

126 Spring Street

C LIST



# CITY OF PORTLAND

JOSEPH E. GRAY, JR.  
DIRECTOR OF PLANNING  
AND URBAN DEVELOPMENT

February 25, 1982

John & Sally Quirk  
~~759 Highland Avenue~~ 117 Spurwink Rd.  
~~South Portland, Maine 04106~~ *Bea, Me. 04074*

DU: 6

Re: 126 Spring St. 39-D-2 Gen.

The Housing Inspections Division of the Department of Planning & Urban Development has recently completed an overall inspection of your property.

Congratulations are extended to you for the general condition of your property which was found to meet the standards established by the City's Housing Code.

Good maintenance is the best way to protect the value of your property and neighborhood.

Please feel free to call on us if we can be of assistance to you.

Sincerely yours,  
Joseph E. Gray, Jr., Director of  
Planning & Urban Development

By *Lyle D. Hayes*  
Lyle D. Hayes  
Inspection Services Division

*Mary Schmuckal*  
Code Enforcement Officer - Schmuckal (3)

jmr

City of Portland

Check out sheet  
STRUCTURE INSPECTION SCHEDULE

Housing Inspection Division

1) Insp. Name

Schmidt

2) Insp. Date	3) Insp. Type	4) Proj. Code	5) Ass't's: Chart	6) Bl.	7) Lot	8) Census: Tract	9) Blk.	10) Insp.	11) Form No.
7-17-82			39	D	2				
12) House No.	13) Sec. H. No.	14) Suffix	5) Direct.	16) Street Name				17) St. Design.	
176				S. Kline St				Street	
18) Owner or Agent:							19) Status	20) Bldg's Rat.	
John & Sally Quirk							ABD	1	
21) Address: 759 Highland Ave									
22) City and State: So. Portland								Zip Code 04106	

23) D. Units	24) Occ. D. U.'s	25) Rm. Units	26) Occ. R. U.'s	27) No. Occupants	28) Com' U.	29) Bldg. Type	30) Stories	31) Const. Mat.	32) O. B.'s
6	6					SH	3	Wood	
33) C.H.	34) Pho.	35) Zoned For	36) Actual Land Use	37) D.D.	38) Lvs. Ad. Bth. Fac.	39) Disp.	40) Closing Date		

		Cd. Viol.		INTERIOR - Struct.		Cd. Viol.	
		3a	3b			8	
EXTERIOR - Structure				Lighting			
Foundation	EX/FO	3a		Elec. Wiring	EW	8a	
Walls	EX/WA	3a		Floors	FL	3b	
Roof	RO	3a		Walls	IN/WA	3b	
Porch	PO	3d		Ceilings	CE	3b	
Stairs	EX/GR	3d		Windows	IN/WI	3c	
Steps	SP	3d		Airshafts	AS	3c	
Doors	DO	3c		Roof Rafters	ROR	3a	
Windows	EX/WI	3c		Sanitation	SAN	4e	
Eaves	EA	3a		Stairways	IN/SRW	3d	
Trim	TR	3a		Stair Treads	SKT	3d	
Chimney	EX/CH	3e		Wall Lines	WSL	6d	
Gutters	GU	3a		Supply Lines	SUL	6c	
Roof Drains	RD	3a		Stacks	ST	3e	
Bulkhead	BU	3d		Flues	FU	3e	
Outbuildings	GR - SH	4c		Vents	VE	3e	
Yard	YA	4d		Chimneys	IN/CH	3e	
Garbage	GA	4d		Heating Equip. Furnace - FU	Spaceheater - SPH	9c	
Rubbish	RU	4d		Basmt. Sanitation Litter - LI	Debris - DE	4b	
Containers	CO	4d		Dampness - DM		3a	
Drainage	DR	3a		Lighting	BS/LI	8c	
Infestation	IN-CR-FL	4e		Elec Panel	EL/PA	8e	
Rats	RA	4e		Stairs	BS/SR	3d	
Other		4e		Foundation	IN/FO	3a	
Fire Escape	FE	10		Floor Joists	FL/JO	3a	
Dual Egress	DE	10		Carrying Timbers	CA/TI	3a	
Driveways	DW			Sills	SI	3a	
Walks	WA			Basement Conditions	BDU	5f	
Fences	FN						

Remarks on reverse side

City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-17-92

INSP

FORM NO.

FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLPRM.
1st	100					

TENANTS NAME

COX

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	CR'ng.	Heat	Lav.	Bath	Flush
									Gas	P	P	P

KITCHEN

- ( ) Plaster - L, C, M, - Ceiling/Walls
- ( ) Windows - loose, broken glass, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, dam., buckled
- ( ) Doors - Knob/lk - missing - Panels/Frames dam.
- ( ) Counter/Stor. Space Yes No
- ( ) Sink - chipped, cracked, leaks
- ( ) Range - improper stack, flue, vent
- ( ) Refrigerator Space Yes No
- ( ) Plumbing (a) 6(a) Water Supply Hot Cold
- ( ) Electrical (a)
- ( ) Sanitation (a)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)
- 6(d)
- 3(e)
- 6(c)

BATHROOM

- ( ) Plaster - L, C, M - Ceiling/Walls
- ( ) Window - loose, broken glass, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, dam., buckled
- ( ) Door - knob/lk - missing - Panels/Frames dam.
- ( ) Toilet - Tnk - brkn, loose, leaks, Seat, 1'se crkd.
- ( ) Lavatory - chipped, crkd, leaks, trap leaks
- ( ) Bathtub/Shower - leaks cross connection
- ( ) Ventilation Yes No
- ( ) Plumbing (b) 6(a) Water Supply Hot Cold
- ( ) Electrical (b)
- ( ) Sanitation (b)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)
- 6(d)
- 6(d)
- 7
- 6(c)

LIVING ROOM

- ( ) Plaster - L, C, M, - Ceiling/Walls
- ( ) Windows - loose, broken, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, damaged
- ( ) Door - knob/lk - missing - Panels/Frames dam.
- ( ) Electrical (c)
- ( ) Sanitation (c)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)

DINING ROOM

- ( ) Plaster - L, C, M - Ceiling/Walls
- ( ) Windows - loose, broken, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, damaged
- ( ) Doors - Knobs/lk - missing, Panels/Frames dam.
- ( ) Electrical (d)
- ( ) Sanitation (d)

CODE

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)

Bedrooms and/or other rooms


- ( ) Plaster - L, C, M - Ceiling/Walls
- ( ) Windows - Loose, broken, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floors - loose, worn, damaged
- ( ) Door - knobs/lk - missing - Panels/Frames dam.
- ( ) Electrical (e)
- ( ) Sanitation (e)
- ( ) Clothes Closet Yes No

Code

- 3(b)
- 3(c)
- 3(c)
- 3(b)
- 3(b)

Plumbing

Electrical

Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-17-02

INSP

FORM NO.

TENANTS NAME: [Handwritten: Smith, J. R.] FLR. # [Handwritten: 1st] LOCATION [Handwritten: Pearl]

Child Un. IC	Child 1 - 6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									GAS	P	P	P

KITCHEN	CODE	BATH ROOM	CODE
( ) Plaster - L, C, M, - Ceiling/Walls	3(b)	( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - loose, broken glass, glaze	3(c)	( ) Window - loose, broken glass, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)	( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floor - loose, worn, dam., buckled	3(b)	( ) Floor - loose, worn, dam., buckled	3(b)
( ) Doors - Knob/lk - missing - Panels/Frames dam.	3(b)	( ) Door - knob/lk - missing - Panels/Frames dam.	3(b)
( ) Counter/Stor. Space Yes <u>No</u>	-	( ) Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd.	6(d)
( ) Sink - chipped, cracked, leaks	6(d)	( ) Lavatory - chipped, crkd, leaks, trap leaks	6(d)
( ) Range - improper stack, flue, vent	3(e)	( ) Bathtub/Shower - leaks cross connection	6(d)
( ) Refrigerator Space Yes <u>No</u>	-	( ) Ventilation Yes <u>No</u>	7
( ) Plumbing (a) 6(a) Water Supply Hot <u>Cold</u>	6(c)	( ) Plumbing (b) 6(a) Water Supply Hot <u>Cold</u>	6(c)
( ) Electrical (a)		( ) Electrical (b)	
( ) Sanitation (a)		( ) Sanitation (b)	

LIVING ROOM	CODE	DINING ROOM	CODE
( ) Plaster - L, C, M, - Ceiling/Walls	3(b)	( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - loose, broken, glaze	3(c)	( ) Windows - loose, broken, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)	( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floor - loose, worn, damaged	3(b)	( ) Floor - loose, worn, damaged	3(b)
( ) Door - knob/lk - missing - Panels/Frames dam.	3(b)	( ) Doors - Knobs/lk - missing, Panels/Frames dam.	3(b)
( ) Electrical (c)		( ) Electrical (d)	
( ) Sanitation (c)		( ) Sanitation (d)	

Bedrooms and/or other rooms	Code
( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - Loose, broken, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floors - loose, worn, damaged	3(b)
( ) Door - knobs/lk - missing - Panels/Frames dam.	3(b)
( ) Electrical (e)	
( ) Sanitation (e)	
( ) Clothes Closet Yes <u>No</u>	
Plumbing	Electrical
	Sanitation - Vermin O R

REMARKS:

City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP

FORM NO.

INSP DATE

2-17-82

TENANTS NAME

LINGSBURY

FLR.# LOCATION RMG.TP. #RMS. #PED. #ALL'D SLRRM.

2d Flr

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									GAS	P	P	D

KITCHEN

- ( ) Plaster - L, C, M, - Ceiling/Walls
- ( ) Windows - loose, broken glass, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, dam., buckled
- ( ) Doors - Knob/lk - missing - Panels/Frames dam.
- ( ) Counter/Stor. Space Yes No
- ( ) Sink - chipped, cracked, leaks
- ( ) Range - improper stack, fluz, vent
- ( ) Refrigerator Space Yes No
- ( ) Plumbing (a) 6(a) Water Supply Hot Cold
- ( ) Electrical (a)
- ( ) Sanitation (a)

CODE  
3(b)  
3(c)  
3(c)  
3(b)  
3(b)  
-  
6(d)  
3(e)  
6(c)

- BATHROOM
- ( ) Plaster - L, C, M - Ceiling/Walls
  - ( ) Window - loose, broken glass, glaze
  - ( ) Sash/Frames - broken, missing, worn
  - ( ) Floor - loose, worn, dam., buckled
  - ( ) Door - knob/lk - missing - Panels/Frames dam.
  - ( ) Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd.
  - ( ) Lavatory - chipped, crkd, leaks, trap leaks
  - ( ) Bath tub/Shower - leaks cross connection
  - ( ) Ventilation Yes No
  - ( ) Plumbing (b) 6(a) Water Supply Hot Cold
  - ( ) Electrical (b)
  - ( ) Sanitation (b)

CODE  
3(b)  
3(c)  
3(c)  
3(b)  
3(b)  
6(d)  
6(d)  
6(d)  
7  
6(c)

LIVING ROOM

- ( ) Plaster - L, C, M, - Ceiling/Walls
- ( ) Windows - loose, broken, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floor - loose, worn, damaged
- ( ) Door - knob/lk - missing - Panels/Frames dam.
- ( ) Electrical (c)
- ( ) Sanitation (c)

CODE  
3(b)  
3(c)  
3(c)  
3(b)  
3(b)

- DINING ROOM
- ( ) Plaster - L, C, M - Ceiling/Walls
  - ( ) Windows - loose, broken, glaze
  - ( ) Sash/Frames - broken, missing, worn
  - ( ) Floor - loose, worn, damaged
  - ( ) Doors - Knobs/lk - missing, Panels/Frames dam.
  - ( ) Electrical (d)
  - ( ) Sanitation (d)

CODE  
3(b)  
3(c)  
3(c)  
3(b)  
3(b)

Bedrooms and/or other rooms


- ( ) Plaster - L, C, M - Ceiling/Walls
- ( ) Windows - Loose, broken, glaze
- ( ) Sash/Frames - broken, missing, worn
- ( ) Floors - loose, worn, damaged
- ( ) Door - knobs/lk - missing - Panels/Frames dam.
- ( ) Electrical (e)
- ( ) Sanitation (e)
- ( ) Clothes Closet Yes No

Code  
3(b)  
3(c)  
3(c)  
3(b)  
3(b)

Plumbing

Electrical

Sanitation - Vermin 0 R

REMARKS:

City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-17-82

INSP

FORM NO.

TEHANTS NAME

FLR.#

LOCATION

RMG.TP.

#RMS.

#PEO.

#ALL'D

SLRRM.

A AND B PLS

2ND FLOOR

Child Un.10	Child 1 - 6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									Gas	P	P	P

KITCHEN

CODE

BATHROOM

CODE

( ) Plaster - L, C, M, - Ceiling/Walls	3(b)	( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - loose, broken glass, glaze	3(c)	( ) Window - loose, broken glass, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)	( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floor - loose, worn, dam., buckled	3(b)	( ) Floor - loose, worn, dam., buckled	3(b)
( ) Doors - Knob/lk - missing - Panels/Frames dam.	3(b)	( ) Door - knob/lk - missing - Panels/Frames dam.	3(b)
( ) Counter/Stor. Space Yes <u>No</u>	-	( ) Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd.	6(d)
( ) Sink - chipped, cracked, leaks	3(d)	( ) Lavatory - chipped, crkd, leaks, trap leaks	6(d)
( ) Range - Improper stack, flue, vent	3(e)	( ) Bathtub/Shower - leaks cross connection	6(d)
( ) Refrigerator Space Yes <u>No</u>	-	( ) Ventilation Yes <u>No</u>	7
( ) Plumbing (a) 6(a) Water Supply Hot <u>Cold</u>	6(c)	( ) Plumbing (b) 6(a) Water Supply Hot <u>Cold</u>	6(c)
( ) Electrical (a)		( ) Electrical (b)	
( ) Sanitation (a)		( ) Sanitation (b)	

LIVING ROOM

CODE

DINING ROOM

CODE

( ) Plaster - L, C, M, - Ceiling/Walls	3(b)	( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - loose, broken, glaze	3(c)	( ) Windows - loose, broken, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)	( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floor - loose, worn, damaged	3(b)	( ) Floor - loose, worn, damaged	3(b)
( ) Door - knob/lk - missing - Panels/Frames dam.	3(b)	( ) Doors - Knobs/lk - missing, Panels/Frames dam.	3(b)
( ) Electrical (c)		( ) Electrical (d)	
( ) Sanitation (c)		( ) Sanitation (d)	

Bedrooms and/or other rooms

Code

( ) Plaster - L, C, M - Ceiling/Walls	3(b)
( ) Windows - Loose, broken, glaze	3(c)
( ) Sash/Frames - broken, missing, worn	3(c)
( ) Floors - loose, worn, damaged	3(b)
( ) Door - knobs/lk - missing - Panels/Frames dam.	3(b)
( ) Electrical (e)	
( ) Sanitation (e)	
( ) Clothes Closet Yes <u>No</u>	

Plumbing	Electrical	Sanitation - Vermin O R
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REMARKS:

City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-17-82

INSP

FORM NO.

TENANTS NAME: WIGGIN, FLR.#: 3, LOCATION: FRM

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent/Code	Rent Code	Furn	Hot Water	Dual Eqrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									GAS	P	P	Y

- KITCHEN**
- ( ) Plaster - L, C, M, - Ceiling/Walls 3(b)
  - ( ) Windows - loose, broken glass, glaze 3(c)
  - ( ) Sash/Frames - broken, missing, worn 3(c)
  - ( ) Floor - loose, worn, dam., buckled 3(b)
  - ( ) Doors - Knob/lk - missing - Panels/Frames dam. 3(b)
  - ( ) Counter/Stor. Space Yes No -
  - ( ) Sink - chipped, cracked, leaks 6(d)
  - ( ) Range - improper stack, flue, vent 3(e)
  - ( ) Refrigerator Space Yes No -
  - ( ) Plumbing (a) 6(a) Water Supply Hot Cold 6(c)
  - ( ) Electrical (a)
  - ( ) Sanitation (a)

- BATHROOM**
- ( ) Plaster - L, C, M - Ceiling/Walls 3(b)
  - ( ) Window - loose, broken glass, glaze 3(c)
  - ( ) Sash/Frames - broken, missing, worn 3(c)
  - ( ) Floor - loose, worn, dam., buckled 3(b)
  - ( ) Door - knob/lk - missing - Panels/Frames dam. 3(b)
  - ( ) Toilet - Tnk - brkn, loose, leaks, Seat, l'se crkd. 6(d)
  - ( ) Lavatory - chipped, crkd, leaks, trap leaks 6(d)
  - ( ) Bathtub/Shower - leaks cross connection 6(d)
  - ( ) Ventilation Yes No 7
  - ( ) Plumbing (b) 6(a) Water Supply Hot Cold 6(c)
  - ( ) Electrical (b)
  - ( ) Sanitation (b)

- LIVING ROOM**
- ( ) Plaster - L, C, M, - Ceiling/Walls 3(b)
  - ( ) Windows - loose, broken, glaze 3(c)
  - ( ) Sash/Frames - broken, missing, worn 3(c)
  - ( ) Floor - loose, worn, damaged 3(b)
  - ( ) Door - knob/lk - missing - Panels/Frames dam. 3(b)
  - ( ) Electrical (c)
  - ( ) Sanitation (c)

- DINING ROOM**
- ( ) Plaster - L, C, M - Ceiling/Walls 3(b)
  - ( ) Windows - loose, broken, glaze 3(c)
  - ( ) Sash/Frames - broken, missing, worn 3(c)
  - ( ) Floor - loose, worn, damaged 3(b)
  - ( ) Doors - Knobs/lk - missing, Panels/Frames dam. 3(b)
  - ( ) Electrical (d)
  - ( ) Sanitation (d)

Bedrooms and/or other rooms

												Code
												( ) Plaster - L, C, M - Ceiling/Walls 3(b)
												( ) Windows - Loose, broken, glaze 3(c)
												( ) Sash/Frames - broken, missing, worn 3(c)
												( ) Floors - loose, worn, damaged 3(b)
												( ) Door - knobs/lk - missing - Panels/Frames dam. 3(b)
												( ) Electrical (e)
												( ) Sanitation (e)
												( ) Clothes Closet Yes <u>No</u>

Plumbing Electrical Sanitation - Vermin O R

REMARKS:



City of Portland

Health Department  
DWELLING UNIT SCHEDULE

Housing Inspection Division

INSP DATE

2-11-7-18

INSP FORM NO.

FLR.#	LOCATION	RMG.TP.	#RMS.	#PEO.	#ALL'D	SLRRM.
3rd	PEARL		2			

TENANTS NAME

KAGAL

Child Un.10	Child 1-6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ng.	Heat	Lav.	Bath	Flush
									GAS	P	P	P

KITCHEN

- ( ) Plaster - L, C, M, - Ceiling/Walls 3(b)
- ( ) Windows - loose, broken glass, glaze 3(c)
- ( ) Sash/Frames - broken, missing, worn 3(c)
- ( ) Floor - loose, worn, dam., buckled 3(b)
- ( ) Doors - Knob/1k - missing - Panels/Frames/dam. 3(b)
- ( ) Counter/Stor. Space Yes No 6(d)
- ( ) Sink - chipped, cracked, leaks 3(e)
- ( ) Range - improper stack, flue vent -
- ( ) Refrigerator Space Yes No 6(c)
- ( ) Plumbing (a) 6(a) Water Supply Hot Cold
- ( ) Electrical (a)
- ( ) Sanitation (a)

BATHROOM

- ( ) Plaster - L, C, M - Ceiling/Walls 3(b)
- ( ) Window - loose, broken glass, glaze 3(c)
- ( ) Sash/Frames - broken, missing, worn 3(c)
- ( ) Floor - loose, worn, dam., buckled 3(b)
- ( ) Door - knob/1k - missing - Panels/Frames dam. 3(b)
- ( ) Toilet - Tnk - brkn, loose, leaks, Seat, 1'se crkd. 6(d)
- ( ) Lavatory - chipped, crkd, leaks, trap leaks 6(d)
- ( ) Bathtub/Shower - leaks cross connection 7
- ( ) Ventilation Yes No 6(c)
- ( ) Plumbing (b) 6(a) Water Supply Hot Cold
- ( ) Electrical (b)
- ( ) Sanitation (b)

LIVING ROOM

- ( ) Plaster - L, C, M, - Ceiling/Walls 3(b)
- ( ) Windows - loose, broken, glaze 3(c)
- ( ) Sash/Frames - broken, missing, worn 3(c)
- ( ) Floor - loose, worn, damaged 3(b)
- ( ) Door - knob/1k - missing - Panels/Frames dam. 3(b)
- ( ) Electrical (c)
- ( ) Sanitation (c)

DINING ROOM

- ( ) Plaster - L, C, M - Ceiling/Walls 3(b)
- ( ) Windows - loose, broken, glaze 3(c)
- ( ) Sash/Frames - broken, missing, worn 3(c)
- ( ) Floor - loose, worn, damaged 3(b)
- ( ) Doors - Knobs/1k - missing, Panels/Frames dam. 3(b)
- ( ) Electrical (d)
- ( ) Sanitation (d)

Bedrooms and/or other rooms

- |  |   |
|--|---|
|  | ( ) Plaster - L, C, M - Ceiling/Walls 3(b)              |
|  | ( ) Windows - loose, broken, glaze 3(c)                 |
|  | ( ) Sash/Frames - broken, missing, worn 3(c)            |
|  | ( ) Floors - loose, worn, damaged 3(b)                  |
|  | ( ) Door - knobs/1k - missing - Panels/Frames dam. 3(b) |
|  | ( ) Electrical (e)                                      |
|  | ( ) Sanitation (e)                                      |
|  | ( ) Clothes Closet Yes <u>No</u>                        |

*Handwritten signature/initials*

Plumbing	Electrical	Sanitation - Vermin	O R

REMARKS:

**CITY OF PORTLAND, MAINE**

DEPT. OF PLANNING & URBAN DEVELOPMENT  
Room 315, City Hall  
PORTLAND, MAINE 04101

*12-6 Spring St. - Ingle's arc*

DUPLICATE 88271ANI 02/27/88  
RETURN TO SENDER  
NOT DELIVERABLE AS ADDRESSED  
UNABLE TO FORWARD

John & Sally Quirk  
759 Highland Avenue  
South Portland, Maine 04106

*117 Spurwink Rd.  
Scarboro, ME  
04074*

SECTION 8 - EXISTING - LEASED HOUBING PROGRAM

ADDRESS 126 Spring St ; DATE 3/29/75

OWNER John Quirk ADDRESS 459 Highland Ave. S.P.

Location of Dwelling Units or  
Number of Dwelling Units Under  
Section 8 - Lease 1  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NEIGHBORHOOD CONSERVATION PROJECT N.D.P.

INSPECTED BY HOUSING DIVISION - YES  NO

"NOTICE OF HOUSING CONDITIONS" ISSUED 7/29 1974 ABATED 5/12 1975

LOAN PARTICIPANT \_\_\_\_\_

CERTIFICATE  
OF  
COMPLIANCE

CITY OF PORTLAND  
Health Department - Housing Inspections Division  
Telephone: 775-5451 - Extension 448

May 12, 1975 ✓

Mr. John J. Quirk  
759 Highland Avenue  
South Portland, Maine 04106

Re: Premises located at 126 Spring Street, Portland, Maine 39-B-2

Dear Mr. Quirk:

A re-inspection of the premises noted above was made on May 9, 1975  
by Housing Inspector Leary.

This is to certify that you have complied with our request to correct the violation of the Municipal Codes relating to housing conditions as described in our "Notice of Housing Conditions" dated July 29, 1974.

Thank you for your cooperation and your efforts to help us maintain decent, safe and sanitary housing for all Portland residents.

In order to aid in the preservation of Portland's existing housing inventory, it shall be the policy of this department to inspect each residential building at least once every five years. Although a property is subject to re-inspection at any time during the said five year period, the next regular inspection of this property is scheduled for May 1980.

Sincerely yours,

David C. Bittenbender  
Health Director (Acting)

By [Signature]  
Chief of Housing Inspections

Inspector [Signature]

M. Leary

/88

ADMINISTRATIVE HEARING DECISION

Date October 2, 1974

City of Portland  
Health Department - Housing Division  
Tel. 775-5451 Ext. 448

Mr. John J. Quirk  
759 Highland Avenue  
South Portland, Maine

OK  
DATE 5/9/75

Re: Premises located at 126 Spring Street, Portland, Maine

Dear Mr. Quirk:

You are hereby notified that ~~as a result of a reinspection and your request for additional~~

~~time~~

on ~~Sept. 26, 1974~~, regarding our "NOTICE OF HOUSING CONDITIONS" at the above referred premises resulted in the decision noted below.

~~XX~~ Expiration time extended to November 29, 1974 in order to complete the work now

~~in progress to correct the remaining (9) nine Housing Code violations as shown~~

~~on the attached list.~~

Notice modified as follows:

Please notify this office if all violations are corrected before the above mentioned date, so that a "CERTIFICATE OF COMPLIANCE" may be issued.

In Attendance

Very truly yours,

~~Mr. Quirk~~

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Health Director

Harlin Leary, Inspector

By [Signature]  
Chief of Housing Inspections

Encl. 1

rl

10/2/74

126 Spring Street, Portland

EXISTING VIOLATIONS OF CHAPTER 307 - "MINIMUM STANDARDS FOR HOUSING"

SECTION(S)

<del>12/1/74</del>	<del>Repair or replace loose boards on floor of first floor rear hall.</del>	<del>3b</del>
<del>12/1/74</del>	<del>Enclose loose wiring, first floor rear hall walls.</del>	<del>8c</del>
<del>5/2/74</del>	<del>Replace missing mortar, front cellar foundation.</del>	<del>3a</del>
<del>5/2/74</del>	<del>Replace missing mortar, front cellar floor.</del>	<del>3b</del>
	Second Floor - left rear - #1	
<del>2/5/74</del>	<del>Replace broken glass, kitchen windows.</del>	<del>3c</del>
<del>5/2/74</del>	<del>Install a three-piece bath within the walls of this dwelling unit,</del>	
	<del>consisting of a flush toilet, lavatory and bathtub or shower.</del>	<del>6a</del>
	Second floor - right rear - #2	
<del>5/2/74</del>	<del>Install a three-piece bath within the walls of this dwelling unit</del>	
	<del>consisting of a flush toilet, lavatory and bathtub or shower.</del>	<del>6a</del>
	Second floor - front - #3 and #4	
<del>12/2/74</del>	<del>Install a three-piece bath within the walls of this dwelling unit</del>	
	<del>consisting of a flush toilet, lavatory, and bathtub or shower.</del>	<del>6a</del>
	Third floor - middle - shared bath	
<del>2/8/74</del>	<del>Repair or replace the broken plaster, bathroom ceiling.</del>	<del>3b</del>

\*WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH ASTERISKS, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

NOTICE OF HOUSING CONDITIONS

LDN/72

DU 6

CITY OF PORTLAND  
Health Department - Housing Division  
Telephone 775-5451 - Extension 448

Location: 39-D-2  
Project: 126 Spring Street  
Issued: ~~4-9-74~~ 7-29  
Expres: ~~6-2-74~~ 9-29

Mrs. Isabel R. Hamlin *John Quirk*  
~~126 Spring Street~~ *Highland Ave*  
~~Portland, Maine~~ *50 Portland*

Dear Mrs. Hamlin:

An examination was made of the premises at 126 Spring Street Portland, Maine, by Housing Inspector Leary. Violations of Municipal Codes relating to housing conditions were found as described in detail below.

In accordance with provisions of the above mentioned Codes, you are requested to correct these defects on or before June 9, 1974. You may contact this office to arrange a satisfactory repair schedule if you are unable to make such repairs within the specified time. We will assume the repairs to be in progress if we do not hear from you within ten days from this date and, on re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with Code Standards.

Your cooperation will help this Department in its goal to maintain all Portland residents in decent, safe and sanitary housing.

Very truly yours,

Arthur A. Hughson, CPH, MPH  
Health Director

Inspector \_\_\_\_\_

By *J. C. ...*  
Chief of Housing Inspections

EXISTING VIOLATIONS OF CHAPTER 307 - "MINIMUM STANDARDS FOR HOUSING" Section(s)

- |  |     |
|--|-----|
| <del>1. Replace missing mortar on chimney, middle roof.</del>            | 3-a |
| <del>2. Enclose loose wiring, first floor rear hall wall.</del>          | 8-a |
| <del>3. Replace broken glass, right front and rear cellar windows.</del> | 3-c |
| 4. Replace missing mortar, front cellar foundation.                      | 3-a |
| 5. Replace missing mortar, front cellar floor.                           | 3-b |

First floor - rear

- |  |     |
|--|-----|
| <del>6. Repair or replace the broken and buckled plaster, living room ceiling.</del> | 3-b |
|--|-----|

Second Floor - left rear - #1

- |  |     |
|--|-----|
| *7. Replace broken glass, kitchen windows.   | 3-c |
| *8. Install a three-piece bath within the walls of this dwelling unit, consisting of a flush toilet, lavatory and bathtub or shower. | 6-a |

Second floor - right rear - #2

- |   |     |
|---|-----|
| *9. Install a three-piece bath within the walls of this dwelling unit consisting of a flush toilet, lavatory and bathtub or shower. | 6-a |
|---|-----|

Second floor - front - #3 and 4

- |  |     |
|--|-----|
| *10. Install a three-piece bath within the walls of this dwelling unit consisting of a flush toilet, lavatory and bathtub or shower. | 6-a |
|--|-----|

continued -

126 Spring Street - continued

	Section(s)
<del>9/12/6</del> <del>Third floor - rear - #5 and 6</del> <del>Install a three-piece bath within the walls of the dwelling unit consisting of a flush toilet, a lavatory and bathtub or shower.</del>	<del>6-a</del>
*12. ✓ <u>Third floor - middle - shared bath</u> Repair or replace the broken plaster, bathroom ceiling. # 516	3-b
<del>9/12/6</del> <del>Third floor - front</del> <del>Install a three-piece bath within the walls of the dwelling unit consisting of a flush toilet, a lavatory and bathtub or shower.</del>	<del>6-a</del>

\*WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH ASTERISKS, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

*Repair loose flooring near hall*



hm

REINSPECTION RECOMMENDATIONS

INSPECTOR M. [unclear]

ADDRESS 121 Spring St  
CITY General  
OWNER Mrs. Joseph R. Hawley

NOTICE OF HOUSING CONDITIONS		HEARING NOTICE		FINAL NOTICE	
Issued	Expired	Issued	Expired	Issued	Expired
4-9-74	6-9-74				

A reinspection was made of the above premises and I recommend the following action:

5/9	mt	ALL VIOLATIONS HAVE BEEN CORRECTED Send "CERTIFICATE OF COMPLIANCE" <input checked="" type="checkbox"/> "POSTING RELEASE" <input type="checkbox"/>
9/26	mt	SATISFACTORY Rehabilitation in Progress Time Extended To <u>November 29</u>
12/4	mt	Time Extended To <u>January 2 11:00</u>
1/7	mt	Time Extended To <u>Feb 1975 ORB #1012/1</u>
4/22	mt	UNSATISFACTORY Progress Send "HEARING NOTICE" <input checked="" type="checkbox"/> 6-26-74 9:30 a.m. "FINAL NOTICE" <input type="checkbox"/>
		"NOTICE TO VACATE" _____ POST Entire _____ POST Dwelling Units _____
		UNSATISFACTORY Progress Request "LEGAL ACTION" Be Taken _____
6/10/74	mt	INSPECTOR'S REMARKS: <u>Owner is going to sell property.</u>
6/24	mt	<u>Job done. 10 units. 20 units.</u>
9/25	mt	<u>3 violations corrected in remaining.</u>
9/26	mt	<u>5 violations corrected. 9 violations remaining, including 1 additional. Met with owner.</u>
11/4	mt	<u>6 violations remaining. 3 corrected.</u>
1/7	mt	<u>Met with owner. Still complete violations exist.</u>
2/9	mt	INSTRUCTIONS TO INSPECTOR: <u>4 violations corrected &amp; remaining. Installation, both in</u>
5/11	mt	<u>all violation corrected.</u>

Inspection Services  
P. Samuel Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

**CITY OF PORTLAND**

APRIL 09, 1997

QUIRK JOHN D  
29 CHAMBRLAIN RD  
SCARBOROUGH ME 04074

Re: 126 SPRING ST  
CBL: 039- - D-002-001-01  
DU: 6

Dear Mr. Quirk:

The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above-referred property.

Congratulations are extended to you for the general condition of your property which was found to meet the standards established by the City's Housing Code. We did, however, note the following items that could cause future problems:

1. INT - OVERALL - 113.50  
HARD-WIRED BATTERY-BACKUP SMOKE DETECTORS ARE REQUIRED IN EACH UNIT

Good maintenance is the best way to protect the value of your property and neighborhood.

Please feel free to call on us if we can be of assistance to you.

Sincerely,

*Arthur Rowe*

Arthur Rowe  
Code Enforcement Officer

*Tammy Munson*

Tammy Munson  
Code Enfc.Offc./ Field Supv.

Inspection Services  
P. Samuel Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

MAY 29, 1996

**CITY OF PORTLAND**

QUIRK JOHN D  
29 CHAMBRLAIN RD  
SCARBOROUGH ME 04074

Re: 126 SPRING ST  
CBL: 039- - D-002-001-01  
DU: 6

Dear Mr. Quirk;

You are hereby notified, as owner or agent, that an inspection was made of the above-referenced property. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspections Report".

In accordance with the provisions of the above-mentioned Code, you are hereby ordered to correct those defects within sixty (60) days. If you are unable to make such repairs within the specified time, you may contact this office to arrange a satisfactory repair schedule. If we do not hear from you within ten (10) days from this date, we will assume the repairs to be in progress and, on reinspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

Please Note: You should consult this department to insure that any corrective action you should undertake complies with the building, plumbing, electrical, zoning and other Articles of the City Code.

Please contact this office if you have any questions regarding this order.

Your cooperation will aid this department in its goal to maintain decent, safe, and sanitary housing for all of Portland's residents.

Sincerely,

Tammy Munson  
Code Enfc. Offr./ Field Supv.

## HOUSING INSPECTION REPORT

Location: 126 SPRING ST

Housing Conditions Date: MAY 29, 1996

Expiration Date: JULY 28, 1996

Items listed below are in violation of Article V of the Municipal Codes, "Housing Codes", and must be corrected before the expiration date:

1. EXT - RIGHT/REAR - 108.10  
BULKHEAD DOORS ARE ROTTED
2. EXT - REAR PORCH - 108.40  
BALUSTERS ARE MISSING
3. EXT - RIGHT/REAR - 113.50  
ELECTRICAL SERVICE IS UNATTACHED
4. EXT - RIGHT/REAR - 108.10  
DOWNSPOUT IS BROKEN
5. EXT - OVERALL - 113.50  
THERE IS NO EXTERIOR LIGHTING
6. EXT - OVERALL - 108.10  
THE PAINT IS PEELING
7. EXT - FRONT/RIGHT - 108.10  
THE SIDING IS DAMAGED