Rear 524-528 FOREST AVENUE

Rear 5

LOCATION [illegible]

DATE 10/26/48

PERMIT

INQUIRY

COMPLAINT ✓

R.M.T.

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

BI 67

To Mr. Sears

Date 10/28/48 Time 1:50

WHILE YOU WERE OUT

Mr. Rome (Planningboard)

of

Phone 267

- [ ] TELEPHONED
- [x] PLEASE CALL HIM
- [ ] CALLED TO SEE YOU
- [ ] WILL CALL AGAIN
- [ ] WANTS TO SEE YOU
- [ ] RUSH

Message Julia VtHyer 2-0573

Received by NB

10/29/68

Schwann-Cohn marriage study

on - cB 6 + B12

Cases in genotyping

126

B - 2, 16, 17 + 4

Dennis Adams

3-7067

C-48-129-I

October 30, 1948

Subject: Use of certain lots having frontage on a proposed street between Ashmont Street and Longfellow Street, the lots being in the rear of 524-530 Forest Avenue

Champion Motors, Inc.
Att: Mr. L. K. Marshall
530 Forest Avenue

Messrs. Harry M. Shwartz & Jesse M. Rosenberg
102 Exchange Street

Gentlemen:

Upon a number of complaints from the neighborhood, an inspector from this office reports that quite an area of land at the above location has been cleared, and that Champion Motors are using the area for the parking of several motor vehicles.

Such a use of the property is contrary to the terms of the Zoning Ordinance unless first authorized by the Board of Appeals after the usual appeal procedure according to Section 9A of the Zoning Ordinance applying to the Residence B Zone in which the property is located.

Mr. Norwood, attorney for Champion Motors, has told me that it is the desire to seek authorization from the Board of Appeals by the usual variance appeal procedure. Accordingly there is enclosed to each of you an outline of the appeal procedure.

In the meantime, pending the required public hearing and decision of the Board, all storage of motor vehicles on the property is to be discontinued and the use of the land in all particulars be kept in conformity with the Zoning Ordinance.

Very truly yours,

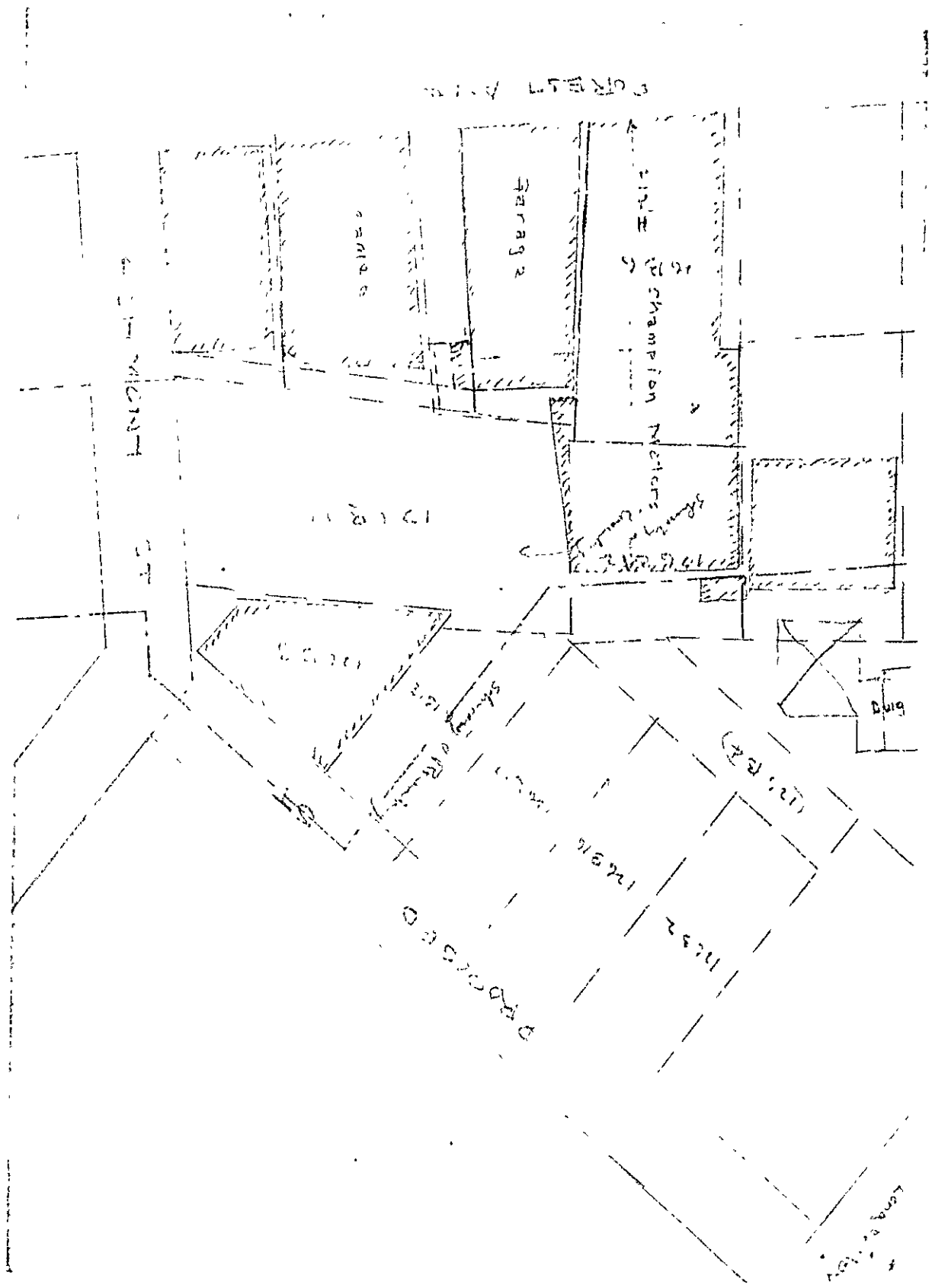
Inspector of Buildings

MMcD/C

Enclosure to each addressee: Outline of appeal procedure

CC: Leslie E. Norwood, Esq. with outline of appeal procedure
119 Exchange Street, Room 604

Edward T. Gigneux
Assistant Corporation Counsel


GREAT AVE.
Garage
Garage
Champion Meters
Bldg

(PD) [illegible]

CITY OF PORTLAND, MAINE

DEPARTMENT OF BUILDING INSPECTION

*Complaint No.* 48/129

# COMPLAINT

INSPECTION COPY

Proposed St. and property between Ashmont and Longfellow Streets (Rear of 524-528 Forest Avenue) — Date Received October 29, 1948

Location Assessors Plan 126-B-2-4-16-17 — Use of Building Office

H.M. Shumaty & J.M. Remsbaw, [illegible] Lounge.

Owner's name and address ~~Edward B. Noyes, 85 Bedford Street~~ — Telephone 3-3236

Tenant's name and address — Telephone

Complainant's name and address ~~Mrs. Lemuel Dyer, 13 Longfellow Street~~ — Telephone 2-0573

Description: Property at above location to be used for parking by Champion Motors, Mr. Marshall or Mr. Smith. 2-3735

(RD) RESIDENCE ZONE - 9

Complaint No. 48/129
(12-B-2-4-16-17)

Location Proposed Street

Date Received 10/28/48

Date Disposed

NOTES

10/28/48 At least two calls have been received in the office opposed to this parking area.

Mrs. Ryer said the one working to clean away the area, told her she was and Rosenberg owned the land. Possibly this is a recent transfer not yet obtained by assessor's dept.

Mr. Smith of Chandler Motors, said they planned to use this area for their or cars, not for a public parking space, & tried hard to convince that this would have any bearing on the type of use.

Mr. Smith also pointed out that other restricted areas in this vicinity were being used for storage and parking. JB

10/30/48 See letter

11/3/48 - RMS say that we have to say that these all cases have been removed from the list.

REAR 524-528 FOREST AVE.

# APPLICATION FOR PERMIT

## DEPARTMENT OF BUILDING INSPECTIONS SERVICES

## ELECTRICAL INSTALLATIONS

Date Jan. 4, 19 83
Receipt and Permit number A 92513

*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: 524 Forest Avenue

OWNER'S NAME: Red Cross Blood Program ADDRESS: same

| | FEES |
|---|---|
| OUTLETS: | |
| Receptacles 75 Switches 53 Plugmold 50 ft. TOTAL 178 | 16.80 |
| FIXTURES: (number of) | |
| Incandescent x Flourescent x (not strip) TOTAL 198 | 21.80 |
| Strip Flourescent ft. | |
| SERVICES. | |
| Overhead Underground Temporary TOTAL amperes | |
| METERS (number of) | |
| MOTORS: (number of) | |
| Fractional | |
| 1 HP or over | |
| RESIDENTIAL HEATING: | |
| Oil or Gas (number of units) | |
| Electric (number of rooms) | |
| COMMERCIAL OR INDUSTRIAL HEATING. | |
| Oil or Gas (by a main boiler) | |
| Oil or Gas (by separate units) | |
| Electric Under 20 kws Over 20 kws | |
| APPLIANCES: (number of) | |
| Ranges / Water Heaters | |
| Cook Tops / Disposals | |
| Wall Ovens / Dishwashers | |
| Dryers / Compactors | |
| Fans / Others (denote) | |
| TOTAL | |
| MISCELLANEOUS: (number of) | |
| Branch Panels 2 | 2.00 |
| Transformers | |
| Air Conditioners Central Unit 5 | 25.00 |
| 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 | 2.50 |
| Emergency Lights, battery 5 | |
| Emergency Generators | |
| INSTALLATION FEE DUE: | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ... DOUBLE FEE DUE: | |
| FOR REMOVAL OF A "STOP ORDER" (304-16 b) | |
| TOTAL AMOUNT DUE: | 68.10 |

INSPECTION:
Will be ready on 19 ; or Will Call X

CONTRACTOR'S NAME: New England Electric & Electronics, Inc.

ADDRESS: Route # 114 Naples, Me.

TEL.: 693-6055

MASTER LICENSE NO.: 28x 02719 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.:

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS —

Permit Number 92573

Location 524 Forest Cir

Owner Rob Cross

Date of Permit 1-4-83

Final Inspection 2-23-83

By Inspector Tubby

Permit Application Register Page No 136

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 1-5-83 by Tubby

PROGRESS INSPECTIONS: 1-24-83 / _____ / _____

2-23-83 / _____ / _____

CODE COMPLIANCE COMPLETED

DATE 5-23-83

| DATE | REMARKS |
|---|---|
| 1-5-83 | Some work in rear was done last year before permit was taken out, -OK- |

# APPLICATION FOR PERMIT

**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**

**ELECTRICAL INSTALLATIONS**

Date Feb. 17, 1983, 19 83

Receipt and Permit number A 96615

*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: New Red Cross Bldg. on Forest Avenue 524 Forest Ave.

OWNER'S NAME: Red Cross ADDRESS: same

| | FEES |
|---|---|
| OUTLETS: | |
| Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL 1 to 30 | 3.00 |
| FIXTURES: (number of) | |
| Incandescent _____ Flourescent _____ (not strip) TOTAL _____ | |
| Strip Flourescent _____ ft. | |
| SERVICES: | |
| Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ | |
| METERS: (number of) _____ | |
| MOTORS: (number of) | |
| Fractional _____ | |
| 1 HP or over _____ | |
| RESIDENTIAL HEATING: | |
| Oil or Gas (number of units) _____ | |
| Electric (number of rooms) _____ | |
| COMMERCIAL OR INDUSTRIAL HEATING: | |
| Oil or Gas (by a main boiler) _____ | |
| Oil or Gas (by separate units) _____ | |
| Electric Under 20 kws _____ Over 20 kws _____ | |
| APPLIANCES: (number of) | |
| Ranges _____ 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 _____ | |
| INSTALLATION FEE DUE: | 3.00 |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: | |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) | |
| TOTAL AMOUNT DUE: | 3.00 |

INSPECTION:

Will be ready on _____, 19__; or Will Call x

CONTRACTOR'S NAME: Bruce A. Farnham

ADDRESS: Box 160, Cumberland Center, Maine

TEL.: 829-5640

MASTER LICENSE NO.: 04652

LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR: Bruce A. Farnham

Bruce A. Farnham

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

**ELECTRICAL INSTALLATIONS —**

Permit Number 26615

Location 524 Forest Ave

Owner Red Cross

Date of Permit 2-17-83

Final Inspection 2-23-83

By Inspector Tilby

Permit Application Register Page No. 132

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 2-23-83 by Tilby

PROGRESS INSPECTIONS: ____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

CODE COMPLIANCE COMPLETED

DATE 2-23-83

~~DATE:~~ REMARKS:

# APPLICATION FOR PERMIT

## DEPARTMENT OF BUILDING INSPECTIONS SERVICES

## ELECTRICAL INSTALLATIONS

Date Feb. 23, 1983
Receipt and Permit number A 96623

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: 524 Forest Avenue

OWNER'S NAME: Red Cross ADDRESS: same

| | FEES |
|---|---|
| OUTLETS: | |
| Receptacles ____ Switches ____ Plugmold ____ ft. TOTAL ____ | |
| FIXTURES: (number of) | |
| Incandescent ____ Flourescent ____ (not strip) TOTAL ____ | |
| Strip Flourescent ____ ft. | |
| SERVICES: | |
| Overhead x Underground ____ Temporary ____ TOTAL amperes 60 | 3.00 |
| METERS: (number of) 1 | .50 |
| 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) ____ | 7.50 |
| Signs 20 sq ft. and under 3 | |
| Over 20 sq. ft. ____ | |
| Swimming Pools Above Ground ____ | |
| In Ground ____ | |
| Fire/Burglar Alarms Residential ____ | |
| Commercial ____ | |
| Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under ____ | |
| over 30 amps ____ | |
| Circus, Fairs, etc. ____ | |
| Alterations to wires ____ | |
| Repairs after fire ____ | |
| Emergency Lights, battery ____ | |
| Emergency Generators ____ | |
| INSTALLATION FEE DUE: | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: | |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) | |
| TOTAL AMOUNT DUE: | 11.00 |

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

CONTRACTOR'S NAME: Marino Elec
ADDRESS: 68 Taft Avenue
TEL.: ____
MASTER LICENSE NO.: 2299
LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR:
A J Marino (Marino's Elec)
by Jeanette Marino

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

**ELECTRICAL INSTALLATIONS —**

Permit Number 96623

Location 524 Forest Ave

Owner Red Cross

Date of Permit 2-23-83

Final Inspection 2-28-83

By Inspector Libby

Permit Application Register Page No 139

INSPECTIONS. Service ✓ by Libby

Service called in 2-28-83

Closing-in 2-23-83 by Libby

PROGRESS INSPECTIONS: ____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

CODE COMPLIANCE COMPLETED

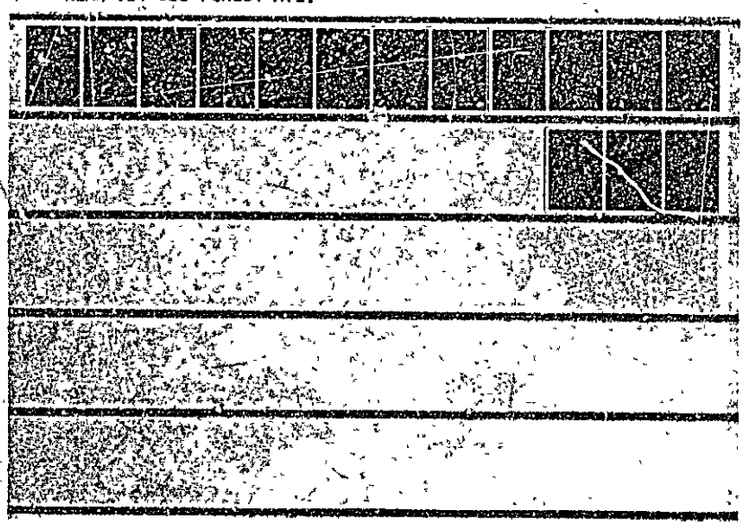
DATE 2-28-83

~~DATE.~~

REMARKS:

2-23-83 Copper wire in alum. Conduit. Must change.

REAR 524-528 FOREST AVE.



# APPLICATION FOR PERMIT

345

PERMIT ISSUED
APR 18 1984
CITY OF PORTLAND

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....

ZONING LOCATION ..... PORTLAND, MAINE ..... April 13, 1984

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND MAINE

*The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION ... 522 Forest Avenue ..... Fire District #1 ☐, #2 ☐

1. Owner's name and address .. Gibbs Oil - Mass. ..... Telephone .....
2. Lessee's name and address .. Sherwin Williams Co. - same ..... Telephone 772-0551
3. Contractor's name and address ..... Telephone .....

..... No. of sheets .....

Proposed use of building .. retail of paint, carpet & spray equipment ..... No. families .....

Last use ..... sales of piano & organ ..... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....

Other buildings on same lot .....

Estimated contractural cost $.....

FIELD INSPECTOR—Mr. .....

@ 775-5451

Appeal Fees $ .....
Ch of use
Base Fee 25.00
Late Fee .....
TOTAL $ .....

Change of use from sales of piano & organs to retail of carpets and spray equipment, no alterations or structural changes

Stamp of Special Conditions

***NOTE TO APPLICANT:*** *Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## DETAILS OF NEW WORK

Is any plumbing involved in this work? no ..... Is any electrical work involved in this work? no .....

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 center .....

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? .....

| *APPROVALS BY:* | *DATE* | MISCELLANEOUS |
|---|---|---|
| BUILDING INSPECTION—PLAN EXAMINER ..... | | Will work require disturbing of any tree on a public street? no |
| ZONING: ..... | | |
| BUILDING CODE: ..... | | Will there be in charge of the above work a person competent |
| Fire Dept.: ..... | | to see that the State and City requirements pertaining thereto |
| Health Dept.: ..... | | are observed? yes |
| Others: ..... | | |

*Signature of Applicant* ..... Phone # same

Type Name of above Alfred Wilson Jr. Sherwin Williams Co. ..... 1 ☐ 2 ☐ 3 ☐ 4 ☐ xx

Other .....
and Address .....

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

# APPLICATION FOR PERMIT

PERMIT ISSUED
APR 27 1984
CITY of PORTLAND

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION ..... 403 .....

ZONING LOCATION ..... PORTLAND, MAINE April 25, 1984

*To the* CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

*The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION .....524 Forest Avenue..... Fire District #1 ☐, #2 ☐

1. Owner's name and address American Red Cross Blood Service - same..... Telephone 775-2167...
2. Lessee's name and address American Red Cross - same ..... Telephone ....same....
3. Contractor's name and address Marine Electric Service - 68 Tait Avenue. Telephone ....776-3123

..... No. of sheets .....

Proposed use of building .....red cross bldg..... No families .....

Last use .....same..... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....

Other buildings on same lot .....

Estimated contractural cost $...6,000....

FIELD INSPECTOR—Mr. .....

@ 775-5451

| | |
|---|---|
| Appeal Fees | $ ..... |
| Base Fee | .. 40.00 ..... |
| Late Fee | ..... |
| TOTAL | $ ...40.00 ..... |

To construct 42' x 8' slab to be used for generator to set on as per plans. 1 sheet of plans.

Stamp of Special Conditions

send permit to # 1 - 04101

*NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## DETAILS OF NEW WORK

Is any plumbing involved in this work? ...no..... Is any electrical work involved in this work? ..yes.....

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? .....

| *APPROVALS BY:* | *DATE* | MISCELLANEOUS |
|---|---|---|
| BUILDING INSPECTION—PLAN EXAMINER ..... | | Will work require disturbing of any tree on a public street? ....no |
| ZONING: ..... | | |
| BUILDING CODE: ..... | | 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.. |
| Fire Dept.: ..... | | |
| Health Dept.: ..... | | |
| Others: ..... | | |

*Signature of Applicant* ..... Phone # ....none.....

Type Name of above Timothy O'Connel for American Red Cross ..... 1☐ 2☐ 3☐ 4☒

Other .....

and Address .....

10

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

# PLUMBING APPLICATION

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

**PROPERTY ADDRESS**

| | |
|---|---|
| Town Or Plantation | Portland |
| Street Subdivision Lot # | 524 Forest Ave |

**PROPERTY OWNERS NAME**

Last: American Red Cross First:

| | |
|---|---|
| Applicant Name* | The Blake Co |
| Mailing Address of Owner/Applicant (If Different) | Thompson's Point Portland, Maine |

PORTLAND PERMIT # 457 TOWN COPY

Date Permit Issued 5.18.84

Local Plumbing Inspector Signature

$ FEE

L.P.I. # Double Charged

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant — Date 5-17-84

**Caution: Inspection Required**

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

Local Plumbing Inspector Signature — Date Approved MAY 21 1984

## PERMIT INFORMATION

**This Application is for**

1. ☐ NEW PLUMBING
2. ☐ RELOCATED PLUMBING Replacement

**Type Of Structure To Be Served:**

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER - SPECIFY: Office

**Plumbing To Be Installed By:**

1. ☑ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D. HOUSING DEALER/MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # 0151

| Number | Hook-Ups And Piping Relocation | Number | Column 2 Type of Fixture | Number | Column 1 Type Of Fixture |
|---|---|---|---|---|---|
| | HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. | | Hosebibb / Sillcock | | Bathtub (and Shower) |
| | | | Floor Drain | | Shower (Separate) |
| | | | Urinal | | Sink |
| | HOOK-UP: to an existing subsurface wastewater disposal system. | | Drinking Fountain | | Wash Basin |
| | | | Indirect Waste | | Water Closet (Toilet) |
| | | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures | | Grease/Oil Separator | | Dish Washer |
| | | | Dental Cuspidor | | Garbage Disposal |
| | | | Bidet | | Laundry Tub |
| | Hook-Ups (Subtotal) | | Other | 0.1 | Water Heater |
| $ | Hook-Up Fee | | Fixtures (Subtotal) Column 2 | | Fixtures (Subtotal) Column 1 |
| | | | | 0.1 | Fixtures (Subtotal) Column 2 |
| | | | | 0.1 | Total Fixtures |
| | | | | $6.00 | Fixture Fee |
| | | | | | Hook Up Fee |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

# CITY OF PORTLAND

JOSEPH E GRAY, JR.
DIRECTOR OF PLANNING
AND URBAN DEVELOPMENT

October 28, 1982

American Red Cross Blood Center
524 Forest Ave.
Portland, Maine

Dear Sir,

Your application to make alterations to 524 Forest Ave. as per plans is being issued with the following requirements.

1. Internally lit exit signs and emergency lighting shall be provided for all exits and paths to reach same.

2. All doors involved in the means of egress shall be equipped with latch sets which shall open from the inside without the use of keys, special knowledge, or ability, but by merely turning the ususal knob or by pressure on a plate or lever.

3. The sprinkler system shall be tested and certified to be operative. Proof of this requirement shall be furnished to this office.

4. All vertical openings (stairways) shall be enclosed with construction having a fire rating of at least one hour including fire door with self-closers.

5. The sprinkler system shall be equipped with a flow switch electrically connected to horn and flashing light sounding devices placed as required to assure all persons will hear the alarm.

If you have any questions on these requirements please call this office.

Sincerely,

P. Samuel Hoffses,
Chief of Inspection Services Division

cc: Lt. Collins, Fire Prevention

389 CONGRESS STREET • PORTLAND, MAINE 04101 • TELEPHONE (207) 775-5451

# APPLICATION FOR PERMIT

PERMIT ISSUED
OCT 28 1982
CITY of PORTLAND

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION ..... 00966

ZONING LOCATION ..... PORTLAND, MAINE ..... Oct 21, 1982

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

*The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION ...524 Forest Avenue -

1. Owner's name and address ...American Red Cross Blood Ctr.- same... Fire District #1 ☐, #2 ☐
2. Lessee's name and address ...D. L. Poulin, Inc.-40 Jordan Ave. P.O. Box 469 Brunswick 04011... Telephone 775-2367
3. Contractor's name and address ..... Telephone .....

Telephone 725-4304

Proposed use of building ...Blood Center... No. of sheets .....

Last use ...Same... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing ..... No. families .....

Other buildings on same lot .....

Estimated contractural cost $...151,000

FIELD INSPECTOR—Mr. .....

@ 775-5451

| | |
|---|---|
| Appeal Fees | $ ..... |
| Base Fee | 765.57 |
| Late Fee | ..... |
| TOTAL | $ 765.57 |

To make alterations to already existing building, no structural changes, removing and installing partitions to make additonal area as per plans. 3 sheets of plans.

send permit to # 1

Stamp of Special Conditions

PERMIT ISSUED WITH LETTER

***NOTE TO APPLICANT:*** *Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## 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? .....

*APPROVALS BY:* *DATE*

BUILDING INSPECTION—PLAN EXAMINER .....

ZONING: .....

BUILDING CODE: .....

Fire Dept. James P. Collins Chief

Health Dept.: .....

Others: .....

## MISCELLANEOUS

Will work require disturbing of any tree on a public street? .....

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

*Signature of Applicant* D. L. Poulin Pres.

Type Name of above D. L. Poulin, Inc. ..... Phone # same

for American Red Cross Blood Ctr. 1☐ 2☐ 3☒ 4☐

Other .....

and Address .....

PERMIT ISSUED WITH LETTER

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

(2) Mr. Carroll

Permit No 82/966

Location 524 Forest Ave

Owner American Red Cross

Date of permit 10-21-82

Approved 10-28-82

Dwelling

Garage

Alteration to building

NOTES Work Complete 1/3/83

# CITY OF PORTLAND

JOSEPH E. GRAY, JR.
DIRECTOR OF PLANNING
AND URBAN DEVELOPMENT

October 28, 1982

American Red Cross Blood Center
524 Forest Ave.
Portland, Maine

Dear Sir,

Your application to make alterations to 524 Forest Ave. as per plans is being issued with the following requirements.

1. Internally lit exit signs and emergency lighting shall be provided for all exits and paths to reach same.

2. All doors involved in the means of egress shall be equipped with latch sets which shall open from the inside without the use of keys, special knowledge, or ability, but by merely turning the ususal knob or by pressure on a plate or lever.

3. The sprinkler system shall be tested and certified to be operative. Proof of this requirement shall be furnished to this office.

4. All vertical openings (stairways) shall be enclosed with construction having a fire rating of at least one hour including fire door with self-closers.

5. The sprinkler system shall be equipped with a flow switch electrically connected to horn and flashing light sounding devices placed as required to assure all persons will hear the alarm.

If yo . e any questions on these requirements please call this office.

Sincerely,

P. Samuel Hoffses,
Chief of Inspection Services Division

cc: Lt. Collins, Fire Prevention

389 CONGRESS STREET • PORTLAND, MAINE 04101 • TELEPHONE (207) 775-5451

# APPLICATION FOR PERMIT

PERMIT ISSUED
OCT 28 1982
CITY of PORTLAND

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION ..... 00966

ZONING LOCATION ... ... ..... PORTLAND, MAINE ..... Oct 21, 1982

*To the* CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

*The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the ... ng building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A ... ding Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION ... 524 Forest Avenue ... Fire District #1 ☐ #2 ☐

1. Owner's name and address ... American Red Cross Blood Ctr.- ... Telephone 775-2367
2. Lessee's name and address ... D. L. Poulin, Inc.-40 Jordan ... Telephone
3. Contractor's name and address ... P.O. Box 460 Brunswick 04011 Telephone 725-4304

... No. of sheets .....

Proposed use of building blood center Same ... No. families .....

Last use ... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....

Other buildings on same lot .....

Estimated contractural cost $ 151,000

FIELD INSPECTOR—Mr. .....

@ 775-5451

| | |
|---|---|
| Appeal Fees | $ ..... |
| Base Fee | 765.57 |
| Late Fee | ..... |
| TOTAL | $ 765.57 |

To make alterations to already existing building, no structural changes, removing and installing partitions to make additonal area as per plans 3 sheets of plans.

send permit to # 1

Stamp of Special Conditions

PERMIT ISSUED WITH LETTER

***NOTE TO APPLICANT:*** *Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## 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) 2"x4"-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? .....

| *APPROVALS BY:* | *DATE* |
|---|---|
| BUILDING INSPECTION—PLAN EXAMINER ..... | |
| ZONING: ..... | |
| BUILDING CODE: ..... | |
| Fire Dept. James P. Collins Lieut. | |
| Health Dept. ..... | |
| Others: ..... | |

**MISCELLANEOUS**

Will work require disturbing of any tree on a public street? .....

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

*Signature of Applicant* D. L. Poulin Pres. Phone # same

Type Name of above D. L. Poulin, Inc.

For American Red Cross Blood Ctr. ☐ 2 ☐ 3 ☒ 4 ☐

Other .....

and Address .....

PERMIT ISSUED WITH LETTER

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

M. Carroll

Permit No. 82/966

Location 524 Forest Ave

Owner American Red Cross

Date of permit 10-21-82

Approved 10-28-82

Dwelling

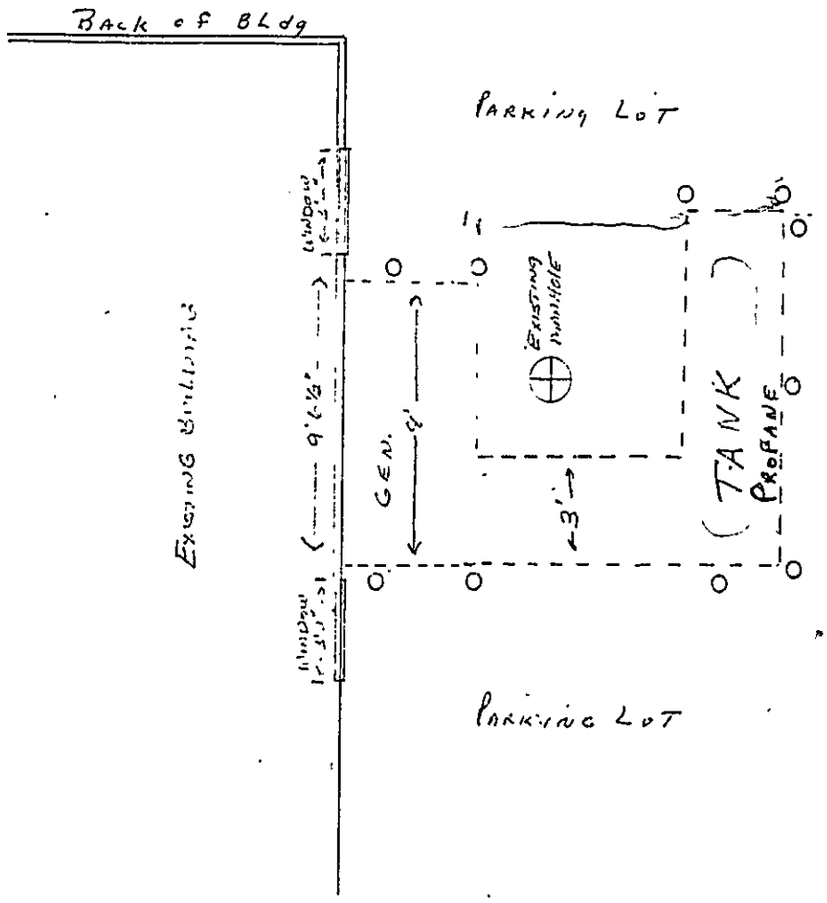
Garage

Alteration to building

NOTES Work Complete 1/28/83

524 Forest Ave

(Previous Location)



524 Front Ave

1. Concrete Slab:

Concrete slab to be installed in accordance with layout attached. Slab to be 18" thick overall, 12" below grade and 6" above with 1/2" re-bars 16" on center.

2. Electrical:

Electrical contractor to supply all necessary labor and materials to facilitate the installation, including:

a. Emergency panel - 100 amp, 3-phase, 24 circuits, 208/220V, as manufactured by I.T.E. Panel to include main breaker and all required branch circuit breakers. Panel to be load balanced.

b. Main electrical feeders interconnecting the following:

1. New emergency panel
2. Transfer switch
3. Generator

c. Branch circuiting from emergency panel to equipment as listed:

1. Walk-In Refrigerator -- 3 pole, 20 amp.
   R1 -- 3 pole, 20 amp
2. Environmental Chamber -- 1 pole, 15 amp.
   E1
3. Gem Freezer F2 -- 2 pole, 20 amp.
4. Gem Freezer F2 -- 2 pole, 20 amp.
5. Gem Refrigerator -- 1 pole, 20 amp.
   R3
6. Jewett Refrigerator -- 1 pole, 20 amp.
   R2
7. Forma Freezer F3 -- 1 pole, 20 amp.
8. Harris Freezer H-1 -- 3 pole, 20 amp.
9. Harris Freezer H-2 -- 3 pole, 20 amp.
10. Executive telephone system -- 1 pole, 20 amp.
11. Existing night lighting.
12. 208 Volt, 40 amp feed to fuel tank for vaporizer.



3. Bumpers:

Bumpers to be located per attached drawing. Bumpers to be 6" in diameter and 4' high.

4. Generator:

Generator to abut building and to be housed in metal shed provided by you. Each end of shed to have one (1) grill for exhausts and intake purposes. Intake grill to be 24" X 24". Exhaust grill to be 24" X 24".

EMERGENCY GENERATOR

ONAN

Model: 30.0 EK-15R/9232D

S.N. 0574801659

30 K.W. 37.5 K.V.A. 3Ø
20 K.W. 25 K.V.A. 1Ø

120/208 volt 104.Amps

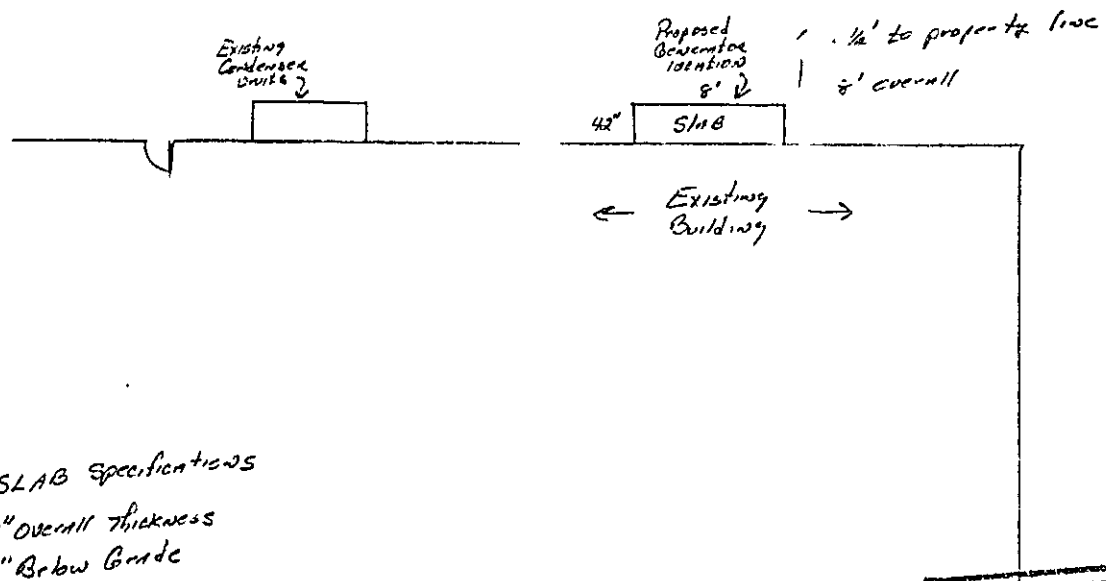
TRANSFER SWITCH

ONAN

Model: LTDVIOU-4/1648C

S.N. 1273752199

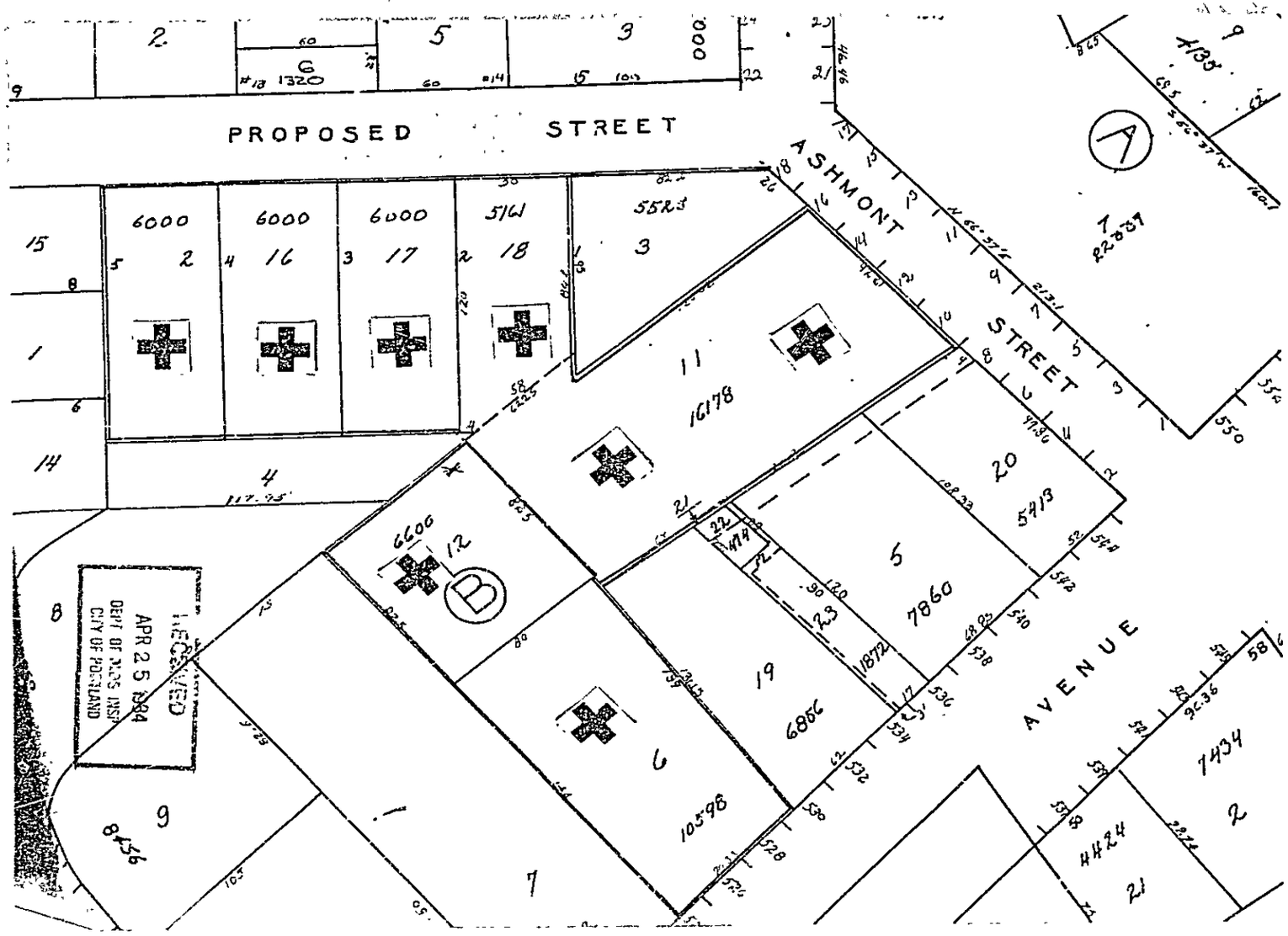
120/208 Volts 3Ø 100 Amp. 4W




SLAB Specifications
18" Overall Thickness
12" Below Grade
1/2" Re Bars 16" O.C



American Red Cross Blood Services
524 Forest Ave
Portland ME.


PROPOSED STREET
ASHMONT STREET
AVENUE
RECEIVED
APR 25 1984
DEPT OF PLANS INSP
CITY OF PORTLAND
A
B

# APPLICATION FOR PERMIT

PERMIT ISSUED
APR 27 1984
CITY of PORTLAND

B.O.C.A. USE GROUP .....
B.O.C.A. TYPE OF CONSTRUCTION ..... 403 .....
ZONING LOCATION ..... B-2 ..... PORTLAND, MAINE . April 25, 1984

*To the* CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

*The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION .....524 Forest Avenue..... Fire District #1 ☐, #2 ☐

1. Owner's name and address American Red Cross Blood Service - same..... Telephone ..775-2367...
2. Lessee's name and address ....American Red Cross - same..... Telephone .....same....
3. Contractor's name and address Marino Electric Service - 68 Taft Avenue. Telephone ....774-3129

..... No. of sheets .....

Proposed use of building .....red cross bldg..... No. families .....
Last use .....same..... No. families .....
Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....
Other buildings on same lot .....

Estimated contractural cost $...6,000.....

FIELD INSPECTOR—Mr. MacIsaac.....
@ 775-5451

| | |
|---|---|
| Appeal Fees | $ ..... |
| Base Fee | ...40.00..... |
| Late Fee | ..... |
| TOTAL | $ ...40.00..... |

To construct 42" x 8' slab to be used for generator to set on as per plans. 1 sheet of plans.

Stamp of Special Conditions

send permit to # 1 - 04101

*NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## DETAILS OF NEW WORK

Is any plumbing involved in this work? ....no..... Is any electrical work involved in this work? ..yes.....
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? .....

*APPROVALS BY:* *DATE*
BUILDING INSPECTION—PLAN EXAMINER .....
ZONING: OK MCW 4/25/84
BUILDING CODE: .....
Fire Dept.: .....
Health Dept.: .....
Others: .....

## 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..

*Signature of Applicant* Timothy O'Connel ..... Phone # ....same.
Type Name of above Timothy O'Connel for American Red Cross ..... ☒ 2 ☐ 3 4
Other .....
and Address .....

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

10 Mr. MacIsaac.

Permit No. 84/403

Location 324 Market Cape

Owner Constance Williams

Date of permit 4-25-84

Approved 4-27-84

Dwelling Not to exceed

Garage

Alteration

NOTES

5-4 WORK NOT STARTED TW

8-19 WORK STILL NOT STARTED TW

1-2-85 WORK STILL NOT STARTED.

EXTENSION WAS GIVEN ON THE

PERMIT AND IT HAS SINCE EXPIRED

ALONG W/THE PERMIT TW

# APPLICATION FOR PERMIT

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION .....00096.....

ZONING LOCATION ..... PORTLAND, MAINE .. Feb. 14, .. 1983.

PERMIT ISSUED
FEB 16 1983
CITY of PORTLAND

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

*The undersigned hereby applies for a permit to erect, alter repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:*

LOCATION .....524 Forest Avenue.....

1. Owner's name and address .American Red Cross- Chapter of Red Cross..... Fire District #1 ☐, #2 ☐
2. Lessee's name and address ..... Telephone .774-1411.....
3. Contractor's name and address .Harvey Klugman Constr.-P. O. Box 4902 DDS Telephone 775-2367
   ..... Telephone .797-9384...

Proposed use of building ..American chapter of red cross..... No. of sheets .....

Last use ...same..... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... No. families .....

Other buildings on same lot ..... Roofing .....

Estimated contractural cost $..2,200.....

FIELD INSPECTOR—Mr. .....

@ 775-5451

| | |
|---|---|
| Appeal Fees | $ ..... |
| Base Fee | ..25.00... |
| Late Fee | ..... |
| TOTAL | $ ..25.00.. |

To make alterations to already existing building as per plans. work is being done in chapter of red cross, not blood center

send permit to # 3 04112

Stamp of Special Conditions

***NOTE TO APPLICANT:*** *Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.*

## 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 ..... Column 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? .....

*APPROVALS BY:* *DATE*

BUILDING INSPECTION—PLAN EXAMINER .....

ZONING: .....

BUILDING CODE: .....

Fire Dept.: .....

Health Dept.: .....

Others: .....

## MISCELLANEOUS

Will work require disturbing of any tree on a public street? .....

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

*Signature of Applicant* .....

Type Name of above ....Harvey Klugman for American Red Cross..... Phone # ..same.....

Other ..... 1 ☐ 2 ☐ 3 ☒ 4 ☐

and Address .....

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

19 MR. WILLIAMS

Permit No. 83/096

Location 524 Hall Ave

Owner Cimarron Red Cross

Date of permit 2-14-83

Approved 2-15-83

Dwelling

Garage

Alteration to building

NOTES

83 WORK COMPLETE AB PER INSPECTOR

# APPLICATION FOR PERMIT

## DEPARTMENT OF BUILDING INSPECTIONS SERVICES

## ELECTRICAL INSTALLATIONS

Date March 30, 19 90
Receipt and Permit number 01202

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: ~~524 Forest Ave.~~ ADDRESS: 524 Forest Avenue

OWNER'S NAME: Red Cross

| | FEES |
|---|---|
| OUTLETS: Receptacles ____ Switches ____ Plugmold ____ ft. TOTAL 100 | 9.00 |
| FIXTURES: (number of) Incandescent ____ Flourescent X (not strip) TOTAL 160 | 18.00 |
| Strip Flourescent ____ ft. | |
| SERVICES: Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____ | |
| METERS: (number of) ____ | |
| MOTORS: (number of) | |
| Fractional ____ | |
| 1 HP or over ____ | |
| RESIDENTIAL HEATING: | |
| Oil or Gas (number of units) ____ | |
| Electric (number of rooms) ____ | |
| COMMERCIAL OR INDUSTRIAL HEATING: | 5.00 |
| Oil or Gas (by a main boiler) ____ | |
| Oil or Gas (by separate units) ____ | |
| Electric Under 20 kws ____ Over 20 kws ____ | |
| APPLIANCES: (number of) Ranges ____ Cook Tops ____ Wall Ovens ____ Dryers ____ Fans ____ Water Heaters ____ Disposals ____ Dishwashers ____ Compactors ____ 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. ____ | 2.00 |
| Alterations to wires ____ moving exit signs | |
| Repairs after fire ____ | |
| Emergency Lights, battery ____ | |
| Emergency Generators ____ | |
| INSTALLATION FEE DUE: | |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: | |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... TOTAL AMOUNT DUE: | 34.00 |

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

CONTRACTOR'S NAME: Favreau Elec.
ADDRESS: 37 Jordan Ave. Brunswick, Maine 04011
TEL.: 725-2005
MASTER LICENSE NO.: 04232
LIMITED LICENSE NO.: ____

SIGNATURE OF CONTRACTOR: M Favreau

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

**ELECTRICAL INSTALLATIONS**

Permit Number 61202

Location 524 Forest Ave

Owner Red Cross

Date of Permit 3-30-90

Final Inspection 7-6-90

By Inspector [illegible]

Permit Application Register Page No. 96

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in 4-19-90 by SB

PROGRESS INSPECTIONS: 5-14-90 / ceiling /

6-12-90 / walls /

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

| DATE: | REMARKS. |
|---|---|
| | |

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

# PLUMBING APPLICATION

**PROPERTY ADDRESS**

| | |
|---|---|
| Town Or Plantation | PORTLAND |
| Street Subdivision Lot # | 524 FOREST AVE. |

**PROPERTY OWNERS NAME**

| | |
|---|---|
| Last / First | AMERICAN RED CROSS |
| Applicant Name: | THOMAS R KELLEY |
| Mailing Address of Owner/Applicant (If Different) | BOX #1272 SCARBOROUGH |

**Caution: Permit Required**

Plumbing shall not be installed

PORTLAND .3901 TOWN COPY

Date Permit Issued 7/9/91

$ 16 FEE ☐ Double Fee Charged

L.P.I. #

Local Plumbing Inspector Signature

**Owner/Applicant Statement**

*I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit*

Signature of Owner/Applicant — Date

**Caution: Inspection Required**

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

Local Plumbing Inspector Signature — 7/9/91 Date Approved

## PERMIT INFORMATION

**This Application is for**

1. ☑ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

**Type Of Structure To Be Served:**

1 ☐ SINGLE FAMILY DWELLING
2 ☐ MODULAR OR MOBILE HOME
3 ☐ MULTIPLE FAMILY DWELLING
4. ☑ OTHER - SPECIFY: OFFICE

**Plumbing To Be Installed By:**

1. ☑ MASTER PLUMBER
2 ☐ OIL BURNERMAN
3 ☐ MFG D. HOUSING DEALER/MECHANIC
4 ☐ PUBLIC UTILITY EMPLOYEE
5 ☐ PROPERTY OWNER

LICENSE # 01,5,8,2

| Number | Hook-Ups And Piping Relocation | Number | Column 2 Type of Fixture | Number | Column 1 Type Of Fixture |
|---|---|---|---|---|---|
| | HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District | | Hosebibb / Sillcock | | Bathtub (and Shower) |
| | | | Floor Drain | | Shower (Separate) |
| | | | Urinal | | Sink |
| | HOOK-UP: to an existing subsurface wastewater disposal system. | | Drinking Fountain | | Wash Basin |
| | | | Indirect Waste | | Water Closet (Toilet) |
| | | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures | | Grease/Oil Separator | | Dish Washer |
| | | | Dental Cuspidor | | Garbage Disposal |
| | | | Bidet | | Laundry Tub |
| | Hook-Ups (Subtotal) | | Other: SQUARE EXCLUDE | | Water Heater |
| $ | Hook-Up Fee | | Fixtures (Subtotal) Column 2 | | Fixtures (Subtotal) Column 1 |
| | | | | | Fixtures (Subtotal) Column 2 |
| | | | | | Total Fixtures |
| | | | | $ | Fixture Fee |
| | | | | $ | Hook-Up Fee |
| | | | | $ 6 | Permit Fee Total |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Page 1 of 1
HHE - 211 Rev 4/83

TOWN COPY

CITY OF PORTLAND, MAINE
Department of Building Inspection

# Certificate of Occupancy

LOCATION 524 Forest AVe.

Date of Issue 7/30/90

Issued to American Red Cross

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 90/0179, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

| PORTION OF BUILDING OR PREMISES | APPROVED OCCUPANCY |
|---|---|
| First Floor | Office Space |

Limiting Conditions:

This certificate supersedes certificate issued

Approved: 7/11/90 (Date) SB

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Permit # 179 City of Portland BUILDING PERMIT APPLICATION Fee $295. Zone _____ Map # _____ Lot# _____

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

Owner: American Red Cross Phone # 775-2367

Address: 524 Forest Ave - Ptld, ME

LOCATION OF CONSTRUCTION 524 Forest Ave.

Contractor: Murray Construction Co Sub.:

Address: P O Box 2530 - South Portland 04106 Phone # 799-3136

Est. Construction Cost: $55,000. Proposed Use: Commercial- blood bank Zoning: B-2

Past Use: commercial - blood bank

# 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 - partitions, 1st floor

**For Official Use Only**

Date 2/27/90 Subdivision: _____ Name _____

Inside Fire Limits _____ Lot _____

Bldg Code _____ Ownership: _____ Public _____ Private

Time Limit _____

Estimated Cost $55,000

Street Frontage Provided _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date: _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other _____ (Explain) _____

OK [illegible] 3-14-1991

**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 _____

**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 ISSUED
900179 POS
MAR 16 1990
City Of Portland

Permit Received By Louise Chase

Signature of Applicant _____ Date 2/27/90

Signature of CEO _____ Date 3-14-90

PERMIT ISSUED WITH LETTER

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 295.
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

| Type | Date |
|---|---|
| | / / |
| | / / |
| | / / |
| | / / |
| | / / |
| | / / |

COMMENTS 7/11/90 C of O Final for first floor, ok office space.

Signature of Applicant [signature] Date 2/27/90

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

March 15, 1990

RE: 524 Forest Avenue

Murray Construction Co.
P.O. Box 2503
South Portland, Maine 04106

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

1. Sprinkler system coverage shall be in accordance with N.F.P.A. #13. Light hazard occupancy.
2. Means of egress shall be illuminated in accordance with N.F.P.A. 101 LIfe Safety Code Section 5-8.
3. Emergency lighting shall be provided in accordance with Section 5-9.
4. Means of egress shall have signs in accordance with Section 5-10.
5. Detection, alarm, and communication system shall be in accordance with Section 27-3.4.
6. Portable fire extinguisher shall be provided in accordance with Section 27-3.5. (see N.F.P.A. #10)
7. Ramps indicated on plan shall be in accordance with Section 5-2.5 "Class A".

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el

cc: LT. Wallace Garroway, Fire Prevention Bureau

Permit # 179 City of Portland BUILDING PERMIT APPLICATION Fee $295. Zone _____ Map # _____ Lot # _____

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

Owner: American Red Cross Phone # 775-2367

Address: 524 Forest Ave - Ptld, ME

LOCATION OF CONSTRUCTION 524 Forest Ave.

Contractor: Murray Construction Co Sub.:

Address: P O BOx 2530 - South Portland 04106 Phone # 799-8136

Est. Construction Cost: $55,000. Proposed Use: commercial- blood bank

Past Use: commercial - blood bank

# 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 - partitions, 1st floor

**For Official Use Only**

Date 2/27/90 Subdivision: Name _____ Lot _____

Inside Fire Limits _____

Bldg Code _____ Ownership _____ Public _____ Private _____

Time Limit _____

Estimated Cost $55,000

Zoning: B-2

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes ____ No ____ Date _____

Planning Board Approval: Yes ____ No ____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivis

Shoreland Zoning Yes ____ No ____ Floodplain Yes ____ No ____

Special Exception _____

Other _____ (Explain) OK WD 3-14-90

**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: _____

900179 PERMIT ISSUED MAR 16 199

**Roof:**
1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

**Chimneys:**
Type: _____ Number of Fire Places _____

City Of Port

**Heating:**
Type of Heat: _____

**Electrical:**
Service Entrance Size: _____ Smoke Detector Required Yes _____

**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 Chase

Signature of Applicant _____ Date 2/27/

Signature of CEO _____ Date _____

PERMIT ISSUED WITH LETTER

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag -CEO 9 MR. ROWE

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

March 15, 1990

RE: 524 Forest Avenue

Murray Construction Co.
P.O. Box 2503
South Portland, Maine 04106

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

1. Sprinkler system coverage shall be in accordance with N.F.P.A. #13. Light hazard occupancy.
2. Means of egress shall be illuminated in accordance with N.F.P.A. 101 LIfe Safety Code Section 5-8.
3. Emergency lighting shall be provided in accordance with Section 5-9.
4. Means of egress shall have signs in accordance with Section 5-10.
5. Detection, alarm, and communication system shall be in accordance with Section 27-3.4.
6. Portable fire extinguisher shall be provided in accordance with Section 27-3.5. (see N.F.P.A. #10)
7. Ramps indicated on plan shall be in accordance with Section 5-2.5 "Class A".

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el

cc: Lt. Wallace Garroway, Fire Prevention Bureau

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

# PLUMBING APPLICATION

**PROPERTY ADDRESS**

| | |
|---|---|
| Town Or Plantation | PORTLAND |
| Street Subdivision Lot # | 524 FOREST AVE |

**PROPERTY OWNERS NAME**

AMERICAN RED CROSS
Last: First:

| | |
|---|---|
| Applicant Name: | AAA ENERGY SERVICE |
| Mailing Address of Owner/Applicant (If Different) | PO Box 908<br>SCARBOROUGH ME |

PORTLAND 3646 TOWN COPY
Date Permit Issued: 4 9 90 $ 30 FEE Double Fee Charged
Local Plumbing Inspector Signature L.P.I. # 0123

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge & I understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant — Date 4/9/90

**Caution: Inspection Required**

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

Local Plumbing Inspector Signature — Date Approved APR 29 1990

**PERMIT INFORMATION**

**This Application Is for**

1. ☐ NEW PLUMBING
2. ☒ RELOCATED PLUMBING

APR 1 1990

**Type Of Structure To Be Served:**

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☒ OTHER - SPECIFY COMMERCIAL SPACE

**Plumbing To Be Installed By:**

1. ☒ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D. HOUSING DEALER/MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # 10151119 Corp.

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | Number | Column 2 Type of Fixture | Number | Column 1 Type Of Fixture |
|---|---|---|---|---|
| ☐ HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. | | Hosebibb / Sillcock | | Bathtub (and Shower) |
| | 0 | Floor Drain | | Shower (Separate) |
| OR | | Urinal | 3 | Sink |
| ☐ HOOK-UP: to an existing subsurface wastewater disposal system. | | Drinking Fountain | 2 | Wash Basin |
| | 2 | Indirect Waste | 1 | Water Closet (Toilet) |
| | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| ☐ PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures | | Grease/Oil Separator | | Dish Washer |
| | | Dental Cuspidor | | Garbage Disposal |
| | | Bidet | | Laundry Tub |
| Number of Hook-Ups & Relocations | 1 | Other: SEWAGE EJECTOR | 1 | Water Heater |
| $ Hook-Up & Relocation Fee | 3 | Fixtures (Subtotal) Column 2 | 7 | Fixtures (Subtotal) Column 1 |
| | | | 3 | Fixtures (Subtotal) Column 2 |
| | | | 10 | Total Fixtures |
| SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE | | | $30. | Fixture Fee |
| | | | $ | Hook-Up & Relocation Fee |
| | | | $30. | Permit Fee (Total) |

Page 1 of 1
HHE 211 Rev. 9/86

TOWN COPY

PERMIT # 002640 CITY OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT#_____

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

Owner: American Red Cross

Address: 524 Forest Avenue, Portland, Me 04101.

LOCATION OF CONSTRUCTION 524 Forest Avenue # 799-0356

CONTRACTOR: Murray Construction SUBCONTRACTORS: XXXXXXXXXX

ADDRESS: PO Box 2530, S. Portland, 04106

Est. Construction Cost: $12,000 Type of Use: MINOR SITE PLAN

Past Use:

Building Dimensions L____ W____ Sq.Ft.____ # Stories:____ Lot Size:____

Is Proposed Use: ____ Seasonal____ Condominium____ Apartment____

____ Conversion - Explain: to construct new. 2 sets of plans submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

# Of Dwelling Units____ # Of New Dwelling Units____

**For Official Use Only**

Date November 1, 1988

Inside Fire Limits

Bldg Code

Time Limit

Estimated Cost $12,000

Value/Structure

Fee $300.00 - MINOR SITE PLAN

$580.00 - building fee

Subdivision: Yes / No

Name

Lot

Block

Permit Expiration:

Ownership: ____ Public ____ Private

ISSUED

SEP 28 1989

City of Portland

**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. Trusses or Rafter Size ____ Span
2. Sheathing Type ____ Size
3. Roof Covering Type
4. Other

**Chimneys:**

Type: ____ Number of Fire Places

**Heating:**

Type of Heat:

**Electrical:**

Service Entrance Size: ____ Smoke Detector Required Yes____ No____

**Plumbing:**

1. Approval of soil test if required Yes____ No____
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

**Swimming Pools:**

1. Type:
2. Pool Size: ____ x ____ Square Footage
3. Must conform to National Electrical Code and State Law.

**Zoning:**

District ____ Street Frontage Req. ____ Provided

Required Setbacks: Front ____ Back ____ Side ____ Side

**Review Required:**

Zoning Board Approval: Yes ____ No ____ Date:

Planning Board Approval: Yes ____ No ____ Date:

Conditional Use: ____ Variance ____ Site Plan ____ Subdivision ____

Shore and Floodplain Mgmt ____ Special Exception ____

Other ____ (Explain)

Date Approved

Permit Received By Nancy Grossman

Signature of Applicant [signature] agent for owner Date 11-1-88

Signature of CEO ____ Date

Inspection Dates (9) ok

White-Tax Assesor Yellow-GPCOG White Tag -CEO

924235

**Permit #** _____ **City of** Portland **BUILDING PERMIT APPLICATION** **Fee** $220 **Zone** _____ **Map #** _____ **Lot#** _____

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

PERMIT ISSUED
OCT 20 1992
CITY OF PORTLAND

Owner: American Red Cross Phone # 617- 461-2150
Address: 180 Rushcraft Rd- Dedham, MA 02026
LOCATION OF CONSTRUCTION 524 Forest Ave.
Contractor: Murray Const. Sub.: 799-8136
Address: Box 2530; South Ptld,ME Phone # 04106
Est. Construction Cost: 40,000 Proposed Use: donor center/w reno &office
Past Use: donor center/office
# 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 const addition - 9'x23'- entranceway
w windows,door

**For Official Use Only**

Date 10/5/92
Inside Fire Limits _____
Bldg Code _____
Time Limit _____
Estimated Cost 40,000
Subdivision: _____
Name _____
Lot _____
Ownership: Public Private
Zoning: B2
Street Frontage Provided _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required: 14-436
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 14-436
Other _____ (Explain) _____
WDA 10-9-92

**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 _____

**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.

**HISTORIC PRESERVATION**
~~Not in District or Landmark~~
~~Does not require review.~~
~~Requires Review~~

Action: ____ Approved.
____ Approved with Conditions.
____ Denied.
Date 10-6-92
Signature P Meyer

Permit Received By Louise E. Chase
Signature of Applicant William Lapreze Date 10/6/92
Will iam Lapreze
CEO's District 6

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

6 M. Rowe

CONTINUED TO REVERSE SIDE

White - Tax Assessor

Ivory Tag - CEO

924235

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $220 Zone _____ Map # _____ Lot # _____

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

PERMIT ISSUED
OCT 20 1992
CITY OF PORTLAND

Owner: American Red Cross Phone # 617- 461-2150

Address: 180 Rushcraft Rd- Dedham, MA 02026

LOCATION OF CONSTRUCTION 524 Forest Ave.

Contractor: Murray Const. Sub: 799-8136

Address: Box 2530; South Ptld, ME Phone # 04106

Est. Construction Cost: 40,000 Proposed Use: donor center/w reno office

Past Use: donor center/office

# 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 const addition - 9'x23'- entranceway w windows, door

**For Official Use Only**

Date 10/5/92

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost 40,000

Subdivision _____

Name _____

Owner: Private _____

Zoning: B2

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required: 14-436

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 _____ 14-436

Other _____ (Explain) _____ 10-9-92

**HISTORIC PRESERVATION**

X Not in District or Landmark

Does not require review

Requires Review

Status: Approved

Approved w/ Conditions

Denied

Date: 10-6-92

Signature: D Meyer

**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: _____ Size: _____
3. Lally Column Spacing: _____ Spacing 16" O.C.
4. Joists Size: _____ Size: _____
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type. _____
7. Other Material: _____

**Exterior Walls:**

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____ Span(s) _____
4. Header Sizes _____ Yes _____ No. _____
5. Bracing _____
6. Corner Posts Size _____ Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Weather Exposure _____
9. Siding Type _____
10. Masonry Materials _____
11. Metal Materials _____

**Interior Walls:**

1. Studding Size _____ Spacing _____
2. Header Size _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

**Ceiling:**

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

**Roof:**

1. Truss or Rafter Size _____ Size _____
2. Sheathing Type _____
3. Roof Covering Type _____

**Chimneys:** _____ Number of Fire Places _____

Type: _____

**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 L. Chase Date 10/5/92

Signature of Applicant _____

PERMIT ISSUED WITH LETTER

PERMIT ISSUED WITH LETTER

CEO's District _____

6

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

White - Tax Assessor

PLOT PLAN

N

Inspection Record

| Type | Date |
|---|---|
| Completed | 9/1/93 |
| Final | / / |
| | / / |
| | / / |
| | / / |

FEES (Breakdown From Front)

Base Fee $ 220 -
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

COMMENTS

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

William J. Fitzpatrick — SIGNATURE OF APPLICANT

ADDRESS

799-8136 — PHONE NO.

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Inspection Services
Samuel P. Hoffses
Chief

CITY OF PORTLAND

Planning and Urban Development
Joseph E. Gray Jr.
Director

October 19, 1992

Murray Construction
Box 2530
So. Portland, Maine 04107

RE: 524 Forest Avenue

Dear Sir,

Your application to construct an addition 9'x23' entranceway has been reviewed and a permit is herewith issued subject to the following requirements:

1. Means of egress shall have signs in accordance with Section 5-10 Life Safety Code.

2. Means of egress shall illuminated in accordance with Section 5-8 Life Safety Code.

3. Please read and implement items 1, 11 and 15 of the attached building permit report.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

cc: Lt. Garroway - Fire Prevention Bureau

389 Congress Street · Portland, Maine 04101 · (207) 874-8704

BUILDING PERMIT REPORT

ADDRESS: 524 Forest Ave. DATE: 19/OCT/92

REASON FOR PERMIT: 9'x23' entrance way

BUILDING OWNER: American Red Cross

CONTRACTOR: Murray Const.

PERMIT APPLICANT: " "

APPROVED: ✓

CONDITION OF APPROVAL:

✓ 1.) Before concrete for foundation is placed, approvals from ~~Public Works~~ and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection.)

2.) Precaution must be taken to protect concrete from freezing.

3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.

4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.

5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessable location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.

6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m$^2$). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).

7.) All single and multiple-station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code (BOCA National Building Code 1990, and N.F.P.A. 101 Chapter 18 & 19.

8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fireresistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 4 inches cannot pass through any opening. Handrails on stairs shall be no less than 34 inches nor more than 38 inches. Handrails within individual dwelling units shall not be less than 30 inches nor more than 38 inches. For more detail on guards & handrails see Article 8 section 824.0 and 825.0 of the BOCA National Building Code.

10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

X 11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

12.) Stair construction in Use Group R-3, R-4, is a minimum of 9" tread and 8-1/4" maximum rise.

13.) Headroom in habitable spaces is a minimum of 7'6".

14.) The minimum headroom in all parts of a stairway shall not be less than 6 feet 8 inches.

X 15.) All construction and demolition debris must be disposed at the RWS by a licensed carrier or solid waste at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate of occupancy is issued or demolition permit is granted.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el
11/16/88-11/27/90-8/14/91-9/2/92-10/14/92