

BRIGGS STREET

7-9 BRIGGS STREET

SHARPE-WALKER

Full cut • 920R • Half cut • 9202R • Third cut • 9203R • Full cut • 9205R





**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date May 25, 1976, 19\_\_  
 Receipt and Permit number A 1862

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 9 Briggs St.

OWNER'S NAME: Rackley ADDRESS: \_\_\_\_\_

OUTLETS: (number of)

Lights	_____	
Receptacles	_____	
Switches	_____	
Plugmold	_____ (number of feet)	
<b>TOTAL</b>	_____	<b>FEES</b>

FIXTURES: (number of)

Incandescent	_____	
Fluorescent	_____ (Do not include strip fluorescent)	
<b>TOTAL</b>	_____	
Strip Fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	_____	
Temporary	_____	

METERS: (number of) \_\_\_\_\_

MOTORS: (number of)

Fractional	_____	
1 HP or over	_____	

RESIDENTIAL HEATING:

Oil or Gas (number of units)	_____	
Electric (number of rooms)	_____	

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler)	_____	
Oil or Gas (by separate units)	_____	
Electric (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	_____	Others (denote)	_____
<b>TOTAL</b>	_____		

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	<u>1</u>	<u>2.00</u>
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
Emergency Lights, battery	_____	
Emergency Generators	_____	

INSTALLATION FEE DUE:	_____
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE:	_____
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	_____
FOR PERFORMING WORK WITHOUT A PERMIT (304-9) .....	_____
<b>TOTAL AMOUNT DUE:</b>	<u>3.00 min</u>

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_; or Will Call \_\_\_\_\_

CONTRACTOR'S NAME: Thomas Hunt  
 ADDRESS: Whites Bridge Rd. N. Windham  
 TEL.: \_\_\_\_\_

MASTER LICENSE NO.: 1539 SIGNATURE OF CONTRACTOR: Thomas A. Hunt (G.H.)  
 LIMITED LICENSE NO.: \_\_\_\_\_

INSPECTOR'S COPY







Location, Ownership and detail must be correct, complete and legible.  
 Separate application required for every building.  
 Plans must be filed with this application.

## Application for Permit for Alterations, etc.

Portland, 7-5-12, 1912

To the  
 INSPECTOR OF BUILDINGS.

The undersigned applies for a permit to alter the following-described building:—  
 Location, 9 Brigg St. Wd. 7  
 Name of owner is? James Coyne Address 9 Brigg St  
 Name of mechanic is? Walter S Tingley 73 Bay St.  
 Name of architect is? \_\_\_\_\_  
 Material of building is? Wood Style of roof? Pitch Material of roofing? Shingled  
 Size of building, feet front? 18; feet rear? 18; feet deep? 31; No. of stories? 10  
 Size of L, feet long? \_\_\_\_\_; feet wide? \_\_\_\_\_; feet high? \_\_\_\_\_; No. of storeis? \_\_\_\_\_; roof? \_\_\_\_\_  
 No. of feet in height from sidewalk to highest point of roof? \_\_\_\_\_ Material of foundation? \_\_\_\_\_  
 Thickness of external walls? \_\_\_\_\_ Party walls? \_\_\_\_\_ Distance from line of street? \_\_\_\_\_ Width of street? \_\_\_\_\_  
 What was the building last used for? Dwelling How many families? 1 Number of stores? \_\_\_\_\_  
 Nature of egress? \_\_\_\_\_ Size of lot front? \_\_\_\_\_; rear? \_\_\_\_\_; deep? \_\_\_\_\_  
 Building to be occupied for Dwelling after alteration. Estimated cost? 1500

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK.

### DETAIL OF PROPOSED WORK.

To raise roof and make two stories also add addition.

### IF EXTENDED ON ANY SIDE.

Size of extension, No. of feet long? 18; No. of feet wide? 18; No. of feet high above sidewalk? \_\_\_\_\_  
 No. of stories high? Two; style of roof? Pitch; material of roofing? Shingled  
 Of what material will the extension be built? Wood Foundation? Stone & brick  
 If of brick, what will be the thickness of external walls? \_\_\_\_\_ inches; and party walls? \_\_\_\_\_ inches.  
 How will the extension be occupied? Dwelling How connected with main building? \_\_\_\_\_  
 Distance from lot lines:— Front? \_\_\_\_\_; side? \_\_\_\_\_; side? \_\_\_\_\_; rear? \_\_\_\_\_

### WHEN MOVED, RAISED OR BUILT UPON.

Number of stories in height when moved, raised or built upon? \_\_\_\_\_ Proposed foundations? \_\_\_\_\_  
 Number of feet high from level of ground to highest part of roof to be? \_\_\_\_\_  
 Distance back from line of street? \_\_\_\_\_ Distances from lot lines when moved? \_\_\_\_\_  
 Distance from next buildings when moved? \_\_\_\_\_; front? \_\_\_\_\_; side? \_\_\_\_\_; side? \_\_\_\_\_; rear? \_\_\_\_\_  
 How many feet will the external walls be increased in height? \_\_\_\_\_ Party walls? \_\_\_\_\_

### IF ANY PORTION OF THE EXTERNAL OR PARTY WALLS ARE REMOVED.

Will an opening be made in the party or external walls? \_\_\_\_\_ in \_\_\_\_\_ story.  
 Size of the opening? \_\_\_\_\_ How protected? \_\_\_\_\_  
 How will the remaining portion of the wall be supported? \_\_\_\_\_

Signature of owner or  
 authorized representative,

Walter S. Tingley  
 Address, 73 Bay St





7-9 BRIGGS STREET







**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date August 2, 1983  
 Receipt and Permit number B08283

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 9 Briggs Street  
 OWNER'S NAME: Al Racklay ADDRESS: ?

**OUTLETS:** \_\_\_\_\_ **FEEs** \_\_\_\_\_

Receptacles \_\_\_\_\_ Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL \_\_\_\_\_

**FIXTURES:** (number of) \_\_\_\_\_

Incandescent \_\_\_\_\_ Fluorescent \_\_\_\_\_ (not strip) TOTAL \_\_\_\_\_

Strip Fluorescent \_\_\_\_\_ ft. \_\_\_\_\_

**SERVICES:** \_\_\_\_\_

Overhead  Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes 200 3.00

METERS: (number of) 2 1.00

M. F. O. S.: (number of) \_\_\_\_\_

Fractional \_\_\_\_\_

1 HP or over \_\_\_\_\_

**RESIDENTIAL HEATING:** \_\_\_\_\_

Oil or Gas (number of units) \_\_\_\_\_

Electric (number of rooms) \_\_\_\_\_

**COMMERCIAL OR INDUSTRIAL HEATING:** \_\_\_\_\_

Oil or Gas (by a main boiler) \_\_\_\_\_

Oil or Gas (by separate units) \_\_\_\_\_

Electric Under 20 kws \_\_\_\_\_ Over 20 kws \_\_\_\_\_

**APPLIANCES:** (number of) \_\_\_\_\_

Ranges \_\_\_\_\_ Water Heaters \_\_\_\_\_

Cook Tops \_\_\_\_\_ Disposals \_\_\_\_\_

Wall Ovens \_\_\_\_\_ Dishwashers \_\_\_\_\_

Dryers \_\_\_\_\_ Compactors \_\_\_\_\_

Fans \_\_\_\_\_ Others (denote) \_\_\_\_\_

TOTAL \_\_\_\_\_

**MISCELLANEOUS:** (number of) \_\_\_\_\_

Branch Panels \_\_\_\_\_

Transformers \_\_\_\_\_

Air Conditioners Central Unit \_\_\_\_\_

Separate Units (windows) \_\_\_\_\_

Signs 20 sq. ft. and under \_\_\_\_\_

Over 20 sq. ft. \_\_\_\_\_

Swimming Pools Above Ground \_\_\_\_\_

In Ground \_\_\_\_\_

Fire/Burglar Alarms Residential \_\_\_\_\_

Commercial \_\_\_\_\_

Heavy Duty Outlets, 220 Vol. (such as welders) 30 amps and under \_\_\_\_\_

over 30 amps \_\_\_\_\_

Circus, Fairs, etc. \_\_\_\_\_

Alterations to wires \_\_\_\_\_

Repairs after fire \_\_\_\_\_

Emergency Lights, battery \_\_\_\_\_

Emergency Generators \_\_\_\_\_

INSTALLATION FEE DUE: \_\_\_\_\_

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_

FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... \_\_\_\_\_

TOTAL AMOUNT DUE: 5.00 Min.

(READY 1:00)

**INSPECTION:** \_\_\_\_\_

Will be ready on Aug. 3, 1983 or Will Call \_\_\_\_\_

CONTRACTOR'S NAME: John Quinn

ADDRESS: Rte. 85, Raymond, Maine 04071

TEL.: 655-7503

MASTER LICENSE NO.: 3722 SIGNATURE OF CONTRACTOR: \_\_\_\_\_

LIMITED LICENSE NO.: \_\_\_\_\_

INSPECTOR'S COPY — WHITE  
 OFFICE COPY — CANARY  
 CONTRACTOR'S COPY — GREEN



9 Briggs Street  
Portland, Maine 04105  
August 16, 1994

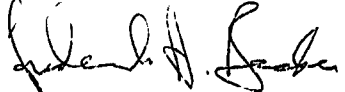
Mr. Bill Giroux  
Zoning Officer  
Portland City Hall  
389 Congress Street  
Portland, Maine 04102

Dear Mr. Giroux:

At your suggestion, I am submitting a request and sketch for your review. If no negative reply is forthcoming from you in (7) seven days, then this proposed transfer is acceptable to the City, meets all zoning regulations and will become a part of our files.

I presently own property on 9 Briggs Street, Tax Map 57, Lot J-18 & 19. I am negotiating to acquire a 12.3 foot by 18.9 foot piece which abuts my property, from Mr. Cameron Rogers, Tax Map 57, Lots J-21 & 22 to add on to my lot to make it more conforming. Mr. Roger's lot will still contain over 10,000 square feet after the transfer of property, 4,500 square feet is required for minimum lot size, no frontage is affected by the proposed change. I appreciate your help with this.

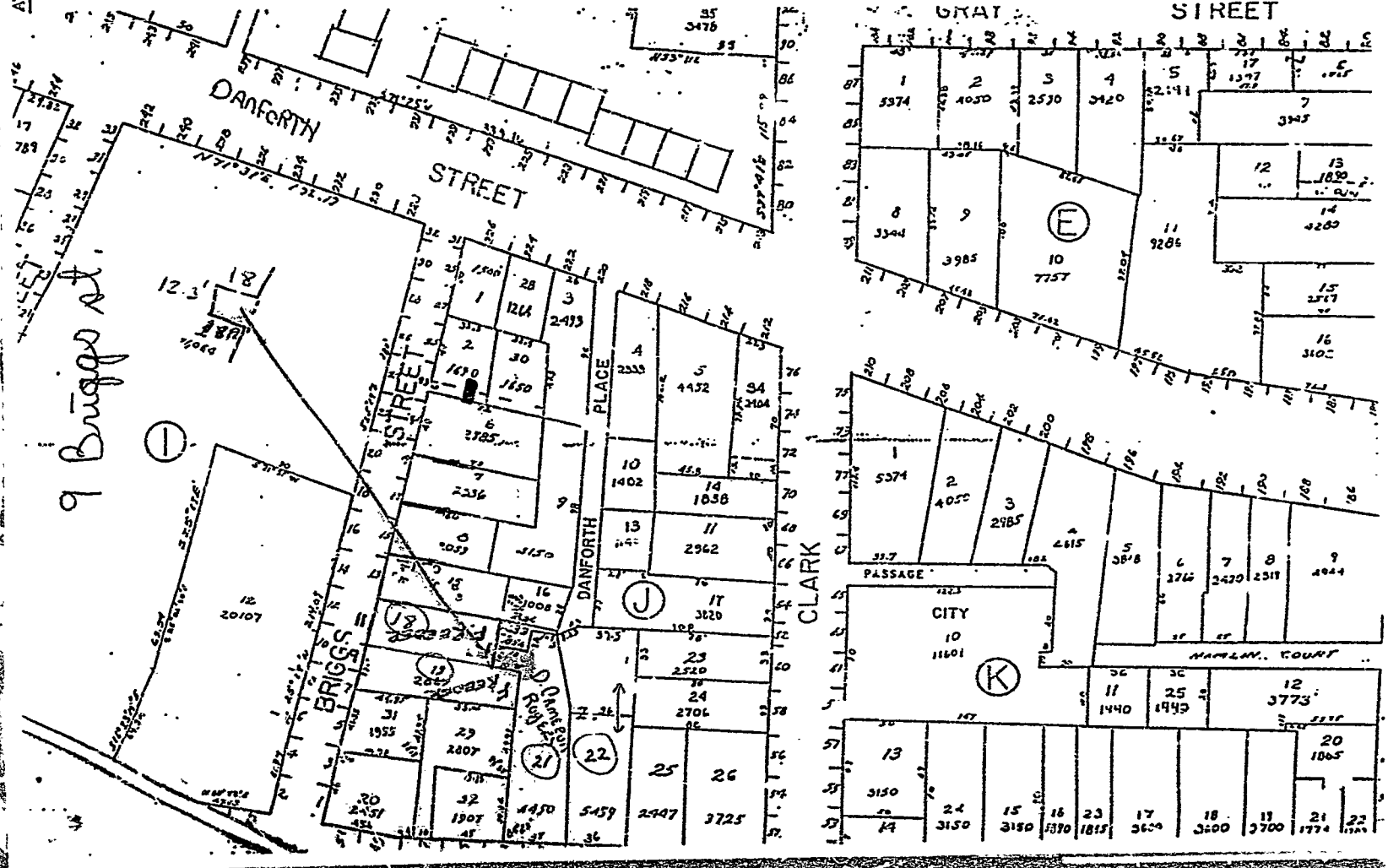
Sincerely,



Frederick H. Reeder

FHR

ATTACHMENT #2



9 Briggs St.

1

18

19

21

22

K

E

J

GRAY STREET

DANFORTH STREET

BRIGGS STREET

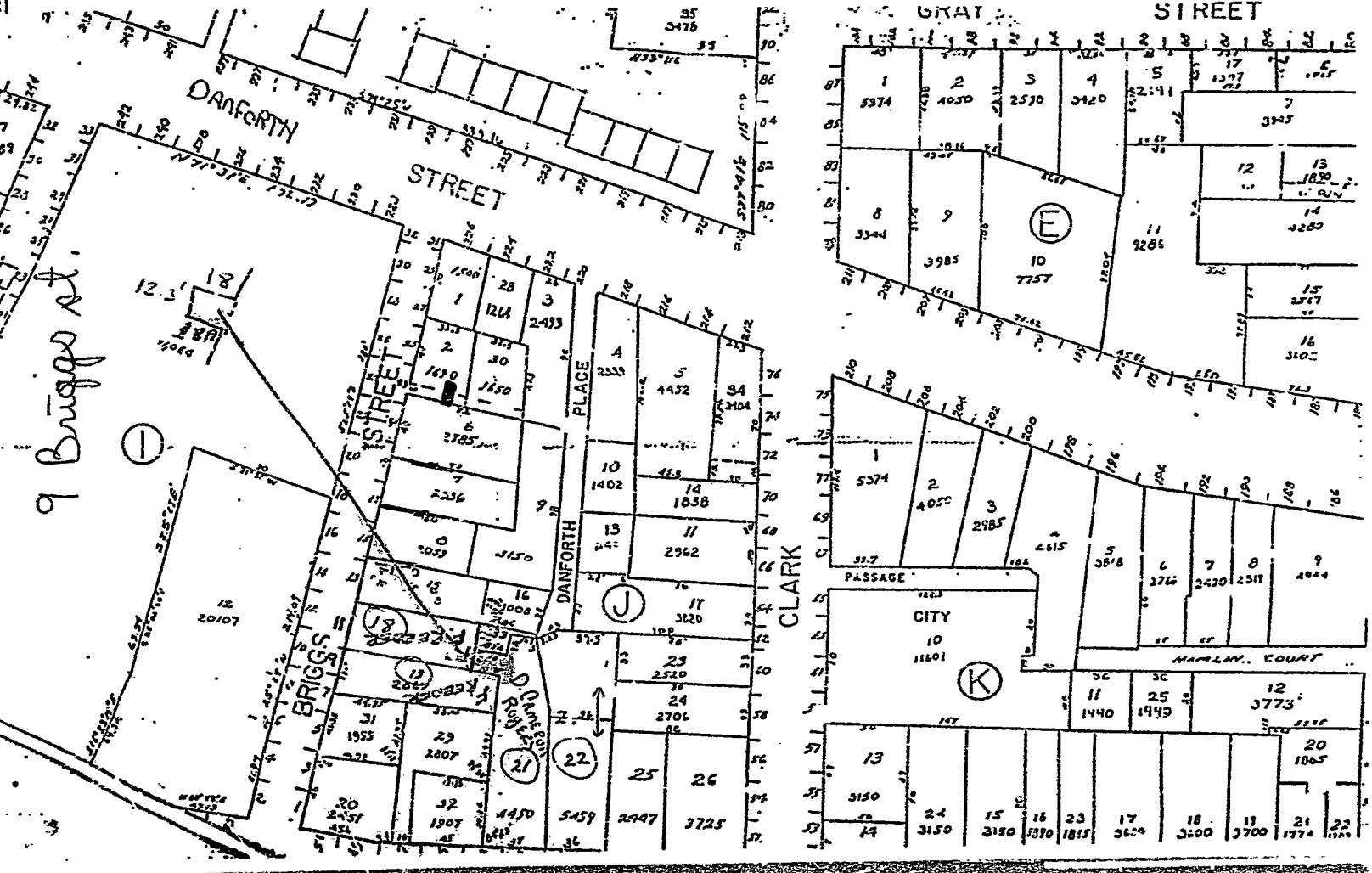
CLARK STREET

DANFORTH PLACE

HAMILTON COURT

CITY

PASSAGE





City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 9 Briggs St		Owner: Merton & Lucille Verrill		Phone: 761-2775		Permit No: 970025	
Owner Address: 9 Briggs St Portland, ME 04102		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		Permit Issued: JAN 14 1997	
Past Use: 2-fam		Proposed Use: Same w/daycare		COST OF WORK: \$		PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: Change Use from 2-fam to 2-fam w/daycare Daycare on 2nd floor unit Max 6 children				Signature:		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: <i>[Signature]</i>	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm	
Permit Taken By: Mary Gresik		Date Applied For: 10 January 1997					

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

**CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

*Lucille D. Verrill* 9 Briggs St Portland 10 January 1997 761-2775  
 SIGNATURE OF APPLICANT Lucille Verrill ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:  
 White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**PERMIT ISSUED**  
 JAN 14 1997  
 CITY OF PORTLAND

Zone: R-6 CBL: 057-J-019  
 Special Zone or Reviews:  Shoreland  Wetland  Flood Zone  Subdivision  Site Plan  major  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied  
 Date: 1/10/97

*J. Audman*

CEO DISTRICT **3**  
*T. MASON*

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 9 Briggs St		Owner: Lucille & Merton Verrill	Phone:	Permit No: <b>970046</b>
Owner Address:	Leasee/Buyer's Name: Marion Doyle 9 Briggs St	Phone:	Business Name: Portland, ME 04102 773-8971	<b>PERMIT ISSUED</b> Permit Issued: <b>JAN 2 1997</b>
Contractor Name:	Address:	Phone:		
Past Use: 2-fam	Proposed Use: Same	COST OF WORK: \$	PERMIT FEE: \$ 25.00	<b>CITY OF PORTLAND</b> Zone: <b>R-6</b> CBL: 057-J-019 Zoning Approval: <i>OK with conditions</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm
Proposed Project Description: Change Use - Add Daycare - Max 6 Childre 1st floor apartment		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: Signature: <i>[Signature]</i>	
		Signature:	Date:	
Permit Taken By: Mary Gresik	Date Applied For: 13 January 1997			

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

**PERMIT ISSUED WITH REQUIREMENTS**  
*STATE Fire Marshalls Regs For Family Day-Care-3-6*

**CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *Marion Doyle* ADDRESS: *9 Briggs St / PHU* DATE: *13 January 1997* PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: *1/14/97*

*D. Anderson*

CEO DISTRICT **3**  
*T. Muns*

9 Briggs Street



REPRODUCED  
FROM

CERTIFICATE  
OF  
COMPLIANCE

CITY OF PORTLAND  
Department of Health & Social Services  
Housing Inspections Division  
Telephone: 775-5451 - Extension 448

April 27, 1976 ✓

Ms. Eileen Rackley  
P. O. Box 246  
North Windham, Maine 04062

Re: Premises located at 9 Briggs Street, Portland, Maine NDP 57-J-19

Dear Ms. Rackley:

A re-inspection of the premises noted above was made on April 26, 1976  
by Housing Inspector Gough.

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 5, 1975.

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 April 1981.

Sincerely yours,

Director  
Health & Social Services

By [Signature]  
Chief of Housing Inspections

Inspector [Signature]

H. Gough

/88





9 Briggs Street - continued

- 16. ~~41/1~~ Install sashcords in window of front bedroom allowing window sash to remain elevated when opened. 3c
- 17. ~~41/1~~ Install sashcords in window of rear bedroom allowing window sash to remain elevated when opened. 3c
- 18. ~~41/1~~ Determine the reason and remedy the condition causing lack of water pressure in supply lines of kitchen and bathroom. 6c
- 19. ~~41/1~~ Replace broken glass in bathroom window. 3c

41/6 At the time of the survey the Second Floor Apt. was unavailable for inspection. We suggest that if there are any conditions which need correcting in this apartment that you make the repairs while doing the work on the rest of the structure.

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

LDN:rl

41676-20RE 2ND FLOOR  
M1 SASHCORDS K1 BA L1 W13 (2) 2c  
21) IN LAV BA (2) LA

