

202 Dwight Street 05-7-10

LONGFORD



SHAM-WALKER
#85033R

CERTIFICATE
OF
COMPLIANCE

October 4, 1972

CITY OF PORTLAND
Health Department - Housing Division
Tel. 775-5451 Ext 226

Mrs. Cora Brown
203 Brackett Street
Portland, Maine 04102

Re: Premises located at 203 Brackett Street, Portland, Maine

Dear Mrs. Brown:

A re-inspection of the premises noted above was made on October 2, 1972
by Housing Inspector Knowlton, of the Health Department.

This is to certify that you have complied with our request to correct the violations
of the Municipal Codes relating to housing conditions described in our "Notice of
Housing Conditions" dated _____.

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

Sincerely yours,

Arthur A. Hughson, CPH, MPH
Health Director

By Lyle D. Hayes
Chief of Housing Inspections

Inspector Philip Knowlton

/99

Idn:1971

REINSPECTION RECOMMENDATIONS

LOCATION 203 Brackett St.
Project Longfellow Square
Owner Mrs. Ora Robinson

INSPECTOR J. Brasier

| NOTICE OF HOUSING CONDITIONS | | HEARING NOTICE | | FINAL NOTICE | |
|------------------------------|---------------|----------------|---------|--------------|---------|
| Issued | Expired | Issued | Expired | Issued | Expired |
| <u>12/31/71</u> | <u>3/1/72</u> | | | | |

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

| | | | | | |
|----------------|-----------|---|-------------------------------------|-------------------|-------------------------------------|
| Date | | ALL VIOLATIONS HAVE BEEN CORRECTED | <input checked="" type="checkbox"/> | "POSTING RELEASE" | |
| <u>10/2/72</u> | <u>JK</u> | Send "CERTIFICATE OF COMPLIANCE" | <input checked="" type="checkbox"/> | | |
| | | SATISFACTORY Rehabilitation in Progress | | | |
| | | Time Extended To | | | |
| | | Time Extended To | | | |
| | | Time Extended To | | | |
| <u>7/26/72</u> | <u>JB</u> | UNSATISFACTORY Progress | | "FINAL NOTICE" | <input checked="" type="checkbox"/> |
| | | Send "HEARING NOTICE" | | | |
| | | "NOTICE TO VACATE" | | | |
| | | POST Entire | | | |
| | | POST Dwelling Units | | | |
| | | UNSATISFACTORY Progress | | | |
| | | Request "LEGAL ACTION" Be Taken | | | |
| <u>3/13/72</u> | <u>JB</u> | INSPECTOR'S REMARKS: <u>Call owner she said cross connects verified</u> | | | |
| | | <u>Re soon Saturday. Told id bath was installed she replied</u> | | | |
| | | <u>was that she was going to connect main vents, into large one</u> | | | |
| | | <u>when one of the elderly tenants moved or passed away.</u> | | | |
| <u>7/26/72</u> | <u>JB</u> | <u>Hold in abeyance; now released from managers office;</u> | | | |
| | | <u>will CO - CB said he place in A-1 phase and nothing</u> | | | |
| | | <u>more needs to be done. Ask'd for appt to be said to</u> | | | |
| | | <u>call later in week or next week.</u> | | | |
| | | INSTRUCTIONS TO INSPECTOR: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

LDN 79-71

NOTICE OF HOUSING CONDITIONS

DU 10

CITY OF PORTLAND
Health Department - Housing Division
Telephone 775-5451 - Extension 226

Location: 203 Brackett Street
Project: Longfellow Square
Issued: 12-30-71
Expires: 3-1-72

Mrs. Cora Brown 772-2473 HOME
203 Brackett Street 775-2812 WORK
Portland, Maine 04102

Dear Mrs. Brown:

An examination was made of the premises at 203 Brackett Street, Portland, Maine, by Housing Inspector Brasier. Violations of Municipal Codes relating to housing conditions were found as described in detail below.

In accordance with provisions of the above mentioned Codes, you are requested to correct these defects on or before March 1, 1972. You may contact this office to arrange a satisfactory repair schedule if you are unable to make such repairs within the specified time. We will assume the repairs to be in progress if we do not hear from you within ten days from this date and, on reinspection within the time set forth above, will anticipate that the premises have been brought into compliance with Code Standards.

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

Very truly yours,

Arthur A. Hughson, CPH, MPH
Health Director

By [Signature]
Chief of Housing Inspections

Inspector _____

EXISTING VIOLATIONS OF CHAPTER 307 - "MINIMUM STANDARDS FOR HOUSING" - Section(s)

- ~~1.~~ Apartment #3 First Floor Right Rear
Install a bathtub or shower in the bathroom of this dwelling unit. 6(a)
- ~~2.~~ Apartment #5 Second Floor Left Front
Install a bathtub or shower, flush toilet and lavatory within the walls of this dwelling unit. 6(a)
- ~~3.~~ Apartment #6 Second Floor Middle
Install a bathtub or shower, flush toilet and lavatory within the walls of this dwelling unit. 6(a)
- ~~4.~~ Apartment #8 Third Floor
Correct the condition at the fixture that causes a cross-connection at the bathtub in the bathroom. 6(d)

317

COL #3 USL
4 1:

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

DU 6

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

CH. 55 BLK. E LOT 41

LOCATION: 203 Brackett Street

Cora L. Brown
203 Brackett Street
Portland, Maine 04102

PROJECT: NCP-WE
ISSUED: August 26, 1985
EXPIRES: October 26, 1985

Dear Ms. Brown:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 203 Brackett Street by Code Enforcement Officer Merlin Leary. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above-mentioned Code, you are hereby ordered to correct those defects on or before October 26, 1985. If you are unable to make such repairs within the specified time, you may contact this office to arrange a satisfactory repair schedule. If we do not hear from you within ten (10) days from this date, we will assume the repairs to be in progress and, on re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

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

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

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

Very truly yours,

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

By: P. Samuel Hoffses
P. Samuel Hoffses
Chief of Inspection Services

Merlin Leary
Code Enforcement Officer - Merlin Leary (5)

Attachments

jmr

HOUSING INSPECTION REPORT

OWNER: Cora L. Brown

LOCATION: 203 Brackett St. 55-E-41 WE

CODE ENFORCEMENT OFFICER: Merlin Leary (5)

HOUSING CONDITIONS DATED: August 26, 1985 EXPIRES: October 26, 1985

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

SEC. (S)

- | | |
|---|-------|
| * 1. CELLAR - walls - missing 1-hour fire rated construction. | 114-2 |
| * 2. CELLAR - furnace - missing fire door with self-closures. | 114-2 |
| * 3. CELLAR - furnace - missing outside ventilation. | 114-2 |

*WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH ASBESTOS, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

ARTICLE 5 - HOUSING CODE

INSP FORM NO.

INSP DATE

2/17/21 1815

OK Inspector

Flr. # Location Rm. # Rms. # Pac. # A1 d Slip. Rm.

TENANT'S NAME

Henry Jones

Bridge D. 3. 1 4

| Child Un. | Child | + Lead Survey Results | Rent | Rent Code | Furn | Hot Water | Dual Egrs. | Ck'ing | Heat | Lav. | Bath | Flush |
|---|-------|-----------------------|------|-----------|------|-----------|------------|--------|------|------|------|-------|
| 10 | 1 | - | 6 | | NU | VBS | | LC | OPK | PL | PB | D/E |
| KITCHEN | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls 108-2 <input checked="" type="checkbox"/> Windows - loose, broken glass, glaze 108-3 <input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn 108-3 <input checked="" type="checkbox"/> Floor - loose, worn, dam., buckled 108-2 <input checked="" type="checkbox"/> Doors - Knob/lk - miss.-Pan./Fram.dam. 108-3 <input checked="" type="checkbox"/> Counter/Stor. Space Yes No 111-1 <input checked="" type="checkbox"/> Sink - chip., crack., leaks 114-1 <input checked="" type="checkbox"/> Range - improper stack, flue, vent - <input checked="" type="checkbox"/> Refrigerator Space Yes No 111.3 <input checked="" type="checkbox"/> Plumbing (a)6 (a)Water Sup. Hot Cold 113 <input checked="" type="checkbox"/> Electrical (a) 109 <input checked="" type="checkbox"/> Sanitation (a) 109 | | | | | | | | | | | | |
| LIVING ROOM | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Plaster - L, C, M, - Ceil./Walls 108-2 <input checked="" type="checkbox"/> Windows - loose, broken, glaze 108-3 <input checked="" type="checkbox"/> Sash/Frames-broken,missing,worn 108-3 <input checked="" type="checkbox"/> Floor - loose,worn,damaged 108-2 <input checked="" type="checkbox"/> Door - knob/lk - miss. - panels/frames dam. 108-3 <input checked="" type="checkbox"/> Electrical (c) MISSING 113 <input checked="" type="checkbox"/> Sanitation (c) Fire Doors & Well 109 | | | | | | | | | | | | |
| Bedrooms and/or other rooms | | | | | | | | | | | | |
| <input type="checkbox"/> Plaster - L,C,M - Ceiling/Walls 108-2 <input type="checkbox"/> Windows - loose, broken, glaze 108-3 <input type="checkbox"/> Sash/Frames - broken,missing,worn 108-3 <input type="checkbox"/> Floors - loose, worn, damaged 108-2 <input type="checkbox"/> Door - knobs/lk - miss.-Panels/Frames dam. 108-3 <input type="checkbox"/> Electrical (e) 113 <input type="checkbox"/> Sanitation (e) 109 <input type="checkbox"/> Clothes Closet Yes No Sanitation - Vermin O R | | | | | | | | | | | | |
| Plumbing Electrical | | | | | | | | | | | | |

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

ARTICLE 5 - HOUSING CODE

INSP DATE

INSP

FORM NO.

TENANTS NAME

Flr. # Location Rm. # Rm. # Peo. # All'd Slp. Rm.

Corp Bio
 Un. 10 1 - 6
 + Lead Survey - Results
 Rent Code
 Furn
 Hot Water
 Dual Egrs.
 CK'ing
 Heat
 Lav.
 Bath
 Flush
 1 LE DD 3 1

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

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

ARTICLE 5 - HOUSING CODE

INSP DATE

12/22/2011

OK 1st Inspection

INSP

FORM NO.

TENANT'S NAME Rachel Casanova

Fir. # Location Rm. Tp. # Bms. # Peol. # All. d. Slp. Rm.

Child Un. 10 1 - 6 + Lead Survey Results Rent Rent Code Furn Hot Water Dual Egrs. Ck'ing Heat Lav. Bath Flush

NU YES YES LG 1.0-4 PL PB

KITCHEN CODE BATHROOM CODE

- (X) Plaster - L, C, M, - Ceiling/Walls 108-2 (X) Plaster - L, C, M - Ceiling/Walls 108-2
(X) Windows - loose, broken glass, glaze 108-3 (X) Window - loose, broken glass, glaze 108-3
(X) Sash/Frames - broken, missing, worn 108-3 (X) Sash/Frames - broken, missing, worn 108-3
(X) Floor - loose, worn, dam., buckled 108-2 (X) Floor - loose, worn, dam., buckled 108-2
(X) Doors - Knob/lk - miss.-Pan./Fram.dam. 108-3 (X) Door - knob/lk - miss.-Pan./Fram. dam. 108-3
(X) Counter/Stor. Space Yes No (X) Toilet-Tnk-brkn, loose, leaks, seat, crkd. 111-1
(X) Sink - chip., crack., leaks 111-1 (X) Lavatory - chip., crkd, leaks, trap leaks 111-1
(X) Range - improper stack, flue, vent 114-1 (X) Bathtub/shower- leaks, cross connect. 111-1
(X) Refrigerator Space Yes No (X) Ventilation Yes No 112
(X) Plumbing (a)6 (a)Water Sup. Hot Cold 111.3 (X) Plumb. (b)6(a)Water Sup. Hot Cold 111-3
(X) Electrical (a) 113 (X) Electrical (b) 113
(X) Sanitation (a) 109 (X) Sanitation (b) 109

LIVING ROOM CODE DINING ROOM CODE

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

Bedrooms and/or other rooms CODE

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

Plumbing Electrical Sanitation - Vermin O R

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

DWELLING UNIT SCHEDULE

Inspection Services Division

ARTICLE 5 HOUSING CODE

INSP DATE

4-12-21-11-51

INSP

FORM NO.

TENANT'S NAME

Doris Cortez

Flr. # Location Bldg. Tp. # Bns. # Pco. # All'd Slp. Rm.

2 LE DU 1 2

| Child Un-10 | Child 1-6 | + Lead Survey - Results | Rent | Rent Code | Furn | Hot Water | Dual Egrs. | Ck'ing | Heat | Lav. | Bath | Flush |
|---|-----------|-------------------------|------------|-----------|------|---|------------|--------|------|------|------|-------|
| | | | | | NU | YES | YES | 10 | FURN | PL | | |
| KITCHEN | | | | | | BATHROOM | | | | | | |
| <input checked="" type="checkbox"/> Plaster - L, C, M, - Ceiling/Walls 108-2 <input checked="" type="checkbox"/> Windows - loose, broken glass, glaze 103-3 <input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn 103-3 <input checked="" type="checkbox"/> Floor - loose, worn, dam., buckled 103-2 <input checked="" type="checkbox"/> Doors - Knob/lk - miss.-Pan./Fram.dam. 108-3 <input checked="" type="checkbox"/> Counter/Stor. Space Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Sink - chip., crack., leaks 111-1 <input checked="" type="checkbox"/> Range - improper stack, flue, vent 114-1 <input checked="" type="checkbox"/> Refrigerator Space Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Plumbing (a)6 (a)Water Sup. Hot <input checked="" type="checkbox"/> Cold 111.3 <input checked="" type="checkbox"/> Electrical (a) 113 <input checked="" type="checkbox"/> Sanitation (a) 109 | | | | | | <input type="checkbox"/> Plaster - L, C, M - Ceiling/Walls CODE <input type="checkbox"/> Window - loose, broken glass, glaze 108-2 <input type="checkbox"/> Sash/Frames - broken, missing, worn 108-3 <input type="checkbox"/> Floor - loose, worn, dam., buck ed 108-2 <input type="checkbox"/> Door - knob/lk - miss.-Pan./Fram. dam. 108-3 <input type="checkbox"/> Toilet-Tnk-brkn, loose, leaks, set, crkd. 111-1 <input type="checkbox"/> Lavatory - chip., crkd, leaks, trap leaks 111-1 <input type="checkbox"/> Bath/shower- leaks, cross connect. 111-1 <input type="checkbox"/> Ventilation Yes <input checked="" type="checkbox"/> No 112 <input type="checkbox"/> Plumb. (b)6(a)Water Sup. Hot <input checked="" type="checkbox"/> Cold 111-3 <input type="checkbox"/> Electrical (b) 113 <input type="checkbox"/> Sanitation (b) 109 | | | | | | |
| LIVING ROOM | | | | | | DINING ROOM | | | | | | |
| <input checked="" type="checkbox"/> Plaster - L, C, M, - Ceil./Walls 108-2 <input checked="" type="checkbox"/> Windows - loose, broken, glaze 108-3 <input checked="" type="checkbox"/> Sash/Frames - broken, missing, worn 108-3 <input checked="" type="checkbox"/> Floor - loose, worn, damaged 108-2 <input checked="" type="checkbox"/> Door - knob/lk - miss. - panels/frames dam. 108-3 <input checked="" type="checkbox"/> Electrical (c) 113 <input checked="" type="checkbox"/> Sanitation (c) 109 | | | | | | <input type="checkbox"/> Plaster - L,C,M - Ceil/Walls CODE <input type="checkbox"/> Windows - loose, broken, glaze 108-2 <input type="checkbox"/> Sash/Frames - broken, missing, worn 108-3 <input type="checkbox"/> Floor - loose, worn, damaged 108-2 <input type="checkbox"/> Doors - Knobs/lk - miss. - panels/frames dam. 108-3 <input type="checkbox"/> Electrical (d) 113 <input type="checkbox"/> Sanitation (d) 109 | | | | | | |
| Bedrooms and/or other rooms | | | | | | | | | | | | |
| | | | | | | <input type="checkbox"/> Plaster - L,C,M - Ceiling/Walls 108-2 <input type="checkbox"/> Windows - loose, broken, glaze 108-3 <input type="checkbox"/> Sash/Frames - broken, missing, worn 108-3 <input type="checkbox"/> Floors - loose, worn, damaged 108-2 <input type="checkbox"/> Door - knobs/lk - miss.-Panels/Frames dam. 108-3 <input type="checkbox"/> Electrical (e) 113 <input type="checkbox"/> Sanitation (e) 109 <input type="checkbox"/> Clothes Closet Yes <input checked="" type="checkbox"/> No | | | | | | |
| Plumbing | | | Electrical | | | Sanitation - Vermin O R | | | | | | |

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

ARTICLE 5 HOUSING CODE

INSP DATE

4/17/91

INSP

FORM NO.

TENANT'S NAME

John L. ...

Flr # Location Rtg. Tp. # Bms # Pco # All'd Slp. Rm.

2 R1 DU 3.1 4

| | | | | | | | | | | | | |
|-------------|-------------|-------------------------|------|-----------|------|-----------|------------|--------|----------|------|------|-------|
| Child Un.10 | Child 1 - 6 | + Leave Survey Res. lts | Tent | Rent Code | Furn | Hot Water | Dual Egrs. | Ck'ing | Heat | Lav. | Bath | Flush |
| | | | | | NO | YES | YES | LC | R. 2/1/1 | PL | PB | PF |

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

| | | |
|----------|------------|-------------------------|
| Plumbing | Electrical | Sanitation - Vermin O R |
|----------|------------|-------------------------|

REMARKS:

City of Portland

PLANNING AND URBAN DEVELOPMENT

Inspection Services Division

DWELLING UNIT SCHEDULE

ARTICLE 5 HOUSING CODE

INSP FORM NO.

INSP DATE

8/13/85

OK Inspection

TENANT'S NAME

Soehn Trairna

Flr. # Location Rm. Tp. # Rm. # Peo. # All'd Slp. Rm.

3 DW 3/4

| | | | | | | | | | | | | |
|--------------|-------------|-----------------------|------|-----------|------|-----------|------------|--------|------|------|------|-------|
| Child Un. 10 | Child 1 - 6 | + Lead Survey Results | Rent | Rent Code | Furn | Hot Water | Dual Egrs. | Ck'ing | Heat | Lav. | Bath | Flush |
| | | | | | NO | YES | YES | CE | POPP | PL | PP | 1-1 |

| KITCHEN | CODE | BATHROOM | CODE |
|--|------------|--|------------|
| () Plaster - L, C, M, - Ceiling/Walls | 108-2 | () Plaster - L, C, M Ceiling/Walls | 108-2 |
| () Windows - loose, broken glass, glaze | 108-3 | () Window - loose, en glass, glaze | 108-3 |
| () Sash/Frames - broken, missing, worn | 108-3 | () Sash/Frames - brk, missing, worn | 108-3 |
| () Floor - loose, worn, dam., buckled | 108-2 | () Floor - loose, worn, dam., buckled | 108-2 |
| () Doors - Knob/lk - miss. - Pan./Fram. dam. | 108-3 | () Door - knob/lk - miss. - Pan./Fram. dam. | 108-3 |
| () Counter/Stor. Space Yes <u>No</u> | - | () Toilet-Tnk-brkn, loose, leaks, seat, crkd. | 111-1 |
| () Sink - chip., crack., leaks | 111-1 | () Lavatory - chip., crkd, leaks, trap leaks | 111-1 |
| () Range - improper stack, flue, vent | 114-1 | () Bathtub/shower- leaks, cross connect. | 111-1 |
| () Refrigerator Space: Yes <u>No</u> | - | () Ventilation Yes <u>No</u> | 112 |
| () Plumbing (a)6 (a) Water Sup. Hot <u>Cold</u> | 111.3 | () Plumb. (b)6(a) Water Sup. Hot <u>Cold</u> | 111-3 |
| () Electrical (a) | 113 | () Electrical (b) | 113 |
| () Sanitation (a) | 109 | () Sanitation (b) | 109 |
| LIVING ROOM | CODE | DINING ROOM | CODE |
| () Plaster - L, C, M, - Ceil./Walls | 108-2 | () Plaster - L, C, M - Ceil/Walls | 108-2 |
| () Windows - loose, broken, glaze | 108-3 | () Windows - loose, broken, glaze | 108-3 |
| () Sash/Frames - broken, missing, worn | 108-3 | () Sash/Frames - broken, missing, worn | 108-3 |
| () Floor - loose, worn, damaged | 108-2 | () Floor - loose, worn, damaged | 108-2 |
| () Door - knob/lk - miss. - panels/frames | dam. 108-3 | () Doors - Knobs/lk - miss. - panels/frames | dam. 108-3 |
| () Electrical (c) | 113 | () Electrical (d) | 113 |
| () Sanitation (c) | 109 | () Sanitation (d) | 109 |
| Bedrooms and/or other rooms | CODE | | CODE |
| () Plaster - L, C, M - Ceiling/Walls | 108-2 | () Plaster - L, C, M - Ceiling/Walls | 108-2 |
| () Windows - loose, broken, glaze | 108-3 | () Windows - loose, broken, glaze | 108-3 |
| () Sash/Frames - broken, missing, worn | 108-3 | () Sash/Frames - broken, missing, worn | 108-3 |
| () Floors - loose, worn, damaged | 108-2 | () Floors - loose, worn, damaged | 108-2 |
| () Door - knobs/lk - miss. - Panels/Frames | dam. 108-3 | () Door - knobs/lk - miss. - Panels/Frames | dam. 108-3 |
| () Electrical (e) | 113 | () Electrical (e) | 113 |
| () Sanitation (e) | 109 | () Sanitation (e) | 109 |
| () Clothes Closet Yes <u>No</u> | | () Clothes Closet Yes <u>No</u> | |
| Plumbing | Electrical | Sanitation - Vermin | O R |

REMARKS:

HOUSING INSPECTION REPORT

OWNER: Cora L. Brown

LOCATION: 203 Brackett St. 55-E-41 WE

CODE ENFORCEMENT OFFICER: Merlin Leary (5)

HOUSING CONDITIONS DATED: August 26, 1985

EXPIRES: October 26, 1985

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

SEC. (S)

- ~~* 1. CELLAR walls missing, below fire-rated construction. 11-4-2~~
- ~~* 2. CELLAR furnace missing fire door with self-closures. 11-4-2~~
- ~~* 3. CELLAR furnace missing outside ventilation. 11-4-2~~

*WHEN MAKING YOUR REPAIRS, FIRST PRIORITY IS TO BE GIVEN TO ITEMS WITH ASTERISKS, AS THEY CONSTITUTE EXTREME HAZARDS TO THE HEALTH OR SAFETY OF THE OCCUPANTS OF THIS STRUCTURE.

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

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

Cora L. Brown
203 Brackett Street
Portland, Maine 04102

DU 6

CH. 55 BLK. E LOT 41

LOCATION: 203 Brackett Street

PROJECT: NCP-WE
ISSUED: August 26, 1985
EXPIRES: October 26, 1985

OK
M
12/23/86

Dear Ms. Brown:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 203 Brackett Street by Code Enforcement Officer Merlin Leary. Violations of Article V of the Municipal Ordinance (Housing Code) were found as described in detail on the attached "Housing Inspection Report".

In accordance with the provisions of the above-mentioned Code, you are hereby ordered to correct those defects on or before October 26, 1985. If you are unable to make such repairs within the specified time, you may contact this office to arrange a satisfactory repair schedule. If we do not hear from you within ten (10) days from this date, we will assume the repairs to be in progress and, on re-inspection within the time set forth above, will anticipate that the premises have been brought into compliance with the Housing Code Standards.

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

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

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

Very truly yours,

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

By: P. Samuel Hoffses
P. Samuel Hoffses
Chief of Inspection Services

Merlin Leary
Code Enforcement Officer / Merlin Leary (5)

Attachments

jnr

CERTIFICATE
OF
COMPLIANCE

DATE: December 23, 1986

DU: 6

CITY OF PORTLAND

Department of Planning & Urban Development
Housing Inspections Division
Telephone: 775-5451 - Extension 311 - 318

Cora L. Brown
203 Brackett Street
Portland, Maine 04102

Re: Premises located at 203 Brackett Street 55-E-41

Dear Ms. Brown:

A re-inspection of the premises noted above was made on December 23, 1986
by Code Enforcement Officer Merlin Leary.

This is to certify that you have complied with our request to correct the violation of
the Municipal Codes relating to housing conditions as described in our "Notice of Housing
Conditions" dated August 26, 1985.

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

In order to aid in the preservation of Portland's existing housing
inventory, it shall be the policy of this department to inspect each
residential building at least once every five years. Although a
property is subject to re-inspection at any time during the said
five-year period, the next regular inspection of this property is
scheduled for December 1991.

Sincerely yours,

Joseph E. Gray, Jr., Director of
Planning and Urban Development

By Samuel Hoffses
P. Samuel Hoffses,
Chief of Inspection Services

Merlin Leary
Code Enforcement Officer - Merlin Leary (5)

jmr

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

December 20, 1994

BROWN CORA L
203 BRACKETT ST
PORTLAND ME 04102

Re: 203 Brackett St
CBL: 055- - E-041-001-01
DU: 8

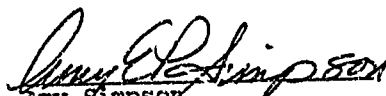
Dear Ms. Brown:

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

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

Please contact me in this office at 874-8300 X 8707 between 8:00-9:00 a.m. or 4:00-5:00 p.m. to make arrangements to inspect the building.

Sincerely,


Amy Simpson
Code Enforcement Officer

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

December 20, 1994

BROWN CORA L
203 BRACKETT ST
PORTLAND ME 04102

Re: 203 Brackett St
CBL: 055- - E-041-001-01
DU: 8


Dear Ms. Brown:

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

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

Please contact me in this office at 874-8300 X 8707 between 8:00-9:00 a.m. or 4:00-5:00 p.m. to make arrangements to inspect the building.

Sincerely,


Amy Simpson
Code Enforcement Officer

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 07, 1995

BROWN CORA L
203 BRACKETT ST
PORTLAND ME 04102

Re: 203 Brackett St
CBL: 055- - E-041-001-01
DU: 8


Dear Ms. Brown:

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

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

Please contact me in this office at 874-8300 X 8707 between 7:00-8:00 a.m. or 3:00-3:30 p.m. to make arrangements to inspect the building.

Sincerely,


Amy Simpson
Code Enforcement Officer

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 16, 1995

BROWN CORA L
203 BRACKETT ST
PORTLAND ME 04102

Re: 203 Brackett St
CBL: 055- - E-041-001-01
DU: 6

Dear Ms. Brown:

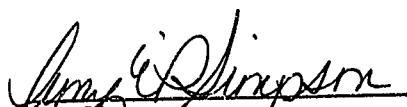
The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above referenced property.

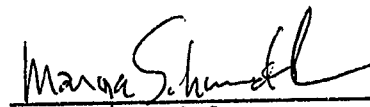
Congratulations are extended to you for the general condition of your property which was found to meet the standards established by the City's Housing Code.

Good maintenance is the best way to protect the value of your property and neighborhood.

Please feel free to call on us if we can be of assistance to you.

Sincerely,


Amy Simpson
Code Enforcement Officer


Marge Schmuckal
Asst. Chief of Inspection Services

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

March 16, 1995

BROWN CORA L
203 BRACKETT ST
PORTLAND ME 04102

Re: 203 Brackett St
CBL: 055- - E-041-001-01
DU: 6

Dear Ms. Brown:

During a recent inspection of the property owned by you at the above referred address, it was noted that smoke detectors needed batteries in apartments #2, #5 and #6.

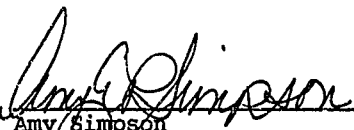
25 MRSA 2464 required that approved smoke detectors be installed in each apartment in the immediate vicinity of the bedrooms. When activated, the detector shall provide an alarm suitable to warn the occupants within the individual unit. Failure to comply with this statute may result in a fine of up to \$500 for each violation.

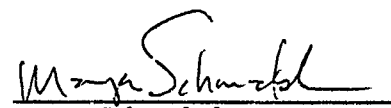
Re-inspection of your property will be made in 24 hours. Lack of compliance will result in referral of the matter for legal action.

Loss control is a responsibility of your management. Our observations are intended to assist you. Recommendations are a result of conditions observed at the time of our visits. They do not necessarily include every possible loss potential code violation, or exception to good practice.

Please read and implement the attached formal code interpretation or determination - Number 93-1 - March 10, 1993 - from the State Fire Marshall's office.

Sincerely,


Amy Simpson
Code Enforcement Officer


Marge Schmuckal
Asst. Chief of Inspection Services