

	and P and			NSTALL PLUMBING  7-43 Royd St.  multi family	ERMIT N	IUMBER	250
		Install	ation Fo	1-43-10 de pet			
	Date	Owne	of Bldg	multi family			
<b>\</b> 1	Issued 5-4-82	Owne	r's Addr	ess Donald Lowly			
)	Portland Plumbing Inspector	Dhim	)	P. O. Box 130	I ate	5-4	.02
		NEW	REPL	eth A Luce Jr.	NC	).	FEE
	By ERNOLD R. GOODWIN	MEW	Title B	SINKS So, Windlemy Ma.		1	-
	App. First Insp.		- 3CK	LAVATORIES		1	T
	•	\	<u> </u>	TOILETS			1
	Date	İ	<del> </del>	BATH TUBS			-
	Ву		ļ				1
	T1 I I		<u> </u>	SHOWERS  DRAINS FLOOR S	URFACE		<del> </del>
	App. rindi insp.		<u> </u>	121111111	OIII AOL		+
	Date	Elm		HOT WATER TANKS			
	" 14 D " (Q)	03		TANKLESS WATER HEATER	<u> </u>		
	By MAY GOOS	į G		GARBAGE DISPOSALS			
	Type of Bldg, K. Wo W.			SEPTIC TANKS			4
	Commercial cuite.		1	HOUSE SEWERS			ᆜ
	App. Final Insp.  Date  By  Type of Bldg. R. COON  Commercial Residentificates Residentific		1	ROOF LEADERS			
	Single		<del> </del>	AUTOMATIC WASHERS			_
	Multi Family			DISHWASHERS			
)	New Construction	i	<del></del>	OTHER			
	Remodeling			<del>                                     </del>			
	Linemodeling	_		<del>                                     </del>	T		
					TOT	AL	
		1		Services Dept.; Plumbing Inspe-			<del></del>

eraction.

	PERMIT TO INSTALL PLUMBING	T NUMBER	<u> 2502</u>
* p*	Address 47-49 Boyd Street		
Date Issued 5-11-82	Owner of Bldg: Donald Tourn	Olaham INO.	5-11-82 FEE
Portland Plumbing Inspector By ERNOLD R. GOODWIN	NEW REPL.	1-1	<del>-6.00-</del>
App. First 1999.	LAVATORIES TOILETS BATH TUBS		
App. Final tasp.		ACE	
***************************************	TANKLESS WATER HEATENS		<del></del>
By Type of Bldg.	SEPTIC TANKS HOUSE SEWERS		
☐ Commercial ☐ Residential ☐ Single	ROOF LEADERS AUTOMATIC WASHERS DISHWASHERS		
Multi Family New Construction	OTHER		
Remodeling		TOTAL	6.00
Buildi	ng and Inspection Services Dept.; Plumbing Inspecti	)n	, <u></u>

		PERM	IT TO	INSTALL PLUMBING			OFFICE
	بينصوبيسيوني	Addre	ess at	( - 1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	PERMIT	NUMBER	2000
D	ate						
	sued 5-18-82		er of Bldg				·············
	Portland Plumbing Inspector		er's Addr		Dat	e:	
		P.um	per: Ken	coth Luce JrPFD # 3		0. 5-18-	82E
В	y ERNOLD F. GOODWIN	NEW	REP'L	Sc. Pholhan			
	App. First Insp.	<u> </u>		SINKS		<del>}-</del>	6.09
	App, Ins. app.			LAVATORIES	<u>-</u>		<del> </del>
D	oate _a			TOILETS			ļ
Ŧ	App. Final Insp.  Oate  Type of Biddut and Type of			BATH TUBS			<del>├</del>
=	9 1/10	41.		SHOWERS			<del> </del>
	App. Final Insp.	433		Dimini	SURFACE	<u>`</u>	
г	Date MA	) <del></del>	1	HOT WATER TANKS			<u> </u>
	Scale " Ship in	×]	+	TANKLESS WATER HEATE	RS		
E	By Carak ding			GARBAGE DISPOSALS			
	Type of Blegr			SEPTIC TANKS			
	Common Strate		<del></del>	HOUSE SEWERS			
	Corinercation		<del> </del> -	ROOF LEADERS			T
	nesidential			AUTOMATIC WASHERS			T
				DISHWASHERS			1
	Multi Family	ļ		OTHER			<b>—</b>
	☐ New Construction			OTHER			<del> </del>
	Remodeling	_					
					OT I	TAL	+
		1		Services Dept.; Plumbing Insp	L		<del>6</del> _



FILL IN AND BIGN WITH INK

# APPLICATION FOR PERMIT FOR

HEATING, COOKING OR POWER EQUIPMENT CITY of PORTLAND Portland, Maine, ... April 8, 1960... To the INSPECTOR OF BUILDINGS, FORTLAND, ME. 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: 1.ccation 49 Boyd Street ..... Use of Building Apartments No. Stories 3 Name and address of owner of appliance . Frank Briggs, 4 Orchard Street . . 4-08-4 Installer's name and address .... Easternoil & Equip. Co., 27 Portland St. General Description of Work To install oil burning equipment in connection with existing warm air heat (conversion) IF HEATER, OR POWER BOILER Location of appliance Any burnable n aterial 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 . . . Lasternoil Labelled by underwriters' 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 concrete Size of vent pipe 14" each tank Location of oil storage basement Number and capacity of tanks 2-275 gals. Low water shut off Make . . . . No. . . Will all tanks be more than five feet from any flame? yes How many tanks enclosed? Total capacity of any existing storage tanks for furnace burners IF COOKING APPLIANCE Location of appliance Any burnable material in floor surface or beneath? If so, how protected? Height of Legs, if any Skirting at bottom of appliance? Distance to combustible material from top of appliance? From from of appliance . From sides and back . From top of smakepipe 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 It is to be a seried the energy of never the attention of the series of Amount of fee enclosed? 2.22 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same huilding at same time.) 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 Easternoil & Louip. Co. SPECTION COPY

iden ... 1.44 To ustait 01) COURTER TO THE SECOND सर्वे १० कर्त्व कर श्री .1-3 - 66 4, 1 4.7. rouge its Thomas Card - amin's to we! I in , on a bound of If gas been boy and ? .: the ent. 46 \$ 1 . 1. 1 inspection . The

CITY OF PORTLAND HEALTH DEPARTMENT HOUSING DIVISION



Loc. M RED DIESE Loc v/i S 磁 频对 Bldg Fire Elec to Other Issued Annual Control Expires 10 29, 100

lit. Frank f. indigs A Created Street Portland, Union

Dear Sir:

MAINE PRINTING CO., PORTLAND

Kar 33, 1999 an examination was made of the premises located

49 April Street, Perstant, Maios

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, SPruce 4-8221, extension 226. Kindly notify this office as soon as all corrections have been completed.

Very truly yours, Douglas H. Brown, M. D. Health Director

Housing Supervisor

#### VIOLATIONS & SPECIFICATIONS

\*\* Responsibility of Occupant ## Gesponsibility of Owner or Agent

electrically for the field order all diluddried and homedone parts of the minustens an Tollans:

Repair or replace the stadus and deterlated their bounts on the sear sorth. Replace the clearly bricks and point up the lines joints to the ciers, was and tweet of the chrustine.

figures or replace the loose, broken, or mining climbratis on the your of the

connected.

Explore the broken wholes posen in the fresh days of the structure, in the first filter hallow, in the collect, and in the litered and disting rose of the let flow sub-later the losse which means throughout the losse which means throughout the respective. Furtherlaw attention to directed to the litered, claim, from from their rose, living such, and pass to the let floor ept., and in the identical living rose, performed between of the let floor ept.

Complete or regions the checker root nexten on all place of the standard Repair or regards the broken serves over the 2nd linear window on the test side of the

borals or replace the missing falluters on the lat filter, and floor, and 3rd floor

from and root abatrage. Rejair or replace the lacon, com, baken, or alreing brevis on the cellar states. Repell of replace the expectal leave, or thering places at the head of the solice states at the head of the solice states at the head of the solice and solice states at the head of the following diving some states and from bedroom of the last floor apply in the interior of the last floor apply and so the sulling of the front bedroom and man betroze of the lot filter spt., and in the parior and right buttom of the Iri floor sph.

Classic and have repaired all executive electric wining and alcotrical equipment throughout t in Perception.

Repair or replace the defaultre preside box in the coller of the education. Our inspection reveals that the miring is defective throughout the excepture and givenial on the compile checking by a competent licensed electrician. Properly connect the ground wire to the electrical system at the fuse box in the

exiler. And an experience distance for the 1855 bedress of the 185 their spirits and the 1855 their spirits.

chart and have another off detention of our right ent chartery simples of configure constant.

The residence the description in the consisting visited was consisted that the consisting the residence the fraction of the consisting the residence the fraction of the consisting that the consisting the consistence that the consistence of the consi

the ministers.

b. Proper and record description of the part and celler by remains and property disposing the fall trade. With mission, until cited by manufacture of property and related by remains the trade with mission. Marticipal, unter-tiple, initial little and related by remains the trade of property of property of the related of property of the related by remains the results and the celler made to making third and placed at least in the celler made to making third and placed at least in the celler flow.

state the coller floor.

p. Often the elements th resident and technical emborgal of ell cost ent departs.

The coope much long considering and in which will lead, and character for them in the constant of the constant

PERMIT TO ANYALL PLUMBING 10993 Address 47 Boyd Street Date 12-5-1 Inspect or PERMIT NUMBER nstallation For: Owner of Bldg. Mary Webster Owner's Address: 47 Boyd Street APPROVED FIRST INSPECTIO

Dote 22/3\*\*-G(

Dote 22/3\*-G(

APPROVED FINAL INSPECTION

Dote 12-13-G(

DOTE 13-G(

DOTE 13-G LAVATORIES TOILETS BATH TUBS BATH TUBS
SHOWERS
DRAINS
HOT WATER TANKS
TANKLESS WATER HEATERS
GARBAGE GRINDERS
SEPTIC TANKS
HOUSE SEWERS
ROOF LEADERS (Conn./ to house \$ 2:00 3

PERMIT TO INSTALL	PLUMBING	W/A-2207
Date Issued Assert 22 7060	Address 49 Boyd Street	11889 ——PERMIT NUMBER
NEFECTOR	Owner's Address.	HOMBER
APPROVED FIRST INSPECTION  Dat 3-23-65	PROPOSED INSTALLATIONS  SINKS  L/WATORIES	D 20 60 NUMBER FEE
APPROVED FINAL INSPECTION AUG. 231962	TOILETS BATH TUBS SHOWERS DRAINS	
By JOSEPH P. WELCH	HOT WATER TANKS  YANKLESS WATER HEATERS  GARBAGE GRIDDERS	1 2.00
RESIDENTIAL SINGLE MULTI FAMILY	SEPTIC TANKS HOUSE SEWERS ROOF LEADERS (Conn. to house drain)	3
☐ REMODELING	JD Heavy	
	NO HEALTH DEPT. PLUMBING INSPECTION TOTAL	<b>1</b>

PERMIT TO INSTALL	ELUMBING	; out	8-27-6	:4			1 Win	
	Address		49 Boyd St	rect		68		Ŋ
Date Das State	Installution	r For:	Helen L. C			Pē	KMII NUI	MBER
Issued 8-25-64	Owner of	Bidg.	Holen L. C				5, 4, 3, 2, 2 ent 2	į.
PORTLAND PLUMBING INSPECTOR	Owner's A	ddress:	Sane				2744 (31,12-7) 24 (31)-1-7	7
By_ J. P. Welch	Plumber:	Portlan	d One Ideht	Company	Date:	8-2	5-64	-
APPROVED FIRST INSPECTION	4 INEW   REI	P'L	PROPOSED INSTA	LLATIONS		NUMBER	FEE	•
By Joved Final Inspection  JOSEPH P. WE  ONLY HEF-PLUMBING IN	LCH PECT DR	TOI BAT SHO DRA HOT	ATORIES LETS H TUBS DWERS LINS WA FER TANKS KLESS WATER HEA	TERS		1	\$ 2,00	-
ByTYPE OF BUILDING  COMMERCIAL  RESIDENTIAL  SINGLE  MULTI FAMILY		SEP1 HOL	BAGE GRINDERS TC TANKS JSE SEWERS OF LEADERS (Conn.	to house drain	<u>,                                     </u>			- - - - -
☐ NEW CONSTRUCTION ☐ REMODELING POR	LAND HEA	ALTH DEPT	PHIMRING IN	EDECTION	TOTA	L <b>b</b>	\$ 2.00	

Core 7-3-64 | Owner of Blcg.
Owner's Address:
Plumber Por LT and 14195 PERMIT NUMBER Dolores Jersen Dol res Jernan Owner's Address: Jame
Plumber Por Dand One Light Company
NEW REPT PROPOSED INSTALLATIONS By J. P. Weich
APPROVED FIRST INSPECTION
Date

APPROVED FINAL INSPECTION
Date PROPOSED INSTALLATIONS.

SINKS

LAVATORIES

TOILE'S

BATH-TIJBS

SHOWERS

DRAINS

HOT WATER TANKS

TANKLESS WATER HEATERS

GARLAGE GRIVDERS

SEPTIC TANKS

HOUSE SEWERS

ROOF LEADERS (Conn. to hours drain) 3-64 1 \$ 2.00 BY TYPE OF BUILDING
| COMMERCIAL
| RESIDENTIAL
| SINGLE
| MULTI FAMILY
| REMOCRETING 3 PORILAND HEALTH DEM. PLUMBING INSPECTION TOTAL \$ 2.00

# CITY OF PORTLAND, MAINE Application for Permit to Install Wires

* *[* ]********************************	
Permit No. 5743/	
Issued	
Portland, Maine	
To the Cate Electrician Portland, Maine:	
The undersigned hereby applies for a permit to install wires for the purpose of conducting elec- ric current, in accordance with the laws of Maine, the Electrical Ordinance of the City of Portland,	
(This form nust be completely filled out - Minimum Fee, \$1.00)	
Owner's Name and Address BRIGES 47-47 Boys 57	
Contractor's Name and Address To R. N.R. E.L. E. T. Co. 1et	
Use of Building	
Number of Families . 6 Apartments 6 . Stores Number of Stories	
Description of wiring. New Work	
Plug Molding (No. of feet)	
Pipe Caule Plug Circuits	
The second Tighting (No feet)	
No of Wires Size 42	
SERVICE: Pipe Gaute Travel No Meters	Ľ
METERS: Relocated Wolfe Starter	
MOTORS: Number HP	
HEATING UNITS: Domestic (Oil) No. Motors Phase H.P	
Electric Heat (No. of Rocms)	
David Foods (Size and NO)	
APPLIANCES: No. Ranges	
Figure Cohinete or Panels	
Transformers OAir Conditioners (No. Units)	
Amount of Fee \$ 12,00 V	
" X \// \( \cdot \)	
DO NOT WRITE BELOW THE	
SERVICE METER GROUND	
VISITS: 1 2 3 4 5 6	
7 8 9	
REMARKS	
7-11	
STATE OF THE STATE	
us and	

.

PERMIT TO INSTALL PLUMBING Address 19 Boyd Street 2nd P
Installation For:
Owner of Bidg.: Gurtiz Fandall
Owner's Address: 18 Poyd Street 2nd
Plumber: Portland Gas Light Company PERMIT NUMBER 17009 Issued 2/2/67. Portland Plumbing Inspector By ERNOLD R. GOODWIN SINKS
LAVATORIES
TOILETS
BATH TUBS
SHOWERS
DRAINS FLOOR SUF
HOT WATER TANKS
TANKLESS WATER HEATERS
GARBAGE DISPOSALS
SEPTIC TANKS
HOUSE SEWERS
ROOF LEADERS
AUTOMATIC WAS HERS
DISHWASHERS
OTHER App. First Insp.
Date 2/3/67
By Montgomens

App. Fibaldasp.

Date FEB 6 Baldasp.

By ERNOLD R. GOODWIN

Type of Bidgiton Commercial
Residential
Single
Multi Family New Construction
Remodeling Ġ Building and Inspection Services Dept.; Plumbing Inspection

697 PERMIT TO INSTALL PLUMBING Address
Installation For: Boyd St. (2nd)
Owner of Bldg: Frank Briggs
Owner's Address: Orchard St
Plumber: Fortland Gas Light PERMIT NUMBER 1 100 Horch 13, 1970 Ecrtland Gas Light Portland Plumbing Inspector 3/23/70 By ERNOLD R GOODWIN SINKS LAVATORIES TOILETS BATH TUBS App. First Insp. Date WALTER H. WALTER
By DEPUTY PLUMBURG INSPECTOR BATH TUBS
SHOWERE
DRAINS FLOOR SU
HOT WATER TANKS
TANKLESS WATER HEATERS
GARBAGE DISPOSALS
SEPTIC TANKS
HOUSE SEWERS
ROOF LEADERS
AUTOMATIC WASHERS
DISHWASHERS
OTHER App. Fixed Insp.

Date WALTER H. WALLING
By DEFUTY PLUMBING INSPECTOR Type of Bldg. Commercial
Residential
Single
Multi Family
New Construction
Remodeling 2.00 Building and Inspection Services Dept.; Plumbing Inspection

	PERMIT TO INSTALL PLUMBING	श्चिप
Date 1/18/73 Issued 1/18/73 Portland Plumbing Inspector By ERMOLD R GOODWIN	Address 49 Royd Street 2nd PERMIT NUMBER 005  Installation For Owner of Bidg Frank Briggs Owner's Address 4 Orghard St. Plumber Horthern Utilities Date 1/18/73	<u>6</u> -
App. First Insp.	NEW REPL SINKS NO FEE  SINKS LAVATORIES TO!LETS	- - -
App. Final Insp. Date 1-23-73	BATH TUBS SHOWERS DRAINS FLOOR SUBBACE	- - - : - :
Type of Bldg.	TANKLESS WATER HEATERS  GARBAGE DISPOSALS  SEPTIC TANKS	• •
☐ Commercial ☐ Residential ☐ Single ¬ Voltor Family	HOUSE SEWERS ROOF LEADERS AUTOMATIC WAS HERS	 - -
To V Construction	DISHWASHERS OTHE.:	•
ilding an	d Inspection Services Dept.; Plumbing Inspection	,

CITY OF PORTLAND HEALTH DEPARTMENT HOUSING DIVISION



Issued Expires

Ar. Frank P. Briggs ls Orchard street Portland, Anina chica

Dear Sir:

Juna 26, 1968

an examination was made of the premises located

47-49 Boya Street, Fortland, mains.

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 C ty 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, John R. Davy, M. D. Health Director

Housing Supervisor

### VIOLATIONS & SPECIFICATIONS

## Responsibility of Owner or Agent \*\* Responsibility of Occupant

Topic and put in good order all deteriorated and hazordnum parts of the structure on follower

Amount or replace the loose pricks on all aldes of the foundation. nonair or rapione the loose, worn, and deteriorated factal bourds on

all corners of the structure. Roplace the missing clapboards for all sides of the structure. determine the reason one remody the condition which causes the reof

to lock. Replace the broken window panes in all of the windows throughout the

atructure. Replace the broken window come for the front door at his Doyd. Autify the local window penes in all of the elicena throughout the

myructure,

thapair or repince the trong, cracked, and missing limiter on the walls and collings throughout the structure.

Report or replace the sorn and deterlorated treads on the deller elelim may or up dayd.

deterrine the reason and remady the ound from which coupes the callings to any in the alteres and between in the first flags apertuent of diff Boyd.

Provide esecució ventiletion to the surcise air by installiné e sindon Old by Redichary Bochsulder Adult purjace and the the pacount pantagon in STRUCTURAL continued poterwish the repson and ready the condition which caused the bethroom seiling in the secund floor marriagh of 47 Boyd to page Determine the regard and ready the consistion which causes the excend protection colling in the second floor operations of M. Boyd to lask. Supelr or replace the defective over in the tiving room in the second Provide adequate Ventilation to the outside air by installing a window on an approved machanical ventilation system in the second bedroom be fightly the congen and conserved the constitue which caucae, the buthecon colling in the first floor apartment at its hord to look. Deforming the reason and remady the condition which causes the naisture to seep through the cutaids walls to the back bedroom in the strot to seek through the cursius waits to the pathice of by installing a windle provide adequate went; influe to the autaide of by installing a windle the out abbrevior machoused routilettou anator to the paroug paquous in beterains the reason and rainey the condition which causes the living room colling in the left apartment - third fluor - of My Boyd to feek. batakajua the tenant and tomada the congisters much conseque the spita physician costilud to the fact were though a thirty true as 100 poly to Detarming the resoun and remody the condition which course the notice and collings by just to the fitchin's potheron's living tooms and that podrods in the right spartness, - third that - or he hope check and have repaired all defective electric wiring and electrical equipcosporation the especia and easieds the coudistion applies consum the tance want sproughout the atricture. to plok avecassingly interreligions the planes that install adequate artificial liturination in the exiter. Emirals of tablaca file defauting timboles to the table particul to the Aspair or regisce the dejective linture in the first bedroug in the tirst floor appriment of he boyd. Chock and have varatree att detective plushing one plushing tintures Detaruing the reason and tenter the consisten which can be the easte throughout the structure. rand that in the certain to be repositive which counses the being the condition which counses the being the condition which counses the kitchen the first floor appetraces at ky Soyd to drain improperty.

Note first floor appetraces at ky Soyd to drain improperty. wink faucate in the first floor apartment at hy mayd to look. potoraine the recent and remedy the condition which causes the baththe to the elect time wholehous at he gold to death independently. supplie of rupiace the detertorated stock pipe in the first thou whert Accomplish a general class-up of the chimney by renoving and preparty **HEATING** to andlest that has pass the practing sharm chacked by a competent mosting engineer.

M-49 Boyd street continued

musances are insanitary consitions

a. Ald the presizes of all intestation (also, rate, and cockrosches). We suggest that you procure the services of a cospetant past control registered with this department to do the work.

The above contioned conditions are in violation of Chapter 307 of the municipal code of the City of Pertiand and aust be corrected on or before september 19, 1968.

() %

	Date Issued <b>3-22-72</b>	PERMIT TO INSTALL PLUMBING  Address 47 Boyd St.  Installation For: Full:	PERMIC NUMBER
	Portland Plumbing Inspector By ERNOLD GOODWIN	Owner of Bldg.: F P. Brigge Owner's Address: 4 Orchard & Plumber: Worthern Utilities NEW REPL. 5 Temple St.	it.
	App. First hsp.	SINKS	
	A	LAVATORIES TOILETS	NO. FEE
	Dotter of the state of the stat	BATH TÜBS SHOWERS	
	Ву С.	DRAINS FLOOR  L HOT WATER TAX	SURFACE
	Type of Bldg.	TANKLESS WATER HEATE GARBAGE DISPOSALS	ZRS 2.00
· ·	Commercial Residential	SEPTIC TANKS HOUSE SEWERS	
., '	☐ Single ☐ Multi Family ☐ New Co-	AUTOMATIC WAS	
-	☐ New Construction ☐ Remodeling	DISHWASHERS OTHER	

transport of the second

Date ssued <b>4/21/69</b> Portland Plumbing Inspector	Addre Install Owne Owne Plumb	ation for r of Bldg r's Addre			UMBER 257
By ERNOLD R. GOODWIN	NEW	REP'L	SINKS		
App. First Insyl.			LAVATORIES TOILETS		
By	,		BATH TUBS		
PER Prop. Final Insp.			SHOWERS DRAINS FLOOR	SURFACE	
Date 4/77/69		1	HOT WATER TANKS TANKLESS WATER HEA	TERS	1 2,00
By WALLE of Bldg.			GARBAGE DISPOSALS SEPTIC TANKS		
Commercial			HOUSE SEWERS		
Residential Single	1		AUTOMATIC WASHERS	3	
☐ Multi Family			DISHWASHERS		
☐ New Construction☐ Remodeling			OTHER		
L] Remodering				TOT	AL 3 2.00

Building and Inspection Services Dept.; Plumbing Inspection

R6 RESIDENCE TONE



#### APPLICATION FOR PERMIT

Class of Building or Type of Structure

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

Estimated cost \$ 1500.

Portland, Maine, Sept. 23, 1971

OCT 4 1971

The undersigned hereby applies for a permit to erect alter repair d	emolish install the following	 building structure equipment
in accordance with the Laws of the State of Maine, the Building Code a	nd Zoning Ordinance of the	e City of Portland, plans and
specifications, if any, submitted herewith and the following specifications	:	
17-10 Road St	STEELS TO THE PARTY OF	754 . 37

.... Within Fire Limits' ...... Dist. No..... Owner's name and address Frank P. Briggs, 4 Orchard St. Telephone Contractor's name and address Owner Telephone Architect \_\_\_\_\_\_\_ No. of sheets 2
Proposed use of building \_\_Apartment\_house \_\_\_\_\_\_ No. families 6 Last use ..... Other buildings on same lot

#### General Description of New Work

To erect an non-bearing partition on second floor to provide hallway - to remove one set of front stairs and one set of rear stairs

To change one front door to window and also rear door to window

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. PERMIT TO BE ISSUED TO

#### 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 Material of foundation \_\_\_\_\_\_ Thickness, top \_\_\_\_\_ bottom \_\_\_\_ cellar \_\_\_\_\_ Size Girder ..... 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....., 2nd...., 3rd ...., rcof ..... On centers: 1st floor....., 2nd...., 2nd..., 3rd ...., roof ...., 1st floor......, 2nd......, 3rd ......, roof ...... Maximum span: 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....... 

Que CODeste 101-71

#### Miscellaneous

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

Frank P. Briggs

INSPECTION COPY

Signature of owner .....

NOTES Inspn. closing-in

!! \_



# R6 RESIDENCE ZONE CITY OF PORTLAND, MAINE DEPARTMENT OF BUILDING INSPECTION

COMP!\_AINT

INSPECTION COPY COMPLAINT NO. 71/59

Date Received September 16, 1971

Location 47-49 Eoyd Street
Lies of D 'tt' Anontmont I
Owner's name and address Frank Briegs 4 Orchard Street Telephone Tenant's name and address
Complainant's name and address West Side Neighborhood Gaster Telephone
Complainant's name and address West Side Neighborhood Center, Inc.  793 Congress St. Att: L. A. Trescot  Telephone  Telephone
Description: Making alterations to building to increase number of apartments. No permit.
NOTES: 9/17/71 Mr. Briggs in today. Heg decides and
apartments. Will not make any alterations at this time. P. Corbeau
1. Corregu

Nelson's Territory



# CITY OF PORTLAND, MAINE DEPARTMENT OF BUILDING INSPECTION

## COMPLAINT

INSPECTION COPY

COMPLAINT NO. 74/6

Date Received January 17, 1974

Location 47-49 Boyd Street
Owner's name and address Frank Briggs, 4 Orchard Street Telephone
Tenant's name and address Telephone Telephone Telephone
and address
Description: Changing the use from 6 to 8 or more families - almost finished with the alterations, bearing petitions invoved - no permit from either - note in G.L. that in 1971 he tried the same thing.  NOTES:    1-17-74 Need permit to repair after fire (neet door) with alterations
after fire (nest down)
x change of use 6 to 7 with alterations
Vant in ride hall
dirt collar floor.
wiring?
plumbing? INFC.
ilulan
1/21/74. See letter - allan (broth fermit in deplicate file
the property of the

47-49 Boyd St

# CITY OF PORTLAND, MAINE

Department of Building Inspection

49 Boyd Street

Jan. 21, 1974

Mr. F. P. Briggs 4 Orchard Street

Dear Mr. Briggs:

In checking your application to change the use of this building at the above named location from six families to eight families, we find that we are unable to continue processing your application because 8,000 sq. feet is required for eight families (1,000 sq. feet per family)/
in the R-6 Residential Zone in which this property is in the R-b Residential Zone in which this property is located, whereas this lot has only 7,020 sq. feet. You do have appeal rights however, and if you so desire we will write you a certification idetter denying this permit so that you may go before the Roard of appeals for this so that you may go before the Board of Appeals for this use. You can change from six to seven apartments if you are the seven apartments if you use. You can change from six to seven apartments if you so desire by changing your application and giving us a plot plan showing us one additional parking place (8' x 18'). for the location of a motor vehicle. If you decide to appeal for eight apartments it will be necessary to show us parking

If you will let us know what you plan to do we will be glad to go ahead on your appeal request or in the case of the geven apartments, continue processing your application as soon as a plot plan is submitted.

Very truly yours,

AAS:m

M. Allan Soule Asst. Dir. Building & Inspection Services

## APPLICATION FOR PERMIT

B.O.C.A. USE GROUP B.O.C.A. TYPE OF CONSTRUCTION ZONING LOCATION PORTLAND, MAINE, Jan 18, 1974

the DIRECTOR OF BUILDING & INSPECTION SERVICES, 1 OKTOBER, move or install the following building, struc-
The undersigned hereby applies for a permit to erect, aner, repair, using the Pariland B.O.C.A. Building Code and
re, equipment or change use in accordance with the Laws of the State of Maine, the Tolligia 200 repetitions only of Portland with plans and specifications, if any, submitted herewith and the following specifications on the City of Portland with plans and specifications, if any, submitted herewith and the following specifications of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications.
oning Ordinance of the City of Portland with plans and the
pris: Fire District #1 [], #2 []
CATION 49. Boyd 5t Telephone Telephone
OCATION 49 Boxd St.  F. Briggs, same  Cowner's name and address  Telephone  Telephone
Lessee's name and adddress
Owner's name and address
Abeliand No families
Architect Shalled Leight apartments No. families No. fami
ast use
Material No. stories Heat Style of 1001
Other buildings on same lot
Estimated contractural cost \$
GENERAL DESCRIPTION
FIELD INSPECTOR—IN CLOSING OF ORD
This application is for:  @ 775-5451  Onange of use as development on first floor only, as per plan.  Ext. 234  Onange of use as development on first floor only, as per plan.
Garage
Masonry Bidg
Masonry Bldg.  Metal Bldg.  Alterations  Demolitions  Change of Use  Other  Other
Demolitions
Change of Use
Other of heating, plumbing, electri-
Other
1 1 alianicale
PERMIT IS TO BE ISSUED TO
Other:\
DETAILS OF NEW WORK
Is any plumbing involved in this work? Is any electrical work involved in this work?
Ty connection to be made to public sewer
Is connection to be made to public sewer?
Has septic tank notice been sent?
Cine front (ICDIII + + + + + + + + + + + + + + + + + +
Material of foundation
Kind of roof Kise per root furl
No of chimneys Waterial of diameter
No. of chimneys
Framing Lumber—Kind Dressed or full size? Corner posts
Size Girder Columns under girders
Studs (outside walls and carrying partitions) 2x4-16" O. C. Brioging in every need and the state of the state
If one story building with masonry walls, thickness of walls?
IF A GARAGE
the sumber commercial cars to be accommodated
1 11 the done other than miles repute to
Annual AI C RV
BUILDING INSPECTION 22.11
DIVIC CODE:
BUILDING CODE: to see that the State and City requirements pertaining thereto
Fire Dept are observed? .Yes
Health Dept.:
Signature of Applicant P Briggs
Type Name of above
and Address
FIELD INSPECTOR'S COPY
and the state of the control of the

FIELD INSPECTOR'S COPY

FILL IN AND SIGN WITH INK

000730 PERMIT ISSUED





# ' APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

CITY of PORTLAND

Portland, Maine, 8-27-79

To the INSPECTOR OF BUILDINGS, FORLAND, ME.  The underspued hereby applies for a permit to instell the following heating, cooking or power equipment in accordance with the Laws of Mains, the Building Code of the City of Portland, and the following specifications:  Location 47-49 Boyd St.  Use of Building apartment hee, No. Stories 3. New Building Code of the City of Portland, on the following specifications:  Location developed the City of Portland, Comparison of Commercial Post of Appliance Portlanding and Code of Commercial Post of Code of Co		Fortiana, Maine,
Location 47-49 Boyd St. Use of Building apartment has, No. Stories 3 New Building Name and address of owner of appliance Farnsworth & Caulfield, co-owners Portland Portland Installer's name and address Gexald's Flumbing & Heating-36 Dept. Total Caption 781-2223  General Description of Work  To install Gas conversion butner  IF HEATER, OR POWER BOILER  Location of appliance basement Any burnable material in floor surface or beneath?  If so, how protected? Kind of fuel?  Minimum distance to burnable material, from top of appliance From sides or back of appliance Size of chinney 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 OLL BURNER  Name and type of burner Economite Gas Burner Labelled by underwriters' laboratories? yes Will operator be always in attendance? NO. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner Concrete Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No. Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Prom sides and back From top of smokepipe  Size of chimney flue Other connections to same flue  Is so, how yented? From sides and back From top of smokepipe  Size of chimney flue Other connections to same flue  Is so, how vented? From of gravity? If gas fired, how vented? Rated maximum demand per hour MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION		
Name and address of owner of appliance **STREAMORTH & CAULFIELD C. OF COMMERS - PORTLAND  General Description of Work  To install **Gas** Conversion busines**  IF HEATER, OR POWER BOILER  Location of appliance **Dasement** Any burnable material in floor surface or beneath? If to, 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 or promises or back of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  If on the post of thimmer from the appliance or casing top of furnace.  From sides or back of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  From top of smoke pipe From four of appliance or casing top of furnace.  If poll burner fine floor surface or back of appliance or casing top of furnace or back of appliance.  If poll burner fine floor surface or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing 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	The understyned hereby applies for ance with the Laws of Maine, the Building	a permit to install the following heating, cooking or power equipment in accord- Code of the City of Portland, and the following specifications:
Name and address of owner of appliance **STREAMORTH & CAULFIELD C. OF COMMERS - PORTLAND  General Description of Work  To install **Gas** Conversion busines**  IF HEATER, OR POWER BOILER  Location of appliance **Dasement** Any burnable material in floor surface or beneath? If to, 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 or promises or back of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  If on the post of thimmer from the appliance or casing top of furnace.  From sides or back of appliance or casing top of furnace.  From top of smoke pipe From front of appliance or casing top of furnace.  From top of smoke pipe From four of appliance or casing top of furnace.  If poll burner fine floor surface or back of appliance or casing top of furnace or back of appliance.  If poll burner fine floor surface or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing top of furnace or back of appliance or casing 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	Location 47-49 Boyd St.	Use of Building apartment hse No Stories 3 New Building
General Description of Work  To install  Gas conversion businer  IF HEATER, OR POWER BOILER  Location of appliance basement 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 or casing top of furnace.  From top of smoke pipe From front of appliance From sides or back of appliance.  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 Sconomite Gas Burner Labelled by underwriters' laboratories? yes.  Will operator be always in attendance? AD. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner concrete. Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF CONKING APPLIANCE  Location of appliance. Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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? Forced or gravity?  If gas fired, how vented? Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	Name and address of owner of appliance	Farnsworth & Caulfield, co-owners- Portland
IF HEATER, OR POWER BOILER  Location of appliance basement. Any burnable material in floor surface or beneath? 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 Economite Gas Burner Labelled by underwriters' laboratories? yes.  Will operator be always in attendance? NO Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner Concrete Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enc'osed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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 so, how vented? Forced or gravity?  If gas fired, how vented? Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	Installer's name and address Gerald's	s Plumbing & Heating-56 Depot Telephone 781-2223
IF HEATER, OR POWER BOILER  Location of appliance basement 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 Economite Gas Burner Labelled by underwriters' laboratories? yes  Will operator be always in attendance? No. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner concrete Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Prom isdae and back From top of appliance?  From front of appliance? Distance to 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 so, how vented? Forced or gravity?  If gas fired, how vented? Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION		
IF HEATER, OR POWER BOILER  Location of appliance basement 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 Economite Gas Burner Labelled by underwriters' laboratories? yes  Will operator be always in attendance? NO Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner concrete. Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enc'osed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	To install Gas conversion by	ufner
IF HEATER, OR POWER BOILER  Location of appliance basement 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 Economite Gas Burner Labelled by underwriters' laboratories? yes  Will operator be always in attendance? NO Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner Concrete Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	<u> </u>	
Location of appliance  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  Sizu 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  ECONOMITE Gas Burner  Labelled by underwriters' laboratories? Yes.  Will operator be always in attendance? NO.  Does oil supply line feed from top or bottom of tank?  Type of floor beneath-burner CONCRETE  Size of vent pipe  Location of oil storage  No.  Will all tanks be more than five feet from any flame?  How many tanks enc'osed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance  Any burnable material in floor surface or beneath?  If so, how protected?  Height of Legs, if any  Skirting at bottom of appliance?  Distance to combustible material from top of smokepipe  Size of chimney flue  Other connections to same flue  Is hood to be provided?  If so, how vented?  Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION		
If so, how protected?  Minimum distance to burnable material, from top of appliance or casing top of furnace.  From top of smoke pipe		
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 Economite Gas Burner Labelled by underwriters' laboratories? yes.  Will operator be always in attendance? NO Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner Concrete. Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No.  Will all tanks be more than five feet from any flame? How many tanks enc'osed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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?  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	If so, how protected?	Vind of fuel?
From top of smoke pipe	Minimum distance to burnable material from	m ton of appliance or caring ton of furness
Size of chimney flue	From top of smoke pine From	front of appliance
If gas fired, how vented?  Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?  IF OIL BURNER  Name and type of burner  Sconomite Gas Burner  Labelled by underwriters' laboratories? Yes.  Will operator be always in attendance? NO  Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner  Concrete  Size of vent pipe  Location of oil storage  Number and capacity of tanks  Low water shut off  Make  No  Will all tanks be more than five feet from any flame?  How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance  Any burnable material in floor surface or beneath?  Height of Legs, if any  Skirting at bottom of appliance?  Distance to 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?  Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	Size of chimney flue Other	connections to some flue
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?  IF OIL BURNER  Name and type of burner	If gas fired how vented?	Decide to same nue
IF OIL BURNER  Name and type of burner Economite Gas Burner Labelled by underwriters' laboratories? yes.  Will operator be always in attendance? 10. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner concrete. Size of vent pipe  Location of oil storage. Number and capacity of tanks.  Low water shut off. Make. No.  Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners.  IF COOKING APPLIANCE  Location of appliance. Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	Will sufficient fresh sin be supplied to the	Rated maximum demand per hour
Name and type of burner	will sufficient fresh air be supplied to the app	nuance to insure proper and sate combustion?
Will operator be always in attendance? AQ. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner CONCRETE	_	
Will operator be always in attendance? AQ. Does oil supply line feed from top or bottom of tank?  Type of floor beneath burner CONCRETE	Name and type of burner Economite	Gas Burner Labelled by underwriters' laboratories? yes.
Type of floor beneath burner Concrete. Size of vent pipe  Location of oil storage Number and capacity of tanks  Low water shut off Make No  Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  Height of Legs, if any  Skirting at bottom of appliance? Distance to 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 If so, how vented? Forced or gravity?  If gas fired, how vented? Rated maximum demand per hour MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	Will operator be always in attendance? no.	Does oil supply line feed from top or bottom of tank?
Location of oil storage	Type of floor beneath burner . concret	te Size of vent pipe
Low water shut off	Location of oil storage	Number and capacity of tanks
Will all tanks be more than five feet from any flame? How many tanks enclosed?  Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	Low water shut off	Make No No No
Total capacity of any existing storage tanks for furnace burners  IF COOKING APPLIANCE  Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	Will all tanks be more than five feet from any	y flame? How many tanks enclosed?
Location of appliance Any burnable material in floor surface or beneath?  If so, how protected? Height of Legs, if any  Skirting at bottom of appliance? Distance to 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	Total capacity of any existing storage tanks	for furnace burners
Location of appliance		
If so, how protected?  Height of Legs, if any  Skirting at bottom of appliance?  Distance to 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	Location of appliance	·
Skirting at bottom of appliance? Distance to 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	If so, how protected?	
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? Forced or gravity?  If gas fired, how vented? Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION		
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	From front of appliance	som sides and hards
Is hood to be provided?	Size of chimney flue	rom sides and back From top of smokepipe
If gas fired, how vented?  Rated maximum demand per hour  MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	Is hood to be provided?	connections to same flue
MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION	If one fined how wented?	Forced or gravity?
	It gas fired, now vented?	
Amount of fee enclosed? 15.00	MISCELLANEOU	S EQUIPMENT OR SPECIAL INFORMATION
Amount of fee enclosed? 15.00		
Amount of fee enclosed? 15.00		
Amount of fee enclosed? 15.00		
Amount of fee enclosed? 15.00		
Amount of fee enclosed? 15.00		
Amount of fee enclosed? 15.00		
	Amount of fee enclosed? 15.00	
OYED:	CYED:	
		Will there be in charge of the above work a person competent to
see that the State and City requirements pertaining thereto are		see that the State and City requirements pertaining thereto are
observed? Yes		
e la	**************************************	- 1 of X/1/4

INSPECTION COPY

'Signature of Installer .



## APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

	Date	. 19 7
To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:	Receipt and Permit num	ber A3470
The undersigned hereby applies for a permit to make cleaning		
The undersigned heroby applies for a permit to make electrical install Maine, the Portland Electrical Ordinance, the National Electrical Code a LOCATION OF WORK: 47-49 Boyd St.  OWNER'S NAME: Farnsworth & Caulfield ADDRESS:  CO-owners	ations in accordance wit and the following specific	h the laws of cations:
OWNER'S NAME: Farnsworth & Caulfield ADDRESS.		
co-owners	Portland	
OUTLETS:  Receptacles Switches Plugmold ft. TOTA FIXTURES: (number of)		FEES
FIXTURES: (number of) Switches Plugmold ft. TOTA	AT.	
Incardescent		<del></del>
Incandescent Flourescent (not strip) TOTAL Strip Flourescent ft		
Overhead Underground Temporary TOTA METERS: (number of) MOTORS: (number of)	\L amperes	
(mamper ori	************	
Fractional  1 HP or over  RESIDENTIAL HEATING: Oil or Gas (number of units) Gas	/	
RESIDENTIAL HEATING.		
Oil or Gas (number of units) Gas  Electric (number of rooms)		
Electric (number of		3.00
COMMERCIAL OR INDISTRIAT THE AUTHOR	*********	
OH OF GREEN PAIN POINT POINT		
Oil or Gas (by separate units)  Electric Under 20 kws Over 20 kws		
Electric Under 20 kws Over 20 kws APPLIANCES: (number of)		
Ranges (number of)		
Cook Tops Water Heaters		
Wall Owns — Disposals		
Dryers — Dishwashers	<del></del>	
Compactors		
TOT L Others (denote)		
MISCELLANEOUS: (number of)	************	
Dianon Panels		
Transformers		
Transformers Air Conditioners Central Unit Separate Units (windows)		
Separate ITmite (mil. )	*********	
Signs 20 sq. ft. and under		
Swimming Pools Above Ground  In Ground  Fire / Burgler All		
In Ground Fire/Burglar Alarms Residential		
They Burgiar Alarms Residential	******	
Commercial  Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under		
of units and uniter		
Circus, Fairs, etc. over 30 amps		
Repairs after fire	_	
Emergency Lights battony		
Emergency Lights, battery Emergency Generators		
TON ADDITIONAL WORK NOW OF THE TRAINING AND ADDITIONAL WORKS TO THE TRAINING AND ADDITIONAL AND	N REE TITE.	
FOR REMOVAL OF A "STOP ORDER" (304-16 b)	E FEE DUE:	
TOTAL AM	OUNT DUE:	3.00
INSPECTION: Anytime	_	
Will be ready on 8-31, 19 79 or Will Call CONTRACTOR'S NAME: Gerald's Flumb. & Hoot		
CONTRACTOR'S NAME: Gerald's Plumb. & Heat.  ADDRESS: 56 Depot Rd. Falmouth W. 2018	<del></del>	
ADDRESS: 56 Depot Rd., Falmouth, Me. 04105		
MASTER LICENSE NO.: 781-2223 LIMITED LICENSE NO.: SIGNATURE OF COM	ITHACTAD.	
LIMITED LICENSE NO.: 867 SIGNATURE OF CON	latter .	
Jour Journal of the Control of the C	10-0-0	

INSPECTOR'S COPY — WHITE
OFFICE COPY — CANARY
CONTRACTOR'S COPY — GREEN