

43-47 BEACON STREET



Full cut #920R 1 fl cut #02021 Tr. 1 cut #02031 2th cut #920AP



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, December 3 1968

PERMIT NO. 1254 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 45 Beacon St. Use of Building Dwelling No. Stories 1 1/2 New Building Existing
Name and address of owner of appliance Joseph Moore, 45 Beacon St.
Installer's name and address Union Oil Company 65 Ocean St., So. Portland Telephone

General Description of Work

To install Oil burner(replacement) gravity hot water heat.

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? 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 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 Texaco-gunttype 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 concrete Size of vent pipe 1 1/2"
Location of oil storage basement Number and capacity of tanks 275 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 smokepipe
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

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., \$1.00 additional for each additional heater, etc., in same building at same time.)

APPROVED: OK 12-3-68- [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
Union Oil Company
by: [Signature]

[Handwritten mark]

PERMIT TO INSTALL PLUMBING

Date Issued **12/5/68**  
 Portland Plumbing Inspector  
 By **ERNOLD R. GOODWIN**

App. First Insp.  
 Date **DEC 6 - 1968**  
 By **ERNOLD R. GOODWIN**

App. Final Insp.  
 Date **DEC 6 - 1968**  
 By **ERNOLD R. GOODWIN**

Type of Bldg.

- Commercial
- Residential
- Single
- Multi Family
- New Construction
- Remodeling

Address <b>15 Beacon Street</b>		PERMIT NUMBER <b>18940</b>
Installation For		
Owner of Bldg.: <b>Joe Moore</b>		
Owner's Address: <b>15 Beacon Street</b>		
Plumber: <b>Rauber Mata</b>		Date: <b>12/5/68</b>
NEW	REPL	NO. FEE
		SINKS
		LAVATORIES
		TOILETS
		BATH TUBS
		SHOWERS
		DRAINS FLOOR SURFACE
		HOT WATER TANKS
		TANKLESS WATER HEATERS
		GARBAGE DISPOSALS
		SEPTIC TANKS
	<b>1</b>	HOUSE SEWERS
		ROOF LEADERS
		AUTOMATIC WASHERS
		DISHWASHERS
		OTHER
		TOTAL <b>1 2.00</b>

Building and Inspection Services Dept.: Plumbing Inspection

PERMIT TO INSTALL PLUMBING *repl work*

15277

PERMIT NUMBER

Address 45 Beacon Street

Installation For: Mr. Moore

Owner of Bldg. Same

Owner's Address: Same

Plumber: Ruben Katz

Date: 6/10/65

Date Issued 6/9/65

PORTLAND PLUMBING INSPECTOR

By J.P. Welch

APPROVED FIRST INSPECTION

Date 7/1/65

By ERNOLO R. GOODWIN

CHIEF PLUMBING INSPECTOR

APPROVED FINAL INSPECTION

Date 7/6/65

By ERNOLO R. GOODWIN

CHIEF PLUMBING INSPECTOR

TYPE OF BUILDING

COMMERCIAL

RESIDENTIAL

SINGLE

MULTI FAMILY

NEW CONSTRUCTION

REMODELING

NEW	REPL	PROPOSED INSTALLATIONS	AMOUNT	FEE
	1	SINKS		
		LAVATORIES	1	22.00
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE GRINDERS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS (Conn. to house drain)		
1		Washing Machine	1	2.00

PORTLAND HEALTH DEPT. PLUMBING INSPECTION TOTAL ▶ 24.00

AP- 43-27 Beacon Street

Sept. 13, 1962

Miss Frances S. Berry  
45 Beacon Street

cc to: Corporation Counsel

Dear Miss Berry:

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 Zoning 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-3 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

R3 RESIDENCE ZONE



### APPLICATION FOR PERMIT

City of Building or Type of Structure Third Class  
Portland, Maine September 12, 1962

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE:

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment 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: 45 Beacon Street (43-47) Within Fire Limits? \_\_\_\_\_ Dist. No. \_\_\_\_\_

Owner's name and address: Frances S. Perry, 45 Beacon Street Telephone \_\_\_\_\_

Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_

Contractor's name and address \_\_\_\_\_ Telephone \_\_\_\_\_

Architect \_\_\_\_\_ Specifications \_\_\_\_\_ Plans \_\_\_\_\_ No. of sheets \_\_\_\_\_

Proposed use of building: Install No. families: 2

Last use: " No. families: 1

Material: Frame No. stories: 2 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_

Other buildings on same lot: Garage

Estimated cost \$ \_\_\_\_\_ Fee \$ 2.00

#### General Description of New Work

- To Change Use of building from 1-family dwelling to 2-family dwelling house without alterations - 2 finished rooms on <sup>3rd</sup> floor to be used in connection with 2nd floor apt. - only one stairway from third floor

*Appeal never filed.*

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** owner

#### Details of New Work

Is any plumbing involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_

Is connection to be made to public sewer? \_\_\_\_\_ If not, what is proposed for sewage? \_\_\_\_\_

Has septic tank notice been sent? \_\_\_\_\_ Form notice sent? \_\_\_\_\_

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 \_\_\_\_\_ Kind of heat \_\_\_\_\_ fuel \_\_\_\_\_

Framing Lumber - Kind \_\_\_\_\_ Dressed or full size? \_\_\_\_\_ Corner posts \_\_\_\_\_ Sills \_\_\_\_\_

Size Girder \_\_\_\_\_ Columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_

Kind and thickness of outside sheathing of exterior walls? \_\_\_\_\_

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

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 \_\_\_\_\_ number commercial cars to be accommodated \_\_\_\_\_

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? \_\_\_\_\_

APPROVED: \_\_\_\_\_

#### Miscellaneous

Will work require disturbing of any tree on a public street? No.

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: Frances S. Perry

PH



FILL IN AND SIGN WITH INK

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

Portland, Maine, November 25, 1960

RECEIVED  
01803  
NOV 27 1960  
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 45 Beacon St. Use of Building Dwelling No. Stories 2  New Building  Existing "  
Name and address of owner of appliance Florence S Berry, 45 Beacon St.  
Installer's name and address Ballard Oil & Equipment Co., 135 Marginal Way Telephone 2-1991

#### General Description of Work

To install Gravity hot water boiler (replacement) reinstalling oil burner

#### 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 18"  
From top of smoke pipe 18" From front of appliance 4" From sides or back of appliance 3"  
Size of chimney flue 8x10 Other connections to same flue none  
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? yes

#### IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?  
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?  
Type of floor beneath burner Size of vent pipe  
Location of oil storage Number and capacity of tanks  
Low water shut off Make No.  
Will all tanks be more than five feet from any flame? 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 smokepipe  
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

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:  
R. J. 11-26-60  
[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

Ballard Oil & Equipment Company

by: Ed Thomas

Signature of Installer

CS 300

INSPECTION COPY

P. H.



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED

Permit No. 60

SEP 25 1923

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 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 St Use of Building Home No. Stories 2 New Building  
Existing "        "  
Name and address of owner of appliance Mrs. Fred Berry 45 Beacon St. 3-6495  
Installer's name and address Easternoil Equipmnt Co. 15 Portland St. Telephone 34948

General Description of Work

NO APPLICATION BEFORE LAID  
OR CLOSING-IN IS WAIVED

To install One Easternoil Automativ Oil Burner

CERTIFICATE OF OCCUPANCY  
REQUIREMENT TO WATER

IF HEATER, POWER BOILER OR COOKING DEVICE

Is appliance or source of heat to be in cellar? Yes If no., which story \_\_\_\_\_ Kind of Fuel oil  
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 pipe \_\_\_\_\_ from front of appliance \_\_\_\_\_ from sides or back of appliance \_\_\_\_\_  
Size of chimney flue \_\_\_\_\_ Other connections to same flue \_\_\_\_\_

IF OIL BURNER

Name and type of burner Easternoil Labeled and approved by Underwriters' Laboratories? ok'd by A.V.H.  
Will operator be always in attendance? \_\_\_\_\_ Type of oil feed (gravity or pressure) Pressure  
Location oil storage cellar inside 275 No. and capacity of tanks 1-275 Gal Tank  
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 same building at same time.)

Inspection  
ORIGINAL:

Signature of Installer Easternoil Equipmnt Co. 3-6495



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 cantilever beams do not seem to figure out strong enough, - one of them falling short by a considerable margin.

This is an unusual structure and although not very large in size requires considerable figuring to make sure that the stresses will not be excessive in the unusual circumstances under which the loads are applied. Then 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.

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

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

Very truly yours,

WJCD/H  
CC: Mrs. C. Fred Berry  
45 Beacon Street

Inspector of Buildings



(3A) SINGLE RESIDENCE ZONE - A PERMIT ISSUED  
 APPLICATION FOR PERMIT Permit No. 0048  
 GENERAL RESIDENCE ZONE  
 Class of Building or Type of Structure Third Class APR 3 1939

Portland, Maine - April 4, 1939

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.  
 The undersigned hereby applies for a permit to erect alter ~~insert~~ 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 45 Beacon Street Within Fire Limits? no Dist. No. \_\_\_\_\_  
 Owner's or lessor's name and address Mrs. C. Fred Barry, 45 Beacon Street Telephone \_\_\_\_\_  
 Contractor's name and address H. N. Fisk, 302 Leaning Ave. Telephone 4-3616  
 Architect \_\_\_\_\_ Plans filed yes No. of sheets 1  
 Proposed use of building dwelling house No. families 2  
 Other buildings on same lot garage  
 Estimated cost \$ 275. Fee \$ .75.

Description of Present Building to be Altered

Material wood No. stories 2 1/2 Heat \_\_\_\_\_ Style of roof pitch Roofing asphalt  
 Last use dwelling house No. families 2

General Description of New Work

To provide second story sun parlor over existing one story rear addition - 13'9" x 6'7"  
 To change window to door to lead into same (1st story 4'7" x 10'3")

CERTIFICATE OF OCCUPANCY  
 PERMIT IS WANTED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

no yes  
 Height average grade to top of plate \_\_\_\_\_  
 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 4" x 2" pipe on concrete cap anchored to ends Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
 Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
 Kind of Roof flat (hipped) Rise per foot 1" Roof covering Asphalt roofing Glass C Und. Lin.  
 No. of chimneys no Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_  
 Kind of heat \_\_\_\_\_ Type of fuel \_\_\_\_\_ Is gas fitting involved? \_\_\_\_\_  
 Framing Lumber—Kind hemlock Dressed or Full Size? dressed  
 Corner posts 4x6 Sills 4x8 Girt or ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
 Material columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
 Studs (outside walls and carrying partitions) 2x4-14" 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 2x8, 3rd \_\_\_\_\_, roof 2x6  
 On centers: 1st floor \_\_\_\_\_, 2nd 16", 3rd \_\_\_\_\_, roof 24"  
 Maximum span: 1st floor \_\_\_\_\_, 2nd 10', 3rd \_\_\_\_\_, roof 7'

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  
 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 Mrs. C. Fred Barry

INSPECTION COPY Signature of owner By H. N. Fisk

Permit No. 39/349

Location 45 Beacon St.

Owner Mrs. C. Fred Berry

Date 4/8/39

If closing-in

ing-in

Final Notif.

Final Insp. 5/4/39

Cert. of Occupancy issued None

NOTES

~~4/14/39 - Network started - A.G.S.~~

~~4/24/39 - Framing work along - A.G.S.~~

~~4/28/39 - Work proceeding A.G.S.~~

~~5/4/39 - Work about completed - A.G.S.~~



FILL IN COMPLETELY AND SIGN WITH INK

PERMIT ISSUED  
0803

Permit No. JUN 20 1933

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

Portland, Maine, June 26, 1933

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, 45 Beacon Street Ward \_\_\_\_\_

Contractor's name and address Automatic Oil Heating Company Telephone \_\_\_\_\_

General Description of Work

To install OIL BURNER

IF HEATER, POWER BOILER OR COOKING DEVICE

Is heater or source of heat to be in cellar? YES If not, which story \_\_\_\_\_ Kind of Fuel OIL

Material of supports of heater or equipment (concrete floor or what kind) CONCRETE

Minimum distance to wood or combustible material, from top of boiler or casing top of furnace, \_\_\_\_\_  
from top of smoke pipe \_\_\_\_\_, from front of heater \_\_\_\_\_ from sides or back of heater \_\_\_\_\_

IF OIL BURNER

Name and type of burner PIONEER Labeled and approved by Underwriters' Laboratories? YES

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 - 2 1/2 - 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 same building at same time.)

INSPECTION COPY

Signature of contractor AUTOMATIC OIL HEATING CO.

*B. J. Matthews*

NOTIFICATION BEFORE LASTING OR CLOSING IN IS REQUIRED.  
CERTIFICATE OF OCCUPANCY REQUIREMENT IS WAIVER.

J. C. Covert  
6/27/33

Ward 8 Permit No. 33/808

Location 45 Beacon Street

Owner Mrs. C. F. Berry

Date of permit 6/26/33

Notif. closing-in

Inspn. closing-in

Final Notif. 7/18/33

Final Inspn. 7/18/33 O.T. O.D.

Cert. of Occupancy issued None

7/18/33  
Tank and piping to burner is  
oil installation Hot Water

NOTES

- 1. Kind of heat  Hot Water
- 2. Label
- 3. Anti-siphon
- 4. Oil storage  Oil installation
- 5. Tank distance
- 6. Vent pipe  Oil installation
- 7. Fill pipe
- 8. Gauge  None
- 9. Eligible
- 10. Feed safety
- 11. Pipe sizes & material
- 12. Control valve
- 13. Ash pit vent
- 14. Temp. or pressure safety
- 15. Instruction card





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

(3d CLASS BUILDING)

Portland, Me., June 29, 1917 19

To THE INSPECTOR OF BUILDINGS:

The undersigned hereby applies for a permit to build, according to the following Specifications:—

Plans must be submitted in duplicate, one set to be filed with the Department and the duplicate set thereof (bearing the approval of the Inspector of Buildings) shall be kept on the work and exhibited on demand

Location, ..... 45 Beacon St. ..... Wd. B.....  
 Name of owner is? .. C. F. Berry ..... Address, .. 45 Beacon St......  
 Name of mechanic is? .. Owner ..... " .....  
 Name of architect is? ..... " .....  
 Proposed occupancy of building (purpose)?..... private garage.....  
 If a dwelling or tenement house, for how many families?.....  
 Are there to be stores in lower story?..... No. ....  
 Size of lot, No. of feet front?.....; No. of feet rear?.....; No. of feet deep?.....  
 Size of building, No. of feet front?.. 18.....; No. of feet rear?.....; No. of feet deep?.. 20.....  
 No. of stories, front?..... 2nd.....; rear? .....  
 No. of feet in height (from the mean grade of street to the highest part of the roof?)... 12 ft.....  
 Distance from lot lines, front?.. 70..... feet; side?.. 2..... feet; side?..... feet; rear?.. 10..... feet  
 Firestop to be used?.....  
 Will the building be erected on solid or filled land?.....  
 Will the foundation be laid on earth, rock, or piles?.....  
 If on piles, No. of rows?..... distance on centres?..... length of?.....  
 Diameter, top of?..... diameter, bottom of?.....  
 Size of posts?.....  
 " girts?.....  
 " floor timbers? 1st floor... concrete... 2d..... 3d..... 4th.....  
 O. C. " " " " .....  
 Span " " " " .....  
 Braces, how put in?.....  
 Building, how framed?.....  
 Material of foundation?..... thickness of?..... laid with mortar?.....  
 Underpinning, material of?.. posts..... height of?..... thickness of?.....  
 Will the roof be flat, pitch, mansard, or hip?.. pitch..... Material of roofing? Slate surface Asphalt  
 Will the building be heated by steam, furnaces, stoves or grates?.. None..... also on walls Will the flues be lined?.....  
 Will the building conform to the requirements of the law?.. Yes.....  
 No. of brick walls?..... and where placed?.....  
 Means of egress?.....

PERMIT MUST BE RECEIVED BEFORE BEGINNING WORK.

If the building is to be occupied as a Tenement House, give the following particulars:

What is the height of cellar or basement?.....  
 What will be the clear height of first story?..... second?..... third?.....  
 State what means of egress is to be provided?.....  
 ..... Scuttle and stepladder to roof?.....

Estimated Cost,  
 \$ 200.00.....

Signature of owner or authorized representative,

Address, 45 Beacon St

Plans submitted?..... Received by?.....

912790

Permit # 912790 City of Portland BUILDING PERMIT APPLICATION Fee \$50. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

**PERMIT ISSUED**  
JUL - 3 1991  
CITY OF PORTLAND

Owner: Timothy Burton Phone # 772-0240  
Address: 45 Beacon St; Ptld, ME 04103  
LOCATION OF CONSTRUCTION 45 Beacon St.  
Contractor: Equinox Bldrs. Inc Sub: 846-3744  
Address: 6 Hawthorne Rd; No Yarmouth Phone # ME 04096  
Est. Construction Cost: \$6200 Proposed Use: 1-fam w int. renov  
Past Use: 1-fam  
# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
# Stories: \_\_\_\_\_ # P-rooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion Interior renovations & windows

**For Official Use Only**  
Date 6/21/91  
Inside Fire Limits \_\_\_\_\_  
Bldg Code \_\_\_\_\_  
Time Limit \_\_\_\_\_  
Estimated Cost 6200  
Ownership: \_\_\_\_\_

Zoning: R-2-D  
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) WPA 2-2-91

**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: \_\_\_\_\_ Not in District or Landmark.  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.  
3. Type Ceilings: \_\_\_\_\_ Size \_\_\_\_\_ Requires Review  
4. Insulation Type \_\_\_\_\_  
5. Ceiling Height: \_\_\_\_\_

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

**Chimneys:**  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
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: \_\_\_\_\_ Square Footage \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase  
Signature of Applicant Dick Baker Date 11 June 91  
Signature of CEO Dick Baker Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_  
White-Tax Assesor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_ White Tag-CEO [Signature] © Copyright GPCOG 1988



PLOT PLAN

N  
▲

FEES (Breakdown From Front)  
Base Fee \$ 50-  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

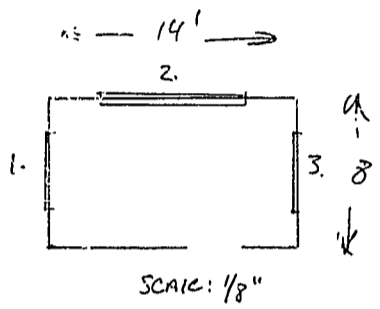
COMMENTS 7-10-91 - Work Completed - MCM  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant [Signature] Date 7-10-91

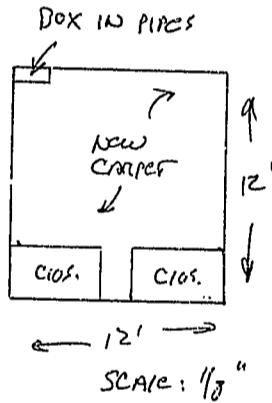
WOOLLE/BUTTON PROPERTY  
45 BEARON ST.  
PORTLAND, ME.

JOE BAKER  
EQUINOX BUILDERS INC.  
846 3744

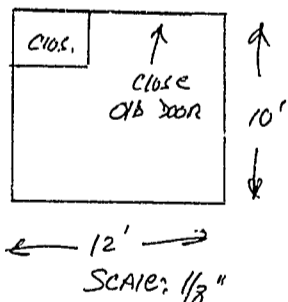
- ① REMOVE AND REPLACE 3 LARGE WINDOWS ON SUN ROOM.



- ② REMOVE AND REPLACE 2 EXISTING CLOSETS AND CARPETING IN BEDROOM #1



- ③ CLOSE OLD BATHWAY AND BUILD NEW CLOSET IN BEDROOM #2



- ④ 150-SQ. FT. WALLPAPER STRIPPING BOXING IN TWO HEAT PIPES IN CORNER OF BEDROOM #1

\* ALL INTERIOR RENOVATION

Permit # **912790** City of Portland BUILDING PERMIT APPLICATION Fee \$50. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

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

Owner: Timothy Burton Phone # 772-0240  
 Address: 45 Beacon St; Ptld, ME 04103  
 LOCATION OF CONSTRUCTION 45 Beacon St  
 Contractor: Equinox Bldrs. Inc Sub.: 846-3744  
 Address: 6 Hawthorne Rd; No Yarmouth Phone # ME 04096  
 Est. Construction Cost: \$6200 Proposed Use: 1-fam w int. renov  
 Past Use: 1-fam  
 # 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 Interior renovations & windows

**For Official Use Only**

Date 6/21/91  
 Inside Fire Limits \_\_\_\_\_  
 Bldg Code \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost: 6200

Subdivision \_\_\_\_\_  
 Ownership \_\_\_\_\_

**PERMIT ISSUED**  
 JUL 3 1991  
 CITY OF PORTLAND

Zoning: R-3 Residence  
 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) WPA 772-791

**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 \_\_\_\_\_

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
 Date: \_\_\_\_\_  
 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 Louise E. Chase  
 Signature of Applicant Dick Baker Date 21 June 91  
 Signature of CEO Dick Baker Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_  
 White-Tax Assesor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_ White Tag -CEO [Signature]

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