

THE HUSSEY MANUFACTURING COMPANY

IRONWORKERS SINCE EIGHTEEN THIRTY-FIVE

STRUCTURAL STEEL AND ORNAMENTAL IRON

PHONE 39-2 • NORTH BERWICK, ME.

November 7, 1936

Price with ingenuity

Mr. Warren McDonald,
Building Inspector,
City Hall,
Portland, Maine

Dear Mr. McDonald:

Herewith we are sending you the prints of our drawing Number 2292 showing proposed additions to the fire escape on the Eunice Frye Home, Capiac Street, in Portland.

Please look this over and see if these two feet wide stairways, one at each end of the building from the wooden balcony over the doorway down to eight feet from the ground and the usual drop ladder meets approval of your Department.

If you find them in proper order we will be pleased to have notification from you and then will take it up with the owners as they wish us to install this type of equipment. Then of course if we do have instructions to install it, will naturally apply for permit in the usual manner.

Sincerely yours,

THE HUSSEY MFG. COMPANY

[Signature]
P. W. Hussey, Gen. Mgr.

PWH/11

What do you say?

RECEIVED
NOV 9 1936
DEPT. OF BLDG. L.S.P.
CITY OF PORTLAND

11/13/36
LeRoy Lamborn
Sup "OK"
11/14/36

CITY OF PORTLAND, MAINE
ELEVATOR INSPECTION

Bldg. No. 2-29 Block I Shee. 1 of 1

Location of Bldg. 15 CARLISLE ST

Owner EUNICE FRYE HOME

Occupant EUNICE FRYE HOME

Inspection by A. KEITH Date 2-26-34

Formal Complaint No. _____ Date _____

Letter sent without complaint _____

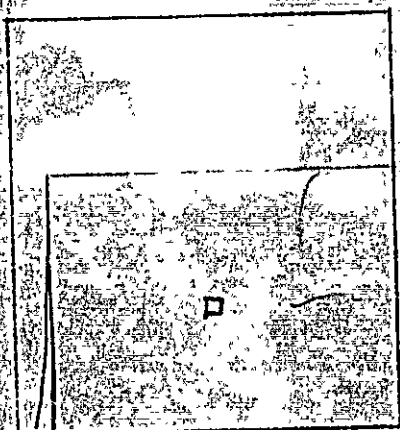
Building Data

Mat'l outside walls BRICK Int. Frame STEEL

No. stories 4 Style of Roof PITCH

No. elev. in bldg. Passenger — Freight 1

Location of Elevator on Street Floor
Shown Below



CARLISLE St. Ave.

This report for 1 identical elevators

lev. Man'l'r HORN (check

of elev. Pass — Frt. ✓ Comb'n. — which)

at tops 4 Bent. 1, 2, 3, 4, 5, 7, 8, 9, 10, 11, 12

Shaftway

Doors Hatch doors Auto. — Non-Auto —

Auto. — Semi-Auto. — Hand ✓

Mat'l of enclosure WOOD

Doors Normally closed — open —

Are enclosure doors interlocked? —

Height of enclosure full story ✓ what ht. —

Elevator Machinery

Type of Power ELEC.

Type of Machine DELT-DRIVEN COUNTERSHAFT

Location of Machine 4TH FLOOR

Material of Supports WOOD of Guides WOOD

Material of cables STEEL

No. cables hoisting 2 counterweight —

Type of brakes MECHANICAL

Has elev. following safeties: Governor —

Car Safety ✓; Elect. Brakes —; Auto. Ter-

minal Stops top & bottom ✓; Slack Cable

Stops ✓; Safety Floor Stops ✓

Remarks: (note defects, if any) _____

Elevator Car

Platform Dimensions 9'x4' Capacity —

Mat'l. of Encl. STEEL No. sides encl. 2

Height of enclosure ✓ No. entrances 1

Type of gates or doors HAND

Are they interlocked? —

Have they auto-closing devices? —

Type operation, Push-Button — Operator HAND

Any emergency exit? ✓

Remarks: (note defects, if any) _____

General Remarks:



Application for Permit for Alterations and Miscellaneous Structures

are responsible for complying with the requirements of the 1st CLASS OF BUILDING OR TYPE OF STRUCTURE under the provisions of the 1st know the requirements or not.

26/499

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE
READ! Portland, Maine, May 27, 1926 19

The undersigned hereby applies for a permit to alter the following described building according to the following specifications, the Laws of the State of Maine, and the Building Ordinance of the City of Portland:

Location 27-17 1/2 Capisic Street May Provo Ward 1 Within Fire Limits? no

Owner's name and address? Emice F. F. Home, 15 Capisic Street

Contractor's name and address? Blackstone & Smith, 714 Fidelity Bldg

Architect's name and address? _____

Last use of building? "Home" No. Families? _____

Proposed use of building? "Home" No. Families? _____

Description of Present Building

Material brick No. of Stories 2 1/2 Style of Roof pitch Roofing slate

General Description of New Work

Build piazza on first floor 16x16 with glassed in sun parlor on second floor

NOTIFICATION
before
LATHING OR CLOSING IN
is
WAIVED

Size of New Framing Members

Corner posts? _____ Sills? _____ Rafters or roof beams? _____ on center? _____

Material and size of columns under girders? _____ on center? _____

Ledger board used? _____ Size? _____ Studs (outside walls and carrying partitions) 2 x 4 16' O. C.

Girders 6" x 8" or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts will be all one piece in cross section.

Floor timbers: 1st floor _____, 2nd _____, 3rd _____, 4th _____

On centers: 1st floor _____, 2nd _____, 3rd _____, 4th _____

Span: 1st floor _____, 2nd _____, 3rd _____, 4th _____

If 1st or 2nd Class Construction

External walls } thickness { 1st story _____, 2nd story _____

Party walls } thickness { 1st story _____, 2nd story _____

Other Details New Construction

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

Material of foundation? brick piers Thickness, top? _____ bottom? _____

Material of underpinning? _____ over 4 ft. high? _____ thickness? _____

Kind of roof (pitch, hip, etc.)? flat Kind of roofing? t & G

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

If a Private Garage

No. cars now accommodated on lot? _____ Total number to be accommodated? _____

Other buildings on same lot? _____

Distance from nearest present building to proposed garage? _____

All parts of garage, including eaves, will be at least 2 ft. from lot lines.

Garage will be at least _____ feet from nearest windows of adjoining property.

Miscellaneous

Will the above construction require the removal or disturbing of any shade tree on the public street? no

Plans filed as part of this application? _____ No. sheets? _____

Estimated total cost \$ 4,000. Fee? 2.00

Signature of owner or authorized representative? [Signature]

PERMIT TO INSTALL PLUMBING

Address: **37 Capitan St.** PERMIT NUMBER **3482**

Installation For: **Nursing Home**

Owner of Bldg: **Eunice Frye Home**

Owner's Address: **same**

Plumber: **The Blake Co./W. Franklin Blake - 12-10-73**

Date Issued: **December 10, 1973**

Portland Plumbing Inspector

By: **ERNOLD R. GOODWIN**

App. First Insp.

Date

By

Date

By

Type of Bldg:

- Commercial
- Residential
- Single
- Multi Family
- New Construction
- Remodeling

ERNOLD R. GOODWIN
 PORTLAND PLUMBING INSPECTOR

NEW	REPL		NO.	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
	1	HOT WATER TANKS elec	1	2.00
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEAKERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		Base Fee		3.00

TOTAL 1 5.00

Building and Inspection Services Dept.; Plumbing Inspection

APPLICATION FOR PERMIT

PERMIT ISSUED
FEB 1 1984

B.O.C.A. USE GROUP
B.O.C.A. TYPE OF CONSTRUCTION 0083
ZONING LOCATION PORTLAND, MAINE Jan. 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 37 Capisic Street Fire District #1 #2
1. Owner's name and address Bunice Frye Home - same Telephone 772-0093
2. Lessee's name and address
3. Contractor's name and address Maine Gas & Appliances Co., Inc. P.O. Box 1090, Portland, ME 04103 Telephone 892-6746
Proposed use of building Rest Home No. of sheets
Last use same No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$
FIELD INSPECTOR—Mr. @ 775-5451
Appeal Fees \$
Base Fe.
Late Fee
TOTAL \$ 15.00

To install above ground 100 gal. propane tank, as per plan. Will set on cement blocks.

Stamp of Special Conditions

ISSUE PERMIT TO P.O. BOX #3

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.:
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 Phone #
Type Name of above Joseph H. Johnson, Jr. for 1 2 3 4
Maine Gas
Other
and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

LP GAS INSTALLATION FOR:
EUNICE FRYE HOME
37 - CAPISIC STREET
PORTLAND, ME.
772-0093

OWNER:

MAINE GAS + APPLIANCES CO INC
P.O. BOX 1040 36 BROGTON RD. NO. WINDHAM, ME.
04062
892-6746

PARKING LOT

REAR ENTRANCE

LOCATION OF 100 GAL
LP GAS TANK

EUNICE FRYE HOME

DRIVE WAY

CAPISIC STREET

RECEIVED
JAN 25 1984
DEPT OF BLDG INSP
CITY OF PORTLAND

RECEIVED
JAN 25 1984
DEPT OF BLDG INSP
CITY OF PORTLAND

APPLICATION FOR PERMIT

HERMIT ISSUED

B.O.C.A. USE GROUP
B.O.C.A. TYPE OF CONSTRUCTION 0083
ZONING LOCATION ... P-3 ... PORTLAND, MAINE Jan. 25, 1984.

FEB 1 1984

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 37. Capisic Street Fire District #1 [] #2 []
Telephone 772-0093

1. Owner's name and address Eunice Frye Home - same Telephone Box 1090, 892-6746

2. Lessee's name and address Telephone 772-0093

3. Contractor's name and address Maine Gas & Appliances Co., Inc. - P.O. Box 1090, 892-6746
36 Bridgton Rd., No. Wind, Me. 04062

Proposed use of building Best Home No. of sheets
Last use same No. families

Material No. stories Heat Style of roof Roofing

Other buildings on same lot Estimated contractual cost \$

FIELD INSPECTOR-Mr. @ 775-5451

Appeal Fees \$
Base Fee
Late Fee
TOTAL \$ 15.00

To install above ground 100 gal. propane tank, as per plan. Will set on cement blocks.

Stamp of Special Conditions

ISSUE PERMIT TO P.O. BOX #3

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

BUILDING INSPECTION-PLAN EXAMINER
ZONING:
BUILDING CODE:
Fire Dept.
Health Dept.
Other:

DATE

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? yes

Signature of Applicant Joseph H. Johnson, Jr. Phone #
Type Name of above Joseph H. Johnson, Jr. FOX 1 2 3 4
Maine Gas Other
and Address

Mrs. Carroll

NOTES

2/1/84 - Work not started yet.
4/4/84 - Tanks installed @
but "Snow Banked" Cannot
tell if safety road ready
yet - will check next time

Alterations *Chart ground tanks*

Permit No. 84/083

Location 37 - *Capricorn*

Owner *General Electric*

Date of permit 1 - 25/84

Approved 2 - 1/84

Dwelling

Garage

Alterations

Large grid area for drawing or notes, consisting of multiple horizontal and vertical lines forming a grid.

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION 0083

FEB 1 1984

ZONING LOCATION .. P-3 .. PORTLAND, MAINE Jan. 25, 1984..

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 37. Caplsic Street Fire District #1 [] #2 []
1. Owner's name and address Eunice Frye Home - same Telephone 772-0093
2. Lessee's name and address Telephone
3. Contractor's name and address Maine Gas & Appliances Co., Inc. - P.O. Box 1090, 36 Bridgton Rd., No. Wind., Me. 04062 Telephone 892-6746
Proposed use of building Rest Home No. of sheets
List use same No families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$
FIELD INSPECTOR - M @ 775-5451
Appeal Fees \$
Base Fee
Late Fee
TOTAL \$ 15.00

To install above ground 100 gal. propane tank, as per plan. Will set on cement blocks.

Stamp of Special Conditions

ISSUE PERMIT TO P.O. BOX #3

NOTE TO APPLICANT: Separate permits are required for the installers and subcontractors of heating, plumbing 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
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.: Other:

nature of Applicant Joseph H. Johnson, Jr. Phone #
Type Name of above Joseph H. Johnson, Jr. P.O. 1 [] 2 [] 3 [] 4 []
Maine Gas Other
and Address

923533

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$26.20 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accom. any form.

Owner: Eunice Frye Home Phone # _____
 Address: 37 Capisic St; Ptld, ME 04102
 LOCATION OF CONSTRUCTION 37 Capisic St.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: retirment home
 Past Use: retirement home
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Storics _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion Erect sign - 3'x2'

For Official Use Only

Date 4/1/92 Subdiv. _____
 Inside Fire Limits _____ Name APR 8
 Bldg. Code _____ Lot _____
 Title Limit _____ Owner _____
 Estimated Cost _____
 Zoning: R-3
 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 _____ Subdivision _____
 Shoreland Zoning Yes _____ Floodplain Yes _____ No _____
 Special Exception: _____
 Other (Explain) WDA - 4-6-92

Mail Permit: Mrs. John W. Clark
 Foundation: Town Farm Rd; Windham, ME 04062
 1. Typ. 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 T. _____ 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. _____ Wall if required _____
 5. Corner Materials _____

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____ **HISTORIC PRESERVATION**
 Type Ceiling: _____ **Not in District nor Landmark**
 3. Insulation Type _____ Size _____ **Does not require review**
 4. Ceiling Height: _____ **Requires Review**
 Roof:
 1. Truss or Rafter Size _____ Span Action: **Approved**
 2. Sheathing Type _____ Size _____ **Approved with Conditions**
 3. Roof Covering Type _____
 Chimneys:
 Type: _____ Number of Fire Places _____ Date: 4-1-92
 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 Tube 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 E. Chase
 Signature of Applicant Lilla A. Clarke Date April 1, 1992
 CEO's District _____

White - Tax Assessor

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

4 MR. CATHER

923533

Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$26.2 Zone _____ Map # _____ Lot # _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Fuice Frye Home Phone # _____
 Address: 37 Capisic St., Portland, ME 04102
 LOCATION OF CONSTRUCTION: 37 Capisic St.
 Contractor: _____ Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: retirement home
 Past Use: retirement home
 # 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: Erect sign - 3'x2'

Mail Permit: Mrs. John W. Clark
 Foundation: Town Farm Rd., Windham, ME 04062

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 _____

White - Tax Assessor

For Official Use Only

Date: 4/1/92 Subdivision Name: APR - 6 1992
 Inside Fire Limits _____
 Big Code _____
 Time Limit _____
 Estimated Cost _____
 Ownership: _____
 Zoning: R-3
 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): W.D.H. - 4-6-92

Ceiling: _____ **HISTORIC PRESERVATION**

1. Ceiling Joists Size: _____ Spacing _____ Not in District nor Landmark
 2. Ceiling Strapping Size _____ Spacing _____ Does not require review.
 3. Type Ceilings: _____ Requires Review.
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

- Roof:
 1. Truss or Rafter Size _____ Span _____ Action: Approved
 2. Sheathing Type _____ Size _____ Approved with Cond.
 3. Roof Covering Type _____

- Chimneys:
 Type: _____ Number of Fire Places: _____
 Date: _____

- 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 E. Chase

Signature of Applicant: Lilla A. Clarke Date: 4/1/92

CEO's District: _____

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO 4 M.A. Carroll

PLOT PLAN

N



FEES (Breakdown From Front)
 Base Fee \$ 26,20
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

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

COMMENTS

Work Complete - Never Called

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 has 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.

Lido P Clark
 SIGNATURE OF APPLICANT

ADDRESS

992-4544
 PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

Signage Work Order

INVOICE NO.

1484

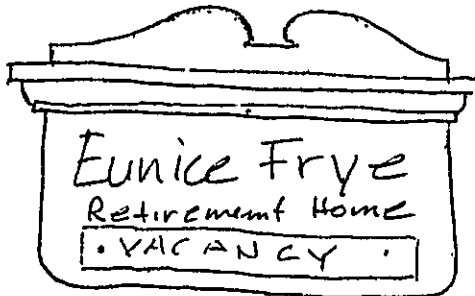
Name: Eunice FRYE Home
 Address: 37 Capisic St.
 City/State/Zip: _____
 Telephone: _____



Order date: _____ Estimated delivery date: 3-4 WKS.
 Size and type: _____
 Material: P.O.
 Colors: _____

Exact copy:

Code enforcement



20"

2 Sided sign 36"
 Ivory on Burgundy
 w/ Post & Scroll Brackett

RECEIVED

APR - 1 1992

DEPT. OF BUILDINGS & CONSTRUCTION
CITY OF PORTLAND

Cost: \$100.00
 Installation: 6.00 TAX
 Total: \$106.00
 Less deposit: 50.00
 Balance: 56.00

Approved: _____

Date: _____

Terms: *Balance due upon completion.*

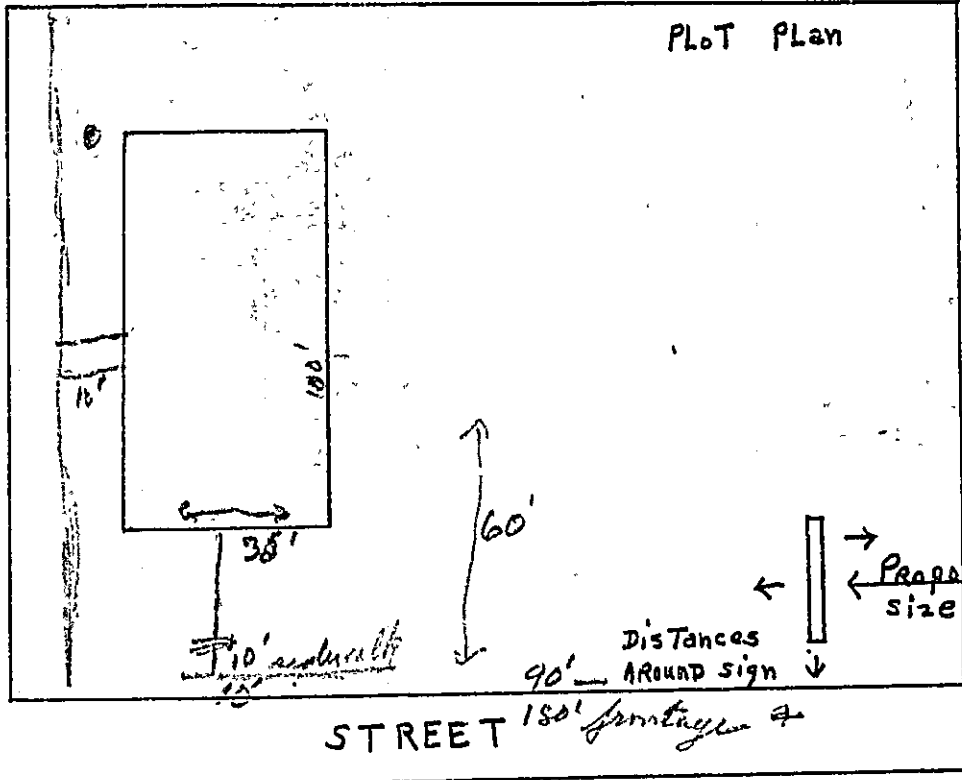
POLE SIGN

Bill Group
874-8300

Plot Plan

XT
8695

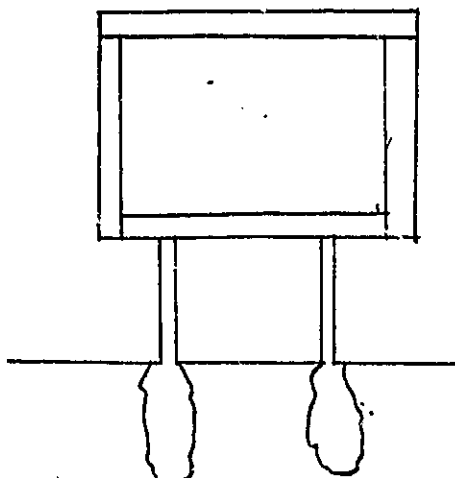
7-8 AM
1-2 PM



RECEIVED

APR - 1 1992

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND



- How constructed
- How supported
- Material of sign
- How many faces
- Size 36 x 20
- Lighted
- Foundation

Prindle Commercial Advertising
 STMPK Prindle Agency
 Fredrick

930865

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 55.00 Zone _____ Map # _____ Lot# _____

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

Owner: The Eunice Frye Home Phone # _____

Address: 37 Capisic St

LOCATION OF CONSTRUCTION 3 Capisic St

Contractor: E.G. Johnson Co. Sub: _____

Address: 3 Cliff St Portland, ME 04102 Phone # 773-1630

Est. Construction Cost: _____ Proposed Use: _____

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 ADA Ramp as per plans

194-B-005

Foundation:

1. Type of Soil: _____

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

3. Footings Size: _____

4. Foundation Size: _____

5. Other _____

Floor:

1. Sill's 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 _____ Spar(s) _____

5. Bracing: Yes _____ No _____

6. Corner Posts Size _____

7. Insulation Type _____ Size _____

8. Sheathing Type _____ Size _____

9. Siding Type _____ Weath. Exposure _____

10. Masonry Materials _____

11. Metal Vaters: _____

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 September 14, 1993 Subdivision _____

Inside F. Units _____ Name SFP-2-2-1990

Bldg Code _____ Lot _____

Time Limit _____ Ownership _____

Estimated Cost _____

Zoning: _____

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) W.D. 9-20-93

Celling: _____

1. Ceiling Joists Size: _____

2. Ceiling Strapping Size _____ Spring _____

3. Type Ceilings: _____

4. Insulation Type _____ Size _____ Required: row

5. Ceiling Height: _____

Roof: _____

1. Truss or Rafter Size _____ Span Action _____ Approved _____

2. Sheathing Type _____ Size _____ Approved with conditions _____

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 Pool: _____

1. Type: _____

2. Pool Size: _____ x _____ Square Footage _____

3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Grosik

Signature of Applicant Gary Johnson Date Sept 14, 1993

Signature of CEO _____ Date _____

Inspection Dates _____

#4 K. Carroll

White Tax Assessor Yellow-GF COG White Tag -CEO © Copyright, GPCOG 1988