

3-13 CASTINE AVENUE

SHAW-WALKER

MADE IN U.S.A. - 100% RECYCLED PAPER - 100% RECYCLED PAPER - 100% RECYCLED PAPER

PERMIT TO INSTALL PLUMBING

PERMIT NUMBER **2108**

Date Issued **7-10-80**
 Portland Plumbing Inspector
 By **ERNOLD R. GOODWIN**

Address **7 Castine Avenue**
 Installation For **one family**
 Owner of Bldg: **Pallegrine P. De Sarno**
 Owner's Address **same**
 Plumber: **Homeowner** Date: **7-10-80**

App. Final Insp. p.

Date **Jul 10 1980**
 By
 App. Final Insp. p.
ERNOLD R. GOODWIN
 CHIEF PLUMBING INSPECTOR

Date
 By

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

NEW	REPL		NO.	PRICE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
100		HOUSE SEWERS	1	3.00
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER	base fee	3.00
			TOTAL	6.00

Building and Inspection Services Dept.; Plumbing Inspection



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

PERMIT ISSUED
00793
JUL 10 1961
CITY of PORTLAND

Portland, Maine, July 10, 1961

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: 3-13 Castine Ave.	Use of Building: dwelling	No. Stories: 1 1/2	New Building Existing: Existing
Name and address of owner of appliance: Carl Hayden, 1761 Forest Ave.			
Installer's name and address: Dixon Bros., 230 Main St., Gorham, Me.		Telephone No: 4-2871	

General Description of Work

To install forced hot water heating system and oil burning equipment

IF HEATER, OR POWER BOILER

Location of appliance: basement Any burnable material in floor surface or beneath? no

If so, how protected? Kind of fuel? oil

Minimum distance to burnable material, from top of appliance or casing top of furnace: 3 1/2'

From top of smoke pipe: 3' From front of appliance: over 4' From sides or back of appliance: over 4'

Size of chimney flue: 8x8 Other connections to same flue: no

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?

IF OIL BURNER

Name and type of burner: Delco gun 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: cement 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:

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:
O.S. E.S.S. 7/10/61

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

Dixon Bros.

Signature of Installer BY: *Cleon M. Keenan*

CS 300

INSPECTION COPY

J. Mear

PERMIT NUMBER 10381

Date Issued 7/7/61

PORTLAND PLUMBING INSPECTOR

By J. P. Welch

APPROVED FIRST INSPECTION

Date 7-7-61

By *J. P. Welch*

APPROVED FINAL INSPECTION

Date 7-7-61

JOSEPH P. WELCH

By

- TYPE OF BUILDING
- COMMERCIAL
 - RESIDENTIAL
 - SINGLE
 - MULTI FAMILY
 - NEW CONSTRUCTION
 - REMODELING

PERMIT TO INSTALL PLUMBING

Address: 3-12 ~~Castine Avenue~~

Installation For: Carl Hayden

Owner of Bldg.: Carl Hayden

Owner's Address: 1761 Forest Avenue

Plumber: W. H. Wallace

Date: 7/7/61

NEW	REPL	PROPOSED INSTALLATIONS	NUMBER	FEE
1		SINKS	1	2.00
1		LAVATORIES	1	2.00
1		TOILETS	1	2.00
1		BATH TUBS	1	2.00
		SHOWERS		
		DRAINS		
		HOT WATER TANKS		
1		TANKLESS WATER HEATERS	1	2.00
		GARBAGE GRINDERS		
1		SEPTIC TANKS	1	.60
		HOUSE SEWERS		
		ROOF LEADERS (conn. to house drain)		
1		Washing Machine	1	.60
			Total	\$11.20

SH 12 53

PORTLAND HEALTH DEPT.

PLUMBING INSPECTION



R3 RESIDENCE ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure... Third Class...
Portland, Maine, April 18, 1961

PERMIT ISSUED
00391
APR 26 1961
OFFICE OF BUILDING DEPT

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

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

Location: 3-13 Castine Avenue Within Fire Limits? _____ Dist. No. _____

Owner's name and address Carl Hayden, 1761 Forest Ave. Telephone _____

Lessee's name and address _____ Telephone _____

Contractor's name and address owner Telephone _____

Architect _____ Telephone _____

Proposed use of building _____ Specifications _____ Plans yes No. of sheets 2

Last use _____ Dwelling _____ No. families _____

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

Other building on same lot _____ Roofing _____

Estimated cost \$ 10,000 Fee \$ 10.00

General Description of New Work

To construct 1½ Story frame dwelling 24'x40'

Permit Issued with Memo

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** owner

Details of New Work

Is any plumbing involved in this work? yes Is any electrical work involved in this work? yes

Is connection to be made to public sewer? _____ If not, what is proposed for sewage? septic tank

Has septic tank notice been sent? yes Form notice sent? yes

Height average grade to top of plate 12 10' Height average grade to highest point of roof 17'

Size, front 40' depth 24' No. stories 1½ solid or filled land? solid earth or rock? earth

Material of foundation concrete at least 4' below grade Thickness, top 10" bottom 10" cellar yes

Material of underpinning " to sill Height _____ Thickness _____

Kind of roof pitch Rise per foot 7" Roof covering asphalt roofing Class G Und. Lab. _____

No. of chimneys 1 Material of chimneys brick of lining tile Kind of heat h.w. fuel oil

Framing Lumber—Kind hemlock Dressed or full size? dressed Corner posts 4x6 Sills 2x8 box

Size Girder 6x10 Columns under girders lally Size 3½" Max. on centers 8'

Kind and thickness of outside sheathing of exterior walls? _____

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 2x8 2nd 2x8 3rd _____ roof 2x6

On centers: 1st floor 16" 2nd 16" 3rd _____ roof 24"

Maximum span: 1st floor 12' 2nd 12' 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? _____

APPROVED:
M. E. He. W. / memo

Miscellaneous

Will work require disturbing of any tree on a public street? no

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

INSPECTION COPY

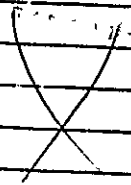
Signature of owner ...

PH

NOTES

5-18/61 - Framing made. E.S.D.
 7/18/61 - To double floor timber sub of chimney. Finity chom. + soil stack. To strengthen one cut timber.
 Left B.T. to clear in. E.S.D.

10/3/61 - Work done, cert. to be issued. S.H.



10/11/61

5-44-21

Permit No. 61/391

Location Patrick Lawrence

Owner Paul Stephen

Date of permit 4/26/61

Notif. closing-in 7/18/61

Insps. closing-in 7/18/61

Final Insp. Requirement 7/11/61

Final Insp. 10/4/61

Cert. of Occupancy issued 10/5/61

Staking Out Notice

Form Check Notice

(COPY)



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 3-13 Cantino Avenue

Issued to Carl Hayden

Date of Issue October 5, 1961

This is to certify that the building, premises, or part thereof, at the above location, built ~~and~~
~~under~~ under Building Permit No. 61/391, has had final inspection, has been found to conform
substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for
occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Entire

1-family dwelling

Limiting Conditions.

This certificate supersedes
certificate issued

Approved:

(Date)

Earle Smith
Inspector

Albert J. Sears
Inspector of Buildings

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

901852
 Permit # _____ City of Portland **BUILDING PERMIT APPLICATION** Fee \$25. Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Pellegrino DeSarno Phone # 797-4559
 Address: 7 Castine Ave ; Ptd, ME 04103
 LOCATION OF CONSTRUCTION 7 Castine Ave.
 Contractor: OWNER Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: \$250 Proposed Use: 1-fam w alter.
 Past Use: 1-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 porch overhang

For Official Use Only
 Date: 8/22/90 Subdivision: _____
 Inside Fire Limits _____ Name _____
 Blgd Code _____ Lot _____
 Time Limit _____ Ownership: _____ Public _____ Private _____
 Estimated Cost: 250
 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) OK WDA 9-5-90

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.
 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 _____ Span _____ Approved
 2. Sheathing Type _____ Size _____ Approved with Condition
 2. Roof Covering Type _____
Chimneys:
 Type: _____ Number of Fire Places _____ 8-2-90
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 Josephine DeSarno Date 8/22/90
 Signature of CEO Josephine DeSarno Date _____
 Inspection Dates _____

White-Tax Assessor Yellow-GPCOG White Tag-CEO

[4] Copyright GPCOG 1988
 MRS Keary

901852

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$25. Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Pellegrino DeSarno Phone # 797-4553
 Address: 7 Castine Ste. ; Dtd. 4F 04103
 LOCATION OF CONSTRUCTION 7 Castine Ave
 Contractor: OWLAR Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: \$250 Proposed Use: 1-ran + alter
 Past Use: 1-fa
 # 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 porch overhang

For Official Use		PERMIT ISSUED
Date	<u>3-22-90</u>	Subdivision
Inside Fire Limits	_____	Name
Bldg Code	_____	Lot
Time Limit	_____	Ownership
Estimated Cost	<u>250</u>	City of <u>Portland</u>
Zoning	<u>R-3</u>	Street Frontage Provided: _____
Review Required:	_____	Provided Setbacks: Front _____ Back _____ Side _____
Zoning Board Approval	Yes _____ No _____ Date _____	Planning Board Approval
Conditional Use	Yes _____ No _____ Variance _____	Site Plan _____
Shoreland Zoning	Yes _____ No _____	Floodplain
Special Exception	Yes _____ No _____	Other (Explain)
	<u>no work</u>	<u>8-5-90</u>

Foundation:

- Type of Soil: _____
- Set Backs - Front _____ Rear _____ Side(s) _____
- Footings Size: _____
- Foundation Size: _____
- Other _____

Floor:

- Sills Size: _____ Sills must be anchored.
- Chimney Size: _____
- Lally Column Spacing: _____ Size: _____
- Joists Size: _____ Spacing 16" O.C.
- Bridging Type: _____ Size: _____
- Floor Sheathing Type: _____ Size: _____
- Other Material: _____

Exterior Walls:

- Studding Size _____ Spacing _____
- No. windows _____
- No. Doors _____
- Header Sizes _____ Span(s) _____
- Bracing: Yes _____ No _____
- Corner Posts Size _____
- Insulation Type _____ Size _____
- Sheathing Type _____ Size _____
- Siding Type _____ Weather Exposure _____
- Masonry Materials _____
- Metal Materials _____

Interior Walls:

- Studding Size _____ Spacing _____
- Header Sizes _____ Spans _____
- Wall Covering Type _____
- Fire Wall if required _____
- Other Materials _____

Ceiling:

- Ceiling Joists Size: _____
- Ceiling Strapping Size _____ Spacing _____
- Type Ceilings _____
- Insulation Type _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____
- Sheathing Type _____ Size _____
- Roof Covering Type _____

Chimneys:

- Type: _____ Number of Fire Places _____ 8/22/90

Heating:

- Type of Heat: _____

Electrical:

- Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

- Approval of soil test if required Yes _____ No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- No. of Other Fixtures _____

Swimming Pools:

- Type: _____
- Pool Size: _____ x _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant _____ Date _____

Signature of CEO Josephine DeSarno Date _____

Inspection Dates _____

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

© Copyright GPCOG 1988

141
 M.A. Leary

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 25
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

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

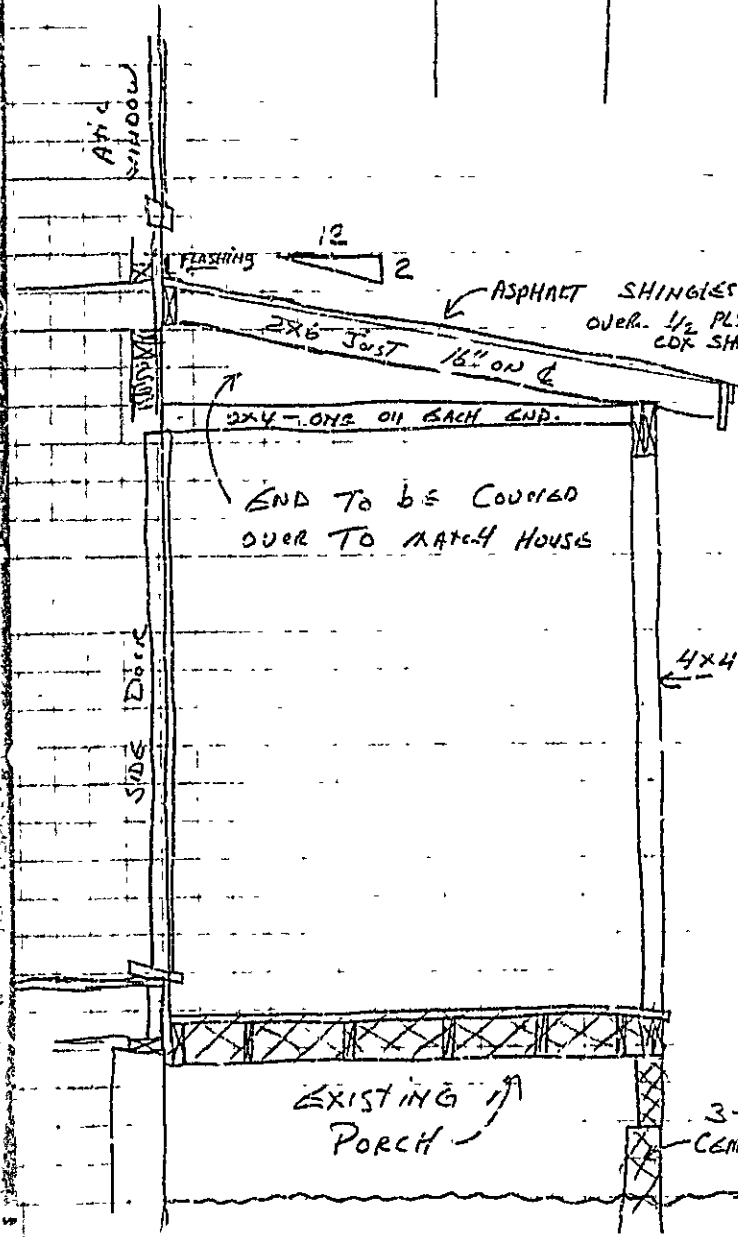
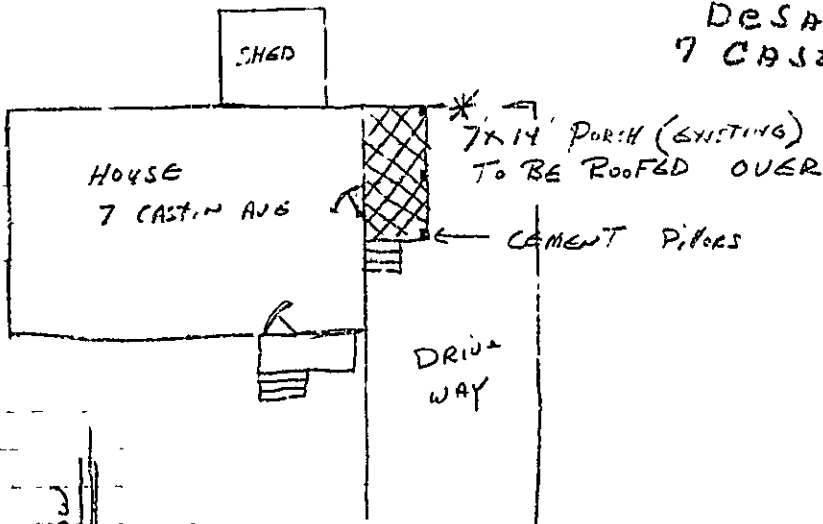
COMMENTS 9-10-90 zhuo all completed

Signature of Applicant J. De Jesus

Date 9/22/90

DESARNO
7 CASINE AVE

APPROX
COST.
\$250.00



- 3- 4x4 POST, 7 FT. APART TO SUPPORT ROOF - CENTERED OVER 3 CEMENT PILLARS
- ROOF TO OVERHANG PORCH BY APPROX ONE FOOT ON ALL SIDES
- HAND RAILINGS ON ALL EXTERIOR SIDES

END TO BE COVERED OVER TO MATCH HOUSE

4x4 POST

EXISTING PORCH

3-5 FOOT CEMENT PILLOR 4' DEEP

GROUND LEVEL