

60 CLARK STREET

SHAW-WALKER

Full cut # 02011 Half cut # 02021 Full cut # 02031 Full cut # 02041



APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date 6/3/76, 19__
 Receipt and Permit number A 1889

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, and the National Electrical Code and the following specifications:

LOCATION OF WORK: 60 ST.
 OWNER'S NAME: Mrs White ADDRESS: _____

OUTLETS: (number of)

Lights _____	FEES
Receptacles _____	
Switches _____	
Plugmold _____ (number of feet)	
TOTAL _____	

FIXTURES: (number of)

Incandescent _____	
Fluorescent _____ (Do not include strip fluorescent)	
TOTAL _____	
Strip Fluorescent, in feet _____	

SERVICES:

Permanent, total amperes <u>100</u>	3.00
Temporary _____	1.00

METERS: (number of) 2

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)

Range <u>1</u>	Water Heaters _____	
Cook Tops _____	Disposals _____	
Wall Ovens _____	Dishwashers _____	
Dryers <u>1</u>	Compactors _____	
Fans _____	Others (denote) _____	3.00
TOTAL _____		

MISCELLANEOUS: (number of)

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

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT	DOUBLE FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-15.b)	
FOR PERFORMING WORK WITHOUT A PERMIT (304-9)	9.00
TOTAL AMOUNT DUE:	9.00

INSPECTION: Will be ready on _____, 19__; or Will Call

CONTRACTOR'S NAME: Paul Bourget
 ADDRESS: Scarborough
 TEL: _____

MASTER LICENSE NO.: x24x 2555
 LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:

INSPECTOR'S COPY



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, 6/21/50

PERMIT ISSUED 010110 JUN 23 1950 CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

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 60 Clark St. Use of Building Dwelling No. Stories 1 1/2 New Building Existing " Name and address of owner of appliance V. S. Thomass 60 Clark St. Installer's name and address Palletta Oil Co Telephone 4-2671

General Description of Work

To install Oil Burner in Steam Boiler

IF HEATER, OR POWER BOILER

Location of appliance or source of heat Type of floor beneath appliance If wood, how protected? Kind of fuel Minimum distance to wood or combustible material from top of appliance or casing top of furnace From top of smoke pipe From front of appliance From sides or back of appliance Size of chimney flue Other connections to same flue If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner Fluid Heat Rotary Labelled by underwriter's laboratories? Yes Will operator be always in attendance? No Does oil supply line feed from top or bottom of tank? Bottom Type of floor beneath burner Concrete Location of oil storage Basement Number and capacity of tanks 1 - 275 Gals If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? Yes How many tanks fire proofed? 1 Total capacity of any existing storage tanks for furnace burners None

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance If wood, how protected? Minimum distance to wood or combustible material from: top of appliance From front of appliance From sides and back From top of smokepipe Size of chimney flue Other connections to same flue Is hood to be provided? If so, how vented? If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

RECEIVED JUN 22 1950 DEPT. OF BLD'G INSP. CITY OF PORTLAND

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

APPROVED

6-29-50 [Signature]

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 Installer Palletta Oil Co S. J. Palletta

Permit No. 50/10007430
Location 60 Clark St
Owner W. S. Thomas
Date of permit 6/23/50
Approved 358 ✓ FWB

NOTES

- ~~1. Fill Pipe~~
- ~~2. Vent Pipe~~
- ~~3. Kind of Heat Steam~~
- ~~4. Burner Rigidity & Supports~~
- ~~5. Name of Laid~~
- ~~6. Stack Control~~
- ~~7. High Limit Control~~
- ~~8. Remote Control~~
- ~~9. Piping Support & Protection~~
- ~~10. Valves in Supply Line~~
- ~~11. Capacity of Tanks~~
- ~~12. Tank Rigidity & Supports~~
- ~~13. Tank Distance~~
- ~~14. OH Gauge~~
- ~~15. Instruction Card~~
- ~~16~~



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, 6-15-14 191

To the
 INSPECTOR OF BUILDINGS:

The undersigned applies for a permit to alter the following-described building:

Location, 60 Selguk St Wd. 6
 Name of owner is? M. J. Delaney Address, do
 Name of mechanic is? Raywood 359 Ocean Ave
 Name of architect is? _____
 Material of building is? _____ Style of roof? _____ Material of roofing? _____
 Size of building, feet front? _____; feet rear? _____; feet deep? _____; No. of stories? _____
 Size of L, feet long? _____; feet wide? _____; feet high? _____; No. of storeys? _____; 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? _____ How many families? _____ Number of stores? _____
 Nature of egress? _____ Size of lot front? _____; rear? _____; deep? _____
 Building to be occupied for Dwelling after alteration. Estimated cost? 2,700

Descrip-
 tion of
 Present
 Bldg.

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK.

DETAIL OF PROPOSED WORK.

To remove into 3 stories

IF EXTENDED ON ANY SIDE.

Size of extension, No. of feet long? _____; No. of feet wide? _____; No. of feet high above sidewalk? _____
 No. of stories high? _____; style of roof? _____; material of roofing? _____
 Of what material will the extension be built? _____ Foundation? _____
 If of brick, what will be the thickness of external walls? _____ inches; and party walls _____ inches.
 How will the extension be occupied? _____ 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,

Address,

M. J. Delaney

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS:

Town Or Plantation: Portland

Street: 60 Clark St

Subdivision Lot #:

PROPERTY OWNERS NAME:

Last: 4090 Jm First: Rudolf

Applicant Name: Rudolf Casparius

Mailing Address of Owner/Applicant (if Different): 1231 Forest Ave Portland

PORTLAND PERMIT # 2,309 TOWN COPY

Local Plumbing Inspector Signature: [Signature]

L.P.I. # _____

FEE: \$ _____

Check Fee: _____

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and belief and that any falsification is a violation of the Local Plumbing Inspector to deny a Permit.

[Signature] 4/30/87

Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

MAY 4 - 1987

Local Plumbing Inspector Signature _____ Date Approved _____

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input checked="" type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>1,177,61</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock	9	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	9	Sink
		Drinking Fountain	9	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor	2	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		2
Number of Hook-Ups & Relocations		Fixtures (Subtotal) Column 2	12	Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee			0	Fixtures (Subtotal) Column 2
			12	Total Fixtures
			\$ 34.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 34.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE



CITY OF PORTLAND

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

August 5, 1983

#DU: 3

Mrs. Josephine Slavenwaite
60 Clark Street
Portland, Maine 04102

Re: 60 Clark St. 57 J-23 NDP

The Housing Inspections Division of the Department of Planning and Urban Development has recently completed an overall inspection of the above referred 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 yours,
Joseph E. Gray, Jr., Director
Planning & Urban Development

By


Lyle D. Noyes
Inspections Services Division

Code Enforcement Officer
Martin Leary (5)



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, Nov. 6, 1987

PERMIT ISSUED

NOV 10 1987

CITY OF PORTLAND

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 60 Clark St. Use of Building 3-Fam. No. Stories 3 New Building Existing X
Name and address of owner of appliance Douglas Hansen - Portland, Maine
Installer's name and address Rudy's Plumb. & Heatl - 123A Forest Ave. 04103 Telephone 797-8311

General Description of Work

To install Two Gas boilers/burners for 2nd. & 3rd. Fl. - Replace.

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? Gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 3' all around
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue 10x12 Other connections to same flue No yes, one oil burner
If gas fired, how vented? chimney Rated maximum demand per hour 65,000 per unit
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes BTU'S

IF OIL BURNER

Name and type of burner Peerless - gas Labelled by underwriters' laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

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Amount of fee enclosed? \$15.00 Est. Cost: \$4,000.00

APPROVED:
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.....

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 Installer Rudy's Plumb. & Heatl Lic.# 1076

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY
5 MA, Learner

NOTES

Notes section with 10 horizontal lines.

Permit No. _____
Location _____
Owner _____
Date of permit _____
Approved _____

Main body of the form with 20 horizontal lines, divided into two columns by a vertical line. Both columns are crossed out with large diagonal lines.

B



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

NOV 10 1987 City Of Portland

Portland, Maine, Nov. 6, 1987

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 60 Clark St. Use of Building 1-Fam. No. Stories 3 New Building Existing X
Name and address of owner of appliance Douglas Hansen - Portland, Maine...
Installer's name and address Rudy's Plumb. & Heat - 1231 Forest Ave. 04103 Telephone 797-8311

General Description of Work

To install Two Gas boilers/burners for 2nd. & 3rd. Fl.

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? No
If so, how protected? Kind of fuel? Gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 3' all around
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue 10x12 Other connections to same flue No yes, one oil burner
If gas fired, how vented? chimney Rated maximum demand per hour 65,000 per unit BTU'S
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Peerless - gas Labeled by underwriters' laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? \$15.00

Est. Cost: \$4,000.00

APPROVED:

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 Installer Rudy's Plumb. & Heat Lic.# 1076

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY

5 Mr. Leahy

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3828

PROPERTY ADDRESS

Town Or Plantation: Portland
Street: 60 Clark St. Portland
Subdivision Lot #

PROPERTY OWNER NAME

Last: Harrison First: Douglas

Applicant Name: Rudolf Casparius

Mailing Address of Owner/Applicant (if different): 1231 First Ave Portland

PORTLAND PERMIT # 2,614 TOWN COPY
Date Issued: 11-6-87 FEE: 9 (Check) or Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 11,231

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is cause for the Local Plumbing Inspector to deny a Permit.
Signature of Owner/Applicant: [Signature] Date: 11.6.87

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.
Local Plumbing Inspector Signature: _____ Date Approved: NOV 9 1987

PERMITS INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY: _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>11,726</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type Of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Number of Hook-Ups & Relocations		Bidet		Laundry Tub
		Other: _____	3	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				Fixtures (Subtotal) Column 2
				0
				3
				Total Fixtures
			\$ 9-	
			\$ 0-	
			\$ 9-	



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date February 27, 19 87
 Receipt and Permit number D. 09121

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: 60 Clark Street

OWNER'S NAME: Doug Hanson ADDRESS: _____

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>30-60</u>	<u>5.00</u>
FIXTURES: (number of)	
Incandescent _____ Flourescent _____ (not strip) TOTAL <u>1-10</u>	<u>3.00</u>
Strip Flourescent _____ ft.	
SERVICES:	
Overhead <u>1</u> Underground _____ Temporary _____ TOTAL amperes <u>200</u> ..	<u>3.00</u>
METERS: (number of) <u>2</u>	<u>1.00</u>
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 Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____ <u>2</u> _____ Water Heaters _____ <u>2</u> _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>4</u>	<u>6.00</u>
MISCELLANEOUS: (number of)	
Branch Panels <u>2</u>	<u>2.00</u>
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 Volt (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 REMCVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE: _____	<u>20.00</u>

INSPECTION:

Will be ready on _____, 19 ____; or Will Call X

CONTRACTOR'S NAME: Bailey Elec. Inc. WILLIAM J. BAILEY

ADDRESS: 9 Mill Lane Windham

TEL: 892-8460

MASTER LICENSE NO.: 7521 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: _____ William J. Bailey

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY

Inspection Services
Samuel F. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

April 22, 1993

James A. Hopkins, Trustee
P.O. Box 15235
Portland, ME 04101

Re: 60 Clark St
CBL: 057-J-023

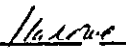
Dear Mr. Hopkins,

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

This is for the City of Portland's program to inspect all multi-family buildings in the City every 5 years.

Please contact me in this office at 874-8300 X8707 between 7:00-9:00AM or 3:00-3:30PM to make arrangements to inspect the building.

Sincerely,


Kathleen Lowe
Code Enforcement Officer