

45 Brackett Street

REINAB III



CERTIFICATE OF COMPLIANCE

PORTLAND WEST NEIGHBORHOOD DEVELOPMENT PROGRAM
REHABILITATION STANDARDS

February 15, 1973

CITY OF PORTLAND
Health Department - Housing Division
Tel. 775-5451 Ext 448
Mr. Clay Espey
540 E. Bridge Street
Westbrook, Maine

Re: Premises located at 45 Brackett Street, Portland, Maine

Dear Mr. Espey:

A re-inspection of the premises noted above was made on February 9, 1973
by Housing Inspector McIsaac, of the Health Department.

This is to certify that you have complied with our request to correct violations of
all "Rehabilitation Standards established by the Portland West Neighborhood Deve-
lopment Program, Urban Renewal Plan, City of Portland, Maine, dated May 15, 1972"
and described in our "Notice of Housing Conditions" issued November 3, 1972.

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

Sincerely yours,

Arthur A. Hughson, CPH, MPH
Health Director

By Gyle D. Hayes
Chief of Housing Inspections

Housing Inspector Harold H. McIsaac

CW

LDN/72

NOTICE OF HOUSING CONDITIONS

DU 3

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

Location: **45 Brackett Street**
Project: **NBP # 3**
Issued: **11-3-72**
Expires: **12-3-72**

Mr. Clay Espey
540 E. Bridge Street
Westbrook, Maine

Dear Mr. Espey:

An examination was made of the premises at 45 Brackett Street
Portland, Maine, by Hous'g Inspector Gough. 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 December 3, 1972. 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 reinspection 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 [Signature]

By [Signature]

Chief of Housing Inspections

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

Section(s)

- ~~1. Replace the broken glass in the second floor front hallway window. 3-c~~
- ~~2. Replace the broken glass of the first floor front hallway door. 3-c~~
- ~~3. Replace the broken glass of the cellar window. 3-c~~

First Floor

- ~~4. Install one duplex convenience outlet in the bathroom.~~

Second Floor

- ~~5. Install one duplex convenience outlet in the bathroom.~~
- ~~6. Replace the broken glass of the bathroom window. 3-c~~

Third Floor

- ~~7. Install one duplex convenience outlet in the bathroom.~~

REINSPECTION RECOMMENDATIONS

INSPECTOR J. Isaac

LOCATION 45 Broadall St
 PROJECT NUP
 OWNER CLAY ESPEY

NOTICE OF HOUSING CONDITIONS		HEARING NOTICE		FINAL NOTICE	
Issued	Expired	Issued	Expired	Issued	Expired
<u>11-3-72</u>	<u>12-3-72</u>				

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

DATE	ALL VIOLATIONS HAVE BEEN CORRECTED Send "CERTIFICATE OF COMPLIANCE" <input checked="" type="checkbox"/>	"POSTING RELEASE" <input type="checkbox"/>
<u>2-8-73</u>	<u>SATISFACTORY Rehabilitation In Progress</u>	
	Time Extended To _____	
	Time Extended To _____	
	Time Extended To _____	
	<u>UNSATISFACTORY Progress</u> Send "HEARING NOTICE" _____ "FINAL NOTICE" _____	
	"NOTICE TO VACATE" _____ POST Entire _____ POST Dwelling Units _____	
	<u>UNSATISFACTORY Progress</u> Request "LEGAL ACTION" Be Taken _____	
	INSPECTOR'S REMARKS: _____ _____ _____ _____ _____ _____ _____ _____	
	INSTRUCTIONS TO INSPECTOR: _____ _____ _____	

NOTICE OF HOUSING CONDITIONS

C 03
BSL
File

CITY OF PORTLAND, MAINE

DU 3

Department of Planning & Urban Development
Inspection Services Division
Tel. 775-5451 - Ext. 311 - 346

CH. 44 BLK. E LOT 14

LOCATION: 45 Brackett Street

Mrs. Jean L. Espey
540 East Bridge Street
Westbrook, ME 04092

PROJECT: NCP-WE
ISSUED: October 29, 1986
EXPIRES: December 29, 1986

Dear Mrs. Espey:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 45 Brackett Street by Code Enforcement Officer Merlin Leary. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above-mentioned Code, you are hereby ordered to correct those defects on or before December 29, 1986. 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 re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

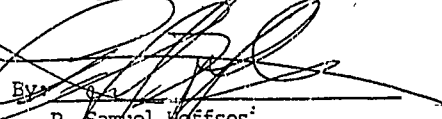
Please Note: You should consult the Inspection Services Division to insure that any corrective action you undertake complies with the building, plumbing, electrical, zoning and any other Article of the City Code.

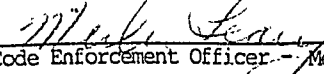
Please contact this office if you have any questions regarding this order.

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

Very truly yours,

Joseph E. Gray, Jr., Director
Planning & Urban Development


By _____
P. Samuel Hoffses
Chief of Inspection Services


Code Enforcement Officer - Merlin Leary (5)

Attachments

jmr

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE
ARTICLE 5 HOUSING CODE

INSP DATE

10/1/81

TENANT'S NAME

Roberta Falkner

INSP

FORM NO.

Flr # Location Bmg. Tr. # Bms. # Pco. # All'd Slp. Rm.

3. N. W. 4. 2 2 2

Child Un.10	Child 1 - 6	+ Lead Survey Results	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ing	Heat	Lav.	Bath	Flush
				NO	YES	YES	LE	OFF	PL	PM	DL

KITCHEN

() Plaster - L, C, M, - Ceiling/Walls	108-2
() Windows - loose, broken glass, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, dam., buckled	108-2
() Doors - Knob/lk - miss.-Pan./Fram.dam.	108-3
() Counter/Str. Space Yes No	-
() Sink - chip., crack., leaks	111-1
() Range - improper stack, flue, vent	114-1
() Refrigerator Space Yes No	-
() Plumbing (a)6 (a)Water Sup. Hot Cold	111.3
() Electrical (a)	113
() Sanitation (a)	109

BATHROOM

() Plaster - L, C, M - Ceiling/Walls	108-2
() Window - loose, broken glass, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, dam., buckled	108-2
() Door - knob/lk - miss.-Pan./Fram. dam.	108-3
() Toilet-Tnk-brkn, loose, leaks, seat, crkd.	111-1
() Lavatory - chip, crkd, leaks, trap leaks	111-1
() Bathtub/shower- leaks, cross connect.	111-1
() Ventilation Yes No	112
() Plumb. (b)6(a)Water Sup..Hot Cold	111-3
() Electrical (b)	113
() Sanitation (b)	109

LIVING ROOM

() Plaster - L, C, M, - Ceil./Walls	108-2
() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, damaged	108-2
() Door - knob/lk - miss. - panels/frames dam.	108-3
() Electrical (c)	113
() Sanitation (c)	109

DINING ROOM

() Plaster - L,C,M - Ceil/Walls	108-2
() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floor - loose, worn, damaged	108-2
() Doors - Knobs/lk - miss. - panels/frames dam.	108-3
() Electrical (d)	113
() Sanitation (d)	109

Bedrooms and/or other rooms

() Plaster - L,C,M - Ceiling/Walls	108-2
() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floors - loose, worn, damaged	108-2
() Door - knobs/lk - miss.-Panels/Frames dam.	108-3
() Electrical (e)	113
() Sanitation (e)	109
() Clothes Closet Yes No	

Bedrooms and/or other rooms

() Plaster - L,C,M - Ceiling/Walls	108-2
() Windows - loose, broken, glaze	108-3
() Sash/Frames - broken, missing, worn	108-3
() Floors - loose, worn, damaged	108-2
() Door - knobs/lk - miss.-Panels/Frames dam.	108-3
() Electrical (e)	113
() Sanitation (e)	109
() Clothes Closet Yes No	

Plumbing	Electrical	Sanitation - Vermin O R
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REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

1) INSP. DATE

10 / 1 / 86

2) INSP.

5

3) FORM NO.

4) TENANT'S NAME

Debra Moriarty

5) Flr.#

2

6) Location

RI

7) Rng. Tp

DU

8) #Rms.

4

9) #Pec.

3

10) #All'c

4

11) Slp. R.

2

12) Child Under 10

13) Child 1-6

14)

15) Rent

16) Rent Code

17) Furn.

18) Heat

19) Hot Water

20) Dual Egress

21) Ck'ng

22) Lav.

23) Bath

24) Flush

Viol. No.

Remedy

Cond.

Violation

Location

Room Type

Area Type

Resp. Party

Code Sect Violated

Violation Rem. - Date

*13

BR

Lavatory

Bath

100m

2

11-1

*14

BU / 107

Tiles

Bath

CL

2

1072

City of Portland

PLANNING AND URBAN DEVELOPMENT
DWELLING UNIT SCHEDULE
ARTICLE 5 - HOUSING CODE

Inspection Services Division

INSP DATE

INSP

FORM NO.

TENANTS NAME _____ Flr. # Location Bng. Tp. # Rms. # Pco. # All'd Slp. Rm.

Child Un. 10	Child 1 - 6	+ Lead Survey - Results	Rent	Rent Code	Furn	Hot Water	Dual Egrs.	Ck'ing	Heat	Lav.	Bath	Flush
KITCHEN					CODE	BATHROOM						CODE
<input type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls <input type="checkbox"/> Windows - loose, broken glass, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, dam., buckled <input type="checkbox"/> Doors - Knob/lk - miss.-Pan./Fram.dam. <input type="checkbox"/> Counter/Stor. Space Yes No <input type="checkbox"/> Sink - chip., crack., leaks <input type="checkbox"/> Range - improper stack, flue, vent <input type="checkbox"/> Refrigerator Space Yes No <input type="checkbox"/> Plumbing (a)6 (a)Water Sup. Hot Cold <input type="checkbox"/> Electrical (a) <input type="checkbox"/> Sanitation (a)					108-2 108-3 108-3 108-2 108-3 - 111-1 114-1 - 111.3 113 109	<input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls <input type="checkbox"/> Window - loose, broken glass, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floor - loose, worn, dam., buckled <input type="checkbox"/> Door - knob/lk - miss.-Pan./Fram. dam. <input type="checkbox"/> Toilet-Tnk-brkn, loose, leaks, seat, crkd. <input type="checkbox"/> Lavatory - chip., crkd, leaks, trap leaks <input type="checkbox"/> Bathtub/shower- leaks, cross connect. <input type="checkbox"/> Ventilation Yes No <input type="checkbox"/> Plumb. (b)6(a)Water Sup. Hot Cold <input type="checkbox"/> Electrical (b) (Sanitation (b))						108-2 108-3 108-3 108-2 108-3 111-1 111-1 111-1 112 111-3 113 109
LIVING ROOM					CODE	DINING ROOM						CODE
<input type="checkbox"/> Plaster - L, C, M, - Ceil./Walls <input type="checkbox"/> Windows - loose, broken, glaze <input type="checkbox"/> Sash/Frames-broken, missing, worn <input type="checkbox"/> Floor - loose, worn, damaged <input type="checkbox"/> Door - knob/lk - miss. - panels/frames <input type="checkbox"/> Electrical (c) <input type="checkbox"/> Sanitation (c)					108-2 108-3 108-3 108-2 dam.108-3 113 109	<input type="checkbox"/> Plaster - L,C,M - Ceil/Walls <input type="checkbox"/> Windows - loose, broken, glaze <input type="checkbox"/> Sash/Frames-broken, missing, worn <input type="checkbox"/> Floor - loose, worn, damaged <input type="checkbox"/> Doors - Knobs/lk - miss. - panels/frames <input type="checkbox"/> Electrical (d) <input type="checkbox"/> Sanitation (d)						108-2 108-3 108-3 108-2 dam. 108-3 113 109
Bedrooms and/or other rooms												CODE
						<input type="checkbox"/> Plaster - L,C,M - Ceiling/Walls <input type="checkbox"/> Windows - loose, broken, glaze <input type="checkbox"/> Sash/Frames - broken, missing, worn <input type="checkbox"/> Floors - loose, worn, damaged <input type="checkbox"/> Door - knobs/lk - miss.-Panels/Frames <input type="checkbox"/> Electrical (e) <input type="checkbox"/> Sanitation (e) <input type="checkbox"/> Clothes Closet Yes No						108-2 108-3 108-3 108-2 dam, 108-3 113 109
Plumbing					Electrical			Sanitation - Vermin O R				

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

1) INSP. DATE

10/1/86

2) INSP.

5

3) FORM NO.

4) TENANT'S NAME

Brenda Harmon

5) Flr. #

2

6) Location

LE DU

7) Rm. Tp. #

3

8) #Rms.

2

9) #Peo.

1

10) #All'd

1

11) Slp. R

1

12) Child Under 10

13) Child 1-6

14)

15) Rent Code

16) Rent Code

17) Furn.

18) Heat

19) Hot Water

20) Dual Egress

21) Ck'ng

22) Lav.

23) Bath

24) Flush

Viol. No.

Remedy

Cond.

Violation

Location

Room Type

Area Type

Resp. Party

Code

Sect. Violated

Violation Rem.

Date

411

IN

Smoke Detector

2

MRSB

2464

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

1) INSP. DATE

10/1/84

2) INSP.

5

3) FORM NO.

4) TENANT'S NAME

Irma Mason

5) Flr. #

1

6) Location

LE

7) Rng. Tp

DU

8) #Rms.

4

9) #Peo.

1

10) All'd

3

11) Slp. R

1

12) Child Under 10

13) Child 1-6

14)

15) Rent

16) Rent Code

17) Furn.

18) Heat

19) Hot Water

20) Dual Egress

21) Ck'ng

22) Lav.

23) Bath

24) Flus

Viol. No.

Remedy

Cond.

Violation

Location

Room Type

Area Type

Resp. Party

Code Sect Violated

Violation Rem. - Date

*10

N

Smoke Detector

2

25 MR 517
2464

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

STRUCTURE INSPECTION SCHEDULE

1) Insp. Name: M. LOEY

2) Insp. Date: 10-2-81 3) Insp. Type: NCP 4) Proj. Code: 11851 (E-1) 5) Assr's: Chart 5-D 6) Bl. 4 7) t 4 8) Census: Tract 5 9) Blk 5 10) Insp. 5 11) Form No. 5
 12) Hous. No. 4130 13) Sec. H. No. 14) Suff. 15) D. rect. 16) Street Name 17) St. Design. SFR
 18) Owner or Agent: Mr. 4... 19) Status ABO 20) Bldg's Rat. 3
 21) Address: 399 Fore Street Zip Code: 97101
 22) City and State: Portland, Maine

23) D. Units 6 24) Occ. D. U. s 25) Rm. Units 26) Occ. R. U. s 27) No. Occ. U. 28) Com'l U. 29) Bldg. Type 30) Stories 2 31) Const. Mat. Wood 32) O. Ex. No
 33) C. H. YES 34) Photo NO 35) Zoned For R-3 36) Actual Land Use RFS 37) D. D. 38) Lks. Ad. Bth. Fac. Yes 39) Disp. 40) Closing Date

Viol. No.	Remedy	Cond.	Violation Description	Fl. No.	Loc.	Room Type	Area Type	Resp. Party	Code Sect. Viol.	Viol. Rem. Date
1		LO	Railing		FD	HA	SRW	2	10F-4	
*2		MI	Glass		RIF	HA	NO	2	10F-7	
*3			Furniture (stored)	3	FR/RE	HA	SRW	2	11G-3	
4			Infestation (rodents)					2	109-5	
*5		BR/LO	Trails	3	RE	HA	SRW	2	10F-4	
*6		DR	Plaster	2	RE	HA	WR	2	10F-2	
*7		RO	Riser		LEP	PO	SR	2	10F-4	
*8		DR	Traps		LEP	RIR	PO	SR	2	10F-4
9			Rubbish		RE	Yard		2	109-4	

CBB
BSL
Full



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

CERTIFICATE OF COMPLIANCE

DATE: December 7, 1987

DU: 3

Housing Inspections Division
Telephone: 775-5451 - Extension 311

Mrs. Jean L. Espey
540 East Bridge Street
Westbrook, ME 04092

RE: Premises located at 45 Brackett St. 44-E-14

Dear Mrs. Espey:

A re-inspection of the premises noted above was made on Dec. 4, 1987
by Code Enforcement Officer Merlin Leary.

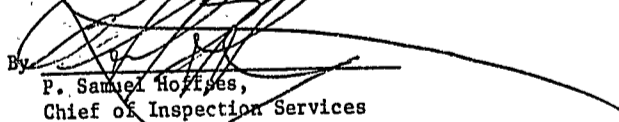
This is to certify that you have complied with our request to correct the violation(s) of the Municipal Code relating to housing conditions as described in our "Notice of Housing Conditions" dated Oct. 29, 1986.

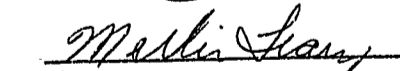
Thank you for your cooperation and your efforts to help us maintain decent, safe and sanitary housing for all Portland residents.

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 Dec. 1992.

Sincerely yours,

Joseph E. Gray, Jr., Director,
Planning & Urban Development

By 
P. Samuel Hoffes,
Chief of Inspection Services


Merlin Leary
Code Enforcement Officer

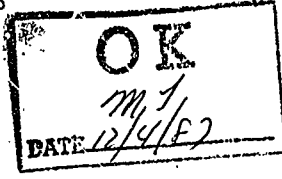
jmr

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

Department of Planning & Urban Development
Inspection Services Division
Tel. 775-5451 -- Ext. 311 - 346

Mrs. Jean L. Espey
540 East Bridge Street
Westbrook, ME 04092



DU 3

CH. 44 BLK. E LOT 14

LOCATION: 45 Brackett Street

PROJECT: NCP-WE

ISSUED: October 29, 1986

EXPIRES: December 29, 1986

Dear Mrs. Espey:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 45 Brackett Street by Code Enforcement Officer Merlin Leary. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above-mentioned Code, you are hereby ordered to correct those defects on or before December 29, 1986. 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 re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

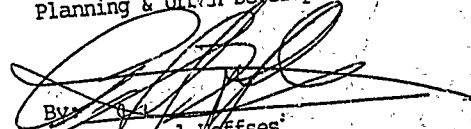
Please Note: You should consult the Inspection Services Division to insure that any corrective action you undertake complies with the building, plumbing, electrical, zoning and any other Article of the City Code.

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.

Very truly yours,

Joseph E. Gray, Jr., Director
Planning & Urban Development


By: P. Samuel Hoffses
Chief of Inspection Services

Merlin Leary
Code Enforcement Officer - Merlin Leary (5)

Attachments

jmr

HOUSING INSPECTION REPORT

OWNER: Mrs. Jean L. Espey

LOCATION: 45 Brackett St. 44-E-14 WE

CODE ENFORCEMENT OFFICER: Merlin Leary (5)

HOUSING CONDITIONS DATED: October 29, 1986 EXPIRES: December 29, 1986

ITEMS LISTED BELOW ARE IN VIOLATION OF ARTICLE V OF THE MUNICIPAL CODES, "HOUSING CODE", AND MUST BE CORRECTED ON OR BEFORE THE EXPIRATION DATE.

	SEC. (S)
1. RIGHT MIDDLE EXTERIOR - foundation - missing mortar.	108-2
2. FIRST FLOOR FRONT HALL - ceiling - broken plaster.	108-2
<u>FIRST FLOOR</u>	
3. KITCHEN, LIVING ROOM, MIDDLE BEDROOM - ceilings - loose and peeling paint.	108-2
* 4. MIDDLE BEDROOM - ceiling - cracked plaster.	108-2
<u>SECOND FLOOR</u>	
4. KITCHEN - window - missing counterbalance cords.	108-3
* 5. BATHROOM - lavatory - leaking cold water faucet.	111-1

*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.

Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 25, 1993

Jean Espey
540 East Bridge St
Westbrook, ME 04092

Re: 45 Brackett St
CBL #: 044-E-014


Dear Ms. Espey,

I am sending you this letter to request an inspection at the property which you own or manage at the above listed address.

This is for the City of Portland's program to inspect all multi-family buildings in the City every 5 years.

Please contact me in this office at 874-8300 X8707 between 7:00-9:00AM or 3:00-3:30PM to make arrangements to inspect the building.

Sincerely,


Kathleen A. Lowe
Code Enforcement Officer



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 13, 1982
 Receipt and Permit number A77612

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: 47 Brackett St.
 OWNER'S NAME: Richard Yankowsky ADDRESS: same

OUTLETS:		FEEES
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL 1-30	<u>✓</u>	3.00
FIXTURES: (number of)		
Incandescent _____ Flourescent _____ (not strip) TOTAL		
Strip Flourescent _____ ft.		
SERVICES:		
Overhead <u>x</u> Underground _____ Temporary _____ TOTAL amperes 100 amps	<u>two</u>	3.00
METERS: (number of) <u>2</u>		1.00
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 _____	<u>1</u>	Water Heaters _____
Cock Tops _____		Disposals _____
Wall Ovens _____		Disawashers _____
Dryers _____	<u>1</u>	Compactors _____
Fans _____		Others (denote) _____
TOTAL		<u>✓</u> 3.00
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:	
	TGTAL AMOUNT DUE:	10.00

INSPECTION: Will be ready on _____, 19__; or Will Call x

CONTRACTOR'S NAME: Ames Elec.

ADDRESS: 35 East Bridge St., West., Me.

TEL.: 774-0604

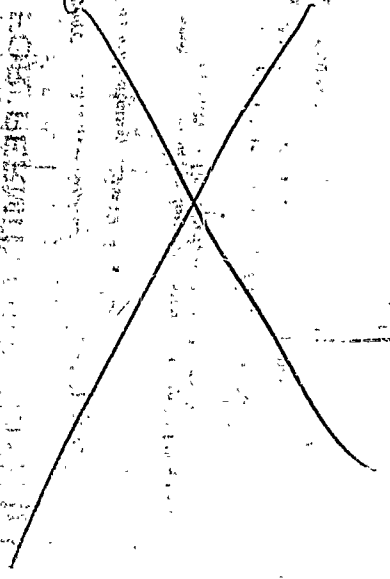
MASTER LICENSE NO.: 2236 SIGNATURE OF CONTRACTOR: [Signature]

LIMITED LICENSE NO.: _____

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

Ward 6 Permit No. 34/816
Location 47 Brackett St.
Owner Nellie Lindsey
Date of permit 6/20/34
Notif. closing-in _____
Inspn. closing-in _____
Final Notif. _____
Final Inspn. 6/26/34
Cert. of Occupancy issued None

NOTES.
6/26/34 - This building
was evidently in
yard at #49. I A G
Building demolished
A. J. S.





CITY OF PORTLAND
Planning and Urban Development Department

MEMORANDUM

TO: Richard Lauck

DATE: April 24, 1995

FROM: Arthur Rowe *AR*

SUBJECT: 47-63 Brackett Street (87-LL-16-19)

Could you please secure this vacant single family dwelling at the above address? The City owns this as a tax acquisition. A. J. can help you find the address as he has visited it with me.

/el



CITY OF PORTLAND
Planning and Urban Development Department

MEMORANDUM

TO: Richard Lauck

DATE: April 24, 1995

FROM: Arthur Rowe

SUBJECT: 4.-63 Bracket Crest (87-LL-16-19)

Could you please secure this vacant single family dwelling at the above address? The city owns this as a tax acquisition. A. J. can help you find the address as he has visited it with me.

/el



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, May 2, 1970

PERMIT ISSUED
MAY 6 1970
CITY OF PORTLAND

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 45 Brackett St. Use of Building ap. Bldg. No. Stories 2 1/2 New Building
 Existing
Name and address of owner of appliance Clay O. Lapey, 3 Ocean St.
Installer's name and address Easternoil & Equipment Co., 27 Portland St. Telephone _____

General Description of Work

To install Oil-fired forced hot water heating system in place gas space heaters
central heating system. Model A33MPT

IF HEATER, OR POWER BOILER

Location of appliance Basement Any burnable material in floor surface or beneath? none
If so, how protected? _____ Kind of fuel? oil
Minimum distance to burnable material, from top of appliance or casing top of furnace 3'
From top of smoke pipe 2 1/2' From front of appliance over 4' From sides or back of appliance over 3'
Size of chimney flue 10x12 Other connections to same flue none
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? yes

IF OIL BURNER

Name and type of burner American Std. gun type Labeled 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 1 1/4"
Location of oil storage basement Number and capacity of tanks 275 gals.
Low water shut off _____ Make _____ No. _____
Will 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 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

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., \$1.00 additional for each additional heater, etc., in same building at same time.)

APPROVED:
5/5/70 OR M.G.W.

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 & Equipment Co.

Signature of Installer by: Bernard F. Fillet

CP 300

INSPECTION COPY

700

V - Verify

LOCATION 45 BRACKETT ST. INSPECTION DATE 6/10/90BY DAGW.

	V	OK
1 FILL PIPE _____		✓
2 VENT PIPE _____		✓
3 RED PLATE EMERGENCY SWITCH _____		✓
4 NUMBER & CAPACITY OF TANKS _____		✓
5 TANK RIGIDITY & SUPPORT _____		✓
6 TANK DISTANCE _____		✓
7 VENT ALARM _____		✓
8 FUEL GAUGE _____		✓
9 FIREMATIC FUEL VALVES _____		✓
10 BURNER RIGIDITY & SUPPORT _____		✓
11 PIPING SUPPORT & PROTECTION _____		✓
12 NAME & LABEL _____		✓
13 PRIMARY SAFETY CONTROL _____		✓
14 LIMIT CONTRCL _____		✓
15 LOW WATER CUT-OFF _____		✓
16 SERVICE SWITCH _____		✓
17 CONDUIT OR GREENFIELD _____		✓
18 THERMAL CUT-OFF SWITCH _____		✓
19 PRESSURE RELIEF VALVE _____		✓
20 DRAFT REGULATOR _____		✓
21 ADEQUATE VENTILATION _____		✓
22 ANY INDICATION OF OIL LEAKS _____		✓
23 KIND OF HEAT _____		✓
24 INSTRUCTION CARD _____		✓
25 TANKLESS HOT WATER HEATER _____		✓
26 TEMPERING VALVE _____		✓
27 PRESSURE RELIEF VALVE _____		✓
28 CONDITION OF CHIMNEY _____		✓
29 NUMBER & TYPE OF CONNECTIONS TO CHIMNEY _____		✓
30 FIRESTOPPING _____		✓
31 STACK DISTANCE TO COMBUSTIBLE MATERIAL _____		✓

CITY OF PORTLAND, MAINE
Application for Permit to Install Wires

Permit No. 57627
 Issued 3/14/69
 Mar. 14, 1969
 Portland, Maine

To the City Electrician, Portland, Maine:

The undersigned hereby applies for a permit to install wires for the purpose of conducting electric current, in accordance with the laws of Maine, the Electrical Ordinance of the City of Portland, and the following specifications:

(This form must be completely filled out - Minimum Fee, \$1.00)

Owner's Name and Address Rayo Express Tel. _____
 Contractor's Name and Address J. E. Edwards Tel. _____
 Location 45 Broad St Use of Building _____
 Number of Families _____ Apartments _____ Stores _____ Number of Stories _____
 Description of Wiring: New Work _____ Additions _____ Alterations _____
 Pipe _____ Cable _____ Metal Molding _____ BX Cable _____ Plug Molding (No. of feet) _____
 No. Light Outlets _____ Flugs 7 Light Circuits _____ Plug Circuits _____
 FIXTURES: No. _____ Fluor. or Strip Lighting (No. feet) _____
 SERVICE: Pipe _____ Cable _____ Underground _____ No. of Wires 3 Size 2/2-14
 METERS: Relocated _____ Added _____ Total No. Meters _____
 MOTORS: Number _____ Phase _____ H. P. _____ Amps _____ Volts _____ Starter _____
 HEATING UNITS: Domestic (Oil) _____ No. Motors _____ Phase _____ H.P. _____
 Commercial (Oil) _____ No. Motors _____ Phase _____ H.P. _____
 Electric Heat (No. of Rooms) _____
 APPLIANCES: No. Ranges 1 Watts _____ Brand Feeds (Size and No.) _____
Dryer Elec. Heaters _____ Watts _____
 Miscellaneous _____ Watts _____ Extra Cabinets or Panels _____
 Transformers _____ Air Conditioners (No. Units) _____ Signs (No Units) _____
 Will commence _____ 19____ Ready to cover in _____ 19____ Inspection _____ 19____
 Amount of Fee \$ 6.00

Signed J. E. Edwards

DO NOT WRITE BELOW THIS LINE

SERVICE METER _____ GROUND
 VISITS: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____
 7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12 _____
 REMARKS:

INSPECTED BY J. W. Hebert
 (OVER)

LOCATION *Bracelett St. 45*
 INSPECTION DATE *3/17/67*
 WORK COMPLETED *3/17/67*
 TOTAL NO. INSPECTIONS *1*
 REMARKS:

FEEES FOR WIRING PERMITS EFFECTIVE JULY 31, 1963

WIRING	
1 to 30 Outlets	\$ 2.00
31 to 60 Outlets	3.00
Over 60 Outlets, each Outlet	.05
(Each twelve feet or fraction thereof of fluorescent lighting or any type of plug molding will be classed as one outlet).	
SERVICES	
Single Phase	2.00
Three Phase	4.00
MOTORS	
Not exceeding 50 H.P.	3.00
Over 50 H.P.	4.00
HEATING UNITS	
Domestic (Oil)	2.00
Commercial (Oil)	4.00
Electric Heat (Each Room)	.75
APPLIANCES	
Ranges, Cooking Tops, Ovens, Water Heaters, Disposals, Built-in Dishwashers, Dryers, and any permanent built-in appliance — each unit	1.50
MISCELLANEOUS	
Temporary Service, Single Phase	1.00
Temporary Service, Three Phase	2.00
Circuses, Carnivals, Fairs, etc.	10.00
Meters, relocate	1.00
Distribution Cabinet or Panel, per unit	1.00
Transformers, per unit	2.00
Air Conditioners, per unit	2.00
Signs, per unit	2.00
ADDITIONS	
5 Outlets, or less	1.00
Over 5 Outlets, Regular Wiring Rates	

CITY OF PORTLAND, MAINE
Application for Permit to Install Wires

Permit No. 55674

Issued Mar. 31, 19.67
 Portland, Maine

To the City Electrician, Portland, Maine:

The undersigned hereby applies for a permit to install wires for the purpose of conducting electric current, in accordance with the laws of Maine, the Electrical Ordinance of the City of Portland, and the following specifications:

(This form must be completely filled out — Minimum Fee, \$1.00)

Owner's Name and Address C. Espy Edwards Tel.
 Contractor's Name and Address J. E. Edwards Tel.
 Location 45 Bramhall St. Use of Building
 Number of Families 3 Apartments 3 Stores
 Description of Wiring: New Work Additions Alterations

Pipe Cable Metal Molding BX Cable Plug Molding (No. of feet)
 No. Light Outlets Plugs Light Circuits Plug Circuits
 FIXTURES: No. Light Switches Fluor. or Strip Lighting (No. feet)
 SERVICE: Pipe Cable Undergound No. of Wires 3 Size 7/2-14
 METERS: Relocated Added Total No. Meters 3 Volts Starter
 MOTORS: Number Phase H. P. Amps
 HEATING UNITS: Domestic (Oil) No. Motors Phase H.P.
 Commercial (Oil) No. Motors Phase H.P.
 Electric Heat (No. of Rooms)
 APPLIANCES: No. Ranges Watts Brand Feeds (Size and No.)
 Elec. Heaters 2 Watts 4500-14
 Miscellaneous 2 Watts
 Transformers Air Conditioners (No. Units) Extra Cabinets or Panels
 Will commence 19..... Ready to cover in 19..... Signs (No. Units)
 Amount of Fee \$ 7.00 19..... Inspection 19.....

Signed J. E. Edwards

DO NOT WRITE BELOW THIS LINE

SERVICE METER GROUND
 VISITS: 1 2 3 4 5 6
 7 8 9 10 11 12

REMARKS:

INSPECTED BY J. W. [Signature]
 (OVER)

LOCATION *Brackett St 45*
 INSPECTION DATE *4/6/67*
 WORK COMPLETED *4/6/67*
 TOTAL NO. INSPECTIONS
 REMARKS:

FEEES FOR WIRING PERMITS EFFECTIVE JULY 31, 1963

WIRING

1 to 30 Outlets (including switches) \$ 2.00
 31 to 60 Outlets (including switches) 3.00
 Over 60 Outlets, each Outlet (including switches)05
 (Each twelve feet or fraction thereof of fluorescent lighting or
 any type of plug molding will be classed as one outlet).

SERVICES

Single Phase 2.00
 Three Phase 4.00

MOTORS

Not exceeding 50 H.P. 3.00
 Over 50 H.P. 4.00

HEATING UNITS

Domestic (Oil) 2.00
 Commercial (Oil) 4.00
 Electric Heat (Each Room)75

APPLIANCES

Ranges, Cooking Tops, Ovens, Water Heaters, Disposals, Dish-
 washers, etc. — Each Unit 1.00

TEMPORARY WORK (Limited to 6 months from date of permit)

Service, Single Phase 1.00
 Service, Three Phase 2.00
 Wiring, 1-50 Outlets 1.00
 Wiring, each additional outlet over 5002
 Circuses, Carnivals, Fairs, etc. 10.00

MISCELLANEOUS

Distribution Cabinet or Panel, per unit 1.00
 Transformers, per unit 2.00
 Air Conditioners, per unit 2.00
 Signs, per unit 2.00

ADDITIONS

5 Outlets, or less 1.00
 Over 5 Outlets, Regular Wiring Rates

PERMIT TO INSTALL PLUMBING

Date Issued **10/10/66**
 Portland Plumbing Inspector
 By **ERNOLD R. GOODWIN**

PERMIT NUMBER **16675**

Address **45 Erachett Street**
 Installation For:
 Owner of Bldg.: **Clay O. Espey**
 Owner's Address: **J. B. L. Street**
 Plumber: **Reuben J. Lutz** Date: **10/10/66**

App. First Insp.
 Date **10/11/66**
 By **H. Montgomery**

App. Final Insp.
 Date **OCT. 13 1966**
 By **ERNOLD R. GOODWIN**

- Type of Bldg. Inspector
- Commercial
 - Residential
 - Single
 - Multi Family
 - New Construction
 - Remodeling

NEW	REPL.		NO.	FEE
<input checked="" type="checkbox"/>		SINKS	1	2.00
<input checked="" type="checkbox"/>		LAVATORIES	1	2.00
<input checked="" type="checkbox"/>		TOILETS	1	2.00
<input checked="" type="checkbox"/>		BATH TUBS	1	2.00
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
			TOTAL 4	8.00

Building and Inspection Services Dept.: Plumbing Inspection



CITY OF PORTLAND, MAINE
DEPARTMENT OF BUILDING INSPECTION
COMPLAINT

Location: 45 Brackett St.

INSPECTION COPY

COMPLAINT NO. 64/81

Date Received July 20, 1964

Location 45 Brackett Street Use of Building Dwelling - 2 family

Owner's name and address Mary A. Jayes, 45 Brackett St. Telephone _____

Tenant's name and address _____ Telephone _____ Ave. _____

Complainant's name and address Mrs. Catherine C. Woodill, 83 Washington Ave. Telephone 772-4247

Description: Chimney bad; front hall floor dangerous

NOTES: Mrs. Woodill said her foot went through front hall floor; chimney bad so no fire could be built, etc. She either wants to rent place or buy it. PH

7-26-64 Main carrying beam edges into chimney
2" floor joint along side - Middle chimney
has oil fired furnace.

Front chimney vacant

Rear chimney - kitchen stoves only

All chimney tops porous & some flaking in basement.

3'x8' on 6' span under front hall broken

treads

New steps needed on side rear piazza

Header across cellar stairs on studs rotted at cellar floor level

4 lights of 6 light collar window broken

MAINE PRINTING CO., PORTLAND

CITY OF PORTLAND
HEALTH DEPARTMENT
HOUSING DIVISION



Loc. 47 Barrett Street
Loc w/i S S
Bldg Fire Elec Other
Issued November 10, 1954
Expires December 10, 1954

Barry Bayne
47 Barrett Street
Portland, Maine

Dear Sir:
On September 28, 1954 an examination was made of the premises located at 47 Barrett Street.
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 (H) 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, telephone 4-1431, extension 226. kindly notify this office as soon as all corrections have been completed.

Very truly yours,
Edward W. Colby, M.D.
Health Director

By _____
Housing Supervisor

VIOLATIONS & SPECIFICATIONS

Responsibility of Owner or Agent ** Responsibility of Occupant

- Painting
 - a) Replace the missing bricks on the crown of the front chimney.
 - b) Paint the loose or missing mortar on the front chimney.
- Electrical Equipment
Check and have repaired all defective electric wiring and electrical equipment throughout the structure.
 - a) Install convenience outlets in all the rooms where there is a dangerous, excessive use of extension cords. Particular attention is directed to the kitchen of the second floor apartment.
- Structural Repairs
Repair and put in good order all dilapidated and hazardous parts of the structure as follows:
 - a) Putty the loose window panes in all the windows throughout the second floor apartment.
- Sanitation and Sanitary Conditions
 - a) accomplish a general clean up of the cellar by removing and properly disposing of the rubbish in the cellar.

The above mentioned conditions are in violation of the City Ordinances "Minimum Standards for Residential Occupancy", "Sanitary Tenement Buildings" and "Garbage and Rubbish Containers" and must be corrected on or before December 10, 1954.

To: Housing Division, Health Department

From _____ Date _____
This is to inform you that deficiencies of which this Department has been notified, have been corrected to our satisfaction.

Remarks: _____

Loc. 47 Barrett Street
Loc w/i S S
Bldg Fire Elec Other
Issued November 10, 1954
Expires December 10, 1954

Signature _____

(Please return to Housing Division of Health Department when corrections have been COMPLETED)



APPLICATION FOR PERMIT

Permit No. 0813

Class of Building or Type of Structure _____

Portland, Maine, June 20, 1934

JUN 20 1934

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~install~~ the following building structure equipment, in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 47 Brackett Street Ward 6 Within Fire Limits? yes Dist. No. U
 Owner's or lessee's name and address Mrs. Nellie Lindsey, 47 Brackett St. Telephone _____
 Contractor's name and address W. L. Vassar, 95 Sheridson Street Telephone 3-7996
 Architect's name and address _____ Telephone _____
 Proposed use of building _____
 Other buildings on same lot _____ No. families _____
 Plans filed as part of this application? no No. of sheets _____
 Estimated cost \$ _____ Fee \$.50

Description of Present Building to be Altered

Material wood No. stories 1 1/2 Heat _____ Style of roof _____ Roofing _____
 Last use vacant No. families _____

General Description of New Work

To demolish building 16' x 20'

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.

Details of New Work

Size, front _____ depth _____ Height average grade to top of plate _____
 To be erected on solid or filled land? _____ Height average grade to highest point of roof _____
 Material of foundation _____ earth or rock? _____
 Material of underpinning _____ Thickness, top _____ bottom _____
 Kind of Roof _____ Rise per foot _____ Height _____ Thickness _____
 No. of chimneys _____ Material of chimneys _____ Roof covering _____
 Kind of heat _____ Type of fuel _____ of lining _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Is gas fitting involved? _____
 Material columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.
 Joists and rafters: _____
 On centers: _____
 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 _____
 Total number commercial cars to be accommodated _____
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining there are observed? yes
 Signature of owner. By Mrs. Nellie Lindsey

INSPECTION COPY

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