

70 Carroll Street

BRAMHALL



July 3, 1967

Dr. George O. Cummings Jr.
70 Carroll Street
Portland, Maine

Dr. Cummings:

Photos yes no Date 6/29/67
 Proj. No. C.I. Bramhall Ass'ts Zone Zone Viol
 Stories BEA ASDD SAR NSA NA NS ST P Com.Units Rmg Units Del.Units

LOCATION	<u>70 Carroll St.</u>	COMP
OWNER AGENT	<u>Dr. George Cummings Jr.</u>	PEND
OWNER AGENT	<u>George</u>	OK
OWNER AGENT		
OWNER AGENT		
OWNER AGENT		
OWNER AGENT		
OWNER AGENT		
OWNER AGENT		
OWNER AGENT		

Occupants	Information		Occupancy				Facilities					Violations		
	LOC.	RENT	FURN	WK. I	RMS	PER.	ALL'D	LOG	HEAT	BATH	FLSH		K. SK	H.W.
1. <u>Dr. George Cummings 37 2 children</u>														
2.														
3.														
4.														
5.														
6.														
7.														
8.														

STRUCTURE SCHEDULE

STRUCTURE HATING

<p>YARD</p> <p><input type="checkbox"/> GARBAGE & RUBBISH <u>OK</u></p> <p><input type="checkbox"/> CONTAINERS COMPLY <u>OK</u></p> <p><input type="checkbox"/> DRAINAGE <u>OK</u></p> <p><input type="checkbox"/> ZONE VIOL <u>OK</u></p> <p>STRUCTURE EXTERIOR</p> <p><input type="checkbox"/> STEPS, STAIRS, PORCHES <u>OK</u></p> <p><input type="checkbox"/> FOUNDATION <u>OK</u></p> <p><input type="checkbox"/> WALLS <u>OK</u></p> <p><input type="checkbox"/> WINDOWS, DOORS <u>OK</u></p> <p><input type="checkbox"/> ROOF, DRAINS <u>OK</u></p> <p><input type="checkbox"/> OUT BUILDINGS <u>OK</u></p> <p>INFESTATION</p> <p><input type="checkbox"/> RATS <input type="checkbox"/> RI <input type="checkbox"/> O <input type="checkbox"/> I</p> <p><input type="checkbox"/> OTHER (SPECIFY) <u>OK</u></p> <p>EGRESS</p> <p><input type="checkbox"/> DUAL <input type="checkbox"/> YES <input type="checkbox"/> NO <u>OK</u></p> <p><input type="checkbox"/> OBST'N <u>OK</u></p> <p>Remarks _____</p> <p>Portland Health Dept.</p> <p>GS-8</p> <p>Inspector <u>Robert C. ...</u></p>	<p>STRUCTURE INTERIOR</p> <p><input type="checkbox"/> HALL OBST'N <u>OK</u></p> <p><input type="checkbox"/> HALL LIGHTING <u>OK</u></p> <p><input type="checkbox"/> HALL, FLOOR WALLS CEILING <u>OK</u></p> <p><input type="checkbox"/> STAIRWAYS <u>OK</u></p> <p><input type="checkbox"/> WINDOWS, AIRSHAFT <u>OK</u></p> <p><input type="checkbox"/> ELECT. WIRING <u>OK</u></p> <p>HEATING CENTRAL YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p><input type="checkbox"/> STACKS FLUES, VENTS <u>OK</u></p> <p><input type="checkbox"/> CHIMNEY <u>OK</u></p> <p><input type="checkbox"/> EQUIPMENT, REPAIR <u>OK</u></p> <p>PLUMBING</p> <p><input type="checkbox"/> SUPPLY LINE <u>OK</u></p> <p><input type="checkbox"/> WASTE LINE <u>OK</u></p> <p>BASEMENT</p> <p><input type="checkbox"/> GEN'L SANIT'N <u>OK</u></p> <p><input type="checkbox"/> DAMPNES <input type="checkbox"/> R <input type="checkbox"/> D <u>OK</u></p> <p><input type="checkbox"/> STAIRS <u>OK</u></p> <p><input type="checkbox"/> LIGHTING <u>OK</u></p> <p>BASE DWL. UNIT</p> <p><input type="checkbox"/> M N 7' - 3' <u>OK</u></p> <p><input type="checkbox"/> DAMPNES <input type="checkbox"/> R <input type="checkbox"/> D <u>OK</u></p> <p><input type="checkbox"/> WINDOW 1/12 X 8" <u>OK</u></p> <p><input type="checkbox"/> DUAL EGRESS <input type="checkbox"/> YES <input type="checkbox"/> NO <u>OK</u></p> <p>PROHIBITED COMB'N USE</p> <p><input type="checkbox"/> ASSOC. USE HAZARD <u>OK</u></p> <p><input type="checkbox"/> HAZARDOUS VENTS <u>OK</u></p>
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Photos Yes No
 Proj. No.

Date 5/29/67
Bramhall Project

CROWDING	LOCATION	70 Carroll	COMP.
SANITY	D U LJC	Single House	PEND.
INFEST	OCCUPY	N. George Cummings Jr.	
BASE S.O.	OCCUPY	same	
DET'N	ADDRESS	same	VTS

DWELLING UNIT SCHEDULE

Occupants	Information	Occupancy	Facilities							Violations							
			LCC	KENT	FURN.	WK-1.	RMS	PER.	ALL'D		LGNS	HEAT	BATH	F.FLH	K.SN	H.W.	CK'G
1. <u>George Cummings Jr. & children</u>								14	4	21							
2.																	
3.																	
4.																	

OVERCROWDING 65 - 7'	SO SLEEP'G 12 x 1/2	LIGHTING WIRING	CEILING	WINDOWS	DOOR	FLOOR	BEDS							OTHER	TOTAL	KITCHEN SINK & WATER	
							KITCHEN	BATH	TOILET	DINING	BRD	BRD	BRD			SEC	SEC
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Remarks
 2nd floor ER OK
 " " R.R. OK
 3rd floor M.F. OK
 " " R.R. OK
 4th floor boiler OK

- KITCHEN SINK & WATER
- SINK
- SINK & WASTE
- PLUMB
- HEATING
- STACKS, FLUES, VENTS
- NOT BE VENTED, REP'G
- BATHING FACILITIES
- SHARED MAX. 40U
- 200 U. 1 PER 15
- MIN. 7' STOD HT.
- VENT'LN
- PROPER ACCESS
- PLG'G
- SANIT'N
- TOILET FACILITIES
- SHARED MAX. 2 DU
- 200 U FLSH & LAV 1 PER 10
- VENT'LN
- PROPER ACCESS
- PLG'G
- SANIT'N
- INFESTATION
- RATS R D C
- OTHER (SPECIFY)
- EGRESS
- DUAL YES NO
- OBST'N

Portland Health Dept.
 CS-7

Inspector Robert Probst