

189 BRACKETT STREET

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FILL IN COMPLETELY AND SIGN WITH INK

Permit No. 1059

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 11/27/39

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 189 Brackett St Use of Building Residence No. Stories 1 New Building Existing Existing
Name and address of owner of appliance Frank M. Low - 139 Brackett St
Installer's name and address Randall & McAllister - 84 Bond St Telephone 32941

General Description of Work

To install Oil Burner to Existing Hot Water (gravity)

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 _____ Other connections to same flue _____

IF OIL BURNER

Name and type of burner Silkent Glow Labeled and approved by Underwriters' Laboratories? Yes
Will operator be always in attendance? _____ Type of oil feed (gravity or pressure) Pressure
Location oil storage Basement No. and capacity of tanks 1 - 275 gal
Will all tanks be more than seven feet from any flame? Yes 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.)

Signature of Installer

Randall & McAllister
for B.H. Hammond

INSPECTION COPY

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Permit No. 3911969
Location 189 Brackett St.
Owner Frank M. Low
Date of Permit 11/2/39.

Post Card sent
Notif. for insp. None

Approval Tag issued 11/24/39, Oba.

Oil Burner Check List (date) 11/24/39.

1. Kind of heat: H.W. Gravity

2. Label 455347

3. Anti-siphon

4. Oil storage

5. Tank distance

6. Vent Pipe

7. Fill Pipe

8. Gudge

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. Insuff. dist. in ash pipe

NOTES

1860

Date Issued **4/21/69**
 Portland Plumbing Inspector
 By **ERNOLD R GOODWIN**

App. First Insp.
 Date **4/24/69**
 By

App. Final Insp.
 Date **4/24/69**
 By

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

PERMIT NUMBER **260**

Address **169 Brackett Street**
 Installation For: **Drainling**
 Owner of Bldg: **Robert Ward**
 Owner's Address: **116 Brackett Street** Date: **4/21/69**
 Plumber: **Portland Gas Light Company** NO FEE

| NEW | REPL | | | |
|-----|------|------------------------|---------------|-------------|
| | | SINKS | | |
| | | LAVATORIES | | |
| | | TOILETS | | |
| | | BATH TUBS | | |
| | | SHOWERS | | |
| | | DRAINS | FLOOR SURFACE | |
| | | HOT WATER TANKS | | |
| | | TANKLESS WATER HEATERS | | |
| | | GARBAGE DISPOSALS | | |
| | | SEPTIC TANKS | | |
| | | HOUSE SEWERS | | |
| | | ROOF LEADERS | | |
| | | AUTOMATIC WASHERS | | |
| | | DISHWASHERS | | |
| | | OTHER | | |
| | | | TOTAL | 2.00 |

Building and Inspection Services Dept.: Plumbing Inspection



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, Oct. 24, 1958

PERMIT ISSUED
01531

OCT 24 1958

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 189 Brackett St. Use of Building Dwelling No. Stories 2 New Building
Name and address of owner of appliance James A Collins, Sr. 189 Brackett St. Existing "
Installer's name and address Ballard Oil & Equipment Co. 135 Marginalway Telephone 2-1991

General Description of Work

To install Oil burning equipment in connection with existing gravity hot water heating system
(conversion)

IF HEATER, OR POWER BOILER

Location of appliance Basement Any burnable material in floor surface or beneath? Yes
If so, how protected? Concrete Kind of fuel? Oil
Minimum distance to burnable material, from top of appliance or casing top of furnace 12"
From top of smoke pipe From front of appliance From sides or back of appliance From top of smoke pipe
Size of chimney flue 12" Other connections to same flue None
If gas fired, how vented? None Rated maximum demand per hour None
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? Yes

IF OIL BURNER

Name and type of burner Ballard Ezzo-gun type Labeled by underwriters' laboratories? Yes
Will operator be always in attendance? Yes Does oil supply line feed from top or bottom of tank? Bottom
Type of floor beneath burner concrete Size of vent pipe 12"
Location of oil storage Basement Number and capacity of tanks 1-275 gal.
Low water shut off None Make None
Will all tanks be more than five feet from any flame? Yes How many tanks enclosed? None
Total capacity of any existing storage tanks for furnace burners None

IF COOKING APPLIANCE

Location of appliance Basement Any burnable material in floor surface or beneath? Yes
If so, how protected? Concrete Height of Legs, if any None
Skirting at bottom of appliance? None Distance to combustible material from top of appliance? 12"
From front of appliance From sides and back From top of smoke pipe From top of smoke pipe
Size of chimney flue 12" Other connections to same flue None
Is hood to be provided? None If so, how vented? None Forced or gravity? None
If gas fired, how vented? None Rated maximum demand per hour None

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED:

.....
.....
.....

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

Ballard Oil & Equipment Co.

James A. Collins, Sr.
Signature of Installer by: *James A. Collins, Sr.*

C17 MAINE PRINTING CO.

INSPECTION COPY

all

A2

11-4
 Permit No. 58/1531
 Location 189 Brackett St
 Owner John A Collins Jr
 Date of permit 10/24/58
 Approved _____

- NOTES
- 1. Site
 - 2. Vent Pipe
 - 3. Height of
 - 4. Burner
 - 5. Name of
 - 6. Stack
 - 7. High Limit
 - 8. Remote
 - 9. Piping
 - 10. Valves
 - 11. Capacity
 - 12. Tank
 - 13. Tank
 - 14. Oil
 - 15. Permits
 - 16. Law

11-3 58. Mrs. Collins
11-58 Janice

Vertical lines for notes and a horizontal line separating the permit information from the notes section.



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date Aug. 18 19 77
 Receipt and Permit number A03110

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: 189 Brackett St.

OWNER'S NAME: Mrs. Wanda Wade ADDRESS: Same

OUTLETS: (number of)
 Lights _____
 Receptacles _____ FEE\$
 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 100 FEE\$ 3.00
 Temporary FEE\$.50

METERS: (number of) 1 FEE\$ _____

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 (denote) _____
 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: 3.50

INSPECTION:
 Will be ready on _____, 19____, or Will Call xx

CONTRACTOR'S NAME: Louis Cavallaro

ADDRESS: 125 Sherwood St.

TEL.: 774-3823

MASTER LICENSE NO.: 1703

LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR
Louis Cavallaro

INSPECTOR'S COPY

189 Brackett St. 45-E-41

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CERTIFICATE
OF
COMPLIANCE

CITY OF PORTLAND
Department of Neighborhood Conservation
Housing Inspections Division
Telephone: 775-5451 - Extension 448 - 358

✓ October 19, 1977

Ms. Katherine Ward
189 Brackett Street
Portland, Maine 04102

Re: Premises located at 189 Brackett Street, Portland, Maine NDP 45-R-41

Dear Ms. Ward:

A re-inspection of the premises noted above was made on Sept. 29, 1977
by Housing Inspector Cough.

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 Jan. 27, 1977.

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 1982.

Sincerely yours,

Joseph E. Gray, Jr., Director
Neighborhood Conservation

By

Lyle D. Noyes
Lyle D. Noyes
Chief of Housing Inspections

Inspector M. Gough

M. Gough

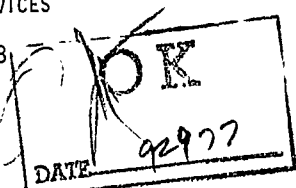
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NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND
DEPARTMENT OF HEALTH & SOCIAL SERVICES
HOUSING DIVISION
Telephone 775-5451 - Extension 448

Ms. Katherine Ward
189 Brackett Street
Portland, Maine 04102

Dear Ms. Ward:



DU 1
Ch.-Bl.-Lot 45-E-41
Location: 189 Brackett Street
Project: NDP
Issued: 1-27-77
Expired: 3-27-77

An examination was made of the premises at 189 Brackett Street, Portland, Maine by Housing 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 March 27, 1977. 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. Please contact this office if you have any questions regarding this Notice.

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

Sincerely yours,

David C. Bittenbender, Director
Health & Social Services

Inspector M. Gough

By [Signature]
Chief of Housing Inspections

EXISTING VIOLATIONS OF CHAPTER 307 - "MINIMUM STANDARDS FOR HOUSING" - SECTION(S)

- ~~927 #1. CELLAR - repair inoperative furnace. 3-c~~
- ~~927 #2. Determine the reason and remedy the condition that causes the furnace to blow excessively, overall. 3-a~~
- ~~927 #3. CELLAR walls - determine the reason and remedy the condition that causes the signs of leakage on cellar walls. 3-a~~
- ~~927 #4. FIRST FLOOR REAR SHED - door - repair broken door. 3-d~~
- ~~927 #5. FIRST FLOOR REAR SHED - ceiling and walls - replace missing plaster. 3-a~~
- ~~927 #6. FOUNDATION - point up foundation overall. 3-a~~
- ~~927 #7. EXTERIOR WALLS - overall - replace missing and broken siding. 3-a~~
- ~~927 #8. ROOF - overall - repair or replace the loose and missing downspouts and gutters. 3-a~~
- ~~927 #9. CELLAR windows - replace broken glass. 3-c~~
- ~~927 #10. REAR SHED - determine the reason and remedy the condition that causes shed to sag. 3-a~~
- ~~927 #11. REAR CHIMNEY - point up chimney. 3-c~~
- ~~927 #12. TRIM - overall - make trim weathertight and watertight by painting or any other suitable means. 3-a~~

continued -

189 Brackett Street - continued

First and Second Floor

13. ~~KITCHEN and LIVING ROOM~~ floor - determine the reason ~~and ready the condition~~ that causes floor to sag. 3-d
14. ~~KITCHEN, LIVING ROOM, DINING ROOM, BATHROOM~~ windows - replace missing counter balance cords allowing window sash to remain elevated when opened. 3-c
15. ~~SECOND FLOOR FRONT AND REAR BEDROOMS~~ windows - replace missing counter balance cords allowing window sash to remain elevated when opened. 3-c
16. ~~KITCHEN, BATHROOM, DINING ROOM AND LIVING ROOM~~ - windows - replace broken glass. 3-c
17. ~~KITCHEN~~ wall - repair inoperative electrical outlet. 8-c
18. ~~DINING ROOM~~ ceiling - replace illegal light fixture. 8-c
19. ~~LIVING ROOM~~ windows - replace rotted sashes. 3-d
20. ~~FRONT HALL~~ door - make door weathertight. 3-d
21. ~~BATHROOM~~ - repair leaking bathtub trap. 3-d
22. ~~SECOND FLOOR BEDROOMS~~ - front, middle front, middle rear and rear - ceilings and walls - replace missing plaster. 3-b
23. ~~SECOND FLOOR BEDROOMS~~ - front, middle front, middle rear and rear - windows - replace rotted sashes. 3-c
24. ~~SECOND FLOOR BEDROOMS~~ - front, middle front, middle rear and rear - windows - secure glass by reglazing windows. 3-c
25. ~~SECOND FLOOR HALLS~~ - overall - ceiling - replace frayed wiring. 8-c
26. ~~SECOND FLOOR MIDDLE FRONT BEDROOM~~ - ceiling - repair inoperative light fixture. 8-c
27. ~~SECOND FLOOR BEDROOMS~~ - middle front, middle rear and rear - windows - repair rotted and inoperative sashes. 3-c
28. ~~FRONT AND REAR HALLS~~ - ceilings and walls - replace missing plaster. 3-b
29. ~~SECOND FLOOR FRONT HALL~~ - stairs - replace missing railing. 3-d

*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.

922-7 RD FL LERO

REINSPECTION RECOMMENDATIONS

LOCATION: 187 Brookville Rd

PROJECT: CD

OWNER: WARD

INSPECTOR: [Signature]

| NOTICE OF HOUSING CONDITIONS | | HEARING NOTICE | | FINAL NOTICE | |
|------------------------------|---------|----------------|---------|--------------|---------|
| Issued | Expired | Issued | Expired | Issued | Expired |
| 1277 | 3-777 | | | | |

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

DATE: 9-28-77 MIG ALL VIOLATIONS HAVE BEEN CORRECTED "POSTING RELEASE"
 Send "CERTIFICATE OF COMPLIANCE"

SATISFACTORY Rehabilitation in Progress

Time Extended To: _____

Time Extended To: _____

Time Extended To: _____

UNSATISFACTORY Progress
Send "HEARING NOTICE" _____

"FINAL NOTICE" _____

"NOTICE TO VACATE"
POST Entire _____
POST Dwelling Units _____

UNSATISFACTORY Progress
"LEGAL ACTION" To Be Taken _____

INSPECTOR'S REMARKS: [Signature]

INSTRUCTIONS TO INSPECTOR: _____