Cor. Ottawa ave. & Whitehead ave.

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

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation	PORTLAND, MAINE
Street Subdivision Lot #	CUSHING ISLAND / 106.3-C-1

106B-C-1 PROPERTY OWNERS NAME

106 A-A-11

Last: JENNEY First: ~~HAROLD~~ Harold S.

Applicant Name.	KITCHENS INC / WM HARMON
Mailing Address of Owner/Applicant (If Different)	500 WOODBURY ST PORTLAND

PORTLAND PERMIT # 2,911 TOWN COPY

Date Permit Issued 6 / 1 / 88 $ 1 / 1 / 18 FEE ☐ Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1 / 2 / 3

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 — Date 6-1-88

Caution: Inspection Required

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

Local Plumbing Inspector Signature — Date Approved DEC 1 1 1990

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 # 0 1 5 1 3

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number	Column 2 Type of Fixture	Column 1 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 / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal	1	Sink
☐ HOOK-UP: to an existing subsurface wastewater disposal system.		Drinking Fountain		Wash Basin
		Indirect Waste	1	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		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups & Relocations		Other: _____	1	Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	6	Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			6	Total Fixtures
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			$ 18.	Fixture Fee
			$	Hook-Up & Relocation Fee
			$ 18.	Permit Fee (Total)

TOWN COPY

106A - A - 11
106B - C - 1

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date June 1, 1988
Receipt and Permit number 29184

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: Cushing Island Shore Rd

OWNER'S NAME: H.S. Tenney ADDRESS: Cushing Island

	FEES
OUTLETS:	
Receptacles 15 Switches 10 Plugmold ____ ft. TOTAL 25	3.00
FIXTURES: (number of)	
Incandescent 8 Flourescent ____ (not strip) TOTAL 8	3.00
Strip Flourescent ____ ft.	
SERVICES:	
Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
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 Under 20 kws ____ Over 20 kws ____	
APPLIANCES: (number of)	
Ranges 1 / Cook Tops ____ / Wall Ovens ____ / Dryers 1 / Fans ____ / Water Heaters ____ / Disposals ____ / Dishwashers 1 / Compactors ____ / Others (denote) ____	
TOTAL 3	4.50
MISCELLANEOUS: (number of)	
Branch Panels ____	
Transformers ____	
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:	10.50

INSPECTION:

Will be ready on June 1, 19 88 or Will Call ____

CONTRACTOR'S NAME: Bradley Electric

ADDRESS: R.R. 1, Yarmouth, Me 04096

TEL.: 773-0147

MASTER LICENSE NO.: 03134 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: ____

ELECTRICAL INSTALLATIONS

Permit Number 23166

Location [illegible]

Owner [illegible]

Date of Permit [illegible]

Final Inspection [illegible]

By Inspector [illegible]

Permit Application Register Page No. 33

INSPECTIONS: Service _____ by _____

service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: _____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

DATE:	REMARKS:

PERMIT # 6216 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Harral Tenney

Address: P.O. 947, Newburgh, N. Y. (Cushing Isl)

LOCATION OF CONSTRUCTION 106B-C-1 Corner Ottawa Ave. & Whitehead Ave.

CONTRACTOR: Kitchens Inc. ~~XXXXXXXXXXXXXX~~ 773-3521

ADDRESS: c/o Wm. Harmon - 500 Woodford St., Portland 04103

Est. Construction Cost: 14,000.00 Type of Use: Single Family

Past Use: same

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

Is Proposed Use: S.F. ___ Seasonal ___ Condominium ___ Apartment ___

Conversion - Explain Renovations to Kitchen and and Bathroom, as per plan.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units ___ # Of New Dwelling Units ___

For Official Use Only

Date Jun 1, 1988
Inside Fire Limits ___
Bldg Code ___
Time Limit ___
Estimated Cost $14,000.00
Value/Structure ___
Fee 90.00

Subdivision: Yes / No
Name ___
Lot ___
Block ___
Permit Expiration: ___
Ownership: ___ Public ___ Private

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: ___
2. Ceiling Strapping Size ___ Spacing ___
3. Type Ceilings: ___
4. Insulation Type ___ Size ___
5. Ceiling Height: ___

Roof:
1. Truss or Rafter Size ___ Span ___
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 ___ 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 ___
Required 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 ___
Shore and Floodplain Mgmt ___ Special Exception ___
Other ___ (Explain) ___
Date Approved ___

Permit Received By Joyce M. Rinaldi

Signature of Applicant ___ Date ___

Signature of CEO ___ Date ___

Inspection Dates ___

White-Tax Assesor Yellow-GPCOG White Tag -CEO

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PERMIT # 000626 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Harral Tenney

Address: P.O. 947, Newburgh, N.Y. (Cushing Isl.)

LOCATION OF CONSTRUCTION 106B-C-1 Corner Ottawa Ave. & Whitehead Ave.

CONTRACTOR: Kitchens Inc. SUBCONTRACTORS 773-3521

ADDRESS c/o Wm. Farmon - 500 Woodford St., Portland 04103

Est. Construction Cost: 14,000.00 Type of Use: Single Family

Past Use: same

Building Dimensions L ___ W ___ Sq. Ft ___ # Stories ___ Lot Size ___

Is Proposed Use: S.F. Seasonal ___ Condominium ___ Apartment ___

Conversion - Explain Renovations to Kitchen and and Bathroom, as per plan.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

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.
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: June 1, 1988
Inside Fire Limits ___
Zoning Code ___
Time Limit ___
Estimated Cost $14,000.00
Value/Structure ___
Fee 90.00

Subdivision: Yes / No
Name ___
Lot ___
Block ___
Permit Expiration ___
Ownership: Public ___ Private ___

PERMIT ISSUED

JUN 2 1988

City Of Portland

Ceiling:

1. Ceiling Joists Size: ___
2. Ceiling Strapping Size ___ Spacing ___
3. Type Ceilings. ___
4. Insulation Type ___ Size ___
5. Ceiling Height: ___

Roof:

1. Truss or Rafter Size ___ Span ___
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 ___ 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: IR1 Street Frontage Req. ___ Provided ___

Required 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 ___

Shore and Floodplain Mgmt. ___ Special Exception ___

Other ___ (Explain) ___

Date Approved D.R. [illegible] June 1, 1988

Permit Received By Joyce M. Rinaldi

Signature of Applicant ___ Date ___

Signature of CEO ___ Date ___

Inspection Dates ___

White-Tax Assesor Yellow-GPCOG White Tag-CEO

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PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 90.00
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

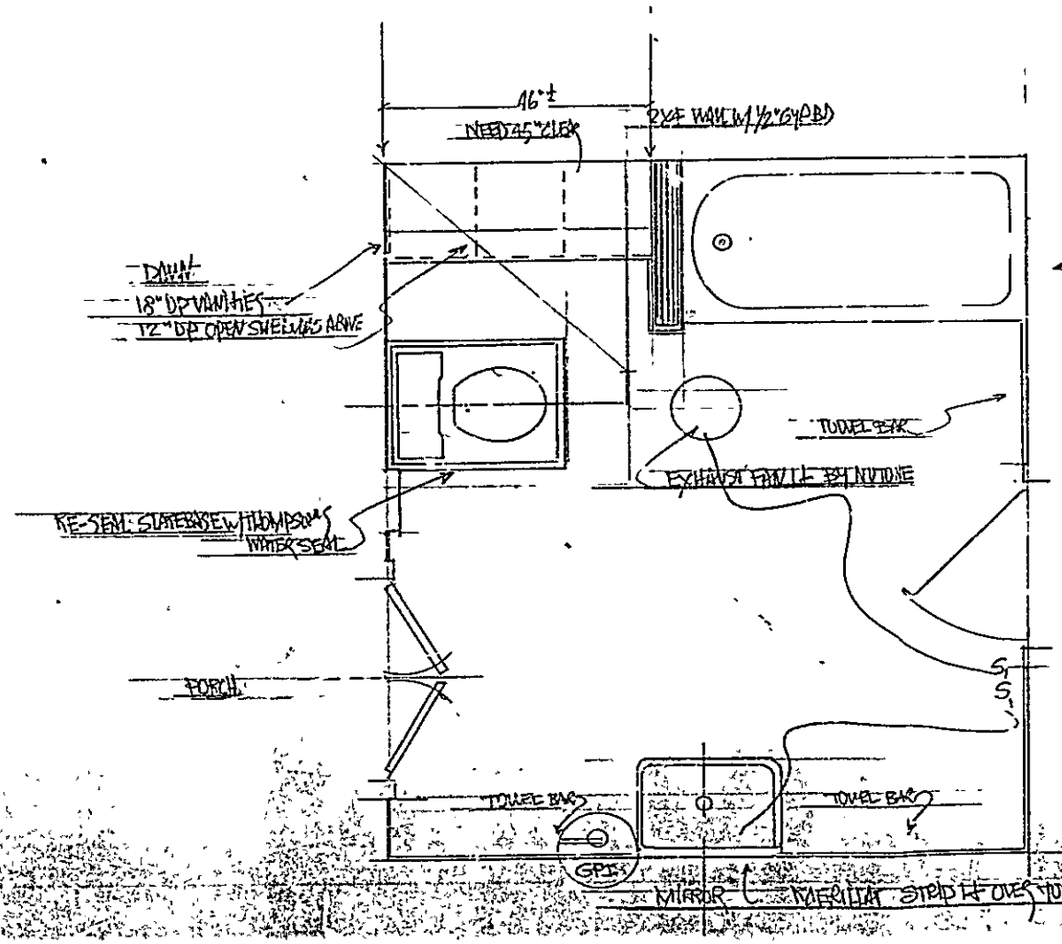
Inspection Record

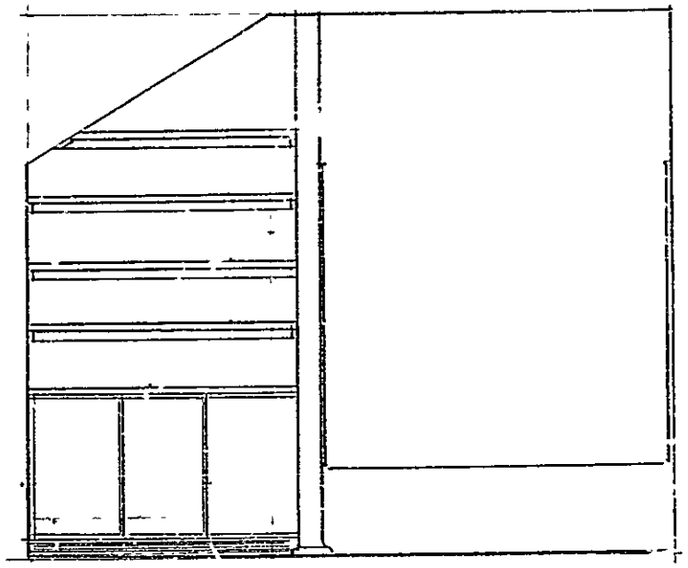
Type	Date
Completed	6/16/94
	/ /
without inspection	/ /
	/ /
	/ /

COMMENTS

Signature of Applicant _____ **Date** _____

01713
BILL HAGMON





FLOORING - SAND & RE FINISH * 5 COATS POLYURETHANE
* STAIN WEDGE AT MIDWAY

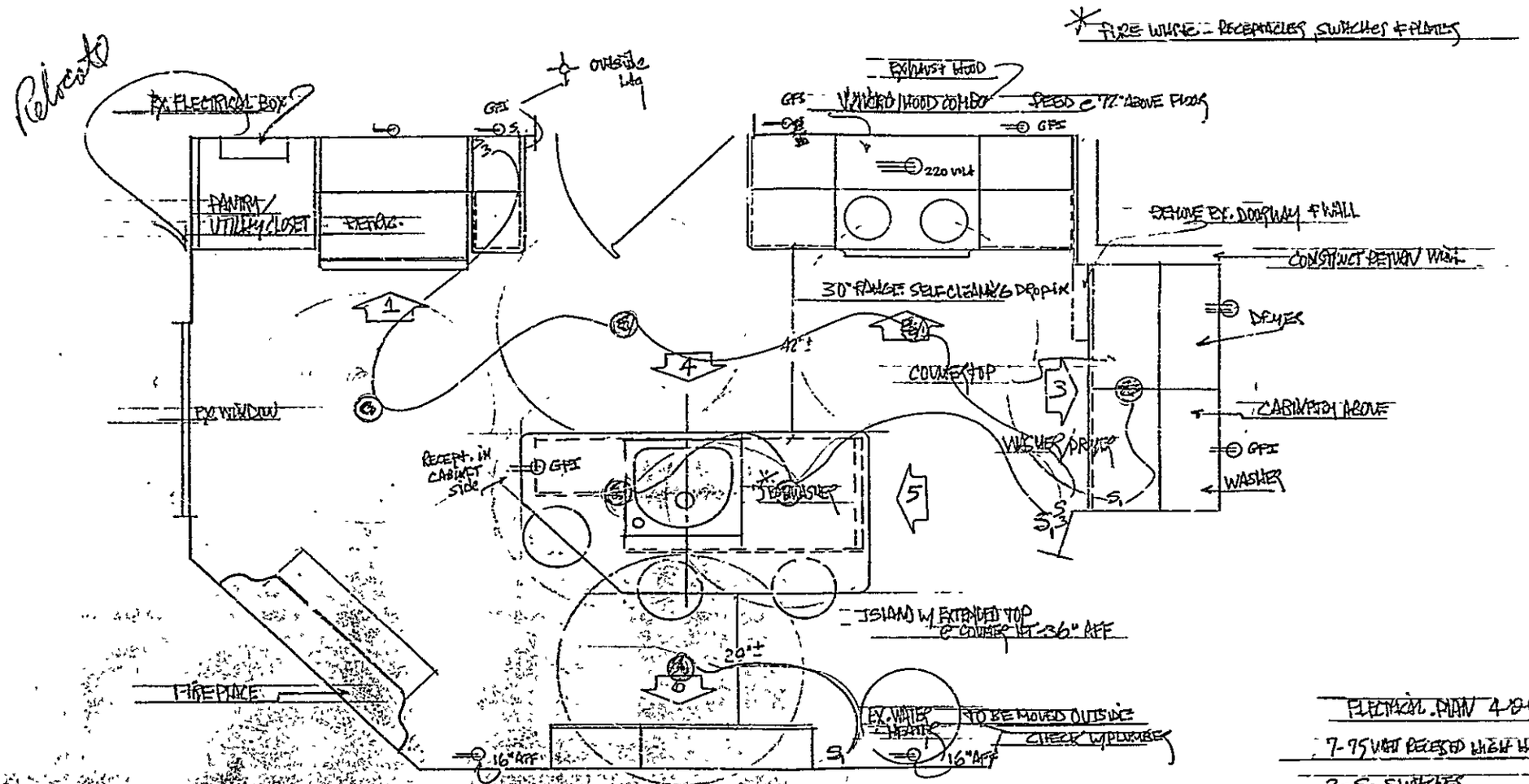
NEW TUB & SHOWER - FIBERGLASS

RECEIVED
JUL 01 1988

* REUSE EXISTING TOWEL BARS

BATHROOM RENOVATION

TENNEY RESIDENCE - SCALE: 1/2" = 1'-0" - 4-19-88



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1 1993
CITY OF PORTLAND
BUILDING INSPECTIONS

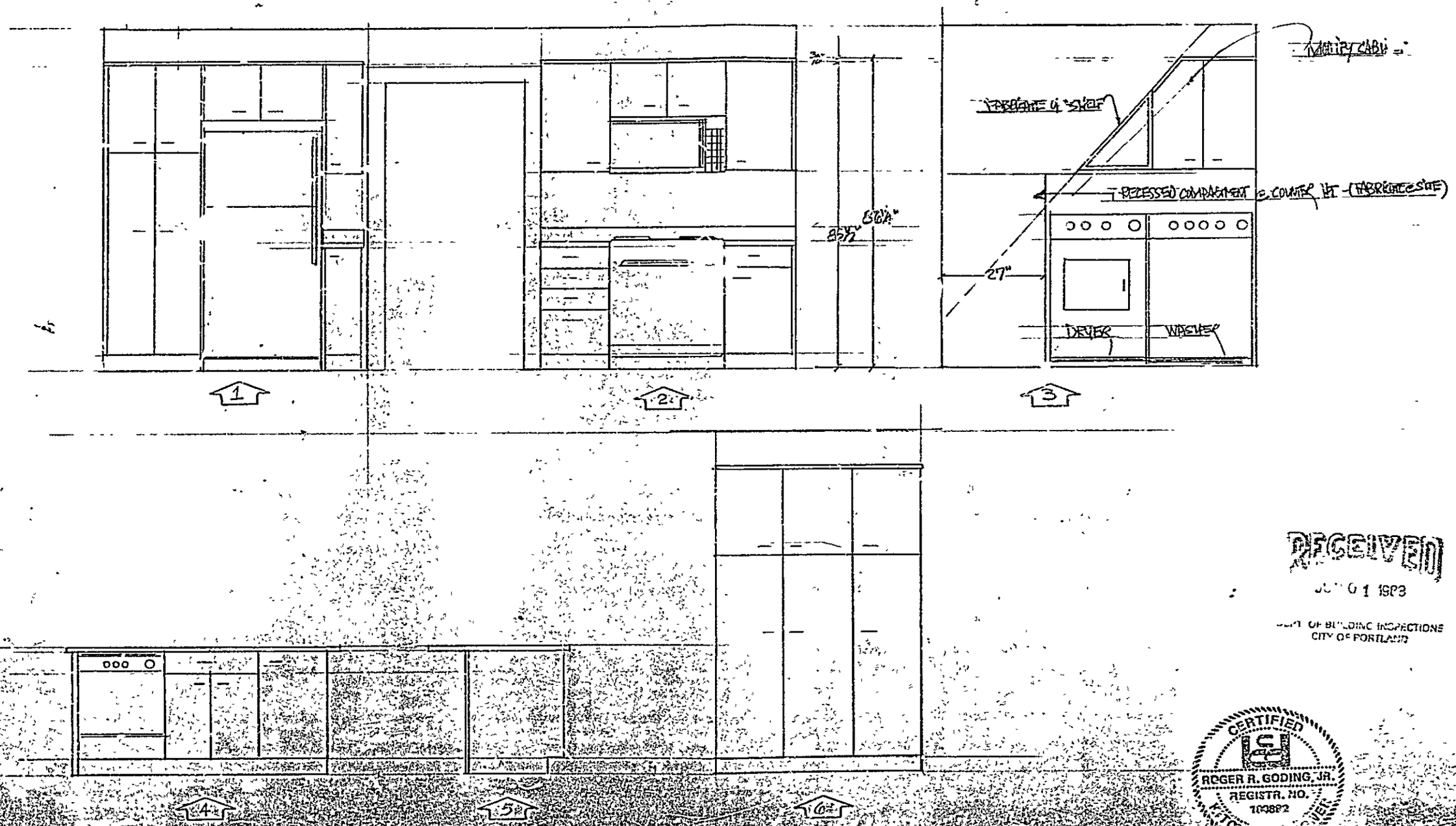
ELECTRICAL PLAN 4/9/93

7-75 WATT RECESSED HIGH HATS (1 BLK SIDE BATTLES)
2-S_3 SWITCHES
4-S_1 SWITCHES
8-⊖ / 2-⊖ 220 volt
1-D/WASHER FEED
1-RANGE HOOD FEED

TENNEY RESIDENCE
CUSHING ISLAND - CASCO BAY MAINE
SCALE - 1/2" = 1'-0" - RRC & CKD

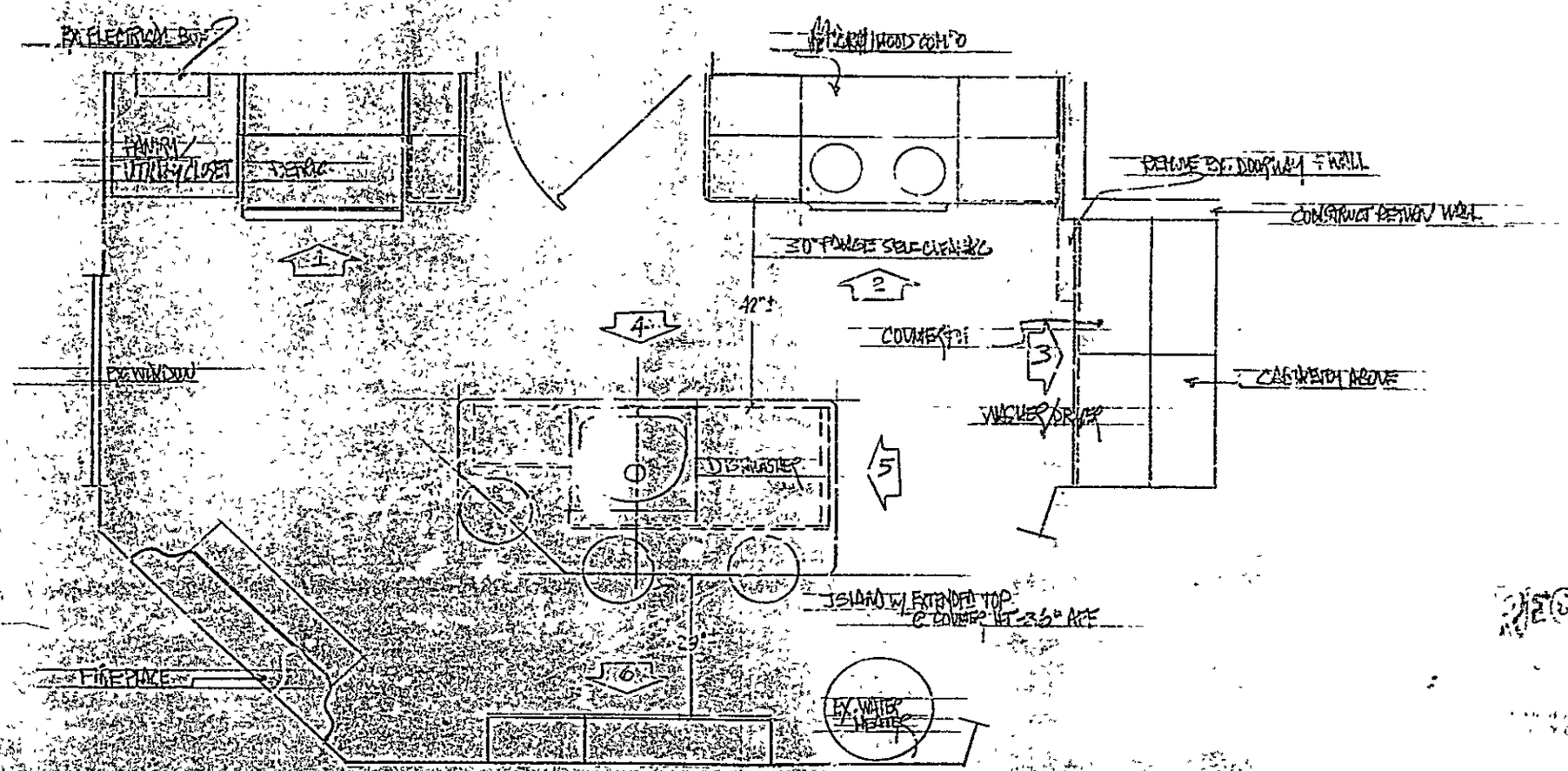
KITCHENS INC.
500 WOODFORDS ST.
PORTLAND MAINE 04103

CERTIFIED
ROGER R. CODING, JR.
REGISTR. NO.
100302
KITCHEN DESIGNER



RECEIVED
JUN 01 1993
DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

CERTIFIED
ROGER R. GODING, JR.
REGISTR. NO.
103892
STATE OF MAINE


EX. ELECTRICAL BOX
PANTRY/UTILITY CLOSET
DETAIL
1
EX. WINDOW
FIREPLACE
4
42"±
DISHWASHER
5
6
29"
30" RANGE SELF-CLEANING
2
COUNTER
3
WASHER/DRYER
CABINETRY ABOVE
REMOVE EX. DOORWAY & WALL
CONSTRUCT BETWEEN WALL
ISLAND W/ EXTENDED TOP
@ COUNTER HT. 36" AFF
EX. WATER HEATER
9" DP. PANTRY WALL & SHELVES
TENNEY RESIDENCE
CUSH. & ISLAND - CASED BAY, MAINE
SCALE: 1/2"=1'-0"
KITCHEN, DR.
PORTLAND, MAINE CAIDS
CERTIFIED
ROGER R. GODING, JR.
REGISTR. NO.
100302
KITCHEN DESIGNER