

14

SHERIDAN STREET

MUN. SO.

MANUFACTURED BY

November 8, 1977 ✓

Carl B. & Jane L. Wright
14 Sheridan Street
Portland, Maine

Dear Mr. & Mrs. Wright:

Re: 14 Sheridan Street - 17-G-32
NCP-East End

Your property has been surveyed by the Housing Inspections Division of this Department and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

In order to aid in the preservation of Portland's existing housing inventory, it shall be the policy of this department to inspect each residential building at least once every five years. Although a property is subject to reinspection at any time during the said five year period, the next regular inspection of this property is scheduled for 1982.

If we can be of further help, please feel free to call on us.

Sincerely yours,

Joseph E. Gray, Jr. Director
Neighborhood Conservation

By

Lyle D. Noyes
Chief of Housing Inspections

Inspector

R. Carroll
R. Carroll

Photos yes no
 Proj. No.

Manning South

Date 2-18-63

| | | |
|-----------|------------------------------|-------|
| CROWDING | LOCATION <u>14 Sheridan</u> | COMP. |
| SANIT. | D.U. LOC. <u>Sample</u> | PERM. |
| INFEST. | OCCUPY <u>Paul M. Tolson</u> | |
| BASE D.U. | OWNER <u>Same</u> | |
| DET'N | ADDRESS <u>Same</u> | VIS |

DWELLING UNIT SCHEDULE

Occupants Information Occupancy Facilities Violations

| 1. | 2. | 3. | 4. | LOC. | RENT | FURN. | WK. I. | RMS | PER. | ALL'D | LGRS | HEAT | BATI | FLSH | K.SK | H.W. | CK'G | Violations | | |
|-----------------------|-------------|----|----|------|------|-------|--------|-----|------|-------|------|------|------|------|------|------|------|------------|---|----|
| | | | | | | | | | | | | | | | | | | 8 | 7 | 12 |
| <u>Paul M. Tolson</u> | <u>3712</u> | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |

| | KITCHEN | BATH | TOILET | DINING | LIV Den STUDY LR FR PL | | | | | TOTAL | |
|------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------|
| | | | | | 650 | BED | 800 | BED | RED | | OTHER |
| OVERCROWDING 65' - 7' | <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"/> | |
| 60 BLIMP'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"/> | |
| 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"/> | |
| LIGHTING 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"/> | |
| DET'N WALLS | <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"/> | |
| 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"/> | |
| 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"/> | |
| FLOORS | <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"/> | |

- KITCHEN SINK & WATER
- SINK
- SUPPLY & WASTE
- PLUG. SP'L
- HEATING
- STACKS, FLUES, VENTS
- HT'BE VERTED, DEP'R
- BATHING FACILITIES
- SHARED MAX. 4DU
- SHD U. 1 PER 15
- MIN. 7' STDB HT.
- VENT'LN
- PROPER ACCESS
- FL'G
- SANIT'N
- TOILET FACILITIES
- SHARED MAX. 2 DU
- SHD U FLSH & LAV 1 PER 10
- VENT'LN
- PROPER ACCESS
- FL'G
- SANIT'N
- INFESTATION
- RATS PI OI I
- OTHER (SPECIFY)
- EGRESS
- DUAL YES. NO
- DBST'N

Remarks

Inspector Robert Pratt

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