

# PLUMBING APPLICATION

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

**PROPERTY ADDRESS**

Town: Portland  
Plantation: Portland  
Street: 87-5-20 St. P...  
Subdivision Lot #: 87-5-20 St. P...

**PROPERTY OWNERS NAME**

Last: KAZILIONIS First: JOHN

Applicant Name: John Kazilionis

Mailing Address of Owner/Applicant (if different): 721 New...

0027 PORTLAND \*\*\* 05170 \*\*\*

Date Permits Issued: \_\_\_\_\_

Local Plumbing Inspector's Signature: \_\_\_\_\_

L.P.I. #: \_\_\_\_\_

FEE: \$ \_\_\_\_\_  Double Charge

**Owner/Applicant Statement**

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

Signature of Owner/Applicant: John Kazilionis Date: July 14 1983

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in accordance with the rules and regulations.

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: JUL 14 1983

**PERMIT INFORMATION**

<p><b>This Application is for</b></p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type Of Structure To Be Served:</b></p> <p>1 <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2 <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4 <input checked="" type="checkbox"/> OTHER - SPECIFY: <u>medical wing</u></p>	<p><b>Plumbing To Be Installed By:</b></p> <p>1 <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2 <input type="checkbox"/> OIL BURNERMAN</p> <p>3 <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC</p> <p>4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5 <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # _____</p>
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Number	Hook-Ups And Piping Relocation	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.		Hosebibb / Silcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK-UP: to an existing subsurface wastewater disposal system		Drinking Fountain	1	Wash Basin
			Indirect Waste		Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
	PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cuspldor		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other: <u>Dental Chair</u>		Water Heater
\$	Hook-Up Fee		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				2	Fixtures (Subtotal) Column 2
					Total Fixtures
\$					Fixture Fee
\$					Hook-Up Fee
\$				6.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

Date Issued  
 Portland Plumbing Inspector  
 By: ERNOLD R. GOODWIN

Date **6/3/76**  
 By ERNOLD R. GOODWIN  
 CHIEF PLUMBING INSPECTOR  
 App. Final Insp.

Date **AUG 13 1976**  
 By ERNOLD R. GOODWIN  
 CHIEF PLUMBING INSPECTOR

- TYPE of Bldg. or use
- Commercial
  - Residential
  - Single
  - Multi Family
  - New Construction
  - Remodeling

### PERMIT TO INSTALL PLUMBING

Address **36 Sterling St. Peaks Isl.** PERMIT NUMBER **4606**

Installation For **Casco Bay Health Center**

Owner of Bldg. **Same**

Owner's Address **Same**

Plumber: **Reuben Katz** Date **6/2/76**

NEW	REPL		Date	NO	FEES
<b>3</b>		SINKS			
<b>1</b>		LAVATORIES			<b>6.00</b>
<b>2</b>		TOILETS			<b>8.00</b>
		BATH TUBS	<b>JUL 10 1976</b>		<b>4.00</b>
		SHOWERS			
		DRAINS			
		HOT WATER PANKS			
		TANKLESS WATER HEATERS			
		GARBAGE DISPOSALS			
		SEPTIC TANKS			
		HOUSE SEWERS			
		ROOF LEADERS			
		AUTOMATIC WASHERS			
		DISHWASHERS			
		OTHER			
		<b>Base Fee</b>			<b>3.00</b>
		<b>TOTAL</b>			<b>21.00</b>

Building and Inspection Services Dept: Plumbing Inspection

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

0500

JUN 15 1976

NG LOCATION

PORTLAND, MAINE, JUN 15, 1976

CITY OF PORTLAND

To the DIRECTOR 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 60 Sterling St., Peaks Island. Fire District #1 [ ] #2 [ ]
1. Owner's name and address Casco Bay Health Center Telephone
2. Lessee's name and address Telephone
3. Contractor's name and address Northern Interior Const. Inc. Telephone 766-3336
4. Architect Winding Way Pl Telephone
Proposed use of building health ctr. Specifications No. of sheets
Last use No. families
Material No. stories Heat Style of roof No. families
Other buildings on same lot Roofing
Estimated contractual cost \$ 500. Fee \$ 5.00

FIELD INSPECTOR—Mr.

This application is for: Smith @ 775-5451 Ext. 234

GENERAL DESCRIPTION

To drop suspended ceiling

Stamp of Special Conditions

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

PERMIT IS TO BE ISSUED TO 1 [ ] 2 [ ] 3 [x] 4 [ ] Other: [ ]

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? 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 Kind of heat fuel
No. of chimneys Material of chimneys Roof covering Sills
Framing lumber—Kind Dressed or full size? Size Max. on centers
Size Girder Columns under girders Corner posts Bridging in every floor and flat roof span over 8 feet.
Studs (outside walls and carrying partitions) 2x4-16" O. C. 1st floor 2nd 3rd roof
Joists and rafters: 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: O.K. C.B. 4/15/76

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? yes

Signature of Applicant

Type Name of above John Porter

Phone # 766-3336

Other [ ] and Address [ ]

FIELD INSPECTOR'S COPY

NOTES

8/13/76 - 1200' elev  
E.S.

A

Approved

Date of permit

OWNER

12/15/76  
Melrose  
1100 Stirling St  
Berkeley, Calif  
Mike  
Adair



APPLICATION FOR PERMIT

PERMIT ISSUED

MAR 24 1976

B.O.C.A. USE GROUP
B.O.C.A. TYPE OF CONSTRUCTION 0176

ZONING LOCATION PORTLAND, MAINE, March 24, 1976

CITY OF PORTLAND

To the DIRECTOR 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 87-E-20 Sterling St. Peaks Island Fire District #1 [ ] #2 [ ]
1. Owner's name and address Casco Bay Health Ctr. same Telephone
2. Lessee's name and address Telephone
3. Contractor's name and address self (Ernold Goodwin) Telephone 775-5451
4. Architect Specifications Plans No. of sheets
Proposed use of building health center No. families
Last use No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ 500 Fee \$ 5.00

FIELD INSPECTOR—Mr. Smith GENERAL DESCRIPTION
This application is for: @ 775-5451 Alterations as per plans
Dwelling Ext. 234
Garage
Masonry Bldg.
Metal Bldg. Stamp of Special Conditions
Alterations
Demolitions
Change of Use
Other

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

PERMIT IS TO BE ISSUED TO 1 [ ] 2 [ ] 3 [X] 4 [ ]
Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? 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
Side, 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: DATE MISCELLANEOUS
BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street?
ZONING:
BUILDING CODE 012-28, 3/24/76 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
Fire Dept.:
Health Dept.:
Others:

Signature of Applicant Ernold R. Goodwin Phone #
Type Name of above Ernold R. Goodwin RS 1 [ ] 2 [ ] 3 [ ] 4 [ ]
Other
and Address

FIELD INSPECTOR'S COPY

NOTES

8/13/76 - work done

E.A.

X

Permit No.

Location

Owner

Date of permit

Approved

W. L. King  
S. J. G. I.

Multiple sets of horizontal lines for notes or data entry, including a large section at the bottom.

(COPY)

CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION 60 Sterling St, Peaks Island

Issued to **Casco Bay Health Center**

Date of Issue 8-16-76

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. 76/176, 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

APPROVED OCCUPANCY

**Entire**

**Health Center**

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies the 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 lessee for one dollar.





**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date May 26 19 76  
 Receipt and Permit number A 1868

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: Loc 87-E-20 Sterling, Peaks Island

OWNER'S NAME: Casco Bay Health Center ADDRESS: same

OUTLETS: (number of)

Lights	_____	
Receptacles	<u>40</u>	FEEES
Switches	<u>10</u>	
Plugmold	<u>6</u> (number of feet)	
TOTAL	_____	<u>5.00</u>

FIXTURES: (number of)

Incandescent	<u>25</u>	
Fluorescent	<u>21</u> (Do not include strip fluorescent)	
TOTAL	_____	<u>6.60</u>
Strip Fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	_____	
Temporary	_____	

METERS: (number of) \_\_\_\_\_

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)	<u>12,200.13</u>	<u>1.30</u>

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	<u>1</u>	Others (denote)	_____
TOTAL	_____		<u>1.50</u>

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	<u>1</u>	<u>1.00</u>
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) ..... \_\_\_\_\_

FOR PERFORMING WORK WITHOUT A PERMIT (304-9) ..... \_\_\_\_\_

TOTAL AMOUNT DUE: -15.40-

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call XX

CONTRACTOR'S NAME: P. A. Gomez  
 ADDRESS: Chebeague Island  
 TEL.: 845-4110

MASTER LICENSE NO.: 3867

LIMITED LICENSE NO.: \_\_\_\_\_

SIGNATURE OF CONTRACTOR:

INSPECTOR'S COPY

ELECTRICAL INSTALLATIONS -

Permit Number 1868

Location Lot 17-E-23 Sterling

Owner Case Bay Health Center

Date of Permit 5-26-76

Final Inspection 8-4-76

By Inspector Herbert

Permit Application Register Page No 33

*Ed's Allen*

INSPECTION: Service \_\_\_\_\_ by \_\_\_\_\_  
Service called in \_\_\_\_\_  
Closing-in 6-8-76 by HERBERT

PROGRESS INSPECTIONS: 8-4-76  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CODE  
COMPLIANCE  
COMPLETED  
DATE 8-4-76

DATE:

6-8-76

REMARKS:

WIRES NOT STUDIED  
LITES IN ATTIC NOT IN  
FLOOR OUTLETS NOT IN

Basically completed



# APPLICATION FOR PERMIT

## PERMIT ISSUED

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....

0176

MAY 24 1976

ZONING LOCATION: PORTLAND, MAINE, March 24, 1976

CITY OF PORTLAND

To the DIRECTOR 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 ..... 87-7-20 Sterling St., Peaks Island ..... Fire District #1  #2

1. Owner's name and address ..... Telephone .....

2. Lessee's name and address **Casco Bay Health Ctr.** ..... Telephone .....

3. Contractor's name and address **self (Ernold Goodman)** ..... Telephone **775-5451**

4. Architect ..... Specifications ..... Plans ..... No. of sheets .....

Proposed use of building ..... health center ..... No. families .....

Last use ..... No. families .....

Material ..... No. stories ..... Heat ..... Type of roof ..... Roofing .....

Other buildings on same lot .....

Estimated contractual cost \$ **500** ..... Fee \$ **5.00**

FIELD INSPECTOR—Mr. **Smith** ..... GENERAL DESCRIPTION

This application is for: **@ 775-5451** Alterations as per plans

- Dwelling ..... Ext. 234
- Garage .....
- Masonry Bldg. ....
- Metal Bldg. ....
- Alterations .....
- Demolitions .....
- Change of Use .....
- Other .....

Stamp of Special Conditions

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

PERMIT IS TO BE ISSUED TO 1  2  3  4

Other: .....

### DETAILS OF NEW WORK

Is any plumbing involved in this work? ..... Is any electrical work involved in this work? .....

Is connection to be made to public sewer? ..... 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 ..... Kind of heat ..... fuel .....

No. of chimneys ..... Material of chimneys ..... of lining ..... Kind of heat ..... fuel .....

Framing Lumber—Kind ..... Dressed or full size? ..... Corner posts ..... Sill .....

Size Girder ..... Columns under girders ..... Size ..... Max. on centers .....

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and first 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 ..... 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: J. ATE

### MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER ..... Will work require disturbing of any tree on a public street? .....

ZONING: .....

BUILDING CODE: .....

Fire Dept.: ..... 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**

Health Dept.: .....

Others: .....

Signature of Applicant *Ernold R. Goodman* ..... Phone # .....

Type Name of above **Ernold R. Goodman RS** ..... 1  2  3  4

Other ..... and Address .....

OFFICE FILE COPY

87-E 26 Sterling St

2/22/77

File

G.L.



# APPLICATION FOR PERMIT

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....

ZONING LOCATION \_\_\_\_\_ PORTLAND, MAINE, Jan. 9, 1976.

To the DIRECTOR 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 P7-E-20 Sterling St. Fire District #1  #2

1. Owner's name and address Raymond S. Herrick, Island Ave., PI. Telephone 766-2019

2. Lessee's name and address Mr. Sydney Thaxter, I. Canal Plaza Telephone 775-2261

3. Contractor's name and address to be let Telephone .....

4. Architect ..... Specifications ..... Plans ..... No. of sheets .....

Proposed use of building community health clinic No. families .....

Last use ..... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....

Other buildings on same lot .....

Estimated contractual cost \$ 30,000 Fee \$ 15.00 condition use appeal fee paid.

FIELD INSPECTOR—Mr. .... GENERAL DESCRIPTION

This application is for: @ 775-5451

Dwelling ..... Ext. 234 Change of use form \$40.00 not paid

Garage ..... single family dwelling

Masonry Bldg. .... to community health

Metal Bldg. .... clinic w/alterations

Alterations ..... Stamp of Special Conditions

Demolitions .....

Change of Use ..... appeal sustained 1-28-76

Other .....

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

PERMIT IS TO BE ISSUED TO 1  2  3  4

Other: .....

### 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? ..... 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:

DATE

### MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER ..... Will work require disturbing of any tree on a public street? ..

ZONING: .....

BUILDING CODE: ..... 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...

Fire Dept.: .....

Health Dept.: .....

Others: .....

Signature of Applicant S. Sydney W. Thaxter Phone # .....

Type Name of above Mr. Sydney Thaxter 1  2  3  4

Other and Address .....

FIELD INSPECTOR'S COPY

alk

87-E-20 Sterling Street  
Peaks Island

January 29, 1976

Raymond S. Herrick  
Island Avenue  
Peaks Island, ME 04108

cc: Sidney Thaxter  
1 Canal Plaza  
Portland, ME 04111

Following is the decision of the Board of Appeals regarding your petition to change the use of the single family dwelling at the above named location to a community health clinic. Please note that your appeal was granted. Also, before your permit can be issued, you must pay \$40.00 for the permit fee itself. Please make all checks payable to City of Portland.

Very truly yours,

A. Allan Soule  
Assistant Director

AAS/mj

87-E-20 Sterling Street  
Peaks Island

January 12, 1976

Raymond S. Herrick  
Island Avenue  
Peaks Island, ME 04108

cc: Sidney Thaxter  
1 Canal Plaza  
Portland, ME 04111

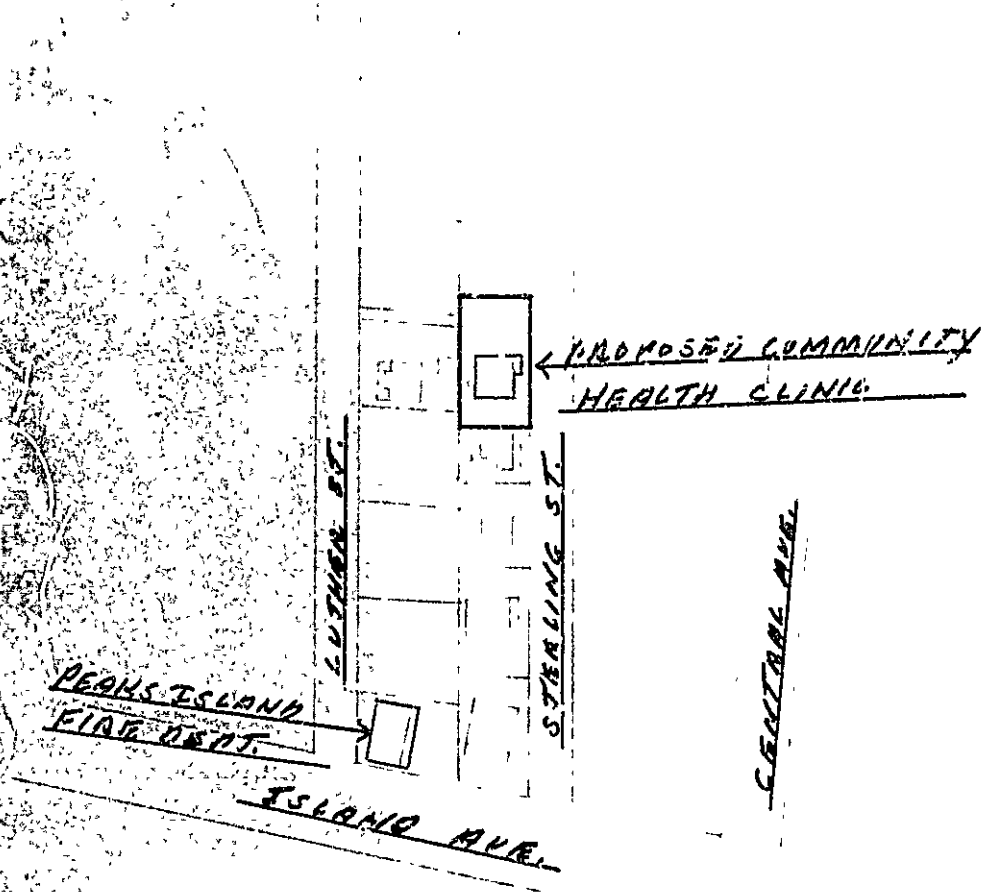
Building permit and Certificate of Occupancy to change the use of the single family dwelling at the above named location to a community health clinic are not issuable under the Zoning Ordinance because such a use is not allowable in the R-3 Residential Zone in which this property is located, unless authorized by the Board of Appeals under the provisions of Section 602.4.A.4.h.

We understand that you would like to exercise your appeal rights in this matter. Accordingly, you or your authorized representative should come to this office, Room 113, City Hall, to file the appeal on forms which are available here. A fee of \$15.00 for a Conditional Use appeal shall be paid at this office at the time the appeal is filed. If fee has been paid and appeal filed prior to this letter, then consider this letter as a matter of formality. Section 602.24.D.

Very truly yours,

Malcolm G. Ward  
Plan Examiner

MGW/mj



← HARDY'S COMMUNITY  
HEALTH CLINIC.

PEARLS ISLAND  
FIGHT DEPT.

ISLAND AVE.

CUTLER ST.

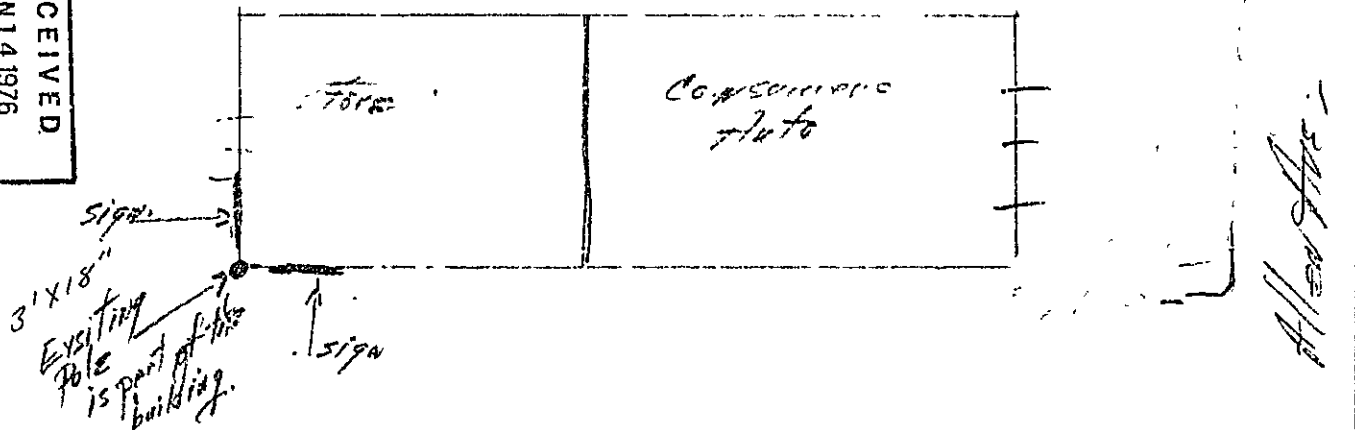
STEALING ST.

CENTRAL AVE.

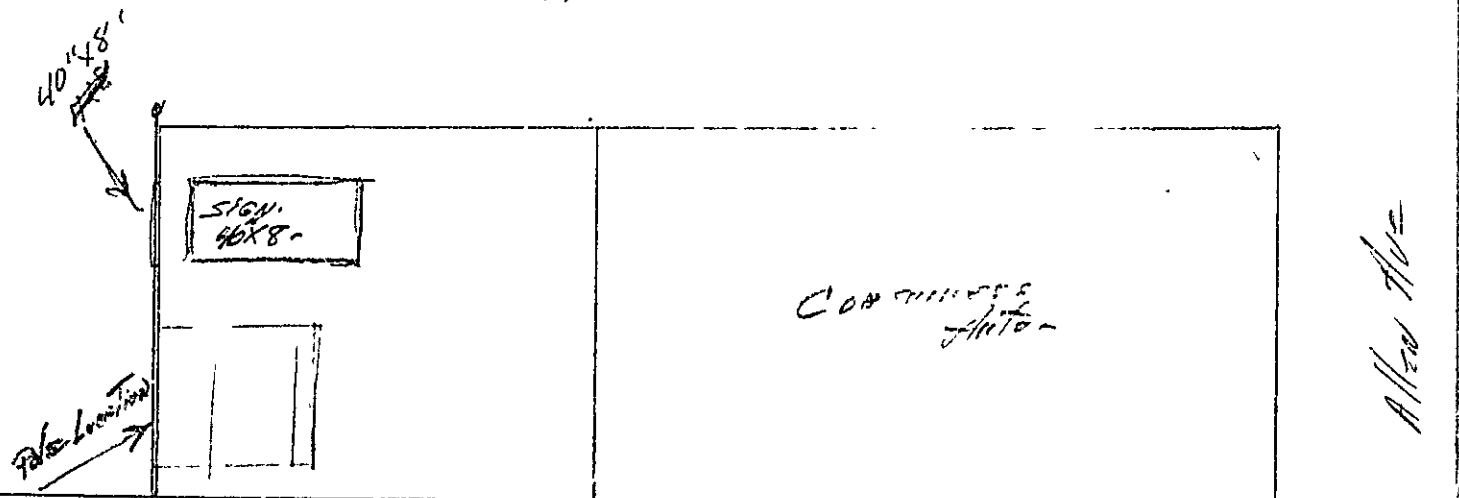


Plot Plan

RECEIVED  
JAN 14 1976  
DEPT. OF BLDG. INSP.  
CITY OF PORTLAND



Height of sign on Pole of Building.



OLDE'N NW GIFT SHOPPE  
~~OLDE'N~~

January 21, 1975

CITY OF PORTLAND ME  
IN THE BOARD OF APPEALS.

ATTN: Jacqueline Cohen, Secy.

As an owner of property within 500 feet  
of property at 87-E-20 Sterling St.,  
known as the Raymond S. Herrick property  
I do not appose a Community Health Clinic  
at that Locale.

RUTH K. MCGONIGLE  
STERLING ST.  
PEAKS ISLAND, ME.

*Ruth K. McGonigle*

CITY OF PORTLAND, MAINE  
IN THE BOARD OF APPEALS

All persons interested either for or against this Conditional Use appeal will be heard at a public hearing in Room 209, City Hall, Portland, Maine on Wednesday, January 28, 1976 at 3:00 p.m. This notice of required public hearing has been sent to the owners of property within 500 feet of the property in question as required by Ordinance.

Raymond S. Herrick, owner of property at 87-E-20 Sterling Street, Peaks Island, under the provisions of Section 602.24.D of the Zoning Ordinance of the City of Portland, hereby respectfully petitions the Board of Appeals to permit the change of use of the single family dwelling, at the above named location to a community health clinic. This permit is not issuable under the Zoning Ordinance because such a use is not allowable in the R-3 Residential Zone in which this property is located, unless authorized by the board of Appeals under the provisions of Section 602.4.A.4.h.

LEGAL BASIS OF APPEAL: Such permit may be granted only if the Board of Appeals finds that the conditions imposed by Section 602.24.D(3) of the Zoning Ordinance have been met.

Jacqueline Cohen  
Secretary

CHAIRMAN  
BOARD OF APPEALS

I KNOW OF, AND AM A CONTRIBUTOR TOWARD, THE PEAKS ISLAND CLINIC EFFORT. I KNOW OF THE LOCATION (AND MUCH OF THE EFFORT EXPENDED TO DATE TOWARD PREPARATION OF) OF THE HERRICK PROPERTY ON STERLING STREET. I HAVE NO OBJECTION TO GRANTING THE VARIANCE AS APPEALED.

Philip L. Munn Jr.  
129 MOSELEY TR.  
CRANSTON, R.I.

Chairman -

I have no objection whatever, to the Herrick Property being used as the Peaks Island Health Center.

Sincerely,  
Beatrice O. Munn  
Church Lane, P.I.

1/24/76

CURTIS THAXTER COREY LIPEZ & STEVENS

ONE CANAL PLAZA

P.O. BOX 7320

PORTLAND, MAINE 04112

ATTORNEYS AT LAW

KENNETH M. CURTIS  
SIDNEY W. THAXTER  
WALTER E. COREY III  
KERNIT V. LIPEZ  
ROBERT E. STEVENS

F. WOODMAN JONES  
SIDNEY ST. F. THAXTER II

TELEPHONE  
207 775 2381

RECEIVED

JAN 20 1976

DEPT. OF BLDG. INSP.  
CITY OF PORTLAND

Dear Allan:

Enclosed please find  
a redraft of the ground floor  
plan of the proposed Casco  
Bay Health Center. If you  
have any questions give me  
a call.

Sincerely yours,

Sidney W. Thaxter

RECEIVED  
JAN 3 1976  
DEPT OF BLDG. INSP.  
CITY OF PORTLAND

CITY OF PORTLAND, MAINE  
IN THE BOARD OF APPEALS

APPLICATION FOR A CONDITIONAL USE APPEAL

Raymond S. Herrick, owner of property at 87-E-20 Sterling St.  
Peaks Island  
under the provisions of Section 602.24 D of the Zoning Ordinance of the City of

Portland, hereby respectfully petitions the Board of Appeals to permit the change of use of the single family dwelling at the above named location to a community health clinic. This permit is not issuable under the Zoning Ordinance because such a use is not allowable in the R-3 Residential Zone in which this property is located, unless authorized by the Board of Appeals under the provisions of Section 602.4.A.4.h.

LEGAL BASIS OF APPEAL: Such permit may be granted only if the Board of Appeals finds that the conditions imposed by Section 602.24 D (3) of the Zoning Ordinance have been met. (See reverse side hereof for said conditions.)

Site Plan approval <sup>IS NOT</sup> ~~is not~~ required by the Site Plan Ordinance. If site plan approval is required, a preliminary or final site plan is attached hereto as Exhibit A.

Raymond S. & Eileen Herrick  
By Samuel W. Traxler  
APPELLANT  
Attorney

602.24 D (3) Conditions for Conditional Uses.

a. Authorized Uses. A conditional use permit may be issued for any use specifically listed as a conditional use in the regulations applicable to the zone in which it is to be located.

b. Standards. A conditional use permit for the conditional uses listed in Sections 602.2 through 602.13 shall be granted only if evidence is presented which establishes:

- (1) That the proposed building or use will be in harmony with the general purpose, goals, objectives and standards of the Land Development Plan, the Zoning Ordinance and the Site Plan Ordinance.
- (2) That the proposed building or use will not have a substantial adverse effect including monetary, upon adjacent property, the character of the neighborhood, traffic conditions, utility facilities and other matters affecting the public health, safety and general welfare.
- (3) That the proposed building or use will be constructed, arranged and operated so as not to interfere with the development and use of neighboring property in accordance with the applicable zone regulations.
- (4) That the proposed building or use will be served adequately by essential public facilities and services such as highways, streets, police and fire protection, drainage structures, refuse disposal, water and sewers, and schools; or that the persons or agencies responsible for the establishment of the proposed use will provide adequately for such services.
- (5) That the proposed building or use will not result in the destruction, loss or damage of any natural, scenic or historic feature of major importance; and
- (6) That the proposed building or use complies with the standards imposed on it by the regulations applicable to the zone in which the use is to be located and any additional standards relating to the specified conditional uses.

c. General Considerations. In determining whether the evidence establishes that the foregoing conditions have been met, the Board shall consider:

- (1) Whether and to what extent the proposed building or use at the particular location requested is necessary or desirable to provide a service or a facility which is in the interest of the public convenience or which will contribute to the general welfare of the neighborhood or community;
- (2) Whether and to what extent such public goals can be met by the location of the proposed building or use at some site or in some area which may be more appropriate than the proposed site; and
- (3) Whether and to what extent all steps possible have been taken to minimize any adverse effects of the proposed building or use on the immediate vicinity through building design, site design, landscaping and screening.

CITY OF PORTLAND, MAINE  
IN THE BOARD OF APPEALS

All persons interested either for or against this Conditional Use appeal will be heard at a public hearing in Room 209, City Hall, Portland, Maine on Wednesday, January 28, 1976 at 3:00 p.m. This notice of required public hearing has been sent to the owners of property within 500 feet of the property in question as required by Ordinance.

Raymond S. Herrick, owner of property at 87-E-20 Sterling Street, Peaks Island, under the provisions of Section 602.24.D of the Zoning Ordinance of the City of Portland, hereby respectfully petitions the Board of Appeals to permit the change of use of the single family dwelling at the above named location to a community health clinic. This permit is not issuable under the Zoning Ordinance because such a use is not allowable in the R-3 Residential Zone in which this property is located, unless authorized by the Board of Appeals under the provisions of Section 602.4.A.4.h.

LEGAL BASIS OF APPEAL: Such permit may be granted only if the Board of Appeals finds that the conditions imposed by Section 602.24.D(3) of the Zoning Ordinance have been met.

Jacqueline Cohen  
Secretary

returned

Carol Burgess 1/21/76

John Parvin 1/21/76

Henry & Jeanne Fontaine 1/21/76

Herbert & Dorothy Jones 1/21/76

Thomas Boland 1/21/76

87-E-20 Sterling St, Peaks ISL

Sterling St

87-E-15 to 23, 52, 53 ✓

87-AA-3 ✓

"A" Street

87-HH-25 to 34 ✓

87-DD-1 ✓

87-EE-7, 13, 15 & 17 ✓

87-FF-1 & 5 ✓

Lodgewood St

87-EE-1 to 6 ✓

LuTha St

87-E-24 to 36 ✓

87-Z-7 to 20 ✓

Elizabeth St

87-Z-22 to 34 ✓

87-Y-8 to 19 ✓

87-Y-28, 25 ✓

Island Ave

87-Y-20 ✓

87-Z-21 ✓

87-00-17 to 32 ✓

87-HH-35 ✓

Central Ave

87-EE-9 to 12 & 18 ✓

87-FF-2 & 4 ✓

87-GG-16 to 26 ✓

87-HH-37 & 44 ✓

Herman Ave

87-GG-7 to 15 ✓

87-HH-~~67~~, 39, 40, 41, 27, 29, 30 & 31 ✓



87-E-20 Stirling St - Peaks Island

Stirling St

- 87-E-53 McDermott, David P & Judith D, Wren St P.I. <sup>04108</sup>
- 87-E-15 Clinton, Esther J, Box 16, Wakefield, NH 03088
- 87-E-16 Skilling, Marjorie L, Stirling St, Peaks Is.
- 87-E-17 Hannigan, John E & Catherine E, 20 Dow St 04102
- 87-E-18 & 19 Tolan, John E - 59 State St
- 87-E-20 Heinek, Raymond S & Eileen M, Evergreen Landing P.I.
- 87-E-21 & 22 Hasson, Lawrence G & Leatrice J - Stirling St, P.I.
- 87-E-52 McGonigle, Ruth K, Stirling St, P.I.
- 87-E-23 LeRose, Susan & William F, Island Ave. 04108
- 87-AA-3 Curran, John J & Eunice R, - Peaks Island
- 87-DD-1 Wigglesworth, Winnifred E - Stirling St P.I.
- 87-EE-7 Falconeri, Bonnie E & Joseph R - Central Ave, P.I.
- 87-EE-8 Burgess, Carol L - Stirling St P.I.
- 87-EE-17 Cattivelli, Louise - Stirling St P.I.
- 87-EE-15 Randall, Flora D - Stirling St P.I.
- 87-EE-14 Curran, Nellie I - Stirling St P.I.
- 87-EE-13 Davis, Marjorie H - "A" St P.I. 04108
- 87-FF-1 Davis - request
- 87-FF-5 <sup>2010 Island Ave</sup> unknown

Ledgewood St

- 87-EE-1 Sullivan, Elinor E - P.O. Box 109, Bramble, Me.
- 87-EE-3 DiPaolo, Joseph & Dorothy F - Central Ave P.I.
- 87-EE-4 Williams, Herbert H & Paula M - Central Ave P.I.
- 87-EE-5 & 6 Watson, Marie G, Ledgewood Rd P.I. 04108

Luther St

- 87-E-35 & 36 McDermott - Repeat  
87-E-34 Clinton - Repeat  
87-E-33 Ader, Elizabeth E - 20 Blossom Lane, Newburg, N.Y.  
87-E-32 Clark, Francis M - Luther St., P.I.  
87-E-31 Hannigan - Repeat.  
87-E-30 Skilling, U. H. & Z. A - Puxico, Missouri.  
87-E-29 Vincent, George R - 43 Magnolia St. 04103  
87-E-28 Meehan, Loretta M, Luther St, P.I.  
87-E-27 Pentason, Steven A - Luther St, P.I.  
87-E-26 Spafford - Repeat  
87-E-25 Watson, Ralph K & Dorothy L - 3 Luther St P.I.  
87-E-24 City -  
87-Z-7 & 8 Wetherington, B. C. & A. Louise - Luther St P.I.  
87-Z-9 & 10 Hoar, L. L. - Luther St P.I. 04108  
87-Z-11 Jones, Herbert A & Dorothy A - Elizabeth St, P.I.  
87-Z-12 & 13 Pearson, J. C. & W. E. - 121 Palmer St, Aellington, Mass  
87-Z-14 Gillmont, Avis B & Joseph H Jr - 41 Belmont St 04101  
87-Z-15 Parker, Allston W - 41 Atlantic Ave., So. Port,  
87-Z-16 ARbeely, Annie B - Luther St., P.I.  
87-Z-17 Same  
87-Z-18 Powers, Elizabeth E - Luther St P.I. 04108  
87-Z-19 & 20 Hoar, Arnold V. - Island Ave, P.I.

Elizabeth St

- 87-Z-31 & 32 Wetherington - Repeat  
87-Z-31 & 32 Mulken, John F & Josephine - 175 W. Scoville St,  
So. Boston, MASS.

Elizabeth St

- 87-2-30 Jones — Repeat
- 87-2-29 Pearson — Repeat
- 87-2-28 Stoddard, Dorothy L - Elizabeth St P.I. 04108
- 87-2-27 Mastromaria, Louis A - 52 E. Union Turnpike <sup>Wharton NJ 07885</sup>
- 87-2-26 Flash, Godfrey & Wendy - 157 Walnut St P.I.
- 87-2-25 Stephenson, Fred W, Patricia Krause - <sup>120 Clarendon Terrace</sup> Newington, Conn 06111
- 87-2-24 Fletcher, Lena M - Hannum Ave, P.I.
- 87-2-23 Erico, Richard P - Island Ave, P.I.
- 87-2-22 Pease, Helen Hartley, Island Ave, P.I.
- 87-4-8 Sherwood, Ira L - 41 Fort Hill St, Fort Fairfield, Me.
- 87-4-6 Erico, Joseph do James Erico - Elizabeth St, P.I.
- 87-4-7 MacIsaac - Kimberly A & Steven J - Elizabeth St - P.I. 04108
- 87-4-8 & 9 Sherwood, Ira — Repeat <sup>Graftonbury, Conn 06033</sup>
- 87-4-10 Munn, Philip L Jr, Beatrice - 129 Moseley Terr, <sup>Dunstable Spring Rd</sup> Grafton, Me.
- 87-4-11 Boland, Thomas J do Hugh Ferguson - <sup>P.I. 4108</sup>
- 87-4-12 & 13 Randall, Margaret E - Island Ave
- 87-4-14 Stirling, William A, George M & Russell G - P.I. N.P.
- 87-4-15 M.M.C. - 22 Bramhall St. 04102
- 87-4-16 Parson, John G - Elizabeth St, Peaks I.
- 87-4-17 Bishop, Mildred E & Althea Pedersen - Wilby St, P.I.
- 87-4-18 & 19 <sup>120</sup> Files; Harry W <sup>Island</sup> Peaks IS.
- 87-4-28 Randall — Repeat
- 87-4-25 ? (unknown) according to Assessor

Island Ave

- 87-4-20 Files - Repeat  
87-7-21 Erico - Repeat  
87-HH-35 Plants, Lionel R - Island Ave, P.I 04108  
87-00-17 Childs, Althea P; Martin L J - Mannors Ct - P.I - 04108  
87-00-18 Eoslin, Lee A & Monica C - Island Ave, P.I 04108  
87-00-19 Omos, Diane J; Gerard N - 854 Broadway - So Port, 04106  
87-00-20 Elliott, Carlisle I - 15 Edgewater Rd, Falmouth, ME 04105  
87-00-21 ~~Shaw~~ Hoan - Repeat  
87-00-22 Same A  
87-00-23 Sargent, Eloy S, IVUS - Island Ave. P.I.  
87-00-24 Hellen, Howard W & Betty D - 1235 Congress St. 04102  
87-00-25 N.E. Tel. Tel - do General Man - 1380 Riverside St 04103  
87-00-26 Hargney, Maria L; Francis J - Island Ave, P.I  
87-00-27 Cantalupo, Virginia M - Island Ave, P.I.  
87-00-28 McTigue, Robert T, Central Ave, P.I 04108  
87-00-29 Little John, Herman C Jr; Evelyn J - 411 Wedgewood Dr  
87-00-30 Whittom, Meldean A Jr; Estelle A - Island Ave P.I  
87-00-32 <sup>Peas moose</sup> unknown according to assessors  
87-00-31 Plants - Repeat

Central Ave

- 87-EE-18 Souza, Barbara J; Richard A - Rt 112 W. Burton, Me 04093  
87-EE-9 McCallum, Mary A; Collette L Knight - Central Ave, P.I.  
87-EE-10 Hoan & Spafford, Inc - Welch St P.I 04108  
87-EE-11 Vet. Admin. Center - Loan Guaranty Div.  
87-EE-12 Roman Catholic Bishop of P - 510 Ocean Ave  
Togus, Me 04330

Scrutton  
Highway

328 B.C.

Central Ave

- 87-FF-2 Conley, Joan H - Central Ave P.I. 04.108
- 87-FF-4 Rom. Cath. Bish — Repeat —
- 87-GG-26 Foss, Bruce E, Beverly J - Central Ave. P.I.
- 87-GG-24 & 25 Williams, Herbert H; Paula M - Central Ave P.I.
- 87-GG-22 & 23 Wright, Hilda R, Central Ave. P.I.
- 87-GG-21 Carson, George H - 112 Read St.
- 87-GG-20 Scandlan, Gregory M; Susan J - Willow St P.I.
- 87-GG-19 Penderson, Jens C - Central Ave, P.I.
- 87-GG-18 Polk, Emory W - Central Ave, P.I.
- 87-GG-17 McTigue, Robert Thomas & Dorothy - Central Ave. P.I.
- 87-GG-16 Roman Cath Bish Repeat —
- 87-HH-44 & 37 - Roman Catholic Bishop of P. — Repeat —

Herman Ave

- 87-GG-7 & 8 Lunow, Michal - 73 1st Ave Apt 9 - NY, NY 10003
- 87-GG-9, 10 Broekhuizen, Marius, Island Ave. P.I. 04.108
- 87-GG-11 Carson, George H - Repeat —
- 87-GG-12 Scandlan - Repeat —
- 87-GG-13 & 14 Penderson - Repeat —
- 87-GG-15 McTigue — Repeat —
- 87-HH-39 Broekhuizen - Repeat,
- 87-HH-41 Davis, Marjorie H - "A" St, P.I. 04.108
- 87-HH-40 Hussey, Jennie L - 1350 Forest Ave.
- 87-HH-27 Melton, Hilda - "A" St P.I.
- 87-HH-29 Fontaine, Henry O & Irene - "A" St P.I.
- 87-HH-30 & 31 Hall, Carl F & Gretchen - Spruce Ave. P.I. 04.108

["A" Street] Carter, Margaret M - "A" St - P.I.  
87-HH-25 ~~Essex, Mary & Philip~~  
87-HH-26 Davis, Marjorie - Repeat  
87-HH-28 Zacharow, Wasily - "A" St, P.I.  
87-HH-32 - Hall - Repeat  
87-HH-33 Repeat ↑  
87-HH-34 Sweeney, Raymond E. - 233 Ellsworth St  
Calif, PA. 15417

CITY OF PORTLAND, MAINE  
IN THE BOARD OF APPEALS

CONDITIONAL USE APPEAL

Findings of Fact

The applicant is Raymond S. Herrick and he is interested in the property located at 87-E-20 Sterling St., Peaks Island as owner. The owner of the property is same and his address is Island Avenue, Peaks Island. The property is located in a R-3 Zone. The present use of the property is single family dwelling.

The applicant respectfully petitions the Board of Appeals for a conditional use permit to permit the change of use of the single family dwelling at the above named location to a community health clinic.

Further Findings of Fact

Great need for health clinic at Peaks Island, centrally located

Appearances

The names and addresses of those appearing in support of the application are: Sidney Thaxter - atty.

Beatrice Munn, Church La, Philip Munn, Jr. 129 Moseley Tr., Glastonbury, ct., Ruth McGonigle, Sterling St.

and the names and addresses of those appearing in opposition to the application are:

Exhibits

The documentary evidence presented to the Board, including, but not by way of limitation, plans, specification, photographs, etc. consisted of the following:

Sanborn map, overlay, photo

REASONS FOR DECISIONS

The proposed building or use (will/will not) be in harmony with the general purpose, goals, objectives and standards of the Land Development Plan, the Zoning Ordinance and the Site Plan Ordinance, as evidenced by: general conformance with land development plan

The proposed building or use (will/will not) have a substantial adverse effect, including monetary, upon adjacent property, the character of the neighborhood, the traffic conditions, utility facilities and other matters affecting the public health, safety and general welfare, because of the following: will improve public health. most people will walk to it. some parking is provided

The proposed building or use (will/will not) be constructed, arranged and operated so as to interfere with the development and use of neighboring property in accordance with the applicable zoning regulations as demonstrated by: \_\_\_\_\_

The proposed building or use (will/will not) be served adequately by essential public facilities and services such as highways, streets, police and fire protection, drainage structures, refuse disposal, water and sewers, and schools, as evidenced by: \_\_\_\_\_

and the persons or agencies responsible for the establishment of the proposed use (will/will not) provide adequately for such services as shown by: \_\_\_\_\_



The proposed building or use (~~will~~/will not) result in the destruction, loss or damage of any natural, scenic or historic feature of major importance, because of the following: \_\_\_\_\_

The proposed building or use (will/~~will not~~) comply with all standards imposed on it by the regulations applicable to the zone in which the use will be located and any additional standards relating to the specific conditional use as demonstrated by the following: pre-existing lot and building

The proposed building or use at the particular location requested (~~is~~/~~is not~~) necessary or desirable to provide a service or a facility which is in the interest of the public convenience or which (will/~~will not~~) contribute to the general welfare of the neighborhood or community, as demonstrated by: \_\_\_\_\_

The public goals described above (~~can~~/~~cannot~~) be met by the location of the proposed building or use at some site or in some area which may be more appropriate than the proposed site, because of the following: \_\_\_\_\_

All steps possible (have/~~have not~~) been taken to minimize any adverse effects of the proposed buildings or use on the immediate vicinity through building design, site design, landscaping and screening as evidenced by: \_\_\_\_\_

**SPECIFIC RELIEF GRANTED**

After a public hearing on January 28, 1976, the Board of Appeals find that all of the conditions required by the Ordinance (do/~~do not~~) exist with respect to this property and that a conditional use should \_\_\_\_\_ be granted in this case.

It is therefore determined that a conditional use \_\_\_\_\_ be granted  
in this case by:

W. Earle Wskilson

Jacqueline Cohen

James O'Malley

Thomas J. Murphy

Gail R. Snow

Memorandum from Department of Building Inspection, Portland, Maine  
Sterling Street, Peaks Island

May 6, 1965

Mr. Raymond Herrick  
Sterling Street  
Peaks Island, Maine

Dear Mr. Herrick:

Permit to construct a one-story frame tool shed 8'x12' is being issued subject to the following restriction:

Ties of at least 2x4 inch stock will be required at every third rafter at the plate level.

Very truly yours,

AAS/h

A. Allan Soule  
Inspector

CS-27



R3 RESIDENCE ZONE

# APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class  
Portland, Maine, May 4, 1965

PERMIT ISSUED  
00462  
MAY 6 1965  
CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following existing structure equipment 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 Sterling St. Peaks Island (87-820) Within Fire Limits? \_\_\_\_\_ Dist. No. \_\_\_\_\_  
Owner's name and address Raymond Herrick, Sterling St. Peaks Island Telephone \_\_\_\_\_  
Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
Contractor's name and address owner Telephone 766-2019  
Architect \_\_\_\_\_ Telephone \_\_\_\_\_  
Proposed use of building Tool Shed Specifications \_\_\_\_\_ Plans yes No. of sheets 2  
Last use \_\_\_\_\_ No. families \_\_\_\_\_  
Material frame No. stories 1 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ No. family \_\_\_\_\_  
Other buildings on same lot dwelling Roofing \_\_\_\_\_  
Estimated cost \$ 100.00 Fee \$ 2.00

## General Description of New Work

To construct 1-story frame "tool shed" 8' x 12' (used lumber)

Permit Issued with Memo

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO owner**

## Details of New Work

Is any plumbing involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_  
Is connection to be made to public sewer? \_\_\_\_\_ If not, what is proposed for sewage? \_\_\_\_\_  
Has septic tank notice been sent? \_\_\_\_\_ Form notice sent? \_\_\_\_\_  
Height average grade to top of plate 6' Height average grade to highest point of rock? 9'  
Size, height 12' depth 8' No. stories 1 solid or filled land? solid weather all ledge \_\_\_\_\_  
Material of foundation concrete Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_  
Kind of roof pitch Rise per foot 4" Roof covering Asphalt Class G Und Label.  
No. of chimneys \_\_\_\_\_ Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_ Kind of heat \_\_\_\_\_ fuel \_\_\_\_\_  
Framing Lumber-Kind fir Dressed or full size? \_\_\_\_\_ Corner posts \_\_\_\_\_ Sills PK  
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 2x6, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 2x6  
On centers: floor 16", 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 16"  
Maximum span: 1st floor 8', 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof 4'  
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? \_\_\_\_\_

## Miscellaneous

Will work require disturbing of any tree on a public street? no  
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

APPROVED:  
G.M. - 5/5/65 - G.M.

Signature of owner by: Raymond Herrick  
Raymond Herrick

INSPECTION COPY

Am

NOTES

7/14/65 - work started  
 framing about  
 complete 8/4  
 10/15/65 - work done  
 off

Permit No. 6574612  
 Location 1011 W. 1st St  
 Owner Raymond & Kenneth  
 Date of permit 7/6/65  
 Notif. closing-in  
 Inspn. closing-in  
 Final Notif.  
 Final Inspn.  
 Cert. of Occupancy Issued  
 Staking Out Notice  
 Form Check Notice

RWJ



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, October 9, 1951

PERMIT ISSUED  
01993  
OCT 10 1951  
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 Sterling Street, Peaks Island of Building dwelling house No. Stories ... ~~Now~~ Building "Existing"  
Name and address of owner of appliance Raymond S. Herrick, Sterling Street, Peaks Island  
Installer's name and address Alfred M. Hunt, Reg. Roc. Road, Falmouth Foreside Telephone 4-8619

### General Description of Work

To install forced hot water heating system and oil burning equipment in place of stove heat

### IF HEATER, OR POWER BOILER

Location of appliance or source of heat .. basement  
Type of floor beneath appliance ... concrete  
If wood, how protected? .. Kind of fuel ... oil  
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace 26" 34"  
From top of smoke pipe .. 26" .. From front of appliance over 4' .. From sides or back of appliance ... over 3'  
Size of chimney flue .. 8x10 .. Other connections to same flue stove  
If gas fired, how vented? .. Rated maximum demand per hour

### IF OIL BURNER

Name and type of burner ... Homart  
Labeled by underwriters' laboratories? yes  
Will operator be always in attendance? .. Does oil supply line feed from top or bottom tank? bottom  
Type of floor beneath burner ... concrete  
Location of oil storage ... basement  
Number and capacity of tanks 1-275 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? none  
Total capacity of any existing storage tanks for furnace burners

### IF COOKING APPLIANCE

Permit Issued with Letter

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

Permit issued with Letter

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]*  
OCT 10 9 51 A M 1951

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 ... *[Signature]*

- NOTES
1. Fill Pipe \_\_\_\_\_
  2. Vent Pipe \_\_\_\_\_
  3. Kind of Heat \_\_\_\_\_
  4. Burner Rigidity & Supports \_\_\_\_\_
  5. Name & Label \_\_\_\_\_
  6. Stack Control \_\_\_\_\_
  7. Height \_\_\_\_\_
  8. Location \_\_\_\_\_
  9. Piping Standards & Connections \_\_\_\_\_
  10. Valves in Supply Lines \_\_\_\_\_
  11. Capacity of Tanks \_\_\_\_\_
  12. Tank Usage \_\_\_\_\_
  13. Tank Distance \_\_\_\_\_
  14. Oil Usage \_\_\_\_\_
  15. Instruction Card \_\_\_\_\_
  16. \_\_\_\_\_
  17. \_\_\_\_\_
  18. \_\_\_\_\_
  19. \_\_\_\_\_
  20. \_\_\_\_\_
  21. \_\_\_\_\_
  22. \_\_\_\_\_
  23. \_\_\_\_\_
  24. \_\_\_\_\_
  25. \_\_\_\_\_

Permit: 5/1/93  
Location: Sealing W. Oyster Island  
Owner: Chambliss & Dennis  
Date of permit: 10/10/51  
Approved: J. J. Smith

JAL



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, Sept 6. 1949

PERMIT ISSUED 01427 SEP 7 1949 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 Sterland St., Peaks Use of Building Dwelling No. Stories 1 New Building Existing " Name and address of owner of appliance Raymond Herrick, Sterland St., Peaks Installer's name and address Earl Hutchens, 17 Luthar St., Peaks Island Telephone 44 ring 11

General Description of Work

To install Oil burning equipment in connection with existing hot air heat.

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 Quaker conversion Labelled by underwriter's laboratories? Yes Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? Bottom Type of floor beneath burner Concrete Location of oil storage Cellar Number and capacity of tanks 1-275 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? None Total capacity of any existing storage tanks for furnace burners

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

[Empty lines for miscellaneous information]

Amount of fee enclosed? 2.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED: [Signature] Sept. 9. 6. 49. [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

Signature of Installer Earl Hutchens

INSPECTION COPY



Permit No 49/1427 11-23

Location Raymond Hemick

Owner Stellingh. Peake, Jr.

Date of permit 9/7/49

Approved INSPECTION NOT COMPLETED

NOTES

1 Fill Pipe -----

2 Vent Pipe -----

3 Kind of Heat -----

4 Burner Rigidity & Supports -----

5 Name & Label -----

6 Tank 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 Oil Gauge -----

15 Instruction Card -----

16 -----

17 -----

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28 -----

29 -----

30 -----



(A) APARTMENT HOUSE ZONE  
APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class  
Portland, Maine, June 23, 1948

PERMIT ISSUED

01108

JUN 30 1948

CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to ~~erect~~ alter ~~or~~ ~~construct~~ ~~or~~ ~~reconstruct~~ the following building ~~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 Sterling Street, Peaks Island 87-E-20 Within Fire Limits? no Dist. No. \_\_\_\_\_  
 Owner's name and address Raymond Herrick, Sterling St., Peaks Island Telephone \_\_\_\_\_  
 Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
 Contractor's name and address F. W. Stephenson, Elizabeth St., Peaks Island Telephone 250  
 Architect \_\_\_\_\_ Specifications \_\_\_\_\_ Plans \_\_\_\_\_ No. of sheets \_\_\_\_\_  
 Proposed use of building Dwelling house No. families 1  
 Last use \_\_\_\_\_ " " \_\_\_\_\_ No. families 1  
 Material wood No. stories 1 1/2 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_  
 Other buildings on same lot \_\_\_\_\_ Fee \$ 2.00  
 Estimated cost \$ 900

General Description of New Work

To change out cedar posts and provide concrete foundation under entire dwelling.

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. PERMIT TO BE ISSUED TO F. W. Stephenson

CERTIFICATE OF OCCUPANCY REQUIREMENT IS WAIVED

Details of New Work

Is any plumbing involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_  
 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 concrete at least 4" below grade Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
 Material of underpinning concrete blocks Height 26" Thickness 8"  
 Kind of roof \_\_\_\_\_ Rise per foot \_\_\_\_\_ Roof covering \_\_\_\_\_ Kind of heat \_\_\_\_\_ fuel \_\_\_\_\_  
 No. of chimneys \_\_\_\_\_ Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_ Dressed or full size? \_\_\_\_\_  
 Framing lumber—Kind \_\_\_\_\_ Size \_\_\_\_\_ Girt or ledger board? \_\_\_\_\_  
 Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ 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 \_\_\_\_\_, height? \_\_\_\_\_  
 If one story building with masonry walls, thickness of walls? \_\_\_\_\_

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? \_\_\_\_\_

Miscellaneous

Will work require disturbing of any tree on a public street? no  
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

APPROVED:

6/20/48 - O.K. - ajs

Raymond Herrick

Signature of owner

by:

F. W. Stephenson

INSPECTION COPY

Permit No. 48/1108  
Location Stodung St., Peahr  
Owner Raymond Herrick  
Date of permit 6/30/48  
Notif. closing-in \_\_\_\_\_  
Inspn. closing-in \_\_\_\_\_  
Final Notif. \_\_\_\_\_  
Final Inspn. 6-17-49, call  
Cert. of Occupancy issued None

NOTES

6-17-49 Work completed  
Building 33' x 53' on 9' 0" x 9' Prof. of In.  
A. Smith  
~~Mr. B. ...  
S. 152 x 575 x 20' width = 22' 20" x 8' 10" on 9' plan  
108~~  
Mrs. Herrick said girders and splices  
of posts are some 20' high from bottom of  
ground level posts & placed across  
posts. Allowed vertical posts on the long  
chairs and bridging put in. etc.

WAGONIC HERKIEK

Proposed  
Wall 12" at Bottom  
" 10" at Top  
Capped with 3  
rows of concrete  
blocks 8" x 8" x 16"

KITCHEN

SIDE WALL  
WOOD  
DINING ROOM  
COLUMN

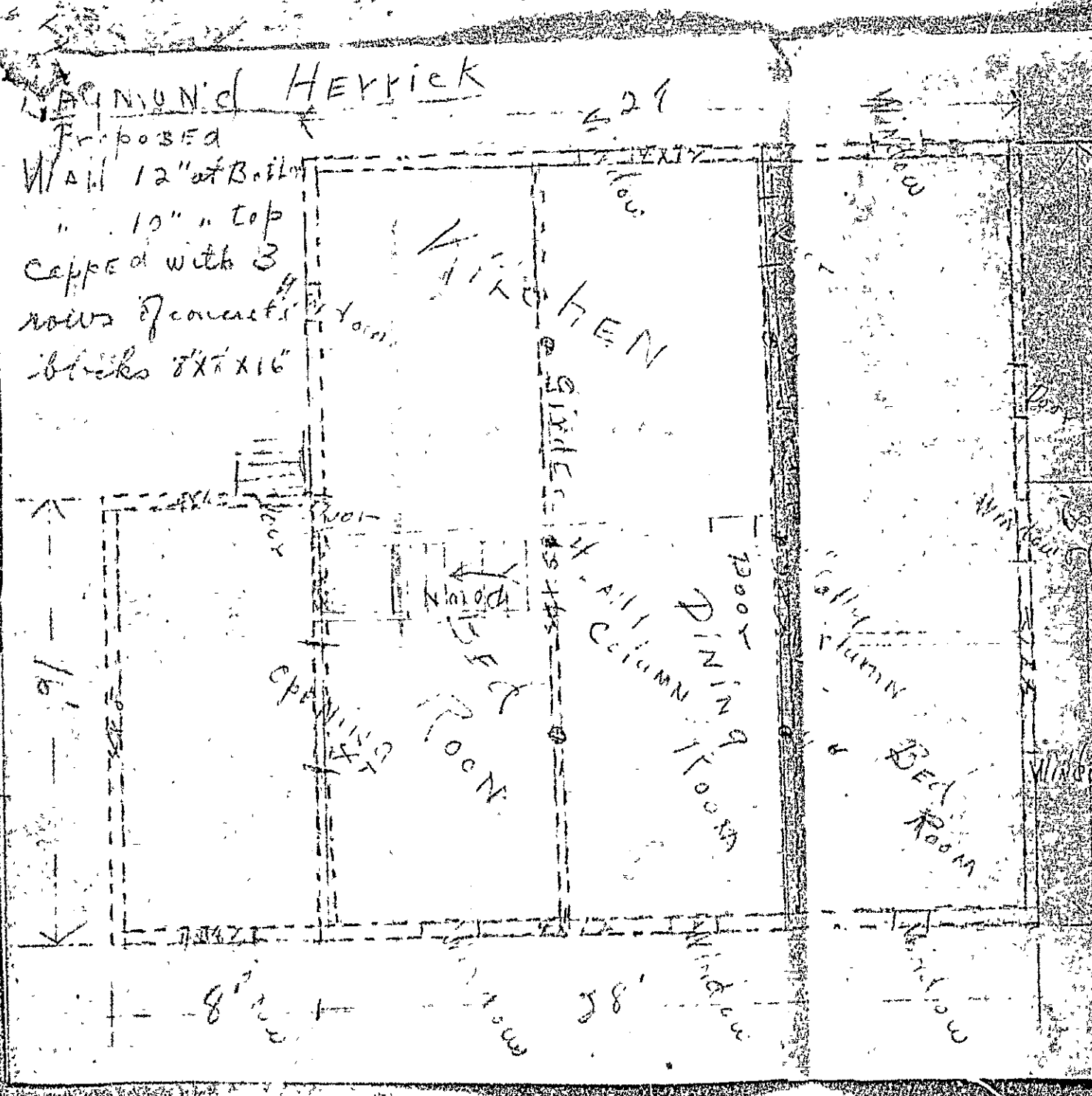
FRONT  
WALL

BED ROOM

16'

8'

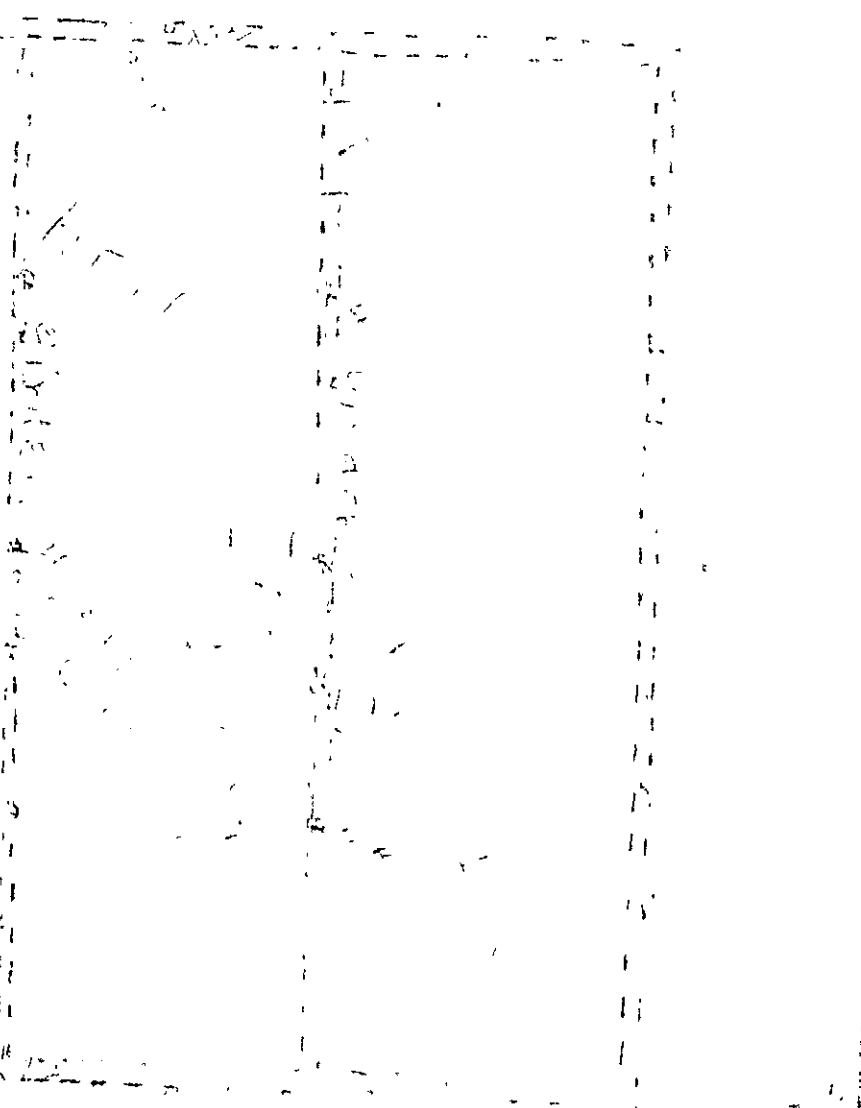
58'



RECEIVED  
JUN 28 1946  
DEPT. OF BLD'G. INSP.  
CITY OF PORTLAND

4x6 - 6'30" diam -  
2250<sup>th</sup>

6.25 x 9 x 51 - 2021  
6.25 x 1 x 10 = 517  
7.1.



28

Application  
City of  
ills  
rd/ce

P. 40/1284-I

9/24/40-II

September 15, 1940

Mr. A. F. Strout,  
16 Loring Street,  
Portland, Maine

Dear Sir:

Relating to the warm air furnace which you have installed for Mr. Donald Macfann in his dwelling house on Sterling Street, Peaks Island, an inspector from this office reports that the register boxes have not been covered with 14 per cent asbestos as required by the Building Code, and that most of them are in contact with the wooden flooring.

Please have these register boxes completely covered as indicated and as required at least by September 25, 1940.

The woodwork around the chimney is not one inch removed from the chimney wall at the first floor level, but it is our understanding that the owner, Mr. Macfann, has agreed to have this condition remedied. He has a copy of this letter and we would appreciate having all of the work done by the date specified, so that we may clear up the entire job in one more inspection.

Very truly yours,

Inspector of Buildings

RMd/H

CC: Donald Macfann  
Sterling St.,  
Peaks Island



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED

Permit No. 1784

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

SEP 5 1940

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. Portland, Maine, September 5, 1940

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 Sterling Street, Peaks Island of Building dwelling house No. Stories 1 Max Building Existing

Name and address of owner of appliance Donald MacMillan, Sterling St. Peaks

Installer's name and address A. F. Strout, 16 Morning Street Telephone 3-8167

General Description of Work

To install hot air furnace in place of stove heat

CERTIFICATE OF OCCUPANCY OR CLOSING-IN IS WAIVED

IF HEATER, POWER BOILER OR COOKING DEVICE

Is appliance or source of heat to be in cellar? yes If not, which story \_\_\_\_\_ Kind of Fuel gas

Material of supports of appliance (concrete floor or what kind) concrete

Minimum distance to wood or combustible material, from top of appliance or casing top of furnace, shield to be provided 12"

from top of smoke pipe over 15" from front of appliance no woodwork from sides or back of appliance no woodwork

Smoney flue 8x12 Other connections to same flue none

IF OIL BURNER

Name and type of burner \_\_\_\_\_ Labeled and approved by Underwriters' Laboratories? ✓

Will operator be always in attendance? \_\_\_\_\_ Type of oil feed (gravity or pressure) \_\_\_\_\_

Location oil storage \_\_\_\_\_ No. and capacity of tanks \_\_\_\_\_

Will all tanks be more than seven feet from any flame? \_\_\_\_\_ How many tanks fireproofed? \_\_\_\_\_

Amount of fee enclosed? \_\_\_\_\_ (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.) A. F. Strout

INSPECTION COPY

Signature of Installer By Arnold Strout

747C

15 on left  
 Permit No. 40/1284  
 Location: Stirling St. Peab  
 Owner: Donald Mac Morris  
 Date of Permit: 9/5/40  
 Post Card sent \_\_\_\_\_  
 Notif. for insp. \_\_\_\_\_  
 Approval Tag issued 10/25/40. R.C.  
 1. Burner Check List (date) \_\_\_\_\_  
 2. Kind of heat Water  
 3. Label \_\_\_\_\_  
 4. Anti-siphon \_\_\_\_\_  
 5. Oil storage \_\_\_\_\_  
 6. Tank distance \_\_\_\_\_  
 7. Vent Pipe \_\_\_\_\_  
 8. Pll. Pipe \_\_\_\_\_  
 9. Gauge \_\_\_\_\_  
 10. Rigidity \_\_\_\_\_  
 11. Feed safety \_\_\_\_\_  
 12. Pipe sizes and material \_\_\_\_\_  
 13. Control valve \_\_\_\_\_  
 14. Ash pit vent \_\_\_\_\_  
 15. Temp. or pressure safety \_\_\_\_\_  
 16. Instruction card \_\_\_\_\_  
 17. \_\_\_\_\_  
 18. \_\_\_\_\_

NOTES

9/6/40, working on installation  
 left off except for removal  
 of wood around chimney  
 over

in cellar etc.  
 9/11/40. Installation completed  
 registered per site covered  
 with asbestos. Wood not  
 removed 1" from chimney  
 at first floor level. Lots  
 of shatters up with in  
 Street on previous trips.  
 Owner said he would get  
 wood away etc.  
 9/12/40 - Better 1 or 2  
 10/9/40. could not get in to  
 check etc.



PERMIT # 1307 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Peaks Island Health Center

Address: Stelling St., Peaks Island, a04108

LOCATION OF CONSTRUCTION 87-E-20 Stelling St.

CONTRACTOR: McTigue Construction SUBCONTRACTORS: 766-2676

ADDRESS: Brackett Avenue, Peaks Island, 04108

Est. Construction Cost: \$5,000 Type of Use: Health Center

Past Use: \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion - Explain Enclosing existing ramp deck, constructing new

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE deck and wheelchair ramp

Residential Buildings Only: \_\_\_\_\_ # of Dwelling Units \_\_\_\_\_ # of New Dwelling Units \_\_\_\_\_

Foundation:

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

Floors:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size \_\_\_\_\_
4. Joists Size: \_\_\_\_\_ Spacing 18" 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>October 12, 1988</u>	Subdivision: Yes / No _____
Outside Fire Limits _____	Name _____
Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>\$5,000</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$45.00</u>	

Ceiling:

1. Ceiling Joists Size: \_\_\_\_\_
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type: \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_

Roof:

1. Truss or Rafter Size: \_\_\_\_\_
2. Sheathing Type: \_\_\_\_\_
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 \_\_\_\_\_

Review Required:

Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Permit Received By

Nancy Grossman

Signature of Applicant

Robert T. McTigue, Jr. Date 10-12-88

Signature of CEO

[Signature] Date \_\_\_\_\_

Inspection Dates

[Signature]

PERMIT # 001307 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Peaks Island Health Center

Address: Stalling St., Peaks Island, 04108

LOCATION OF CONSTRUCTION 87-E-20 NAVAHOA Sterling St.

CONTRACTOR: McFigue Construction SUBCONTRACTORS: 766-2675

ADDRESS: Brackett Avenue, Peaks Island, 04108

Est. Construction Cost: \$5,000 Type of Use: Health Care

Past Use: \_\_\_\_\_

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

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion - Explain Enclosing existing NHHK deck, constructing new

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE deck and wheelchair ramp as per plans.

Residential Buildings Only: \_\_\_\_\_

# Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

**Foundation:**

1. Type of Soil: \_\_\_\_\_
2. Set Backs - 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.
- a. 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>October 12, 1988</u>	Subdivision: Yes / No _____
Inside F.u. Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>\$5,000</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$45.00</u>	

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_
3. Type Ceilings: \_\_\_\_\_
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
6. Ceiling Height: \_\_\_\_\_

**Roof:**

1. Truss or Rafter Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Sheathing: Type \_\_\_\_\_ Size \_\_\_\_\_
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 20 No \_\_\_\_\_
2. No. of Tubs or Showers \_\_\_\_\_
3. No. of Flushes \_\_\_\_\_
4. No. of Lavatories \_\_\_\_\_
5. No. of Other Fixtures 00.00

**Swimming Pools:**

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

**Zoning:**

District: IP-2 Street Frontage Req. \_\_\_\_\_ Provided \_\_\_\_\_

**Review Required:**

Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

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: 10-12-88

Permit Received By: Nancy Grossman

Signature of Applicant: [Signature] Date: 10-12-88

Signature of CEO: [Signature] Date: 10-20-88

Inspection Dates: \_\_\_\_\_

White-Tax Assessor Yellow-GPCOG

White Tag-GCOG

Copyright GPCOG 1987

[Handwritten Signature]

PLOT PLAN

N



FEES (Breakdown From Front)

Base Fee \$25.00 \_\_\_\_\_  
 Subdivision Fee \$ \_\_\_\_\_  
 Site Plan Review Fee \$ \_\_\_\_\_  
 Other Fees \$ 20.00 \_\_\_\_\_  
 (Explain) \_\_\_\_\_  
 Late Fee \$ \_\_\_\_\_

Inspection Record

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS 5-19-89 - OK - RP

Signature of Applicant

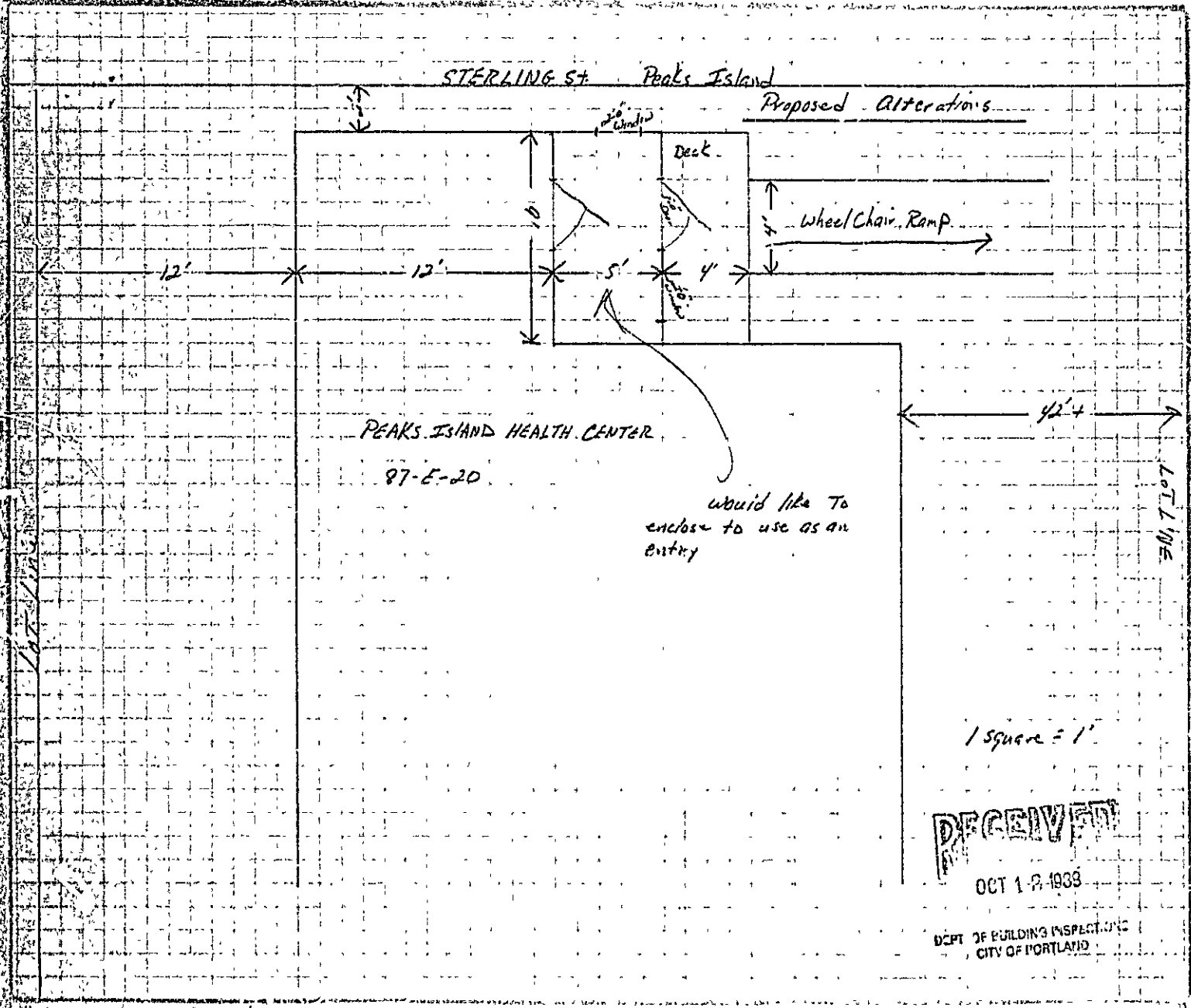
*R. H. St. ...*

Date

*10-12-84*

STERLING ST Peaks Island

Proposed Alterations



PEAKS ISLAND HEALTH CENTER

97-E-20

would like to  
enclose to use as an  
entry

1 square = 1'

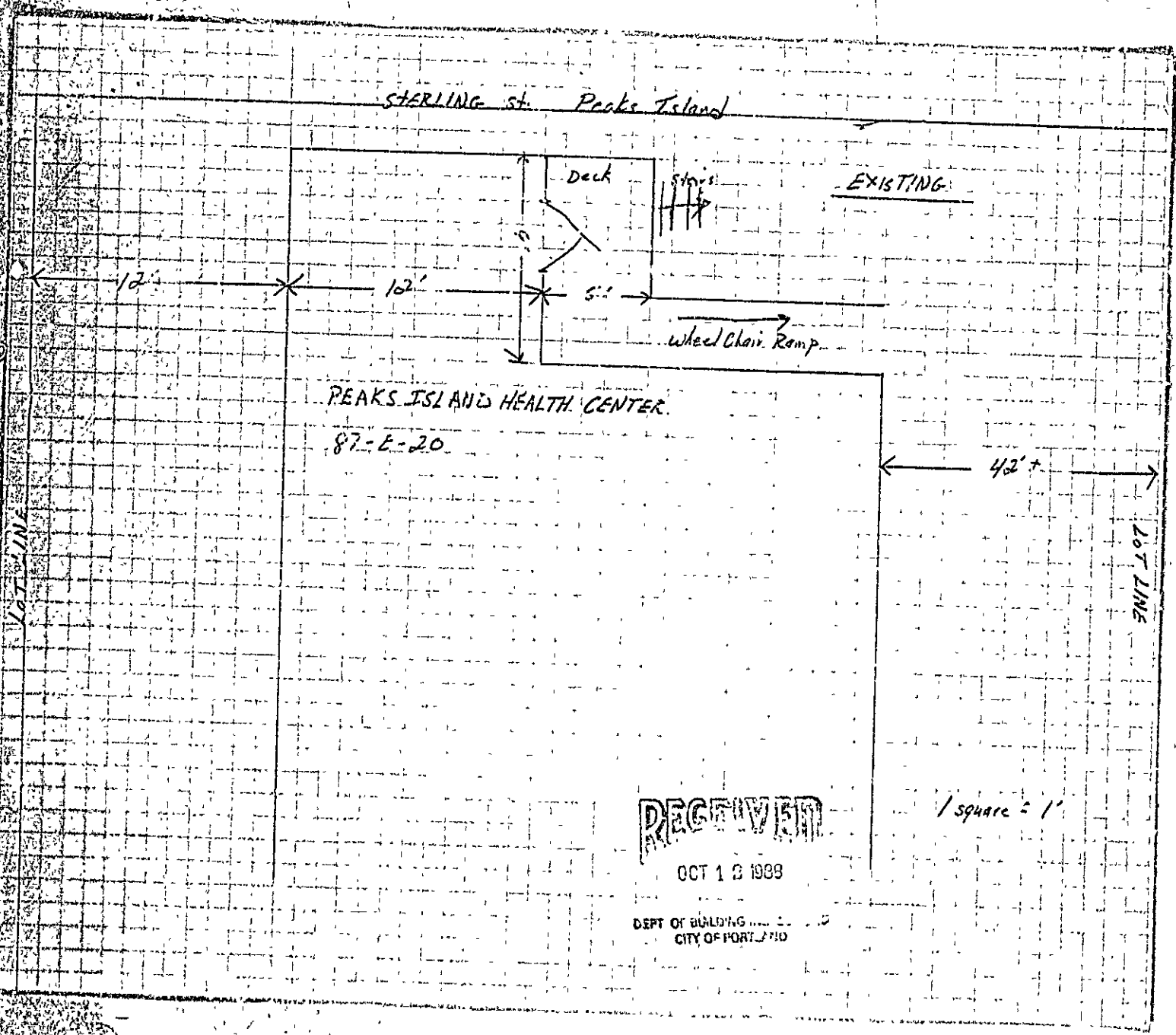
RECEIVED

OCT 1 8 1939

DEPT OF BUILDING INSPECTION  
CITY OF PORTLAND

3017107

STERLING St. Peaks Island



EXISTING

PEAKS ISLAND HEALTH CENTER  
87-E-20

42'

RECEIVED

OCT 13 1988

DEPT OF BUILDING AND CITY OF PORTLAND

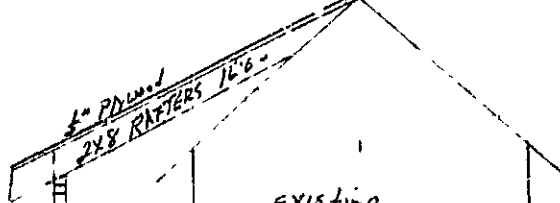
1 square = 1'

1/2 space = 1'

**RECEIVED**

OCT 1 2 1938

DEPT OF BUILDING AND SAFETY  
CITY OF PORTLAND



2x4 studs  
16' oc.

EXISTING

Grade

2x12 18' 0"

2x6 18' 0"

2x6 18' 0"

Grade

10" Sump  
Tube

