

CENTRAL AVE., PEAKS ISLAND

87-P-12



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, Sept. 7, 1971

PERMIT ISSUED

SEP. 8 1971

4064

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 Central Ave. Peaks Island Use of Building 1 fam. 87-F-13 No. Stories 1 1/2
Name and address of owner of appliance Mrs. Margaret Kane, Central Ave. Peaks Island
Installer's name and address Jackson & Casey, Peaks Island Telephone

General Description of Work

To install oil-fired boiler burner unit (replacement) in existing steam heating system

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? oil
Minimum distance to burnable material, from top of appliance or casing top of furnace 30"
From top of smoke pipe 27" From front of appliance over 4" From sides or back of appliance over 4"
Size of chimney flue 8x12 Other connections to same flue no
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion?

IF OIL BURNER

Name and type of burner ABC Labelled by underwriters' 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 Size of vent pipe 1 1/2"
Location of oil storage basement Number and capacity of tanks 275 gal. existing
Low water shut off Make No.
Will all tanks be more than five feet from any flame? yes How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smoke pipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

[Empty lines for miscellaneous information]

Amount of fee enclosed 5.00 etc., in same building at same time.)

APPROVED:

OK E.B.P. 9/7/71

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

Jackson & Casey

Signature of Installer By: [Signature]

CS 300

INSPECTION COPY

Permit No. 71/1064
Location Central Ave. Peaks Is
Owner Mrs. Margaret Kane
Date of permit 9/8/71
Notif. closing-in _____
Inspn. closing-in _____
~~Final Inspn.~~ CART
WALLY
Final Inspn. 10/29/71 WJG
Cert. of Occupancy issued _____

NOTES



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED
01980
NOV 10 1949
CITY OF PORTLAND

Portland, Maine, November 9, 1949

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 CENTRAL AVENUE PEAKS ISLAND ME Use of Building Residence No. Stories 2 New Building Existing "Existing"
Name and address of owner of appliance William Kane, Central Ave, Peaks Island ME
Installer's name and address Paul L. Hutchins, Luther St, P.O. Telephone 44-11

General Description of Work

To install Power burner in steam heating plant.

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 Lynn - Gun type Labelled by underwriter's laboratories? yes
Will operator be always in attendance? yes Does oil supply line feed from top or bottom of tank? Bottom
Type of floor beneath burner concrete
Location of oil storage Basement Number and capacity of tanks 1 - 2.75
If two 275-gallon tanks, will three-way valve be provided? _____
Will all tanks be more than five feet from any flame? yes How many tanks fire proofed? _____
Total capacity of any existing storage tanks for furnace burners none

IF COOKING APPLIANCE

Location of appliance _____ Kind of fuel _____ Type of floor beneath appliance _____
If wood, how protected? _____
Minimum distance to wood or combustible material from top of appliance _____
From front of appliance _____ From sides and back _____ From top of smokepipe _____
Size of chimney flue _____ Other connections to same flue _____
Is hood to be provided? _____ If so, how vented? _____
If gas fired, how vented? _____ Rated maximum demand per hour _____

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

RECEIVED
NOV 9 1949
DEPT. OF BLDG. INSP.
CITY OF PORTLAND

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:

Nov 11.9.49. [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

INSPECTION COPY

Signature of Installer Paul L. Hutchins

Permit No. 49/1950 11.25

Location Central Air Peakes Island

Owner Williams Kane

Date of permit 11/10/49

Approved INSPECTION NC " COMPLETED

NOTES

- 1 Fill Pipe
- 2 Vent Pipe
- 3 Kind of Heat
- 4 Burner Ratings & Supports
- 5 Name & Label
- 6 Stack Control
- 7 High Limit Control
- 8 Remote Control
- 9 Tripwire
- 10 Valve in
- 11 Capacity of Tank
- 12 Tank Rating & Supports
- 13 Tank Pressure
- 14 Oil Gauge
- 15 Instruction Card
- 16



(A) APARTMENT HOUSE ZONE

PERMIT ISSUED
Permit No. 0162

APPLICATION FOR PERMIT

FEB 19 1929

Class of Building or Type of Structure: 2nd Class

Portland, Maine, February 19, 1929

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: Central Avenue, Peaks Island Ward 1 Within Fire Limits? No Dist. No. _____
 Owner's or Lessee's name and address: Helen A. Jacobs, Peaks Island Telephone _____
 Contractor's name and address: Henry Hour, 2 Street, Peaks Island Telephone _____
 Architect's name and address: _____
 Proposed use of building: Dwelling house No. families: 2
 Other buildings on same lot: poultry house

Description of Present Building to be Altered

Material: wood No. stories: 2 1/2 Heat _____ Style of roof _____ Roofing _____
 Last use: Dwelling house for Mrs. Bates No. families: 2

General Description of New Work

To change present rear window, first floor, to door.
 To partition off entry (rear) for entrance to basement.
 To cut 6' opening in partition between two front rooms;
 To cut in new door between dining room and kitchen.

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 CITY OF PORTLAND
 FEB 20 1929
 BY ORDER OF THE CITY ENGINEER

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 _____ 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 of ledger board? _____ Size _____
 Material columns under girders _____ Size _____ Max. cr. 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 _____
 Cr. 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? yes No. sheets _____
 Estimated cost \$ 75 Fee \$ 50

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 owner: Helen A. Jacobs *Helen A. Jacobs*

INSPECTION COPY

Ward 1 Permit No. 29/164

Location: Central Ave. Peab.

Owner: Helen A. Jacobs

Date of permit: 1/19/39

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

Cert. of Occupancy issued

NOTES

27

60

12-13

10/16/39 = Unable to get inside house but door way has been put in place above window partially with inside of house.

O.S.P.

