

- SEASHORE AVENUE  
85-0-36-37-38

PEAKS ISLAND



U.S. GEOLOGICAL SURVEY  
WATER RESOURCES DIVISION  
WASHINGTON, D.C. 20506



DMJ

FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, April 7, 1952

PERMIT ISSUED 00905 APR 8 1952 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 Seashore Ave., Peaks Island of Building dwelling No. Stories 2 Not Building Existing "
Name and address of owner George Giffin, Seashore Ave., Peaks Island
Installer's name and address Earle Hutchens, Luther St., Peaks Island Telephone 6-2932

General Description of Work

To install 886 Coleman floor furnace, gravity warm air heating system and oil burning equipment to heat two rooms of dwelling

IF HEATER, OR POWER BOILER

Location of appliance or source of heat hung from floor Type of floor beneath appliance
If wood, how protected? Kind of fuel oil
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace register with shield
From top of smoke pipe 14" From front of appliance over 4' From sides or back of appliance over 3'
Size of chimney flue 8x8 Other connections to same flue coal-fired furnace
If gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner Coleman Labeled by underwriters' laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? top
Type of floor beneath burner
Location of oil storage basement Number and capacity of tanks 1-100 gal.
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?
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

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: [Signature]

Permit Issued with Letter

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

Earle Hutchens



AP. Seashore Ave., Peaks

April 8, 1952

Mr. George Giffin,  
Seashore Ave.,  
Peaks Island, Maine

Mr. Earle Hutchens,  
Luther Street,  
Peaks Island, Maine

Gentlemen:

The building permit to cover installation of a gravity warm air heating system for George Giffin at Seashore Ave., Peaks Island is issued to Earle Hutchens subject to the following:

Section 602a2 of the Building Code provides that no more than one heating furnace or boiler shall be connected to a single flue except as specifically permitted by this Department.

Since application indicates that more than one heating furnace or boiler would be connected to this flue, approval is given at the owner's risk. If this situation should become dangerous from the standpoint of fire hazard or any other hazard, it would be the responsibility of the owner to make the situation permanently safe even though it may mean the construction of an additional chimney flue.

Very truly yours,

BHT/H

Inspector of Buildings

P.S. Application says this flue is only 8x8. That is pretty small for two such appliances. It is recommended that you compare the proposed situation with the venting recommendations of the manufacturer of the new floor furnace, and also with recommendations of the manufacturer of the existing furnace. Otherwise you may get into serious difficulties--even establish a condition dangerous to the occupants of the dwelling.





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 TO BUILD

(3D CLASS BUILDING)

Portland, Me., April 26, 1920 19

To THE INSPECTOR OF BUILDINGS

The undersigned hereby applies for a permit to build, according to the following Specifications:—

Plans must be submitted in duplicate, one set to be filed with the Department and the duplicate set thereof (bearing the approval of the Inspector of Buildings) shall be kept on the work and exhibited on demand.

PERMIT MUST BE RECEIVED BEFORE BEGINNING WORK.

Location Peaks Island Wd. 1  
 Name of owner G. Waldon Smith Address Peaks Island  
 Name of mechanic H S Hoar " 179 Spring Street  
 Name of architect is? \_\_\_\_\_ " \_\_\_\_\_  
 Proposed occupancy of building (purpose)? private garage  
 If a dwelling or tenement house, for how many families? \_\_\_\_\_  
 Are there to be stores on lower story? \_\_\_\_\_ No. \_\_\_\_\_  
 Size of lot, No. of feet front? \_\_\_\_\_; No. of feet rear? \_\_\_\_\_; No. of feet deep? \_\_\_\_\_  
 " of building, No. of feet front? 12ft; No. of feet rear? 12ft; No. of feet deep? 20ft  
 No. of stories, front? 1; rear? \_\_\_\_\_  
 No. of feet in height from the mean grade of street to the highest part of the roof? 14ft  
 Distance from lot lines, front? \_\_\_\_\_ feet; side? \_\_\_\_\_ feet; rear? \_\_\_\_\_ feet  
 Firestop to be used? 6 ft from all lot lines and 12 ft from any building  
 Will the building be erected on solid or filled land \_\_\_\_\_  
 Will the foundation be laid on earth, rock or piles? \_\_\_\_\_  
 If on piles, No. of rows? \_\_\_\_\_ distance on centres? \_\_\_\_\_ length of? \_\_\_\_\_  
 Diameter, top of? \_\_\_\_\_ diameter, bottom of? \_\_\_\_\_  
 Size of posts? \_\_\_\_\_  
 " girts? \_\_\_\_\_, 3d \_\_\_\_\_, 4th \_\_\_\_\_  
 " floor timbers? 1st floor wooden, 2d \_\_\_\_\_, 3d \_\_\_\_\_, 4th \_\_\_\_\_  
 O. C. " " " " " " " " " " " "  
 Span " " " " " " " " " " " "  
 Braces, how put in? \_\_\_\_\_  
 Building, how framed? \_\_\_\_\_ laid with mortar? \_\_\_\_\_  
 Material of foundation? \_\_\_\_\_ thickness of? \_\_\_\_\_  
 Underpinning material of? posts height of? \_\_\_\_\_ thickness of? \_\_\_\_\_  
 Will the roof be flat, pitch, mansard, or hip? pitch Material of roofing? asphalt  
 Will the building be heated by steam, furnaces, stoves or grates? \_\_\_\_\_ Will the flues be lined? \_\_\_\_\_  
 Will the building conform to the requirements of the law? yes  
 No. of brick walls? \_\_\_\_\_ and where placed? \_\_\_\_\_  
 Means of egress? \_\_\_\_\_

If the building is to be occupied as a Tenement House, give the following particulars:

What is the height of cellar or basement? \_\_\_\_\_ second? \_\_\_\_\_ third? \_\_\_\_\_  
 What will be the clear height of first story? \_\_\_\_\_ second? \_\_\_\_\_ third? \_\_\_\_\_  
 State what means of egress is to be provided? \_\_\_\_\_  
 \_\_\_\_\_ Scuttle and stepladder to roof? \_\_\_\_\_

Estimated Cost,  
\$ 500.

Signature of owner or authorized representative,

G. Waldon Smith  
 Address, Peaks Island, Me

Plans submitted? \_\_\_\_\_

Received by? \_\_\_\_\_

191  
20

No. 5692

APPLICATION FOR  
PERMIT TO BUILD 3d CLASS BUILDING

Seaside  
No. Peaks Island

45-94-95-96  
47-90  
45-A 38-90  
39  
Ward 1  
85-0-36-37-38

Inspector.

CONDITIONS

PERMIT GRANTED

April 26, 1920 191

Permit filled out by \_\_\_\_\_

Permit number \_\_\_\_\_

Plan number \_\_\_\_\_

FINAL REPORT

191

Has the work been completed in accordance with this application and plans filed and approved?

Law been violated? \_\_\_\_\_

Nature of violation? \_\_\_\_\_

Violation removed when? \_\_\_\_\_ 191

Estimated cost of building, etc., \$ \_\_\_\_\_

Building Inspector.

APPROVAL OF P

Superintendent

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 269-3826

## PROPERTY ADDRESS

Town Or Plantation: Portland / Paris Isle  
Street: \_\_\_\_\_  
Subdivision Lot #: 85-0-36-37-38

## PROPERTY OWNERS NAME

Last: SCORLONKO First: DAVID

Applicant Name: P. E. DUCE

Mailing Address of Owner/Applicant (if different): 221-278 / no. 116

**Caution: Permit Required**

PORTLAND PERMIT # 3,470 TOWN COPY

Date Permitted: 6-16-89 \$ 19 FEE  Double Fee Charged

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. # \_\_\_\_\_

## Owner/Applicant Statement

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

Signature of Owner/Applicant: \_\_\_\_\_ Date: 6-15-89

## 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: JUN 21 1989

## PERMIT INFORMATION

This Application is for	1. <input type="checkbox"/> NEW PLUMBING	Type Of Structure To Be Served:	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	Plumbing To Be Installed By:	1. <input checked="" type="checkbox"/> MASTER PLUMBER
	2. <input 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		4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
			4. <input type="checkbox"/> OTHER - SPECIFY: _____		5. <input type="checkbox"/> PROPERTY OWNER
					LICENSE # <u>02267</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 cases where the connection is 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 / Silcock	
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cusp'dor		Garbage Disposal
		Blivet		Laundry Tub
		Other: _____		Water Heater
Number of Hook-Ups & Relocations		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee				Fixture Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Fixtures (Subtotal) Column 1	3
Fixtures (Subtotal) Column 2	0
Total Fixtures	3
Fixture Fee	\$ 9
Hook-Up & Relocation Fee	\$ -
<b>Total</b>	<b>\$ 9</b>

PERMIT # 002152 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_  
For Official Use Only

Use fill out any part which applies to job. Proper plans must accompany form.  
 Applicant: David Scoblonzo  
 Address: RD 7, Maor Drive, Bethlehem, Pa 18015  
 Attention: CONSTRUCTION 35-0-36.37.38 Seashore Ave., Peaks Island  
 Contractor: Philip C. Giacotta SUBCONTRACTORS 926-3238  
 Address: RR Box 112, New Gloucester, 04260  
 Construction Cost: \$6,000 Type of Use: single family

Date: <u>May 31, 1989</u>	Inspector: _____
Inside Fire Limits: _____	Trans: _____
Bldg Code: _____	Loc: _____
Time Limit: _____	Block: _____
Estimated Cost: <u>56,000</u>	Permit Expiration: _____
Value Structure: _____	Ownership: <u>Public</u>
Fee: <u>250.00</u>	Ownership: <u>Private</u>

Building Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 Conversion: Explain removal bathroom, create driveway and 2 windows or submitted \_\_\_\_\_  
 COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE 1 net  
 Residential Permits Only: \_\_\_\_\_  
 # Of Dwelling Units: \_\_\_\_\_

Ceiling:  
 1. Ceiling Joist Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Ceiling Strapping Size: \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_  
 4. Insulation Type: \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_  
 Roof:  
 1. Truss or Rafter Size: \_\_\_\_\_  
 2. Sheathing Type: \_\_\_\_\_  
 3. Roof Covering Type: \_\_\_\_\_  
 4. Other: \_\_\_\_\_

**PERMIT ISSUED**  
 MAY 31 1989  
 CITY OF PORTLAND

Foundation:  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side(s): \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other: \_\_\_\_\_

Chimneys: \_\_\_\_\_ 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 \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

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

Swimming Pools:  
 1. Type: \_\_\_\_\_ Square Feet \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.  
 Zoning: \_\_\_\_\_ District: EP-2 Street Frontage Req: \_\_\_\_\_ Provided \_\_\_\_\_  
 Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

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

Review Required: \_\_\_\_\_  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Condition of Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_  
 Shore and Floodplain Mgmt: \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other: (Explain) \_\_\_\_\_  
 Date Approved: 5-31-89

Interior Walls:  
 1. Siding Size: \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Size: \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type: \_\_\_\_\_  
 4. Fire Wall if required: \_\_\_\_\_  
 6. Other Materials: \_\_\_\_\_

Inspection Dates: \_\_\_\_\_  
 Permit Received By: Nancy Grossman  
 Signature of Applicant: Philip C. Giacotta Date: 5/21/89  
 Signature of CEO: \_\_\_\_\_ Date: \_\_\_\_\_

White Tax Assessor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_  
 08/15/82  
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PLOT PLAN

N  
▲

FEES (Breakdown From Front)

Base Fee \$ 25.00	_____
Subdivision Fee \$	_____
Site Plan Review Fee \$	_____
Other Fees \$ 25.00	_____
(explain)	_____
Late Fee \$	_____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS 12-13-89-OK 29

Signature of Applicant

*P. W. G. Smith*  
OWNER

Date 5/31/85