

7-15-77 WEST STREET

May 27, 1975 ✓

J. B. Brown Co.
57 Exchange Street
Portland, Maine 04111

Dear Sirs:

Re: 13-15-17 West Street - 55-B-14

Your property has been surveyed by the Portland Housing Inspection Division, Health Department, and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

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

If we can be of further help, please feel free to call on us.

Sincerely yours,

David G. Hitenbender
Acting Health Director.

By 
Chief of Housing Inspections

Inspector 
K. Bailey

LDW:CG

417
424
April 17, 1967

J. B. Brown and Sons
57 Exchange Street
Portland, Maine

Sirs:

RE: 15 West Street

Photos yes no
 Proj. No. C.I. **GRANHALL** Area Zone Zone Viol
 Storied **DEM** **ASD** **STAIN** **NA** **ST IP** Com. Units _____ Flag Units _____ Div. Units **1**

Date **3/11/77**

13-17

Location	1.15-11251 ST
Block	5A
Address	Adm. Bldg
City	Portland
State	OR
Zip	97203
Occupancy	Exchange
Permit	57
Agent	57

1. MAS. HIE BGT	Occupants 3294, 76, 3	Information		Occupancy		Facilities		Violations	
		LOC. BMT. NUM.	W.L.	PER. ALLD	LOWS	BATH	RISU		K.A.S.
2.									
3.									
4.									
5.									
6.									
7.									
8.									

STRUCTURE SCHEDULE

STRUCTURE EXTERIOR

YARD _____

BARBIC & RUSTISH _____

SIGNIFICANT CORLY _____

OTHER _____

TOPE VIOL. _____

STRUCTURE INTERIOR

STEPS, STAIRS, POCHES _____

CORROSION _____

WALLS _____

FLOORS, DOORS _____

ROOF, CEILING _____

PART ATTACHMENTS _____

MECHANICAL

PLUMBING _____

ELECTR. WIRING _____

HEATING GENERAL _____

STAIRS _____

BASEMENT _____

GENERAL _____

DRAINAGE _____

SPECIAL _____

LIFTING _____

BASE DR. UNIT _____

MIN 7' x 3' _____

DRAINAGE _____

WINDOW 1/12 x 9' _____

DUAL EGRESS _____

PROHIBITED COND. USE _____

ASROC. USE HAZARDOUS _____

HAZARDOUS WASTE _____

Remarks

Inspector Paul Brink

OS-8
 Portland Health Dept.

Photos yes no
 Proj. No.

Date 3/31/67

CROWDING	LOCATION <u>15 WEST ST</u>	COMP.
SAFETY	D.U. LOC.	PEND.
INFEST.	OCCUPY <u>MRS HIEBERT</u>	
BASE D.U.	OWNER <u>J. B. BRAUN</u>	VTS
DET'N	ADDRESS	

DWELLING UNIT SCHEDULE

Occupants	Information	Occupancy	Facilities				Violations									
			LOC.	RENT	FURN.	WK. I. RWS		PER.	ALL'D	LGRS	HEAT	BATH	FLSH	K.SK	H.W.	CK'G
1. <u>MRS HIEBERT</u>	<u>379-8-7-6-3</u>	<u>85</u>	<u>11</u>	<u>52</u>												
2.																
3.																
4.																

4 - 3 BFD

	KITCHEN	BATH	TOILET	DINING	BED	BED	BED	BED	BED	OTHER	TOTAL
OVERCROWDING 65' - 7'	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							
SO SLEEP'G											
VENTILATION 1/12 & 1/2											
LIGHTING											
WIRING											
DET'N BALLS											
CEILING											
WINDOWS											
DOORS											
FLOORS											

Remarks

KITCHEN SINK & WATER

SINK OK

SUPPLY & WASTE OK

PLUG. GEN'L

HEATING

STACKS, FLUES, VENTS OK

HT'GS VENTED, REP'G

BATHING FACILITIES

SHARED MAX. 4DU

SHD U. I PER 10

MIN. 7' STDB HT.

VENT'LN OK

PROPER ACCESS

PLD'G

SANIT'N

TOILET FACILITIES

SHARED MAX. 2 DU

SHD U FLSH & LAV I PER 10

VENT'LN

PROPER ACCESS

PLD'G OK

SANIT'N

INFESTATION

RATS RI OI B

OTHER (SPECIFY)

EGRESS

DUAL YES. NO

OBST'N

Portland Health Dept.

CS-7

Inspector _____