

340-344 WOODFORD STREET

STRAW WALKER

Full cut # 620R - Half cut # 6202H - Top cut # 6203H - Full cut # 6204H



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date Monday July 1, 19 81
 Receipt and Permit number A 72919

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: 342 Woodford St.
 OWNER'S NAME: Spurwink School ADDRESS: same

	FEES
OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>1-30</u>	<u>3.00</u>
FIXTURES: (number of) Incandescent _____ Fluorescent _____ (not strip) TOTAL _____ Strip Fluorescent _____ 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 _____ Water Heaters _____ Cook Tops _____ Disposals _____ Wall Ovens _____ Dishwashers _____ Dryers _____ Compactors _____ Fans _____ Others (denote) _____	_____
TOTAL _____	_____
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 _____	_____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE:
 FOR REMOVAL OF A "STOP ORDER" (304-i6 b) DOUBLE FEE DUE:
 TOTAL AMOUNT DUE: 3.00

INSPECTION:
 Will be ready on ready, 19 81; or Will Call _____
 CONTRACTOR'S NAME: Philip A Mave
 ADDRESS: 234 Saco St. Westbrook
 TEL.: 854-4776
 MASTER LICENSE NO.: 3717 SIGNATURE OF CONTRACTOR: Philip A. Mave
 LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS —

Permit Number 72919

Location 342 Woodford St.

Owner Spurwink School

Date of Permit 7-1-81

Final Inspection 7-1-81

By Inspector Libby

Permit Application Register Page No. 92

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 7-1-81 by Libby

PROGRESS INSPECTIONS: _____ / _____ / _____ / _____ / _____ / _____

CODE
COMPLIANCE
COMPLETED
DATE 7-1-81

REMARKS:

DATE:



APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date Feb. 9 19 77
 Receipt and Permit number A 00003

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: 342 Woodfords St.
 OWNER'S NAME: Spurwink School ADDRESS: same

OUTLETS: (number of)

Lights	<u>1-30</u>	
Receptacles	_____	
Switches	_____	
Plugmold	_____ (number of feet)	
TOTAL	_____	3/00

FIXTURES: (number of)

Incandescent	_____	
Fluorescent	_____ (Do not include strip fluorescent)	
TOTAL	_____	
Strip fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	_____	
Temporary	_____	

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 (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	_____	Compactors	_____
Fans	_____	Others (denote)	_____
TOTAL	_____		

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
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)	_____
FOR PERFORMING WORK WITHOUT A PERMIT (304-9)	_____
TOTAL AMOUNT DUE:	3.00

INSPECTION:
 Will be ready on _____, 19____; or Will Call

CONTRACTOR'S NAME: Philip A. Maye
 ADDRESS: 234 Saco St. Westbrook, Me.
 TEL.: 854-4776

MASTER LICENSE NO.: 3717
 LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:
Philip A. Maye

INSPECTOR'S COPY

CITY OF PORTLAND, MAINE

Application for Permit to Install Wires

Permit No. 54982
 Issued 6-7-72
 Portland, Maine June 1, 1971

To the City Electrician, Portland, Maine:

The undersigned hereby applies for a permit to install wires for the purpose of conducting electric current, in accordance with the laws of Maine, the Electrical Ordinance of the City of Portland, and the following specifications:

(This form must be completely filled out - Minimum Fee, \$1.00)

Owner's Name and Address Richard Smith, 342 Woodford St,

Contractor's Name and Address Waldron Ashley

Location 342 Woodford St Use of Building

Number of Families ... 1 ... Apartments ... Stores ... Number of Stories

Description of Wiring: New Work ... Additions ... Alterations

Pipe ... Cable Metal Molding ... BX Cable ... Plug Molding (No. of feet)

No. Light Outlets 12 Plugs 10 Light Circuits ... Plug Circuits

FIXTURES: No. ... Fluor. or Strip Lighting (No. feet)

SERVICE: Pipe ... Cable Underground ... No. of Wires 3 Size 2-2/4-4

METERS: Relocated ... Added ... Total No. Meters

MOTORS: Number ... Phase ... H. P. Amps ... Volts Starter

HEATING UNITS: Domestic (Oil) ... No. Motors Phase ... H.P.

Commercial (Oil) ... No. Motors Phase ... H.P.

Electric Heat (No. of Rooms) ... Brand Feeds (Size and No.)

APPLIANCES: No. Ranges ... Watts ... Extra Cabinets or Panels

Elec. Heaters 1 Watts 2000 ... Signs (No. Units)

Miscellaneous ... Watts ... Air Conditioners (No. Units)

Transformers ... Will commence 5-20 1971 Ready to cover in 6-1 1971 Inspection ... 19

Amount of Fee \$ 8.50 Signed W. Ashley

DO NOT WRITE BELOW THIS LINE

SERVICE METER GROUND

VISITS: 1 2 3 4 5 6

..... 7 8 9 10 11 12

REMARKS:

INSPECTED BY J. W. Hester
(OVER)

LOCATION WOOD FORDS ST 342
 INSPECTION DATE 6/2/71
 WORK COMPLETED 6/2/71
 TOTAL NO. INSPECTIONS 1
 REMARKS:

FEEES FOR WIRING PERMITS EFFECTIVE JULY 31, 1963

WIRING	
1 to 30 Outlets	
31 to 60 Outlets	\$ 2.00
Over 60 Outlets, each Outlet	3.00
(Each twelve feet or fraction thereof of fluorescent lighting or any type of plug molding will be classed as one outlet).	.05
SERVICES	
Single Phase	2.00
Three Phase	4.00
MOTORS	
Not exceeding 50 H.P.	3.00
Over 50 H.P.	4.00
HEATING UNITS	
Domestic (Oil)	2.00
Commercial (Oil)	4.00
Electric Heat (Each Room)75
APPLIANCES	
Ranges, Cooking Tops, Ovens, Water Heaters, Disposals, Built-in Dishwashers, Dryers, and any permanent built-in appliance — each unit	1.50
MISCELLANEOUS	
Temporary Service, Single Phase	1.00
Temporary Service, Three Phase	2.00
Circuses, Carnivals, Fairs, etc.	10.00
Meters, relocate	1.00
Distribution Cabinet or Panel, per unit	1.00
Transformers, per unit	2.00
Air Conditioners, per unit	2.00
Signs, per unit	2.00
ADDITIONS	
5 Outlets, or less	1.00
Over 5 Outlets, Regular Wiring Rates	1.00

5-20/71 6/7/71

PERMIT TO INSTALL PLUMBING

PERMIT NUMBER **404**

Date Issued **5-11-71**
Portland Plumbing Inspector
By **ERNOLD R. GOODWIN**

App/First Insp.
Date **6/7/71**
By **WALTER H. WALLACE**
DEPUTY PLUMBING INSPECTOR

App/ Final Insp.
Date **7/19/71**
By **WALTER H. WALLACE**
DEPUTY PLUMBING INSPECTOR

- Type of Bldg.
- Commercial
 - Residential
 - Single
 - Multi Family
 - New Construction
 - Remodeling

Address **342 Woodford St.**
 Installation For: **Single**
 Owner of Bldg.: **K. Smith**
 Owner's Address: **Same**
 Plumber: **Arnold Jensen**
28 Merrill Rd. Falmouth

Date: **5-11-71**

NEW	REPL	NO.	FEE
	1	SINKS	2.00
	1	LAVATORIES	4.00
1	1	TOILETS	4.00
1	1	BATH TUBS	.60
1	1	SHOWERS	.60
		DRAINS FLOOR SURFACE	
		HOT WATER TANKS	
		TANKLESS WATER HEATERS	
		GARBAGE DISPOSALS	
		SEPTIC TANKS	
		HOUSE SEWERS	
		ROOF LEADERS	
		AUTOMATIC WASHERS	.60
1		DISHWASHERS	
		OTHER	
TOTAL			8 11.80

Building and Inspection Services Dept.: Plumbing Inspection



RS RESIDENCE ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class
Portland, Maine, April 28 1971

PERMIT ISSUED

MAY 18 556 1971

CITY OF PORTLAND

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 342 Woodford St. Within Fire Limits? Dist. No.
Owner's name and address Richard Smith, 342 Woodford St. Telephone
Lessee's name and address Telephone
Contractor's name and address Edward Willette, 334 Spring St. Westbrook Telephone 854-9418
Architect Specifications Plans no No. of sheets
Proposed use of building Nursing Home No. families
Last use " " Rooming house No. families
Material frame No. stories 2 1/2 Heat Style of roof Roofing
Other buildings on same lot
Estimated cost \$ 200.00 Fee \$ 3.00

General Description of New Work

To demolish existing 1-story rear porch 6' x 12'
To remove non-bearing partition first floor in kitchen area.

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 contractor

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
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
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?

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

Richard Smith
Edward Willette

APPROVED:

C.K. E.L.S. 5/18/71

CS 301

INSPECTION COPY

Signature of owner by: E Willette

7m

5-17-71 NOTES

Rear porch removed
Rear wall supported
Some tube in middle
& double 2" x 8" added
to existing sill.
Rear wall framed
new warren header
for new window



16 ft
24 in

21.6 in

Check on pipe
beam needed for
span through ea.

Porch grommeted wall removed

6/29/71

Comp. [unclear]

Permit No. 711 556
Location 342 Wadsworth
Owner Richard Smith
Date of permit 5/18/71
Notif. closing-in _____
Inspn. closing-in _____
Final Notif. _____
Final Inspn. _____
Cert. of Occupancy issued _____
~~Making Out Notice~~ JRP
Form Check Notice _____

19.7 in

Inquiry- 342 Woodford St.

Dec. 1, 1970

Mr. George Crockett
Turner Barker Realty, Inc.
480 Congress Street

Dear Mr. Crockett:

In answer to your inquiry for change of use of the building at the above named location from a nursing home to a home for five or six boys that would be run as a business instead of what we consider a normal family dwelling unit in which members are related or considered part of the family would not be allowable in the R-5 Residential Zone in which this property is located as this would be considered as a non-conforming use.

We take the position that this use, as we understand it, would be classified as a childrens home and as such would not be allowable in this zone unless approved by the Board of Appeals under a variance appeal.

Very truly yours,

A. Allan Soule
Assistant Director of Building & Inspection
Services

AAS:m

FRANK M. ROBERTY, JR.
COMMISSIONER

HAROLD E. TRANEY
DEPUTY COMMISSIONER



CHARLES F. ROGAN
DIRECTOR

HARRY B. ROLLINS
ASSISTANT DIRECTOR

STATE OF MAINE

Insurance Department
DIVISION OF STATE FIRE PREVENTION
AUGUSTA, MAINE 04330

December 31, 1970

Mrs. Gladys E. Logan
342 Woodford Street
Portland, Maine

Re: Logan Nursing Home (Proposed Use As Foster Home)

Dear Madam:

In accordance with Title 25, Revised Statutes of 1964, a Supervising State Fire Inspector recently inspected your property and found the following conditions in violation of the statutes governing the fire laws of this State, as indicated below:

1. Provide second means of exit for third floor.
2. Provide code entrance box for electric service, third floor.
3. Provide second means of exit from second floor.
4. Provide fuse box as required by the National Electric Code in third floor bedroom.

Please advise this office in writing when such violations of the fire laws have been corrected in order that this office may advise the Commissioner of the Department of Health and Welfare that your property complies with the statutory provisions relating to fire safety.

By direction of the Insurance Commissioner

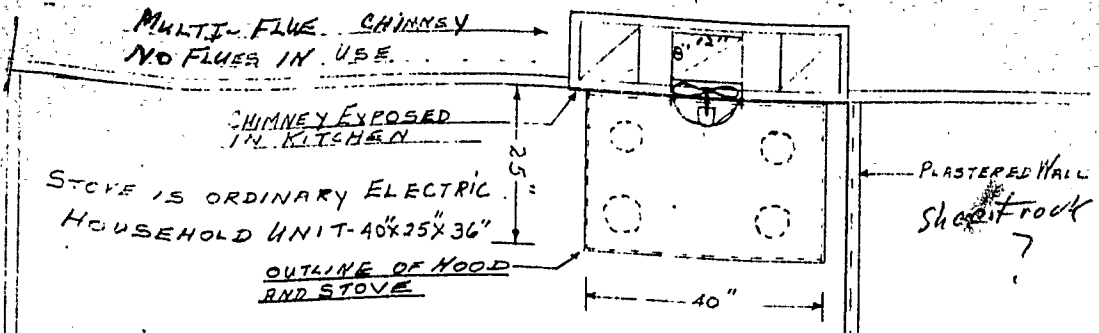
Charles F. Rogan

Director

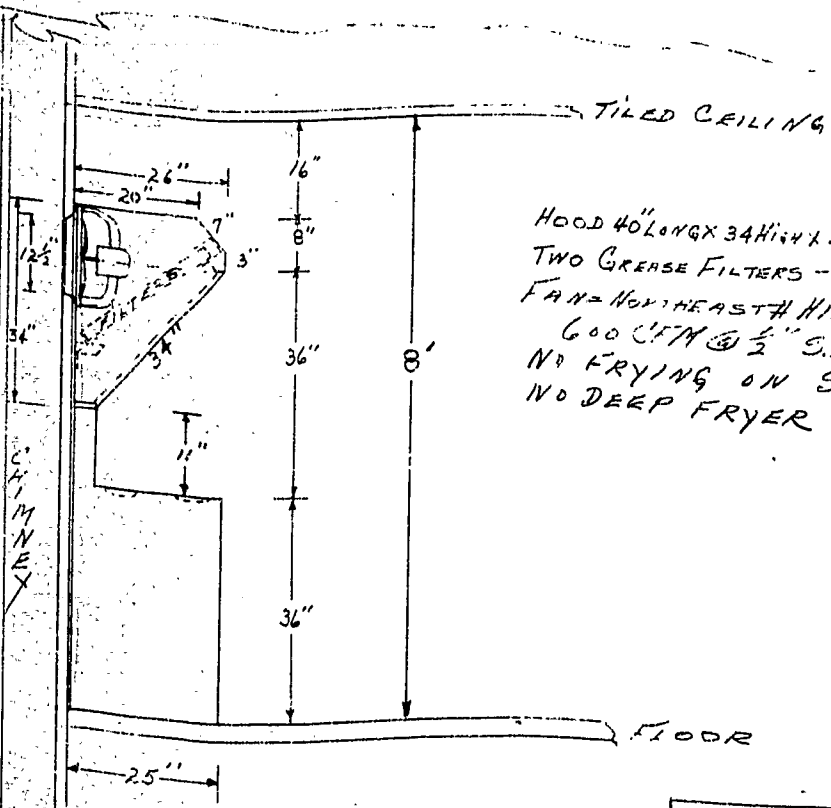
WHR:cag

cc: Mr. George W. Crockett
Div. of Hospital Services, Health & Welfare Dept.
Div. of Child & Family Services, Health & Welfare Dept.
Chief Joseph Cremo
Portland Building Inspector

ALWAYS PREVENT FIRE AT ALL WAYS



PARTIAL KITCHEN FLOOR PLAN



END ELEVATION

LOGAN'S NURSING HOME
33 1/2 WOODFORDS ST.
PORTLAND, MAINE
KITCHEN VENTILATION
By JAMES A. Mc BRADY, INC.
PLESANT HILL RD, SCARBORO
PHONE 883-4393



APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class
Portland, Maine, April 11, 1969

PERMIT ISSUED

266
A. R. 1969

CITY of PORTLAND

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 342 Woodfords St. Within Fire Limits? Dist. No.
Owner's name and address Logan's Nursing Home, 342 Woodford St. Telephone
Lessee's name and address Telephone
Contractor's name and address James A McBrady Inc. Pleasant Hill Road Scarborough Me Telephone 883-4393
Architect Specifications Plans yes No. of sheets 1
Proposed use of building Nursing Home No. families
Last use " " No. families
Material frame No. stories 2 Heat Style of roof Roofing
Other buildings on same lot
Estimated cost \$ Fee \$ 5.00

General Description of New Work

To install hood and ventilation for kitchen range, as per plan. (existing)

Sent to Health Dept. 4/11/69
Rec'd from Health Dept. 4/11/69

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 contractors

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
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
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:

John F. Blewin, Jr. Health Dept.
4/11/69

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
James A McBrady Inc.

CS 301

INSPECTION COPY

Signature of owner by:

Arthur McBrady

73

Permit No.

69/266

Location

342 Woodlands St.

Owner

Rogon's Nursing Home

Date of permit

4/14/69

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

Cert. of Occupancy issued

Staking Out Notice

Form Check Notice

NOTES

4/14/69 - Demolition - ~~Blind~~
wall behind stairs - Call

6-9-69 ~~Good~~
Complete! - sheet rock
wall, but no heavy
workings - ordinary
stove

X

FRANK M. ROBERTY, JR.
COMMISSIONER

HAROLD E. TRANEY
DEPUTY COMMISSIONER



CHARLES F. ROGAN
DIRECTOR

HARRY B. ROLLINS
ASSISTANT DIRECTOR

STATE OF MAINE

Insurance Department
DIVISION OF STATE FIRE PREVENTION
AUGUSTA, MAINE 04330

February 3, 1969

Mrs. Gladys E. Logan
Logan Nursing Home
343 Woodford Street
Portland, Maine

Dear Madam:

Re: Logan Nursing Home

In accordance with Title 25, Revised Statutes of 1964, a Supervising State Fire Inspector recently inspected your property and found the following conditions in violation of the statutes governing the fire laws of this State, as indicated below:

1. Kitchen to be made one hour fire resistant and doors to have self closers.
2. Second means of exit to be provided for patients on first and second floors without passing through the kitchen.
3. Door to boiler room to have automatic self closer.

Please advise this office in writing when such violations of the fire laws have been corrected in order that this office may advise the Commissioner of the Department of Health and Welfare that your property complies with the statutory provisions relating to fire safety.

By direction of the Insurance Commissioner

Charles F. Rogan

Director

cc: Health & Welfare Dept.
Chief Joseph Crano
Portland Building Inspector

ALWAYS PREVENT FIRE ALL WAYS



APPLICATION FOR PERMIT

RS RESIDENTIAL ZONE

Class of Building or Type of Structure

Third Class

Portland, Maine

March 21, 1968

PERMIT ISSUED

MAR 21 1968

222

CITY of PORTLAND

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 specifications, if any, submitted herewith and the following specifications:

Location 342 Woodfords St.

Owner's name and address Mrs. Gladys Logan (Logan Nursing Home) 342 Woodford St. Within Fire Limits? Dist. No.

Lessee's name and address Contractor's name and address Automatic Sprinkler Corp. of America, P.O. Box 2311 So. Portland Telephone 799-7331

Architect Proposed use of building Nursing Home Specifications Plans yes No. of sheets 1

Last use Material frame No. stories 2 Heat Style of roof No. families

Other buildings on same lot Estimated cost \$ Fee \$ 5.00

General Description of New Work

To install dry sprinkler system for entire building as per plan.

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 contractor

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

Size, front depth No. stories Height average grade to highest point of roof Material of foundation Thickness, top bottom earth or rock? Kind of roof Rise per foot Roof covering cellar

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

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? 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?

If a Garage

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

APPROVED:

O.K. - 3/21/68 - All

CS 301

INSPECTION COPY

Signature of owner by:

Automatic Sprinkler Corp. of America

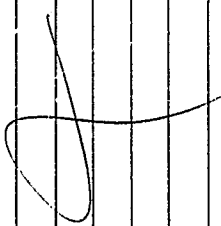
New York Pratt

jm

Permit No. 68222
Location 342 Woodlands St
Owner Regis Nursing Home
Date of permit 3/21/68
Notif. closing-in _____
Inspn. closing-in _____
Final Notif. _____
Final Inspn. _____
Cert. of Occupancy issued _____
Staking Out Notice _____
Form Check Notice _____

NOTES

5-8-68 Completed
ER





FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED 00065 JAN 20 1959 CITY OF PORTLAND

Portland, Maine, January 20, 1959

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 342 Woodford Street Use of Building Nursing Home No. Stories 1 Existing Building Existing "
Name and address of owner of appliance Logan Nursing Home, 342 Woodford St.
Installer's name and address Randall & McAllister, 84 Commercial St. Telephone 4-4554

General Description of Work

To install oil burner (replacement) in connection with existing steam 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 Thatcher 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 1-275 gal. new
Low water shut off yes Make McDonnell & Miller No. 47
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 none

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 Forced or gravity?
Is hood to be provided? If so, how vented?
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:

Handwritten signature and date 1-20-59

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

Handwritten name Randall & McAllister

Signature of Installer By: JCR

2.2

Permit No. 59/65
 Location 349 Woodlawn St
 Owner Equipe Trucking Firm
 Date of permit 1/20/84
 Approved 1-30-84 NIV

NOTES

- 1 Pressure _____
- 2 You _____
- 3 Kind of _____
- 4 Burner _____
- 5 Name & _____
- 6 _____
- 7 High _____
- 8 _____
- 9 Piping _____
- 10 Valves _____
- 11 Capacity _____
- 12 Tank _____
- 13 Tank _____
- 14 Oil _____
- 15 Instruction _____
- 16 Low _____

Vertical lined area for notes or drawings.



(RC) RESIDENCE ZONE - C

APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class
Portland, Maine, August 25, 1949

PERMIT ISSUED
SEP 16 1949
CITY OF PORTLAND

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 342 Woodford Street Within Fire Limits? No Dist. No. _____
Owner's name and address Allen A. Sharpe 342 Woodford Street Telephone _____
Lessee's name and address _____ Telephone _____
Contractor's name and address Megquier & Jones, 33 Pearl Street Telephone 3-6471
Architect _____ Specifications _____ Plans _____ No. of sheets _____
Proposed use of building Convalescent Home No. families _____
Last use _____ " " _____ No. families _____
Material frame _____ No. stories 3 Heat _____ Style of roof _____ Roofing _____
Other buildings on same lot _____ Fee \$ 2.00
Estimated cost \$ 300.

General Description of New Work

To construct metal fire escape from third floor to ground on rear of building as per plan.

Sent to Fire Dept. 8/29/49
Rec'd from Fire Dept. 8/30/49

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

Permit Issued with Letter

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** Megquier & Jones

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
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? _____ Size _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Girders _____ Size _____ Columns under girders _____ Size _____ Max. on centers _____
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? _____

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

APPROVED:

Allen A. Sharpe
Signature of owner

Allen A. Sharpe
Megquier & Jones

Signature of owner BVI: [Signature]

INSPECTION COPY

NOTES

9/19/49 Owner says third
 side window is 33" wide
 and 118" high. It is to
 change double-hung windows
 to downspung windows with
 no change to windows with
 double-hung windows and
 meet with owner at Sloper
 10/17/49 - No work started
 E.S.
 10/21/49 - 7 average o.k. All windows
 changed to E.S.
 1/25/50 - window ok

1/25/50

Permit No. 49/1510

Location 342 Woodford St.

Owner Allen G. Shupe

Date of permit 9/16/49

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn. 1/25/50

Cert. of Occupancy issued

Each set to remain in place

1/25/50 - window ok



(RC) GENERAL RESIDENCE ZONE - ISSUED

FILL IN COMPLETELY AND SIGN WITH INK

Permit No. 19 1045

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, March 16, 1945.

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 342 Woodford Street Use of Building dwelling No. Stories 2 1/2 New Building
 Existing

Name and address of owner of appliance George E. Turner, 342 Woodford Street

Installer's name and address Lyman A. Chisholm, R.F.D. #3, Portland Telephone 3-6742

General Description of Work

To install pressure type oil burner in place of rotary burner

NOTIFICATION BEFORE LATHING
OR CLOSING IN IS WAIVED

REQUIREMENT IS WAIVED

IF HEATER, POWER BOILER OR COOKING DEVICE

Is appliance or source of heat to be in cellar? yes If not, which story _____ Kind of Fuel oil

Material of supports of appliance (concrete floor or what kind) concrete

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 Silent Glow 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 1 - 275 Gal.

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 Lyman A. Chisholm

Permit No. 45/168

Location 342 Woodford Street

Owner George F. Turner

Date of Permit 3/16/45

Post Card sent

Notif. for insp.

Approval Tag issued 3-26-45 P.H.M.

Oil Burner Check List (date)

- 1. Kind of heat Steam
- 2. Label
- 3. Anti-siphon
- 4. Oil storage
- 5. Tank Distance
- 6. Vent Pipe
- 7. Fill Pipe
- 8. Gunge
- 9. Rigidity
- 10. Feed safety
- 11. Pipe sizes and material
- 12. Control valve
- 13. Ash pit vent
- 14. Temp. or pressure safety
- 15. Instruction card
- 16.

NOTES

3-26-45 11:00 a.m. at
 Turner, Tenant 2nd
 1719. Christian had met

Approved for P.H.M.

SURVEY AND INVESTIGATION OF TENEMENT AND LODGING HOUSES
QUESTIONABLE AS TO LEGAL AND SAFE USE

344-344

- 1. Location: 342 Woodford St Date investigation commenced 7-19-46
- 2. References: Complaints C-46-88 Appl. BP Ind. Carroll S. Edwards Frank
- 3. Present Owner and Address Florence H. Hunt Miriam H. Maulton 157 Northham Mass
- 4. Present Lessee and Address _____
- 5. Building Permit Record: 3-16-45 Mt. Ring

Assessors' Record

- 6. Survey 1924: Owner Edith M. Turner No. tenants 1
No. rooms 10; Class of Use Single
- 7. Assessors' change record since 1924 3-16-45 Install pressure type oil burner in place of waxy burner
- 8. Change of Owners, 1924 to date Edith Turner 1943 George F. Turner

9. City Directory Record

1926	<u>George F. Turner (Edith)</u>	1936	<u>Same</u>
1927	<u>Same and Alice M. Foster name</u>	1937	<u>Same</u>
1928	<u>George F. Turner</u>	1938	<u>Same</u>
1929	<u>Mrs Alice Macch Post</u>	1939	<u>Same</u>
1930	<u>Ed. F. Turner (Edith M.)</u>	1940	<u>Same</u>
1931	<u>Same</u>	1941	<u>Same</u>
1932	<u>Same</u>	1942	<u>Same</u>
1933	<u>Same</u>	1943	<u>Same</u>
1934	<u>Same</u>	1944	<u>Same</u>
1935	<u>Same</u>	1945	<u>Same</u>

10. Miscellaneous

1946 Mrs. Elizabeth Pallett

Conclusions and Action

7-19-1946 Directory summary does not show this directory as being a lodging house. (Pmf)

Inspection Data

Date: _____

11. Occupancy data on above date:

	<u>*No. Rooms</u>	<u>Lodging Rooms No. & No. Occ.</u>	<u>Apartments No. Rms & Occ.</u>	<u>Total Occupants</u>
Basement
1st Floor
2nd Floor
3rd Floor
4th Floor
5th Floor
*Not including toilet or bath or hallways
			<u>Grand Total Occupants</u>

12. Exit Data:

Inside Stairways

Outside Stairways

Basement to 1st or grade

4th to 3rd

3rd to 2nd

2nd to 1st

1st to grade

Which, if any, of above are accessible only by passing through private quarters of others

Which of above, if any, are of little value because of location with respect to rooms or each other

Which of above, if any, are unusually steep or narrow, have excessive winders or other important defects

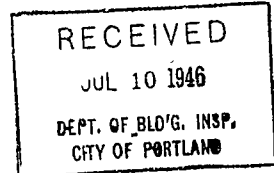
13. Fire Protection Data: No. stairs between cellar and first floor Which,

if any, are enclosed with fire resistive enclosures

Which of above stairs, if any, have closets beneath any part of them

14. Misc. Inspn. Notes

STATE OF MAINE
Bureau of Social Welfare



Report of Fire Inspection on Boarding Home

Town Portland, Maine Date of Inspection July 6, 1946 194
Location of building 342 Woodfords St.,
Applicant Mrs. Allen A. Sharpe
P. O. Address same
Street or RFD Post Office
Approximate size of building 25 x 35 Number of stories 2 1/2

TYPE OF CONSTRUCTION. CHECK WHICH: Brick . . . Frame . . . Cement . . . Stone . . . Stucco . . .
Kind of roof fire proof shingles

HEATING SYSTEM

Stoves . . . Furnace . . . Oil Burner x Stoker . . . Conditions? Good x
Fair
Poor
Are pipes properly insulated through walls and ceilings? Yes x No
Are floors and wall area adjacent to stoves protected against heat? Yes. No x
Wood storage no Location
Coal storage no Location
Fuel oil storage tank yes Location
Capacity 275 gals Above or below grade
Vent pipe from oil storage tank to the outside (size) yes 1"
Is the fill pipe inside or outside of building? outside
Is there other inflammable storage? 50 gals range Location basement
Elevator and dumbwaiter shafts oil Enclosed or opened

ELECTRICAL

Conduit . . . B.X. x Knob and Tube x Condition in general Good x
Fair
Poor
Appliance cords Good
Fair Should they be replaced? yes Where in shed
Poor x
Temporary wiring Yes
No x Where? Are proper fuses being used? Yes 15 & 30
No

(OVER)

Are there any combustible decorations or shades around light bulbs, kerosene or gasoline lamps, or anywhere else in building? Yes _____ No Where? _____
Are outside radio antennae properly grounded? Yes _____ No _____

KITCHEN

Where located? 1st floor
Are ranges, heating appliances, and connected piping safely installed and insulated? yes
Are they clean and free from grease? yes

HOUSEKEEPING

Are rubbish, papers, paints, empty paint pails, oily rags, mops, old mattresses, pillows, broken furniture stored in building? Yes No _____ Where? basement
Is combustible material near heating equipment? no
Condition of Basement fair
Condition of Attic partitioned off for rooms
Is building dilapidated or in want of repair? Yes _____ No
Is condition of this building such that a license should be issued? Yes No _____
If answer is "no", please explain in detail why a license should not be issued _____

RECOMMENDATIONS:

At least one fire extinguisher be provided for each floor and the basement.
An automatic fire alarm should be installed.
A second means of egress should be provided from the third floor.

I hereby certify that on the 6th day of July 1946 I made a careful inspection of the above described premises and found that the protection against fire was satisfactory.

F. L. Larsen
District Fire Chief, ~~MINNAPPA~~

(This form approved by Arson Division, State Insurance Department)



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date March 13, 19 87
 Receipt and Permit number D 09159

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: ~~x 378 Middle St~~ 342 Woodfords Street
 OWNER'S NAME: Dirigo Management ADDRESS: same

FEES

OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____

FIXTURES: (number of)
 Incandescent _____ Fluorescent _____ (not strip) TOTAL _____
 Strip Fluorescent _____ 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 _____	Water Heaters _____
Cook Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
TOTAL _____	_____

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 XX _____ 2.00
 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 _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: _____

INSPECTION: _____ min 5.00

Will be ready on _____, 19 ____; or Will Call XX

CONTRACTOR'S NAME: Michael LaPlante & Sons

ADDRESS: 2 Evergreen Drive

TEL.: 878-2866

MASTER LICENSE NO.: 3714 SIGNATURE OF CONTRACTOR: [Signature]

LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

Inspection Services
Samuel P. Hoffses
Chief

122-5-12



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

November 13, 1992

Dan Bonner, Administrator
Spurwink School Adult Programs
342 Woodford Street
Portland, ME 04103

Re: 342 Woodford St

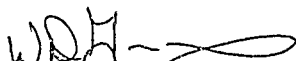
Dear Mr. Bonner,

This letter is in reference to the program that Spurwink School operates at 342 Woodford Street in Portland. Based on our phone conversation today, it is clear that this facility is what we would classify as a Handicapped Family Unit. Such use in the R-5 Zone, where this property is located, is permitted under Section 14-117(1)d of the Portland Land Use Code.

As Zoning Administrator, I certify that this use is in compliance with the Portland Land Use Code.

Please contact me if I can be of further assistance.

Sincerely,


William D. Giroux
Zoning Administrator

/mg

122-E-12

Dan Bonner, Administrator
The Spurwink School Adult Programs
342 Woodford Street
Portland, ME 04103
(207) 871-1209

William Giroux
Code Enforcement Officer
City of Portland
City Hall
389 Congress Street, Room 315
Portland, ME

November 9, 1992

Dear Mr. Giroux:


The Spurwink School has operated an Intermediate Care Facility for the Mentally Retarded at 342 Woodford Street since 1980. As such, this facility has been the residence for six adult mentally retarded clients and has been licensed annually by the Department of Human Services.

On July 1st, 1992, we decreased the number of persons served from six to four and successfully sought relicensure from the Department of Human Services as an Adult Foster Care facility. The motivation for this change stems from our belief that we can improve the quality of client care with this decreased population, while at the same time maintaining the number of staff providing active treatment. (The population remains adults with mental retardation.)

The Department of Human Services, Division of Residential Care, requires of us a statement from your department that indicates that our intended use for this facility is in compliance with city codes and ordinances.

Please contact me if I can provide you with any additional information relative to our plans. This is our third attempt to get some kind of response from your office; your cooperation in this matter will be much appreciated.

Sincerely,


Dan Bonner

cc: Peter McPherson, Spurwink School

FILL IN AND SIGN WITH INK

041028



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED SEP 27 1994 CITY OF PORTLAND

Portland, Maine, 23 Sept '94

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 342 Woodfords St Use of Building Spurwink Schools No. Stories 3 New Building Existing
Name and address of owner of appliance Spurwink Schools
Installer's name and address Rudi The Plumber Telephone 797-8311
1231 Forest Ave Portland, ME 04103

General Description of Work

To install Replace existing boiler with new steam gas boiler

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? concrete
If so, how protected? Kind of fuel? Natural Gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 6'
From top of smoke pipe 3' From front of appliance 5' From sides or back of appliance 6'
Size of chimney flue 8" Other connections to same flue yes - water heater
If gas fired, how vented? chimney Rated maximum demand per hour 250,000 BTU's
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

Master Plumber #6694
Rudi Casparius
15.00/Replacement

- 1. 1/2" FILL PIPE
2. 1/4" VENT PIPE
3. Name & Label
4. Permit No.
5. Address & City
6. Remote control
7. High limit control
8. Breaker switch
9. Low water cutoff
10. High limit control
11. High limit control & protection
12. Low water cutoff
13. High limit control
14. High limit control
15. High limit control
16. High limit control
17. High limit control
18. High limit control
19. High limit control
20. High limit control

APPROVED: [Signature]

Will there be in charge of the above work a person competent to see that the State and City requirements hereto are observed? yes

CS 300

INSPECTION COPY

Signature of Installer [Signature]

[4] M.A. Carroll

