

ELIZABETH ST.
87-2-29

PEAKS ISLAND

MADE IN
U.S.A.
W.C. COZAR
NEW YORK

(A) APARTMENT HOUSE ZONE

Complaint No. C-36-158



CITY OF PORTLAND, MAINE
DEPARTMENT OF BUILDING INSPECTION

COMPLAINT

Date received August 29, 1938

Lot 78
Location Elizabeth Street, Peaks Island (87-7-29)

Ward Isl. 2

Owner's name and address George L. Wright, 75 Bowdoin Ave. Dorchester, Mass

Telephone

Tenant's name and address

Telephone

Use of building

General Description

Material from cottage damaged by fire piled around on property and is considered a fire hazard and detrimental to adjoining property

Complainant's name and address Mrs. Margaret Boulter, Mrs. Jones, Elizabeth St. Peaks

Telephone

Conditions found

Action taken

INSPECTION COPY

(A) APARTMENT HOUSE ZONE

Ward 2 2 Complaint No. - 26-156

Location - 778 Elizabeth St. Pecks

Date Received 8/26/36.

Date Disposed of 10/5/38

NOTES

ATH - Next time at Pecks, will you not see if this is cleared up. If it is, charge it off; if not, report to ward 9/12/38

~~10/5/38 - There does not seem to be any debris lying around or over Foundation with brick underpinning floored over and remains of piazza which runs around sides of building still in place. Piazza is not floored over + some of original is still on. Broken Piazza section is boarded down to ground and if vacant grass on lot should be removed + turned up. Let's let this part - AGB~~

87-2-29



Location, Ownership and detail must be correct, complete and legible.
Separate application required for every building.
Plans must be filed with this application.

Application for Permit for Alterations, etc.

To be

Portland, December 5, 1922- 192

INSPECTOR OF BUILDINGS:

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

Location. Elizabeth St, Peaks Island Ward, 1 in fire-limits? NO
Name of Owner or Lessee, George L Wright Address Peaks Island
" " Contractor, George O Barker " 65 Oxford Street
" " Architect

Description of Present Bldg.

Material of Building is wood Style of Roof, pitch Material of Roofing, shingle
Size of Building is 30ft feet long; 20ft feet wide. No. of Stories, 2
Cellar Wall is constructed of stone is _____ inches wide on bottom and batters to _____ inches on top.
Underpinning is brick is _____ inches thick; is _____ feet in height.
Height of Building, 28ft Wall, if Brick; 1st _____ 2d, _____ 3d, _____ 4th, _____ 5th.
What was Building last used for? dwelling No. of Families? 1
What will Building now be used for? same

DETAIL OF PROPOSED WORK

Build piazza 8x10 with asphalt roof all to comply with the building ordinance

Estimated Cost \$ 300.

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? _____
Of 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 the 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
Address _____

George L. Wright

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

Elizabeth St. Peaks

87-7-29

Geo. L. Wright

FINAL REPORT

192
Has the work been completed in accordance with this application and plans filed and approved?

Law been violated? Doc. No. of 192

Nature of violation?

Violation removed, when? 192

Estimated cost of alterations, etc., \$

Inspector of Buildings.

WORK SHALL BE COMPLETED BEFORE BEGINNING MO...

PERMIT GRANTED

Dec 5 1928 192

Perm't filed out by

Permit number.

Location Elizabeth St, Peaks

ANNE MORRIS BAYNE OR BUILDING

RECEIVED



Location, Ownership and detail must be correct, complete and legible.
 Separate application required for every building.
 Plans must be filed with this application.

Application for Permit for Alterations, etc.

Portland, August 11, 1920 19

To the INSPECTOR OF BUILDINGS:

The undersigned applies for a permit to alter the following-described building—

Location Elizabeth St., Peaks Island Ward, 1 In fire-limits? no
 Name of Owner or Lessee, G H Brager Address Peaks Island
 " Contractor, Charles Ross " Peaks Island
 " Architect, " " "

Description of Present Bldg.

Material of Building is wood Style of Roof, pitch Material of Roofing, shingle
 Size of Building is 30ft feet long; 20ft feet wide. No. of Stories, 1 1/2
 Cellar Wall is constructed of posts inches wide on bottom and batters to inches on top.
 Underpinning is inches thick; is feet in height.
 Height of Building, 18ft Wall, if Brick; is 2d, 3d, 4th, 5th
 What was Building last used for? cottage No. of Families? 1
 What will Building now be used for? same

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

DETAIL OF PROPOSED WORK

Build concrete foundation
 All to comply with the building ordinance

Estimated Cost \$400

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?
 Of 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 may feet will the 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

G. H. Brager
 Peaks Island

Address

Elizabeth St, Peaks

87-7-29

Chas. H. Brown
Geo. Wright
Sarah
Sterling Land

FINAL REPORT

Has the work been completed in accordance with this application and plans filed and approved? _____ 191

Law been violated? Doc. No. of 191

Nature of violation?

PERMIT GRANTED

August 11, 1920 191

Permit filled out by: _____

Permit number _____

Location Peaks Island

Elizabeth St

Violation removed, when? 191

Estimated cost of alterations, etc., \$ _____

Inspector of Buildings.

RECEIVED TOTAL AS SHOWN IN RECORDS OF THE CITY ENGINEER

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3326

PROPERTY ADDRESS

Town or Plantation: Roswell Island

Street, Subdivision, Loc. #: 36 Elizabeth St.

PROPERTY OWNERS NAME

Last: COIN First: SEAN

Applicant Name: Charles F. Roche

Mailing Address of Owner/Applicant (if different):
Forest Hous. # 327
Roswell Island, N.H.

PORTLAND

Date Permitted: 8.9.94

Inspector: LP: J. R. 127

Local Plumbing Inspector Signature

5176 TOWN COPY

Double Fee Charge

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge & understanding, that my installation is in accordance with the Local Plumbing Code and that I am a duly Licensed Plumber.

Signature of Owner/Applicant: Charles F. Roche

Caution: Inspection Required

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

Signature: Arthur Rowe

Date Approved: 11-28-94

Local Plumbing Inspector Signature

TYPE OF OCCUPATION

This Application is for:

NEW PLUMBING

RELOCATED PLUMBING

Type of Structure:

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 # MS.L.C.01078

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebib / Silcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal	2	Sink
		Drinking Fountain		Wash Basin
HOOK-UP to an existing subsurface waste water disposal system.		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION of existing lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
		Central Cuspldor		Waste Disposal
		Flidat		Laundry Tub
Number of Hook-Ups & Relocation		Number:	10	Water Heater
Hook-Up & Relocation Fee		Fees (Subtotal) Column 2		Fees (Subtotal) Column 1
			5	
				Fixture Fee
				Hook-Up & Relocation Fee
				Permit Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

20.