

48 MEERING STREET

SEAL-MAKER

Full cut #820R - Half cut #9202R - Third cut #9203R - Fifth cut #9205R

P 258 792 569

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO	
Mrs. O. Ailine Waecker	
STREET AND NO.	
48 Deering St.	
P.O. STATE AND ZIP CODE	
Portland, Me. 04103	
POSTAGE	
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE
	SPECIAL DELIVERY
	RESTRICTED DELIVERY
	SHOW TO WHOM AND DATE DELIVERED
OPTIONAL SERVICES	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY
RETURN RECEIPT SERVICE	SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY
	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY
TOTAL POSTAGE AND FEES	
POSTMARK OR DATE	

PS Form 3500, Apr 1976

Re: 48 Deering St. Perry

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES (see front)**

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, leaving the receipt attached, and present the article at a post office service window or with a rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article
3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article
5. Entry fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested check the applicable blocks in item 1 of Form 3811
6. Save this receipt and present it if you make inquiry

• GPO. 1990 331 003



CITY OF PORTLAND

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

August 31, 1982

Mrs. O. Ailine Waecker
48 Deering Street
Portland, Maine 04103

Re: 48 Deering Street


Dear Mrs. Waecker:

It has come to the attention of this office, as a result of a complaint, that there are psychologists practicing at this address.

This is in violation of Section 602.7.A of the City of Portland Zoning Ordinance.

You must vacate the premises within 30 days of receipt of this letter.

Sincerely yours,


Merlin Leary
Code Enforcement Officer

ML/jmr



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED

Permit No. 1138
JUL 19 1908

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

Portland, Maine, July 29, 1908

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 48 Leering Street Use of Building dwelling house No. Stories 2

Name and address of owner Theodore J. Brown, 48 Leering St. 2-5225 Ward 6

Contractor's name and address C. H. Babb & Co. 22 Forest Avenue Telephone 2-3792

General Description of Work

To install Oil Burner in connection with existing steam heat.

PERMISSION BEING GRANTED
OR CLOSING IN IS WANTED
CERTIFICATE OF DEPARTMENT

IF HEATER, POWER BOILER OR COOKING DEVICE

Is heater or source of heat to be in cellar? Yes If not, which story _____ Kind of Fuel Oil

Material of supports of heater or equipment (concrete floor or what kind) concrete

Minimum distance to wood or combustible material, from top of boiler or casing top of furnace, _____

from top of smoke pipe _____, from front of heater _____, from sides or back of heater _____

Size of chimney flue _____ Other connections to same flue _____

IF OIL BURNER

Name and type of burner General Electric 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 oil 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.)
C. H. Babb & Co.

Signature of contractor _____
By C. H. Babb

INSPECTION COPY

Word 6 Permit No 38/1136
Location 48 Daering St.
Owner Theodor J. Brown
Date of permit 7/29/38

*all contact as well as
label enclosed. C.B.*

Post Card sent _____

Notif for insp. None

Approval Tag issued 10/20/38 C.B.

Oil Burner Check List (date) 10/20/38

- 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. of pressure safety
- 15. Instruction card is provided
- 16. _____

NOTES

*Spoke for me in C.B.
10/20/38. Mr. Wallgren said
this burner self contained*