

- 56 Chadwick Street

BRAMHALL

SHAW-WALKER
17 6500-1R

January 10, 1968

Mr. William W. Poole
50 Chadwick Street
Portland, Maine

Dear Mr. Poole:

Your property has been surveyed by the Portland Housing Division and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Many people in the area are making improvements in their property even though they meet the requirements of ordinance relating to housing conditions. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

Many services are available through the site office for further improvements to your property. Should you want advice on landscaping, structural changes, plans, and financing, please call 773-1773.

If we can be of further help, please feel free to call on us. Thank you for your interest in the program and your cooperation in making Bramhall Hill a more beautiful residential area.

Sincerely,



Gordon E. Martin
Housing Supervisor

GLS:ac

Photos yea no

Date 12/19/62

Proj. No. C.I. BRANNALL

Ass'rs

Zone Zone Viol

Stories

ASPC

SAR

NA

ST P

Com. Units

Rmg Units

Dvl. Units 1

LOCATION	<u>59 CHADWICK</u>	COMP
OWNER AGENT	<u>WM POOLE</u>	PEND
OWNER AGENT	<u>Same</u>	
OWNER AGENT		
OWNER AGENT		VTS

Occupants	Information				Occupancy		Facilities						Violations
	LOC	RENT	FURN	WK. 1	RMS	PER. ALL'D	LGRS	HEAT	BATH	FLSH	K SK	H.W.	
<u>1</u> <u>WM POOLE</u>					<u>6</u>	<u>CP</u>	<u>50</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>		
2													
3													
4													
5													
6													
7													
8													

STRUCTURE RATING

STRUCTURE SCHEDULE

YARD

GARBAGE & RUBBISH _____

CONTAINERS COMPLY _____

DRAINAGE _____

ZONE VIOL. _____

STRUCTURE EXTERIOR

STEPS, STAIRS, PORCHES _____

FOUNDATION _____

WALLS _____

WINDOWS, DOORS _____

ROOF, DRAINS _____

OUT BUILDINGS _____

INFESTATION

RATS R1 R2 R3 _____

OTHER (SPECIFY) _____

EGRESS

DUAL YES NO _____

OBST'N _____

Remarks _____

Portland Health Dept.
CS-8

Inspector FDS

STRUCTURE INTERIOR

HALL OBST'N _____

HALL, LIGHTING _____

HALL, FLOOR WALLS CEILING _____

STAIRWAYS _____

WINDOWS, AIRHAFT _____

ELECT. WIRING _____

HEATING CENTRAL YES NO

STACKS FLUES, VENTS _____

CHIMNEY _____

EQUIPMENT, REPAIR _____

PLUMBING

SUPPLY LINE _____

WASTE LINE _____

BASEMENT

GEN'L SANIT'N _____

DAMPNESS R1 0 _____

STAIRS _____

LIGHTING _____

BASE DVL. UNIT

MIN 7' x 3' _____

DAMPNESS R1 0 _____

WINDOW 1/12 P 8" _____

DUAL BRACKS YES NO _____

PROHIBITED COMM'N USE

ASSOC. USE HAZARD _____

HAZARDOUS VENTS _____

OK

Photos yes no
 Proj. No.

BRANHALL

Date 12/19/67

CROSSING	LOCATION <u>SE CHADWICK</u>	COMP.
SANIT.	D.U. LOC <u>SIN</u>	PER. N.
INFEST	OCCUPY <u>WM. POOLE</u>	
BASE D.U.	OWNER <u>SAME</u>	VTD
DEST'N	ADDRESS	

DWELLING UNIT SCHEDULE

Occupants	Information	Occupancy	Facilities					Violations									
			LOC.	RENT	FURN.	WK-1.	RMS		PER.	ALL'D	LGRS	HEAT	BATH	FLSH	K.SR	H.W.	CK'G
1. <u>WM POOLE</u>	<u>SIN</u>	<u>6</u>															
2.																	
3.																	
4.																	

	KITCHEN	BATH	TOILET	DINING	LOW BED	BED	BED	BED	BED	OTHER	TOTAL
OVERCROWDING 85' x 7'											
SO SLEEP'G											
VEN. FLATION 1/12 x 1/2											
LIGHTING											
WIRING											
DET'N WALLS											
CEILING											
WINDOWS											
DOORS											
FLOORS											

Remarks

KITCHEN SINK & WATER

SINK

SUPPLY & WASTE

PLB'G. GEN'L OK

HEATING

STACKS, FLUES, VENTS

HT'GS VENTED, REP'G

BATHING FACILITIES

SHARED MAX. 4DU

RMS U. 1 PER 15 OK

MIN. 7' STDB HT.

VENT'LN

PROPER ACCESS

PLB'G

SANIT'N

TOILET FACILITIES

SHARED MAX. 2 DU

RMS U. FLN & LAV 1 PER 10 OK

VENT'LN

PROPER ACCESS

PLB'G

SANIT'N

INFESTATION

RATS A' Q1 Q2

OTHER (SPECIFY)

EGRESS

DUAL YES NO

OBST'N

Portland Health Dept.
CS-7

Inspector PTB