

WILLOW ST., PEAKS ISLAND

87-11-6



# APPLICATION FOR PERMIT

PERMIT ISSUED  
Permit No. 1402  
JUL 31 1930

Class of Building or Type of Structure Third Class

Portland, Maine, July 31, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ erect alter ~~install~~ the following building structure ~~equipment~~ in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location Willow Street, Peaks Island Ward 1 Within Fire Limits? no Dist. No. \_\_\_\_\_  
Owner's name and address Nellie I. Higgins, Willow St. Peaks Telephone no  
Contractor's name and address Charles Ross, Elizabeth St. Peaks Telephone \_\_\_\_\_  
Architect's name and address \_\_\_\_\_  
Proposed use of building cottage No. families \_\_\_\_\_  
Other buildings on same lot \_\_\_\_\_

### Description of Present Building to be Altered

Material wood No. stories 1 1/2 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_  
Last use cottage No. families \_\_\_\_\_

### General Description of New Work

To replace foundation of one brick chimney  
To have <sup>from</sup> clearcut door in bottom of chimney

### Details of New Work

Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_  
To be erected on solid or filled land? \_\_\_\_\_ earth or rock? \_\_\_\_\_  
Material of foundation Masonry Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_  
Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
Kind of roof \_\_\_\_\_ Roof covering \_\_\_\_\_  
No. of chimneys \_\_\_\_\_ Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_  
Kind of heat \_\_\_\_\_ Type of fuel \_\_\_\_\_ Distance, heater to chimney \_\_\_\_\_  
If oil burner, name and model \_\_\_\_\_  
Capacity and location of oil tanks \_\_\_\_\_  
Is gas fitting involved? \_\_\_\_\_ Size of service \_\_\_\_\_  
Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ Girt or ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
Material columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
Studs (outside walls and carrying partitions) 2x4-16" O.C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.  
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 \_\_\_\_\_  
Total 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 above work require removal or disturbing of any shade tree on a public street? no  
Plans filed as part of this application? no No. sheets \_\_\_\_\_  
Estimated cost \$ 11 Fee \$ 25  
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 owner

*Nellie I. Higgins*

2-1011A

Ward 1 Permit No 30/1402

Location Willow St. Peaks

Owner Nellie J. Higgins

Date of permit 7/8/30

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn. 12/7/31

Cert. of Occupancy issued None

NOTES

7/23/30 - Unable to get into lock up  
4/4/31 - same - by

~~NO BOND FOR PERMITS~~



# APPLICATION FOR PERMIT TO REPAIR BUILDING

Third Class Building

Portland, Maine, May 6, 1935

Permit No. 0795  
**PERMIT ISSUED**  
MAY 8 1935

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to repair the following described building in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Willow Street, Peaks Island Ward 1 Within fire limits? no Dist. No. \_\_\_\_\_

Owner's name and address Hollie I. Higgins, Peaks Island Telephone \_\_\_\_\_

Contractor's name and address E. H. Weaver, Peaks Island Telephone 322

Use of building cottages

No. stories 1 1/2 Height \_\_\_\_\_ ft. Gross area \_\_\_\_\_ sq. ft. Style of roof \_\_\_\_\_

Type of present roof covering wood

## General Description of New Work

To recover entire roof

### If Roof Covering is to be Repaired or Renewed

When last repaired? \_\_\_\_\_ Area then repaired \_\_\_\_\_ sq. ft.

Are repairs or renewal due to damage by fire? no If so, what area damaged? \_\_\_\_\_ sq. ft.

Area of roof to be repaired now? entire sq. ft.

Type of roofing to be used Asphalt roofing No. plies \_\_\_\_\_

Trade name and grade of roof covering to be used Class 0 Und. Lab.

Estimated cost \$ \_\_\_\_\_ Fee \$ .50

Hollie I. Higgins,

Signature of owner By E. H. Weaver

INSPECTION COPY

174A

Ward 1 Permitt No. 30/795  
 Location Miller St. Peaks  
 Owner John O Higgins  
 Date of permit 5/6/30  
 Notif. closing-in \_\_\_\_\_  
 Inspn. closing-in \_\_\_\_\_  
 Final Notif. \_\_\_\_\_  
 Final Inspn. \_\_\_\_\_  
 Cert. of Occupancy issued \_\_\_\_\_

NOTES

6/10/30 - Work done

*[Handwritten signature]*

PERMIT TO REPAIR BUILDING

Chief Building

Regulations Code  
 This permit is issued for the purpose of repairing or reconstructing a building or structure in accordance with the provisions of the Building Code of the City of Chicago.  
 The permit holder is responsible for obtaining all necessary permits and licenses from the appropriate authorities.  
 The permit is valid for a period of 180 days from the date of issuance.  
 If the work is not completed within the specified time, the permit may be extended or renewed upon application to the Building Department.

OFFICE OF THE CHIEF BUILDING OFFICER

FL725-I

June 11, 1930

Mrs. Nellie Higgins  
Willow Street, Peaks Island  
Portland, Maine

Dear Madam:

While an Inspector from this office was examining the chimney in your cottage on Willow Street, Peaks Island, the rebuilding of the upper portion of which was covered by building permit #30/788, it was noted that the lower part of the chimney just above the foundation is in very bad condition.

Under these circumstances, it is necessary for this Department to require that you have an adequate foundation provided under this chimney, and the lower portion rebuilt, so as to be sound and substantial. At the same time, it will be necessary for you to provide a cast iron cleanout door and frame at the bottom of the chimney flue.

Please have this matter attended to on or before June 25, 1930.

Very truly yours,

Inspector of Buildings.

EM/101





(A) APARTMENT BUILDING ZONE

# APPLICATION FOR PERMIT

Permit No. **0766**  
**PERMIT ISSUED**  
MAY 5 1930

Class of Building or Type of Structure Third Class

Portland, Maine, May 5, 1930

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~install~~ the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location Willow Street Peaks Island Ward 1 Within Fire Limits? No Dist. No

Owner's or Lessee's name and address Hellie Higgins, Willow St. Telephone

Contractor's name and address Geo. Keening, Willow St. Peaks Telephone

Architect's name and address

Proposed use of building cottage No. families

Other buildings on same lot

### Description of Present Building to be Altered

Material wood No. stories 1 1/2 Heat  Style of roof  Roofing

Last use cottage No. families

### General Description of New Work

To rebuild portion of interior chimney

OTHER WORK BEFORE PERMIT  
OR REVISION IS WAIVED.  
CERTIFICATE OF OCCUPANCY  
REQUIREMENT IS WAIVED

### Details of New Work

Size, front  depth  No. stories  Height average grade to highest point of roof

To be erected on solid or filled land  earth or rock?

Material of foundation  Thickness, top  bottom

Material of underpinning  Height  Thickness

Kind of roof  Roof covering

No. of chimneys 1 Material of chimneys brick of lining

Kind of heat  Type of fuel  Distance, heater to chimney

If oil burner, name and model

Capacity and location of oil tanks

Is gas fitting involved?  Size of service

Corner posts  Sills  Girt or ledger board?  Size

Material columns under girders  Size  Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O.C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.

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 not accommodated on same lot  to be accommodated

Total 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 above work require removal or disturbing of any shade tree on a public street? no

Plans filed as part of this application? no No. sheets

Estimated cost \$3 Fee \$ .80

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?  
Signature of owner Hellie Higgins

INSPECTION COPY

1035

Ward 1 Permit No. 30/766

Loc on Hillside St, Alameda

Owner Belle Heggson

Date Permit 5/5/30

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

Cert. of Occupancy issued

NOTES

8.7

J.J.

5/5/30: U.S. P. Co.  
look on foundation  
of this chimney  
to have on plan  
it is not good

6/10/30 - Saw part of  
chimney just on ground  
in very poor condition  
and looks as if had  
been built out of ground  
material.

6/12/30 - Better - W.M.

7/13/30 - Nothing done yet  
A.J.

7/9/30 - Work to be done  
is covered on another  
permit - A.J.





Location, Ownership and detail must be correct, complete and legible.  
**YOU!** Separate application required for every building.  
 Responsible for complying with the law, whether you know the requirements or not. Plans must be filed with this application.

**Application for Permit for Alterations, etc.**

This Application and Get All Questions Settled **BEFORE** Commencing Work.  
 Portland, Me., April 27, 1925 19

**INSPECTION OF BUILDINGS:**

May Prove The undersigned applies for a permit to alter the following described building:—

Descrip-  
 tion of  
 Present  
 Bldg.

**EXPLANATION**  
 Location Willow Street, Peaks Island .. Ward 1 .. in fire-limits 1.00  
 Name of Owner or Lessee, Mrs. Nellie Higgins Address Peaks Island  
 " " Contractor, George Keening " Peaks Island  
 " " Architect, ..  
 Material of Building is wood Style of Roof, pitch Material of Roofing, shingle  
 Size of Building is .. feet long; .. feet wide. No. of Stories, ..  
 Cellar Wall is constructed of .. is .. inches wide on bottom and batters to .. inches on top.  
 Underpinning is .. is .. inches thick; is .. feet in height.  
 Height of Building .. Wall, if Brick; 1st, .. 2d, .. 3d, .. 4th, .. 5th, ..  
 What was Building last used for? cottage No. of Families? 1  
 What will Building now be used for? cottage 1 family

**Detail of Proposed Work**

Build tile lined chimney all to comply with the building ordinance.

Estimated Cost \$ 50.

**If Extended On Any Side**

Size of Extension, No. of feet long? .. No. of feet wide? ..; No. of feet high above sidewalk? ..  
 No. of Stories high? ..; Style of Roof? ..; Material of Roofing? ..  
 What material will the Extension be built? .. Foundation? ..  
 If of Brick, what will be the thickness of External Walls? .. inches; and Party Walls .. inches.  
 How will the extension be occupied? .. How connected with Main Building? ..

**When Moved, Raised or Built Upon**

No. of Stories in height when Moved, Raised, or Built upon? .. Proposed Foundations? ..  
 No. of feet high from level of ground to highest part of Roof to be? ..  
 How many feet will External Walls be increased in height? .. Party Walls ..

**If Any Portion of the External or Party Walls Are Removed**

Will an opening be made in the Party or External Walls? .. in .. Story.  
 Size of the opening? .. How protected? ..  
 How will the remaining portion of the wall be supported? ..

Signature of Owner or Authorized Representative

*Geo W Keening*  
 Peaks Island Me

Address

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

1589



Willow 36 Peaks

Apr 27/25

... the same, or find with ...

*Handwritten notes:*  
Kellie Higgins  
29-6  
4372

*Vertical stamp:*  
FEDERAL BUREAU OF INVESTIGATION

**STATE**  
**INDEX**  
**NO.**

*Faded typed text, likely a report header or index table.*

**Index of Probable Work**

**REPRINT MUST BE OBTAINED BEFORE...**

CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION Willow St. vs Island 87J-J-b

Date of Issue 6/26/91

Issued to Coleman Mulhern

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. 90/1734, 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

Single-family dwelling

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

(Date)

Inspector

Inspector of Buildings

This certificate identifies lawful use of building or premises, and ought to be transferred upon conveyance when property changes hands. Copy will be furnished to owner or lease for one year.



# APPLICATION FOR AMENDMENT TO PERMIT

PERMIT ISSUED

DEC 10 1990

City of Portland

Amendment No. 1  
Portland, Maine, 12/6/90

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 90/1784 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location Willow St ; Peaks Island Within Fire Limits? \_\_\_\_\_ Dist. No. \_\_\_\_\_  
Owner's name and address Coleman Milkern Telephone 766-2433  
Lessee's name and address Willow St ; Peaks Island, ME 04108 Telephone \_\_\_\_\_  
Contractor's name and address Jack Hutchins Const. Telephone \_\_\_\_\_  
Architect RR 1 ; Box 110 ; Royal Rd. Plans filed \_\_\_\_\_ No. of sheets \_\_\_\_\_  
Proposed use of building Pownal, ME 04069 No. families \_\_\_\_\_  
Last use single family dwelling No. families \_\_\_\_\_  
Increased cost of work 125,000.

Additional fee 645.  
**HISTORIC PRESERVATION**  
 Not in District nor Landmark.  
 Does not require review.  
 Requires review.  
Action:  Approved.  
 Approved with Conditions.  
Date: 12/6/90  
Sign: [Signature]

### Description of Proposed Work

Construct single-family dwelling - 30'x40'  
(foundation done)

### 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 \_\_\_\_\_ Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
Kind of roof \_\_\_\_\_ Rise per foot \_\_\_\_\_ Roof covering \_\_\_\_\_  
No. of chimneys \_\_\_\_\_ Material of chimney \_\_\_\_\_ of lining \_\_\_\_\_  
Framing lumber - Kind \_\_\_\_\_ Dressed or full size? \_\_\_\_\_  
Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ Girders - ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
Girders \_\_\_\_\_ Size \_\_\_\_\_ Columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
Studs (outside walls and carrying partitions) "x-16" O.C. Bridging ft every floor and flat roof span over 8 feet.  
Joints and rafters: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
On centers: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
Maximum span: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_

Approved: [Signature] 12-7-90

Sign: Jack Hutchins FOR  
COLEMAN MILKERN  
Approved: [Signature] 12-6-90  
Inspector of Buildings

INSPECTION COPY - WHITE  
APPLICANT'S COPY - YELLOW  
FILE COPY - PINK  
ASSESSOR'S COPY - GOLD

PERMIT ISSUED  
WITH LETTER

BUILDING PERMIT REPORT

ADDRESS: 87-TT-6 WILLOW ST. P.I. DATE: 10/Dec/90

REASON FOR PERMIT: To Construct A Single-Family Dwelling 30'x40'

BUILDING OWNER: Coleman Malkern

CONTRACTOR: Jack Hutchins Const.

PERMIT APPLICANT: " "

APPROVED: \*1 \*2 \*6 \*7 \*9 \*10 \*12

CONDITION OF APPROVAL:

- X 1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.
- X 2.) Precaution must be taken to protect concrete from freezing.
- 3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.
- 4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- 5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
- X 6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m<sup>2</sup>). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).
- X 7.) All single and multiple-station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code (BOCA National Building Code 1990, and N.F.P.A. 74).

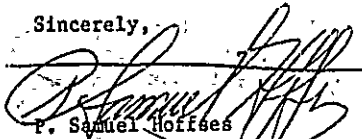
8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fire-resistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

\*9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 4 inches cannot pass through any opening.

\*10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

Sincerely,

  
P. Samuel Hoffes  
Chief of Inspection Services

/el  
11/16/88  
11/27/90

\*12, Foundation MUST A drain.



902212

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$30. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Coleman A. Mulkern Phone # 766-2508  
 Address: 22 Willow St; Peaks Island, ME 04103  
 LOCATION OF CONSTRUCTION 22 Willow St. 87-JJ-6 Peaks Island  
 Contractor: owner Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: 5000- Proposed Use: \_\_\_\_\_  
 Past Use: 1-fam dwlg  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Demolish 1-family dwelling

**For Official Use Only PERMIT ISSU**

Date: 12/11/90 Subdivision: \_\_\_\_\_ Name: DEC-18-1990  
 Inside Fire Limits \_\_\_\_\_ Lot: \_\_\_\_\_  
 Bldg Code \_\_\_\_\_ Ownership: City of Portland  
 Time Limit \_\_\_\_\_  
 Estimated Cost: 5000

Zoning: TR-7  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Division \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain): on GPCOG 12-13-90

**HISTORIC PRESERVATION**

**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.
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 \_\_\_\_\_

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_ Not a Historic or Landmark.
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.
3. Type Ceilings: \_\_\_\_\_
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Requires Review.
5. Ceiling Height: \_\_\_\_\_

**Roof:**

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: Approved
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with Conditions.
3. Roof Covering Type \_\_\_\_\_ Denied.

**Chimneys:**

- Type: \_\_\_\_\_ Number of Fire Places: 11/11/90

**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 Fixtures \_\_\_\_\_
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.

**Permit Received By**

Louise E. Chase

**Signature of Applicant**

Coleman A. Mulkern

**Signature of CEO**

\_\_\_\_\_ Date: 12-11-90

**Inspection Dates**

\_\_\_\_\_

**PERMIT ISSUED WITH LETTER**

02-11-91

White-Tax Assessor

Yellow-GPCOG

White Tag-CEQ

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PLOT PLAN



FEES (Breakdown From Front)		Type	Inspection Record	Date
Base Fee \$	30			
Subdivision Fee \$				
Site Plan Review Fee \$				
Other Fees \$				
(Explain)				
Late Fee \$				

COMMENTS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant

*Colman Mulken*

Date 12-11-90

CITY OF PORTLAND, MAINE  
DIVISION OF INSPECTION SERVICES

DEMOLITION CALL LIST

COLEMAN MILLKERN hereby requests permission to demolish  
A SINGLE FAMILY HOUSE beginning on the following date: 12/10/90  
for the following work as described: REMOVE ALL DEBRIS BY CONTAINERS  
+ TRUCK TO PORTLAND  
CITY OF PORTLAND

UTILITY APPROVAL

CENTRAL MAINS POWER COMPANY →  
Meter Department  
800-541-3195 772-7411, ext. 4234

DEPARTMENT OF PARKS/PUBLIC WORKS  
Sewer Division  
874-8300 Ext. 8871

Date & Name: 12/7/90 Jacqueline Wursoin

DEPARTMENT OF PARKS/PUBLIC WORKS  
Traffic Division  
874-8300 Ext. 8891 ✓  
Date & Name: NA

DEPARTMENT OF PARKS/PUBLIC WORKS  
Forestry Division  
874-8300 Ext. 8820 ✓  
Date & Name: NA

DEPARTMENT OF PLANNING/URBAN DEVELOPMENT  
Inspection Services Division  
(rodent/vermin/asbestos)  
12/7/90 DON Auger

FIRE DEPARTMENT  
Dispatcher for Communications  
874-8300 Ext. 8576 (8489)  
Date & Name: 12/7/90 "Willy" no problem

DEPARTMENT OF PARKS/PUBLIC WORKS  
Carol Poliskey (Sealed Drain Permit)  
874-8300 Ext. 8822  
Date & Name: 12/7/90 Carol Poliskey/Bill Goulwin

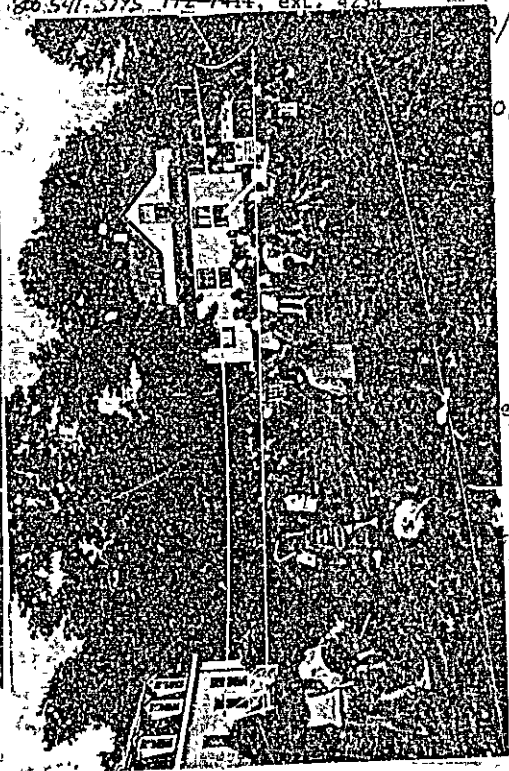
U. S. Environmental Protection  
Agency  
Region 1, Air Management Div.  
Room 200  
J.F.K. Federal Building  
Boston, MA 02203

Maine Department of Environmental  
Protection  
Bureau of Air Quality Control  
State House Station  
Attn: Catharine Clayton-Richardson  
Augusta, ME 04333

I have contacted all of the above utility companies and/or necessary City  
departments.

Date: 12/07/90 Signed: Coleman R. Mulken

lel 3/26/90



901784

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$30.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot # \_\_\_\_\_  
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Mr. & Mrs. Coleman Mulken Phone # 766-33  
 Address: 36-JJ-6 Willow St., Peaks Island, ME  
 LOCATION OF CONSTRUCTION: 87-JJ-6 Willow St., Peaks Island, ME  
 Contractor: Owner Phone # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Est. Construction Cost: \$2,000.00 Proposed Use: Sen. Family  
 # of Existing Res. Units \_\_\_\_\_ New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Construct foundation under existing home, 30'x40'.

**For Official Use Only** **PERMIT ISSUED**  
 Date: August 24, 1990 Subdivision Name: \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Lot: 1036 20 1990  
 Bldg Code \_\_\_\_\_ Ownership: \_\_\_\_\_ Public  
 Time Limit \_\_\_\_\_  
 Estimate: \$2,000.00 City of Portland  
 Zoning: TR-2  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning: Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain: Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain) OK'd by P 8-16-90

**HISTORIC PRESERVATION**

**Foundations:**

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.
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 Size: \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_
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 \_\_\_\_\_

**Ceiling:**

1. Ceiling Joists Size \_\_\_\_\_
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District nor Landmark
3. Type Ceilings: \_\_\_\_\_ Does not require review.
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Requires Review.
5. Ceiling Height: \_\_\_\_\_

**Roof:**

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Area \_\_\_\_\_ Approved \_\_\_\_\_
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with Conditions \_\_\_\_\_
3. Roof Covering Type \_\_\_\_\_

**Chimneys:**

- Type \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date: 8/15/90 Signature: \_\_\_\_\_

**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.

Permit Received By: Joyce M. Rinaldi

Signature of Applicant: Coleman A. Mulken Date: 08/14/90

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

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

White-Tax Assesor Yellow-GPCOG

White Tag - CEO  M.M. Addas © Copyright OPCOG-1988

N  
↑

PLOT PLAN

FEES (Breakdown From Front)

Base Fee \$	30.00
Subdivision Fee \$	
Site Plan Review Fee \$	
Other Fees \$	
(Explain)	
Late Fee \$	

Type

Inspection Record

Date

Type	Inspection Record	Date

COMMENTS

5-20-91 - Found - Frame OK. Subsoil OK.  
OK. Finish in progress. w/p/s. OK

Signature of Applicant

*Colman Miller*

Date

08/14/90



# APPLICATION FOR AMENDMENT TO PERMIT

Amendment No.                       
Portland, Maine, 12/6/90

PERMIT ISSUED  
DEC 10 1990  
City Of Portland

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 90/1784 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location Willow St. Peaks Stand Within Fire Limits:                      Dist. No.                       
Owner's name and address Seaman Mulhern Telephone 765-2433  
Lessee's name and address Willow St. Peaks Stand, ME 04108 Telephone                       
Contractor's name and address Jack Hutchins Const. Telephone                       
Architect RR-1, Box 11, Royal Rd. Plans filed                      No. of sheets                       
Proposed use of building Pown HE 04069 No. families                       
Last use single-family dwellin No. families                       
Increased cost of work 125,000. Additional fee 645.

### Description of Proposed Work

Construct single-family dwelling - 30'x40'  
(foundation done)

87-99-5

### HISTORIC PRESERVATION

Not in District for Landmark  
 Does not require review  
 Requires Review  
Action:  Approved  
 Approved with Cond. done  
Signature:                     

### 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                      Thickness, top                      bottom                      cellar                       
Material of underpinning                      Height                      Thickness                       
Kind of roof                      Rise per foot                      Roof covering                       
No. of chimneys                      Material of chimneys                      of lining                       
Framing lumber - Kind                      Dressed or full size?                       
Corner posts                      Sills                      Girt or ledger board?                      Size                       
Girders                      Size                      Columns under girders                      Size                      Max. on centers                       
Studs (outside walls and carrying partitions) 2x4-16" O.C. Bridging in every floor and flat roof span over 8 feet.  
Joints and rafters: 1st floor                     , 2nd                     , 3rd                     , roof                       
On centers: 1st floor                     , 2nd                     , 3rd                     , roof                       
Maximum span: 1st floor                     , 2nd                     , 3rd                     , roof                     

Approved:                      12-2-90

Signature of Owner                     

INSPECTION COPY - WHITE  
APPLICANT'S COPY - YELLOW

FILE COPY - PINK  
ASSESSOR'S COPY - GOLDEN

PERMIT ISSUED  
WITH LETTER  
Inspector of Buildings  
                     12-6-90





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

Date 3/19/91, 19\_\_\_\_  
 Receipt and Permit number 61949

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: Willow St - Peaks Island - 87-JJ-5,6,7  
 OWNER'S NAME: Rick Coleman Mulkern ADDRESS: same

	FEES
<b>OUTLETS:</b>	
Receptacles <u>50</u> Switches <u>30</u> Plugmold _____ ft. TOTAL <u>90</u> .....	16.00
<b>FIXTURES:</b> (number of)	
Incandescent <u>30</u> Fluorescent _____ (not strip) TOTAL <u>30</u> .....	6.00
Strip Fluorescent _____ ft. ....	
<b>SERVICES:</b>	
Overhead <u>x</u> Underground _____ Temporary _____ TOTAL amperes <u>100</u> ..	15.00
METERS: (number of) <u>1</u> .....	1.00
<b>MOTORS:</b> (number of)	
Fractional .....	
1 HP or over .....	
<b>RESIDENTIAL HEATING</b>	
Oil or Gas (number of units) .....	
Electric (number of rooms) .....	
<b>COMMERCIAL OR INDUSTRIAL HEATING:</b>	
Oil or Gas (by a main boiler) .....	
Oil or Gas (by separate units) .....	
Electric Under 20 kws _____ Over 20 kws .....	
<b>APPLIANCES:</b> (number of)	
Ranges _____ Water Heaters _____	
Cook Tops _____ Disposals <u>1</u> _____	
Wall Ovens _____ Dishwashers <u>1</u> _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL <u>2</u> .....	4.00
<b>MISCELLANEOUS:</b> (number of)	
Branch Panels .....	
Transfer switches .....	
Air Conditioners Central Unit .....	
Separate Units (windows) .....	
Signs 20 sq. ft. and under .....	
Over 20 sq. ft. .....	
Swimming Pools Above Ground .....	
In Ground .....	
Fire/Burglar Alarms Residential .....	
Commercial .....	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under .....	
over 30 amps .....	
Circus, Fairs, etc. ....	
Alterations to wires .....	
Repairs after fire .....	
Emergency Lights, battery .....	
Emergency Generators .....	
INSTALLATION FEE DUE: .....	
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: .....	
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	
TOTAL AMOUNT DUE: .....	42.00

INSPECTION: Will be ready on now, 19\_\_\_\_; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: William Flynn  
 ADDRESS: Centennial St - Peaks IS1  
 TEL.: 765-2780  
 MASTER LICENSE NO.: 4549 SIGNATURE OF CONTRACTOR: \_\_\_\_\_  
 LIMITED LICENSE NO.: \_\_\_\_\_

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



902212

Permit # 902212 City of Portland BUILDING PERMIT APPLICATION Fee \$30. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Coleman A. Mulkern Phone # 766-2508

Address: 22 Willow St; Peaks Island, ME 04108

LOCATION OF CONSTRUCTION # 22 Willow St. 37-JJ-6 *if peak's Island*

Contractor: OWNER Sub \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Est. Construction Cost: 5000- Proposed Use: \_\_\_\_\_

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_

# Storics \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_

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

Explain Conversion Demolish 1-family dwelling

Foundation:

1. Type of Soil: \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_

2. Set Backs - Front \_\_\_\_\_

3. Footings Size: \_\_\_\_\_

4. Foundation Size: \_\_\_\_\_

5. Other \_\_\_\_\_

Floor: \_\_\_\_\_ Sills must be anchored

1. Sills Size: \_\_\_\_\_

2. Girder Size: \_\_\_\_\_ Size: \_\_\_\_\_

3. Lally Column Spacing: \_\_\_\_\_ Spacing 16" O.C.

4. Joists Size: \_\_\_\_\_ Size: \_\_\_\_\_

5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_

6. Floor Sheathing Type: \_\_\_\_\_

7. Other Material: \_\_\_\_\_

Exterior Walls: \_\_\_\_\_ Spacing \_\_\_\_\_

1. Studding Size \_\_\_\_\_

2. No. windows \_\_\_\_\_

3. No. Doors \_\_\_\_\_ Span(s) \_\_\_\_\_

4. Header Sizes \_\_\_\_\_ No. \_\_\_\_\_

5. Bracing: Yes \_\_\_\_\_

6. Corner Posts Size \_\_\_\_\_ Size \_\_\_\_\_

7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_

8. Sheathing Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_

9. Siding Type \_\_\_\_\_

10. Masonry Materials \_\_\_\_\_

11. Metal Materials \_\_\_\_\_

Interior Walls: \_\_\_\_\_ Spacing \_\_\_\_\_

1. Studding Size \_\_\_\_\_ Span(s) \_\_\_\_\_

2. Header Sizes \_\_\_\_\_

3. Wall Covering Type \_\_\_\_\_

4. Fire Wall if required \_\_\_\_\_

5. Other Materials \_\_\_\_\_

For Official Use Only PERMIT ISSUED

Date: 12/11/90

Subdivision Name: \_\_\_\_\_

Trade Fire Limits: \_\_\_\_\_

Est. Code: \_\_\_\_\_

Time Limit: \_\_\_\_\_

Estimated Cost: 5000

Ownership: \_\_\_\_\_

City of Portland

Zoning: IR-2

Street Frontage Provided: \_\_\_\_\_

Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:

Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_

Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_

Special Exception \_\_\_\_\_

Other (Explain): OK W.D.A. # 12-13-90

HISTORIC PRESERVATION

Ceiling:

1. Ceiling Joists Size: \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District nor Landmark.

2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.

3. Type Ceiling: \_\_\_\_\_ Size \_\_\_\_\_ Requires review.

4. Insulation Type \_\_\_\_\_

5. Ceiling Height: \_\_\_\_\_

Roof:

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: \_\_\_\_\_ Approved \_\_\_\_\_

2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approves All Conditions \_\_\_\_\_

3. Roof Covering Type \_\_\_\_\_

Chimneys:

Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating:

Type of Heat: \_\_\_\_\_

Electrical:

Service Entrances 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 \_\_\_\_\_

Swimming Pools:

1. Type: \_\_\_\_\_ Square Footage \_\_\_\_\_

2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_

3. Must conform to National Electrical Code and State Law.

Permit Received By Louisa F. Mulkern

Signature of Applicant Coleman A. Mulkern Date 12-11-90

Signature of CEO \_\_\_\_\_ Date \_\_\_\_\_

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

White-Tax Assessor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_ White tag - CEO 12 © Copyright GPCOG 1988

# PLUMBING APPLICATION

85-E-4-10 RL

Department of Human Services  
Division of Health Engineering  
(207) 289-3820

**PROPERTY ADDRESS**  
Town Or Plantation: Peaks Island  
Street Subdivision Lot #: New Island Ave Ext  
**PROPERTY OWNERS NAME**  
Last: Morse First: Tom  
Applicant Name: Erik E. Thomsen  
Mailing Address of Owner/Applicant (If Different): 92 Glenhaven West Portland ME 04102

PORTLAND 4130 TOWN COPY  
L.P.I. # 01241  
Chief Plumbing Inspector

**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: Erik E. Thomsen Date: 3/5/93

**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: PSH  
Date Approved: 4-29-93

**PERMIT INFORMATION**

<b>This Application is for</b>	<b>Types Of Structure To Be Served:</b>	<b>Plumbing To Be Installed By:</b>
1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>0, 2, 6, 9, 7</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture	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  <b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.	0, 1 Hosebibb / Shtcock	0, 1 Bathtub (and Shower)
PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures		
Number of Hook-Ups & Relocations	Other: _____	
Hook-Up & Relocation Fee	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
		Fixtures (Subtotal) Column 2
		Total Fixtures
		Fixture Fee
		Hook-Up & Relocation Fee
		Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

81-99-5-6-7

Department of Human Services  
Division of Health Engineering  
(207) 289-3825

**PLUMBING APPLICATION**

**PROPERTY ADDRESS**

Town Or Plantation: Portland (Parker Dr)  
Street Subdivision, Lot #: Lot 6 Willow Str

**PROPERTY OWNERS NAME**

Last: MulKeen First: Columb

Applicant Name: Carl J Henrikson

Mailing Address of Owner/Applicant (if Different): 39 High Way Rd, Car 5, ME 05107

**Caution: Permit Required**

PORTLAND 4129 TOWN COPY

Date Permit Issued: 10/31/91 \$ 44  Fee Charged

Samuel Hoffman Local Plumbing Inspector (LPI)

Chief Plumber

**Owner/Applicant Statement**

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

Signature of Owner/Applicant: [Signature] Date: 5-6-91

**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: [Signature] Date Approved: 4-29-93

**PERMIT INFORMATION**

This Application is for:

1.  NEW PLUMBING  
2.  RELOCATED PLUMBING

Type Of Structure To Be Served:

1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER - SPECIFY \_\_\_\_\_

Plumbing To Be Installed By:

1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D. HOUSING DEALER/MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER

LICENSE # 01943

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p><b>OR</b></p> <p>HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures.</p>	2	Hosebibb / Silcock	2	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	2	Sink
		Drinking Fountain	4	Wash Basin
		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease/Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
		Bidet		Laundry Tub
		Other	1	Water Heater
Number of Hook-Ups & Relocations	Fixtures (Subtotal) Column 2		1.5	Fixtures (Subtotal) Column 1
Hook-Up & Relocation Fee			2	Fixtures (Subtotal) Column 2

Please inspect 5-7-91

12:00 - 1:00

Thanks Please Call 799-7449

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$	1.7	Fixtures Fee
\$		Hook-Up & Relocation Fee
\$	44	Permit Fee (Total)

TOWN COPY



# PLUMBING APPLICATION

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

**PROPERTY ADDRESS**

Town or Plantation: Portland (Rocks Ile)

Street Subdivision Lot #: Lot 6 Willow St

**PROPERTY OWNERS NAME**

Last: Mulkern First: Colman

Applicant Name: Col J Mulkern

Mailing Address of Owner/Applicant (if Different): 39 High Way Rd, Cape Sic, ME 04107

**Caution: Permit Required**

PORTLAND 4129 TOWN COPY

Date Permit Issued: 1/3/6/91 \$ 44 Fee Charged

Samuel Hillborn  
Local Plumbing Inspector Signature

Chief Plumbing Inspector

**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] 3-6-91  
Signature of Owner/Applicant Date

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

[Signature] 6/16/94  
Local Plumbing Inspector Signature Date Approved

**PERMIT INFORMATION**

This Application is for:

- NEW PLUMBING
- RELOCATED PLUMBING

5-20-91 CC  
6-2-91 CC

Type Of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER - SPECIFY \_\_\_\_\_

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 01943

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP, to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District	2	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal	2	Sink
		Drinking Fountain	4	Wash Basin
HOOK UP, to an existing subsurface wastewater disposal system.		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
PIPING RELOCATION, of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator	1	Dish Washer
		Dental Cuspidor	1	Garbage Disposal
	Bidet		Laundry Tub	
Number of Hook-Ups & Relocations		Other _____	1	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	1.5	Fixtures (Subtotal) Column 1
			2	Fixtures (Subtotal) Column 2
			1.7	Total Fixtures
				Fixture Fee
				Hook-Up & Relocation Fee
			\$ 44	Permit Fee (Total)

Please inspect 3-7-91 12:00 - 1:00 PM SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE Thanks Please Call 799-7449

TOWN COPY