

000807

FILL IN AND SIGN WITH INK

PERMIT ISSUED

JUN 26 1986

City Of Portland



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, June 25, 1986

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 15 Bramhall St. Use of Building multi - 12 10 No. Stories 3 New Building Existing " Name and address of owner of appliance Marshall Mack - 113 Vaughan St. - 774-1266 Installer's name and address John Ross Heating - 35 Johnson Rd. Falmouth Telephone 781-4507

General Description of Work

To install boiler & burner - forced hot water - replacement

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? # 2 fuel oil Minimum distance to burnable material, from top of appliance or casing top of furnace 4' all around From top of smoke pipe From front of appliance From sides or back of appliance Size of chimney flue 8" Other connections to same flue none If gas fired, how vented? Rated maximum demand per hour Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Beckett - gun Labeled by underwriters' 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 cement Size of vent pipe 1 1/2" Location of oil storage basement Number and capacity of tanks 2-275 gal. Low water shut off? yes Make OEM -170 No. Will all tanks be more than five feet from any flame? yes How many tanks enclosed? none Total capacity of any existing storage tanks for furnace burners 550 gal.

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? 25.00

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?

CS 300

INSPECTION FILE

APPLICANT'S ASSESSOR'S COPY

Signature of Installer

John Ross #463

5 Male Letrey

NOTES

Permit No. 816/807
Location 151
Owner Marshall Mack
Date of permit 6-25-86
Approved 6-26-86

12/2/86

Inspected checked
H.W. control OK
Thermoc cutoff OK
Everything OK (mm)

Table with multiple rows and columns, containing faint text and a large handwritten 'X' mark.



APPLICATION FOR AMENDMENT TO PERMIT

PERMIT ISSUED

Amendment No. # 1

DEC 9 1986

Portland, Maine, DEC 5, 1986

City of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 86-38 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location 15 Bramhall Street Within Fire Limits? Dist. No.
Owner's name and address Marshall Mack 113 Vaughan St Telephone 774-1266
Lessee's name and address Telephone
Contractor's name and address Owner Telephone
Architect Plans filed No. of sheets
Proposed use of building multi family No. families 10
Last use same No. families
Increased cost of work 2,000 Additional fee 10.00

Description of Proposed Work

Additional cost of permit fee, also to cover changes as listed on plan. 1 sheet of plans.

send permit to # 1 04102

Details of New Work

Is any plumbing involved in this work? no Is any electrical work involved in this work? no
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories 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
Framing lumber—Kind Dressed or full size?
Corner posts Sills Girt or ledger board? Size
Girders Size Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor, 2nd, 3rd, roof
On centers: 1st floor, 2nd, 3rd, roof
Maximum span: 1st floor, 2nd, 3rd, roof

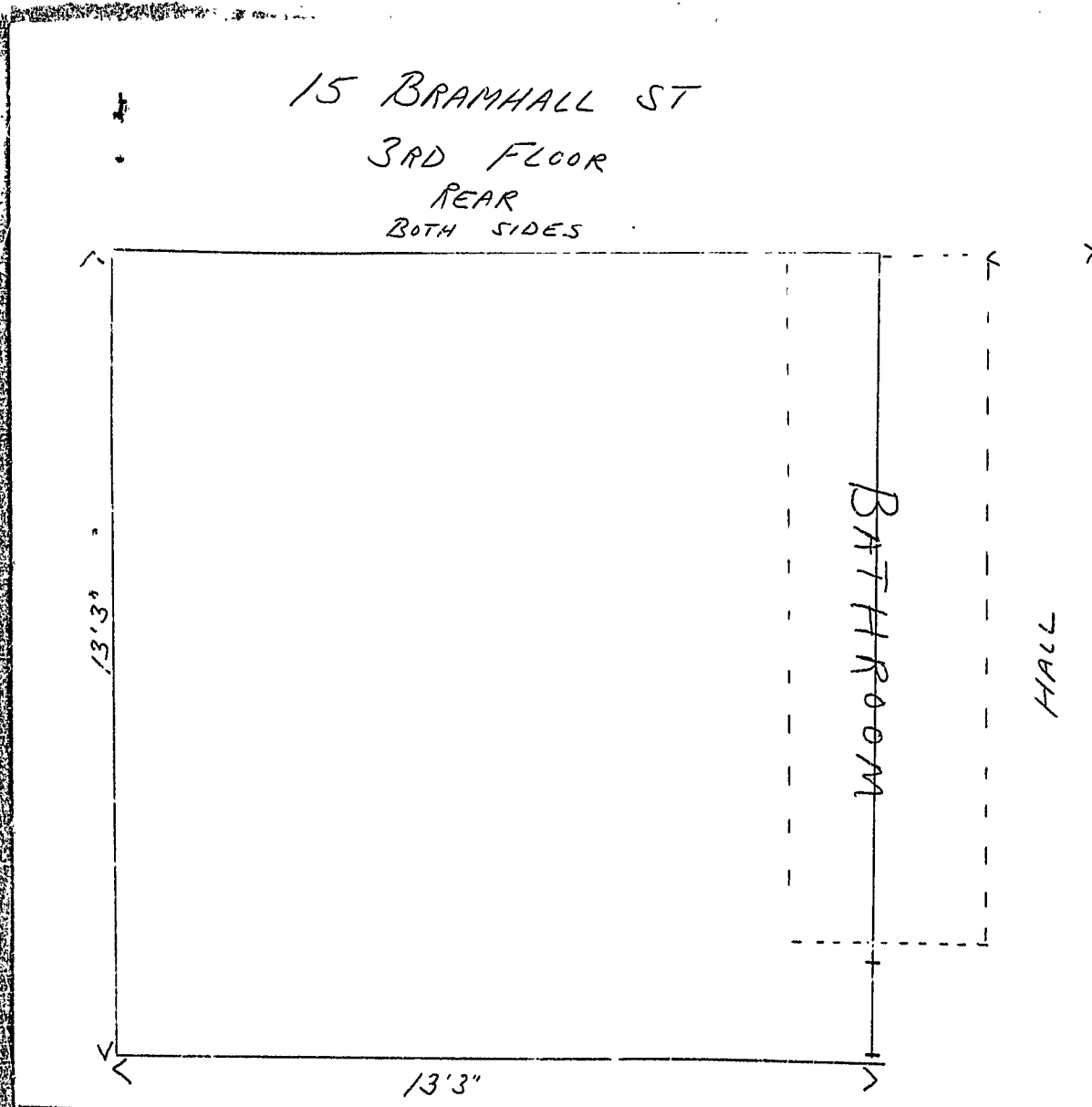
Approved:

Signature of Owner

FILE COPY

Approved: Inspector of Buildings

15 BRAMHALL ST
3RD FLOOR
REAR
BOTH SIDES



3rd FLOOR FRONT

MOVED DOOR TO APARTMENT
AND FRAMED IN FOR
PRIVACY

RECEIVED

MAR 31 1988

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP 00362
B.O.C.A. TYPE OF CONSTRUCTION
ZONING LOCATION PORTLAND, MAINE March 31, 1986
City Of Portland

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION 15 Bramhall Street - 3rd floor Fire District #1 [] #2 []
1. Owner's name and address Marshall Mack - 113 Vaughan St. Telephone 774-1266
2. Lessee's name and address Telephone
3. Contractor's name and address Owner Telephone
Proposed use of building multi family No. of sheets
Last use same No. families 10
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ 1,000 Appeal Fees \$
Base Fee 25.00
FIELD INSPECTOR-Mr. @ 775-5451 La Fee
TOTAL \$

To install partitions to divide area to be used for bathrooms as per City Housing Codes, as per plans. 1 sheet of plans.

Stamp of Special Conditions

send permits to # 1 04102

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical & mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? yes Is any electrical work involved in this work? yes
Is connection to be made to public sewer? existing If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber-Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
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 number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY:

BUILDING INSPECTION-PLAN EXAMINER DATE
ZONING:
BUILDING CODE:
Fire Dept.:
Health Dept.:
Others:

MISCELLANEOUS

Will work require disturbing of any tree on a public street?
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

Signature of Applicant Marshall Mack Phone # same
Type Name of above Marshall Mack 2 3 4
Other and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

5 M.M. L. Carr

NOTES

11-26-87 Major remodeling work is going on in the 3rd floor. The bathroom don't have any ventilation installed. A problem has come up with the rear pit. This has been changed by eliminating it. This is not acc. table because it is the bathroom as per code. Also the width of the hallway has been cut in half 44" to the allowable width. Mr. Mack will have to work in with new plans.

12-11-86 Mr. Mack amended his permit. He is changing the stairway around with a different exit door. Also a new bathroom has been put in.

8-4-87 This is all finished as to alterations.

Permit No. 00362-86

Location 15 Bryan Hall St.

Owner MACH

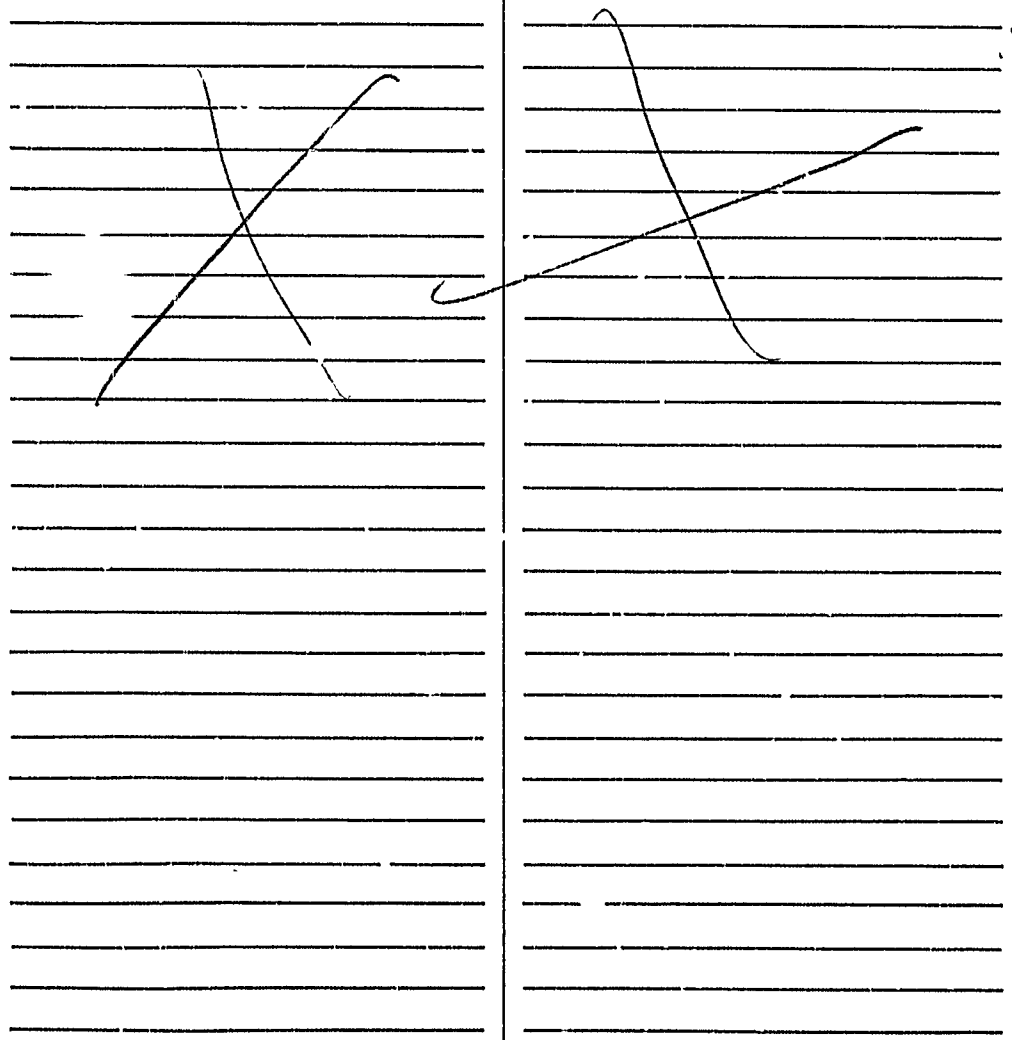
Date of permit 3/31/86

Approved 4/9/86

Dwelling

Garage

Alteration





APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. # 1

Portland, Maine 5, 1986

PERMIT ISSUED

DEC 9 1986

City of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby apply for amendment to Permit No. 06-362 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location 15 Bramhall Street Within Fire Limits? Dist. No. 774-1266
 Owner's name and address Marshall Mack - 113 Vaughan St. Telephone 774-1266
 Lessee's name and address Telephone
 Contractor's name and address Owner Telephone
 Architect Plans filed No. of sheets
 Proposed use of building multi family No. families 10
 Last use same No. families
 Increased cost of work ~~xxxxxxx~~ 2,000 Additional fee 10.00

Description of Proposed Work

Additional cost of permit fee, also to cover changes as listed on plan. 1 sheet of plans.

send permit to # 1 04102

Details of New Work

Is any plumbing involved in this work? no Is any electrical work involved in this work? no
 Height average grade to top of plate Height average grade to highest point of roof
 Size, front depth No. stories 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
 Framing lumber—Kind Dressed or full size?
 Corner posts Sills Girt or ledger board? Size
 Girders Size Columns under girders Size Max. on centers
 Studs (outside walls and carrying partitions) 2x4-12' O. C. Bridging in every floor and flat roof span over 8 feet.
 Joists and rafters: 1st floor, 2nd, 3rd, roof
 On centers: 1st floor, 2nd, 3rd, roof
 Maximum span: 1st floor, 2nd, 3rd, roof

Approved: James P. Collins, Land

Signature of Owner Marshall Mack
Approved: Inspector of Buildings

INSPECTION COPY

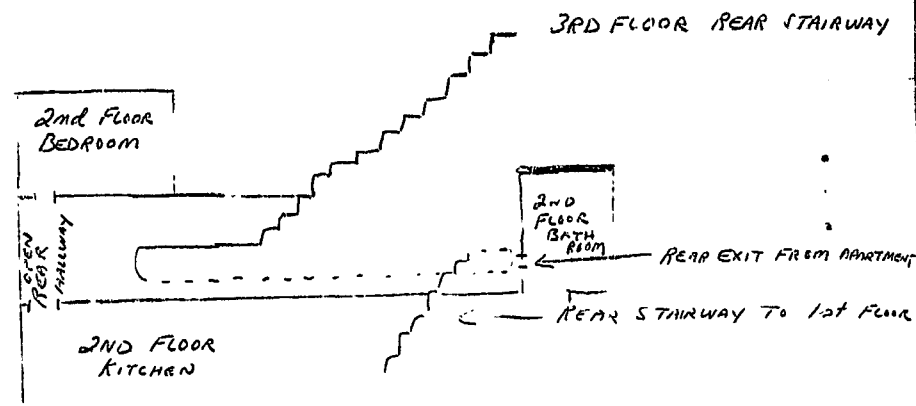
MARSHALL MACK 15 BRAMHALL ST

CHANGES TO EXISTING STRUCTURE :

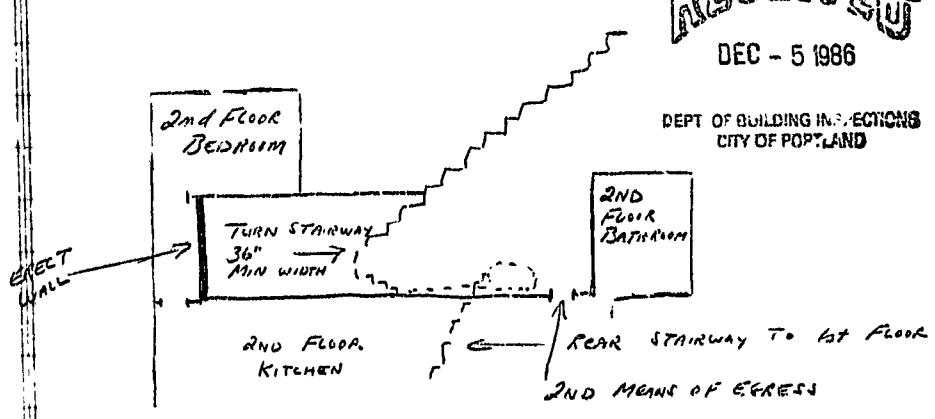
ERECT WALL IN
REAR HALLWAY TO
SEPARATE BEDROOM
FROM REAR APARTMENT
DOWNSIDE REAR HALLWAY

- 1) THIRD FLOOR REAR STAIRWAY TO LANDING ON SECOND FLOOR - TURN STAIRWAY AT SECOND FLOOR LANDING (WIDTH BEIN. 36" MINIMUM) TO ALLOW 2ND FLOOR REAR APARTMENT TO HAVE ACCESS TO BEDROOM WITHOUT ENTERING REAR HALLWAY FIRST.
- 2) SECOND FLOOR APARTMENT (REAR) - CHANGE SECOND MEANS OF EGRESS FROM BATHROOM TO KITCHEN (DOOR)

EXISTING



PROPOSED



RECEIVED
DEC - 5 1986

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

B PERMIT # 1658 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Marshall Mack
 Address: 49 Broad Cove Road, Cape Elizabeth
 LOCATION OF CONSTRUCTION 15 Bramhall Street
 CONTRACTOR: ACH Inc. SUBCONTRACTORS: _____
 ADDRESS: 17 Pleasant Street, 04101 774-6464
 Est. Construction Cost: 200,000 Type of Use: multi family
 Past Use: _____
 Building Dimensions L W Sq. Ft. # Stories: Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 _____ Conversion - Explain rehab after fire

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only:
 # Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:
 1. Type of Soil: _____
 2. Set Back's - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____ Span(s) _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulation Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

Interior Walls:
 1. Studding Size _____ Spacing _____
 2. F'ender Sizes _____ Span(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

For Official Use Only	
Date: <u>12/31/87</u>	Subdivision: Yes / No _____
Inside Fire Limits: _____	Name: _____
Blg Code: _____	City: _____
Time Lim: _____	Block: _____
Estimated Cost: <u>200,000</u>	Permit Expiration: _____
Value/Structure: _____	Ownership: Public _____ Private _____
Fee: <u>1,020.00</u>	

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceiling: _____ **DEBRIT ISSUED**
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____ JAN 4 1988

Roof:
 1. Truss or Rafter Size _____ Span _____
 2. Sheathing Type _____ Size _____ **City Of Portland**
 3. Roof Covering Type _____
 4. Other _____

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:
 1. Approval of soil test if required Yes _____ No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____

Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Zoning:
 District _____ Street Frontage Req. _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt _____ Special Exception _____
 Other (Explain) _____
 Date Approved _____

Permit Received By Kandi Cote

Signature of Applicant Jane Collette Date _____

Signature of CEO Jane Collette Date 12/31/87

Inspection Dates _____

5

FEDERAL INSULATION

Permit Number: 26386

City: 15 D. Rowland St.

Owner: Mr. Wilcox

Date of Permit: 3-31-86

Final Inspection: 4/1/86

By in Permit: [Signature]

Permit Application Register Page No. 101

INSPECTIONS: Service _____ by _____
Service called in _____
Closing-in _____ by _____

PROGRESS INSPECTIONS:

DATE:

4/1/86

REMARKS

Work - Electrical



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTION, CITY OF PHILADELPHIA
ELECTRICAL INSTALLATIONS

Date: March 28, 1955
 Permit and Special Order Number: 100-1000

To: ENTER ELECTRICAL INSTALLATION, Philadelphia, Pa.
 The undersigned hereby applies for a permit to make electrical installations in accordance with the following specifications:
 Main Electrical Code: Ordinance of the National Electrical Code
 LOCATION OF WORK: 15 Drexel St., 3rd Floor, City of Philadelphia
 OWNER'S NAME: Margaret Mach ADDRESS: Philadelphia, Pa.
 Work is time: 2

OUTLETS: To spaces _____ Switches _____ Plug _____ TOTAL _____

FIXTURES: (number of)
 Incandescent 22 Fluorescent _____ (not supp) TO AL. 1-1/2
 Strip Fluorescent _____

SERVICES: Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____

M. PER (number of) _____
 MOTORS: (number of)
 Fractional _____
 1 HP or over _____

RESIDENTIAL HEATING: Oil or Gas (number of units) _____
 Electric (number of circuits) _____

COMMERCIAL OR INDUSTRIAL HEATING: Oil or Gas (by a boiler) _____
 Oil or Gas (by separate units) _____
 Electric Under 20 kw. _____ Over 20 kw. _____

APPLIANCES: (number of)
 Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Washers _____ Dishwashers _____
 Dryer _____ 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 Alarm _____ Residential _____ Commercial _____
 Heavy Duty Outlets, 220 Volt (such as welders) 20 amps and under _____
 over 30 amps _____
 Circus, Fairs, etc. _____
 Alterations to wires _____
 Repairs after fire _____
 Emergency Lights, batteries _____
 Emergency Generators _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT _____ INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-161) _____ DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 1.75

INSPECTION: Will be received _____, 1955, or will Call XX
 CONTRACTOR'S NAME: Roberts Electric
 ADDRESS: 116 Muncy South
 TEL: 773-1155
 MASTER LICENSE NO: 4230
 LIMITED LICENSE NO: _____

SIGNATURE OF CONTRACTOR:

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



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 15 Bramhall Street

Issued to Marshall Mack

Date of Issue September 1, 1988

This is to certify that the building, premises, or part thereof, at the above location, built—altered—changed as to use under Building Permit No. 88 87/1658, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES
ENTIRE

APPROVED OCCUPANCY
10 Unit Apartment

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

(Date)

Inspector

D. Russo
E. A. Jones

7/3/88
Medlin Seay

James F. Collins, Licent.
[Signature]

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or licensee for one dollar.



**APPLICATION FOR
DEPARTMENT OF BUILDING INSPECTION
ELECTRICAL INSTALLATIONS**

Date December
Receipt and Permit number _____

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: 15 Bramhall Street - 10 Apts.

OWNER'S NAME: A.C.H. Inc. ADDRESS: 17 Pleasant St., Portland, ME 04101

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>300</u>	<u>29.00</u>
FIXTURES: (number of)	
Incandescent <u>36</u> Fluorescent _____ (not strip) TOTAL <u>36</u>	<u>5.60</u>
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead <u>x</u> Underground _____ Temporary _____ TOTAL amperes <u>400</u> ..	<u>6.00</u>
METERS: (number of) <u>11</u>	<u>5.50</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>10</u> _____ Water Heaters _____ <u>XH</u> _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>10</u>	<u>15.00</u>
MISCELLANEOUS: (number of)	
Branch Panels <u>11</u>	<u>11.00</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 REMOVAL OF A "STOP ORDER" (304-16.b)	
TOTAL AMOUNT DUE: _____	<u>72.10</u>

INSPECTION:

Will be ready on _____, 19__; or Will Call x

CONTRACTOR'S NAME: Seabee Elec.

ADDRESS: 200 Anderson St., Portland, ME 04101

TEL: 774-4880

MASTER LICENSE NO.: 3014 SIGNATURE OF CONTRACTOR: _____

LIMITED LICENSE NO.: _____

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

ELECTRICAL INSTALLATIONS

Permit Number 22663

Location 15 Bramhall St

Owner A. C. H. [unclear]

Date of Permit 12/11/81

Final Inspection 8/29/88

By Inspector [Signature]

Permit Application Register Page No. 19

Work by [Signature]

Service called in 4/21/88

Closing-in 4/21/88 by [Signature]

PROGRESS INSPECTIONS: 5/2/88 | 8/26/88 N.O.H. | | | | |

DATE:	REMARKS:
4/21/88	3rd & 2nd floor wells may be closed in
4/21/88	1st floor Northeast side wells may be closed in
5/2/88	1st floor west side wells may be closed in
8/30/88	Lead for C of O - Completed

CC [unclear]
 CC [unclear]
 DATE 8/29/88

PERMIT # 01658 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Marshall Mack

Address: 49 Broad Cove Road, Cape Elizabeth

LOCATION OF CONSTRUCTION 15 Bramhall Street

CONTRACTOR: ACH Inc. SUBCONTRACTORS: _____

ADDRESS: 17 Pleasant Street, 04001 774-6464

Est. Construction Cost: 200,000 Type of Use: multi family

Past Use: _____

Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

_____ Conversion - Explain rehab after fire

COMPLETELY ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footing _____
4. Foundation _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only	
Date <u>12/31/87</u>	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits _____	Name _____
Blgd Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost <u>200,000</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
Fee <u>1,020.00</u>	

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____ **PERMIT ISSUED**
4. Insulation Type _____ Size _____
5. Ceiling Height: _____ **8' 4" 1988**

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____ **City of Portland**
3. Roof Covering Type _____
4. Other _____

Chimneys:

Type: _____

Heating: Type _____

Electric: _____ Service Entrance _____ Meter Required Yes No

Plumbing: _____

1. Approval of soil test _____
2. No. of Tubs or Shower _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Zoning: District _____ Street Frontage Req. _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required: _____

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt _____ Special Exception _____

Other (Explain) _____

Date Approved _____

Permit Received By Karol Cote

Signature of Applicant [Signature] Date _____

Signature of CEO Jane Collette Date 12/31/87

Inspection Dates _____

157 MPK 24-6

PLOT PLAN

N



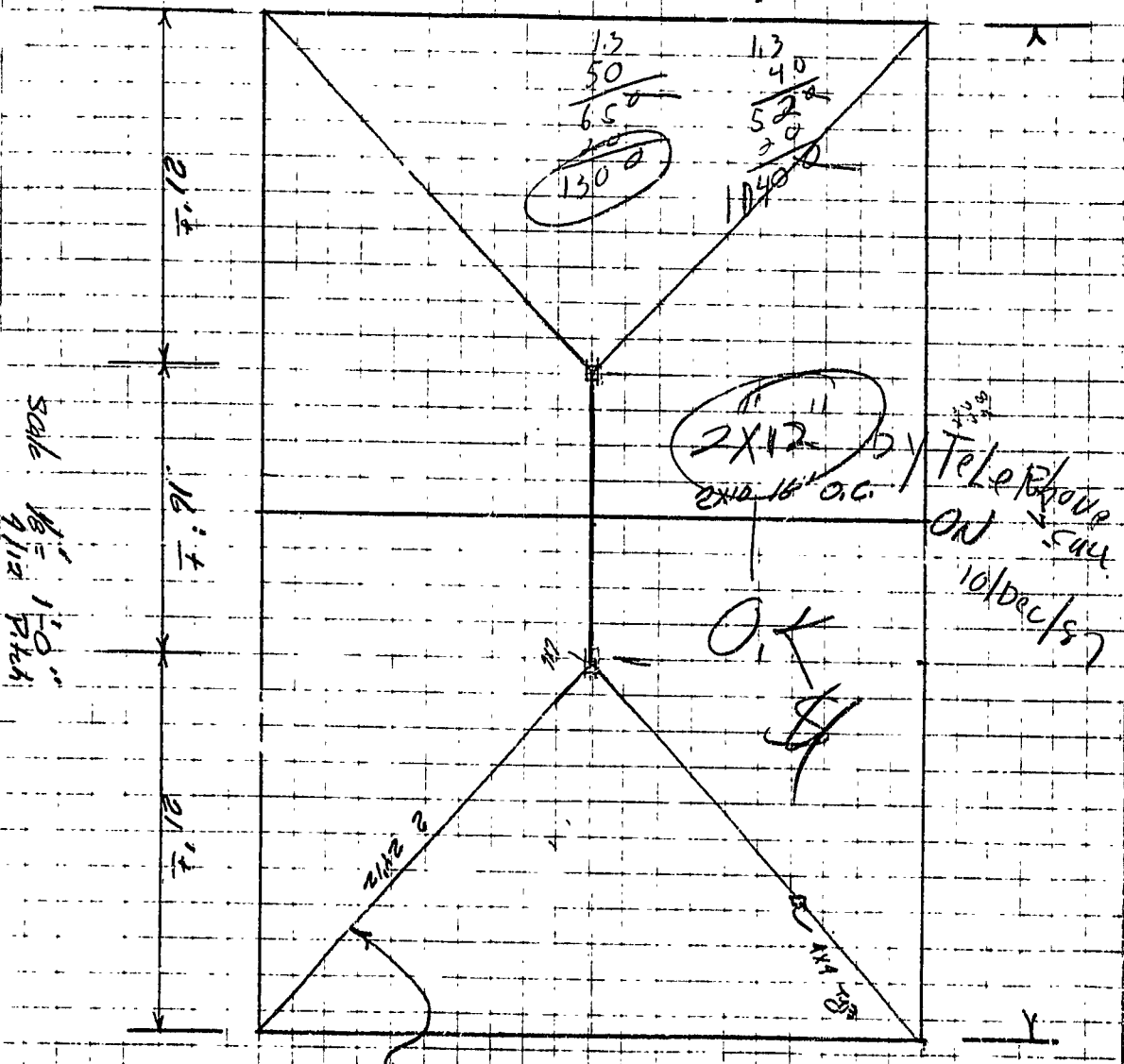
FEES (Breakdown From Front)	Type	Inspection Record	Date
Base Fee \$ _____	_____	_____	____/____/____
Subdivision Fee \$ _____	_____	_____	____/____/____
Site Plan Review Fee \$ _____	_____	_____	____/____/____
Other Fees \$ _____	_____	_____	____/____/____
(Explain) _____	_____	_____	____/____/____
Late Fee \$ _____	_____	_____	____/____/____

COMMENTS
3-24-88 Roof has been put up and all framing has been done. This has been OK for a dose in the 3rd floor.
4-27-88 Closing in the walls. They have a problem with the apt on the second floor front apartment. Spoke with Paul recently.
6-22-88 Front apartments have not been taken care of for a while. The second floor halls have a problem with closets all.
9-1-88 Send a Certificate to the _____

Signature of Applicant James J. Carter Date _____

To: Sam Hoffses
 Job: 15 Bramble
 From: Doug at
 A.C.P.
 774-6464

40'
 2x14 = 978
 20'
 2x12



SCALE
 1/8" = 1'-0"
 1/16" = 1'-0"
 1/32" = 1'-0"

Telephone
 ON
 10/dec/57

hips are built up
 with 2 2x12 + a
 3/4" Plywood Fitch
 Plate. There will be
 a 2x4 to collar the bars on splices

NOTICE OF HOUSING CONDITIONS

CITY OF PORTLAND, MAINE

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

Mr. Marshall Mack
113 Vaughan Street
Portland, Maine 04102

DU 10

CH. 63 BLK. H LOT 5

LOCATION: 15 Bramhall Street

PROJECT: NCP-NDP
DATE: December 16, 1985
EXPIRES: February 16, 1986

Dear Mr. Mack:

You are hereby notified, as owner or agent, that an inspection was made of the premises at 15 Bramhall 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 February 16, 1986. 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.

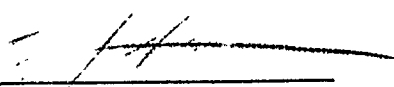
Please Note: You should consult the inspection Services Division to insure that any corrective action you undertake complies with the building, plumbing, electrical, zoning and any other Article of the City Code.


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
Chief of Inspection Services


Code Enforcement Officer Merlin Leary (5)

Attachments

for

HOUSING INSPECTION REPORT

OWNER: Mr. Marshall Mack

LOCATION: 15 Bramhall St. 63-H-5 NDP

CODE ENFORCEMENT OFFICER: Merlin Leary (5)

HOUSING CONDITIONS DATED: December 16, 1985 EXPIRES: February 16, 1986

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. THIRD FLOOR LEFT FRONT & RIGHT FRONT HALL - floor - broken tiles.	108-2
2. THIRD FLOOR RIGHT FRONT HALL - ceiling - leaking conditions.	108-2
3. RIGHT REAR - porch - broken railing.	108-3
4. RIGHT REAR SHED - ceiling - cracked and buckled plaster.	108-2
* 5. CELLAR - stairway - missing emergency cut-off switch.	113-2
* 6. THIRD FLOOR BATHROOM - wall - missing switch cover.	113-2
<u>FIRST FLOOR - APARTMENT #1</u>	
* 7. BEDROOM - wall - missing light fixture.	113-1
<u>FIRST FLOOR - APARTMENT #2</u>	
8. BATHROOM - tub - cross connection.	111-1
* 9. PANTRY - ceiling - leaking.	108-2
<u>SECOND FLOOR - APARTMENT #3</u>	
*10. BATHROOM - toilet - leaking wasteline connection.	111-1
11. BATHROOM - tub - cross connection.	111-1
*12. LIVING ROOM - wall - illegal wiring.	113-2
<u>SECOND FLOOR - APARTMENT #4</u>	
13. BATHROOM - tub - cross connection.	111-1
<u>SECOND FLOOR - APARTMENT #6</u>	
14. BATHROOM - tub - cross connection.	111-1
<u>THIRD FLOOR - APARTMENT #7</u>	
*15. BATHROOM - toilet, lavatory and bathtub or shower - missing.	111-1
<u>THIRD FLOOR - APARTMENT #8</u>	
*16. BATHROOM - toilet, lavatory and bathtub or shower - missing.	111-1
<u>THIRD FLOOR - APARTMENT #9</u>	
17. BEDROOM - window - missing counterbalance cords.	108-3
*18. BATHROOM - toilet, lavatory and bathtub or shower - missing.	111-1
<u>THIRD FLOOR - APARTMENT #10</u>	
*19. BATHROOM - toilet, lavatory and bathtub or shower - missing.	111-1

*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.