (if different): 42 KUMHRES
 5697 TOWN COPY
 L.P. # 241
 Double Fee Charged

Owner Applicant Statement:

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

[Signature]
 Date: 3/28/96

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

[Signature]
 Local Plumbing Inspector Signature
 Date: 7-2-96

Caution: Inspection Required

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1 <input type="checkbox"/> NEW PLUMBING	1 <input type="checkbox"/> SINGLE FAMILY DWELLING	1 <input type="checkbox"/> MASTER PLUMBER
2 <input type="checkbox"/> RELOCATED PLUMBING	2 <input type="checkbox"/> MODULAR OR MOBILE HOME	2 <input type="checkbox"/> OIL BURNERMAN
	3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3 <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC
	4 <input type="checkbox"/> OTHER - SPECIFY	4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5 <input type="checkbox"/> PROPERTY OWNER

LICENSE # 12709

Hook-Up & Piping Relocation Maximum of Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK UP to public sewer in these cases where the connection is not regulated and inspected by the local Sanitary District		1	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR HOOK UP to an existing subsurface wastewater disposal system		Urinal		Sink
		Drinking Water		Wash Basin
PIPING RELOCATION of sanitary lines, drains and piping without new fixture		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
Number of Hook-Ups & Relocations		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Hook-Up & Relocation Fee		Bidet		Laundry Tub
		Other		Water Heater
TRANSFER FEE (\$6.00)	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
				Total Fixtures
				Fee
				Hook-Up Fee
				Permit Fee (Total)