

31-34 FLORENCE STREET



SHAW-WALKER

First cut # 9201R - Mail cut # 9202H - Third cut # 9207R - Fifth cut # 9205R

PERMIT TO INSTALL PLUMBING

Address 233 Florence St. PERMIT NUMBER **220**

Installation For: Dwelling

Owner of Bldg: Marion E. Conant

Owner's Address: 33 Florence St.

Plumber: Andrew E. Mativior Date: 3-8-71

Date Issued March 1971
 Portland Plumbing Inspector
 By ERNOLD R. GOODWIN

App. Final Insp.
 Date 3/11/71
 By WALTER H. WALLACE
 DEPUTY PLUMBING INSPECTOR

App. Final Insp.
 Date 3/11/71
 By WALTER H. WALLACE
 DEPUTY PLUMBING INSPECTOR

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

NEW	REPL.		NO	FEE
	<input checked="" type="checkbox"/>	SINKS	1	\$2.00
	<input checked="" type="checkbox"/>	LAVATORIES	2	4.00
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
TOTAL				\$6.00

Building and Inspection Services Dept.; Plumbing Inspection

<input type="checkbox"/> SINGLE				
<input type="checkbox"/> MULTI FAMILY				
<input type="checkbox"/> NEW CONSTRUCTION				
<input type="checkbox"/> REMODELING				
SM 12-53	<input type="checkbox"/>	PORTLAND HEALTH DEPT.	PLUMBING INSPECTION	Total
				1 \$ 2.00
<input type="checkbox"/> NEW CONSTRUCTION				
<input type="checkbox"/> REMODELING				
SM 12-53	<input type="checkbox"/>	PORTLAND HEALTH DEPT.	PLUMBING INSPECTION	Total
				1 \$ 2.00
<input type="checkbox"/> MULTI FAMILY				
<input type="checkbox"/> NEW CONSTRUCTION				
<input type="checkbox"/> REMODELING				
SM 12-53	<input type="checkbox"/>	PORTLAND HEALTH DEPT.	PLUMBING INSPECTION	Total
				1 \$ 2.00

PERMIT NUMBER 9690

Date Issued 1/17/61

By J. P. Welch

Inspector

APPROVED FIRST INSPECTION

Date Jan 17-61

By JOSEPH P. WELCH

APPROVED FINAL INSPECTION

Date Jan 17-61

By JOSEPH P. WELCH

TYPE OF BUILDING
 COMMERCIAL
 RESIDENTIAL
 SINGLE
 MULTI FAMILY
 NEW CONSTRUCTION
 REMODELING

SM 12 33 PORTLAND HEALTH DEPT.

NEW CONSTRUCTION
 REMODELING

SM 12 33 PORTLAND HEALTH DEPT.

PERMIT TO INSTALL PLUMBING

Address 33 Florence Street

Installation For Marion Conant

Owner of Bldg Marion Conant

Owner's Address 334 Highland Avenue, S.P.

Plumber W. W. Johnson & Sons Date 1/17/61

NEW	REPL	PROPOSED INSTALLATIONS	NOA BERT	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS 3		
		GARBAGE GRINDERS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS (conn. to house drain)		
1		Replace waste pipes	1	2.00
			1	2.00
				Total

PORTLAND HEALTH DEPT. PLUMBING INSPECTION

SM 12 33 PORTLAND HEALTH DEPT. PLUMBING INSPECTION

SM 12 33 PORTLAND HEALTH DEPT. PLUMBING INSPECTION

118MUN
 100000

PERMIT NUMBER 9553

Date Issued 11-25-60

PORTLAND PLUMBING INSPECTOR

By J.P. Welch

APPROVED FIRST INSPECTION

Date 12-9-60

By J.P. Welch

APPROVED FINAL INSPECTION

Date 12-9-60

By JOSEPH P. WELCH

TYPE OF BUILDING

- COMMERCIAL
 RESIDENTIAL
 SINGLE
 MULTI FAMILY
 NEW CONSTRUCTION
 REMODELING

PERMIT TO INSTALL PLUMBING

Address: 33 Filadelfia Street

Installation For: Max. Toilet & Shower

Owner of Bldg: Max. Toilet & Shower

Plumber: J. Welch Date: 11-25-60

NEW	REP L	PROPOSED INSTALLATIONS	NUMBER	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS		
		HOT WATER TANKS	3	
		TANKLESS WATER HEATERS		
		GARBAGE GRINDERS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS (conn. to house drain)		
1		1 - 1/2" Dia. Pipe	1	1.00
		1 - 1/2" Dia. Pipe	1	1.00
Total				

SM 12 53 PORTLAND HEALTH DEPT.

PLUMBING INSPECTION

Total

12-9-60

11/25/60

OH

11/25/60

12-9-60



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED 01802 NOV 25 1960 CITY OF PORTLAND

Portland, Maine, November 25, 1960

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 33 Florence St. Use of Building Dwelling No Stories 2 New Building Existing " Name and address of owner of appliance Mrs. Marian A. Grant, 533 Forest Ave. Installer's name and address Ballard Oil & Equipment Co. 135 Marginal Way Telephone 2-1791

General Description of Work

To install Oil-fired Esso domestic hot water heater, replacing electric hot water heater.

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? none If so, how protected? Kind of fuel? oil Minimum distance to burnable material, from top of appliance or casing top of furnace 18" From top of smoke pipe 18" From front of appliance 6" From sides or back of appliance 6" Size of chimney flue 8x12 Other connections to same flue furnace If gas fired, how vented? Rated maximum demand per hour Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Esso-gunt type 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 14" Location of oil storage basement Number and capacity of tanks 1-10 gal. Low water shut off Make No. Will all tanks be more than five feet from any flame? yes How many tanks enclosed? Total capacity of any existing storage tanks for furnace burners 27 gal.

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath? If so, how protected? Height of Legs, if any Skirting at bottom of appliance? Distance to combustible material from top of appliance? From front of appliance From sides and back From top of smokepipe Size of chimney flue Other connections to same flue Is hood to be provided? If so, how vented? Forced or gravity? If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 2.00 (\$2.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED

Handwritten signature and date 11.26.60

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 Installer: Ballard Oil & Equip Co. by: [Handwritten Signature]

CI 300

INSPECTION COPY

Signature of Installer

P.H.T.



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, August 1, 1955

PERMIT ISSUED 01238 AUG 3 1955 CITY of PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 33 Florence Street Use of Building Dwelling No. Stories 1 Building Existing " Name and address of owner of appliance Mrs. Izetta Allen, 33 Florence St. Installer's name and address N. A. Bruns, 235 Franklin Street Telephone 34744

General Description of Work

To install oil burning equipment in place of gravity warm air heat coal-fired

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no Kind of fuel? oil Minimum distance to burnable material, from top of appliance or casing top of furnace 2'6" From top of smoke pipe 3' From front of appliance Over 4' From sides or back of appliance Over 3' Size of chimney flue 8x8 Other connections to same flue stove Rated maximum demand per hour Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Mayflower 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. Low water shut off Make No. Will all tanks be more than five feet from any flame? yes How many tanks enclosed? Total capacity of any existing storage tanks for furnace burners none

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath? 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

Mayflower burner made by same mfg. as Quiet Heat

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 [Signature]

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

INSPECTION COPY

Signature of Installer N. A. Bruns Frank Beachy

CIT-21-11 MAR 55



RMJ

FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED 00061 JAN 19 1952 CITY OF PORTLAND

Portland, Maine, ... March ... 1951

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 33 Florence Street Use of Building No. Stories New Building Existing Name and address of owner of appliance Isetta Allen, 33 Florence Street Installer's name and address Holland Furnace Co., 7 Franklin Street Deering Ave. Telephone 5-1522

General Description of Work

To install gravity warm air heating system

IF HEATER, OR POWER BOILER

Material of appliance or source of heat Type of floor beneath appliance Is wood, how protected? Kind of fuel 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 gas fired, how vented? Rated maximum demand per hour

IF OIL BURNER

Name and type of burner Labeled 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 Location of oil storage Number and capacity of tanks If two 275-gallon tanks, will three-way valve be provided? Will all tanks be more than five feet from any flame? How many tanks fire proofed? Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Kind of fuel Type of floor beneath appliance Is wood, how protected? Minimum distance to wood or 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? 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: [Signature]

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

INSPECTION COPY

Signature of Installer

AP 33 Florence Street-I

December 19, 1951

Mrs. Isetta Allen
33 Florence Street
Holland Furnace Company
Attn: Mr. Kirby
7 Bearing Avenue

Location: 33 Florence Street
Installer: Holland Furnace Company

Dear Mrs. Allen & Gentleman:

Further with relation to heating appliances installed at the above location without a permit having been secured from this department our inspector reports the following defects as compared with Building Code standards for safety and fire prevention, the Building Code containing no requirements as to the efficiency of such apparatus in heating the building:

1. Because the top of the furnace is closer than 15" to burnable material above it, a shield of asbestos lumber no less than 3/16 of an inch thick is required to be suspended about halfway between the top of the furnace and the burnable material above on non-burnable hangers, this shield to be large enough to extend at least 12" beyond the outline of the furnace all around.
2. One of the warm air ducts from the furnace should be without closing devices of any kind, either a damper in the duct or operative louvres in the register, thus to assure that this one duct will always be open and fire hazard largely prevented if the damper should be left open accidentally and the furnace "run away".
3. Certain register boxes which could be seen closer than one inch to burnable material require covering with 14-pound asbestos.
4. If any of the warm air ducts and register boxes are concealed in partitions, walls or floor construction, they require covering with 14-pound asbestos. Most likely the owner or the installer will know whether or not these parts, if any, are covered. If not, they should be. If there are any wall register boxes which have to be removed on this account, it should be noted if the wooden framing is at least two inches above the top of the register box. If not, it should be made so.

This department has no authority to give instructions directly to the installing company to enter into an owner's building and make any changes without owner's consent. According to the Building Code standards for safety, correction of these defects are necessary to safeguard the building and the occupants, and it is hoped that they may be corrected without delay. If the owner feels that the corrections should not be made, or if the owner does not understand the reason for the corrections, it is hoped that she will contact Inspector Thurlow of this office, so that the matter may be cleared up to his satisfaction. Mr. Thurlow may usually be reached by phone (4-1431, extension 234) week days other than Saturday between 4:00 and 4:30 P. M.

The installer should notify this office for another inspection when defects have been corrected. We shall appreciate a notice from the owner at that time as to whether or not she is satisfied with the work done.

Wfcd/G

Approved: _____

Very truly yours,

Warren McDonald
Inspector of Buildings

CITY OF PORTLAND, MAINE
DEPARTMENT OF BUILDING INSPECTION

September 28 1951

Location: 33 Florence Street

Mrs. Isetta Allen,
33 Florence St.
Portland, Maine

Dear Mrs. Allen:

A heating appliance, oil burning equipment or similar device has been installed in the building at the above location although the installer did not apply for and secure a building permit before commencing the installation as required by the Building Code of the City of Portland.

Installers of such equipment had become careless about securing permits before starting such installations, and since early in 1951 a special effort has been underway to compel compliance with this part of the law because such acts are not only in violation of the law, but they leave this Department without knowledge of the installation and the owner without benefit of inspection by the department before the installation is accepted and paid for by the owner.

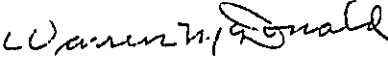
Better operation of the law in this particular is the rule now, but our effort in this connection has turned up a considerable number of installations which may have been thus installed without permits a year or more ago.

With our large volume of inspection work, we have been unable to inspect these jobs, but we hope to do so as fast as time permits.

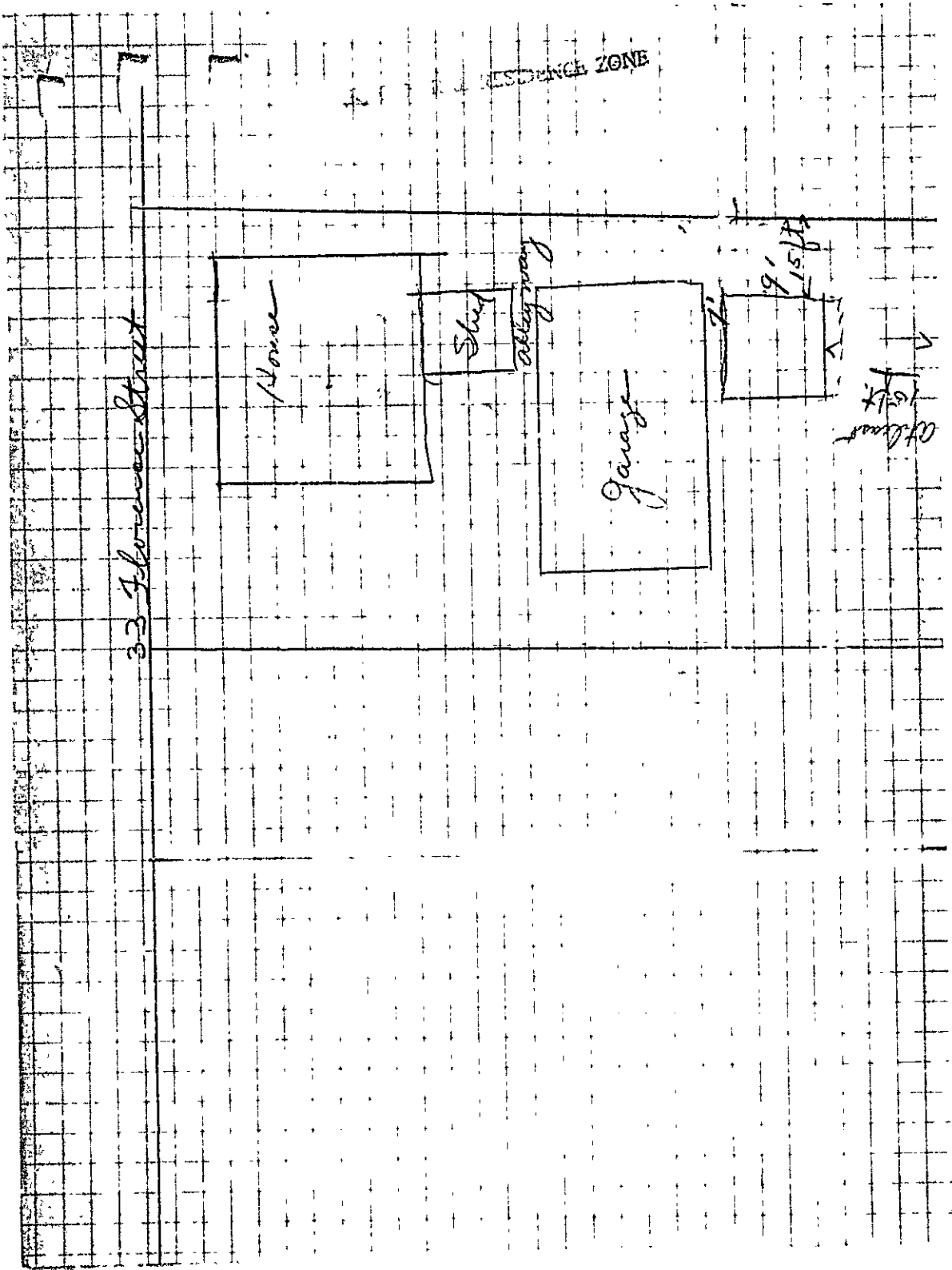
It is to be hoped that the above job, as to its details of installation, complies with the requirements of the Building Code. If not you and the installer will be notified.

It is to be borne in mind that the Building Code regulates details of such installations from the standpoint of fire protection and prevention, and contains no requirements as to the efficiency of the appliance or system in heating the building.

Very truly yours,


Inspector of Buildings

WMCD/H



RESIDENCE ZONE

33 Florence Street

House

Shed

Driveway

Garage

9'
15.5'

at least
10 ft



(R) GENERAL FIRE DANGER ZONE

Permit No. 2430

APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class

Portland, Maine, November 10, 1928

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ alter ~~install~~ the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location 33 Florence Street Ward 9 Within Fire Limits? No Dist. No. _____
 Owner's or Lessee's name and address Charles S. Allen, 33 Florence St. Telephone F 2929 J
 Contractor's name and address Owner Telephone _____
 Architect's name and address _____
 Proposed use of building Poultry house (private) No. families _____
 Other buildings on same lot Dwelling house, garage and po-

Description of Present Building to be Altered

Material Wood No. stories 1 Heat _____ Style of roof _____ Roofing _____
 Last use Poultry house No. families _____

General Description of New Work

To build addition 3' x 7' to building

CERTIFICATE OF COMPLETION
REQUIREMENT IS FULFILLED
NOV 11 1928
OFF. OF BUILDING & PLANNING

Details of New Work

Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof 6' 5 1/2'

To be erected on solid or filled land? solid earth or rock? earth

Material of foundation cedar posts Thickness, top _____ bottom _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof flat Roof covering Asphalt shingles Class C Unl. Lab.

No. of chimneys no Material of chimneys _____ of lining _____

Kind of heat no Type of fuel _____ Distance, heater to chimney _____

If oil burner, name and model _____

Capacity and location of oil tanks _____

Is gas fitting involved? _____ Size of service _____

Corner posts 4x4 Sills 4x4 Girt or ledger board? _____ Size _____

Material columns under girders _____ Size _____ Max. on centers _____

Studs (outside walls and carrying partitions) 2x4-16" O.C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof 2x3

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 _____

Total number commercial cars to be accommodated _____

Will automobile repairing be done other than in _____ cars to cars habitually _____ in the proposed building? _____

Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no

Plans filed as part of this application? yes No. sheets 1

Estimated cost \$ 10. Fee \$.25

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 owner Wm. Charles S. Allen

INSPECTION COPY

2430

W 9 Permit No. 28/2430

Location 33 Florence St.

By Charles Allen

Date of permit 11/10/28

Notif. closing-in

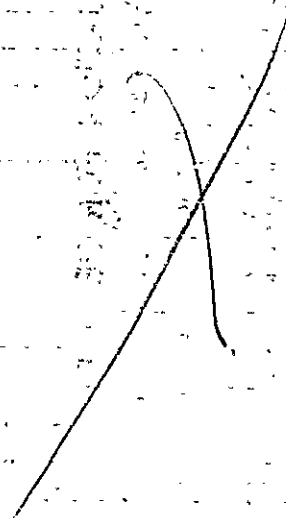
ns. closing-in

Final Notif.

Final Insn. 1/17/29

Cert. of Occupancy issued

NOTES



W 9 Permit No. 28430

Location 33 Florence St

By Charles S. Allen

Date of permit 11/10/28

Notif. closing-in

nsj closing-in

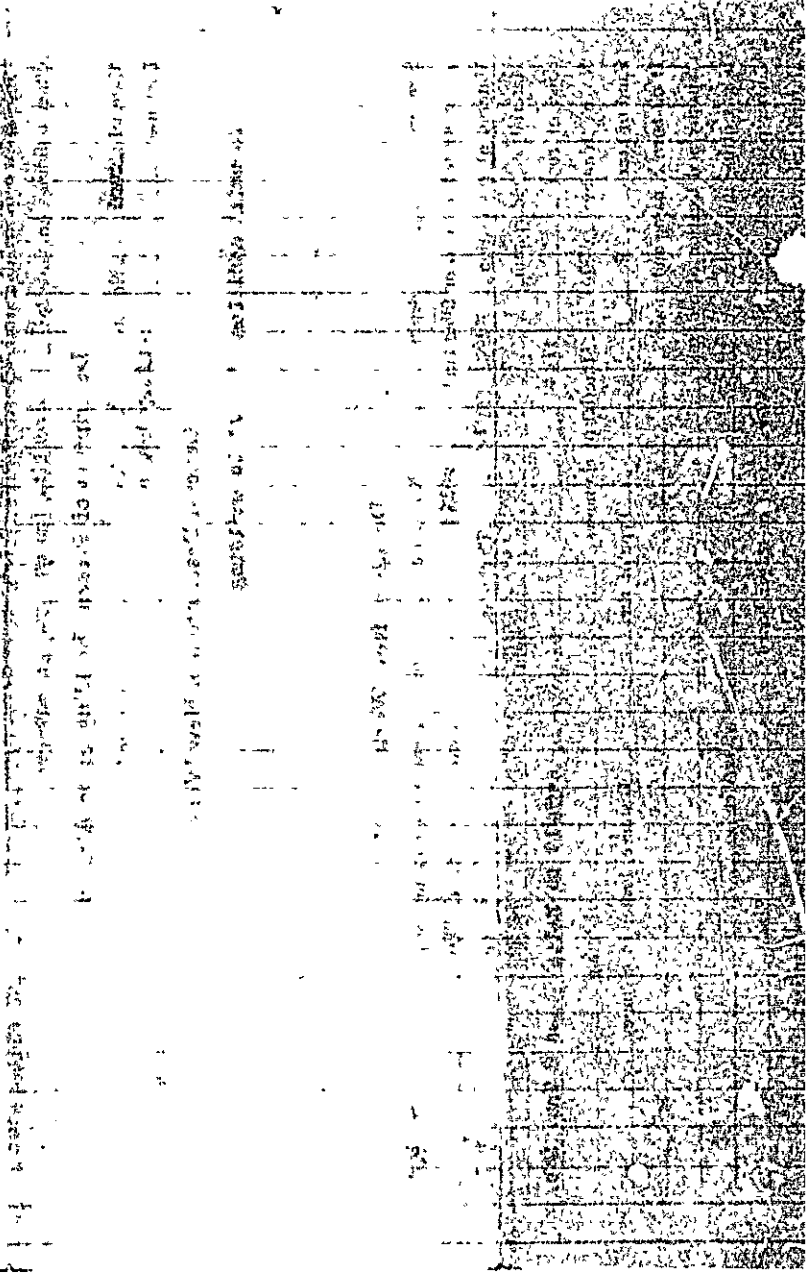
Final Notif.

Final Inspn. 1/17/29

Cert. of Occupancy issued

NOTES

~~Handwritten notes and scribbles, including a large 'X' mark.~~





Location, Ownership and detail must be correct, complete and legible.
 Separate application required for every building.
 Plans must be filed with this application.

Application for Permit for Alterations, etc.

To the Portland, October 25, 1921 192
 INSPECTOR OF BUILDINGS:

The undersigned applies for a permit to alter the following described building:—

Location 33 Florence Ward 8 in fire-limits 30
 Name of Owner or Lessee, Charlan Allen Address 33 Florence
 " " Contractor, owner " "
 " " Architect " "

Description of Present Bldg.

Material of Building is wood Style of Roof, pitch Material of Roofing, shingle
 Size of Building is 24ft feet long; 24ft feet wide. No. of Stories, 2
 Cellar Wall is constructed of stone is _____ inches wide on bottom and batters to _____ inches on top.
 Underpinning is brick is _____ inches thick; is _____ feet in height.
 Height of Building 28ft Wall, if Brick; 1st, _____ 2d, _____ 3d, _____ 4th, _____ 5th, _____
 What was Building last used for? dwelling No. of Families? 2
 What will Building now be used for? same

DETAIL OF PROPOSED WORK

Build dormer windows and stairway all to comply with the building ordinance

Estimated Cost \$300.

IF EXTENDED ON ANY SIDE

Size of Extension, No. of feet long? _____; No. of feet wide? _____; No. of feet high above sidewalk? _____
 No. of Stories high? _____; Style of Roof? _____; Material of Roofing? _____
 Of what material will the Extension be built? _____ Foundation? _____
 If of Brick, what will be the thickness of External Walls? _____ inches; and Party Walls _____ inches.
 How will the extension be occupied? _____ How connected with Main Building? _____

WHEN MOVED, RAISED OR BUILT UPON

No. of Stories in height when Moved, Raised, or Built upon? _____ Proposed Foundations _____
 No. of feet high from level of ground to highest part of Roof to be? _____
 How many feet will the External Walls be increased in height? _____ Party Walls _____

IF ANY PORTION OF THE EXTERNAL OR PARTY WALLS ARE REMOVED

Will an opening be made in the Party or External Walls? _____ in _____ Story.
 Size of the opening? _____ How protected? _____
 How will the remaining portion of the wall be supported? _____

Signature of Owner or Authorized Representative Charlan Allen
 Address 33 Florence St

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK



Location, ownership and detail must be correct, complete and legible. Separate application required for every building. Plans must be filed with this application

APPLICATION FOR PERMIT TO BUILD

(3D CLASS BUILDING)

Portland, Me., October 25, 1921 .19

To WHOM

INSPECTOR OF BUILDINGS

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

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

PERMIT MUST BE RECEIVED BEFORE BEGINNING WORK.

Location 33 Florence Wd. 8

Name of owner is? Charles Allen Address 33 Florence

Name of mechanic is? owner " " " "

Name of architect is? " " " "

Proposed occupancy of building (purpose)? ten house

If a dwelling or tenement house, for how many families? _____

Are there to be stores in lower story? _____

Size of lot, No. of feet front? _____; No. of feet rear? _____; No. of feet deep? _____

Size of building, No. of feet front? 8ft; No. of feet rear? 8ft; No. of feet deep? 10ft

No. of stories, front? 1; rear? _____

No. of feet in height from the mean grade of street to the highest part of the roof? 6ft

Distance from lot lines, front? _____ feet; side? _____ feet; side? _____ feet; rear? _____

Firestop to be used? _____

Will the building be erected on solid or filled land? _____

Will the foundation be laid on earth, rock or piles? _____

If on piles, No. of rows? _____ distance on centres? _____ length of? _____

Diameter, top of? _____ diameter, bottom of? _____

Size of posts? _____

" girts? _____

" floor timbers? 1st floor wooden, 2d _____, 3d _____, 4th _____

O. C. " " " " " " " " " "

Span " " " " " " " " " "

Braces, how put in? _____

Building, how framed? _____

Material of foundation? _____ thickness of? _____ laid with mortar? _____

Underpinning, material of? _____ height of? _____ thickness of? _____

Will the roof be flat, pitch, mansard, or hip? pitch Material of roofing? asphalt

Will the building be heated by steam, furnaces, stoves, or grates? _____ Will the flues be lined? _____

Will the building conform to the requirements of the law? yes

No. of brick walls? _____ and where placed? _____

Means of egress? _____

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

What is the height of cellar or basement? _____

What will be the clear height of first story? _____ second? _____ third? _____

State what means of egress is to be provided? _____

_____ Scuttle and stepladder to roof? _____

Estimated Cost,

\$ 50.

Signature of owner or authorized representative,

Charles S Allen

Address, 33 Florence St

Plans submitted? _____ Received by? _____

192

No. 6333

APPLICATION FOR
PERMIT TO BUILD 3d GLASS BUILDING
LOCATION

No. 31-33 Florence

Ward 6

Inspector.

CONDITIONS

PERMIT GRANTED
October 25, 1921

192

Permit filed out by

Permit number

Plan number

FINAL REPORT

192

Has the work been completed in accordance with
this application and plans filed and approved?

Law been violated?

Nature of violation?

Violation removed when? 192

Estimated cost of building, etc., \$

Building Inspector.

APPROVAL OF PLANS

Supervisor of plans.



Location, Ownership and detail must be correct, complete and legible.
 Separate application required for every building.
 Plans must be filed with this application.

Application for Permit for Alterations, etc.

To the
 INSPECTOR OF BUILDINGS: Portland, June 3, 1918

The undersigned applies for a permit to alter the following-described building:--
 Location 35 Florence Street Ward, 9 in fire-limits? NO
 Name of Owner or Lessee, Anna J. York Address 33 Florence St.
 " " Contractor, Abe Strickland " 31 Florence St
 " " Architect,
 Description of Present Bldg. Material of Building is wood Style of Roof, pitch Material of Roofing, shingles
 Size of Building is 35 feet long; 24 feet wide. No. of Stories, 2 1/2
 Cellar Wall is constructed of stone is inches wide on bottom and batters to inches on top.
 Underpinning is brick is inches thick; is feet in height.
 Height of Building, 28 ft. Wall, if Brick; 1st, 2d, 3d, 4th, 5th,
 What was Building last used for? dwelling No. of Families? two
 What will Building now be used for? dwelling Estimated Cost, \$ 150.

DETAIL OF PROPOSED WORK

Build addition on side to be used for bath rooms;
To comply with the Building Ordinance.

IF EXTENDED ON ANY SIDE

Size of Extension, No. of feet long? 12; No. of feet wide? 6; No. of feet high above sidewalk? 25 ft.
 No. of Stories high? two; Style of Roof? flat; Material of Roofing? Asphalt
 Of what material will the Extension be built wood Foundation? posts
 If of Brick, what will be the thickness of External Walls? inches; and Party Walls inches.
 How will the extension be occupied? bath rooms How connected with Main Building? Joined

WHEN MOVED, RAISED OR BUILT UPON

No. of Stories in height when Moved, Raised or Built upon? Proposed Foundations
 No. of feet high from level of ground to highest part of Roof to be?
 How many feet will the External Walls be increased in height? Party Walls

IF ANY PORTION OF THE EXTERNAL OR PARTY WALLS ARE REMOVED

Will an opening be made in the Party or External Walls? in Story.
 Size of the opening? How protected?
 How will the remaining portion of the wall be supported?

Signature of Owner or
 Authorized Representative

Address

Anna E York
33 Florence St.

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

31-
33 Florence St.

FINAL REPORT

..... 191 ...
Has the work been completed in accordance with this application and plans filed and approved?

.....
Law been violated? Doc. No. of 191 ...

Nature of violation?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

..... 191 ...

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

PERMIT GRANTED

June 3, 1918

Permit filled out by

Permit number

Location 33 Florence Street

[Handwritten mark]

Inspector of Building

.....

1300

X

.....

.....

.....

.....

.....

.....



Location, Ownership and detail must be correct, complete and legible.
 Separate application required for every building.
 Plans must be filed with this application.

Application for Permit for Alterations, etc.

To the Portland, June 15th, 1916.
 INSPECTOR OF BUILDINGS:

The undersigned applies for a permit to alter the following-described building:—

Location 33 Florence St. Ward, 9 in fire-limits? no
 Name of Owner or Lessee, Mrs. J. A. Paterson Address 101 Highland St.
 " " Contractor, F. A. Rumery Co. " 41 Preble St.
 " " Architect, _____ " _____
 Material of Building is wood Style of Roof, pitch Material of Roofing, shingles
 Size of Building is 40 feet long; 25 feet wide. No. of Stories, 2 1/2
 Cellar Wall is constructed of stone is _____ inches wide on bottom and batters to _____ inches on top
 Underpinning is brick is _____ inches thick; is _____ feet in height.
 Height of Building, _____ Wall, if Brick; 1st, _____ 2d, _____ 3d, _____ 4th, _____ 5th, _____
 What was Building last used for? dwelling No. of Families? two
 Building to be occupied for _____ Estimated Cost, \$500

Descrip-
 tion of
 Present
 Bldg.

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

DETAIL OF PROPOSED WORK

Build on two story bay window and addition for sunroom

IF EXTENDED ON ANY SIDE

Size of Extension, No. of feet long? 14; No. of feet wide? 16; No. of feet high above sidewalk? 10'
 No. of Stories high? one; Style of Roof? flat; Material of Roofing? asphalt paper
 Of what material will the Extension be built wood Foundation? pois
 If of Brick, what will be the thickness of External Walls? _____ inches; and Party Walls _____ inches.
 How will the extension be occupied? SUNROOM How connected with Main Building? _____

WHEN MOVED, RAISED OR BUILT UPON

No. of Stories in height when Moved, Raised or Built upon? _____ Proposed Foundations? _____
 No. of feet high from level of ground to highest part of Roof to be? _____
 How many feet will the External Walls be increased in height? _____ Party Walls _____

IF ANY PORTION OF THE EXTERNAL OR PARTY WALLS ARE REMOVED

Will an opening be made in the Party or External Walls? _____ in _____ Story.
 Size of the opening? _____ How protected? _____
 How will the remaining portion of the wall be supported? _____

Signature of Owner or Authorized Representative F. A. Rumery Co.
 Address _____

↓
31-
33 Florence St. ✓

FINAL REPORT

_____ 191
Has the work been completed in accordance with
this application and plans filed and approved?

Law been violated? _____ Doc. No. _____ of 191 _____

Nature of violation? _____

_____ X _____

Permit
7350

PERMIT GRANTED

_____ June 26, 1916
Permit filled out by _____

Permit number _____

Location 33 Florence St. _____

Violation removed, when? _____ 191 _____

Estimated cost of alterations, etc., \$ _____

Inspector of Buildings.

Permit # 0404 City of Portland **BUILDING PERMIT APPLICATION** Fee \$25.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan Walker Phone # 772-0597
 Address: 33 Florence St. Portland, Maine 04103
 LOCATION OF CONSTRUCTION 33 Florence St.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: 2 Apts -1 inc. 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 Change of use from 2 apts. to 2 apts-1 with office
no renovations

For Official Use Only PERMIT ISSUED
 Subdivision: _____ Name: _____
 Date: April 6, 1990 Lot: MAY 21 1990
 Inside Fire Limits: _____ Ownership: _____
 Bldg Code: _____
 Time Limit: _____
 Estimated Cost: _____
 Zoning: R-5 Residence
 Street Frontage Provided: _____ Back _____ Side _____ Side _____
 Provided Setbacks: Front _____
 Review Required: Home Occupation 14-470
 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 W/O A-5-17-90

Foundation:
 1. Type of Soil: _____ Rear _____ Side(s) _____
 2. Set Backs - Front _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor: Sills must be anchored.
 1. Sills Size: _____
 2. Girder Size: _____ Size: _____
 3. Lally Column Spacing: _____ Spacing 16" O.C.
 4. Joists Size: _____ Size: _____
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____ Span(s) _____
 4. Header Sizes _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____ 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: _____ Spacing _____
 2. Ceiling Strapping Size _____
 3. Type Ceilings: _____ Size _____
 4. Insulation Type _____
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafters Size _____ Span _____
 2. Sheathing Type _____ Size _____
 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: _____ Square Footage _____
 2. Pool Size: _____
 3. Must conform to National Electrical Code and State Law.

Permit Received by Latini
 Signature of Applicant _____ Date 4/6/90
 Signature of _____ Date 5/14/90
 Inspection Date _____
 White Tag - CEO 14 Mr. Leahl

Permit # 900404 City of Portland **BUILDING PERMIT APPLICATION** Fee \$25.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan Walker Phone # 772-0597
 Address: 33 Florence St. Portland, Maine 04103
 LOCATION OF CONSTRUCTION 33 Florence St.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: 2 Apts -1 inc. office
 Past Use: 2 apts.
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 In Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion Change of use from 2 apts. to 2 apts-1 with officer
no renovations

For Official Use Only **PERMIT ISSUED**
 Subdivision: _____ Name: MAY 21 1990
 Date: April 6, 1990
 Inside Fire Limits: _____
 Bldg Code: _____
 Time Limit: _____
 Estimated Cost: _____
 Owner: City Of Portland
 Zoning: _____
 Street Frontage Provided: _____ Front _____ Back _____ Side _____
 Provided Setbacks: _____
 Review Required: Home Occupation Date: 11-410
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Site Plan _____ Subdivision _____
 Conditional Use: _____ Variance _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) OK W/O 5-17-90

Foundation:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor: Sills must be anchored.
 1. Sills Size: _____
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Size: _____ 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: _____ Spacing _____
 2. Ceiling Strapping Size _____
 3. Type Ceilings: _____ Size _____
 4. Insulation Type _____
 5. Ceiling Height: _____
Roof:
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 3. Roof Covering Type _____
Chimneys: Type: _____ Number of Fire Places _____
Heating: Type of Heat: _____
Electrical: Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____
Plumbing: Service Entrance Size: _____
 1. Approval of _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____
Swimming Pools:
 1. Type: _____ Square Footage _____
 2. Pool Size: _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Latini
 Signature of Applicant Susan Walker Date 4/6/90
 Signature of CEO [Signature] Date 5-14-90
 Inspection Dates _____
 White Tag - CEO 14 mm, 1990

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 25.00
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

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

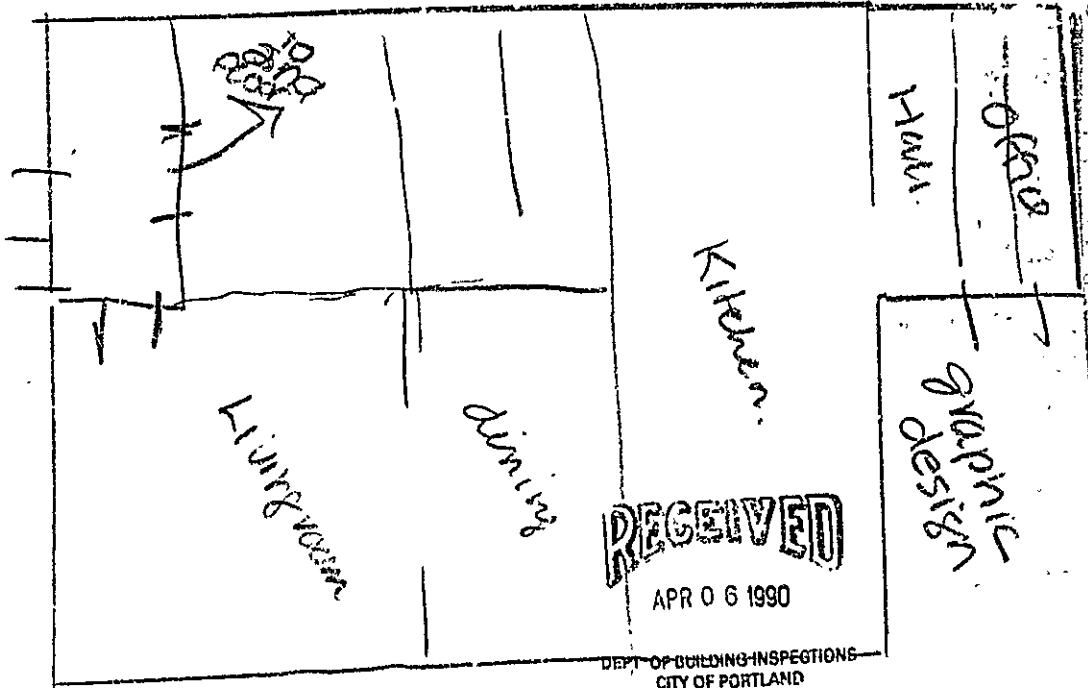
COMMENTS 1 copy of floor plan submitted

CGO issued
Ch. Lowe

Signature of Applicant

Date April 5, 1990

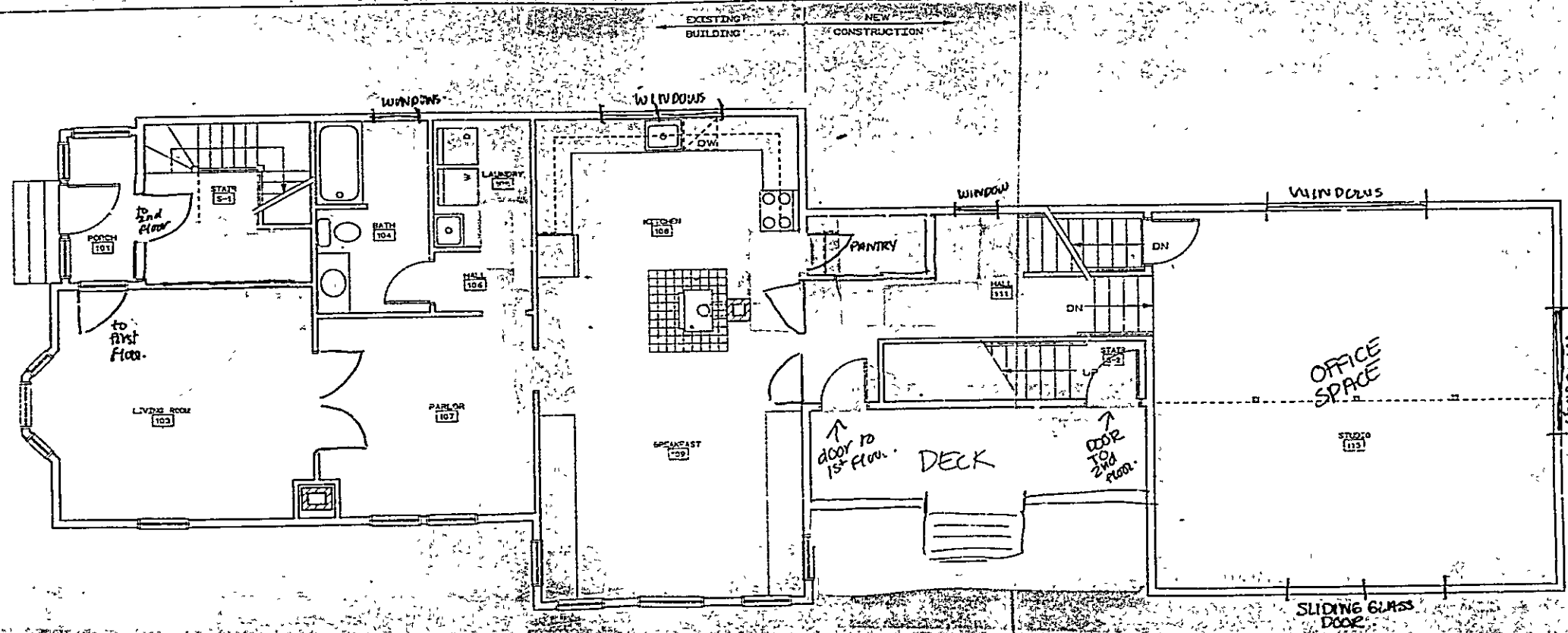
parking will met offstreet



RECEIVED

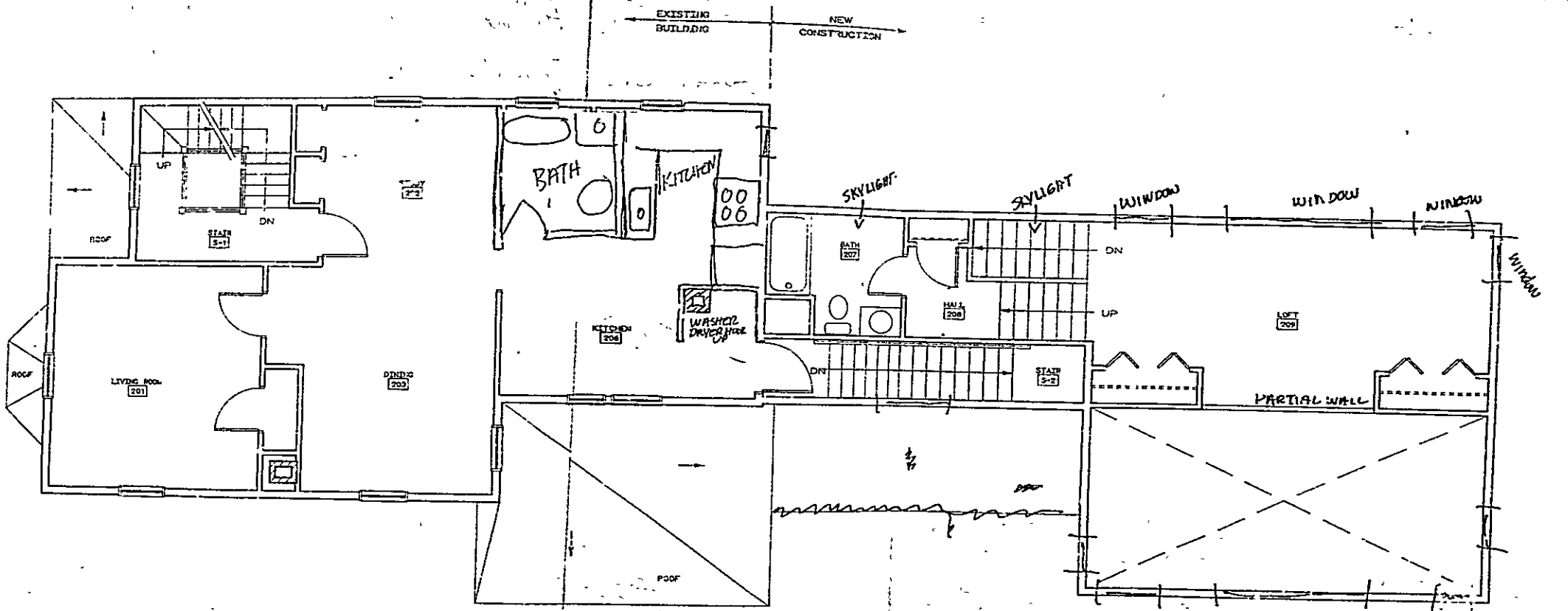
APR 06 1990

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND



33 FIRST FLOOR PLAN

33 Florence St
 Syc Walker
 772-0577



SECOND FLOOR PLAN

33 Florence St.
 Portland
 Sue Walker
 772-0597

Lt. Gametroy

Here are the plans you requested for
33 Florence for my change of
use application. I took the
original plans and changed them
to show what actually got done.

Thanks. call with any questions

Sue Walker

3 772-0597.

0404
 Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25.00 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan Walker Phone # 772-0597
 Address: 33 Florence St., Portland, Maine 04103
 LOCATION OF CONSTRUCTION 33 Florence St.
 Contractor: _____ Sub. _____
 Address: _____ Phone # _____
 Est Construction Cost: _____ Proposed Use: 2 Apts -1 inc. office
 _____ Past Use: 2 apts.
 # 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 Change of use from 2 apts. to 2 apts-1 with office
no renovations.

For Official Use Only PERMIT ISSUED
 Date April 6, 1990 Subdivision: _____ Name _____
 Inside Fire Limits _____ Lot MAY 21 1990
 Bldg Code _____ Ownership: _____ Public _____
 Time Limit _____ Estimated Cost _____
 Zoning: R-5 Residence
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required: Home Occupation 14-410
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Site Plan _____ Subdivision _____
 Conditional Use: _____ Variance _____
 Shereiland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) OK WDA 5-17-90

Foundations:
 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.
 6. 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 Received By Latini

Signature of Applicant Susan Walker Date 4/6/90

Signature of City Engineer [Signature] Date 5-14-90

Inspection Date: _____

White-Tax Assessor Yellow-GPCOG

White Tag -CEO [4] MR. Leahy Copyright GPCOG 1988

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 33 Florence St.

PROPERTY OWNERS NAME

Last: Walker First: M

Applicant Name: Mr. Miles Jr

Mailing Address of Owner/Applicant (if Different): P.O. Box 213 Yorktown Me 01086

PORTLAND PERMIT # 3,588 TOWN COPY

Date Permit Issued: 128 12 18 71 \$ 1217.00 Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 11213

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: [Signature] Date: 8/16/89

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: OCT 1 1989

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p>Type Of Structure To Be Served:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p>Plumbing To Be Installed By:</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>015123</u></p>
---	--	---

Column 1 Type of Fixture	Number	Column 2 Type of Fixture	Number
Bathtub (and Shower)	2	Hosebibb / Sillcock	
Shower (Separate)		Floor Drain	
Sink	1	Urinal	
Wash Basin	2	Drinking Fountain	
Water Closet (Toilet)	2	Indirect Waste	
Clothes Washer	1	Water Treatment Softener, Filter, etc.	
Dish Washer		Grease/Oil Separator	
Garbage Disposal		Roof Cuspidor	
Laundry Tub	1	Bidet	
Water Heater		Other: _____	
Fixtures (Subtotal) Column 1	9	Fixtures (Subtotal) Column 2	
Fixtures (Subtotal) Column 2			
Fixture Fee	\$27.00		
Hook-Up & Relocation Fee	\$		
Permit Fee (Total)	\$27.00		

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

002038

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

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

Owner: Susan Walker

Address: 33 Florence St., Portland

LOCATION OF CONSTRUCTION 33 Florence St.

CONTRACTOR: Lawrence Eubank SUBCONTRACTORS: 772-3220

ADDRESS: 112 Salem St., XXXX 04102

Est. Construction Cost: \$90,000 Type of Use: ? family

Past Use: _____

Building Dimensions L _____ W _____ sq. Ft. _____ # Stories _____ Lot Size _____

Is Proposed Use _____ Seasonal _____ Condominium _____ Apartment _____ (expanding Roof)

Conversion - Explain % demolish garage (2 car), construct addition

and adding 2 stories,

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE interior renovations.

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____ 1 set of plans submitted.

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ R _____ 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.
6. 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 _____

For Official Use Only

Date: <u>May 18, 1989</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>\$90,000</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee: <u>\$470.00</u>	

Ceiling:

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

PERMIT ISSUED

MAY 19 1989

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

City Of Portland

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: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Zoning:

District: R-5 Street Frontage Req.: _____ Provided _____

Required Setbacks: Front _____ Back _____ 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: 5-17-89 sec 19-436

Permit Required By

Nancy Grossman

PERMIT ISSUED WITH LETTER

Inspection Dates _____

White-Tax Assessor _____ Yellow-GPCOG _____ White Tag-CE9 _____

© Copyright GPCOG 1987

9/19/89
M. M. Rowe

PLOT PLAN

N
↑

FEES (Breakdown From Front)		Type	Inspection Record	Date
Base Fee \$25.00	_____	_____	_____	____/____/____
Subdivision Fee \$	_____	_____	_____	____/____/____
Plan Review Fee \$	_____	_____	_____	____/____/____
Other Fees \$ 445.00	_____	_____	_____	____/____/____
(Explain)	_____	_____	_____	____/____/____
Late Fee \$	_____	_____	_____	____/____/____

COMMENTS

2/13/00

Done without inspection

AT

Signature of Applicant

[Signature] AS AGENT FOR OWNER

Date

5/10/09



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

May 19, 1989

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Mr. Lawrence Eubank
112 Salem Street
Portland, Maine 04102

Re: 33 Florence Street, Portland, Maine

Dear Sir:

Your application to demolish garage and to construct a two story addition has been reviewed and a permit is herewith issued subject to the following requirements:

- 1.) Please read and implement items 1,6,7 and 9 of the attached Building Permit Report.
- 2.) The proposed addition must be on a minimum of a 8" frost wall.
- 3.) This permit does not authorize any additional dwelling units.
- 4.) If you plan to operate a photo studio from this location a home occupancy permit must be obtained.

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

Sincerely,

P. Samuel Hoffses / pg

P. Samuel Hoffses
Chief, Inspection Services

cc: W. Giroux, Zoning

BUILDING PERMIT REPORT

ADDRESS: 33 Florence ST. DATE: 19/may/89

REASON FOR PERMIT: demolish garage construct addition (2 stories)

BUILDING OWNER: Susan Walker

CONTRACTOR: Lawrence Subank

PERMIT APPLICANT: Contractor for owner

APPROVED: *1 *6 *7 *9 DENIED: _____

CONDITION OF APPROVAL OR DENIAL:

- * 1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.
- 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 placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.
- * 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 (0.53m²). 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.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of sleeping area in buildings of Use Groups R-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

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 fire-resistance 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 6 inches cannot pass through any opening.

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."

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.

Sincerely,


Samuel Hoff
Chief of Inspection Services

/el
11/16/88

000000
PERMIT # _____ **CITY OF** Portland **BUILDING PERMIT APPLICATION**

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

Owner: Susin Walker
Address: 33 Florence St., Portland
LOCATION OF CONSTRUCTION: 33 Florence St.
CONTRACTOR: Lawrence Eubank **SUBCONTRACTORS:** 772-3220
ADDRESS: 112 Salem St., XXXX 04102

Est. Construction Cost: \$90,000 **Type of Use:** 2 family

Past Use: _____
Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size: _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain: To demolish garage (2 car), construct addition and adding 2 stories, interior renovations.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
Residential Buildings Only: _____
 # Of Dwelling Units _____ # Of New Dwelling Units _____
1 set of plans submitted.

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: _____
 5. Bridging Type: _____ Size: _____ Spacing 16" O.C.
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

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

MAP # _____ **LOT #** _____

For Official Use Only

Date: May 18, 1989 Subdivision: Yes / No _____
 Inside Fire Limits _____ Name _____
 Bid Code _____ Lot _____
 Time Limit _____ Block _____
 Estimated Cost: \$90,000 Permit Expiration: _____
 Value/Structure _____ Ownership: _____ Public: _____
 Fee: AR: \$470.00

Ceiling:
 1. Ceiling Joist Size: _____ **PERMIT ISSUED**
 2. Ceiling Stud Size _____ Spacing _____
 3. Type Ceiling: _____
 4. Insulation Type: _____ MAY 19 1989
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____ **City of Portland**
 2. Sheathing Type _____
 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 _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____
 Other (Explain): _____ Special Exception _____
 Date Approved: _____

Permit Received By Nancy Grossman

Signature of Applicant [Signature] Date 5/12/89

Signature of CEO _____ Date _____

Inspection Dates (9) AR



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date August 25, 1989
 Receipt and Permit number 000662

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 WORK: 33 Florence St.
 OWNER'S NAME: Sue Walker ADDRESS: same

	FEES
OUTLETS: Receptacles <u>70</u> Switches <u>20</u> Plugmold _____ ft. TOTAL <u>90</u>	8.00
FIXTURES: (number of) Incandescent <u>20</u> Fluorescent <u>5</u> (not strip) TOTAL <u>25</u>	4.50
Strip Fluorescent _____ ft.	_____
SERVICES: Overhead <input checked="" type="checkbox"/> Underground _____ Temporary _____ TOTAL amperes <u>200</u> ..	3.00
MISCELLANEOUS: (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 _____	_____
Cook Tops _____	_____
Wall Ovens _____	_____
Dryers <u>1</u> _____	_____
Fans <u>2</u> _____	_____
Water Heaters <u>1</u> _____	_____
Disposals <u>1</u> _____	_____
Dishwashers <u>1</u> _____	_____
Compactors _____	_____
Others (denote) _____	_____
TOTAL <u>6</u>	9.00
MISCELLANEOUS: (number of)	_____
Branch Panels <u>1</u> (100 amp.)	1.00
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, Fair, 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: <u>25.50</u>

INSPECTION:
 Will be ready on Aug 25, 1989 or Will Call _____
 CONTRACTOR'S NAME: John Perry Elec.
 ADDRESS: 381 Danforth St., Portland, ME 04102
 TEL: 773-5824
 MASTER LICENSE NO.: 3695 SIGNATURE OF CONTRACTOR: _____
 LIMITED LICENSE NO.: _____

Permit # 912666 City of Portland off Pleasant Ave BUILDING PERMIT APPLICATION Fee 375 Zone _____ Map # _____ Lot # 3
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Susan Walker Phone # 772-0597
 Address: 33 Florence St; Pct 14, NE 04103
 LOCATION OF CONSTRUCTION 33 Florence St.
 Contractor: Mad Cleary Sub: _____
 Address: Pct 14, NE Phone # _____
 Est. Construction Cost: _____ Proposed Use: 2-fam w platform
 Past Use: 2-fam
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: construct platform - 4'x12'

PERMIT ISSUED
JUN - 7 1991
CITY OF PORTLAND

For Official Use Only
 Date: 5/30/91
 Inside Fire Limits _____
 Blgd Code _____
 Time Limit _____
 Estimated Cost: 370
 Subdivision _____
 Ownership _____

Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Rack _____ 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) _____

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 _____ Not in District nor Landmark
 3. Type Ceiling: _____ Does not require review
 4. Insulation Type _____ Size _____ Requires Review
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____ Spacing _____ Action _____ Approved _____
 2. Sheathing Type _____ Size _____ Approved with Condition _____
 3. Roof Covering Type _____

Chimneys:
 Type: _____ Number of Fire Places _____ Date: 5/30/91

Heating:
 Type of Heat: _____

Electrical:
 Entrance Size: _____ Smoke Detector Required Yes _____ No _____
 PI _____
 of soil test if required Yes _____ No _____
 ubs 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 F. Chase
 Signature of Applicant Susan Walker Date 5/30/91
 Signature of CEO Susan Walker Date _____
 Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ ~~25~~ 25
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Inspection Record	Date
_____	_____
_____	_____
_____	_____
_____	_____

COMMENTS

Deck is up per plan 8/8/91 mch

Signature of Applicant Suzanne Walker

Date 5/30/91