



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTION SERVICES
ELECTRICAL INSTALLATIONS

Date: March 28, 1963
 Receipt and Plan Number: 2249

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: 607 Brighton Avenue
 OWNER'S NAME: Loote & Kiene ADDRESS: same

OUTLETS: _____ FEES
 Receptacles _____ Switches: x 1 Plugmold _____ ft. TOTAL _____ 3.00

FIXTURES: (number of) _____
 Incandescent _____ Fluorescent _____ (not strip) TOTAL _____
 Strip Fluorescent _____ ft. _____

SERVICES: _____
 Overhead x Underground _____ Temporary _____ TO: _____ amperes 60 to 100 3.00

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 unit) _____
 Electric Under 30 kws _____ Over 2) kws _____

APPLIANCES: (number of) _____
 Ranges _____ Water Heaters _____
 Cool. Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Compactors _____
 Fans _____ Others (denote) _____

MISCELLANEOUS: (number of) _____

Panel 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, 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: 2.00

INSPECTION:
 Will be ready on 3/29, 1963: or Will Call _____
 CONTRACTOR'S NAME: T.A. Napolitano
 ADDRESS: 51 Lawrence Lane Str. So. Portland 04106
 TEL: 799-0538
 MASTER LICENSE NO. 7763 SIGNATURE OF CONTRACTOR: T.A. Napolitano
 LIMITED LICENSE NO. _____

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

ELECTRICAL INSTALLATIONS -

INSPECTIONS: Service 1st time by R. P. ...
Service called in 3/25/71
Closing in _____ by _____

PROGRAMMER'S INSPECTIONS:

Permit Number 274971
Location St. Louis, Mo.
Owner ...
Date of Permit 3/24/71
Final Inspection ...
By Inspector ...
Permit Application Register Page No. 28

DATE

REMARKS

COMPLETED
DATE 3/25/71

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25.00 Zone _____ Map # _____ Lot # _____

Owner: Caroline D'Alfonso Phone # 72-1685

Address: 128 Hill Ave. Portland, Maine 04102

LOCATION OF CONSTRUCTION Small Lighter Avenue

Contractor: _____ Sub: _____

Address: _____ Phone # _____

Est. Construction Co. t: _____ Proposed Use: Nail salon

Fast Use: Vacant

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 Nail salon was vacant space

no conversions

1. Type of Soil: _____

2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____

4. Foundation Size: _____

5. Other _____

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: _____

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 _____

1. Studding Size _____ Spacing _____

2. Header Sizes _____ Span(s) _____

3. Wall Covering Type _____

4. Fire Wall if required _____

5. Other Materials _____

For Official Use **PERMIT ISSUED**

Date March 11, 1990 Subdivision _____

Inside Fire Limits _____ Name _____

Bldg Code _____ Lot MAY 27 1990

Time Limit _____ Ownership _____ Public _____

Estimated Cost _____

City Of Portland

Zoning: R-P

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ 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 with 3-26-90

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 _____

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 Caroline D'Alfonso Date 3/12/90

Signature of CEO _____ Date 3-26-90

Inspection Dates _____

0921 51 1024H

White-Tax Assessor

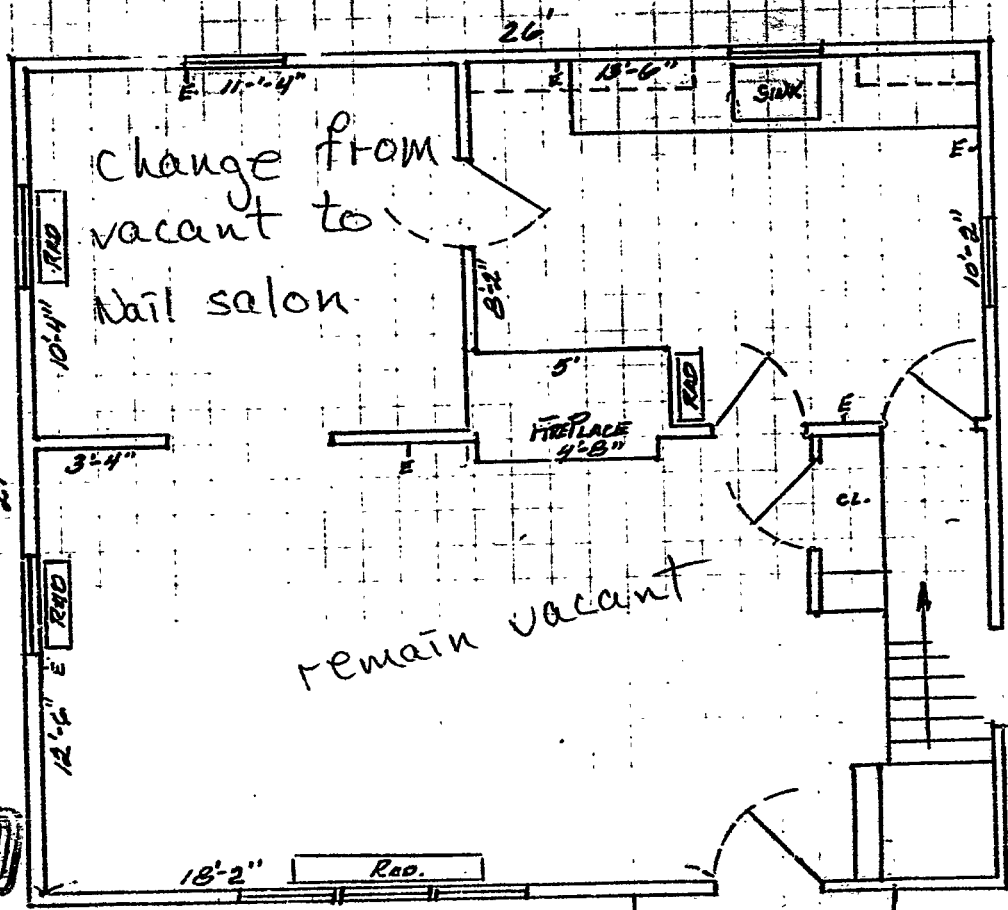
Yellow-GPCOG

White Tag - CEO

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Ms. Latini

607 Brighton Ave

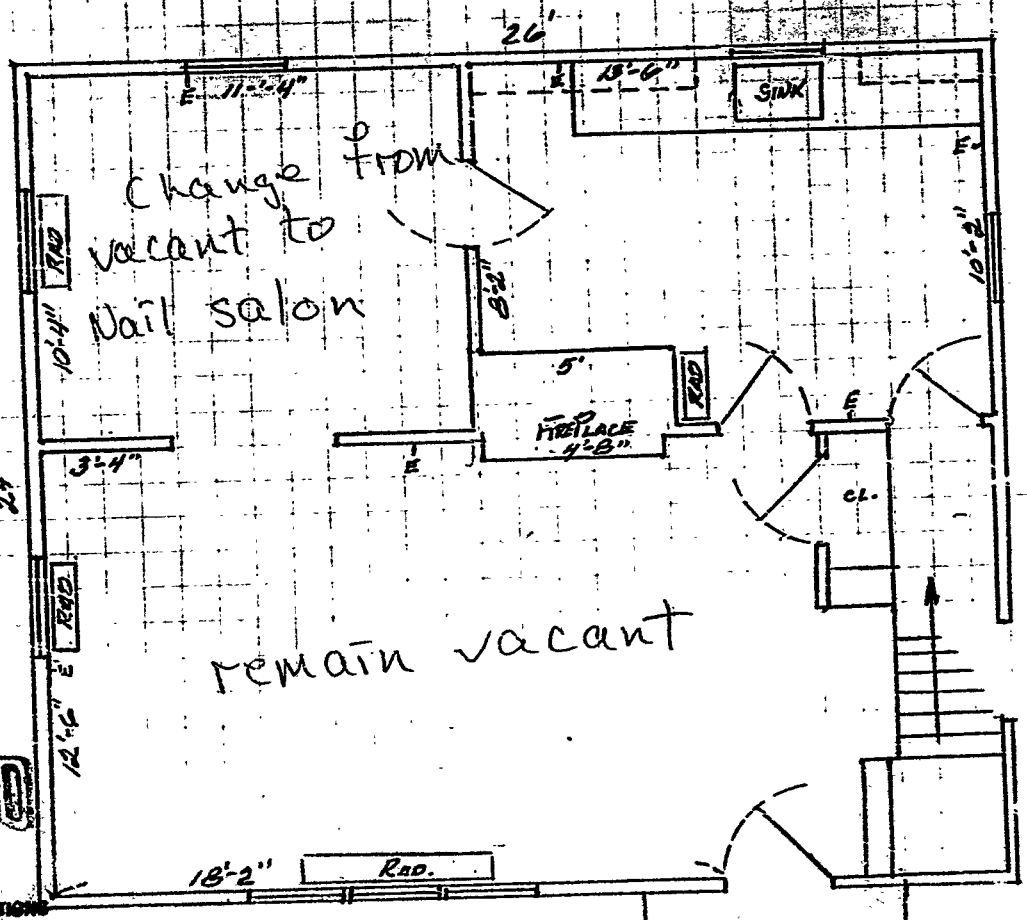


RECEIVED

MAF 1 2 1990

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

607 Brighton Ave



RECEIVED

MAR 12 1990

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND

Permit # 171 City of Portland BUILDING PERMIT APPLICATION Fee \$25.40 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form. 77A-318

Owner: C. Botto and Keine Assoc. Phone # 772-2741
 Address: 607 Brighton Ave., City 04102
 LOCATION OF CONSTRUCTION 607 Brighton Avenue - The Nail Touch
 Applicant: Caroline D'Alfonso
 Address: 607 Brighton Ave. Phone # 772-1685-Home
 Est. Construction Cost: _____ Proposed Use: Crane - 2741 - 3
 Past Use: same
 # 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 To erect 2'x1' sign in window (cardboard).

For Official Use Only

Date March 14, 1990 Subdivision: _____
 Inside Fire Limits _____ Name _____
 Bldg Code _____ Lot _____
 Time Limit _____ Ownership: _____ Public _____ Private _____
 Estimated Cost _____

Zoning: _____
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ 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 Excavation _____
 Other (Explain) OK WIND 3-15-90

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: _____

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 Joyce M. Rinaldi
 Signature of Applicant Caroline D'Alfonso Date 3-14-90
 Signature of CEO _____ Date _____
 Inspection Dates _____

PLOT PLAN



N



FEES (Breakdown From Front)

Base Fee \$ 25.40 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

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

COMMENTS

Signature of Applicant Caroline A. D'Alfonso

Date 3-14-90

607 Brighton Ave

The Nail Touch



CAROLINE D'ALFONSO
NAIL TECHNICIAN

607 Brighton Ave Portland, ME 04102 772-2741

— 2' —

RECEIVED

MAR 14 1990

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

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: Caroline D'Alfonso Phone # 772-1685

Address: 128 Holm Ave. Portland, Maine 04102

LOCATION OF CONSTRUCTION 60 Brighton Avenue

Contractor: _____ Sub: _____

Address: _____ Phone # _____

Est. Construction Cost: _____ Proposed Use: Nail salon

_____ Past Use: Vacant

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 Nail salon was vacant space

no renovations

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 _____

For Official Use On PERMIT ISSUES

Date March 12, 1990 Subdivision: _____
 Name: _____
 Inside Fire Limits _____
 Bldg Code: _____
 Time Limit: _____
 Estimated Cost: _____

City of Portland
 Public
 City Of Portland

Zoning: R-P
 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 WO 1-7 3-26-90

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: Caroline D'Alfonso Date 3/12/90

Signature of CEO: Caroline D'Alfonso Date 3-28-90

Inspection Dates _____

Permit # 171 City of Portland **BUILDING PERMIT APPLICATION** Fee \$25.40 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form. 774-3798

Owner: Botto and Keine Assoc. Phone # 772-2168-Office
772-2741-Home
 Address: 607 Brighton Ave., City 04102
 LOCATION OF CONSTRUCTION: 637 Brighton Avenue - The Nail Touch
 Lease to: Caroline D'Alfonso Sub 04102
 Address: 607 Brighton Avenue, City Phone # 772-1685-Home
 Est. Construction Cost: _____ Proposed Use: Commercial - B
 Past Use: same
 # 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: To erect 2'x1' sign in window (cardboard)

For Official Use Only	
Date: <u>March 14, 1990</u>	Name: _____
Inside Fire Limits: _____	Lot: _____
Blot Code: _____	Ownership: _____ Public _____ Private _____
Time Limit: _____	Estimated Cost: _____
Zoning: <u>R-1</u>	Street Frontage Provided: _____
Review Required:	Provided Setbacks: Front _____ Back _____ Side _____
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): <u>OK ON 3-15-90</u>

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

Floors:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing _____ Size: _____
 4. Joists Size: _____ Spacing: _____
 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 Ceiling: _____
 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: Joyce M. Rinaldi

Signature of Applicant: Caroline D'Alfonso Date: 3-14-90

Signature of CEO: _____ Date: _____

Inspection Dates: _____