

130 Clinton Street 131-E-10 -

DRUGS



# DEERING CENTER



## Neighborhood Conservation Program

478 Stevens Avenue / Post Office Box 683  
Portland, Maine 04104  
Telephone 773-1773 773-1774

Mrs. Zano Sturtevant  
150 Clinton St.  
Portland, Maine

Re: 150 Clinton St.  
Portland, Maine

August 17, 1970

Dear Mrs. Sturtevant,

Your property has been surveyed by the Portland Housing Division and has met Minimum Code Standards. Congratulations are extended to you for the general condition of your property. Many people in the area are making improvements in their property, even though they meet the requirements of ordinance relating to housing conditions. Good maintenance is the best way to preserve the useful life of your property and neighborhood.

Other services are available through the site office for further improvements to your property. Should you want advice on landscaping, structural changes, plans, and financing, please call 773-1773 or 773-1774.

If we can be of further help, please feel free to call on us. Thank you for your interest in the program and your cooperation in making Deering Center a more beautiful residential area.

Sincerely yours,

*William M. Dow*

William M. Dow  
Program Director

WMD:pa]

*This program is sponsored by the City of Portland in cooperation with the Federal Department of Housing and Urban Development*

Photos  yes  no

D. 8/14/70

Proj. No.  C.I. Deerme Ct Ass'ts  Zone  Zone Viol

Stories  R/FM  ASXD  SAR  NA  S ST P Com.Units  Rmg Units  Del.Units

LOCATION	130 CLINTON ST	COMP
OWNER AGENT	ZINC STURTEVANT	PEND
OWNER AGENT	SAME	
OWNER AGENT	1740 STURTEVANT	
OWNER AGENT	COLONIAL VILLAGE FAIRMOUTH ME	YES

Occupants	Information			Occupancy				Facilities				Violations		
	LOC.	RENT	FURN.	WK.I.	RMS	PER.	ALLU	LGHS	HEAT	BATH	FLSH		K.SK	H.W
1														
2														
3														
4														
5														
6														
7														
8														

STRUCTURE SCHEDULE

STRUCTURE RATING

<p><b>YARD</b></p> <p><input checked="" type="checkbox"/> GARBAGE &amp; RUBBISH</p> <p><input checked="" type="checkbox"/> CONTAINERS COMPLY</p> <p><input checked="" type="checkbox"/> DRAINAGE</p> <p><input checked="" type="checkbox"/> ZONE VIOL.</p> <p><b>STRUCTURE EXTERIOR</b></p> <p><input type="checkbox"/> STEPS, STAIRS, PORCHES</p> <p><input type="checkbox"/> FOUNDATION</p> <p><input checked="" type="checkbox"/> WALLS</p> <p><input checked="" type="checkbox"/> WINDOWS, DOORS</p> <p><input checked="" type="checkbox"/> ROOF, DRAINS</p> <p><input checked="" type="checkbox"/> OUT BUILDINGS</p> <p><b>INFESTATION</b></p> <p><input checked="" type="checkbox"/> RATS <input type="checkbox"/> B <input type="checkbox"/> D <input type="checkbox"/> I</p> <p><input checked="" type="checkbox"/> OTHER (SPECIFY)</p> <p><b>CORES</b></p> <p><input checked="" type="checkbox"/> WALL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input checked="" type="checkbox"/> CEILING</p>	<p><b>STRUCTURE INTERIOR</b></p> <p><input type="checkbox"/> HALL OPENING</p> <p><input type="checkbox"/> HALL LIGHTING</p> <p><input type="checkbox"/> HALL, FLOOR WALLS CEILING</p> <p><input type="checkbox"/> STAIRWAYS</p> <p><input type="checkbox"/> WINDOWS, AIRSHAFT</p> <p><input type="checkbox"/> ELECT. WIRING</p> <p><b>HEATING CENTRAL</b> YES: <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p><input type="checkbox"/> BRICK FLUES, VENTS</p> <p><input type="checkbox"/> CHIMNEY</p> <p><input type="checkbox"/> EQUIPMENT, REPAIR</p> <p><b>PLUMBING</b></p> <p><input checked="" type="checkbox"/> SUPPLY LINE</p> <p><input type="checkbox"/> WASTE LINE</p> <p><b>BASEMENT</b></p> <p><input type="checkbox"/> GEN'L SANIT'N</p> <p><input type="checkbox"/> DAMPNESS</p> <p><input type="checkbox"/> CRACKS</p> <p><input type="checkbox"/> LIGHTING</p> <p><b>2. DR. UNIT</b></p> <p><input type="checkbox"/> MIN 7' x 3'</p> <p><input type="checkbox"/> DAMPNESS</p> <p><input checked="" type="checkbox"/> WINDOW 1/12 x 8"</p> <p><input checked="" type="checkbox"/> DUAL FORCESS YES: <input type="checkbox"/> NO <input type="checkbox"/></p> <p><b>PROHIBITED COMB'N USE</b></p> <p><input type="checkbox"/> ASSOC. USE HAZARD</p> <p><input type="checkbox"/> HAZARDOUS VENTS</p>
--	---

Remarks \_\_\_\_\_

CS-8

Inspector ago

Portland Health Dept.

