

CITY OF PORTLAND, MAINE Application for Permit to Install Wires

	Permit No. 580 49
To the City El	Portland, Maine Cugues 8 10.9
To the City Electrician, Portland, Maine:	
tric current, in accordance with the laws of A and the following specifications:	rmit to install wires for the purpose of conducting elec- laine, the Electrical Ordinance of the City of Portland,
(I IIIS form much k =	
Owner's Name and Address Claus OF	My made out — Minimum Fee, \$1.00)
Name and A Li FIAL ACT	34.18
- seminary & coccarile	
Number of Families Apartments	Use of Building Zaturdy Stores
Description of Wiring: New Work	Additional Number of Stories
	Alterations
Pipe Cable Metal Molding	KY Cohio
NO. Light Outlets Place	Light Circuits Plug Molding (No. of feet)
FIXTURES: No.	Plug Circuits
SERVICE: Pipe Cable Line	Fluor, or Strip Lighting (No. feet) derground No. of Wires 3
Add t	Size of A
MOTORS: Number Phase	Total No. Meters 2 4/2/1/4 alum
HEATING UNITS: Domestic (Oil)	Volts Starter
Comment Line	No. 34
Electric Heat (No. of P.	No. Motors Phase H.P
Watts	
Elec. Heaters Watts	Brand Feeds (Size and No.)
Miscellaneous Watts	Free Co. L.
Tansformers Air C	Extra Cabinets or Panels
The later of the l	g (i.i. Olits)
V	196.7.
	Signed Will Sulan 1765
	1 11 100
RVICE	BELOW THIS LINE TO FEBRUARS
SITS. I	GROUND L
2 3	. 4
8 9 MARKS:	10
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133	NSPECTED BY The Heading
	(OVER)
	(OTAIR)

C8 193

FRANK M. HDBERTY, JR.

HAROLD E. TRAHEY DEPUTY COMMISSIONER



ABBISTANT DIRECTOR

CHARLES F. ROGAN

STATE OF MAINE

Insurance Department

AUGUSTA, MAINE 04330

August 1, 1969

Mr. and Mrs. Robert E. Davis 56 Atlantic Street Portland, Maine

Dear Mr. and Mrs. Davis:

Re: Boarding Home

In accordance with Title 25, Revised Statutes of 1964, a Supervising State Fire Inspector recently inspected your property and found the following conditions in violation of the statutes governing the fire laws of this State, as indicated below:

1. Provide Underwriters Laboratories approved 10-B,C rated fire extinguisher for kitchen.

2. All over-sized fuses to be removed. No fuse larger than 15 amp to be used on #14 R. C. wire.

Please advise this office in writing when such viciations of the fire laws have been corrected in order that this office may advise the Commissioner of the Department of Health and Welfare that your property complies with the statutory provisions relating to fire safety.

By direction of the Insurar e Commissioner

Charle Hologan

WHRtcag

CC: Health & Welfare Dept. Chief Joseph Crome Portland Building Inspector Director

ALWAYS PREVENT FIRE ALL WAYS

CITY OF PORTLAND HEALTH DEPARTMENT



Loc. 56 Atlantic Street Loc w/i S Bldg x Fire x Elec Other Issued June 2, 1965 Expires July 2, 1965

Claire Foundil 56 Atlantic Street Fortland, Maine

HOUSING DIVISION

Dear Sir:

On April 1, 1963 an examination was made of the premises located at 56 Atlantic Struct, Fortland, Maire

Non-compliance with the ordinances relating to housing conditions was found as detailed below.

In accordance with the provisions of the above ordinance, you are hereby ordered to correct these defects according to specifications within the time limits allowed. Failure to comply with this notice will necessitate legal action.

Some repairs or improvements required will necessitate permits which are to be obtained from the Building Inspector, Health, Fire or other City Departments. These must be obtained before the work is started.

If any additional information is desired, visit or telephone the Housing Supervisor at this Office. Tel. 774-8221, extension 226.Kindly notify this office as soon as all corrections have been completed.

Very truly yours,
Boris A. Vanadzin, M.D.
Health Director

By
Housing Supervisor

VIOLATIONS & SPECIFICATIONS
Responsibility of Owner or Agent ** Responsibility of Occupant

Sepair and put in good order all dilapidated and immerdous parts of the structure as follows:

hepair or replace the loose or missing bricks, paint up the loose joints on the foundation on the left side of the structure.

b. Semir or replace the loose, som, dike ideated and has adone or missing demonstration the last side of the structure.

in the last side of the structure.

To hopely or replace the loose, or missing planter of the walls of the roof depair or replace the loose, or missing planter of the walls of the roof.

hall from the first to the second floor. Sepois or replace the loose, were, dila idated and hazardous trends on the stairs of the basement.

MARTHE

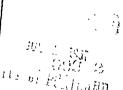
a. Ensball a closm-out door at the back of the front chimney.

The above estationed conditions are in violation of Chapter 307 of the Numicipal Code of the Sity of Fortland, and must be corrected on an enform July 2, 1965.



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT



7 0 . •	,	_	CAUL	MENT	7. 334
10 the INSPECTO	OR OF BUILDINGS, FOR	ortland, Maine	July 1, 1	957	now Redank
ance with the r	OR OF BUILDINGS, POR med hereby applies for a p f Maine, the Building Cod ntic St. Owner of appliance Em	TLAND, ME.			" of Fireligh
24103 0	T Main Tornes Torn A	A *.	the co	•	
Location 58 Atla	ntic St. Us owner of appliance Em	e of the City of	f Portland	ting, cooking or .	
Name and address as	The Carte	in of D	ana, una th	e following specif	ower equipment in accord
Installer's page	owner of appliance Em	or Building	Dwel_ing		
and a	ddress Carroll c	The Chase	58 Atlanti	···· ·· No. Storie	S . New Build:
		ann aford,	4 Widgery w	3020	Existing "
To install Lennox v	owner of appliance Em ddress Carroll c Gene warm air oil burning	ral Dosonia.	•	Telep	hone 2-39^3
***************************************	alr oil burning	g unit trans	non of Work		
***************************************	***************************************		raceing old r	urnacel	
Locati	Gene Warm air oil burning IF HEA basement Any b mable material, from top of	*********** ****** ***			у.
Location of appliance	oasement IF HEA	TER, OR PO	William -		
If so, how protected? Minimum distance to burn From top of smoke pipe Size of chimney flue 8x If gas fired by	Any b	urnable materia	WER BOILER		
Minimum distance to burn From top of smoke pipe :: Size of chimney flue 8x1 If gas fired, how vented? Will sufficient for	nahla	·····	i in floor surface o	r beneath? no	
From top of smoke pine	18" material, from top of	appliance	· ····· Kind of fuel	? 011	
Size of chimney flue 8x	lo From front o	f anulisms	ising top of furna	e 4" with n	
If gas fired, how vented?	Other connecti	One 4-	Pr4 From s	idas	otective shield.
From top of smoke pipe Size of chimney flue 8xi If gas fired, how vented? Will sufficient fresh air le su	***************************************	ons to same flu	enone	des or back of ap	pliance over
Size of chimney flue 8xi If gas fired, how vented? Will sufficient fresh air le st Name ad type of burner Will control to be always in all	applied to the appliance to		Rated maxim	******** ************ ******	
Name ad type of t	17-mile (0)	msure proper an	id safe combusti-	im demand per ho	our
od type of human 7	Innua In	OTT	Houstion	7 708	
tor be always in a	ttend		z-K		
Low water shut off Will all tanks be more than five Total capacity of	ttendance? Do .concrete	es oil suppl	Labelled by unc	derwriterat	ories? Yes
Location of oil storagebas Low water shut off Will all tanks be more than five Total capacity of any existing	concrete	on supply lin	e feed from top	or botte	ories? yes
Low water shut off	COMMENT.	Size of v	ent pipe 1	表"	? bottom
Will all tanks be more than	Maka	· · · Number	and capacity of a	1-27	5. gal.
Total capacity of any and it	: feet from any flame? v	······································		anksenisting	storage tank
	O THING IOF HITTON		tanks on	4 -	**********
Will all tanks be more than five Total capacity of any existing a Location of appliance If so, how protected? Skirting at bottom of appliance? From front of appliance Size of chirance a	Turnace [ourners	······································	ed?	
If so 1	IF COO	NG APPLIA		***************************************	
Skirting at bottom of appliance?		mate mate	rial in floor succe	e or house	
from front of appliance	Distance to	Combana	Height of Legs, if	anu deneath?	*******
Size of chinney flue	From sides and	baal-	aterial from top of	annti-	***************************************
Skirting at bottom of appliance? From front of appliance Size of chimney flue Is hood to be provided? If gas fired, how vented?	Other connections to	oack	··· ··· From top	apphance?	***************************************
If gas fired, how vented?	If so, home	same flue		or smokepipe	* 10 m
Size of chinney flue Is hood to be provided? If gas fired, how vented? MISCELT	10W V	ented ?	For		***************************************
Is hood to be provided? If gas fired, how vented? MISCELI	ANEOUS EQUIPMEN	Rat	ed maximum	or gravity?	
***************************************	EQUIPMEN	T OR SPEC	TA-	and per hour	
MISCELI		57-150	IAL INFORMA	TION	
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mount of fee unclosed? 2.00.		***********		••••••	
mount of fee unclosed	***************************************				
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	one neater, etc.,	50 cents additi	onal s		
P. 21 1 -	X		onal for each add	itional heater ate	** ****
mount of fee unclosed? 2.00	ン・ー				, in same
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INSPEC

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FILL IN AND SIGN WITH INK

APPLICATION FOR PERIOT FOR HEATING, COOKING OR POWLIN EQUIPMENT

	Port	land, Maine, August	25, 1949	1.1-	W. A. Bass
To the INSPECTOR OF BI	UILDINGS, PORTLA	ND. MAINE	······································		1 of Postin
ance with the Laws of Maine.	b. applies for a pern	nit to install the follow	ing heating, c	ooking or power	equipment in accor
Location >0 Atlantic	Street		•	"8 "Profications.	2 2 0 4000)
Name and address of owner of Installer's name and address	ol appliance George	Building Dwelling)g	No. Stories	New Buildin
Installer's name and address	H. G. Pride	ge Bartlett, 58	Atlantic :	St.	"Existing "
Installer's name and address		433 Federal St.		Telephone	2 - 2866
	Gener	al Housenima:			
To ins oil hurning e	acui omert in an-				
To ins'. : oil burning e		necoton with exi	sting hot	air heat	
Location of appliance or any	IF HEAT	TER, OR POWER	BOILER	41 · 144 · 1	
Location of appliance or source If wood, how protected?	ce of heat		Type of floor	henesth on the	
If wood, how protected?				Vind co	ce
Minimum distance to wood or From top of smoke pipe	r combustible materia	ıl, from top of applian	ce or casing to	op of the Kind of 1	uel
From top of smoke pipe	From front of a	ppliance	From sides or	book of turnace	
If one fired have a second	Other connect	ions to same flue	- 5111 51((6 0)	back of applianc	:e
Size of chimney flue			d maximum		
	7	E OIL DEIDAGE	a maximum (eniand per hour	
Name and type of burner	AB	OIL BURINER			
Name and type of burner	endance?	Label	led by underv	vriter's laboratori	es? Ves
Type of moor beneath hurner			"- re-in top m	Dottom of fant-) hatt
Location of oil storage haras					
Location of oil storage baser If two 275-gallon tanks, will thr Will all tanks be more than five	100 man	Number and	l capacity of	tanks 1-275	ral .
Will all tanks be more than for	ee-way valve be prov	/ided?			Per 3 """ "" """ ""
Will all tanks be more than five Total capacity of any existing s	e feet from any flame	≥? "уөs How ma	my tanks fire	proofed?	* *** **** ****************************
Total capacity of any existing s	torage tanks for furr	ace burnersnone			
*	IF COO	OKING APPLIANC	יםי		
Location of appliance					
If wood, how protected			ype of floor b∈	eneata appliance.	
Arminum distance to wood or co-	l			***************************************	
rion front of appliance	E	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	**************************		
Size of chimney flue	0.1		1.10111 f0	D Ol smokanina	
15 Hood to be provided?	If on the	**		**********	
Is hood to be provided? If gas fired, how vented?		ar	***************************************	***************************************	***************************************

MISCELLA	ANEOUS EQUIPA	MENT OR SPECIA	I. INFORK	A Trong	*******************************
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imount of fee enclosed? 2.00	(\$1.00 f-	er ato 50 / / /	*** *** *******************************	***************************************	
Amount of fee enclosed?2.60 wilding at same time.)	(\$1.00 for one heate	er, etc., 50 cents additi	onal for each	additional heater	ota !-
				neater	, etc., in same
OVED:					
8K-8/25/49-QD	<i>Y</i> 1	3*****			
	<u> </u>	Will there be in charg	e of the abov	e work a nercon	Zumpata- t
		in one plate and	1 City recinity	ements person	ville
***************************************		observed?yes	1	mentaining	s mereto are
			l, B. Pride		
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SPECTION COPY Sig	nature of InstallerE	Dy:	m .) s	
** ** CHON COPY	og installer	الرائر بالمحمد المعلا	المستواندا ومراغرا	9 "	



APPLICATION FOR PERMIT

* Class of Building or Type of Structure Twird Class MAR 8 1935 To the INSPECTOR OF BUILDINGS, FORTLAND, ME. Portland, Maine,__ March 8, 1955 The undersisted hereby applies for a permit to creek after install the following building structure equipment in any, submitted herewith and the following specifications: Owner's or Lessee's name and address Linwood S. Gross. 58 Atlantic St. _Ward___1 _Within Fire Limits?____wes Dist. No.__ Contractor's name and address. Gnorge Grav, 57 Fillson St. Architect's name and address_ Proposed use of building dralling house Other buildings on same lot_. Plans filed as part of this application? no No. of sheets___ Estimated cost \$ 85. Description of Present Building to be Altered Material wood No. stories 13 Heat _Style of roof____ _Roofing_ dwelling house General Description of New Work No. families To remove 4198 non-bearing partition of former conset, first floor, to include space in kitchen, cutting in one new window in side wall in this former closes to provide It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the Details of New Work Height average grade to top of plate_ _depth__ __No. storics__ To be erected on solid or filled land? —— Height average grade to highest point of rcof... CONTRACTOR OF THE PARTY OF THE Material of foundation___ ___earth or rock?___ __Thickness, top__ Material of ord spinning id of Roof Roof Risc per foot Foof covering Material of chimneys____ Kind of heat ___Type of fuel___ Corner posts__ Is gas fitting involved? ___Sills_ ___Girt or ledger board?__ Material columns under girders Studs (outside walls and carrying partitions) 2x4-16" O. C. Girders 6x8 or larger. Bridging in every floor and flat roc pan over 8 feet. Sills and corner posts all one piece in cross section. 1st floor____ Maximum span; 1st fictor_____, 2nd___ one story building with masonry walls, thickness of walls?__ If a Garage cars now accommodated on same lot___ , to be accommodated al number commercial cars to be accommodated____ automobile repairing be done other than minor repairs to cars hebitually stored in the proposed building? above work require removal or disturbing of any shade tree on a public street? Miscellaneous there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto

Maroud B. Group

Signature of owner_

CTION COPY

CITY OF PORTLAND, MAINE MEMORANIMM

	CEL 16-6-7	
TO:	Bill Giroux - Zoning Administrator	
FROM:	Community Develorment Office/P T H P	
SUBJECT:	Verification of Legal Number of Units	
	· · · · · · · · · · · · · · · · · · ·	
We presently	have an application for Loan/Grant for rehabilitation at:	
,	56 Attacking Street Attaching	
The Owner is_	Claire E. Pennell	
	()	
The given num	ther of units of the building is 2	
Please vurify Zoning/Buildi	whether the number of units given are legal under the	
	VES the number of units are legal	
Westername of the state of the	_NO the number of units are not presently legal. The present	
	number of units is	
FIGNED BY VERY	Zoring Administrator	

Mana.