43-47 BEACON STREET

SHALLING

FMI Out 4920R 1 If cut 49202 Tt. 1 Cut 497036 120 0 400



#### FILL IN AND SIGN WITH INK

### APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Moine, December 3 1968

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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: .. No. Stories 12 ... Wew Building Name and address of owner of appliance Joseph Moore, 45 Beacon St. Installer's name and address Union Oil Company 63 Ocean St. So. Portland General Description of Work To install Oil burner(replacement) gravity hot water heat. IF HEATER, OR POWER BOILER If so, how protected? .... Kind of fuel? ... Kind of fuel? Minimum distance to burnable 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 vent-1? ...... ... ... ... ... ... ... ... 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 Texaco-guntype ... Labelled by underwriters' laboratories? Will operator be always in attendance? ... Does oil supply line feed from top or bottom of tank? bottom ...

Type of floor beneath burner ... concrete. ... Size of vent pipe ... Location of oil storage ..... basement ...... Number and capacity of tanks ...... 275 existing ......... Total capacity of any existing storage tanks for furnace burners ...... IF COOKING APPLIANCE Skirting at bottom of appliance? . . . . . . . . Distance to combustible material from top of appliance? From front of appliance ..... From sides and back ...... From top of smokepipe ..... From top of smokepipe Size of chimney flue ..... Other connections to same flue ..... Is hood to be provided? ...... If so, how vented? ..... Forced or gravity? ...... MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., \$1.00 additional for each additional heater, etc., in same OK 12-3-68- 8 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 Union Oil Company

Signature of Installer ... Welle

INSPECTION COPY

CIM

Date Issued 12/5/68 Portland Plumbing Inspector By ERNOLD R. GOODWIN	Addre Instal Owne Owne Plumb	ess lation Fo er of Bldg er's Addr per:	INSTALL PLUMBING  Section Street  Line Hoore  ess: 45 Heacon Street  subon Matz		IT NU	JMBER	<u>189</u> 40
App. First Insp.  Date  ENOLD R. GOODWIN  App. Final Insp.  Date TANGET R. GOODWIN  By BETT FOR GOODWIN  Type of Bldg.  Commercial  Residential  Single  Multi Family  New Construction  Remodeling	NEW	THE T	SINKS LAVATORIES "OILETS BATH TUBS SHOWERS DRAINS FLOOR HOT WATER TANKS TANKLESS WATER HEATE GARBAGE DISPOSALS SEPTIC TANKS HOUSE SEWERS ROOF LEADERS AUTOMATIC WASHERS DISHWASHERS OTHER	SURFAC	NO.	12/5	2,00
Building an	d Inspec	tion Ser	vic s Dept.: Plumbing Inspe	TO1	AL 1		2,00

PERMIT TO INSTALL PLUMBING 15277 Address 45 Bearon Stroet
Installation For: Mr. Moore Date 5/3/65
Issued 5/3/65
PORTLAND PLUMBING INSPECTOR Owner of Bldg. Samo Owner's Address: Samo By J.P. IGOTOH

APPROVED FIRST INSPECTION

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ERNOLO R. GOODWIN

ERNOLD R. GOODWIN

APPROVED FINAL INSPECTION

BY ENLIE PLUMBING INSPECTION

BY ENLIE PLUMBING INSPECTION

TYPE OF BUILDING

COMMERCIAL

RESIDENTIAL

SINGLE

MULTI FAMILY

NEW CONSTRUCTION

REMODELING

PORTLA Plumber: Rouben SINKS LAVATORIES TOILETS BATH TUBS SHOWERS DRAINS HOT WATER TANKS HOT WATER FANKS

TANKLESS WATER HEATE 95

GARBAGE GRINDERS

SEPTIC TANKS

HOUSE SEWERS

ROOF LEADERS (Conn. to house drain) 3 litching Machine 2.00 PORTLAND HEALTH DEPT. PLUMBING INSPECTION TOTAL > \$4.00

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y sayad. Valida AP- 43-47 Beacon Street

Sept. 13, 1962

Miss Frances S. Berry 45 Beacon Street

cc to: Corporation Counsel

Dear Miss Ferry:

Permit and certificate of occupancy for change of use of building at the above named location from a single family to a two family dwelling are not issuable under the Loning Ordinance for the following reasons:

- 1. The property is located in an R-3 Residence Zone where under the provisions of Section 4-A-1 thereof a two-family dwelling is not an allowable use.
- 2. The area of the lot on which the building is located is only 6500 square feet instead of the 13,000 square feet required by Section 4-B-S on the basis of 6500 square feet per family.

We understand that you would like to exercise your appeal rights concerning these discrepancies. Accordingly we are certifying the case to the Corporation Counsel, to whose office in Room 208, City Hall, you should go to file the appeal.

It is noted that there are two finished rooms in the third story, from which there is only one means of egress. Under the Building Code it is not permissible for these rooms to be used for living quarters in a two-family dwelling unless served by two means of egress complying with Code requirements. Therefore use of these rooms for living quarters in connection with one of the apartments cannot be authorized unless two means of egress are to be provided. If the second means of egress were to be provided by means of an outside fire escape, information as to the type of construction and location should be furnished before an appeal is filed, since it is likely that such a feature may have considerable bearing on the decision of the Board of Appeals.

Very truly yours,

Albert J. Sears Building Inspection Director

AJS:m



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# APPLICATION FOR PERMIT

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specifications, if any, submit	ted herewith and the fol	lowing specification	ns:	B? Dist. No.	
Location 40 Feacon	aureeu (45 T/	/	Within Fire Limit	8? DistNo	······································
Owner's name and address	l'rances S. ler	rv, 45 deacor	Street	Telephone	<del>,,,,,,,,,,</del>
Lesece's name and address		<del></del>	***************************************	Telephone Telephone	
Contractor's name and add	Iress	10	,	Telephone	······································
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				www.xconng www.xconn	
Estimated cost 8			)+	Fee \$ 2.00	
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and make and					
Ma Manual Harris	America o =	4		* PF =A 199645	
To Change Use of	building from 1-	family dwelli	ng to 2-far 🤼 :	welling house	
Without altera	tions - 2 finis	hed rooms on .	tim floor to be	used in connection	
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the name of the heating control  In any plumbing involved in	actor. PERMIT TO  D  n this work?	etsils of New Is any	O OWNER  electrical work involve	ed in this work?	
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#### APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, November 25, 1960

To the INSPECTOR	Portland, Maine, November 25, 1960
To the INSPECTOR OF EUILDINGS,	
ance with the Laws of Maire, the Willest for	a permit to install the following best
Location 45 Beacon St.	Code of the City of Poilland, and the following specifications:  Use of Puilding Dwelling No. Stories New Building Florence S Berry, 45 Beacon St.  Equation 1. Stories New Building Cooking or power equipment in accordance in the cooking of the cooking or power equipment in accordance in the cooking or power equipment in the cooking or power equipment in accordance in the cooking or power equipment in the cookin
Name and address of	. Use of Puilding Dwelling
Installation	Florence S Berry, 45 Beacon St. Frieties "
metaner's name and address Ballard Oil	Use of Puilding Dwelling No. Stories New Building Florence S Berry, 45 Beacon St. Existing "  & Equipment Co. 135 Marginal Way Telephone 2-1991
	1991 Telephone 2–1991
To install Gravity hot water boile	r(replacement) reinstalling oil human
	······································
	HEATER, OR POWER BOILER Any burnable material in floor surface or beneath?
If so how protect to	Any burnable material in floor surface and
Minimum 1:	Wind a C can beneath? no
Will sufficient fresh air be supplied to the	Rated maximum demand per hour  mice to insure proper and safe combustion?  JE OU BURNANGE
of supplied to the applia	mee to insure proper and safe combustion?
NT.	IF OIL BURNER
Name and type of burner	
Will operator be always in attendance?	Does oil supply line feed from top or bottom of tank?
Will all tanks be more than 6	. Make
form capacity of any existing storage tanks for	. Make
Location of appliance	APPLIANCE
If so, how protected?	Any burnable material in floor surface on beauty
Skirting at hottom of the	Height of Long 's
and brovided!	and the state of t
If gas fired, how vented?	f so, how vented?
	Rated maximum demand per hour
	ON OF BEIAL INFORMATION
	The second section of the second seco
	***************************************
Amount of the same and the same	
building at same time \ (\$2.00 for or	16 heater etc. 50 and the first state of the first
at same time.)	ne heater, etc., 50 cents additional for each additional heater, etc., in same
aren: 17	]
The state of the s	
11. 11. 10.60 17711	Will those by the
The state of the s	Will there he in charge of the above work a person competent to
	The state and City registrements marks:
	· · · · · · · · · · · · · · · · ·
	Balland Oil & Equipment Company
	! Weller del & Ging 6
Signature of Inci	tollar by:



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED

### APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

	Portland, Maine,		
To the INSPECTOR OF BUILDINGS, PORTLAND, ME.  The undersigned hereby applies for a permit to instaccordance with the Laws of Maine, the Building Code of	the City of Portland, and t	the following spec	incations:
Location 45 Beacon St Use of Building	Home	_No. Stories_12	New-Building Existing "
Name and address of owner of appliance Mrs. Fred Be	TIV HOLLEGOOD JI		3-6495
Installer's name and address Fasternoil Equipmer	iti Co. 15 Portland St	Telephangow H	5484 <del>8</del> FF(IVF   A 150
General Descri	ption of Work	ON CLOSING-I	N IS WAIVED
To install One Easternoil Automatic Oil E	durner		
10 IDSTAIL		ERTIFICATE	OF OCCUMANT
TION OF THE PARTY			TTO WATER
IF HEATER, POWER BOIL	E/ OR COOKING DEVICE	·	
Is appliance or source of heat to be in cellar?If not,	which storyKind	of Fuel	
Material of supports of appliance (concrete floor or what kind	) Cement		
Minimum distance to wood or combustible material, from top of appliance or casing top of furnace,			
from top of smoke pipefrom front of appliance	from sides o	r back of appliance	
Size of chimney flueOther connections to same fl	ue		
*		W 0, 0 C	. 1
Name and type of burner_Easternoil	ر ه Labeled and approved by Ur.	iderwriters' Labora	tories?
Will operator be always in attendance?	Type of oil feed (gravity o	or pressure). Zee	54/2
Location oil storage Linelice 275	No. and capacity of tanks_	1-275 Ga	1 Tank
Will all tanks be more than seven feet from any flame? You	.How many tanks fireproofe	ed?	
Amount of fee enclosed? / (\$1.00 for one heater, et		ach additional heat	r, etc., in same

, \*\*\*

April 7, 1939 ,

Mr. H. N. Fisk, 502 Deering Avenue, Portland, Maine

Dear Sir:

If I understand the proposed manner of construction of the second story addition for Mrs. Berry at 45 Beacon Street, some of the cantilover beams do not seem to figure out strong enough, one of them falling short by a considerable margin.

This is an unusual structu. Id although not very large in size requires considerable figuring to mak mire that the stresses will not be excessive in the unusual circumstances. From your plan is not in as precise detail as it ought to be in order to make sure that we are investigating it exactly as you intend to frame it.

We cannot afford more time to go into this matter in the way of having you change the size or species of the members to meet with our figures because under such a circumstance we are largely designing the structure and the city would be thereby in direct competition with men who make their livelihood from their ability to design such structures.

T suggest that you get a competent designer to go over this matter and to give you the correct sizes and arrangement, making a detailed plant based on his figures of design rather than your judgment.

I am sure that you will understand thy we cannot go into this further

Vory truly yours,

WicD/H CC: Mrs. C. Frad Berry 45 Beacon Street Inspector of Buildings



# APPLICATION FOR PERMIT ISSUED

C s of Building or Type of Structure Third of	E ZONE APR 3 1939
o the INSPECTOR OF BUILDINGS, PORTLAND, ME.	AF711_4, 1920
The undersigned basely applies for a permit to much also through the fallowing I at	ling Mwsokwa-agrimmant in accordance
ith the Laws of the State of Maine, the Building Code of the City of Portland, plans and s and the following specifications:	pocifications, if any, submitted herewith as 45
	Limits?noDist. No
wner's or Lessre's name and address Mrs. C. Fred Borry, 45 Beacon 8	
ontractor's name and address H. N. Fisk, 102 Learing Aye.	Telephone 4-3616
	Plans filed yesNo. of sheets 1
roposed use of building direlling house	No. famili = 2
ther buildings on same lot garage	The state of the s
stimated cost \$ 275.  Description of Present Building to be Alte	Fee \$
aterial wood No. stories 2 Heat Style of roof pite	
ast use dwelling house	h Roofing asphalt  No. families 2
General Description of New Work	No. ramines
o bprovide second story sum parlor over existing one story re o change window to door to lead into same	ar addition - 13*9" x 6*7"
Consider and to door to read into sense (1st story 7.	7"x10'3")
	CERTIFICATE OF OCCUPANCI
is understood that this permit does not include installation of heating apparatus which is to be to	aken out separately by and in the name of
heating contractor.  Details of New Work	, and the second of the second
no Height average grade	yes to top of plate
ze, frontdepthNo. stories Height average grade t	
be elected on solid or filled and?earth or rock	
aterial of foundation 4" 17 2 0100 on encross top bottom	collar tother
aterial of underpinning Height	Thickness
ind of Roof fint (hipped) Rise per foot A Roof covering Asphal	s rooring Glass C Und Lag
o. of chimneys to Meterial of chimneys	of lining
ind of heatType of fuelIs	gas fitting involved?
aming Lumber-Kind hemlock Dressed or Full Size?	dressed
orner posts 4x6 Sills 4x8 Girt or ledger beard?	Size
aterial columns under girdersSize	Max. on centers
uds (outside walls and carrying partitions) 2x4-19" O. C. Girders 6x8 or larger.	Bridging in every floor and flat roof
an over 8 feet. Sills and corner posis all one piece in cross section.  Joists and rafters:  1st floor, 2nd, 2nd	
joist and rate , ord , o	, root
On centers: 1st floor 2nd 16" 2nd	mas 118
On centers: 1st floor 2nd 16 3rd	
Maximum span : 1st floor, 2nd101, 3rd	, roof
Maximum span : 1st floor	, roof
Maximum span: 1st floor, 2nd101, 8rd	, roof
Maximum span: 1st floor	, roof
Maximum span : 1 st floor	, roof
Maximum span: 1st floor, 2nd10^4, 3rd	, roof
Maximum span: 1st floor	n the proposed building?
Maximum span: 1st floor	n the proposed building?

INSPECTION COPY

Permit No. 39 /3 49		7		
Lastion 45 Beaces St.	,		N 5 1 2 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Owner Mar C A R			10 S 1 S 18	
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if. closing-in		3.		9 4 5
ing-in		7	19 2 24	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Final Notif.		,; j.	1	
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Final Hisph. 5/4/39			# \$ 15.	
Cert. of Occupancy issued Nove		<i>X</i> )		
4/14/39- Noves started-		3 ;		
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Hoyky - Faming will C		. 1 -:		
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4/28/39 Wire progression				
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5/4/39-Work about com				
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Sec.	3.			/

### PERMIT IS

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

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 45 Beacon Street Use of Building Dwelling
Name and address of owner Mrs. C. F. Berry, 4b Educor Stree Word
Contractor siname and address Automatic Oil Worth and Company
General Description of Work
To install
IF OIL BURNER
Na me and type of burner_PIONEER Labeled and approved by Underwriters' Laboratories? VES  Will operator be always in attendance? NO Type of oil feed (gravity or pressure) PRESSURE  Location oil storage BASEMENT No. and capacity of tanks ONE- 27/5-GALLON  Will all tanks be more than seven feet from any flame?YES_How many tanks fireproofed?
Amount of fee enclosed? \$1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in some building at same time.)
INSPECTION COPY  Signature of contractor AUTOMATIC OIL HEATING CO.

ا ۱ - ۲ - ماناهانه الله جمعالات مد	-0.H
Ward & Permit No. 33/808	
Location 45 Beacon Street	1
Owner Mrs. C. 7. Boury	1
Date of permit 4/26/33	}
Notif. closing in	
Inspn. closing-in	
Final Notif. 7/18/33	
Final Inspn. 7/18/33 O.T. 086.	er <sub>d</sub> <sup>3</sup>
Cert. of Occupancy issued Rone.	• • •
7/18/33, NOTES	;
Jank and frifting to burners	
I. Bind of heat was a manufactured of the land of heat was a manufactured of the land of t	] i. 
S. Anti-siphon	1
4. On storage Old unstallater	
Tank distance	1:
6. Vent pipe Ald installation,	<u> </u>
8. Gaugo / Mont	1
9. Elgidiy	1:
10. Feed sefety	1
12. Control valve	Ì
28, Ash pit vent	1
1. Temp. or pressure safety	1
15. Instruction card	1

(4) 1



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 the Po INSPECTOR OF BUILDINGS:	rtland,	August 8,19	23 192:
	The undersigned applies for a permit to Location 45 Beacon	alter the following d	escribed building:	
	Name of Owner or Lessae Charles F Romer	War.i,	in fire-limits?.	, no
	Name of Owner or Lessee, Charles F Berry	Addres	9 45 Beacon	
	" " Contractor, Nathanial Berry		45 Beacon	
Descrip-	Motoriol of Duita' ' Track	nitah		
ion of	Size of Building is 47ft for the state of Root,	Mate	rial of Roofing,	ungie
Present	Size of Building is 47ft feet long; 25ft  Cellar Wall is constructed of 5tons	feet wide. N	o. of Stories,	3 **
Bldg,	Undernianing in DFICK	wide on bottom and	i batters to	inches on top.
€. ₩ ;	Height of Building 79.94 Watt & D. 1.1	thick; is	feet in height.	•
	Height of Building 38.5t. Wall, if Brick; 1st,	2d,3d,	4th,	5th,
	What was Building last used for?	dwellingNo. of	Families?_Z	
;'	What will Building now be used for?			
	DETAIL OF PROP			
!	repair goof after fire all to comply with	the building	dinan <b>ce</b>	
				,~
	k.			······································
				***************************************
	**************************************		••••	
		Esti	nated Cost \$5	00
	IF EXTENDED OF			
	Size of Extension, No. of feet long?; No. of feet wi		tara tata di dina	
	No. of Stories high?; Style of Roof?	10, OF 1	eet nigh above side	walk?
•	Of v.nat material will the Extension be built?	, Mate	rial of Roofing?	
	If of Brick, what will be the thickness of External Walls?		dation?	••••••••••
	Frow will the extension be occupied?	Inches; and	Party Walls	inches.
				;}
	WHEN MOVED, RAISED	OR BUILT U	PON	
	No. of Stories in height when Moved, Raised, or Built upon	?Propo	osed Foundations	
	No. of feet high from level of ground to highest part of Roo	f to be?		•
	How many feet will the External Walls be increased in heigh	it?	Party Walls	*******************************
		***************************************		
		, , , , , , , , , , , , , , , , , , ,		
		************************************		
		***************************************		······································
	IF ANY PORTION OF THE EXTERNAL (	OR PARTY WA	LLS ARE REN	AOVED
!	Will an opening be made in the Party or External Walls?		n.	Ce
:	Size of the opening?	How protected?		Story.
1	How will the remaining portion of the wall be supported?			proceeding adjusted the first and
	Signature of Owner or Authorized Representative	MANA	/)	
	representative	147 Illan	1/18	
	; Address	4 hours	K/W	



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 to Build (Sa CLASS BUILDING)

	Pottl	and, Me.,	Jano 29 1917 19	٠Ó
	TO THE INSPECTOR OF BUILDINGS:			
	The undersigned hereby appli Specifications:—		to build, according to the following	
,	Location,45 Beacon St.	*****	wa 8	
	Name of owner is? C F. Berry	Address 45	Beacon St.	
	Name of mechanic is? Owner.			4-
:	Name of architect is?			
•	Proposed occupancy of building (purpose)?private		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7
	If a dwelling or tenement house, for how many families?	***		
	Are there to be stores in lower story?	NO		3
	Size of lot, No. of feet front?; No. of feet rear?		No. of feet deep?	Ú
'	Size of building, No. of feet front?; No. of feet rear?		No. of feet deep?29	***
	No. of stories, front?; rear?			Ū
	No. of feet in height from the mean grade of street to the highest p.	art of the root	F12.ft	£1
i	Distance from lot lines, front?70feet; side?2fe	eet; side?	feet; rear?10feet	2
	Firestop to be used?	••••••		C
	Will the building be erected on solid or filled land?	**********		Ī
	Will the foundation be laid on earth, rock, or piles?	••••••••	*************************	7
	If on piles, No. of rows?distance on centres?.		length of?	-
	Diameter, top of?diameter, botto	m of?	************************	т
	Size of posts ?	• • • • • • • • • • • • •	*********	T
ı	" girts?			O
	" floor timbers? Ist floor consrete, 2d	, 3d	4th	RE
	O. C. " " " " " "	, "		1-1
	Span " " " " "	, "	#	田田
	Braces, how put in?	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Ö
	Building, how framed?			$\bar{z}$
	Material of foundation?thickness of?	<b>.</b> !	aid with mortar?	Z
	Underpinning, material of? nosts height of?		alitation on	$\frac{Z}{C}$
	Will the roof be flat, pitch, mansard, or hip?	Material of re	ofing? Slate surface Ashphalt	<b>4</b> .
	Will the building be heated by steam, furnaces, stoves or grates?	NoneWi	on walls If the flues be lined?	≶
-	with the building contorm to the requirements of the law 100			C
	No. of brick walls?and where placed?			Ż
	Means of egress?		********	
• •	ting the second of the second	•		
	*			
	If the building is to be occupied as a Tenement Ho			
	What is the height of cellar or basement?		~ * * * * * * * * * * * * * * * * * * *	
	What will be the clear height of first story? sec	ond?	third?,	
	State what means of egress is to be provided?		* * * * * * * * * * * * * * * * * * * *	
		d stepladder te	roof?	0
	Estimated Cost.	10	27	
	Signature of owner or authors	JAN.	Ran	
	\$ 200.00 ized representative,	NIV	100-14	
	Arldress,	45 75	rate &	
	Diama and uniteral 2	<del></del>		
	Plans submitted?Recrived	by?	**********************	2

Plans must be submitted in duplicate, one set to be filed with the Department ar approval of the Inspector of Buildings) shall be kept on the work

912790	Man # Lot#
City of Portland Bullping Perwill Africa	ATION Fee \$50. Zone RAD PERMIT ISSUED
Please fill out any part which applies to job. Proper plans must accompany to m	
Owner: Timothy Burton Phone # 772-0240	For Official Use On y JUL - 3 1991
Address: 45 Beacon St; Ptld, ME 04103	Pate 6/21/91
AS REJECTO ST.	I DRIVE LAMING
Contractor: Equincox Bldrs. Inc Sub.: 846-3744	- · · · · · ·
Address: 6 Hawkhorne Rd; No Varmouth Phone # ME 04096	5700
named the later than wint, renov	Zoning: K-3 12 Leile mass
Est. Construction Cest: \$6200 Proposed Use: 1-fam	Street Frontage Pr. ide4: Back Side Side
# of Existing Res. Units # of New Res. Units	Review Required:  Zouing Board Approval: Yes No Date: Pinning Board Approval: Yes No Date: Conditional Use: Variance Site Plan Subdivision Shoreland Zoning Yes No Floodplain Yes No
# of Existing Res. Units	Zoning Board Approval: YesNo Date: Cubdicion
# Stories: # P~irooms Int Size:	Conditional Use: Variance Site Plan Subdivision Floodolain Yes No
# Stories: Conversion	
Is Proposed Use: Seasonal Condominium Conversion  Explain Conversion Interior renovations & windows	Other (Explain)
Explain Conversion Dicertor Telepotation	
Foundation:	1. Ceiling Joists Size:  2. Ceiling Strapping Size  3. Type Ceilings:  4. Insulation Type  5. Ceiling Height:  Roof:  Roof:  Approved.
1. Type of Soil: 2. Set Backs - Front Rear Side(s)	4. Insulation Type Size Require Review
2. Set Backs - Volte 3. Footings Size: 4. Foundation Size:	F. Ceiling Height: Approved.
5. Other	1. Truss or Rafter Size Size Size
	5. Ceiling Height:  Roof:  1. Truss or Rafter Size Size Approved. 2. Sheathing Type Size Deniga: 3. Roof Covering Type Chimneys: Type: Number of Fire Places Signature: Type of Heat:
Sills must be anchored.	Chimneys: Number of Fire Places Signstore:
1. Silts Size: 2. Girder Siz.: 3. Lelly Column Spacing: 4. Joista Size: 5. Bridging Type: Size: Spacing 16" O.C.	Chimneys:  Type:  Number of Fire Places  Signstiff:  Type of Heat:  Electrical:  Service Entrance Size:  Plumbing:  Number of Fire Places  Signstiff:  No  No  No
4. Joists Size: Spacing 16" O.C.	Type of Heat:
4. Joista Size: Spacing 16 U.C.  5. Bridging Type: Size: Size: Size:	Electrical: Smoke Detector Required Yes No
7. Other Material:	Plumbing: 1. Approval of soil test if required Yes No
Exterior Walls:	
t Civ. 11i- a Circ	3. No. of Flushes 4. No. of Lavatories
2. No. windows	4. No. of Lavatories 5. No. of Oth · Fixtures
A. Honder Sizes Span(s)	
5. Bracing: Yes No	Swimming Pools:  1. Type: 2. Pool Size: 3. Must conform to National Electrical Code and State Law.
7. Insulation Type Size	3. Must conform to National Electrical Code and State Law.
8. Sheathing Type Size Weather Exposure	Permit Received By Tourise E. Chase
5. Bracing: Yes No	Data Il have 91
11. Mctal Maccinate	Signature of Applicant Date Date
Interior Walls:   Spacing	Signature of Applicate Dick Baker.  Signature of CEO Date
	Digitature of ODO
4. Fire Wall if required	Inspection Dates
5. Other Materials White-Tax Assesor Yellow-G	Inspection Dates PCOG White Tag -CEO Copyright GPCOG 1888
1111 201	makes where he is a constant traditional to the second traditional

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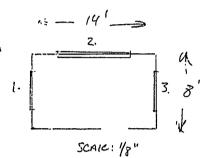
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PLOI FLAN			T
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FEES (Breakdown From Front Base Fee \$ 50 - Subdivision Fee \$ Site Plan Review Fee \$ Other Fees \$		Inspection Record Type	Date / / / / / / / / / / / / / / / / / / /
(Explain)			
Late Fee \$			
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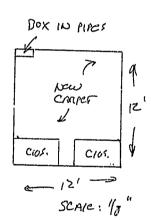
WOORE/BUTTON AWPETITY
45 BEACON SI. POTTRAND, Me.

DOK BAKET Equinox Builder Euc. 846 3744

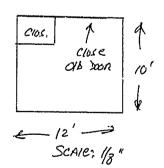
(1) remove AND TREPLACE 3 LATGE WINDOWS ON SUN TROOM.



@ remove AND TREPLATE 2 EXISTENG CLOSETT AND CATEPETING IN TREDITION 4.1



- (3) CLOSE OID SOURCEARY AND BUILD NEW CLOSET IN BED MOON #2
- (4) 150-59. FT. WAUPAPER STEAMING BOXING IN TWO WEAT PIPES IN CORNER OF BEDROOM #1



All INTERIOR RENOVATION

Permit #BUILDING PERMIT APPLICE Please fill out any part which applies to job. Proper plans wust accompany form.	CATION Fee_\$50. ZoneMap #Lot#
riease ini out any part which applies to just the property of	TAN DEDINET CONTROL
Qyper: Timothy Burton Phone 772-0240	For Official Use Only (*ERIMI SSUED)
Address: 45 Beacon St; Ptld, ME 04103	For Official Use On Subdivision PERMIT ISSUED
LOCATION OF CONSTRUCTION 45 Beacon St.	
LOCATION OF CONSTRUCTION 45 Beacon St.	Inside Fire Limits of JUL position of JUL position of December 199
Contractor Equinox Bldrs. Inc Sub.: 846-3744	Time Limit. Private
Address: 6 Hawthorne Rd: No Yarmouth Phone # ME 04096	1 national Cont. 10200
Est. Construction Cost: \$6200 Proposed Use: 1-fam w int. renov	Zoning: R-3 Parederce LITT OF PORTLAND  Street Frontage Provided: Rock Side Side
Est. Construction Cost: \$6200 Proposed Osc. 1-1 am	Street Frontage Provided: Provided Setbacks: Front Back Side Side Side
Past Use: 1-j am	
# of Frieting Res. Units # of New Res. Units	Review Required:  Zoning Board Approval: YesNoDate:
Building Dimensions LW Total Sq. Ft	Planning Board Approval: Yes No Date:
# Stories: # Bedrooms Lot Size:	Zoning Board Approval: YesNoNo
	Shoreland Zoning Yes No Floodplate 1es No Special Exception
Is Proposed Use: Seasonal Condominium Conversion	Ches (Evoluin)
Explain Conversion Interior renovations & windows	Quanta (Explain)
	Ceiling: HISTORIC PRESERVATION
	Ceiling:  1. Ceiling Joists Size:  2. Ceiling Strapping Size  Spacing  Spacing  Restartistics nor 'andmark.
Foundation:	2. Ceiling Strapping Size Spacing
1. Type of Soil:RearSide(s)	2. Ceiling Strapping Size Size Does not require review.  4. Insulation Type Size Requires Review.
3. Footings Size: 4. Foundation Size:	5. Ceiling Height: Requires xeynew.
4. Foundation Size:	<b>松金田正町車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車車</b>
5. Other	Roof:  1. Truss or Rafter Size Span Action Approved.
Floor:	2. Sheathing Type
Sille must be anchored.	Chimneys:
2. Girder Size:	1. Truss or Rafter Size Span Action. Approved with Conductor 3. Roof Covering Type Size Number of Fire Places Under Size Span Action.
1. Sills Size:	Heating: Type of Heat:
4. Joises Size: Spacing 16" O.C.  5. Bridging Typ:: Size:	Type of Heat:
6. Floor Sheathing Type: Size:	Electrical: Smoke Detector Required YesNo
7. Other Material:	71Li
	Plumbing:  1. Approval of soil test if required YesNo  2. No. of Tubs or Showers
Exterior Walls: 1. Studding Size Spacing	2. No. of Tubs or Showers
2. No. windows	4 No. of Layotories
3. No. Doors	4. No. of Lavatories 5. No of Other Fixtures
4. Header Sizes Span(s) 5. Bracing: Yes No	Swimming Peols:
5. Bracing: Yes No	1. Type: Sounce Footage
7. Insulation Type Size	Swimming Pools:  1. Type: 2. Fool Size: 3. Must conform to National Electrical Code and State Law.
6. Gracing: tes Size 6. Corner Posts Size 7. Insulation Type Size 8. Sheathing Type Size 9. Siding Type Weather Exposure 10. Masonry Materials	
9. Siding Type Weather Exposure	Permit Received By Louise E. Chase
10. Masonry Materials	Signature of Applicant Dec RAKEN Date 21 June 91
Totalou Waller	Signature of Applicant
1. Studding Size Spacing 2. Header Sizes Span(s)	Signature of CEO Dick Baker Date
2. Header Sizes Span(s)	Signature of CEO
3. Wall Covering Type	Towards - Determine
	Inspection Dates
5. Other Materials White-Tax Assesor Yellow-G	PCOG White Tag -CEO Co Ma Copy To The State of the PCOG