



APPLICATION FOR PERMIT

Permit No. 118

Of Building or Type of Structure Third Class

Portland, Maine, September 11, 1939

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 22-24 Franklin St. Within Fire Limits? yes Dist. No. 5
 Owner's or Lessee's name and address Maine General Hospital Telephone _____
 Contractor's name and address Oxford Wrecking Co., 105 Main St., So. Port. Telephone 4-3762
 Architect _____ Plans filed 20 No. of sheets _____
 Proposed use of building _____ No. families _____
 Other buildings on same lot _____
 Estimated cost _____ Fee \$ 1.00

Description of Present Building to be Altered

Material Frame No. stories 2 Heat _____ Style of roof pitch Roofing _____
 Use Nurses Home No. families _____

General Description of New Work

To demolish 2 story frame building.

Do you agree to tightly and permanently close all sewers or drains connecting with public or private sewers from this building or structure to be demolished, under the supervision and to the approval of the Department of Public Works of the City of Portland? Yes

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:

Is any plumbing work involved in this work? _____
 Is any electrical work involved in this work? _____ Height average grade to top of plate _____
 Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
 To be erected on solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of Roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____
 Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____
 Framing Lumber—Kind _____ Dressed or Full Size? _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 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: 1st floor _____ 2nd _____ 3rd _____ roof _____
 On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____
 Maximum span: 1st floor _____ 2nd _____ 3rd _____ roof _____
 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 thereto are observed? yes
 Signature of owner Oxford Wrecking Co.

INSTRUCTION COPY

SPECIFICATIONS ACCOMPANYING APPLICATION FOR BUILDING PERMIT TO
COVER ALTERATIONS IN THE PATHOLOGICAL BUILDING AT
THE MAINE GENERAL HOSPITAL

January 20, 1937

1. These specifications are to be considered as much a part of the application for the building permit as though written on the application form, but failure to mention any requirement of the Building Code herein shall not relieve owner, architect or contractor from compliance therewith.

2. The various floor levels of this building are indicated as Ground Floor, First Floor and Second Floor, the Ground Floor being at the same level, approximately, as the grade of the ground around the building.

3. The face walls of the new dormer windows are to be of frame construction with all woodwork otherwise exposed on the outside covered with metal instead of being built of brick, because the architects' feel that their plans cannot be satisfactorily carried out by building the face walls of the dormers directly over the brick walls beneath.

4. The floor, roof and outside walls of the additional story upon the existing passageway are to be of non-burnable materials and windows in these outside walls are to be metal sash glazed with wire glass.

5. Where the additional story of the passageway connects with the stair hall and the elevator of the main building, standard self-closing fire doors will be provided at each of the two openings.

6. The rear winding stairway in this building is now enclosed in such a way that there is no access to it from the first floor. A suitable door opening will be made to the landing in the stairway at about the first floor level and the opening equipped with a self-closing fire door. All new openings in this same stair hall which are now to be provided at the ground floor level will be equipped with standard self-closing fire doors. All of these provisions are to make a safe enclosed stairway to prevent spread of fire and smoke, and to afford an alternate means of egress for persons in the rear part of the first floor.

7. All interior windows in the front enclosed stairway will be changed from ordinary glass to wire glass, and all panels for glass in existing doors in this stairway enclosure will be glazed with wire glass.

Maine General Hospital

By

Simmons

(Sign title) Trustee

*See original and
return to
P. B. J. W.*

BROWN CONSTRUCTION CO.

GENERAL CONTRACTORS.

562 CONGRESS STREET ROOM 524-525 BAXTER BLOCK
PORTLAND, MAINE

February 10, 1937.

Inspector of Buildings,
Mr. Warren McDonald,
389 Congress Street,
Portland, Maine.

Dear Sir:-

As per our telephone conversation of this morning, we are giving you the following information regarding the Pathological Building at the Maine General Hospital:

In the main building the steel beams over the Meeting Room have been fireproofed with solid concrete so that there is two inches protection at any point, reinforcing is used vertically and horizontally to hold the fireproofing in place.

The floor construction is to be 2 inch Senior Gypsum Plank with metal bound edges and end, with a 1½ inch granolithic floor over the plank.

The corridor floor leading from the Pathological Building to the main hospital has the same construction as the floor over the meeting room.

The roof over the corridor is the same, and is covered with tar and gravel with copper edge strip on one side and copper gutter on the other side.

The walls of the corridor are to be built up of angles as shown in Megquier & Jones Company's plan with metal lath and plaster on the inside, and copper covering on the outside, with 16 oz. crimped copper covering, the space between to be filled with rock wool in bat form 4 inches thick which of course will have to be compressed to 3 inches.

The ceiling of the corridor is to have metal lath and plaster.

Very truly yours,

BROWN CONSTRUCTION COMPANY
M B Brown
TREASURER.

MEB:H

Rec'd 2/10/37
WJH

REVISIONS ACCOMPANYING APPLICATION FOR BUILDING PERMIT TO
COST ALTERNATIVES IN THE PATHOLOGICAL BUILDING AT
THE MAINE GENERAL HOSPITAL

January 25, 1937

1. These specifications are to be considered as such a part of the application for the building permit as though written on the application form, but failure to mention any requirement of the Building Code herein shall not relieve owner, architect or contractor from compliance therewith.
2. The various floor levels of this building are indicated as Ground Floor, First Floor and Second Floor, the Ground Floor being at the same level, approximately, as the grade of the ground around the building.
3. The face walls of the new dormer windows are to be of frame construction with all woodwork otherwise exposed on the outside covered with metal instead of being built of brick, because the architects feel that their plans cannot be satisfactorily carried out by building the face walls of the dormers directly over the brick walls beneath.
4. The floor, roof and outside walls of the additional story upon the existing passageway are to be non-burnable materials and windows in these outside walls are to be metal each glazed with wire glass.
5. Where the additional story of the passageway connects with the stair hall and the elevator of the main building, standard self-closing fire doors will be provided at each of the two openings.
6. The rear winding stairway in this building is now enclosed in such a way that there is no access to it from the first floor. A suitable door opening will be made to the landing in the stairway at about the first floor level and the opening equipped with a self-closing fire door. All new openings in this main stair hall which are now to be provided at the ground floor level will be equipped with standard self-closing fire doors. All of these provisions are to make a safe enclosed stairway to prevent spread of fire and smoke, and to afford an alternate means of egress for persons in the rear part of the first floor.
7. All interior windows in the front enclosed stairway will be changed from ordinary glass to wire glass, and all panels for glass in existing doors in this stairway enclosure will be glazed with wire glass.

Maine General Hospital

By _____
(Sign title)



(A) APARTMENT HOUSE ZONE

APPLICATION FOR PERMIT

PERMIT ISSUED
0132

Class of Building or Type of Structure Second Class

FEB 10 1937

Portland, Maine, January 12, 1937.

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 2 Arsenal Street Ward 7 Within Fire Limits? YES Dist. No. 5

Owner's or Lessee's name and address Maine General Hospital, 22 Arsenal St. Telephone _____

Contractor's name and address Brown Construction Co., 682 Congress St. Telephone 4-2882

Architect's name and address _____

Proposed use of building Hospital No. families _____

Other buildings on same lot _____

Plans filed as part of this application? YES No. of sheets 7

Estimated cost \$ 27,000. Fee \$ 20.00

Description of Present Building to be Altered

Material brick No. stories 5 Heat _____ Style of roof pitch Roofing slate

Last use Hospital No. families _____

General Description of New Work

To fill in floor space over former operating room on first floor, second floor space to be used with pathological department which is to be rearranged, providing new corridor to elevator

To make changes in pathological department on ground floor as per plans

All changes as per plans submitted

The additional story of the passageway proposed under this permit is to be entirely of non-combustible material including floors, roof and outside walls. Structural plan of passageway to be filed in pathological building and structural plan of additional story of passageway to be filed in pathological building together with statement of design by Benguer & Jones Co. New steel in pathological building to be fireproofed. Columns, wall frames, ceiling, etc. elsewhere in building to be fireproofed. 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

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

Provisional Permit 1/16/37 TO MAKE ALTERATIONS IN THE BUILDING EXCLUSIVE OF ANY WORK ON THE ADDITION TO THE PASSAGEWAY

To be erected on solid or filled land? _____

Material of foundation _____ Thickness top _____ bottom _____

Material of underpinning _____ Height _____ Thickness _____

Kind of Roof _____ Rise per foot _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____

Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

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: 1st floor _____, 2nd _____, 3rd _____, roof _____

On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof _____

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 thereto are observed? YES

Maine General Hospital
By Brown Construction Co.

Signature of owner By Martha O. Brown

INSPECTION COPY



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED

APARTMENT HOUSE ZONE

Permit No. 1248

OCT 23

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

October 23, 1956

Portland, Maine

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 22 Arsenal Street Use of Building Hospital
Name and address of owner: Maine General Hospital, 22 Arsenal Street Ward 7
Contractor's name and address: Portland Gas Light Co., 5 Temple St. Telephone 8521

General Description of Work

To install gas ranges, and bake oven

NOTIFICATION BY THE CITY OF PORTLAND OF THE REQUIREMENT FOR GAS

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 concrete

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, 10'

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

Size of chimney flue Other connections to same flue hood to be provided over ranges, burners to be vented to hood which is in turn vented to masonry chimney IF OIL BURNER

Name and type of burner Labeled and approved by Underwriters' Laboratories?

Will operator be always in attendance? Type of oil feed (gravity or pressure)

Location oil storage No. and capacity of tanks

Will all tanks be more than seven feet from any flame? How many tanks fireproofed?

Amount of fee enclosed? 1.50 (\$1.00 for one heater, etc., 50 cents for each additional heater, etc., in same building at same time.)

Signature of contractor By Allen R. Anderson

INSPECTION COPY



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

PERMIT ISSUED

1651
OCT 5 1930

Class of Building or Type of Structure Second Class

Portland, Maine September 29, 1928

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 22 Arsenal Street Ward 7 Within Fire Limits? Yes Dist. No. 8
Owner's or lessee's name and address Maine General Hospital Telephone _____
Contractor's name and address Brown Construction Co., 562 Congress St. Telephone 2-2895
Architect's name and address _____
Proposed use of building Hospital No. families _____
Other buildings on same lot _____
Plans filed as part of this application? Yes No. of sheets 1
Estimated cost \$ 10,000. Fee \$ 7.50

Description of Present Building to be Altered

Material brick No. stories 7-8-2 Heat _____ Style of roof _____ Roofing _____
Last use Hospital No. families _____

General Description of New Work

To renovate kitchen, basement level, as per plan, submitted (two story portion)
To remove 12' brick wall and support with 1-1/2" m as per plan to be submitted

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by the heating contractor.

Details of New Work

Height average grade to top of plate _____
Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
To be erected on solid or filled land? _____ earth or rock? _____
Material of foundation _____ Thickness, top _____ bottom _____
Material of underpinning _____ Height _____ Thickness _____
Kind of Roof _____ Rise per foot _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____
Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
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: 1st floor _____ 2nd _____ 3rd _____ roof _____
On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____
Maximum span: 1st floor _____ 2nd _____ 3rd _____ roof _____
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 thereto are observed? Yes

INSPECTION COPY

Signature of owner Maine General Hospital
Brown Construction Co.
By Martin O'Brien

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED



APPLICATION FOR PERMIT

PERMIT NO. 0191

Class of Building or Type of Structure

First Class

MAR 14 1936

Portland, Maine, March 11, 1936

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 22 Arsenal Street Ward 7 Within Fire Limits? yes Dist. No. 5
 Owner's or Lessee's name and address Maine General Hospital Telephone _____
 Contractor's name and address Brown Construction Co., 562 Congress St. Telephone 2-3895
 Architect's name and address _____
 Proposed use of building Hospital No. families _____
 Other buildings on same lot _____
 Plans filed as part of this application? yes No. of sheets 1
 Estimated cost \$ 28,750. Fee \$ 29.25

Description of Present Building to be Altered

Material bricks No. stories 7 Heat _____ Style of roof _____ Roofing _____
 Last use Hospital No. families _____

General Description of New Work

To ~~make~~ complete third floor of new addition to hospital as per plan submitted

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 _____ No. stories _____ Height average grade to top of plate _____
 Height average grade to highest point of roof _____
 To be erected on solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of Roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimneys _____ of lining _____
 Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 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 door and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.
 Joists and rafters: 1st floor _____ 2nd _____ 3rd _____ r. of _____
 On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____
 Maximum span: 1st floor _____ 2nd _____ 3rd _____ roof _____
 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 thereto are observed? yes

Signature of owner Maine General Hospital
By Brown Construction Co.
 By Macler B. Brown

INSPECTION COPY

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 3 of 4
1-64

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-13-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

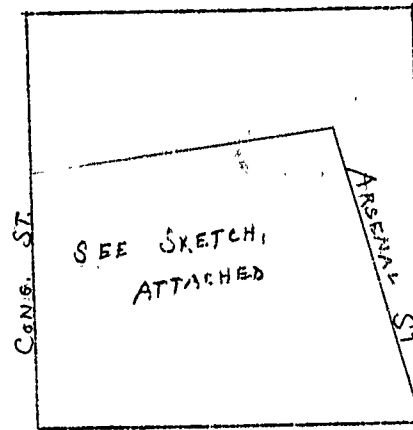
Mat'l outside walls BRICK Int. Frame STEEL

No. stories 4 Style of Roof PITCH

No. elev. in bldg., Passenger 2 Freight 2

Location of Elevator on Street Floor

ELEVATOR Shown Below



GILMAN ST St. Ave

This report for 1 identical elevators

Elev. Man'f'r. PORT. CO.

Use of elev., Pass. Frt. Comb'n. (check which)

No. stops 5 Bsm't, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? Hatch doors, Auto. Non-atto.

Gates, auto. Semi-auto. Hand

Enclosed? Mat'l. of enclosure MANNAY

Fire Doors Normally closed open

Are enclosure doors interlocked?

Height enclosure, full story what ht.

Elevator Machinery

Type of Power ELEC

Type of Machine WORM-GEARED TRACTION

Location of Machine PENTHOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL

No. cables, hoisting 6 counterweight 6

Type of brakes ELEC

Has elev. following safeties: Governor

Car Safety ; Elect. Brakes ; Auto. Terminal

Stops top & bottom ; Slack Cable

Stops ; Safety Floor Stops

Remarks: (note defects, if any)

Elevator Car

Platform Dimensions 5' x 8' Capacity 2500

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure No. entrances 2

Type of gates or doors AUTO

Are they interlocked?

Have they auto-closing device?

Type operation, Push-Button Operator

Any emergency exit?

Remarks: (note defects, if any)

General Remarks:

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1-69 Block A Sheet 2 of 4

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-13-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

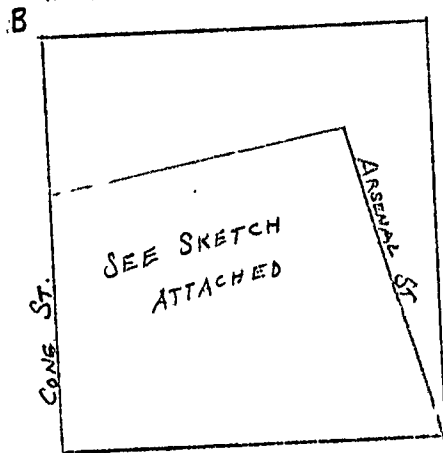
Mat'l outside walls BRICK Int. Frame STEEL

No. stories 7 Style of Roof FLAT

No. elev. in bldg., Passenger 2 Freight 2

Location of Elevator on Street Floor

ELEVATOR Shown Below



GILMAN St. Ave.

This report for 1 identical elevators

Elev. Man'f'r PORT. Co.

Use of elev., Pass. Frt. Comb'n. (check which)

No. stops 8 Bsmt. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? Hatch doors, Auto. Non-auto

Gates, auto. Semi-auto. Hand

Enclosed? Mat'l. of enclosure MASONRY

Fire Doors Normally closed open

Are enclosure doors interlocked?

Height enclosure, full story what ht.

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine PENTHOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL

No. cables, hoisting 6 counterweight 6

Type of brakes ELEC.

Has elev. following safeties: Governor

Car Safety ; Elect. Brakes ; Auto. Ter-

minial Stops top & bottom ; Slack Cable

Stops ; Safety Floor Stops

Remarks: (note defects, if any) _____

Elevator Ca.

Platform Dimensions 5' x 7' 6" Capacity _____

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure No. entrances 1

Type of gates or doors AUTO

Are they interlocked?

Have they auto-closing devices?

Type operation, Push-Button Operator

Any emergency exit?

Remarks: (note defects, if any) _____

General Remarks:

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 8 of 8.

Location of Bldg. 22 ARSENAL ST.

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. A. REITA Date 3-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. Frame STEEL

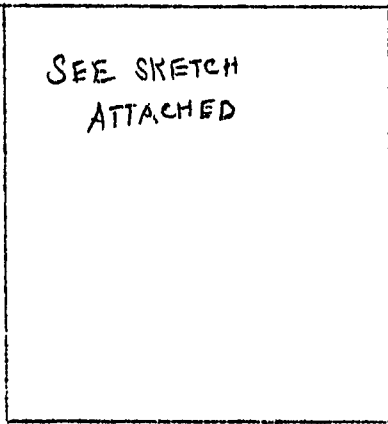
No. stories 7 Style of Roof FLAT

No. elev. in bldg. Passenger — Freight 8

Location of Elevator on Street Floor

DUMBWAITER Shown Below

H



SEE SKETCH
ATTACHED

_____ St. Ave.

This report for 1 identical elevators

Elev. Man'f'r OTIS

Use of elev., Pass. — Frt. ✓ Comb'n. — (check which)

No. stops 5 Bmnt. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Auto. — Non-auto. —

Gates, auto. — Semi-auto. — Hand ✓

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open —

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine UNDER 6TH FLOOR

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, noisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Governor —

Car Safety —; Elect. Brakes ✓; Auto. Ter-

minial Stops top & bottom ✓; Slack Cable

Stops —; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 2' X 3' Capacity 200

Mat'l. of Encl. STEEL No. sides 1, 3

Height of enclosure ✓ No. entra 1

Type of gates or doors HAND

Are they interlocked? ✓

Have they auto-closing device? —

Type operation, Push-Button ✓ Operator —

Any emergency exit? —

Remarks: (note defects, if any) _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 1 of 2

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 9-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

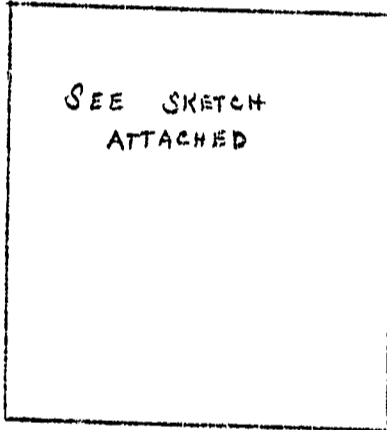
Mat'l outside walls BRICK Int. Frame STEEL

No. stories 3 Style of Roof PITCH

No. elev. in bldg. Passenger - Freight B

Location of Elevator on Street Floor

DUMFRIES Shown Below



SEE SKETCH
ATTACHED

_____ St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS (check which)

Use of elev., Pass. - Frt. ✓ Comb'n. -

No. stops 3 Bsmt. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Autc. - Non-auto -

Gates, auto. - Semi-auto. - Hand ✓

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open -

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. -

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARS - TRACTION

Location of Machine PENTHOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL ROPS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Governor -

Car Safety -; Elect. Brakes ✓; Auto. Ter-

minial Stops top & bottom ✓; Slack Cable

Stops -; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 2' x 8' 4" Capacity 400

Mat'l. of Encl. STEEL No. sides encl. 2

Height of enclosure ✓ No. entrances 2

Type of gates or doors HAND

Are they interlocked? ✓

Have they auto-closing device? -

Type operation, Push-Button ✓ Operator -

Any emergency exit? -

Remarks: (note defects, if any) _____

General Remarks:

CITY OF PORTLAND, OREGON
ELEVATOR INSPECTION

Bldg. No. 1 Block A Sheet 2 of 8
 Location of Bldg. 22 ARSENAL ST
 Owner ME. GEN. HOSPITAL
 Occupant ME. GEN. HOSPITAL
 Inspection by A. KEITH Date 3-14-34
 Formal Complaint No. _____ Date _____
 Letter sent without complaint _____
 Building Data
 Mat'l outside walls BRICK Int. Frame STEEL
 No. stories 3 Style of Roof PITCH
 No. elev. in bldg. Passenger — Freight 3
 Location of Elevator on Street Floor
DUMBWAITER Shown Below
B

SEE SKETCH
ATTACHED

Elevator Machinery
 Type of Power ELEC
 Type of Machine WORM-GEARED - TRACTION
 Location of Machine PENTHOUSE
 Material of Supports STEEL of Guides STEEL
 Material of cables STEEL BANDS
 No. cables, hoisting 1 counterweight 1
 Type of brakes ELEC.
 Has elev. following safeties: Governor —
 Car Safety —; Elect. Brakes ✓; Auto. Terminal Stops top & bottom ✓; Slack Cable Stops —; Safety Floor Stops ✓
 Remarks: (note defects, if any) _____

Elevator Car
 Platform Dimensions 2'1" x 2'4" Capacity 400
 Mat'l. of Encl. STEEL No. sides encl. 3
 Height of enclosure ✓ No. entrances 1
 Type of gates or doors HAND
 Are they interlocked? ✓
 Have they auto-closing device? —
 Type operation, Push-Button ✓ Operator —
 Any emergency exit? —
 Remarks: (note defects, if any) _____

_____ St. Ave.
 This report for 1 identical elevators
 Elev. Mar.'r. OTIS
 Use of elev., Pass. — Frt. ✓ Comb'n. — (check which)
 No. stops 2 Bsmt. 1, 2, 4, 5, 6, 7, 8, 9, 10, 11, 12
 Shaftway
 Open? ✓ Hatch doors, Autc. — Non-autc. —
 Gates, auto. — Semi-auto. — Hand ✓
 Enclosed? ✓ Mat'l. of enclosure MASONRY
 Fire Doors ✓ Normally closed ✓ open —
 Are enclosure doors interlocked? ✓
 Height enclosure, full story ✓ what ht. —

General Remarks: _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 2 of 8
1-64

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. frame STEEL

No. stories 4 Style of Roof FLAT

No. elev. in bldg. Passenger - Freight X

Location of Elevator on Street Floor

DUMBWAITER Shown Below
C

SEE SKETCH
ATTACHED

_____ St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS

Use of elev., Pass. - Frt. X Comb'n. - (check which)

No. stops 5 Bsm't. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? X Hatch doors, Auto. - Non-auto -

Gates, auto. - Semi-auto. - Hand X

Enclosed? X Mat'l. of enclosure MASONRY

Fire Doors X Normally closed X open -

Are enclosure doors interlocked? X

Height enclosure, full story X what ht. -

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED - TRACTION

Location of Machine PENTHOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Governor -

Car Safety -; Elect. Brakes X; Auto. Ter-

minial Stops top & bottom X; Slack Cable

Stops -; Safety Floor Stops X

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 23" x 28" Capacity 400

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure X No. entrances 1

Type of gates or doors HAND

Are they interlocked? X

Have they auto-closing device? -

Type operation, Push-Button X Operator -

Any emergency exit? -

Remarks: (note defects, if any) _____

General Remarks: _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 4 of 8

Location of Bldg. 22 ARSENAL ST.

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-24-29

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. Frame STEEL

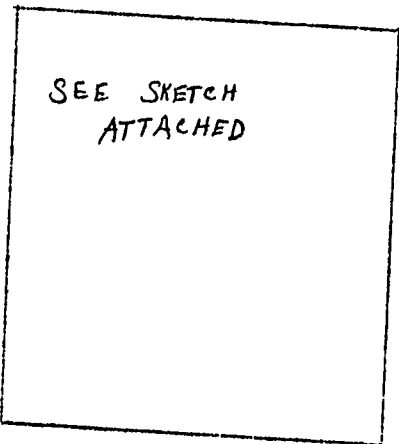
No. stories 4 Style of Roof FLAT

No. elev. in bldg. Passenger — Freight 8

Location of Elevator on Street Floor

DUMBWAITER
D

Shown Below



St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS

Use of elev., Pass. — Frt. ✓ Comb'n. — (check which)

No. stops 4 Bsmt, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Autc. — Non-auto —

Gates, auto. — Semi-auto. — Hand ✓

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open —

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED - TRACTION

Location of Machine PENTHOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Gov. —

Car Safety —; Elect. Brakes ✓; Aut. Ter-

minial Stops top & bottom ✓; Slack Cable

Stops —; Safety Floor Stops ✓

Remarks: (note defects, if any)

Elevator Car

Platform Dimensions 23' x 28' Capacity 400

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure ✓ No. entrances 1

Type of gates or doors HAND

Are they interlocked? ✓

Have they auto-closing device? —

Type operation, Push-Button ✓ Operator —

Any emergency exit? —

Remarks: (note defects, if any)

General Remarks:

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 5 of 8
1-64

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. Frame STEEL

No. stories 7 Style of Roof FLAT

No. elev. in bldg., Passenger — Freight 8

Location of Elevator on Street Floor

DUMBWAITER Shown Below
E

SEE SKETCH
ATTACHED

_____ St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS

Use of elev., Pass. — Frt. ✓ Comb'n. — (check which)

No. stops 5 Bmt. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Autc. — Ncn-auto. —

Gates, auto. — Semi-auto. — Hand ✓

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open —

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine UNDER 6TH FLOOR

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Governor —

Car Safety —; Elect. Brakes ✓; Auto. Terminal Stops top & bottom ✓; Slack Cable

Stops —; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 2' x 3' Capacity 200

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure ✓ No. entrances 1

Type of gates or doors HAND

Are they interlocked? ✓

Have they auto-closing device? —

Type operation, Push-Button ✓ Operator —

Any emergency exit? —

Remarks: (note defects, if any) _____

General Remarks: _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

1-64

Bldg. No. 1 Block A Shee. of 8

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 2-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. Frame STEEL

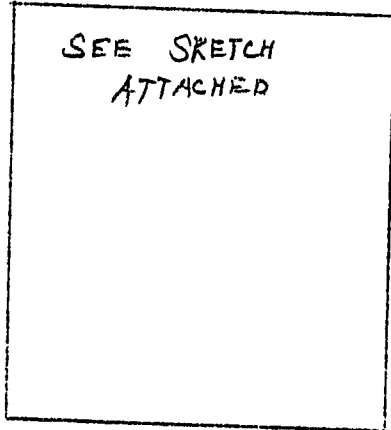
No. stories 7 Style of Roc' FLAT

No. elev. in bldg., Passenger — Freight 8

Location of Elevator on Street Floor

DUMPSWATER Shown Below

F



_____ St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS

Use of elev., Pass — Frt. Comb'n. — (check which)

No. stops 5 Bsm't 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? Hatch doors, Autc. — Ncn-autc —

Gates, auto. — Semi-auto. — Hand

Enclosed? Mat'l. of enclosure MASONRY

Fire Doors Normally closed open —

Are enclosure doors interlocked?

Height enclosure, full story what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine UNDER 6TH FLOOR

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties: Governor —

Car Safety —; Elect. Brakes ; Autc. Ter-

minial Stops top & bottom ; Slack Cable

Stops —; Safety Floor Stops

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 2' x 3' Capacity 200

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure No. entrances 1

Type of gates or doors HAND

Are they interlocked?

Have they auto-closing device? —

Type operation, Push-Button Operator —

Any emergency exit? —

Remarks: (note defects, if any) _____

General Remarks: _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 7 of 8

Location of Bldg. 22 ARSENAL ST.

Owner ME. GEN. HOSPITAL

Occupant ME. GEN. HOSPITAL

Inspection by A. KEITH Date 3-14-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

Mat'l outside walls BRICK Int. Frame STEEL

No. stories 7 Style of Roof FLAT

No. elev. in bldg., Passenger — Freight 8

Location of Elevator on Street Floor

DUMBWAITER
6
Shown Below

SEE SKETCH
ATTACHED

St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. OTIS

Use of elev., Pass — Frt. — Comb'n. — (check which)

No. stops 5 Bsm't. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? Hatch doors, Autc. — Non-auto —

Gates, auto. — Semi-auto. — Hand

Enclosed? Mat'l. of enclosure MASONRY

Fire Doors Normally closed open —

Are enclosure doors interlocked?

Height enclosure, full story what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine UNDER 6TH FLOOR

Material of Supports STEEL of Guides STEEL

Material of cables STEEL BANDS

No. cables, hoisting 1 counterweight 1

Type of brakes ELEC.

Has elev. following safeties. Governor —

Car Safety —; Elect. Brakes ; Auto. Ter-

minial Stops top & bottom ; Slack Cable

Stops —; Safety Floor Stops

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 2' x 3' Capacity 200

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure No. entrances 1

Type of gates or doors HAND

Are they interlocked?

Have they auto-closing device? —

Type operation, Push-Button Operator —

Any emergency exit? —

Remarks: (note defects, if any) _____

General Remarks:

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. Lot 4

Location of Bldg. 22 ARSENAL ST

Owner ME. GEN. HOSPITAL

Occupant ME GEN. HOSPITAL

Inspection by A. KEITH Date 3-13-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

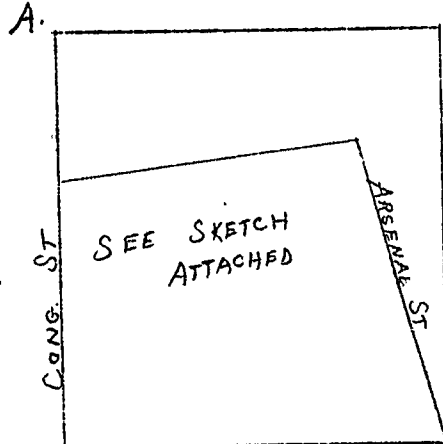
Mat'l outside walls BRICK Int. Frame STEEL

No. stories 7 Style of Roof FLAT

No. elev. in bldg., Passenger 2 Freight 2

Location of Elevator on Street Floor

ELEVATOR Shown Below



This report for 1 identical elevators

Elev. Man'f'r. PORT. Co.

Use of elev., Pass. - Frt. ✓ Comb'n. - (check which)

No. stops 8 Bsmt, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Auto. - Non-auto -

Gates, auto. ✓ Semi-auto. - Hand -

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open -

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. -

Elevator Machinery

Type of Power ELEC.

Type of Machine WORM-GEARED TRACTION

Location of Machine PENT HOUSE

Material of Supports STEEL of Guides STEEL

Material of cables STEEL

No. cables, hoisting 6 counterweight 6

Type of brakes ELEC.

Has elev. following safeties: Governor ✓

Car Safety ✓; Elect. Brakes ✓; Auto. Terminal Stops top & bottom ✓; Slack Cable

Stops ✓; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 5' 7 1/2" Capacity 2500

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure ✓ No. entrances 1

Type of gates or doors AUTO

Are they interlocked? ✓

Have they auto-closing device? ✓

Type operation, Push-Button ✓ Operator -

Any emergency exit? ✓

Remarks: (note defects, if any) _____

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 1 Block A Shee. 4 of 4
1-64

Location of Bldg. 22 ARSENAL ST

Owner MAINE GEN HOSPITAL

Occupant ME GEN HOSPITAL

Inspection by A. KEITH Date 3-13-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

Building Data

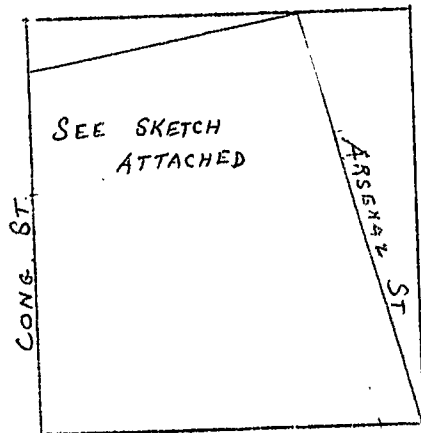
Mat'l outside walls BRICK Int. Frame STEEL

No. stories 4 Style of Roof PITCH

No. elev. in bldg. Passenger 2 Freight 2

Location of Elevator on Street Floor

ELEVATOR Shown Below



GILMAN ST. St. Ave.

This report for 1 identical elevators

Elev. Man'f'r. PORT. Co. (check)

Use of elev. Pass — Frt. ✓ Comb'n. — which

No. stops 5 Bsmt, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

Shaftway

Open? ✓ Hatch doors, Auto. — Non-auto —

Gates, auto. ✓ Semi-auto. — Hand —

Enclosed? ✓ Mat'l. of enclosure MASONRY

Fire Doors ✓ Normally closed ✓ open —

Are enclosure doors interlocked? ✓

Height enclosure, full story ✓ what ht. —

Elevator Machinery

Type of Power ELEC

Type of Machir WORM-GEARED

Location of Machine BASEMENT

Material of Supports STEEL of Guides STEEL

Material of cables STEEL

No. cablesisting 2 counterweight 2

Type of brakes ELEC.

Has elev. following safeties: Governor ✓

Car Safety ✓; Elect. Brakes ✓; Auto. Ter-

minal Stops top & bottom ✓; Slack Cable

Stops ✓; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 6'6" x 8' Capacity 2500

Mat'l. of Encl. STEEL No. sides encl. 3

Height of enclosure ✓ No. entrances 1

Type of gates or doors AUTO

Are they interlocked? ✓

Have they auto-closing device? ✓

Type operation, Push-Button ✓ Operator —

Any emergency stop? —

Remarks: (r _____ s, if any) _____

22151-1

December 8, 1931.

Copy to Mr. W. W. Thomas, Chairman of Building Committee,
The Maine General Hospital
131 Marginal Way
Portland, Maine

Gentlemen:

Enclosed is the building permit covering installation of oil burning equipment in the boiler room of the Maine General Hospital at 22 Arsenal Street.

Since you have stated on the application for the permit that an operator will be always in attendance upon these burners and equipment, we take it that the burner is an industrial one, and therefore not required to have all of the safety devices provided as on a domestic burner. Please bear in mind that the term "always in attendance" means that a competent fireman or engineer is to be in the boiler room always when the burners are in operation, and such an attendant should have no other duties that will require his presence outside of the boiler room while the burners are in operation.

The Underwriters' Atlas states with regard to the Maine General Hospital that the night engineer makes a regular round of the building every two hours. If this is true and if there is no man to take his place in the boiler room while he is making the rounds, it would not be considered that there was an attendant always present.

We are giving a copy of this letter to the Chairman of the Building Committee, and advising you of this condition as failure to have an operator always in attendance would be quite likely to affect the insurance rates upon the property materially.

Please see to it that this installation is made fully in compliance with Sections 1 to 10 inclusive of the Regulations of the National Board of Fire Underwriters which are made a part of the Building Code of the City of Portland. If you do not have a copy of these regulations, we shall be glad to furnish one to you upon request.

Very truly yours,

Inspector of Buildings

WJ/HO

take a condition
if steam turbine is
running steam
line left in open
is to be run through
brick wall of
boiler room into
laundry and shut
off valve provided
there. - A.J.S.

Both electrical
units installed
1/27/32 - steam
turbine case. Instal-
lation not quite
completed. - A.J.S.
2/18/32 - Installation
completed. Re-write
control on steam
line. - A.J.S.

FILL IN COMPLETELY AND SIGN WITH INK

IF PERMIT ISSUED

Permit No. 2466



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, December 7, 1931

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 22 Arden Street Use of Building Hotel

Name and address of owner Maine General Hospital Ward 7

Contractor's name and address Eastern Oil Equipment, Inc. 131 Marginal Telephone 3838

General Description of Work

To install oil burning equipment (2) with electric ignition, one steam turbine
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 _____

IF OIL BURNER

Name and type of burner Enterprise Labeled and approved by Underwriters' Laboratories? yes

Will operator be always in attendance? yes Type of oil feed (gravity or pressure) pressure

Location oil storage basement No. and capacity of tanks 2 - 2000 gal.

Will all tanks be more than seven feet from any flame? yes How many tanks fireproofed? two

Amount of fee enclosed? 2.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

Signature of contractor Eastern Oil Equipment, Inc.
By R. M. Hall

INSPECTION COPY

NOTIFICATION OF LAYING OR CLOSING-IN IS WAIVED

CERTIFICATE OF OCCUPANCY REQUIREMENT IS WAIVED

6613

Ward 7 Permit No. 3/2466
 Location 22 Arsenal St.
 Owner Main: General Hospital
 Date of permit 12/13/31
 Notif. closing-in _____
 Inspn. closing-in _____
 Final Notif. _____
 Final Inspn. 2/1/32 - J.T.
 Cert. of Occupancy issued None

NOTES

1. Kind of heat	<u>Steam</u>
2. Labels	<u>None</u>
3. Anti-siphon	<u>None</u>
4. Oil storage	<u>None</u>
5. Tank distance	<u>None</u>
6. Vent pipe	<u>None</u>
7. Fill pipe	<u>None</u>
8. Gauge	<u>None</u>
9. Illegally	<u>None</u>
10. Feed safety	<u>None</u>
11. Pipe sizes & materials	<u>None</u>
12. Control valve	<u>None</u>
13. Ash cut vort.	<u>None</u>
14. Temp. or pressure safety	<u>None</u>
15. Instruction card	<u>None</u>
16.	<u>None</u>

1/5/32 - Installation of one electric oil burner made. Pump for oil supply is at one end of boiler room.

should these not have remote control attached?
 Two 3200 gal tanks are located in old coal bin off from boiler room beneath concrete slab of driveway. The masonry enclosure of concrete blocks 8" thick with 6" of sand around sides & 12" of sand on top of tanks. Coal bin is separated from boiler room by fire door. Should this protection be 2" of sand & 4" of reinforced concrete on top instead of 12" of sand? Of course, these tanks are really not inside of building.
 A.J.S.
 1/11/32 - Working on turbine installation.
 A.J.S.
 1/14/32 - Went over matter of remote control with installers on formans. Master switch in control room can be thrown to shut off electricity in burners in case of emergency. To

Character Description of Work

FURNACE, BOILER, HEATING OR COOKING DEVICES

FURNACE, BOILER, HEATING OR COOKING DEVICES

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, May 29 31

Leonard A. Thompson
as an employee of The Portland Co, have personally supervised the
installation of alterations to the elevator, hatchways and enclosures at McKen Hosp old bldg as permitted
under Building Permit 30/2815, and have personally supervised tests of loading capacity and of all brakes, inter-
locking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will
safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition

Leonard A. Thompson
(Signature)

PORTLAND, MAINE, June 3 1921

STATE OF MAINE

CUMBERLAND, SS:
Personally appeared the above named Leonard A. Thompson and made oath the statements by him
subscribed are true.

A. Roberts
Notary Public Justice of the Peace

APPLICANT'S COPY



APPLICATION FOR ELEVATOR PERMIT

Permit No. 2815
MAY 15 1930

Portland, Maine, March 24, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install ~~one~~ one elevator in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications submitted herewith, and the following specifications:

Location Arsenal St., Old Bldg. replacing present hydraulic Ward 7 Within Fire Limits? Yes Dist. No. _____
 Owner's name and address Maine General Hospital, 2 Arsenal St.,
 Elevator contractor's name and address The Portland Co., 53 Fore St. Telephone E-1770
 Last use of building Hospital No. families _____
 Proposed use of building Hospital No. families _____
 Material of outside walls of building Brick, interior frame Brick
 No. of stories 5 Style of roof Flat No. of existing elevators in building two

Remarks
Overhead worm gear single wrap traction, with variable voltage A.C. - D.C. Drive, self-adjusting two way G.E. leveling and interceptive-collective semi-dual control.

Details of Proposed Work

Extent of work by elevator contractor Furnish and install one passenger elevator
 Extent of work by owner New pit, pent house, and landing entrance fronts
 Type of elevator Hospital, see above, in new or existing shaftway Existing
 Shaftway enclosed or open enclosed No. elevator stops 5
 Capacity of elevator 2500 lbs., Speed in feet per minute 250 f.p.m.
 Material of cables steel No. and size of hoisting cables 6 - 5/8"
 Location of machinery overhead Material of supports steel in concrete, of guides steel
 Minimum diameter of sheaves 30" Minimum clearance counterweights and overhead beams 3 ft. +
 Minimum clearance above car at topmost floor level 3 ft. +
 Minimum clearance buffer plates and springs when car is at lowest floor level 2 ft.
 Type of power 220 volts 60 cycle 3 phase Type of machine worm gear traction
 Will elevator be equipped with the following safety devices:—governor? Yes, car safety? Yes, electric brakes? Yes, automatic terminal stops at top and bottom? Yes, slack cable stops? no, safety floor stops? automatic

If Passenger Elevator

Passenger capacity? 25 Area of platform 50 sq. ft. Material of enclosure steel
 No. of entrances two Type of gates solid slide interlocked? yes, automatic closing device? yes
 Will elevator be automatic or will operator be in attendance? either - transfer by key switch
 Will doors in shaftway enclosure be interlocked? Electrically and Mechanically

If Freight Elevator

Area of platform _____ No. of sides enclosed _____ Height of enclosure _____
 Will shaftway be enclosed? _____ Self-closing hatch gates? _____, height? _____
 No. outside entrances to shaftway? _____ Self-closing slatted gates? _____, height? _____

Miscellaneous

Plan filed as part of this application? Later No. of sheets _____
 Estimated cost of work by elevator contractor? \$11,000.00 Fee \$2.00
 Signature of elevator contractor The Portland Company
 _____ Elev. Eng.

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, _____

I, _____
 as an employee of _____, have personally supervised the installation of alterations to the elevator, hatchways and enclosures at _____ under Building Permit _____, and have personally supervised tests of loading capacity and locking and all other safety devices, and I do here state that, according to my best knowledge and belief, safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

(Signature)

PORTLAND, MAINE, _____

STATE OF MAINE

CUMBERLAND, SS:
 Personally appeared the above named _____ and made oath that the foregoing subscribed are true.

INSPECTION COPY

Notary Public Justice of the Peace

STATEMENT OF ELEVATOR TESTS
PORTLAND, MAINE,

I, Benj & Cary Elevator Co, have personally supervised the
as an employee of Wm. H. Hutton, hatchways and enclosures at Mr. Newhall as permitted
installation of alterations to the elevator 20/1153, and have personally supervised tests of loading capacity and of all brakes, inter-
locking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will
safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

Benj & Cary
(Signature)
DEC 10 1930

PORTLAND, MAINE,

STATE OF MAINE

CUMBERLAND, SS:

Personally appeared the above named Benj & Cary and made oath the statements by him
subscribed are true.

Louis Moody
Notary Public Justice of the Peace

APPLICANT'S COPY



PERMIT ISSUED
1153
JUN 10 1930

APPLICATION FOR ELEVATOR PERMIT

Portland, Maine, June 9, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.
The undersigned hereby applies for a permit to install one 4 Electric dumb waiters elevator in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications submitted herewith, and the following specifications:

Location 22 Arsenal Street Ward 7 Within Fire Limits? no Dist. No. _____
Owner's name and address Maine General Hospital
Elevator contractor's name and address Otis Elevator Co. 495 Fore St. Telephone P 224
Last use of building hospital No. families _____
Proposed use of building hospital No. families _____
Material of outside walls of building brick, interior frame _____
No. of stories 6 Style of roof flat No. of existing elevators in building 2

Remarks

Details of Proposed Work

Extent of work by elevator contractor Installing four electric dumb waiters
Extent of work by owner Preparing hatchway
Type of elevator dumb waiter, in new or ~~existing~~ shaftway new
Shaftway enclosed or open enclosed No. elevator stops 6 each
Capacity of elevator 200 lbs., Speed in feet per minute 200'
Material of cables steel tape No. and size of hoisting cables 1-02 1/2" tape
Location of machinery overhead Material of supports brick, of guides steel
Minimum diameter of sheaves 1 1/2" Minimum clearance counterweights and overhead beams 3"
Minimum clearance above car at topmost floor level 5'
Minimum clearance buffer plates and springs when car is at lowest floor level 2 1/2"
Type of power electric Type of machine dumb waiter
Will elevator be equipped with the following safety devices:—governor? no, car safety? yes, electric brakes? yes, automatic terminal stops at top and bottom? yes, slack cable stops? yes, safety floor stops? no

If Passenger Elevator

Passenger capacity? _____ Area of platform _____ Material of enclosure _____
No. of entrances _____ Type of gates _____, interlocked? _____, automatic closing device? _____
Will elevator be automatic or will operator be in attendance? _____
Will doors in shaftway enclosure be interlocked? _____

If Freight Elevator

Area of platform _____ No. of sides enclosed _____ Height of enclosure _____
Will shaftway be enclosed? _____ Self-closing hatch gates? _____, height? _____
No. outside entrances to shaftway? _____ Self-closing slatted gates? _____, height? _____

Miscellaneous

Plans filed as part of this application? yes No. of sheets 1
Estimated cost of work by elevator contractor? \$ 9,000 Fee \$ 5.00
Signature of elevator contractor Otis Elevator Co. by _____

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, _____

I, _____, have personally supervised the installation of alterations to the elevator, hatchways and enclosures at _____ as permitted under Building Permit _____, and have personally supervised tests of loading capacity and of all brakes, interlocking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

(Signature)

PORTLAND, MAINE, _____

STATE OF MAINE

CUMBERLAND, SS: Personally appeared the above named _____ and made oath the statements by subscribed are true.

Notary Public Justice of the Peace

INSPECTION COPY

ESTABLISHED 1846

THE PORTLAND COMPANY

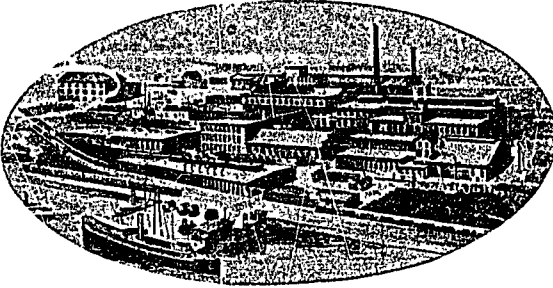
BUILDERS OF

BOILERS
MARINE AND STATIONARY

ELEVATORS
PASSENGER AND FREIGHT
ELECTRIC AND HYDRAULIC

STACKS-FLUES-TANKS
PENSTOCKS - STANDPIPES

DIGESTORS
SULPHITE AND SODA
BARKING DRUMS



CASTINGS
IRON AND BRONZE

MARINE ENGINES
TRIPLE AND COMPOUND
EXPANSION

TRAWLER OUTFITS
MARINE REPAIRS

HEADGATES - HOISTS
ACID RESISTING BRONZE

**GENERAL MACHINE
WORK**

ADDRESS ALL COMMUNICATIONS TO THE COMPANY

TO

Building Inspector,
City of Portland,
Portland, Maine.

PORTLAND, MAINE.

May 7th, 1930

SPECIAL FACILITIES

MACHINE SHOP
BORING MILLS 5' - 12' CAPAC-
ITY PLANERS 96" X 96" X
30' LATHES 96" DIA X 30'
RADIAL DRILLS 72" ARM. HOP.
PRESS 100 TON CAP. TRAVEL-
ING CRANE 15 TON

BOILER SHOP
HYDRAULIC RIVETER. PRESS
12 1/2' X 8' X 7' TABLE. SEC-
TIONAL FLANGER 200 TON.
FOUR ROLL ROLLS FOR PLATE
1 1/2' X 13'. RADIAL DRILLS 8'
ARM. TRAVELING CRANE 35
TON. STOCK OF PLATE UP TO
11".

FORGE SHOP
3 STEAM HAMMERS 2 FUR-
NACES. TUBE WELDING EQUIP-
MENT

IRON FOUNDRY
2 CUPOLAS OF 45 TONS CAPAC-
ITY. DRYING OVENS 6000
CUBIC FEET SAND BLAST
EQUIPMENT. TRAVELING CRANE
30 TON

BRASS FOUNDRY
3 FURNACES 2000 LBS CAPAC-
ITY

PATTERN DEPARTMENT
COMPLETE OUTFIT FOR MAKING
THE MOST DIFFICULT CYLINDER,
ENGINE AND OTHER COMPLI-
CATED PATTERNS

MARINE DOCK
25' WATER AT M. L. TIDL.
SHEARS 30 TON 85' HIGH.
CARPENTER SHOP AND PIPE
SHOP ON WHARF

ELECTRICAL DEPT.
ARMATURE WINDING EQUIP-
MENT. 3 CO. WINDING MA-
CHINES. SPECIAL GENERATING
EQUIPMENT FOR VARIOUS VOLT-
AGES AND CURRENTS.

ELEVATOR DEPT
TOOLS FOR MANUFACTURING
PLUNGERS 3" TO 25" IN DIAM-
ETER.

GENERAL
GAS WELDING EQUIPMENT. 1
ELECTRIC WELDING GENERA-
TORS. 3 SPUR TRACKS. COM-
PRESSED AIR 110 LBS.

Dear Sir:

We are enclosing herewith blueprint for elevator
to go out at the New Wing of the Maine General Hospital
to go with the application for permit which you are
holding.

The Architects have not yet supplied us with the
architectural changes for the present building to
provide for installation of similar elevator to
above in the well now occupied by hydraulic elevator.

As soon as we get these details we will make up a
layout for this elevator and send you blueprint.

Yours very truly,
THE PORTLAND COMPANY

Wm. X. Todd
Wm. X. Todd, Elevator Engineer.
WNT:J - End.

STATEMENT OF ELEVATOR TESTS

December 19, 1930

PORTLAND, MAINE,

I, William N. Todd
as an employee of The Portland Company, have personally supervised the
installation of alterations to the elevator, hatchways and enclosures at Maine General Hospital, permitted
under Building Permit 30/849, and have personally supervised tests of loading capacity and of all brakes, inter-
locking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will
safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.
Service Elevator, New Wing.

William N. Todd
(Signature)

PORTLAND, MAINE, Dec 19 1930

STATE OF MAINE

CUMBERLAND, SS:
Personally appeared the above named

Wm N Todd

and made oath the statements by him

James A Roberts
Notary Public Justice of the Peace

APPLICANT'S COPY



PERMIT ISSUED
MAY 10 1930
0849
Permit No. _____

APPLICATION FOR ELEVATOR PERMIT

Portland, Maine, March 24, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install ~~one~~ two elevators in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications submitted herewith, and the following specifications:

Location Arsenal St. New Wing Ward 7 Within Fire Limits? Yes Dist. No. _____
Owner's name and address Maine General Hospital, 2 Arsenal St.
Elevator contractor's name and address The Portland Co., 58 Forst St. Telephone F-1770
Last use of building Hospital No. families _____
Proposed use of building Hospital No. families _____
Material of outside walls of building Brick, interior frame Brick
No. of stories 7 & 8 Style of roof Flat No. of existing elevators in building two

Remarks

Overhead worm gear single wrap traction, with variable voltage A.C. -D.O. drive, self-adjusting two way G.E. leveling, & interceptive-collective semi-dual control.

Details of Proposed Work

Extent of work by elevator contractor Furnish and install two passenger elevators
Extent of work by owner Furnish finished wells with landing doors
Type of elevator Hospital - See above, in new or existing shaftway new
Shaftway enclosed or open enclosed No. elevator stops 7 & 8
Capacity of elevator 2500 lbs., Speed in feet per minute 250 f.p.m.
Material of cables steel No. and size of hoisting cables 6 - 5/8"
Location of machinery overhead Material of supports steel in concrete guides steel
Minimum diameter of sheaves 30" Minimum clearance counterweights and overhead beams 3 ft. +
Minimum clearance above car at topmost floor level 3 ft. +
Minimum clearance buffer plates and springs when car is at lowest floor level 2 ft.
Type of power 220 volt 60 cycle 3 phase Type of machine Worm gear traction
Will elevator be equipped with the following safety devices:—governor? Yes, car safety? Yes, electric brakes? Yes, automatic terminal stops at top and bottom? Yes, slack cable stops? No, safety floor stops? automatic

If Passenger Elevator

Passenger capacity? 22 Area of platform 44 sq. ft. Material of enclosure steel
No. of entrances one Type of gates solid slide interlocked? yes, automatic closing device? yes
Will elevator be automatic or will operator be in attendance? Either - transfer by key switch
Will doors in shaftway enclosure be interlocked? Electrically and mechanically

If Freight Elevator

Area of platform _____ No. of sides enclosed _____ Height of enclosure _____
Will shaftway be enclosed? _____ Self-closing hatch gates? _____, height? _____
No. outside entrances to shaftway? _____ Self-closing slatted gates? _____, height? _____

Miscellaneous

Plans filed as part of this application? Later No. of sheets _____
Estimated cost of work by elevator contractor? \$22000.00 Fee \$ 3.00
Signature of elevator contractor The Portland Co.
Elev. Eng. _____

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, _____

I, _____, as an employee of _____, have personally supervised the installation of alterations to the elevator, hatchways and enclosures at _____ as permitted under Building Permit _____, and have personally supervised tests of loading capacity and of all brakes, interlocking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

(Signature)

PORTLAND, MAINE, _____

STATE OF MAINE

CUMBERLAND, SS:

Personally appeared the above named _____ and made oath the statements by him subscribed are true.

INSPECTION COPY

Notary Public Justice of the Peace

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, Dec 10 1930

I, Benj F. Cary
as an employee of Wells Elevator Co
installation of alterations to the elevator, hatchways and enclosures at The New Hospital as permitted
under Building Permit 30/146, and have personally supervised tests of loading capacity and of all brakes, interlocking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

Benj F. Cary
(Signature)

PORTLAND, MAINE, DEC 10 1930

STATE OF MAINE

CUMBERLAND, SS:
Personally appeared the above named Benj F. Cary and made oath that the foregoing subscribed are true.

Carl Moody
Notary Public

APPLICANT'S COPY



APPLICATION FOR ELEVATOR PERMIT

PERMIT NO. **0146**
ISSUED FEB 19 1930

Portland, Maine, February 11, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.
The undersigned hereby applies for a permit to
of the State of Maine, the Building Code of the City of
following specifications:

all other dumb waiters in accordance with the Laws
and plans and specifications submitted herewith, and the

Location 20 Arsenal Street 7 Within Fire Limits? Yes Dist. No. 3
Owner's name and address Maine General Ho. al
Elevator contractor's name and address Otis Elevator Co., 495 Fore Street Telephone P 224
Last use of building Hospital No. families _____
Proposed use of building Hospital No. families _____
Material of outside walls of building brick, interior frame wood
No. of stories 3 Style of roof pitch No. of existing elevators in building 2

Remarks: No. 1 - Rise of 45' 9" No. 2 - 30' 10" No. 3 - 17' 2" No. 4 - 11' 4"

Details of Proposed Work

Extent of work by elevator contractor furnish and install dumb waiters (4)
Extent of work by owner doors, enclosure, pit and support
Type of elevator electric dumbwaiter in new or existing shaftway new (3) one rebuilt
Shaftway enclosed or open enclosed No. elevator stops #1-4; #2-3; #3-2; #4-3
Capacity of elevator 400 lbs. Speed in feet per minute 75'
Material of cables steel ropes No. and size of hoisting cables 1" x .002 .02
Location of machinery overhead Material of supports brick of guides steel
Minimum diameter of sheaves 12" Minimum clearance counterweights and overhead beams 4'
Minimum clearance above car at topmost floor level 4'
Minimum clearance buffer plates and springs when car is at lowest floor level 2' 6"
Type of power electric Type of machine dumb waiter
Will elevator be equipped with the following safety devices:—governor? no, car safety? yes, electric brakes? yes, automatic terminal stops at top and bottom? yes, slack cable stops? yes, safety floor stops? no

If Passenger Elevator

Passenger capacity? _____ Area of platform _____ Material of enclosure _____
No. of entrances _____ Type of gates _____ interlocked? _____ automatic closing device? _____
Will elevator be automatic or will operator be in attendance? _____
Will doors in shaftway enclosure be interlocked? _____

If Freight Elevator DUMB-WAITER

Area of platform 2' 5 1/2" x 2' 4 1/2" No. of sides enclosed #1-2-4-3 sides height of enclosure _____
Will shaftway be enclosed? yes Self-closing hatch gates? #3 - 2 sides height? _____
No. outside entrances to shaftway? no Self-closing slatted gates? _____ height? _____

Miscellaneous

Plans filed as part of this application? yes No. of sheets 2
Estimated cost of work by elevator contractor? \$ 8000. Otis Elevator Co. Fee \$ 5.00
Signature of elevator contractor [Signature]

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, _____

I, _____
as an employee of _____, have personally supervised the
installation of alterations to the elevator _____, hatchways and enclosures at _____ as permitted
under Building Permit _____, and have personally supervised tests of loading capacity and of all brakes, inter-
locking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator _____ will
safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

(Signature)

PORTLAND, MAINE, _____

STATE OF MAINE

CUMBERLAND, SS: Personally appeared the above named _____ and made oath the statements by him
subscribed are true.

INSPECTION COPY

Notary Public Justice & Peace

1433 A

Ward 7 Permit No. 30/146
 Location 20 Aerial St
 Owner Maine General Hospital
 Date of permit 2/18/30
 Elev. Cont.
 Statement of tests rec'd 12/11/30
 Final Notif.
 Final Inspn.
 Certificate issued 2/17/30

NOTES
 Mr. McDonald came in and agreed provide open gratings where shafts opened in to main building so no leakage of water. This is done.
 7/10/30 Mr. McDonald over phone told Mr. Brown that construction so that down water shaft will have to extend at least 3' above the roof and have three glass ventilation shafts in area of the shaft & in ceiling covered in metal plate &

plaster or else a skylight in roof for ventilation
 A. J. B.
 12/12/30 skylight thru roof with hatch about 3x5. shaft about 3x7 skylight is approx. 3/4 area of shaft. No wire mesh under skylight but it is in slanting roof. Dumb water and allations appear
 O.P. A.J.B.

Design of Irphased Work

PHOTOGRAPHS OF WORK
 M. J. BROWN
 SUPERVISOR
 11 Street East Portland
 PHOTOGRAPHS OF WORK
 M. J. BROWN
 SUPERVISOR
 11 Street East Portland

January 29, 1930

Grinnell Company
79 Milk Street
Boston, Mass.

Attention: Mr. E. P. Stearns, Jr. Asst. Department Mgr.

Gentlemen:

I was pleased to receive Mr. Stearns' letter of the 28th inst. concerning the sprinkler installation in the Maine General Hospital building.

I am writing so that there may be no misunderstanding about the permit. The permit covering the general alteration work in the hospital building did not include the installation of a sprinkler system so that it will be necessary for the Grinnell Company to now take out a permit covering the installation of the automatic sprinkler system in the building.

This permit should be applied for at this office on forms furnished by us, and as soon thereafter as possible, complete plans of the automatic sprinkler layout should be furnished to this office.

Very truly yours,

Inspector of Buildings.

WM/HC

GRINNELL COMPANY



INC.
EXECUTIVE OFFICES PROVIDENCE, R.I.

Manufacturers and Contractors
Automatic Sprinkler - Industrial Piping
Heating and Power Equipments
Fittings - Pipe - Valves

79 MILK STREET.
BOSTON, MASS.

January 28th, 1930

*Warren McDonald
City of Portland
389 Congress Street
Portland, Maine*

IN REPLYING REFER TO-

Mr. Warren McDonald, Inspector of Buildings
City of Portland,
389 Congress Street,
Portland, Maine.

Dear Sir:-

RE: THE HOSPITAL, PORTLAND, ME.

Called in last week while in Portland and told your secretary and your assistant in your absence that we had finally signed up contract with Mr. Thomas for the sprinkler work at the Hospital, and later on that day, obtained order also for a 500 gallon Automatic Booster Pump. I met Chief Sanborn on the street and told him, and I know you both are pleased that this much needed protection is going in.

Explained when in your office that a little later a full set of plans would be sent you, but they are very anxious to have some of the work installed in the north wing before the painting is done, and we are rushing that part out, and it may be that this will even be installed before a complete set of plans are ready. Am making this explanation so you would not think we are forgetting to send you the plans, and they will be drawn up in accordance with insurance standards of the pipe sizing and spacing.

Thanking you for the time given me on my several visits to your office in connection with this work, and hoping you can be present after the job is done when the official test is made of the fire pump, of which notice will be given you, remain

Yours very truly,
GRINNELL COMPANY, INC.

E. P. Stearns, Jr.
E. P. Stearns, Jr.
Ass't Department Manager.

W.S.C.

CC: Mr. J.H. Waters, Dept. Engr.



APPLICATION FOR PERMIT

Permit No. 0153
FEB 10 1930

Class of Building or Type of Structure Second Class

Portland, Maine, February 4, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect or 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 2-22 Arsenal Street Ward 7 Within Fire Limits? Yes Dist. No. 3

Owner's or Lessee's name and address Maine General Hospital Telephone _____

Contractor's name and address Grinnell Co., Inc. 79 Milk St. Telephone _____

Architect's name and address _____

Proposed use of building Hospital No. families _____

Other buildings on same lot _____

Description of Present Building to be Altered

Material Block No. stories 3-4 Heat _____ Style of roof _____ Roofing _____

Last use Hospital No. families _____

General Description of New Work

To install automatic sprinkler system (wet pipe with alarm valve) throughout main part of building as per plan submitted.

Details of New Work

Size: front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____

To be erected on solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____

Kind of heat _____ Type of fuel _____ Distance heater to chimney _____

If oil burner, name and model _____

Capacity and location of oil tanks _____

Is gas fitting involved? _____ Size of service _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

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: 1st floor _____ 2nd _____ 3rd _____ roof _____

On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____

Maximum span: 1st floor _____ 2nd _____ 3rd _____ roof _____

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? _____

Plans filed as part of this application? to be filed No. sheets 4

Estimated cost \$12,000. Fee \$ 11.25

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

Maine General Hospital
By Grinnell Co.

Signature of owner W. A. Fisher, Engineer

INSPECTION COPY

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE, Mar 29 1930

I, Leonard S. Thompson
as an employee of The Portland Co, have personally supervised the
installation of alterations to the elevator, hatchways and enclosures at Me Gen Hosp as permitted
under Building Permit 30/67, and have personally supervised tests of loading capacity and of all brakes, inter-
locking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will
safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

Semi-Dual
Push Button Control

Leonard S. Thompson
(Signature)
PORTLAND, MAINE, Mar 31 1930

STATE OF MAINE

CUMBERLAND, SS:

Personally appeared the above named Leonard S. Thompson and made oath the statements by him
subscribed are true.

APPLICANT'S COPY

P. Roberts
Notary Public Justice of the Peace



APPLICATION FOR ELEVATOR PERMIT

Permit No. **0067** **ISSUED**

JAN 25 1930

Portland, Maine, January 24, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install alter elevator in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications submitted herewith, and the following specifications:

Location Arsenal St. Ward 7 Within Fire Limits? Yes Dist. No.
 Owner's name and address Maine General Hospital, 2 Arsenal St. Telephone F-1770
 Elevator contractor's name and address The Portland Company 58 Fore St. No. families
 Last use of building Hospital No. families
 Proposed use of building Hospital No. families
 Material of outside walls of building Brick, interior frame Brick
 No. of stories 4 Style of roof Composite No. of existing elevators in building 2

Remarks

Details of Proposed Work

change elevator control to push button automatic

Extent of work by elevator contractor
 Extent of work by owner none
 Type of elevator Electric passenger, in new or existing shaftway
 Shaftway enclosed or open Enclosed No. elevator stops 5
 Capacity of elevator 2500 lbs, Speed in feet per minute 100
 Material of cables iron No. and size of hoisting cables two 5/8" x 6-19
 Location of machinery Basement Material of supports Concrete, of guides steel
 Minimum diameter of sheaves 30" Minimum clearance counterweights and overhead beams 2 feet
 Minimum clearance above car at topmost floor level 5 feet
 Minimum clearance buffer plates and springs when car is at lowest floor level 1 foot
 Type of power 220 volt 60 cycle 3 phase Type of machine worm gear, winding drum
 Will elevator be equipped with the following safety devices:—governor? yes, car safety? yes, electric brakes? yes, automatic terminal stops at top and bottom? yes, slack cable stops? yes, safety floor stops?

If Passenger Elevator

Passenger capacity? 16 Area of platform 6'10" x 8'3" = 48 sq. ft. Material of enclosure brick
 No. of entrances 1 Type of gates folding, interlocked? yes, automatic closing device? no
 Will elevator be automatic or will operator be in attendance? Automatic
 Will doors in shaftway enclosure be interlocked? yes

If Freight Elevator

Area of platform No. of sides enclosed Height of enclosure
 Will shaftway be enclosed? Self-closing hatch gates? , height?
 No. outside entrances to shaftway? Self-closing slatted gates? , height?

Miscellaneous

Plans filed as part of this application? none No. of sheets Fee \$ 1.00
 Estimated cost of work by elevator contractor? \$1189.00
 Signature of elevator contractor The Portland Company Elev. Eng

STATEMENT OF ELEVATOR TESTS

PORTLAND, MAINE,

I, , have personally supervised the installation of alterations to the elevator, hatchways and enclosures at as permitted under Building Permit , and have personally supervised tests of loading capacity and of all brakes, interlocking and all other safety devices, and I do here state that, according to my best knowledge and belief, the elevator will safely carry the maximum rated loading and all brakes, interlocking and other safety devices are in satisfactory condition.

(Signature)

PORTLAND, MAINE,

STATE OF MAINE

CUMBERLAND, ss:
 Personally appeared the above named
 subscribed are true.

Notary Public Justice of the Peace

INSPECTION COPY

WILLIAM W. THOMAS
184 1-2 MIDDLE STREET
PORTLAND, MAINE

File Joseph Brown

February 19, 1931

Mr. Warren McDonald
Inspector of Buildings
Portland, Maine.

Dear Mr. McDonald: Re: 29/2317-I

In reply to your letter of February 18, Mr. E. L. Brown of the Brown Construction Company has been instructed to remove the door of the closet under the stairs in the nurses' dining room which I am told will then comply with the Building Code.

If there is anything further to be done in regard to this matter please let me know.

Yours very truly,

W. W. Thomas
Chairman of Building Committee
Maine General Hospital

20/2317-1

Copy to Mr. McLean, Supp. Construction Work,
Maine General Hospital

February 18, 1931

Mr. W. W. Thomas, Chairman of Building
Committee Maine General Hospital
104 1/2 Middle Street
Portland, Maine

Dear Mr. Thomas:

We find upon inspection of the original Maine General
Hospital building that in connection with the alteration work
a closet has been provided beneath the stairs in the nurses'
dining room.

The Building Code forbids the construction of closets
beneath stairs in hospitals, presumably on account of the
possibility of fire originating in such a closet especially
from spontaneous combustion.

Will you be kind enough to have the contractors remove
this closet?

Very truly yours,

Inspector of Buildings

WJ/NO

Copy to Brown Construction Co.-574-A Congress St.

4/3/31 - Pent house
completed - A.G.

5/18/31 - Working on
first floor in details
and Bay window
about 1000 being
built - A.G.

5/19/31 - Told Foreman
that 2-24" I beam
over bay window
opening, should
have figured con-
crete fire-proof
fire door fifth fl.
A.G.

6/5/31 - Working on
first floor - A.G.

8/17/31 - Work prac-
tically complet-
except for plans
A.G.

CC- Mr. V. W. Thomas
Brown Construction Co.
Dr. W. P. Morrell

470A-1

October 31, 1929

Quillge, Shepley, Bulfinch, & Abbott
Mass Building
Boston, Mass.

Dear Sirs:

We are leaving the permit covering general construction work on the elevator shafts to the present Maine General Hospital Building to Brown Construction Company today.

There are a few questions which have arisen about the plans and a few points which I believe are not in accordance with the spirit of the Building Code.

The Kalsbein fronts on the existing elevator shafts are satisfactory if this construction is equal or superior from the standpoint of fire and smoke resistance in comparison with the present enclosure fronts.

The Kalsbein fronts of the enclosures of the new stairs are not equivalent to the standards set up by the Building Code, and I would suggest that solid plaster partitions be used similar to the new partitions elsewhere in the building. If it is absolutely necessary to have fronts in these forms, each of moderate size is acceptable provided metal mesh and wire glass is used. I presume Kalsbein doors are intended in these fronts, and the Code requires that the doors be self-closing, closed all the time and kept closed by a door check or other satisfactory device. It is believed that Doctor Morrell has suggested providing automatic doors at these points. An automatic door being normally open does not satisfy the Building Code and obviously does not stop the passage of smoke or fumes at all. The doors in these enclosures in the first story should swing towards the corridor instead of toward the stairs.

The enclosure enclose that the enclosure walls of the 7th and 8th stories are to be solid plaster construction, and the doors Kalsbein or metal covered. These doors should be self-closing.

In the fourth floor level where the new connecting passageway is proposed, there should be provided an automatic fire door at each new opening, and these doors should be on the building side of the wall rather than on the passageway side.

Please take care of the above details and advise this office as soon as the proposed method is established. I shall appreciate very much, also, information as to how much of this proposed hospital building is to be equipped with automatic sprinklers.

Coilidge, Doolley, Mallick, & Abbott

This is not a question which is determined by the Building Code as the Building Code does not require that these existing vertical openings be closed. However, I should like to call your attention to these conditions which are considered hazardous. I refer to the open stairway and elevator shafts at all levels on the west end of the building, and to the opening between the third and fourth floor levels, also the existing stairway opening to be left open with no barrier whatever to the travel of smoke or fire. It may be that the elevator shaft is proposed, as I have not examined the situation in the building. I wish to strongly recommend that these openings all be closed with self-closing Kalmatic doors, and appropriate partitions where necessary.

Very truly yours,

Inspector of Buildings.

11/10



APPLICATION FOR PERMIT

Class of Building or Type of Structure Second Class

Portland, Maine October 21, 1925

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 2-CA Arsenal Street Ward _____ City Limits? Yes Dist. No. 5

Owner's or Lessee's name and address Maine General Hospital Telephone _____

Contractor's name and address Brown Construction Co. Telephone 7-6450

Architect's name and address _____

Other buildings on same lot _____

Description of Present Building to be Altered

Material brick No. stories 4 Heat _____ Style of roof _____ Roofing _____

Last use _____ No. families _____

General Description of New Work

Interchange two windows and two doors - exterior work

make interior changes as per plans submitted

Preliminary permit 10/21/25 - "to be as cut non-carrying partitions only"

Details of New Work

Size front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____

To be erected on solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness top _____ bottom _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof _____ Roof covering _____

No. of chimneys _____ Material of chimneys _____ of lining _____

Kind of heat _____ type of fuel _____ Distance heater to chimney _____

If oil burner, name and model _____

Capacity and location of oil tanks _____

Is gas fitting involved? _____ Size of service _____

Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____

Material columns under girders _____ 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: 1st floor _____ 2nd _____ 3rd _____ roof _____

On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____

Maximum span: 1st floor _____ 2nd _____ 3rd _____ roof _____

Masonry walls, thickness of walls? _____ height? _____

If a Garage

_____ to be accommodated _____

_____ accommodated _____

more than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

_____ of any shade tree on a public street? no

_____ No. sheets 4

Fee \$ 10.00

I hereby certify that the person competent to see that the State and City requirements pertaining thereto

Maine General Hospital
By Brown Construction Co.

Signature: M. B. Brown

473

Ward 7 Permit No. 29/23/27

Location 2-12 Central St

Name General Hospital

Date of permit 11/1/29

Inspr. closing in

Final Notif.

Inspr. 5/27/31

Cert. of Occupancy issued

NOTES

Types of work
done in this
area of ground
floor to the
first floor

1/9/30 - Steel structure
erected and
being erected

1/20/30 - Work done with
steel structure

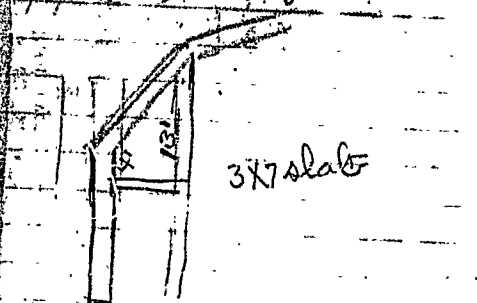
1/26/30 - Work done with
steel structure

1/19/31 - Framing and
roofing done

1/16/30 - Federal
work done

If one story building with
No. cars now accommodated
Total number commercial cars to be
Will automobile repairing be done on
Will above work require removal or disturbing
Plans filed as part of this application
Estimated cost \$ 40,000
Will there be in charge of the above work a
person who is
are observed
SPECTION COPY
Signature

1/20/30 - Green tag given
to close in - A.J.D.



7/26/30 - Told Mr. Ed
Brown that a roof
over dumb waiter
shaft + machinery
room is ceiled with
metal lath + plaster
and a skylight with
3/4 of the area of the
shaft part in the of

the
from
floor
was planned
little work
shelves in
dishes and
Mrs. Mac
writing to the
of the hospital
them it is
for a closet
the stairs
they order
take off

1/18/31 - Better
3/11/31 - Scaring
for new elevator
House - A.J.D.
3/20/31 - Working
rent house - A.J.D.
4/3 - same



(A) APARTMENT HOUSE ZONE PERMIT ISSUED

APPLICATION FOR PERMIT

Class of Building or Type of Structure Second Class

94.30 1929 2317

Portland, Maine, October 21, 1929

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 2-22 Arsenal Street Ward 7 Within Fire Limits Yes Dist. No. 3
Owner's or Lessee's name and address Maine General Hospital Telephone
Contractor's name and address Brown Construction Co., 574 A Congress St. Telephone 6430
Architect's name and address Coolidge, Shepley, Bulfinch & Abbott Boston
Proposed use of building Hospital No families
Other buildings on same lot

Description of Present Building to be Altered

Material brick No. stories 4 Heat Style of roof Roofing
Last use Hospital No families

General Description of New Work

To interchange two windows and two doors - exterior work
To make interior changes as per plans submitted
Preliminary permit 10/21/29 - "To: out non-carrying partitions only"

Details of New Work

Size, front depth No. stories Height average grade to highest point of roof
To be erected on solid or filled land? earth or rock?
Material of foundation Thickness, top bottom
Material of underpinning Height Thickness
Kind of roof Roof covering
No. of chimneys Material of chimneys of lining
Kind of heat Type of fuel Distance, heater to chimney
If oil burner, name and model
Capacity and location of oil tanks
Is gas-fitting involved? Size of service
Corner posts Sills Girt or ledger board? Size
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: 1st floor 2nd 3rd roof
On centers: 1st floor 2nd 3rd roof
Maximum span: 1st floor 2nd 3rd roof
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
Plans as part of this application? yes No. sheets 4

40,000 Fee \$ 20.00
Charge of the above work a person competent to see that the State and City requirements pertaining there

Maine General Hospital
Signature of owner By Brown Construction Co
By M. B. Brewer

*File
Maine Gen Hospital
Nov 25/1929*

GRINNELL  COMPANY

INC.
EXECUTIVE OFFICES PROVIDENCE, R.I.

Manufacturers and Contractors
Automatic Sprinkler - Industrial Piping
Heating and Power Equipments
Fittings - Pipe - Valves

IN REPLYING REFER TO:-

PROVIDENCE, R.I.
November 25, 1929.

Mr. Warren W. Dorr
Building Inspector,
City Hall,
Portland, Maine

Re; Maine General Hospital
Portland, Maine
Window Sprinklers
Contract 1 P^r - 939

Dear Sir:-

Enclosed herewith are blueprints showing the
proposed sprinkler layout for the above, for your
examination and approval.

Trusting that this layout will meet with your
approval, we remain

Very truly yours

GRINNELL COMPANY, INC.


DEPARTMENT ENGINEER.

ENC.