

169-171 ASHMONT STREE

124-B-5



SILAW WALKER
#8503-3R

REQUEST FOR SERVICE

PORTLAND HEALTH DEPARTMENT

DATE RECEIVED	11/6/79	BY	Rebbie	DISTRICT	
REQUEST BY	NAME				
	ADDRESS	SYBILLE J. & VAUGHN E WILSON			
OWNER	NAME	Mr Wilson 124-B-5			
	ADDRESS				
CONDITIONS	ADDRESS	171 Oakmont Street			
Lumber on sidewalk almost impassable					
COMMENTS	MAJ U/S 8/11/79				
SPECIAL INSTRUCTIONS					
DIVISION	SANITATION		HOUSING		NURSING
	ROUTINE		SPECIAL		BY
PRIORITY	URGENT		REPORT TO		DATE

May 8, 1975 ✓

Mr. Vaughn E. Wilson
171 Ashmont Street
Portland, Maine 04103

Dear Mr. Wilson: Re: 169-171 Ashmont Street - 124-B-5

Your property has been surveyed by the Portland Housing Inspection Division, Health Department, and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

In order to aid in the preservation of Portland's existing housing inventory, it shall be the policy of this department to inspect each residential building at least once every five years. Although a property is subject to reinspection at any time during the said five year period, the next regular inspection of this property is scheduled for May 1980.

If we can be of further help, please feel free to call on us.

Sincerely yours,

David C. Bittenbender
Acting Health Director

By *Lytle D. Hayes*
Chief of Housing Inspections

Inspector *B. MacIsaac*
B. MacIsaac

/ss

City of Portland

Health Department

Housing Inspection Division

STRUCTURE INSPECTION SCHEDULE

1) Insp. Name MACE SAAC

2) Insp. Date	3) Insp. Type	4) Proj. Code	5) Assr's: Chart	6) Bl.	7) Lot	8) Census: Tract	9) Blk	10) Insp.	11) Form No.			
5-7-75	3E	-	124	B	5	17	106	13	97			
12) House No.	13) Sec. H. No.	14) Suff.	15) Direct.	16) Street Name				17) St. Design.				
169-171	-	-	-	ASHMONT				ST				
18) Owner or Agent: MR VAUGHN E. WILSON							19) Status	20) Bldg's Rat.				
21) Addr.: 171 ASHMON ST							00	1				
22) City and State: PORTLAND MAINE							Zip Code:					
23) D. Units	24) Occ. D. U.s	25) Rm. Units	26) Occ. R. U.s	27) No. Occupants	28) Com'1 U.	29) Bldg. Type	30) Stories	31) Const. Mat.	32) O. Bs			
2	2	-	-	8	NO	DE	2 1/2	WO	NO			
33) C. H.	34) Photo	35) Zoned For	36) Actual Land Use	37) D. D.	38) Lks. Ad. Bth. Fac.	39) Disp.	40) Closing Date					
YES	NO	K-3	RE	-	Yes (No)	-	-					
Viol. No.	Remedy	Cond.	Violation Description			Fl. No.	Loc.	Room Type	Area Type	Resp. Partv	Code Sect. Viol.	Viol. Rem. Date
			OK 1st-2nd									

City of Portland

Health Department
Dwelling Unit Schedule

Housing Inspection Division

1) INSP. Date 2) INSP. 3) FORM NO.

4) TENANT'S NAME 5) Flr. # 6) Location 7) Rmg. Tp. 8) #rms 9) #Peo. 10) #All'd 11) Slp. Rms.

MRS POWERS	1	-	DU	5	5	8	3					
12) Child Under 10	13) Child 1-6	14) Head Survey Results	15) Rent	16) Rent Code	17) Furn.	18) Heat	19) Hot Water	20) Dual Egress	21) Ck'ng	22) Lav.	23) Bath	24) Flush
2			55	MO	NO	OFF	YES	YES	IE	PL	PB	PF

Viol. No.	Remedy	Cond.	Violation	Location	Room Type	Area Type	Resp. Party	Code Sect. Violated	Violation Rem. - Date

OK

City of Portland

Health Department
DWELLING UNIT SCHEDULE

Housing Inspection Division

1) INSP. Date	2) INSP.		3) FORM NO.									
4) TENANT'S NAME	5) Flr. #	6) Location	7) Rmg. Tp.	8) #Rms.	9) #Peo.	10) #All'd	11) Slip. Rms.					
VAUGHN WILSON	2	-	DU	5	3	8	2					
12) Child Under 10	13) Child 1-6	14) +Lead Survey Results	15) Rent	16) Rent Code	17) Furn.	18) Heat	19) Hot Water	20) Dual Egress	21) Ck'ng	22) Lav.	23) Bath	24) Flush
						OFF	YES	YES	LE	PL	FB	PF
Viol. No.	Remedy	Cond.	Violation	Location	Room Type	Area Type	Resp. Party	Code Sect. Violated	Violation Rem. - Date			

OK