

163 CUMBERLAND AVENUE



First cut # 920R - Half cut # 9202R - Third cut # 9203R - Fifth cut # 9205R



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date 11-28, 1979
 Receipt and Permit number A39753

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:
 The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of
 Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:
 LOCATION OF WORK: 163 74 Cumberland Ave.
 OWNER'S NAME: Mrs. ZEXXEL Campbell ADDRESS: Out of State

FEE\$

OUTLETS:
 Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____

FIXTURES: (number of)
 Incandescent _____ Fluorescent _____ (not strip) TOTAL _____
 Strip Fluorescent _____ ft. _____

SERVICES:
 Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____

METERS: (number of) _____

MOTORS: (number of)
 Fractional _____
 1 HP or over _____

add meter to existing service. 7.00

RESIDENTIAL HEATING:
 Oil or Gas (number of units) _____
 Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING:
 Oil or Gas (by a main boiler) _____
 Oil or Gas (by separate units) _____
 Electric: Under 20 kws _____ Over 20 kws _____

APPLIANCES: (number of)
 Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Con: actors _____
 Fans _____ Others (denote) _____

MISCELLANEOUS: (number of)
 Branch Panels _____
 Transformers _____
 Air Conditioners Central Unit _____
 Separate Units (windows) _____
 Signs 20 sq. ft. and under _____
 Over 20 sq. ft. _____
 Swimming Pools Above _____
 In Ground _____
 Fire/Burglar Alarms Residential _____
 Commercial _____
 Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____
 over 20 amps _____
 Circus, Fairs, etc. _____
 Alterations to wires _____
 Repairs after fire _____
 Emergency Lights, battery _____
 Emergency Generators _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 7.00

INSPECTION:
 Will be ready on 11-29, 1979 or Will Call _____
 CONTRACTOR'S NAME: Joseph V. Sarra
 ADDRESS: 46 Inverness St., Port. Me. 04103
 TEL: 255-1320
 MASTER LICENSE NO.: 04072 SIGNATURE OF CONTRACTOR: Joseph V. Sarra
 LIMITED LICENSE NO.: _____

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

ELECTRICAL INSTALLATIONS --

Permit Number 39758

Location 163 94 Campbell Ave.

Owner Mrs. Campbell

Date of Permit 11-28-79

Final Inspection 11-29-79

By Inspector J. Kelly

Permit Application Register Page No. 43

INSPECTIONS: Service Meter by Kelly
Service called in 11-29-79
Closing-in _____ by _____
PROGRESS INSPECTIONS: 11-29-79

CODE
COMPLIANCE
COMPLETED
11-29-79
DATE

REMARKS:

Table with multiple rows for recording inspection details and remarks.



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date Sept. 19, 1975, 19
 Receipt and Permit number A 03253

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

LOCATION OF WORK: 165 Cumberland Ave
 OWNER'S NAME: Bennette (broker) ADDRESS: Kellog St.

OULETS: (number of)
 Lights _____
 Receptacles _____ FEES
 Switches _____
 Plugmold _____ (number of feet)
 TOTAL _____

FIXTURES: (number of)
 Incandescent _____
 Fluorescent _____ (Do not include strip fluorescent)
 TOTAL _____
 Strip Fluorescent in feet _____

SERVICES:
 Permanent, total amperes 200 _____ FEES 3.00
 Temporary _____

METERS: (number of) 3 _____ FEES 1.50

MOTORS: (number of)
 Fractional _____
 1 HP or over _____

RESIDENTIAL HEATING:
 Oil or Gas (number of units) _____
 Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING:
 Oil or Gas (by a main boiler) _____
 Oil or Gas (by separate units) _____
 Electric (total number of kws) _____

APPLIANCES: (number of)
 Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Compactors _____
 Fans _____ Others (d note) _____
 TOTAL _____

MISCELLANEOUS: (number of)
 Branch Panels _____
 Transformers _____
 Air Conditioners _____
 Signs _____
 Fire/Burglar Alarms _____
 Circus, Fairs, etc. _____
 Alterations to wires _____
 Repairs after fire _____
 Heavy Duty, 220v outlets _____
 Emergency Lights battery _____
 Emergency Generators _____

INSTALLATION FEE DUE: _____
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____
 FOR PERFORMING WORK WITHOUT A PERMIT (304-9) _____
 TOTAL AMOUNT DUE: 4.50

INSPECTION:
 Will be ready on _____, 19____; or Will Call XX
 CONTRACTOR'S NAME: William Wilson
 ADDRESS: 16 Highland St., S. Portland
 TEL: 7.9-6506
 MASTER LICENSE NO. 0613 SIGNATURE OF CONTRACTOR: William Wayne Wilson
 LIMITED LICENSE NO. _____

FILL IN COMPLETELY AND SIGN WITH INK

PERMIT NUMBER

Permit No. 1521
OCT 23 1945



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 10/29/45

To the INSPECTOR OF BUILDINGS, PORTLAND, 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:

Location 163 Camb. Ave Use of Building (Res) No. Stories 2 New Building Existing

Name and address of owner of appliance Mrs Sarah Smith 163 Camb. Ave, Portland

Installer's name and address Will. J. J. Co. 70 7th Telephone 3-887

General Description of Work Oil Burner starting (Steam job)

IF HEATER, POWER BOILER OR COOKING DEVICE
Is appliance or source of heat to be in cellar? Yes If not, which story Kind of Fuel Oil

Material of supports of appliance (concrete floor or what kind) concrete
Minimum distance to wood or combustible 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 Connections to same flue

IF OIL BURNER
Name and type of burner Peter P-9-70 Labeled and approved by Underwriters' Laboratories Yes

Will operator be always in attendance? No Type of oil feed (gravity or pressure) pressure (battery)

Location oil storage cell No. and capacity of tanks 1-275 gal.
Will all tanks be more than seven feet from any flame? Yes How many tanks fireproofed? none

Amount of fee enclosed? 1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)
Signature of Installer Will. J. J. Co. 70 7th

Original

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS NOT MET

Permit No. 45/1521
Location 163 Cumb. Ave.
Owner Mrs Sarah Duck
Date of Permit 10/31/45
Post Card sent _____
Notif. for insp. _____
Approval Tag issued 1/19 45 P. H. C.

- Oil Burner Check List (date)
- 1. Kind of heat Steam
 - 2. Label
 - 3. Anti-siphon
 - 4. Oil storage ✓
 - 5. Tank Distance ✓
 - 6. Vent Pipe ✓
 - 7. Fill Pipe ✓
 - 8. Gauge ✓
 - 9. Rigidity ✓
 - 10. Feed safety ✓
 - 11. Pipe sizes and material ✓
 - 12. Control valve ✓
 - 13. Ash pit vent ✓
 - 14. Temp. or pressure safety ✓
 - 15. Instruction card
 - 16.

NOTES



FILL IN COMPLETELY AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Permit No. 4840

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. Portland, Maine, October 1, 1940

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 136 Cumberland Avenue Use of Building tenement house No. Stories 3 NEW EXISTING Existing "
Name and address of owner of appliance John Moroni, 136 Cumberland Avenue
Installer's name and address John J. Joyce, 18 Bejley Ave. Telephone 2-1657

General Description of Work

To install steam heating system in place of hot air heat

IF HEATER, POWER BOILER OR COOKING DEVICE

Is appliance or source of heat to be in cellar? yes If not, which story Kind of Fuel coal
Material of supports of appliance: (concrete floor or what kind) concrete
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace 2'
from top of smoke pipe 30" from front of appliance over 1' from sides or back of appliance over 1'
Size of chimney flue 9x12 Other connections to same flue none

IF OIL BURNER

Name and type of burner Labeled and approved by Underwriters' Laboratories?
Will operator be always in attendance? Type of oil feed (gravity or pressure)
Location oil storage No. and capacity of tanks
Will all tanks be more than seven feet from any flame? How many tanks fireproofed?

Amount of fee enclosed? 1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

INSPECTION COPY

Signature of Installer John J. Joyce

Permit No. 40/1519
 Location 136 Cumberland Ave
 Owner John Morris
 Date of Perm: 12/4/40

Post Card sent _____
 Notif. for inspection NOT COMPLETED
 Approval Tag issued _____

- Oil-Burner Check List (date) _____
1. Kind of heat Steam
 2. Label _____
 3. Anti-siphon _____
 4. Oil storage _____
 5. Tank distance _____
 6. Vent Pipe _____
 7. Fill Pipe _____
 8. Gauge _____
 9. Rigidity _____
 10. Feed safety _____
 11. Pipe sizes and rate _____
 12. Control valve _____
 13. Ash pit vent _____
 14. Temp. or pressure safety _____
 15. Instruction card _____
 16. _____

*if work is needed at
 about same time as the
 2 1/2" gas is required
 to the right of burner
 tank out for summer road
 will take care of it then
 before it is started on job
 O. G.*

NOTES

*1/2" gas duct from ceiling
 cloth covering duct and
 pipe used for 2 1/2" in front*



DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

CITY OF PORTLAND, MAINE

399 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

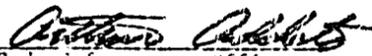
Date: April 24, 1990

Angus Campbell
P. O. Box 211
No. Bridgton, ME 04057

Re: 163 Cumberland Avenue.

Dear Sir:

An inspection has been made of the above referenced property. Trash, garbage, junked furniture, etc. provide rodent attraction/harborage, and is a serious violation of the City of Portland Municipal Codes, and must be removed from front, side, and rear areas of the above referenced property and properly disposed of on or before May 4, 1990. Trash for collection is not to be placed curbside prior to 6 p.m. on day preceding scheduled pick up. Tenants are to be instructed in this requirement.


Code Enforcement Officer
Arthur Accato (7)

/es
4/11/90

jmr



CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

OK
5-3-90
aa

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

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Arthur Addato
Code Enforcement Officer
Arthur Addato (7)

/s/
4/17/90

jmr

940055

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$30 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: EV. H. Doten Phone # 865-5972
Address: 190 Lambert Rd- Freeport, ME 04032
LOCATION OF CONSTRUCTION: .63 Cumberland Ave.
Contractor: OWNER Sec: _____
Address: _____ Phone # _____
Est. Construction Cost: \$2300 Proposed Use: 3-fam duplex
Past Use: 3-fam interior renov & corner
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Sexual Condominium _____ Conversion _____
Explain Conversion: interior renovations - 1st, 2nd fl bdrms
const dormer - 10' x 8'

For Official Use Only
Date: 1/20/94 Subdiv: _____
Inside Fire Limits _____
Bldg Code _____
Time Limit _____
Estimated Cost: 2300
Zoning: _____
Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required: _____
Zoning Board Approval: Yes _____ No _____ Date _____
Planning Board Approval: Yes _____ No _____ Date _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning: Yes _____ No _____ Floodplain: Yes _____ No _____
Special Exception (explain): _____
W/S 1-25-94

Foundations:
1. Type of Soil: _____
2. Set Backs - Front: _____ Rear: _____ Side(s): _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other: _____
Floor:
1. Sills Size: _____ Sills must be encased.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joist Size: _____ Spacing 16" O.C.
5. Joist Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Wall:
1. Studing Size: _____ Spacing: _____
2. No. of Studs: _____
3. No. Joists: _____
4. Header Size: _____ Spar(s): _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size: _____
7. Insulation Type: _____ Size: _____
8. Sheathing Type: _____ Size: _____
9. Siding Type: _____
10. Masonry Materials: _____
11. Metal Materials: _____

Interior Walls:
1. Studing Size: _____ Spacing: _____
2. Header Size: _____ Span(s): _____
3. Wall Covering Type: _____
4. Fire Wall if required: _____
5. Other Materials: _____

Ceiling:
1. Ceiling Joist Size: _____ Spacing: _____
2. Ceiling Sheathing Size: _____
3. Type Ceiling: _____
4. Insulation Type: _____ Size: _____
5. Ceiling Height: _____
Roof:
1. Truss or Rafter Size: _____ Spacing: _____
2. Sheathing Type: _____ Size: _____
3. Roof Covering Type: _____
Chimneys:
Type: _____ Number of Fire Places: _____
Heating:
Type: _____
Electrical:
Service Entrance Size: _____ Smoke Detector Required: Yes _____ No _____
Plumbing:
1. Approval of soil test if required: Yes _____ No _____
2. No. of Toilets or Showers: _____
3. No. of Flushes: _____
4. No. of Lavatories: _____
5. No. of Other Fixtures: _____
Swimming Pools:
1. Type: _____
2. Pool Size: _____
3. Must conform to National, State and State Law.

Permit Received By: Louise E. [Signature] Date: 1/20/94
Name of Applicant: Steven H. Doten
CFO's District: 1

PERMIT ISSUED
WITH REQUIREMENTS

CONTINUED TO REVERSE SIDE
Ivory Tag - CEO [Signature]

White - Tax Assessor

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

January 12, 1994

Steve Doten
19A Lambert Rd
Freeport, ME 04032

RE: 163 Cumberland Ave

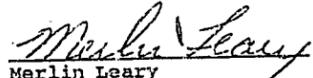
Dear Sirs,

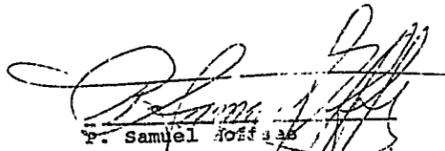
A recent inspection at the above named address of which you are listed the present owner, showed that alterations have been completed, or are in the process of being completed, that require a building permits from the city of Portland as defined in the 1990 BOCA Building Code and/or Portland Municipal Code.

It is therefore necessary for you to come to City Hall, 389 Congress Street, Room 315, to file an application for these required permits. This must be done within five (5) days of receipt of this letter. Failure to abide by this request could result in court action and a fine of up to \$500.00 to \$1,000.00 per day for each day this violation exists.

I look forward to your cooperation.

Sincerely,


Merlin Leary
Code Enforcement Officer


S. P. Hoffses
Chief of Inspection Services

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-5826

PROPERTY ADDRESS

Town or Plantation: Portland, ME

Street Subdivision Lot #: 63 CARROLL AVE

PROPERTY OWNERS' NAMES

Last: DREW First: STEVE

Applicant Name: Robert C. Smith

Mailing Address of Owner/Applicant (if Different): HAMILTON PLAZA WEST, 100 FLETCHER AVE, PORTLAND, ME 04101

PORTLAND 5063 TOWN COPY

Date Permit Issued: 11-25-94 \$ 10.240 Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P. # 0623

Chief Plumbing Inspector

Owner/Applicant Statement

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

Signature of Owner/Applicant: [Signature] Date: 11-25-94

Caution: Inspection Required

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

Local Plumbing Inspector Signature: [Signature] Date Approved: 11-28-94

PERMIT INFORMATION

This Application is for:

1. NEW PLUMBING
2. RELOCATED PLUMBING

Type Of Structure To Be Served:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D. HOUSING DEALER / MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # AS666

Hook-Up & Piping Relocation (Maximum of 1 Hook-Up)	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	3	Shower (Separate)
OR		Urinal	2	Sink
		Drinking Fountain		Wash Basin
HOOK-UP to an existing subsurface wastewater disposal system.		Indirect Waste	3	Water Closet (Toilet)
		Water treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION of sanitary lines, drains and piping without new fixtures.		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Number of Hook-Ups & Relocations		Bidet		Laundry Tub
		Other		Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	8	Fixtures (Subtotal) Column 1
		TRANSFER FEE (\$6.00)		Fixtures (Subtotal) Column 3
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			0	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

940055

City of Portland BUILDING PERMIT APPLICATION Fee \$30 Zone Map # Lot #

Permit # 940055 City of Portland BUILDING PERMIT APPLICATION Fee \$30 Zone Map # Lot #
Please fill out any part which applies to job. Proper plans must accompany form.
Owner: Steven H. Doten Phone # 865-6972
Address: 1980 Lambert Rd - Freeport, ME 04032
LOCATION OF CONSTRUCTION 163 Cumberland Ave.
Contractor: OWNER Sub:
Address: Phone #
Est. Construction Cost: \$2300 Proposed Use: 3-fam dwlg w dormer
Past Use: 3-fam intr renov & dormer
of Existing Res. Units # of New Res. Units
Building Dimensions L W Total Sq. Ft.
Stories # Bedrooms Lot Size:
Is Proposed Use: Seasonal Condominium Conversion
Explain Conversion interior renovations - 1st, 2nd fl bdrms

For Official Use Only
Date: 1/20/94
Subdivision: AN 2-7-1991
Inside Fire Limits:
Bldg Code:
Time Limit:
Ownership: Public Private
Estimated Cost: 2300

Foundation: 22-9-24 & const dormer - 10'x8'
1. Type of Soil:
2. Set Backs - Front Rear Side(s)
3. Footings Size:
4. Foundation Size:
5. Other:

Floor: Sills must be anchored.
1. Sills Size:
2. Girder Size:
3. Lally Column Spacing: Size: Spacing 16" O.C.
4. Joists Size: Size:
5. Bridging Type: Size:
6. Floor Sheathing Type: Size:
7. Other Material:

Exterior Walls:
1. Studding Size: Spacing:
2. No. windows:
3. No. Doors: Spacing:
4. Header Sizes: No. Spacing:
5. Bracing: Yes No.
6. Corner Posts Size:
7. Insulation Type: Size:
8. Sheathing Type: Size: Weather Exposure:
9. Siding Type:
10. Masonry Materials:
11. Metal Materials:

Interior Walls:
1. Studding Size: Spacing:
2. Header Sizes: Spacing:
3. Wall Covering Type:
4. Fire Wall if required:
5. Other Materials:

Zoning: Street Frontage Provided:
Provided Setbacks: Front Back Side Side
Review Required:
Zoning Board Approval: Yes No Date:
Planning Board Approval: Yes No Date:
Conditional Use: Variance Site Plan Subdivision
Shoreland Zoning Yes No Floodplain Yes No
Special Exception (Explain):

Ceiling:
1. Ceiling Joists Size:
2. Ceiling Strapping Size Spacing:
3. Type Ceilings: Size:
4. Insulation Type:
5. Ceiling Height:

Roof:
1. Truss or Rafter Size Spacing:
2. Sheathing Type Size:
3. Roof Covering Type:
Date:
Signature:

Chimneys:
Type: Number of Fire Places:
Heating:
Type of Heat:
Electrical:
Service Entrance Size: Smoke Detector Required Yes No

Plumbing:
1. Approval of soil test if required:
2. No. of Tubs or Showers:
3. No. of Flushes:
4. No. of Lavatories:
5. No. of Other Fixtures:

Swimming Pools:
1. Type:
2. Pool Size: x Square Footage:
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Doten
Date of Applicant Steven H. Doten
CEO's District 1

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED REQUIREMENTS

CONTINUED TO REVERSE SIDE Ivory Tag - CEO

White - Tax Assessor

MR. Leary

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 70 -

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

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 has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

BUILDING PERMIT REPORT

Address 1/26/94 Date _____
 Reason for Permit To MAKE INTERIOR RENOVATIONS &
STRUCTURE Bldg. Owner: STEVEN H. DETER
 Contractor: OWNER
 Permit Applicant: 11
 Approver: *4, *5, *6, *7, *9, *10, *12, *13

CONDITION OF APPROVAL:

1. Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection).
2. Precaution must be taken to protect concrete from freezing.
3. It is strongly recommended that a register land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
- *4. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hr., including fire doors with selfclosers.
- *5. Each apartment shall have access to (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- *6. The boiler shall be protected by enclosing with one (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible locations between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
- *7. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of special knowledge or separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping room must have minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm), and a minimum net clear opening of 5.7 sq.ft.
- *8. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code 919.3.2 (BOCA National Building Code 1993), and NFPA 101 Chapter 18 & 19.

9. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by Fire Partitions and floor/ceiling assembly ;lies which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1993).

*10. Guardrails & handrails - A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Group 42", except Use Group R which is 36". In occupancies in Use Group A, B, R-4, I1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

11. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10, section & subsections 1023.& 1024.0 of the City's building code (The BOCA National Building Code/1993).

*12. Stair construction in Use Group R-3, R-4 is a minimum of 9" tread and 8-1/4" maximum rise.

*13. Headroom in habitable space is a minimum of 7'6".

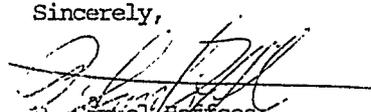
14. The minimum headroom in all parts of a stairway shall not be less than 80 inches.

15. All construction and demolition debris must be disposed at the City's authorize. reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate or occupancy is issued or demolition permit is granted.

16. Section 25-135 of the Municipal Code for the City of Portland states:"No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

17. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

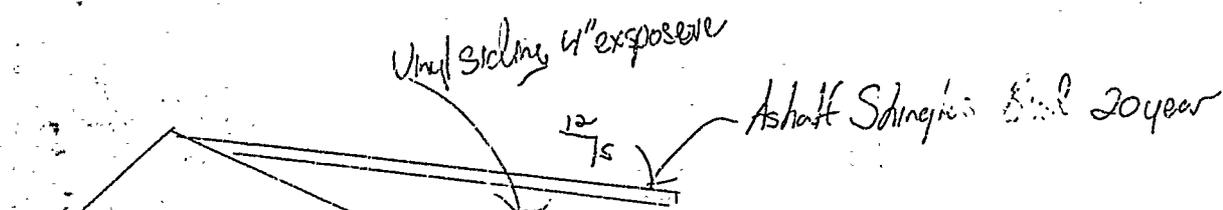
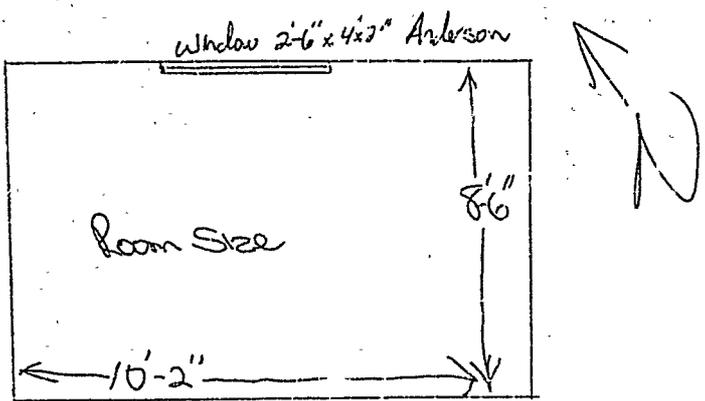
Sincerely,


Samuel Hennessey
Chief of Inspections

/drm 01/14/94
(redo w/additions)

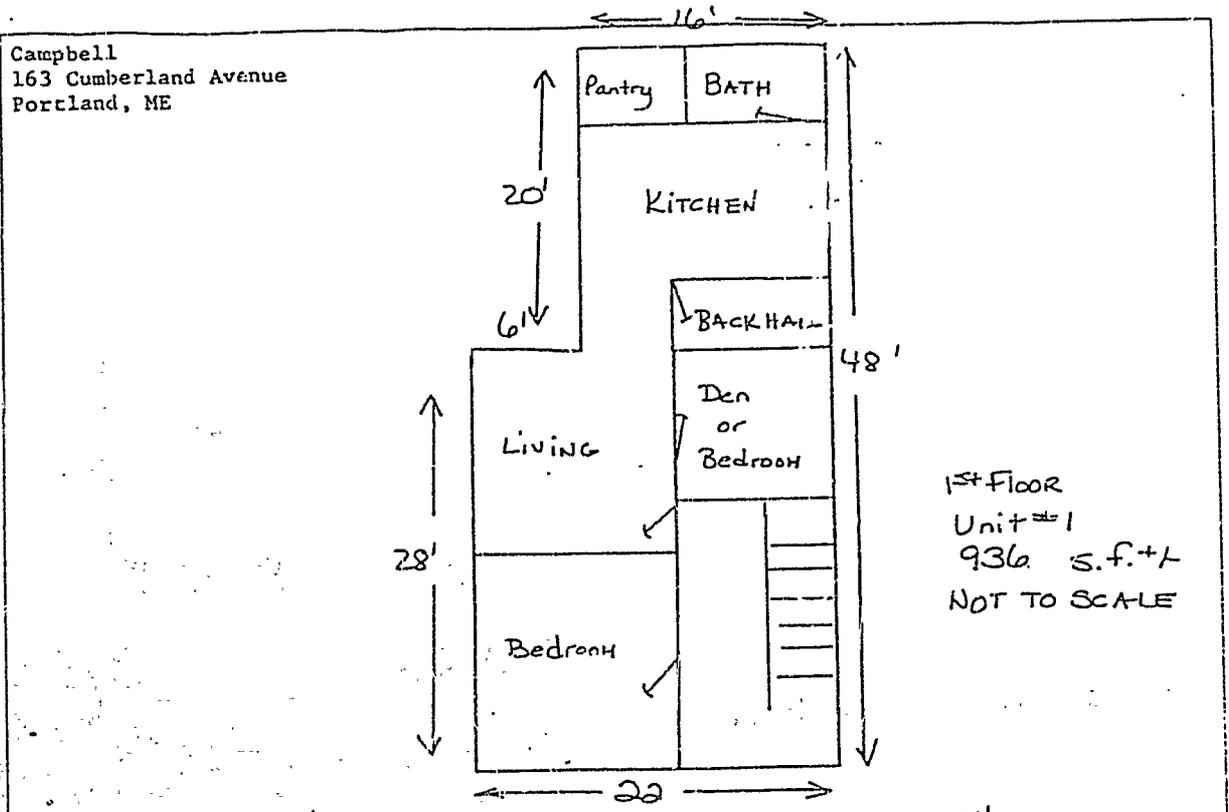
C. C. L. MacDougall

3rd Floor Dormer @ 163 Cumberland Ave

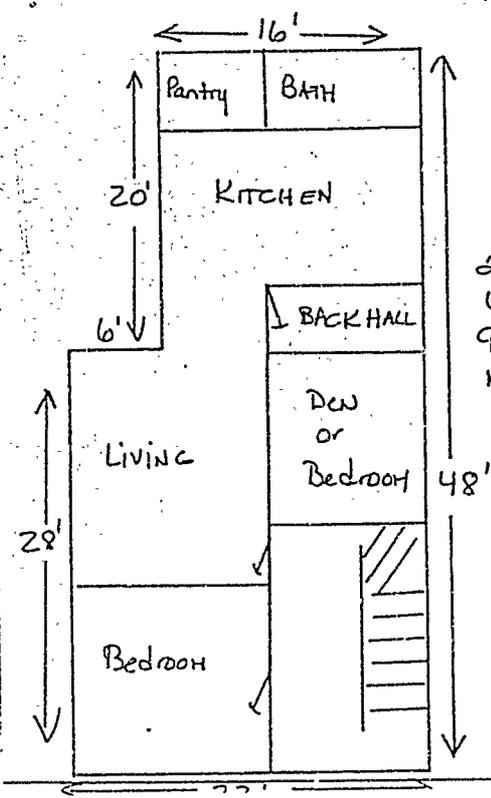


- Framing:
- Rafters - 2x8" - 16" o.c.
 - Studs - 2x4" - 16" o.c.
 - Insulation - 3 1/2" faced
 - Siding - vinyl 4" exposure.
 - Sheetrock - 1/2"
 - Strapping - 16" o.c.
 - Ceiling Insulation - 8" unfaced with poly barriers

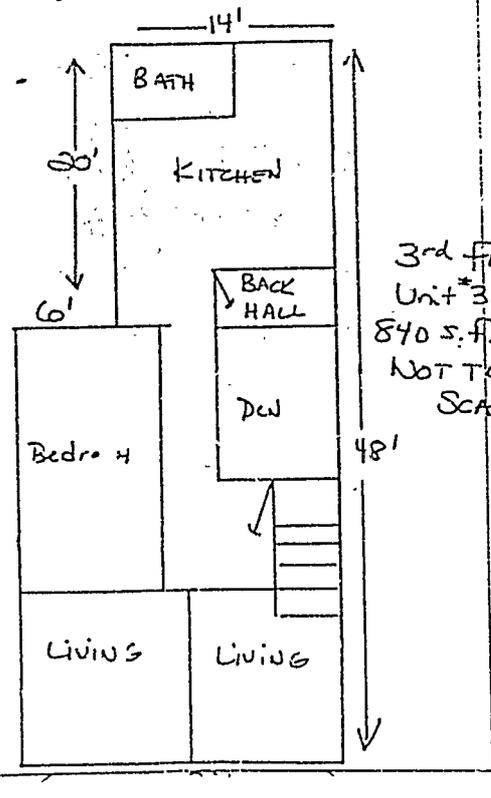
Campbell
163 Cumberland Avenue
Portland, ME



1st Floor
Unit #1
936 s.f. +/-
NOT TO SCALE

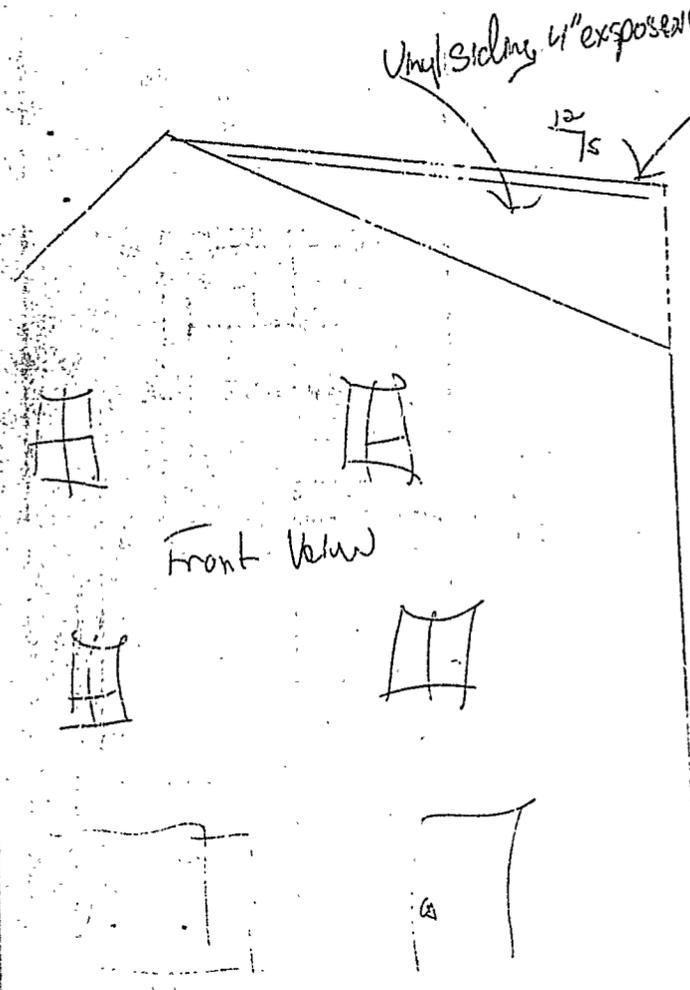
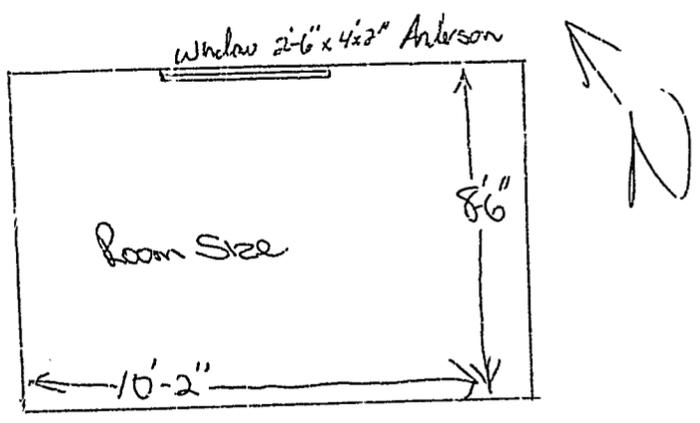


2nd Floor
Unit #2
936 s.f. +/-
NOT TO SCALE



3rd Floor
Unit #3
870 s.f. +/-
NOT TO SCALE

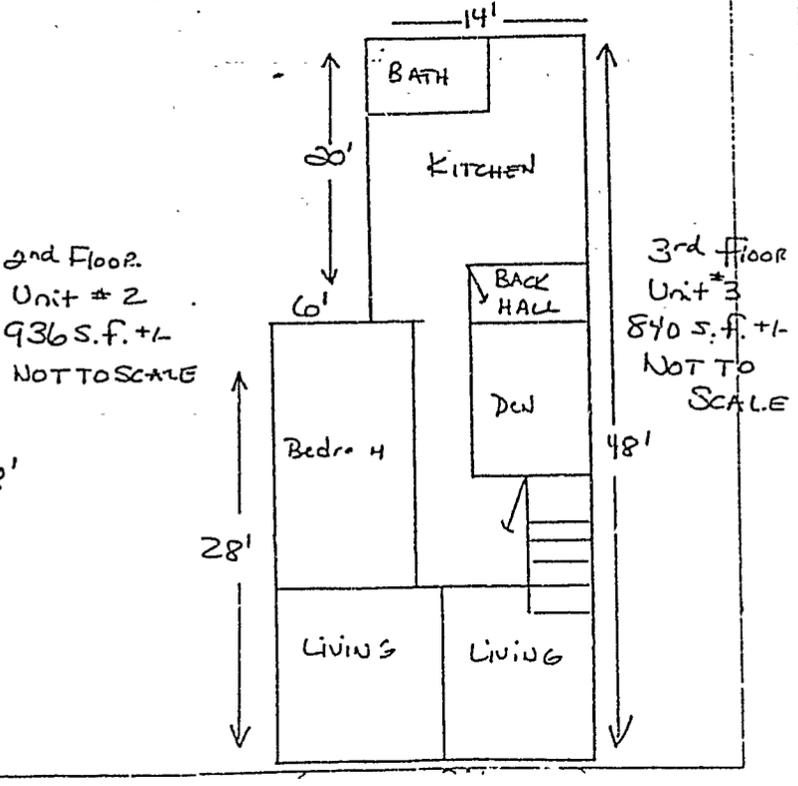
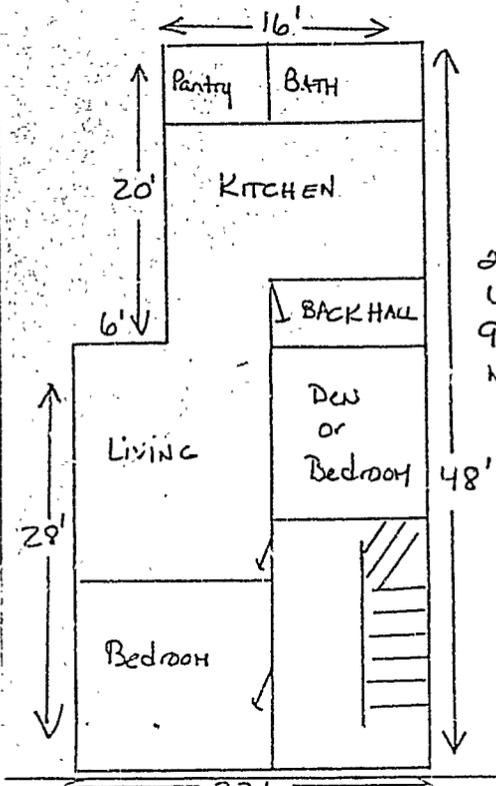
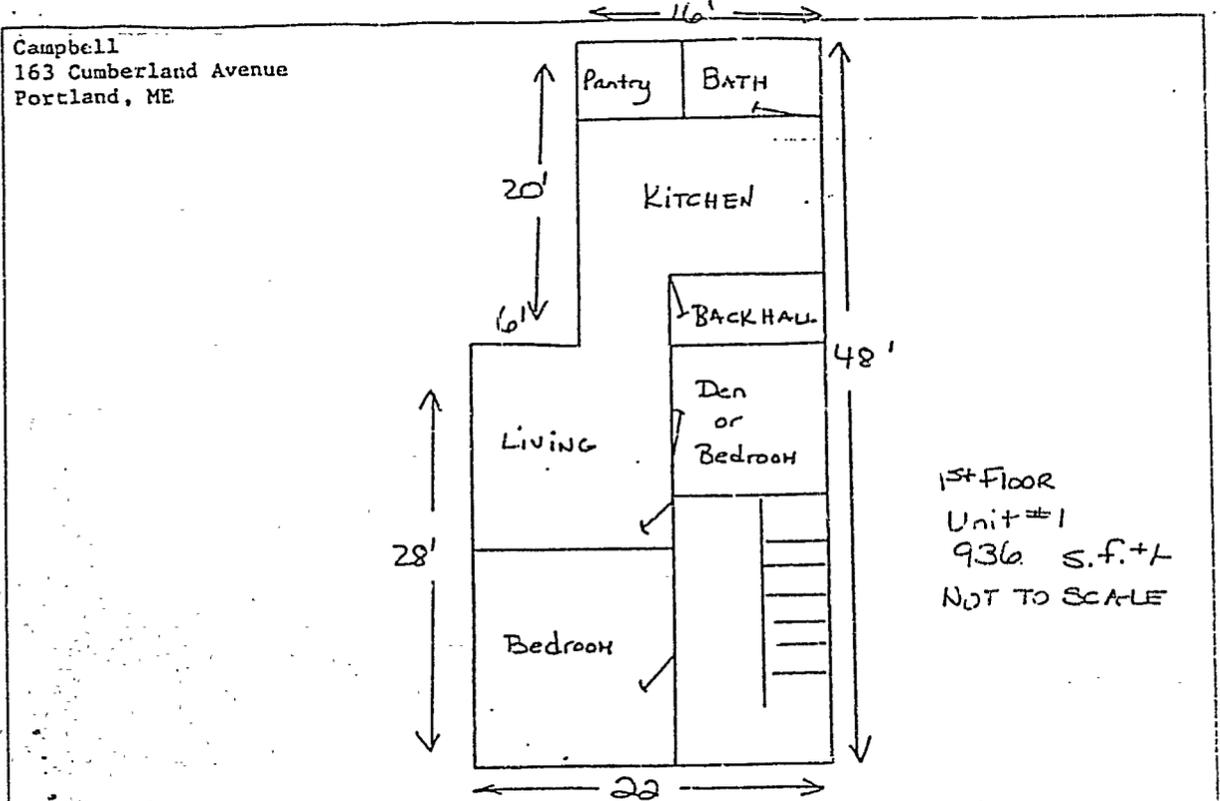
3rd Floor Dormer @ 163 Cumberland Ave



Asphalt Shingles Bird 20 year

- Framing:
- Rafters - 2x8" - 16" o.c.
 - Studs - 2x4" - 16" o.c.
 - Insulation - 3 1/2" faced
 - Siding - vinyl 4" expose
 - Sheetrock - 1/2"
 - Strapping - 16" o.c.
 - Ceiling Insulation - 8" unfaced with poly barriers

Campbell
163 Cumberland Avenue
Portland, ME





APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date June 25, 1993, 19
 Receipt and Permit number 2885

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

LOCATION OF WORK: 163 Cumberland Ave
 OWNER'S NAME: Harry Rippley ADDRESS: _____

	FEES
OUTLETS:	
Receptacles <u>32</u> Switches <u>8</u> Plugmold _____ ft. TOTAL _____	4.00
FIXTURES: (number of)	
Incandescent <u>14</u> Fluorescent _____ (not strip) TOTAL _____	2.80
Strip Fluorescent _____ ft. _____	
SERVICES:	
Overhead <input checked="" type="checkbox"/> Underground _____ Temporary _____ TOTAL amperes <u>200</u>	15.00
METERS: (number of) <u>4</u>	4.00
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____	Water Heaters _____
Cook Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
TOTAL _____	
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
	INSTALLATION FEE DUE: _____
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT _____	DOUBLE FEE DUE: _____
FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____	
	TOTAL AMOUNT DUE: <u>25.80</u>

INSPECTION.

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

CONTRACTOR'S NAME: Hannan's Electric
 ADDRESS: 897 Broadway SP
 TEL.: 767-2471
 MASTER LICENSE NO.: 2885 SIGNATURE OF CONTRACTOR: Harry Hannan
 LIMITED LICENSE NO.: _____

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

CITY OF PORTLAND, MAINE
MEMORANDUM

DATE: 20-5-24
CEL

TO: Bill Giroux - Zoning Administrator
FROM: Community Development Office/P.I.H.P.-Program
Loan Officer D. B. G.
SUBJECT: Verification of Legal Number of Units

We presently have an application for Loan/Grant for rehabilitation at:

103 Cambridge Ave
(ADDRESS)

The Owner is STEVEN & TAMMY DITCH Farmers, Angus
(NAME) Campbell

The given number of units of the building is 3

Please verify whether the number of units given are legal under the zoning/building Ordinance.

YES the number of units are legal

NO the number of units are not presently legal.

I have researched all the available records at City Hall and I believe 3 to be the legal number of units. If owner or applicant feels that this is not accurate, please contact me as soon as possible.

WRJ
SIGNED BY VERIFIER

Zoning Administrator
TITLE



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 12/28/93 IF
 Receipt and Permit number 8966

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

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

LOCATION OF WORK: 163 Cumberland Ave.

OWNER'S NAME: Stephen Dutton ADDRESS: _____

	FEES
OUTLETS:	
Receptacles <u>110</u> Switches <u>20</u> Plugmold _____ ft TOTAL <u>130</u>	<u>26.00</u>
FIXTURES: (number of)	
Incandescent <u>12</u> Fluorescent _____ (not strip) TOTAL <u>12</u>	<u>2.40</u>
Strip Fluorescent _____ ft	
SERVIC.	
Overhead <u>X</u> Underground _____ Temporary _____ TOTAL amperes <u>200</u>	<u>15.00</u>
METERS: (number of) <u>4</u>	<u>4.00</u>
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) <u>1</u>	<u>5.60</u>
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges <u>3</u>	
Cook Tops _____	
Wall Ovens _____	
Dryers _____	
Fans _____	
Water Heaters <u>3</u>	
Disposals _____	
Dishwashers _____	
Compactors _____	
Others (denote) _____	
TOTAL <u>6</u>	<u>12.00</u>
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	INSTALLATION FEE DUE: _____
FOR REMOVAL OF A "STOP ORDER" (304-16.b)	DOUBLE FEE DUE: _____
	TOTAL AMOUNT DUE: <u>64.40</u>

INSPECTION:

Will be ready on _____, 19__; or Will Call 1

CONTRACTOR'S NAME: Steve Melanson

ADDRESS: Windham ME

TEL: 892-8924

MASTER LICENSE NO.: #08966

LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

